

## 97TH GENERAL ASSEMBLY State of Illinois 2011 and 2012 HB5363

Introduced 2/15/2012, by Rep. Robyn Gabel - Robert W. Pritchard

## SYNOPSIS AS INTRODUCED:

See Index

Amends the State Employees Group Insurance Act of 1971, the Alcoholism and Other Drug Abuse and Dependency Act, the Children and Family Services Act, the Illinois Commission on Volunteerism and Community Service Act, the Department of Human Services Act, the Domestic Violence Shelters Act, the Illinois Youthbuild Act, the Department of Public Health Powers and Duties Law of the Civil Administrative Code of Illinois, the Interagency Coordinating Council Act, the State Finance Act, the School Code, the Specialized Care for Children Act, the Abused and Neglected Child Reporting Act, the Early Intervention Services System Act, the Interagency Board for Children who are Deaf or Hard-of-Hearing and have an Emotional or Behavioral Disorder Act, the Community Services Act, the Reduction of Racial and Ethnic Health Disparities Act, the Illinois Family Case Management Act, the Hearing Screening for Newborns Act, the Prenatal and Newborn Care Act, the Problem Pregnancy Health Services and Care Act, Developmental Disability Prevention Act, the WIC Vendor Management Act, the Renal Disease Treatment Act, the Juvenile Court Act of 1987, the Cannabis Control Act, the Narcotics Profit Forfeiture Act, the Probation and Probation Officers Act, and the Illinois Domestic Violence Act of 1986. Transfers various programs, powers, and funding to the Department of Public Health. Creates the Office of Community Health, Prevention, and Wellness within the Department of Public Health. Repeals certain provisions of the Department of Human Services Act. Repeals the Prenatal and Newborn Care Act and the Problem Pregnancy Health Services and Care Act. Provides that the bill may be referred to as the Illinois Maternal and Child Health Leadership and Excellence Act of 2012.

LRB097 19769 RPM 65034 b

FISCAL NOTE ACT MAY APPLY

1 AN ACT concerning public health.

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

- Section 1. Short title. This Act may be referred to as the Illinois Maternal and Child Health Leadership and Excellence
- 6 Act of 2012.

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- 7 Section 2. Legislative findings and purpose. The General 8 Assembly finds the following:
  - (1) The people of Illinois continue to experience and to bear the consequences of unacceptable rates and disparities among racial and ethnic groups with regard to maternal and child health, including low birth weight, infant mortality, maternal mortality, early childhood development, child and adolescent health problems (including overweight and obesity), teen pregnancy, adolescent substance abuse, juvenile delinquency, and domestic violence.
  - (2) The resolution of these challenges requires an integrated, comprehensive approach that considers the health of the entire population and directs resources to high-risk groups based on epidemiological analysis in order to prevent disability, disease, death, or other adverse circumstance or what may be termed a public health

1 approach.

- (3) Highly qualified individuals with extensive academic preparation and demonstrated experience are required to lead such public health efforts.
- (4) The State of Illinois, through the Department of Human Services Act, made such an integrated, comprehensive approach possible when it combined various programs from the Department of Public Health, the Department of Children and Family Services, the former Department of Public Aid, and the former Department of Alcoholism and Substance Abuse to create the Office of Community Health and Prevention in the Department of Human Services at its inception on July 1, 1997.
- (5) The Governor has acted to dissolve the Office of Community Health and Prevention within the Department of Human Services.
- (6) Improving the health of all women, children, and families in this State requires the use of a public health approach under qualified leadership by an identifiable point of responsibility within the executive branch.

Therefore, it is the purpose of this Act to establish a unit within the Department of Public Health to lead and develop Illinois' Maternal and Child Health Program; to set forth the qualifications of the Deputy Director for the Office of Community Health, Prevention, and Wellness, who will be responsible for this new unit; and to transfer the statutory

- 1 authority and regulations, appropriations, programs, property,
- 2 and personnel that formerly comprised the Office of Community
- 3 Health and Prevention and the personnel, hardware, and software
- 4 for its principal management information system in the
- 5 Department of Human Services to the Department of Public
- 6 Health.
- 7 Section 5. The State Employees Group Insurance Act of 1971
- 8 is amended by changing Section 3 as follows:
- 9 (5 ILCS 375/3) (from Ch. 127, par. 523)
- 10 Sec. 3. Definitions. Unless the context otherwise
- 11 requires, the following words and phrases as used in this Act
- 12 shall have the following meanings. The Department may define
- these and other words and phrases separately for the purpose of
- implementing specific programs providing benefits under this
- 15 Act.
- 16 (a) "Administrative service organization" means any
- 17 person, firm or corporation experienced in the handling of
- 18 claims which is fully qualified, financially sound and capable
- 19 of meeting the service requirements of a contract of
- administration executed with the Department.
- 21 (b) "Annuitant" means (1) an employee who retires, or has
- retired, on or after January 1, 1966 on an immediate annuity
- 23 under the provisions of Articles 2, 14 (including an employee
- 24 who has elected to receive an alternative retirement

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cancellation payment under Section 14-108.5 of the Illinois Pension Code in lieu of an annuity), 15 (including an employee has retired under the optional retirement program established under Section 15-158.2), paragraphs (2), (3), or (5) of Section 16-106, or Article 18 of the Illinois Pension Code; (2) any person who was receiving group insurance coverage under this Act as of March 31, 1978 by reason of his status as an annuitant, even though the annuity in relation to which such coverage was provided is a proportional annuity based on less than the minimum period of service required for a retirement annuity in the system involved; (3) any person not otherwise covered by this Act who has retired as a participating member under Article 2 of the Illinois Pension Code but is ineligible for the retirement annuity under Section 2-119 of the Illinois Pension Code; (4) the spouse of any person who is receiving a retirement annuity under Article 18 of the Illinois Pension Code and who is covered under a group health insurance program sponsored by a governmental employer other than the State of Illinois and who has irrevocably elected to waive his or her coverage under this Act and to have his or her spouse considered as the "annuitant" under this Act and not as a "dependent"; or (5) an employee who retires, or has retired, from a qualified position, as determined according to rules promulgated by the Director, under a qualified government, a qualified rehabilitation facility, a qualified domestic violence shelter or service, or a qualified child

- advocacy center. (For definition of "retired employee", see (p) post).
  - (b-5) "New SERS annuitant" means a person who, on or after January 1, 1998, becomes an annuitant, as defined in subsection (b), by virtue of beginning to receive a retirement annuity under Article 14 of the Illinois Pension Code (including an employee who has elected to receive an alternative retirement cancellation payment under Section 14-108.5 of that Code in lieu of an annuity), and is eligible to participate in the basic program of group health benefits provided for annuitants under this Act.
    - (b-6) "New SURS annuitant" means a person who (1) on or after January 1, 1998, becomes an annuitant, as defined in subsection (b), by virtue of beginning to receive a retirement annuity under Article 15 of the Illinois Pension Code, (2) has not made the election authorized under Section 15-135.1 of the Illinois Pension Code, and (3) is eligible to participate in the basic program of group health benefits provided for annuitants under this Act.
    - (b-7) "New TRS State annuitant" means a person who, on or after July 1, 1998, becomes an annuitant, as defined in subsection (b), by virtue of beginning to receive a retirement annuity under Article 16 of the Illinois Pension Code based on service as a teacher as defined in paragraph (2), (3), or (5) of Section 16-106 of that Code, and is eligible to participate in the basic program of group health benefits provided for

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annuitants under this Act.

- (c) "Carrier" means (1) an insurance company, a corporation organized under the Limited Health Service Organization Act or the Voluntary Health Services Plan Act, a partnership, or other nongovernmental organization, which is authorized to do group life or group health insurance business in Illinois, or (2) the State of Illinois as a self-insurer.
- "Compensation" means salary or wages payable on a regular payroll by the State Treasurer on a warrant of the State Comptroller out of any State, trust or federal fund, or by the Governor of the State through a disbursing officer of the State out of a trust or out of federal funds, or by any Department out of State, trust, federal or other funds held by the State Treasurer or the Department, to any person for personal services currently performed, and ordinary accidental disability benefits under Articles 2, 14, (including ordinary or accidental disability benefits under the optional retirement program established under Section 15-158.2), paragraphs (2), (3), or (5) of Section 16-106, or Article 18 of the Illinois Pension Code, for disability incurred after January 1, 1966, or benefits payable under the Workers' Compensation or Occupational Diseases Act or benefits payable under a sick pay plan established in accordance with Section 36 of the State Finance Act. "Compensation" also means salary or wages paid to an employee of any qualified local government, qualified rehabilitation facility, qualified

- domestic violence shelter or service, or qualified child advocacy center.
  - (e) "Commission" means the State Employees Group Insurance Advisory Commission authorized by this Act. Commencing July 1, 1984, "Commission" as used in this Act means the Commission on Government Forecasting and Accountability as established by the Legislative Commission Reorganization Act of 1984.
  - (f) "Contributory", when referred to as contributory coverage, shall mean optional coverages or benefits elected by the member toward the cost of which such member makes contribution, or which are funded in whole or in part through the acceptance of a reduction in earnings or the foregoing of an increase in earnings by an employee, as distinguished from noncontributory coverage or benefits which are paid entirely by the State of Illinois without reduction of the member's salary.
  - (g) "Department" means any department, institution, board, commission, officer, court or any agency of the State government receiving appropriations and having power to certify payrolls to the Comptroller authorizing payments of salary and wages against such appropriations as are made by the General Assembly from any State fund, or against trust funds held by the State Treasurer and includes boards of trustees of the retirement systems created by Articles 2, 14, 15, 16 and 18 of the Illinois Pension Code. "Department" also includes the Illinois Comprehensive Health Insurance Board, the Board of Examiners established under the Illinois Public Accounting

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1 Act, and the Illinois Finance Authority.

- (h) "Dependent", when the term is used in the context of the health and life plan, means a member's spouse and any child (1) from birth to age 26 including an adopted child, a child who lives with the member from the time of the filing of a petition for adoption until entry of an order of adoption, a stepchild or adjudicated child, or a child who lives with the member if such member is a court appointed quardian of the child or (2) age 19 or over who is mentally or physically disabled from a cause originating prior to the age of 19 (age 26 if enrolled as an adult child dependent). For the health plan only, the term "dependent" also includes (1) any person enrolled prior to the effective date of this Section who is dependent upon the member to the extent that the member may claim such person as a dependent for income tax deduction purposes and (2) any person who has received after June 30, 2000 an organ transplant and who is financially dependent upon the member and eliqible to be claimed as a dependent for income tax purposes. A member requesting to cover any dependent must provide documentation as requested by the Department of Central Management Services and file with the Department any and all forms required by the Department.
- (i) "Director" means the Director of the Illinois
  Department of Central Management Services or of any successor agency designated to administer this Act.
  - (j) "Eligibility period" means the period of time a member

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has to elect enrollment in programs or to select benefits
without regard to age, sex or health.

