

## 96TH GENERAL ASSEMBLY State of Illinois 2009 and 2010 SB2601

Introduced 1/21/2010, by Sen. Donne E. Trotter

## SYNOPSIS AS INTRODUCED:

210 ILCS 45/2-213

Amends the Nursing Home Care Act. Provides that all persons seeking admission to a nursing facility shall be verbally screened for risk factors associated with hepatitis B, hepatitis C, and the Human Immunodeficiency Virus (HIV) according to guidelines established by the U.S. Centers for Disease Control and Prevention. Provides that persons who are identified as being at high risk for hepatitis B, hepatitis C, or HIV shall be offered an opportunity to undergo laboratory testing if they will be admitted to the nursing facility for at least 7 days and are not known to be infected with any of the listed viruses. Provides that all HIV testing shall be conducted in compliance with the AIDS Confidentiality Act and that all persons determined to be susceptible to the hepatitis B virus shall be offered immunization upon admission to any nursing facility. Requires nursing facilities to document a resident's screening for risk factors associated with hepatitis B, hepatitis C, and HIV, and whether or not the resident was immunized against hepatitis B. Effective January 1, 2011.

LRB096 17754 KTG 33120 b

FISCAL NOTE ACT MAY APPLY STATE MANDATES ACT MAY REQUIRE REIMBURSEMENT 1 AN ACT concerning regulation.

## Be it enacted by the People of the State of Illinois, represented in the General Assembly:

- 4 Section 5. The Nursing Home Care Act is amended by changing
- 5 Section 2-213 as follows:
- 6 (210 ILCS 45/2-213)
- 7 Sec. 2-213. Vaccinations.
- (a) A facility shall annually administer or arrange for 8 administration of a vaccination against influenza to each in accordance with the recommendations of 10 Advisory Committee on Immunization Practices of the Centers for 11 Disease Control and Prevention that are most recent to the time 12 13 of vaccination, unless the vaccination is medically 14 contraindicated or the resident has refused the vaccine. Influenza vaccinations for all residents age 65 and over shall 15 16 be completed by November 30 of each year or as soon as 17 practicable if vaccine supplies are not available before November 1. Residents admitted after November 30, during the 18
- 19 flu season, and until February 1 shall, as medically
- 20 appropriate, receive an influenza vaccination prior to or upon
- 21 admission or as soon as practicable if vaccine supplies are not
- 22 available at the time of the admission, unless the vaccine is
- 23 medically contraindicated or the resident has refused the

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vaccine. In the event that the Advisory Committee on Immunization Practices of the Centers for Disease Control and Prevention determines that dates of administration other than those stated in this Act are optimal to protect the health of residents, the Department is authorized to develop rules to mandate vaccinations at those times rather than the times stated in this Act. A facility shall document in the resident's medical record that an annual vaccination against influenza was administered, arranged, refused or medically contraindicated.

- (b) Α facility shall administer or arrange administration of a pneumococcal vaccination to each resident who is age 65 and over, in accordance with the recommendations of the Advisory Committee on Immunization Practices of the Centers for Disease Control and Prevention, who has not received this immunization prior to or upon admission to the facility, unless the resident refuses the offer for vaccination or the vaccination is medically contraindicated. A facility shall document in each resident's medical record that a vaccination against pneumococcal pneumonia was offered and administered, arranged, refused, or medically contraindicated.
- (c) All persons seeking admission to a nursing facility shall be verbally screened for risk factors associated with hepatitis B, hepatitis C, and the Human Immunodeficiency Virus (HIV) according to guidelines established by the U.S. Centers for Disease Control and Prevention. Persons who are identified as being at high risk for hepatitis B, hepatitis C, or HIV

- shall be offered an opportunity to undergo laboratory testing 1 2 in order to determine infection status if they will be admitted 3 to the nursing facility for at least 7 days and are not known 4 to be infected with any of the listed viruses. All HIV testing 5 shall be conducted in compliance with the AIDS Confidentiality 6 Act. All persons determined to be susceptible to the hepatitis B virus shall be offered immunization upon admission to any 7 nursing facility. A facility shall document in the resident's 8 9 medical record that he or she was verbally screened for risk factors associated with hepatitis B, hepatitis C, and HIV, and 10 11 whether or not the resident was immunized against hepatitis B. 12 (Source: P.A. 93-384, eff. 7-25-03; 94-429, eff. 8-2-05.)
- Section 99. Effective date. This Act takes effect January 1, 2011.