(k) "Employee" means and includes each officer or employee service of a department who (1) receives his compensation for service rendered to the department on a warrant issued pursuant to a payroll certified by a department or on a warrant or check issued and drawn by a department upon a trust, federal or other fund or on a warrant issued pursuant to a payroll certified by an elected or duly appointed officer of the State or who receives payment of the performance of personal services on a warrant issued pursuant to a payroll certified by a Department and drawn by the Comptroller upon the State Treasurer against appropriations made by the General Assembly from any fund or against trust funds held by the State Treasurer, and (2) is employed full-time or part-time in a position normally requiring actual performance of duty during not less than 1/2 of a normal work period, as established by the Director in cooperation with each department, except that persons elected by popular vote will be considered employees during the entire term for which they are elected regardless of hours devoted to the service of the State, and (3) except that "employee" does not include any person who is not eligible by reason of such person's employment to participate in one of the State retirement systems under Articles 2, 14, 15 (either the regular Article 15 system or the optional retirement program established under Section 15-158.2) or 18, or under paragraph

(2), (3), or (5) of Section 16-106, of the Illinois Pension 1 2 Code, but such term does include persons who are employed during the 6 month qualifying period under Article 14 of the 3 Illinois Pension Code. Such term also includes any person who 5 (1) after January 1, 1966, is receiving ordinary or accidental 6 disability benefits under Articles 2, 14, 15 7 ordinary or accidental disability benefits under the optional 8 retirement program established under Section 15-158.2), paragraphs (2), (3), or (5) of Section 16-106, or Article 18 of 9 10 the Illinois Pension Code, for disability incurred after 11 January 1, 1966, (2) receives total permanent or total 12 temporary disability under the Workers' Compensation Act or 13 Occupational Disease Act as a result of injuries sustained or 14 illness contracted in the course of employment with the State 15 of Illinois, or (3) is not otherwise covered under this Act and 16 has retired as a participating member under Article 2 of the 17 Illinois Pension Code but is ineligible for the retirement annuity under Section 2-119 of the Illinois Pension Code. 18 19 However, a person who satisfies the criteria of the foregoing 20 definition of "employee" except that such person is made 21 ineligible to participate in the State Universities Retirement 22 System by clause (4) of subsection (a) of Section 15-107 of the 23 Illinois Pension Code is also an "employee" for the purposes of this Act. "Employee" also includes any person receiving or 24 eligible for benefits under a sick pay plan established in 25 accordance with Section 36 of the State Finance Act. "Employee" 26

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- also includes (i) each officer or employee in the service of a qualified local government, including persons appointed as trustees of sanitary districts regardless of hours devoted to the service of the sanitary district, (ii) each employee in the service of a qualified rehabilitation facility, (iii) each full-time employee in the service of a qualified domestic violence shelter or service, and (iv) each full-time employee in the service of a qualified child advocacy center, as determined according to rules promulgated by the Director.
- (1)"Member" means an employee, annuitant, retired employee or survivor. In the case of an annuitant or retired employee who first becomes an annuitant or retired employee on or after the effective date of this amendatory Act of the 97th General Assembly, the individual must meet the minimum vesting requirements of the applicable retirement system in order to be eligible for group insurance benefits under that system. In the case of a survivor who first becomes a survivor on or after the effective date of this amendatory Act of the 97th General Assembly, the deceased employee, annuitant, or employee upon whom the annuity is based must have been eligible to participate in the group insurance system under the applicable retirement system in order for the survivor to be eligible for group insurance benefits under that system.
- (m) "Optional coverages or benefits" means those coverages or benefits available to the member on his or her voluntary election, and at his or her own expense.

- 1 (n) "Program" means the group life insurance, health
  2 benefits and other employee benefits designed and contracted
  3 for by the Director under this Act.
  - (o) "Health plan" means a health benefits program offered by the State of Illinois for persons eligible for the plan.
  - (p) "Retired employee" means any person who would be an annuitant as that term is defined herein but for the fact that such person retired prior to January 1, 1966. Such term also includes any person formerly employed by the University of Illinois in the Cooperative Extension Service who would be an annuitant but for the fact that such person was made ineligible to participate in the State Universities Retirement System by clause (4) of subsection (a) of Section 15-107 of the Illinois Pension Code.
  - (q) "Survivor" means a person receiving an annuity as a survivor of an employee or of an annuitant. "Survivor" also includes: (1) the surviving dependent of a person who satisfies the definition of "employee" except that such person is made ineligible to participate in the State Universities Retirement System by clause (4) of subsection (a) of Section 15-107 of the Illinois Pension Code; (2) the surviving dependent of any person formerly employed by the University of Illinois in the Cooperative Extension Service who would be an annuitant except for the fact that such person was made ineligible to participate in the State Universities Retirement System by clause (4) of subsection (a) of Section 15-107 of the Illinois

- 1 Pension Code; and (3) the surviving dependent of a person who
- 2 was an annuitant under this Act by virtue of receiving an
- 3 alternative retirement cancellation payment under Section
- 4 14-108.5 of the Illinois Pension Code.
- 5 (q-2) "SERS" means the State Employees' Retirement System
- of Illinois, created under Article 14 of the Illinois Pension
- 7 Code.
- 8 (q-3) "SURS" means the State Universities Retirement
- 9 System, created under Article 15 of the Illinois Pension Code.
- 10 (q-4) "TRS" means the Teachers' Retirement System of the
- 11 State of Illinois, created under Article 16 of the Illinois
- 12 Pension Code.
- 13 (q-5) "New SERS survivor" means a survivor, as defined in
- 14 subsection (q), whose annuity is paid under Article 14 of the
- 15 Illinois Pension Code and is based on the death of (i) an
- 16 employee whose death occurs on or after January 1, 1998, or
- 17 (ii) a new SERS annuitant as defined in subsection (b-5). "New
- 18 SERS survivor" includes the surviving dependent of a person who
- 19 was an annuitant under this Act by virtue of receiving an
- 20 alternative retirement cancellation payment under Section
- 21 14-108.5 of the Illinois Pension Code.
- 22 (q-6) "New SURS survivor" means a survivor, as defined in
- 23 subsection (q), whose annuity is paid under Article 15 of the
- 24 Illinois Pension Code and is based on the death of (i) an
- employee whose death occurs on or after January 1, 1998, or
- 26 (ii) a new SURS annuitant as defined in subsection (b-6).

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- (q-7) "New TRS State survivor" means a survivor, as defined in subsection (q), whose annuity is paid under Article 16 of the Illinois Pension Code and is based on the death of (i) an employee who is a teacher as defined in paragraph (2), (3), or (5) of Section 16-106 of that Code and whose death occurs on or after July 1, 1998, or (ii) a new TRS State annuitant as defined in subsection (b-7).
- (r) "Medical services" means the services provided within the scope of their licenses by practitioners in all categories licensed under the Medical Practice Act of 1987.
- (s) "Unit of local government" means any township, school district municipality, (including combination of school districts under the Intergovernmental Cooperation Act), special district or other unit, designated as a unit of local government by law, which exercises limited governmental powers or powers in respect to limited governmental subjects, any not-for-profit association with a membership that primarily includes townships and township officials, that has duties that include provision of research service, dissemination of information, and other acts for the purpose of improving township government, and that is funded wholly or partly in accordance with Section 85-15 of the Township Code; any not-for-profit corporation or association, with a membership consisting primarily of municipalities, that operates its own utility system, and provides research, training, dissemination of information, or other acts to

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promote cooperation between and among municipalities that provide utility services and for the advancement of the goals and purposes of its membership; the Southern Illinois Collegiate Common Market, which is a consortium of higher education institutions in Southern Illinois; the Illinois Association of Park Districts; and any hospital provider that is owned by a county that has 100 or fewer hospital beds and not already joined the program. "Qualified government" means a unit of local government approved by the Director and participating in a program created under subsection (i) of Section 10 of this Act.

- "Qualified rehabilitation facility" means (t) any not-for-profit organization that is accredited by the Commission on Accreditation of Rehabilitation Facilities or certified by the Department of Human Services (as successor to the Department of Mental Health and Developmental Disabilities) to provide services to persons with disabilities and which receives funds from the State of Illinois for providing those services, approved by the Director participating in a program created under subsection (j) of Section 10 of this Act.
- (u) "Qualified domestic violence shelter or service" means any Illinois domestic violence shelter or service and its administrative offices funded by the Department of <a href="Public Health Human Services">Public Health Human Services</a> (as successor to the <a href="Hillinois">Health Care and Family</a>

- Services Public Aid), approved by the Director and participating in a program created under subsection (k) of Section 10.
  - (v) "TRS benefit recipient" means a person who:
    - (1) is not a "member" as defined in this Section; and
  - (2) is receiving a monthly benefit or retirement annuity under Article 16 of the Illinois Pension Code; and
  - (3) either (i) has at least 8 years of creditable service under Article 16 of the Illinois Pension Code, or (ii) was enrolled in the health insurance program offered under that Article on January 1, 1996, or (iii) is the survivor of a benefit recipient who had at least 8 years of creditable service under Article 16 of the Illinois Pension Code or was enrolled in the health insurance program offered under that Article on the effective date of this amendatory Act of 1995, or (iv) is a recipient or survivor of a recipient of a disability benefit under Article 16 of the Illinois Pension Code.
  - (w) "TRS dependent beneficiary" means a person who:
  - (1) is not a "member" or "dependent" as defined in this Section; and
  - (2) is a TRS benefit recipient's: (A) spouse, (B) dependent parent who is receiving at least half of his or her support from the TRS benefit recipient, or (C) natural, step, adjudicated, or adopted child who is (i) under age 26, (ii) was, on January 1, 1996, participating as a

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dependent beneficiary in the health insurance program
offered under Article 16 of the Illinois Pension Code, or

(iii) age 19 or over who is mentally or physically disabled
from a cause originating prior to the age of 19 (age 26 if
enrolled as an adult child).

"TRS dependent beneficiary" does not include, as indicated under paragraph (2) of this subsection (w), a dependent of the survivor of a TRS benefit recipient who first becomes a dependent of a survivor of a TRS benefit recipient on or after the effective date of this amendatory Act of the 97th General Assembly unless that dependent would have been eligible for coverage as a dependent of the deceased TRS benefit recipient upon whom the survivor benefit is based.

- (x) "Military leave" refers to individuals in basic training for reserves, special/advanced training, annual training, emergency call up, activation by the President of the United States, or any other training or duty in service to the United States Armed Forces.
- 19 (y) (Blank).
- 20 (z) "Community college benefit recipient" means a person who:
  - (1) is not a "member" as defined in this Section; and
- 23 (2) is receiving a monthly survivor's annuity or 24 retirement annuity under Article 15 of the Illinois Pension 25 Code; and
- 26 (3) either (i) was a full-time employee of a community

college district or an association of community college boards created under the Public Community College Act (other than an employee whose last employer under Article 15 of the Illinois Pension Code was a community college district subject to Article VII of the Public Community College Act) and was eligible to participate in a group health benefit plan as an employee during the time of employment with a community college district (other than a community college district subject to Article VII of the Public Community College Act) or an association of community college boards, or (ii) is the survivor of a person described in item (i).

- 13 (aa) "Community college dependent beneficiary" means a
  14 person who:
  - (1) is not a "member" or "dependent" as defined in this Section; and
    - (2) is a community college benefit recipient's: (A) spouse, (B) dependent parent who is receiving at least half of his or her support from the community college benefit recipient, or (C) natural, step, adjudicated, or adopted child who is (i) under age 26, or (ii) age 19 or over and mentally or physically disabled from a cause originating prior to the age of 19 (age 26 if enrolled as an adult child).
- 25 "Community college dependent beneficiary" does not 26 include, as indicated under paragraph (2) of this subsection

- (aa), a dependent of the survivor of a community college 2 benefit recipient who first becomes a dependent of a survivor of a community college benefit recipient on or after the 3 effective date of this amendatory Act of the 97th General 4
- 5 Assembly unless that dependent would have been eligible for
- 6 coverage as a dependent of the deceased community college
- 7 benefit recipient upon whom the survivor annuity is based.
- (bb) "Qualified child advocacy center" means any Illinois 8
- 9 child advocacy center and its administrative offices funded by
- 10 the Department of Children and Family Services, as defined by
- 11 the Children's Advocacy Center Act (55 ILCS 80/), approved by
- 12 the Director and participating in a program created under
- subsection (n) of Section 10. 13
- (Source: P.A. 96-756, eff. 1-1-10; 96-1519, eff. 2-4-11; 14
- 97-668, eff. 1-13-12.) 15
- 16 Section 10. The Alcoholism and Other Drug Abuse and
- Dependency Act is amended by changing Sections 5-5, 10-30, 17
- 18 10-55, 35-5, 50-25, and 50-30 and by adding Section 50-1 as
- 19 follows:
- 20 (20 ILCS 301/5-5)
- 21 Sec. 5-5. Successor department; home rule.
- 22 (a) The Department of Human Services, as successor to the
- 23 Department of Alcoholism and Substance Abuse, shall assume the
- 24 various rights, powers, duties, and functions provided for in

1 this Act.

The Department of Human Services shall delegate the various rights, powers, duties, and functions provided in this Act regarding general education of the public and prevention of alcoholism or substance abuse, including those specified in subsection (a) of Section 20-5 of this Act, to the Department of Public Health.

The Department of Public Health shall work closely with the Department of Human Services to ensure that all of the responsibilities set forth in this Act regarding general education of the public and prevention of alcoholism and substance abuse are performed as required by the Department of Human Services.

- (b) It is declared to be the public policy of this State, pursuant to paragraphs (h) and (i) of Section 6 of Article VII of the Illinois Constitution of 1970, that the powers and functions set forth in this Act and expressly delegated to the Department are exclusive State powers and functions. Nothing herein prohibits the exercise of any power or the performance of any function, including the power to regulate, for the protection of the public health, safety, morals and welfare, by any unit of local government, other than the powers and functions set forth in this Act and expressly delegated to the Department to be exclusive State powers and functions.
- (c) The Department shall, through accountable and efficient leadership, example and commitment to excellence,

- strive to reduce the incidence and consequences of the abuse of
- 2 alcohol and other drugs by:
- 3 (1) fostering public understanding of alcoholism and 4 addiction as illnesses which affect individuals,
- 5 co-dependents, families and communities.
- 6 (2) promoting healthy lifestyles.
- 7 (3) promoting understanding and support for sound 8 public policies.
- 9 (4) ensuring quality prevention, intervention and 10 treatment programs and services which are accessible and 11 responsive to the diverse needs of individuals, families 12 and communities.
- 13 (Source: P.A. 88-80; 89-202, eff. 7-21-95; 89-507, eff.
- $14 \quad 7-1-97.$
- 15 (20 ILCS 301/10-30)
- Sec. 10-30. Membership.
- 17 (a) The Committee shall be composed of 15 individuals 18 appointed by the chairperson of the Council, with the advice
- 19 and consent of the Secretary, from among the medical and
- 20 substance abuse prevention and treatment communities who have
- 21 expertise and experience in women-specific programming and
- 22 representatives of appropriate public agencies <u>and shall</u>
- 23 include the Director of Public Health or his or her designee.
- Members may be, but need not be, members of the Council.
- 25 (b) Members shall serve 3-year terms and until their

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successors are appointed and qualified, except that of the initial appointments, 5 members shall be appointed for one year, 5 members shall be appointed for 2 years, and 5 members shall be appointed for 3 years and until their successors are appointed and qualified. Appointments to fill vacancies shall be made in the same manner as the original appointments, for the unexpired portion of the vacated term. Initial terms shall begin on January 1, 1994. The chairperson of the Council shall annually appoint a chairperson from among the membership of the Committee.

11 (Source: P.A. 88-80; 89-507, eff. 7-1-97.)

## 12 (20 ILCS 301/10-55)

10-55. Medical Advisory Committee. The Secretary shall appoint a Medical Advisory Committee to the Department, consisting of up to 15 physicians licensed to practice medicine in all of its branches in Illinois who shall serve in an advisory capacity to the Secretary. The membership of the Medical Advisory Committee shall reasonably representation from the geographic areas and the range of alcoholism and other drug abuse and dependency service providers in the State. In making appointments, the Secretary shall give consideration to recommendations made by the State Medical Society and other appropriate professional organizations. All appointments shall be made with regard to the interest and expertise of the individual

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with regard to alcoholism and other drug abuse and dependency 1 2 services. At a minimum, those appointed to the Committee shall 3 include the Department of Public Health's Deputy Director for Community Health, Prevention, and Wellness or, if the Deputy 4 5 Director is not a physician, the Medical Director of the Department of Public Health's Division of Community Health, 6 7 Prevention, and Wellness, representatives of Board-certified 8 psychiatrists, community-based and hospital-based alcoholism 9 or other drug dependency treatment programs, and Illinois

Members shall serve 3-year terms and until their successors are appointed and qualified, except that of the initial appointments, one-third of the members shall be appointed for one year, one-third shall be appointed for 2 years, and one-third shall be appointed for 3 years and until their successors are appointed and qualified. Appointments to fill vacancies shall be made in the same manner as the original appointments, for the unexpired portion of the vacated term. Initial terms shall begin on January 1, 1994. Members shall elect a chairperson annually from among their membership.

21 (Source: P.A. 88-80; 89-507, eff. 7-1-97.)

22 (20 ILCS 301/35-5)

medical schools.

- 23 Sec. 35-5. Services for pregnant women and mothers.
- 24 (a) In order to promote a comprehensive, statewide and 25 multidisciplinary approach to serving addicted pregnant women

- and mothers, including those who are minors, and their children who are affected by alcoholism and other drug abuse or dependency, the Department shall have responsibility for an ongoing exchange of referral information, as set forth in subsections (b) and (c) of this Section, among the following:
  - (1) those who provide medical and social services to pregnant women, mothers and their children, whether or not there exists evidence of alcoholism or other drug abuse or dependency. These include providers in the <a href="#Family Case">Family Case</a> <a href="Management Healthy Moms/Healthy Kids">Management Healthy Moms/Healthy Kids</a> program, the Parents Too Soon program, and any other State-funded medical or social service programs which provide services to pregnant women.
  - (2) providers of treatment services to women affected by alcoholism or other drug abuse or dependency.
  - (b) The Department may, in conjunction with the Departments of Children and Family Services, Public Health, and Healthcare and Family Services Public Aid, develop and maintain an updated and comprehensive list of medical and social service providers by geographic region. The Department may periodically send this comprehensive list of medical and social service providers to all providers of treatment for alcoholism and other drug abuse and dependency, identified under subsection (f) of this Section, so that appropriate referrals can be made. The Department shall obtain the specific consent of each provider of services before publishing, distributing, verbally making

- information available for purposes of referral, or otherwise publicizing the availability of services from a provider. The Department may make information concerning availability of services available to recipients, but may not require
- 5 recipients to specific sources of care.
  - (c) The Department may, on an ongoing basis, keep all medical and social service providers identified under subsection (b) of this Section informed about any relevant changes in any laws relating to alcoholism and other drug abuse and dependency, about services that are available from any State agencies for addicted pregnant women and addicted mothers and their children, and about any other developments that the Department finds to be informative.
  - (d) All providers of treatment for alcoholism and other drug abuse and dependency may receive information from the Department on the availability of services under the Drug Free Families with a Future or any comparable program providing case management services for alcoholic or addicted women, including information on appropriate referrals for other services that may be needed in addition to treatment.
  - (e) The Department may implement the policies and programs set forth in this Section with the advice of the Committee on Women's Alcohol and Substance Abuse Treatment created under Section 10-20 of this Act.
  - (f) The Department shall develop and maintain an updated and comprehensive directory of service providers that provide

treatment services to pregnant women, mothers, and their children in this State. The Department shall disseminate an updated directory as often as is necessary to the list of medical and social service providers compiled under subsection (b) of this Section. The Department shall obtain the specific consent of each provider of services before publishing, distributing, verbally making information available for purposes of referral or otherwise using or publicizing the availability of services from a provider. The Department may make information concerning availability of services available to recipients, but may not require recipients to use specific sources of care.

- (g) As a condition of any State grant or contract, the Department shall require that any treatment program for addicted women provide services, either by its own staff or by agreement with other agencies or individuals, which include but need not be limited to the following:
  - (1) coordination with the <u>Family Case Management</u>

    Healthy Moms/Healthy Kids program, the Drug Free Families

    with a Future program, or any comparable program providing

    case management services to <u>ensure</u> assure ongoing

    monitoring and coordination of services after the addicted

    woman has returned home.
  - (2) coordination with medical services for individual medical care of addicted pregnant women, including prenatal care under the supervision of a physician.

- 1 (3) coordination with child care services under any 2 State plan developed pursuant to subsection (e) of Section 3 10-25 of this Act.
  - (h) As a condition of any State grant or contract, the Department shall require that any nonresidential program receiving any funding for treatment services accept women who are pregnant, provided that such services are clinically appropriate. Failure to comply with this subsection shall result in termination of the grant or contract and loss of State funding.
  - (i) (1) From funds appropriated expressly for the purposes of this Section, the Department shall create or contract with licensed, certified agencies to develop a program for the care and treatment of addicted pregnant women, addicted mothers and their children. The program shall be in Cook County in an area of high density population having a disproportionate number of addicted women and a high infant mortality rate.
  - (2) From funds appropriated expressly for the purposes of this Section, the Department shall create or contract with licensed, certified agencies to develop a program for the care and treatment of low income pregnant women. The program shall be located anywhere in the State outside of Cook County in an area of high density population having a disproportionate number of low income pregnant women.
  - (3) In implementing the programs established under this subsection, the Department shall contract with existing

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- residencies or recovery homes in areas having a disproportionate number of women who abuse alcohol or other drugs and need residential treatment and counseling. Priority shall be given to addicted and abusing women who:
- 5 (A) are pregnant,
  - (B) have minor children,
    - (C) are both pregnant and have minor children, or
  - (D) are referred by medical personnel because they either have given birth to a baby addicted to a controlled substance, or will give birth to a baby addicted to a controlled substance.
- 12 (4) The services provided by the programs shall include but
  13 not be limited to:
  - (A) individual medical care, including prenatal care, under the supervision of a physician.
    - (B) temporary, residential shelter for pregnant women, mothers and children when necessary.
    - (C) a range of educational or counseling services.
    - (D) comprehensive and coordinated social services, including substance abuse therapy groups for the treatment of alcoholism and other drug abuse and dependency; family therapy groups; programs to develop positive self-awareness; parent-child therapy; and residential support groups.
    - (5) No services that require a license shall be provided until and unless the recovery home or other residence obtains

- 1 and maintains the requisite license.
- 2 (Source: P.A. 88-80.)
- 3 (20 ILCS 301/50-1 new)
- 4 Sec. 50-1. Special funds. Funds received by the Department
- 5 of Human Services from the federal government or other sources
- for the prevention of alcoholism or substance abuse shall be
- 7 transferred to the Department of Public Health to carry out the
- 8 responsibilities delegated to it under this Act.
- 9 (20 ILCS 301/50-25)
- 10 Sec. 50-25. Youth Alcoholism and Substance Abuse
- 11 Prevention Fund. There is hereby created in the State treasury
- 12 a special Fund to be known as the Youth Alcoholism and
- 13 Substance Abuse Prevention Fund. Monies in this Fund shall be
- 14 appropriated to the Department of Public Health and expended
- for the purpose of helping support and establish community
- 16 based alcohol and other drug abuse prevention programs.
- 17 (Source: P.A. 91-25, eff. 6-9-99.)
- 18 (20 ILCS 301/50-30)
- 19 Sec. 50-30. Youth Drug Abuse Prevention Fund.
- 20 (a) There is hereby established the Youth Drug Abuse
- 21 Prevention Fund, to be held as a separate fund in the State
- 22 treasury. Monies in this fund shall be appropriated to the
- 23 Department of Public Health and expended for grants to

- 1 community-based agencies or non-profit organizations providing
- 2 residential or nonresidential treatment or prevention programs
- 3 or any combination thereof.
- 4 (b) There shall be deposited into the Youth Drug Abuse
- 5 Prevention Fund such monies as may be received under the income
- 6 tax checkoff provided for in subsection (b) of this Section.
- 7 There shall also be deposited into this fund such monies as may
- 8 be received under:
- 9 (1) subsection (a) of Section 10.2 of the Cannabis
- 10 Control Act.
- 11 (2) subsection (a) of Section 413 of the Illinois
- 12 Controlled Substances Act.
- 13 (3) subsection (a) of Section 5.2 of the Narcotics
- 14 Profit Forfeiture Act.
- 15 (4) Sections 5-9-1.1 and 5-9-1.2 of the Unified Code of
- 16 Corrections.
- 17 (Source: P.A. 88-80.)
- 18 Section 15. The Children and Family Services Act is amended
- 19 by changing Sections 17, 17a-2, 17a-3, 17a-4, 17a-5, 17a-6,
- 20 17a-7, 17a-9, 17a-10, 17a-11, and 17a-15 as follows:
- 21 (20 ILCS 505/17) (from Ch. 23, par. 5017)
- 22 Sec. 17. Youth and Community Services Program. The
- 23 Department of Public Health Human Services shall develop a
- 24 State program for youth and community services which will

ensure assure that youth who come into contact or may come into contact with the child welfare and the juvenile justice systems will have access to needed community, prevention, diversion, emergency and independent living services. The term "youth" means a person under the age of 19 years. The term "homeless youth" means a youth who cannot be reunited with his or her family and is not in a safe and stable living situation. This Section shall not be construed to require the Department of Public Health Human Services to provide services under this Section to any homeless youth who is at least 18 years of age but is younger than 19 years of age; however, the Department of Public Health may, in its discretion, provide services under this Section to any such homeless youth.

- (a) The goals of the program shall be to:
- (1) maintain children and youths in their own community;
  - (2) eliminate unnecessary categorical funding of programs by funding more comprehensive and integrated programs;
  - (3) encourage local volunteers and voluntary associations in developing programs aimed at preventing and controlling juvenile delinquency;
    - (4) address voids in services and close service gaps;
  - (5) develop program models aimed at strengthening the relationships between youth and their families and aimed at developing healthy, independent lives for homeless youth;

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1	(6) contain costs by redirecting funding to more
2	comprehensive and integrated community-based services; and
3	(7) coordinate education, employment, training and
4	other programs for youths with other State agencies.
5	(b) The duties of the Department under the program shall be
6	to:
7	(1) design models for service delivery by local
8	communities;
9	(2) test alternative systems for delivering youth
10	services;
11	(3) develop standards necessary to achieve and
12	maintain, on a statewide basis, more comprehensive and
13	integrated community-based youth services;
14	(4) monitor and provide technical assistance to local
15	boards and local service systems;
16	(5) assist local organizations in developing programs
17	which address the problems of youths and their families
18	through direct services, advocacy with institutions, and
19	improvement of local conditions; and
20	(6) develop a statewide adoption awareness campaign
21	aimed at pregnant teenagers.
22	(Source: P.A. 89-507, eff. 7-1-97.)

23 (20 ILCS 505/17a-2) (from Ch. 23, par. 5017a-2)

Sec. 17a-2. Local boards and service systems; Department of <a href="Public Health">Public Health</a> Human Services. The Department of <a href="Public Health">Public Health</a>

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Services shall promulgate regulations for t.he establishment and recognition of service areas and local boards or local service systems responsible for the development or coordination of more comprehensive and integrated community-based youth services. Such service areas, local boards and local service systems shall be reviewed every 4 years. Any entity formed in conformity with the regulations of the Department desiring recognition as a local board or local service system for a service area may apply to the Department for such recognition. The Department may refuse to renew or may withdraw recognition of a service area, local board or local service system if such area, board or system substantially fails to comply with the regulations and minimum service requirements promulgated by the Department under this Section. Department shall assist in the organization establishment of local service systems and may provide for community youth services in any area of the State where no recognized local board or local services system exists.

19 (Source: P.A. 89-507, eff. 7-1-97.)

20 (20 ILCS 505/17a-3) (from Ch. 23, par. 5017a-3)

Sec. 17a-3. Annual community youth service plan; Department of <u>Public Health</u> <u>Human Services</u>. Each local board or local service system shall, in conformity with regulations of the Department of <u>Public Health</u> <u>Human Services</u>, prepare an annual community youth service plan and annual budget to

implement the community youth service plan. Such plans shall be 1 2 transmitted to the regional youth planning committees and 3 included in a regional youth service plan. Each plan shall demonstrate, at a minimum, the following components of a youth 5 service system: (a) community needs assessment and resource 6 development; (b) case management (including case review, 7 service evaluation and networking); tracking, 8 accountability; (d) staff development; (e) consultation with 9 and technical assistance for providers; and (f) assurance of 10 the availability of the following: (i) community services, 11 including primary prevention, outreach and recreational 12 opportunities, and the use of indigenous community volunteers 13 designed provide programs to correct conditions delinguency; (ii) 14 contributing to diversion services. 15 including client advocacy, family counseling, employment and 16 educational assistance and service brokerage; (iii) emergency 17 services, including 24-hours crisis intervention and shelter comprehensive independent living 18 care; (iv) services. including outreach, referral for public assistance or other 19 benefits to which homeless youth may be entitled, emergency 20 shelter care homes, transitional support programs 21 22 residential setting, outward bound experiences and 23 transitional independent living skills support, in non-residential facility, with special emphasis on youth 24 25 employment and training opportunities; and (v) mental health 26 services. Each component of the annual community youth service

- 1 plan shall expressly address the following high-risk
- 2 populations: homeless youth, pregnant youth and youth who are
- 3 parents.
- 4 (Source: P.A. 89-507, eff. 7-1-97.)
- 5 (20 ILCS 505/17a-4) (from Ch. 23, par. 5017a-4)
- 6 Sec. 17a-4. Grants for community-based youth services;
- 7 Department of <u>Public Health</u> Human Services.
- 8 (a) The Department of <u>Public Health</u> Human Services shall
- 9 make grants for the purpose of planning, establishing,
- 10 operating, coordinating and evaluating programs aimed at
- 11 reducing or eliminating the involvement of youth in the child
- 12 welfare or juvenile justice systems. The programs shall include
- 13 those providing for more comprehensive and integrated
- 14 community-based youth services including Unified Delinquency
- 15 Intervention Services programs and for community services
- 16 programs. The Department may authorize advance disbursement of
- funds for such youth services programs. When the appropriation
- 18 for "comprehensive community-based service to youth" is equal
- 19 to or exceeds \$5,000,000, the Department shall allocate the
- 20 total amount of such appropriated funds in the following
- 21 manner:
- 22 (1) no more than 20% of the grant funds appropriated
- 23 shall be awarded by the Department for new program
- 24 development and innovation;
- 25 (2) not less than 80% of grant funds appropriated shall

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be allocated to community-based youth services programs based upon population of youth under 18 years of age and other demographic variables defined by the Department of <a href="Public Health">Public Health</a> Human Services by rule, which may include weighting for service priorities relating to special needs identified in the annual plans of the regional youth planning committees established under this Act;

- (3) if any amount so allocated under paragraph (2) of this subsection (a) remains unobligated such funds shall be reallocated in a manner equitable and consistent with the purpose of paragraph (2) of this subsection (a); and
- (4) the local boards or local service systems shall certify prior to receipt of grant funds from the Department of <u>Public Health</u> <u>Human Services</u> that a 10% local public or private financial or in-kind commitment is allocated to supplement the State grant.
- (b) Notwithstanding any provision in this Act or rules promulgated under this Act to the contrary, unless expressly prohibited by federal law or regulation, all individuals, corporations, or other entities that provide medical or mental health services, whether organized as for-profit not-for-profit entities, shall be eligible for consideration Public Health Human Services by the Department of participate in any program funded or administered by the Department. This subsection shall not apply to the receipt of federal funds administered and transferred by the Department

- 1 for services when the federal government has specifically
- 2 provided that those funds may be received only by those
- 3 entities organized as not-for-profit entities.
- 4 (Source: P.A. 89-392, eff. 8-20-95; 89-507, eff. 7-1-97;
- 5 90-655, eff. 7-30-98.)
- 6 (20 ILCS 505/17a-5) (from Ch. 23, par. 5017a-5)
- 7 Sec. 17a-5. The Department of Public Health Human Services
- 8 shall be successor to the Department of Human Services inasmuch
- 9 <u>as the Department of Human Services succeeded the</u> Department of
- 10 Children and Family Services in the latter Department's
- 11 capacity as successor to the Illinois Law Enforcement
- 12 Commission in the functions of that Commission relating to
- 13 juvenile justice and the federal Juvenile Justice and
- 14 Delinquency Prevention Act of 1974 as amended, and shall have
- 15 the powers, duties and functions specified in this Section
- 16 relating to juvenile justice and the federal Juvenile Justice
- 17 and Delinquency Prevention Act of 1974, as amended.
- 18 (1) Definitions. As used in this Section:
- 19 (a) "juvenile justice system" means all activities by
- 20 public or private agencies or persons pertaining to the
- 21 handling of youth involved or having contact with the
- 22 police, courts or corrections;
- 23 (b) "unit of general local government" means any
- county, municipality or other general purpose political
- 25 subdivision of this State;

- (c) "Commission" means the Illinois Juvenile Justice Commission provided for in Section 17a-9 of this Act.
- Public Health Human Services shall serve as the official State Planning Agency for juvenile justice for the State of Illinois and in that capacity is authorized and empowered to discharge any and all responsibilities imposed on such bodies by the federal Juvenile Justice and Delinquency Prevention Act of 1974, as amended, specifically the deinstitutionalization of status offenders, separation of juveniles and adults in municipal and county jails, removal of juveniles from county and municipal jails and monitoring of compliance with these mandates. In furtherance thereof, the Department of Public Health has the powers and duties set forth in paragraphs 3 through 15 of this Section:
- (3) To develop annual comprehensive plans based on analysis of juvenile crime problems and juvenile justice and delinquency prevention needs in the State, for the improvement of juvenile justice throughout the State, such plans to be in accordance with the federal Juvenile Justice and Delinquency Prevention Act of 1974, as amended;
- (4) To define, develop and correlate programs and projects relating to administration of juvenile justice for the State and units of general local government within the State or for combinations of such units for improvement in law enforcement;
  - (5) To advise, assist and make recommendations to the

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Governor as to how to achieve a more efficient and effective juvenile justice system;

- (5.1) To develop recommendations to ensure the effective reintegration of youth offenders into communities to which they are returning. The Illinois Juvenile Justice Commission, utilizing available information provided by the Department of Juvenile Justice, the Prisoner Review Board, the Illinois Criminal Justice Information Authority, and any other relevant State agency, shall develop by September 30, 2010, a report on juveniles who have been the subject of a parole revocation within the past year in Illinois. The report shall provide information on the number of youth confined in the Department of Juvenile Justice for revocation based on a technical parole violation, the length of time the youth spent on parole prior to the revocation, the nature of the committing offense that served as the basis for the original commitment, demographic information including age, race, sex, and zip code of the underlying offense and the conduct leading to revocation. In addition, the Juvenile Justice Commission shall develop recommendations to:
  - (A) recommend the development of a tracking system to provide quarterly statewide reports on youth released from the Illinois Department of Juvenile Justice including lengths of stay in the Illinois Department of Juvenile Justice prior to release, length of monitoring post-release, pre-release services provided to each youth,

violations of release conditions including length of release prior to violation, nature of violation, and intermediate sanctions offered prior to violation;

- (B) recommend outcome measures of educational attainment, employment, homelessness, recidivism, and other appropriate measures that can be used to assess the performance of the State of Illinois in operating youth offender reentry programs;
- (C) recommend due process protections for youth during release decision-making processes including, but not limited to, parole revocation proceedings and release on parole.

The Commission shall study and make recommendations to the Governor and General Assembly to ensure the effective treatment and supervision of the specialized population of juvenile offenders who are adjudicated delinquent for a sex offense. The Illinois Juvenile Justice Commission shall utilize available information and research on best practices within the State and across the nation including, but not limited to research and recommendations from the U.S. Department of Justice. Among other relevant options, the Commission shall: consider requiring specially trained probation, parole or aftercare officers to supervise juveniles adjudicated as sex offenders; explore the development of individualized probation or parole orders which would include, but is not limited to, supervision and treatment options for juveniles adjudicated as sex

- 1 offenders; and consider the appropriateness and feasibility of
- 2 restricting juveniles adjudicated as sex offenders from
- 3 certain locations including schools and parks.
- 4 The Juvenile Justice Commission shall include information
- 5 and recommendations on the effectiveness of the State's
- 6 juvenile reentry programming, including progress on the
- 7 recommendations in subparagraphs (A) and (B) of this paragraph
- 8 (5.1), in its annual submission of recommendations to the
- 9 Governor and the General Assembly on matters relative to its
- 10 function, and in its annual juvenile justice plan. This
- 11 paragraph (5.1) may be cited as the Youth Reentry Improvement
- 12 Law of 2009;
- 13 (6) To act as a central repository for federal, State,
- 14 regional and local research studies, plans, projects, and
- 15 proposals relating to the improvement of the juvenile justice
- 16 system;
- 17 (7) To act as a clearing house for information relating to
- all aspects of juvenile justice system improvement;
- 19 (8) To undertake research studies to aid in accomplishing
- 20 its purposes;
- 21 (9) To establish priorities for the expenditure of funds
- 22 made available by the United States for the improvement of the
- juvenile justice system throughout the State;
- 24 (10) To apply for, receive, allocate, disburse, and account
- 25 for grants of funds made available by the United States
- 26 pursuant to the federal Juvenile Justice and Delinquency

- Prevention Act of 1974, as amended; and such other similar legislation as may be enacted from time to time in order to plan, establish, operate, coordinate, and evaluate projects directly or through grants and contracts with public and private agencies for the development of more effective education, training, research, prevention, diversion, treatment and rehabilitation programs in the area of juvenile delinquency and programs to improve the juvenile justice system;
  - (11) To <u>ensure</u> insure that no more than the maximum percentage of the total annual State allotment of juvenile justice funds be utilized for the administration of such funds;
  - (12) To provide at least 66-2/3 per centum of funds received by the State under the Juvenile Justice and Delinquency Prevention Act of 1974, as amended, are expended through:
    - (a) programs of units of general local government or combinations thereof, to the extent such programs are consistent with the State plan; and
  - (b) programs of local private agencies, to the extent such programs are consistent with the State plan;
- (13) To enter into agreements with the United States government which may be required as a condition of obtaining federal funds;
- 25 (14) To enter into contracts and cooperate with units of 26 general local government or combinations of such units, State

- 1 agencies, and private organizations of all types, for the
- 2 purpose of carrying out the duties of the Department imposed by
- 3 this Section or by federal law or regulations;
- 4 (15) To exercise all other powers that are reasonable and
- 5 necessary to fulfill its functions under applicable federal law
- or to further the purposes of this Section.
- 7 (Source: P.A. 96-853, eff. 12-23-09; 96-1271, eff. 1-1-11;
- 8 97-163, eff. 1-1-12.)
- 9 (20 ILCS 505/17a-6) (from Ch. 23, par. 5017a-6)
- 10 Sec. 17a-6. (A) Personnel exercising the rights, powers and
- 11 duties in the Department of Children and Family Services
- 12 Illinois Law Enforcement Commission that are transferred to the
- 13 Department of Public Health Children and Family Services are
- 14 transferred to the Department of Public Health Children and
- 15 Family Services. However, the rights of the employees, the
- 16 State and its agencies under the Personnel Code or any
- 17 collective bargaining agreement, or under any pension,
- 18 retirement or annuity plan shall not be affected by the
- 19 provisions of this amendatory Act.
- 20 (B) All books, records, papers, documents, property (real
- or personal), unexpended appropriations and pending business
- 22 in any way pertaining to the rights, powers and duties
- transferred from the Department of Children and Family Services
- 24 Illinois Law Enforcement Commission to the Department of Public
- 25 Health Children and Family Services shall be delivered and

- transferred to the Department of <u>Public Health</u> Children and Family Services.
- 3 (C) (Blank). The provisions of subsections (A) and (B) of
- 4 this Section are superseded by the applicable transfer and
- 5 savings provisions of the Department of Human Services Act.
- 6 (Source: P.A. 89-507, eff. 7-1-97.)
- 7 (20 ILCS 505/17a-7) (from Ch. 23, par. 5017a-7)
- 8 Sec. 17a-7. Units of General Local Government Agreements
- 9 for Funds. Units of general local government may apply for,
- 10 receive, disburse, allocate and account for grants of funds
- 11 made available by the United States government, or by the State
- of Illinois, particularly including grants made available
- 13 pursuant to the federal Juvenile Justice and Delinquency
- 14 Prevention Act of 1974, including subsequent amendments or
- reenactments, if any: and may enter into agreements with the
- 16 Department of Public Health or with the United States
- 17 government which may be required as a condition of obtaining
- 18 federal or State funds, or both.
- 19 (Source: P.A. 82-975.)
- 20 (20 ILCS 505/17a-9) (from Ch. 23, par. 5017a-9)
- 21 Sec. 17a-9. Illinois Juvenile Justice Commission.
- 22 (a) There is hereby created the Illinois Juvenile Justice
- 23 Commission which shall consist of 25 persons appointed by the
- 24 Governor. The Chairperson of the Commission shall be appointed

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by the Governor. Of the initial appointees, 8 shall serve a one-year term, 8 shall serve a two-year term and 9 shall serve a three-year term. Thereafter, each successor shall serve a three-year term. Vacancies shall be filled in the same manner as original appointments. Once appointed, members shall serve until their successors are appointed and qualified. Members shall serve without compensation, except they shall reimbursed for their actual expenses in the performance of their duties. The Commission shall carry out the rights, powers and duties established in subparagraph (3) of paragraph (a) of Section 223 of the Federal "Juvenile Justice and Delinquency Prevention Act of 1974", as now or hereafter amended. The Commission shall determine the priorities for expenditure of funds made available to the State by the Federal Government pursuant to that Act. The Commission shall have the following powers and duties:

- (1) Development, review and final approval of the State's juvenile justice plan for funds under the Federal "Juvenile Justice and Delinquency Prevention Act of 1974";
- (2) Review and approve or disapprove juvenile justice and delinquency prevention grant applications to the Department for federal funds under that Act;
- (3) Annual submission of recommendations to the Governor and the General Assembly concerning matters relative to its function;
  - (4) Responsibility for the review of funds allocated to

- Illinois under the "Juvenile Justice and Delinquency Prevention Act of 1974" to ensure compliance with all relevant federal laws and regulations;
  - (5) Function as the advisory committee for the State Youth and Community Services Program as authorized under Section 17 of this Act, and in that capacity be authorized and empowered to assist and advise the <u>Director of Public Health Secretary of Human Services</u> on matters related to juvenile justice and delinquency prevention programs and services; and
  - (6) Study the impact of, develop timelines, and propose a funding structure to accommodate the expansion of the jurisdiction of the Illinois Juvenile Court to include youth age 17 under the jurisdiction of the Juvenile Court Act of 1987. The Commission shall submit a report by December 31, 2011 to the General Assembly with recommendations on extending juvenile court jurisdiction to youth age 17 charged with felony offenses.
  - (b) On the effective date of this amendatory Act of the 96th General Assembly, the Illinois Juvenile Jurisdiction Task Force created by Public Act 95-1031 is abolished and its duties are transferred to the Illinois Juvenile Justice Commission as provided in paragraph (6) of subsection (a) of this Section.
- 24 (Source: P.A. 96-1199, eff. 1-1-11.)

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Sec. 17a-10. The Department of <u>Public Health</u> <u>Human Services</u>
may administer unified delinquency intervention services to
provide community-based alternatives to commitment to the
Department of Corrections of children adjudicated as
delinquent minors, and who meet such criteria as established by
rules of the Department of <u>Public Health</u> <u>Human Services</u>.

7 (Source: P.A. 89-507, eff. 7-1-97.)

8 (20 ILCS 505/17a-11) (from Ch. 23, par. 5017a-11)

Sec. 17a-11. Governor's Youth Services Initiative. In cooperation with the Department of Juvenile Justice, the Department of Human Services, the Department of Public Health, and the Illinois State Board of Education, the Department of Children and Family Services shall establish the Governor's Youth Services Initiative. This program shall offer assistance to multi-problem youth whose difficulties are not the clear responsibility of any one state agency, and who are referred to the program by the juvenile court. The decision to establish and to maintain an initiative program shall be based upon the availability of program funds and the overall needs of the service area.

A Policy Board shall be established as the decision-making body of the Governor's Youth Services Initiative. The Board shall be composed of State agency liaisons appointed by the Secretary of Human Services, the Directors of the Department of Children and Family Services and the Department of Juvenile

- 1 Justice, and the State Superintendent of Education. The Board
- 2 shall meet at least quarterly.
- 3 The Department of Children and Family Services may
- 4 establish a system of regional interagency councils in the
- 5 various geographic regions of the State to address, at the
- 6 regional or local level, the delivery of services to
- 7 multi-problem youth.
- 8 The Department of Children and Family Services in
- 9 consultation with the aforementioned sponsors of the program
- shall promulgate rules and regulations pursuant to the Illinois
- 11 Administrative Procedure Act, for the development of
- initiative programs in densely populated areas of the State to
- meet the needs of multi-problem youth.
- 14 (Source: P.A. 94-696, eff. 6-1-06.)
- 15 (20 ILCS 505/17a-15)
- 16 Sec. 17a-15. Community service programs; Department of
- 17 Public Health Human Services.
- 18 (a) The Department of <u>Public Health</u> <u>Human Services</u> must
- 19 establish a program to award grants to area projects to plan,
- 20 establish, operate, coordinate, and evaluate community
- 21 services programs. For purposes of this Section, "area project"
- means an entity whose purpose is to develop, manage, provide,
- 23 and coordinate a community services program and "community
- 24 services program" means a program, based on the Chicago Area
- 25 Project Model, aimed at changing social, cultural, and

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- environmental conditions that prevent youth and families from maximizing their potential and that place youth in a condition that increases their tendency to become involved in the juvenile justice or child welfare systems.
  - (b) The Department of Public Health Human Services must, by rule, establish the eligibility criteria for an area project, including the composition and responsibilities governing authority of an area project, application requirements, service components of community services programs, and the review and monitoring of community services program plans. At a minimum, an area project must be a not-for-profit organization (i)(A) whose preponderance of resources is directed to community services programs that are different than intervention-oriented youth services or (B) that creates through an amendment to its by-laws or other binding agreement a specific body whose purpose is to develop, manage, provide, and coordinate a community services program and (ii) that includes representation from any community committee, as defined by rule of the Department of Public Health Human Services, of the area project and may also include business and industry leaders, educators, and other concerned citizens.
    - (c) The Department of <u>Public Health</u> <u>Human Services</u> shall fund community services programs by grants made through negotiated contracts, which are written agreements mutually agreed upon by the Department and the area project. The payment

- of funds to area projects under the community services program
- 2 shall be in the form of a grant paid in equal monthly
- 3 installments. In the event of reduced or insufficient funding,
- 4 existing grants shall receive proportionate reductions.
- 5 (Source: P.A. 93-730, eff. 7-14-04.)
- 6 Section 20. The Illinois Commission on Volunteerism and
- 7 Community Service Act is amended by changing Sections 1, 2,
- 8 6.1, and 7 as follows:
- 9 (20 ILCS 710/1) (from Ch. 127, par. 3801)
- 10 Sec. 1. Creation. There is created in the Department of
- 11 Public Health Human Services the Illinois Commission on
- 12 Volunteerism and Community Service.
- 13 (Source: P.A. 91-798, eff. 7-9-00.)
- 14 (20 ILCS 710/2) (from Ch. 127, par. 3802)
- 15 Sec. 2. Purpose. The purpose of the Illinois Commission on
- 16 Volunteerism and Community Service is to promote and support
- 17 community service in public and private programs to meet the
- needs of Illinois citizens; to stimulate new volunteerism and
- 19 community service initiatives and partnerships; and to serve as
- 20 a resource and advocate within the Department of Public Health
- 21 Human Services for community service agencies, volunteers, and
- 22 programs which utilize State and private volunteers.
- 23 (Source: P.A. 91-798, eff. 7-9-00.)

- 1 (20 ILCS 710/6.1)
- 2 Sec. 6.1. Functions of Commission. The Commission shall
- 3 meet at least quarterly and shall advise and consult with the
- 4 Department of <u>Public Health</u> Human Services and the Director of
- 5 Public Health on all matters relating to community service in
- 6 Illinois. In addition, the Commission shall have the following
- 7 duties:
- 8 (a) prepare a 3-year national and community service plan,
- 9 developed through an open, public process and updated annually;
- 10 (b) prepare the financial assistance applications of the
- 11 State under the National and Community Service Trust Fund Act
- 12 of 1993;
- 13 (c) assist in the preparation of the application by the
- 14 State Board of Education for assistance under that Act:
- 15 (d) prepare the State's application under that Act for the
- 16 approval of national service positions;
- 17 (e) assist in the provision of health care and child care
- 18 benefits under that Act;
- 19 (f) develop a State recruitment, placement, and
- 20 information dissemination system for participants in programs
- 21 that receive assistance under the national service laws;
- 22 (g) administer the State's grant program including
- 23 selection, oversight, and evaluation of grant recipients;
- 24 (h) make technical assistance available to enable
- 25 applicants to plan and implement service programs and to apply

- for assistance under the national service laws;
- 2 (i) develop projects, training methods, curriculum
- 3 materials, and other activities related to service;
- 4 (j) coordinate its functions with any division of the
- 5 federal Corporation for National and Community Service
- 6 outlined in the National and Community Service Trust Fund Act
- 7 of 1993.
- 8 (k) publicize Commission services and promote community
- 9 involvement in the activities of the Commission;
- 10 (1) promote increased visibility and support for
- 11 volunteers of all ages, especially youth and senior citizens,
- 12 and community service in meeting the needs of Illinois
- 13 citizens; and
- 14 (m) represent the Department of Public Health Human
- 15 Services on such occasions and in such manner as the Department
- 16 may provide.
- 17 (Source: P.A. 91-798, eff. 7-9-00.)
- 18 (20 ILCS 710/7)
- Sec. 7. <u>Transfer.</u> On <u>May 19, 2006 (the effective date of a sec. 7).</u>
- 20 Public Act 94-793) this amendatory Act of the 91st General
- 21 Assembly, the authority, powers, and duties in this Act of the
- Department of Commerce and Community Affairs (now Department of
- 23 Commerce and Economic Opportunity) are transferred to the
- 24 Department of Human Services.
- On the effective date of this amendatory Act of the 97th

- 1 General Assembly, the authority, powers, and duties in this Act
- 2 under the Department of Human Services are transferred to the
- 3 Department of Public Health.
- 4 (Source: P.A. 94-793, eff. 5-19-06.)
- 5 Section 25. The Department of Human Services Act is amended
- 6 by changing Sections 80-10 and 80-15 as follows:
- 7 (20 ILCS 1305/80-10)
- 8 Sec. 80-10. Discontinued departments and offices;
- 9 successor agency.
- 10 (a) The Department of Alcoholism and Substance Abuse, the
- 11 Department of Mental Health and Developmental Disabilities,
- 12 and the Department of Rehabilitation Services are abolished on
- 13 July 1, 1997.
- 14 (b) The terms of the persons then serving as the directors
- and assistant directors of the Department of Alcoholism and
- 16 Substance Abuse, the Department of Mental Health and
- 17 Developmental Disabilities, and the Department of
- 18 Rehabilitation Services shall end on July 1, 1997, and those
- offices are abolished on that date.
- 20 (c) For the purposes of the Successor Agency Act, the
- 21 Department of Human Services is declared to be the successor
- 22 agency of the Department of Alcoholism and Substance Abuse, the
- 23 Department of Mental Health and Developmental Disabilities,
- and the Department of Rehabilitation Services.

- 1 (d) For the purposes of the Successor Agency Act, the
- 2 Department of Human Services is declared to be the successor
- 3 agency of the Department of Public Aid, the Department of
- 4 Public Health, and the Department of Children and Family
- 5 Services, but only with respect to the functions of those
- 6 Departments that are transferred to the Department of Human
- 7 Services under this Act.
- 8 (Source: P.A. 89-507, eff. 7-3-96.)
- 9 (20 ILCS 1305/80-15)
- Sec. 80-15. Transfer of powers.
- 11 (a) Except as otherwise provided in this Act, all of the
- 12 rights, powers, duties, and functions vested by law in the
- 13 Department of Alcoholism and Substance Abuse, the Department of
- 14 Mental Health and Developmental Disabilities, and the
- 15 Department of Rehabilitation Services or in any office,
- 16 council, committee, division, or bureau thereof are
- 17 transferred to the Department of Human Services on July 1,
- 18 1997.
- 19 (b) The rights, powers, duties, and functions vested in the
- Department of Public Aid (or in any office, council, committee,
- 21 division, or bureau thereof) under Articles III, IV, VI, IX,
- 22 and IXA of the Illinois Public Aid Code, with certain
- 23 exceptions specified in that Code, are transferred to the
- Department of Human Services on July 1, 1997.
- In addition, the Department of Human Services may also

- 1 exercise the rights, powers, duties, and functions vested in
- the Department of Public Aid under Articles I, II, VIIIA, XI,
- 3 XII, and XIII of the Illinois Public Aid Code to the extent
- 4 that they relate to the Department of Human Services' rights,
- 5 powers, duties, and functions under Articles III, IV, VI, IX,
- 6 and IXA of the Illinois Public Aid Code, subject to certain
- 7 exceptions specified in that Code.
- 8 (c) (Blank). Certain rights, powers, duties, and functions
- 9 vested in the Department of Public Health are transferred to
- 10 the Department of Human Services on July 1, 1997, as provided
- 11 in Article 90 of this Act.
- 12 (d) Certain rights, powers, duties, and functions vested in
- 13 the Department of Children and Family Services are transferred
- 14 to the Department of Human Services on July 1, 1997, as
- provided in Article 90 of this Act.
- 16 (e) Certain rights, powers, duties, and functions that were
- 17 transferred from the Department of Children and Family Services
- 18 to the Department of Human Services on July 1, 1997 are
- 19 transferred to the Department of Public Health pursuant to this
- amendatory Act of the 97th General Assembly.
- 21 (Source: P.A. 89-507, eff. 7-3-96.)
- 22 Section 30. The Domestic Violence Shelters Act is amended
- 23 by changing Sections 2, 3, and 3.2 as follows:
- 24 (20 ILCS 1310/2) (from Ch. 40, par. 2402)

- 1 Sec. 2. The Department of <u>Public Health</u> Human Services
- 2 shall administer domestic violence shelters and service
- 3 programs, or shall provide for their administration by
- 4 not-for-profit corporations with whom the Department has
- 5 contracts, for adults and their dependents who are the subjects
- 6 of domestic violence.
- 7 (Source: P.A. 89-507, eff. 7-1-97.)
- 8 (20 ILCS 1310/3) (from Ch. 40, par. 2403)
- 9 Sec. 3. The Department of Public Health Human Services
- shall provide for the funding of domestic violence shelters and
- 11 service programs in part from the Domestic Violence Shelter and
- 12 Service Fund and in part from the General Revenue Fund. In
- 13 allotting monies from such fund, the Department shall give
- priority to shelters or programs offering or proposing to offer
- 15 the broadest range of services and referrals to the community
- 16 served. Such shelters or programs may be operated by
- 17 community-based organizations or units of local government.
- 18 The Department shall require shelters or programs eligible for
- 19 funding under this Act to provide matching funds in such
- 20 percentage as the Department shall by rule determine and such
- 21 percentage shall be uniform throughout the State.
- 22 (Source: P.A. 89-507, eff. 7-1-97.)
- 23 (20 ILCS 1310/3.2) (from Ch. 40, par. 2403.2)
- Sec. 3.2. All funds collected pursuant to P.A. 82-645,

which are held in escrow for refund and for which a refund is 1 2 not approved by September 1, 1988, shall be forwarded to the State Treasurer for deposit into the Domestic Violence Shelter 3 and Service Fund. The Domestic Violence Shelter and Service 5 Fund shall also include fines received by the State Treasurer 6 from circuit clerks in accordance with Section 5-9-1.5 of the 7 Unified Code of Corrections. Monies deposited in the Fund 8 pursuant to this Section and the income tax check-off for the 9 Domestic Violence Shelter and Service Fund authorized by 10 Section 507F of the Illinois Income Tax Act. shall be 11 appropriated to the Department of Public Health Human Services 12 for the purpose of providing services specified by this Act; 13 however, the Department may waive the matching 14 requirement of this Act with respect to such monies. Any such 15 waiver shall be uniform throughout the State. This amendatory 16 Act of 1987 applies to all funds collected pursuant to PA 17 82-645, held in escrow and for which no refund is approved by September 1, 1988, whether those funds are administered by the 18 State, a county, a court, or any other unit or agency of 19 20 government.

21 (Source: P.A. 89-507, eff. 7-1-97.)

Section 35. The Illinois Youthbuild Act is amended by changing Sections 10, 15, 20, 40 and 45 as follows:

24 (20 ILCS 1315/10)

- 1 Sec. 10. Definitions. In this Act:
- 2 "Applicant" means a public or private not-for-profit
- 3 agency eligible to provide education and employment training
- 4 under federal or State employment training programs.
- 5 "Director" means the Director of Public Health.
- 6 "Secretary" means the Secretary of Human Services.
- 7 "Very low-income" means a person or household whose income
- 8 is at or below 50% of the median family income, adjusted for
- 9 household size, for the county where the household is located.
- "Youthbuild" means any program that provides disadvantaged
- 11 youth with opportunities for employment, education, leadership
- development, entrepreneurial skills development, and training
- in the construction or rehabilitation of housing for special
- 14 need populations, very low-income households, or low-income
- 15 households.
- 16 (Source: P.A. 90-247, eff. 1-1-98.)
- 17 (20 ILCS 1315/15)
- 18 Sec. 15. Program requirements. The Director Secretary
- shall, subject to appropriation, make grants to applicants for
- 20 the purpose of carrying out Youthbuild programs as approved
- 21 under this Section. All programs funded pursuant to the
- 22 provisions of this Section shall reflect strong youth and
- 23 community involvement. In addition, funding provided under
- 24 this Section shall be used by each Youthbuild program to
- 25 provide, at a minimum, the following services:

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- Acquisition, rehabilitation, acquisition (a) rehabilitation, or construction of housing and related facilities to be used for the purpose of providing home ownership for disadvantaged persons, residential housing homeless individuals, and low-income and very low-income families, or transitional housing for persons are homeless, have disabilities, are ill, deinstitutionalized, have or special needs, and rehabilitation or construction of community facilities owned by not-for-profit or public agencies.
- (b) Integrated education and job skills training services and activities which are evenly divided within the with 50% of students' time program, spent classroom-based instruction, counseling, and leadership development instruction and 50% of their time spent in experiential training on the construction site. The programs shall include, at a minimum, the following elements:
  - (1) An education component which includes basic skills instruction, secondary education services, and other activities designed to lead to the attainment of a high school diploma or its equivalent. The curriculum for this component shall include math, language arts, vocational education, life skills training, social studies related to the cultural and community history of the students, leadership skills, and other topics at

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the discretion of the programs. Bilingual services shall be available for individuals with limited-English proficiency. The desired minimum teacher to student ratio shall be one teacher for every 18 students.

- (2) A work experience and skills component program that includes the construction and rehabilitation activities described in subsection (a). The process of construction must be coupled with skills training and with close on-site supervision by experienced trainers. The curriculum for this component shall contain a set of locally agreed upon skills and competencies that are systematically taught, with a student's mastery assessed individually on a regular, ongoing basis. Safety skills shall be taught at the outset. The desired trainer to student ratio shall be one trainer for every 7 students. The work experience and skills training component shall be coordinated to the maximum extent feasible with preapprenticeship and apprenticeship programs.
- (3) Assistance in attaining post secondary education and required financial aid shall be made available to participants prior to graduation.
- (c) Counseling services designed to assist participants to positively participate in society, which should include all of the following if necessary: outreach,

assessment, and orientation; individual and peer counseling; life skills training, drug and alcohol abuse education and prevention; and referral to appropriate drug rehabilitation, medical, mental health, legal, housing, and other services and resources in the community. The desired counselor to participant ratio shall be one counselor for every 28 students.

(d) Leadership development training that provides participants with meaningful opportunities to develop leadership skills such as decision making, problem solving, and negotiating. The program must also encourage participants to develop strong peer group ties that support their mutual pursuit of skills and values.

All programs must establish a youth council in which participants are afforded opportunities to develop public speaking and negotiating skills, and management and policy making participation in specific aspects of the program.

(e) Stipends and wages. A training subsidy, living allowance, or stipend that will be no less than minimum wage must be provided to program participants for the time spent at the worksite in construction training. For those participants who receive public assistance, this training subsidy, living allowance, or stipend will not affect their housing benefits, medical benefits, child care benefits or food stamp benefits. Stipends and wages may be distributed in a manner that offers incentives for good performance.

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- 1 (f) Full time participation in a Youthbuild program
  2 shall be offered for a period of not less than 6 months and
  3 not more than 24 months.
  - (g) A concentrated effort shall be made to find construction, construction-related, and nonconstruction jobs for all graduates of the program who have performed well. The skills training curriculum shall provide participants with basic preparation for seeking and maintaining a job. Follow-up counseling and assistance in job-seeking shall also be provided to participants for at least 12 months following graduation from the program.
  - (h) All programs serving 28 trainees or more are required to have a full-time director responsible for the coordination of all aspects of the Youthbuild program.
- 15 (Source: P.A. 95-524, eff. 8-28-07.)
- 16 (20 ILCS 1315/20)
- Sec. 20. Eligible activities. Implementation grants may be used to carry out the activities listed in Section 15. Other eligible activities include the following:
- 20 (a) Legal fees for housing acquisition.
  - (b) Administrative costs of the applicant which may not exceed 15% of the amount of assistance provided, or such higher percentage as the <u>Director Secretary</u> determines is necessary to support capacity development of a private nonprofit community-based organization.

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- (c) Defraying costs for the ongoing training and technical assistance needs of the recipient that are related to developing and carrying out the Youthbuild program including:
- (1) The Director Secretary may reserve up to 5% of the 4 5 Illinois Youthbuild program appropriations to enter into a contract with Youthbuild USA to provide assistance to the 6 7 <u>Director</u> Secretary in the provision of training and to 8 technical assistance to, or in the management, 9 supervision, and coordination of, Youthbuild programs 10 under this Act.
- 11 (Source: P.A. 90-247, eff. 1-1-98.)
- 12 (20 ILCS 1315/40)
- Sec. 40. Application requirements. The <u>Director</u> <del>Secretary</del> shall require that an application for Youthbuild funds under this Act contain at a minimum:
- 16 (1) a request for an implementation grant, specifying 17 the amount of the grant requested and its proposed uses;
  - (2) a description of the applicant and a statement of its qualifications, including a description of the applicant's past experience running a Youthbuild program, and with housing rehabilitation or construction and with youth and youth education, youth leadership development and employment training programs, and its relationship with local unions and youth apprenticeship programs, and other community groups;

- (3) a description of the proposed construction site for the program and evidence of site control;
  - (4) a description of the educational and job training activities, work opportunities, and other services that will be provided to participants;
  - (5) a description of the proposed construction or rehabilitation activities to be undertaken and the anticipated schedule for carrying out such activities;
  - (6) a description of the manner in which eligible youths will be recruited and selected, including a description of the arrangements which will be made with community-based organizations, local educational agencies, including agencies of Native American nations, public assistance agencies, the courts of jurisdiction for status and youth offenders, shelters for homeless individuals and other agencies that serve homeless youth, foster care agencies, and other appropriate public and private agencies;
  - (7) a description of the special efforts that will be undertaken to recruit eligible young women (including young women with dependent children) with appropriate supports, especially childcare;
  - (8) a description of how the proposed program will be coordinated with other federal, State, and local activities and activities conducted by Native American nations, including public schools, national service, crime

prevention	programs,	vocat	ional,	adult,	and	bilingual
education p	rograms, a	nd job t	raining	ſ <i>;</i>		

- (9) assurances that there will be a sufficient number of adequately trained supervisory personnel in the program who have attained the level of journeyman or its equivalent;
- (10) a description of the applicant's relationship with any local building trade unions which may exist, regarding their involvement in training, and the relationship of the Youthbuild program with registered apprenticeship programs;
- (11) a description of activities that will be undertaken to develop the leadership skills of participants, including their role in decision making;
- (12) a detailed budget and a description of the system of fiscal controls and auditing and accountability procedures that will be used to ensure fiscal soundness;
- (13) a description of any contracts and arrangements entered into between the applicant and other agencies and entities including all in-kind donations and grants from both public and private entities that will serve to augment Illinois Youthbuild Act funds;
- (14) identification and description of the financing proposed for any:
  - (A) acquisition of the property;
- (B) rehabilitation; or

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(C) construction;

- (15) identification and description of the entity that will operate and manage the property;
  - (16) a certification that the applicant will comply with the requirements of the Fair Housing Act, Title VI of the Civil Rights Act of 1964, Section 504 of the Rehabilitation Act of 1973, and the Age Discrimination Act of 1975, and will affirmatively further fair housing; and
- 9 (17) the qualifications and past experience of the 10 person who will fill the full-time program director 11 position.
- 12 (Source: P.A. 95-524, eff. 8-28-07.)
- 13 (20 ILCS 1315/45)
- Sec. 45. Annual report. The Department of Public Health 14 15 Human Services shall prepare an annual report summarizing costs 16 and outcome data associated with the Youthbuild programs. The report must include, but not be limited to, the following 17 18 information: (i) the number of participants in the program, (ii) the average cost per participant, (iii) the number of 19 20 participants who achieve a high school diploma or its 21 equivalent, and (iv) the number of projects completed by 22 Youthbuild participants during that year. The Department of Public Health must submit the report to the General Assembly by 23 24 July 1, 2008 and by July 1 of each year thereafter.
- 25 (Source: P.A. 95-524, eff. 8-28-07.)

- 1 Section 40. The Department of Public Health Powers and
- 2 Duties Law of the Civil Administrative Code of Illinois is
- 3 amended by changing Section 2310-435 and by adding Sections
- 4 2310-665, 2310-670, 2310-675, 2310-680, 2310-685, 2310-690,
- 5 2310-695, 2310-700, 2310-705, and 2310-710 as follows:
- 6 (20 ILCS 2310/2310-435) (was 20 ILCS 2310/55.44)
- 7 Sec. 2310-435. Smoking cessation program for WIC
- 8 participants.
- 9 (a) (Blank).
- 10 (b) (Blank).
- 11 (c) The Department, in cooperation with the Department of
- 12 Human Services, shall maintain a smoking cessation program for
- 13 participants in the Women, Infants and Children Nutrition
- 14 Program. The program shall include, but not be limited to,
- tobacco use screening, education on the effects of tobacco use,
- and smoking cessation counseling and referrals.
- 17 (Source: P.A. 91-239, eff. 1-1-00.)
- 18 (20 ILCS 2310/2310-665 new)
- 19 Sec. 2310-665. Infant mortality reduction; special
- 20 population groups. The Department shall include within its
- 21 infant mortality reduction programs and materials information
- 22 directed toward Hispanics, people of African descent, and other
- 23 population groups residing in areas that experience high rates

- of infant mortality. The information shall inform these groups 1
- 2 about the causes of infant mortality and the steps which may be
- 3 taken to reduce the risk of early infant death.
- 4 (20 ILCS 2310/2310-670 new)
- 5 Sec. 2310-670. The Crisis Nursery Fund.
- 6 appropriations to the Department from the Crisis Nursery Fund,
- 7 which was created by Public Act 96-627 as a special fund in the
- 8 State treasury, the Department shall make grants, in equal
- 9 amounts, to crisis nurseries located in Illinois. For the
- purposes of this Section, a "crisis nursery" is an organization 10
- 11 licensed by the Department that operates on a continuous basis
- 12 and provides immediate crisis child care, respite care, parent
- 13 support, and parent education groups. A child care center does
- 14 not qualify as a crisis nursery under this Section.
- 15 (20 ILCS 2310/2310-675 new)
- Sec. 2310-675. Postpartum depression. 16
- 17 (a) The Department shall develop and distribute a brochure
- or other information about the signs, symptoms, screening or 18
- detection techniques, and care for postpartum depression, 19
- 20 including, but not limited to, methods for patients and family
- 21 members to better understand the nature and causes of
- 22 postpartum depression in order to lower the likelihood that new
- 23 mothers will continue to suffer from this illness. This
- brochure shall be developed in conjunction with the Illinois 24

- State Medical Society, the Illinois Society for Advanced 1
- 2 Practice Nursing, and any other appropriate statewide
- 3 organization of licensed professionals.
- 4 The brochure required under subsection (a) of this
- Section shall be distributed, at a minimum, to physicians 5
- licensed to practice medicine in all its branches, certified 6
- 7 nurse midwives, and other health care professionals who provide
- 8 care to pregnant women in a hospital, office, or clinic.
- 9 (c) The Director may contract with a statewide organization
- 10 of physicians licensed to practice medicine in all its branches
- 11 for the purposes of this Section.
- 12 (20 ILCS 2310/2310-680 new)
- 1.3 Sec. 2310-680. Women, Infants, and Children (WIC)
- nutrition program. 14
- 15 (a) The Department shall participate in the Women, Infants,
- 16 and Children nutrition program of the federal government to the
- maximum extent permitted by the federal appropriation and 17
- 18 allocation to the State. The Department shall report quarterly
- to the Governor and the General Assembly the status of 19
- 20 obligations and expenditures of the WIC nutrition program
- 21 appropriation and make recommendations on actions necessary to
- 22 expend all available federal funds. Other appropriations and
- 23 funds from any public or private source in addition to federal
- 24 funds may be used by the Department for the purpose of maximum
- 25 participation in the WIC nutrition program.

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program for participants in the Women, Infants, and Children

(b) The Department shall maintain a drug abuse education

nutrition program. The program shall include, but need not be

limited to, (1) the provision of information concerning the

dangers of drug abuse and (2) the referral of participants who

are suspected drug abusers to drug abuse clinics, treatment

programs, counselors, or other drug abuse treatment providers.

(c) The Department may contract with any bank as defined by the Illinois Banking Act to redeem bank drafts issued by the Department under the United States Department of Agriculture Special Supplemental Food Program for Women, Infants, and Children (WIC). Any bank with which the Department has entered into a contract to redeem bank drafts may receive, pursuant to an appropriation to the Department, an initial advance and periodic payment of funds for the Women, Infants, and Children Program in amounts determined by the Director. Notwithstanding any other law, such funds shall be retained in a separate account by the bank. Any interest earned by monies in such account shall accrue to the USDA Women, Infants, and Children Fund and shall be used exclusively for the redemption of bank drafts issued by the Department. WIC program food funds received by the bank from the Department shall be used exclusively for the redemption of bank drafts. The bank shall not use such food funds, or interest accrued thereon, for any other purpose including, but not limited to, reimbursement of administrative expenses or payments of administrative fees due

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1 the bank pursuant to its contract or contracts with the
2 Department.

Such initial and periodic payments by the Department to the bank shall be effected, pursuant to an appropriation, in an amount needed for the redemption of bank drafts issued by the Department under the United States Department of Agriculture Special Supplemental Food Program for Women, Infants, and Children in any initial or succeeding period. The State Comptroller shall, upon presentation by the Director of adequate certification of funds needed for redemption of bank drafts, promptly draw a warrant payable to the bank for deposit to the separate account of the bank. Such certification may be in magnetic tape or computer output form, indicating the amount of the total payment made by the bank for the redemption of bank drafts from funds provided to the bank under this Section. The separate account of the bank established under this Section, any payments to that account, and the use of such account and funds shall be subject to (1) audit by the Department or a private contractor authorized by the Department to conduct audits, including, but not limited to, such audits as may be required by State law, (2) audit by the federal government or a private contractor authorized by the federal government, and (3) post audit pursuant to the Illinois State Auditing Act.

(d) The Department may include a program of lactation support services as part of the benefits and services provided

- for pregnant and breast feeding participants in the Women,
- 2 Infants, and Children nutrition program. The program may
- 3 include payment for breast pumps, breast shields, or any supply
- 4 <u>deemed essential for the successful maintenance of lactation,</u>
- 5 <u>as well as lactation specialists who are registered nurses,</u>
- 6 <u>licensed dietitians</u>, or persons who have successfully
- 7 <u>completed a lactation management training program.</u>
- 8 (e) The Department shall coordinate the operation of the
- 9 Women, Infants, and Children program with the Medicaid program
- 10 by interagency agreement whereby each program provides
- 11 information about the services offered by the other to
- 12 applicants for services.
- 13 (20 ILCS 2310/2310-685 new)
- 14 Sec. 2310-685. Sexual assault education program.
- 15 (a) The Department shall conduct a comprehensive study of
- 16 the needs of women with disabilities who reside in the
- 17 community as well as structured living environments regarding
- 18 sexual assault and the threat of sexual violence. The study
- 19 must include a needs assessment during the first year that
- 20 gathers input from women with disabilities, service providers,
- 21 and advocacy organizations. This study must inform the
- 22 development and implementation of educational programs for
- women with disabilities, including distribution of information
- 24 materials during the first year. These materials must include
- 25 information on indications of possible occurrences of sexual

- 1 assault, the rights of sexual-assault victims, and any public
- or private victim-assistance programs and resources available,
- 3 <u>including resources available through the Office of the</u>
- 4 Attorney General.
- 5 (b) The Department shall seek to attain any federal grants
- 6 or other funding that may be available for the purpose of this
- 7 Section.
- 8 (c) The Department shall adopt any rule necessary for the
- 9 implementation and administration of the program under this
- 10 <u>Section</u>.
- 11 (20 ILCS 2310/2310-690 new)
- 12 Sec. 2310-690. Folic acid; public information campaign.
- 13 The Department shall conduct a public information campaign to
- 14 (i) educate women about the benefits of consuming folic acid
- 15 before and during pregnancy to improve their chances of having
- a healthy baby and (ii) increase the consumption of folic acid
- by women of child-bearing age. The campaign must include
- information about the sources of folic acid.
- 19 (20 ILCS 2310/2310-695 new)
- Sec. 2310-695. Hispanic/Latino Teen Pregnancy Prevention
- 21 and Intervention Initiative.
- 22 <u>(a) The Department is authorized to establish a</u>
- 23 Hispanic/Latino Teen Pregnancy Prevention and Intervention
- 24 Initiative program.

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(a), the Department is authorized to award a grant to a qualified entity for the purpose of conducting research, education, and prevention activities to reduce pregnancy among Hispanic teenagers.

6 (20 ILCS 2310/2310-700 new)

Sec. 2310-700. Illinois Steps for Attaining Higher Education through Academic Development Program established. The Illinois Steps for Attaining Higher Education through Academic Development ("Illinois Steps AHEAD") program is established in the Department of Public Health. Illinois Steps AHEAD shall provide educational services and post-secondary educational scholarships for low-income middle and high school students. Program components shall include increased parent involvement, creative and engaging academic support for students, career exploration programs, college preparation, and increased collaboration with local schools. The Department of Public Health shall administer the program. The Department shall implement the program only if federal funding is made available for that purpose. All moneys received pursuant to the federal Gaining Early Awareness and Readiness for Undergraduate Programs shall be deposited into the Gaining Early Awareness and Readiness for Undergraduate Programs Fund, a special fund created in the State treasury. Moneys in this fund shall be appropriated to the Department of Public Health

- and expended for the purposes and activities specified by the
- 2 federal agency making the grant. All interest earnings on
- 3 amounts in the Gaining Early Awareness and Readiness for
- 4 Undergraduate Programs Fund shall accrue to the Gaining
- 5 Awareness and Readiness for Undergraduate Programs Fund and be
- 6 used in accordance with 34 C.F.R. 75.703.
- 7 (20 ILCS 2310/2310-705 new)
- 8 Sec. 2310-705. Division of Community Health, Prevention,
- 9 and Wellness.
- 10 (a) The Division of Community Health, Prevention, and
- 11 Wellness is created within the Department of Public Health. The
- 12 <u>Division shall have an officer as its head who shall be known</u>
- as the Deputy Director for Community Health, Prevention, and
- 14 Wellness and shall be under the direction, supervision, and
- 15 control of the Director of Public Health and shall perform the
- duties prescribed by the Director. The Deputy Director for
- 17 Community Health, Prevention, and Wellness shall serve as the
- 18 Director of Illinois' Maternal and Child Program, including the
- 19 Maternal and Child Health Services Block Grant and other grants
- 20 authorized by Title V of the federal Social Security Act.
- 21 (b) All of the rights, powers, duties, and functions vested
- 22 by law in the Department of Public Health's Office of Health
- 23 Promotion and the Department of Human Services' Division of
- 24 Community Health and Prevention or in any office, council,
- 25 committee, division, or bureau thereof are transferred to the

Department of Public Health's Division of Community Health,
Prevention, and Wellness on July 1, 2014.

(c) Personnel employed by the Department of Public Health's Office of Health Promotion and the Department of Human Services' Division of Community Health and Prevention, as that Division was staffed and structured on June 30, 2011, are transferred to the Department of Public Health's Division of Community Health, Prevention, and Wellness on July 1, 2014.

Personnel employed by any other predecessor agency or office on June 30, 2011 to perform duties within the Department of Public Health's Office of Health Promotion and the Department of Human Services' Division of Community Health and Prevention are transferred to the Department of Public Health's Office of Community Health, Prevention, and Wellness on July 1, 2014.

In the case of a person employed by a predecessor agency or office to perform both duties pertaining to a function transferred to the Department of Public Health's Office of Community Health, Prevention, and Wellness under this Section and duties pertaining to a function retained by the predecessor agency or office, the Director, in consultation with the head of the predecessor agency or office, shall determine whether to transfer the employee to the Department of Public Health's Office of Community Health, Prevention, and Wellness; until this determination has been made, the transfer shall not take effect.

The rights of State employees, the State, and its agencies
under the Personnel Code and applicable collective bargaining
agreements and retirement plans are not affected by this
Section.

(d) Except as provided in this subsection (d), all books, records, documents, property (real and personal), including office space, unencumbered appropriations, and pending business pertaining to the rights, powers, duties, and functions transferred to the Department of Public Health's Office of Community Health, Prevention, and Wellness under this Section shall be transferred and delivered to the Department of Public Health's Office of Community Health, Prevention, and Wellness effective July 1, 2014.

All of the general revenue funds, other State funds, and federal funds authorized for use by the Office of Community

Health and Prevention shall be transferred and delivered to the Department of Public Health's Office of Community Health,

Prevention, and Wellness effective July 1, 2014.

In the case of books, records, or documents that pertain both to a function transferred to the Department of Public Health's Office of Community Health, Prevention, and Wellness under this Section and to a function retained by a predecessor agency or office, the Director, in consultation with the head of the predecessor agency or office, shall determine whether the books, records, or documents shall be transferred, copied, or left with the predecessor agency or office; until this

1 <u>determination</u> has been made, the transfer shall not take

2 <u>effect.</u>

In the case of property or an unexpended appropriation that pertains both to a function transferred to the Department of Public Health's Office of Community Health, Prevention, and Wellness under this Section and to a function retained by a predecessor agency or office, the Director, in consultation with the head of the predecessor agency or office, shall determine whether the property or unexpended appropriation shall be transferred, divided, or left with the predecessor agency or office; until this determination has been made (and, in the case of an unexpended appropriation, notice of the determination has been filed with the State Comptroller), the transfer shall not take effect.

In the case of administrative functions performed by other units within the Department of Human Services and for the allocation of State or federal funds that benefited the Office of Community Health and Prevention as well as other divisions within the agency, the Director of Public Health and the Secretary of Human Services shall establish interagency agreements to continue these services and distribute these funds after July 1, 2014.

(e) The transfer authorized under this Section shall include the staff and contractors from the Department of Human Services' Office of Management Information Services who are responsible for the Cornerstone and eCornerstone management

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1 <u>information systems</u>, as well as the equipment and computer

hardware and software used to support the Cornerstone and

eCornerstone management information systems and any contracts

4 for end-user training.

5 (f) The transfer authorized under this Section shall 6 include the following programs: Commodity Supplemental Food 7 Program; Family Planning Services; Healthy Start; Health 8 Support Services; Parents Too Soon; Positive Youth 9 Development; School-Based/School-Linked Health Centers; 10 Subsequent Pregnancy Project; Tri-Agency Program; Unmarried 11 Parents; Americorps; All Our Kids (AOK) Early Childhood 12 Networks; Chicago Maternal and Child Health Grant; Childhood Asthma; Communities for Youth; Community Youth Services; 13 14 Delinquency Prevention; Developmental Child Education; 15 Disproportionate Minority Contact; Doula; Ending Violence 16 Against Women With Disabilities; Enforcing Underage Drinking Laws; Farmers' Market Nutrition Program; Fetal Alcohol 17 Spectrum Disorder; Fetal and Infant Mortality Review; 18 19 HealthWorks of Illinois; Healthy Child Care Illinois; Healthy 20 Families Illinois; High Risk Infant Follow-Up; HIV Project; Homeless Youth; Illinois Fatherhood Initiative; Juvenile 21 22 Detention Alternatives Initiative; Juvenile Justice 23 Transportation; Male Involvement; Mentoring Children of 24 Prisoners (MCOP); Parents Care and Share; Partners for Hope; 25 Partnerships for Success; Project LAUNCH; Release Upon

Request; Responsible Parenting; School Health; Targeted

- Intensive Prenatal Case Management; Team Illinois; Teen Parent 1
- 2 Services; Teen Pregnancy Prevention-Primary; Teen REACH;
- 3 Truancy Review Boards; and Youth Opportunity.
- 4 The Director of Public Health shall appoint a
- 5 transition team that includes relevant management and staff of
- the affected agencies, the Maternal and Child Health Advisory 6
- 7 Board, advocates, other advisory bodies, local service
- 8 providers, and service provider associations with expertise in
- 9 maternal and child health, faculty from the University of
- Illinois at Chicago School of Public Health, and other 10
- 11 consultants as the Director shall deem necessary to advise him
- 12 or her on the structure of the Office of Community Health,
- 13 Prevention, and Wellness and related programs
- 14 administrative functions of the Department of Public Health.
- 15 The transition team shall serve from the effective date of this
- amendatory Act of the 97th General Assembly until December 31, 16
- 17 2014.
- The Department of Public Health shall be responsible for 18
- 19 staffing the transition team and for paying expenses associated
- 20 with the team's activities. Other than consultants, members of
- 21 the transition team shall serve without compensation. Members
- 22 may be reimbursed for travel expenses related to the work of
- 23 the transition team.
- 24 By December 31, 2013, the transition team shall send the
- 25 Governor, President of the Senate, Speaker of the House of
- Representatives, Minority Leader of the Senate, and Minority 26

- Leader of the House a plan for the transition. The plan shall 1
- 2 include any further recommendations from the transition team
- 3 for legislation to support and effect the transfer.
- 4 (h) The Director of Public Health, the Secretary of Human
- 5 Services, and the Director of the University of Illinois at
- Chicago Division of Specialized Care for Children shall 6
- 7 collaborate earnestly and diligently to effect the transfer
- 8 authorized under this Section.
- 9 (20 ILCS 2310/2310-710 new)
- 10 Sec. 2310-710. Deputy Director for the Office of Community
- 11 Health, Prevention, and Wellness.
- 12 (a) The Deputy Director shall report directly to the
- 1.3 Director of Public Health. In choosing the Deputy Director for
- the Office of Community Health, Prevention, and Wellness, the 14
- 15 Director of Public Health shall consult with the Maternal and
- 16 Child Health Advisory Board.
- 17 (b) The Deputy Director must:
- 18 (1) hold a doctoral degree in one of the health
- 19 sciences;
- 20 (2) hold at least a master's degree in public health;
- 21 and
- 22 (3) have several years of demonstrated leadership
- 23 experience in public-sector maternal and child health
- 24 programs.
- (c) If the Deputy Director is a physician, then he or she 25

- 1 <u>must be board certified in obstetrics and gynecology</u>,
- 2 pediatrics, or family practice. If the Deputy Director is not a
- 3 physician, then the Department must appoint a medical director
- 4 who is board certification in obstetrics and gynecology,
- 5 pediatrics, or family practice and holds at least a master's
- 6 degree in public health to advise the Deputy Director.
- 7 Section 45. The Interagency Coordinating Council Act is
- 8 amended by changing Section 2 as follows:
- 9 (20 ILCS 3970/2) (from Ch. 127, par. 3832)
- 10 Sec. 2. Interagency Coordinating Council. There is hereby
- 11 created an Interagency Coordinating Council which shall be
- 12 composed of the Directors, or their designees, of the Illinois
- 13 Department of Children and Family Services, Illinois
- 14 Department of Commerce and Economic Opportunity, Illinois
- Department of Corrections, Illinois Department of Employment
- 16 Security, Illinois Department of Public Health, and Illinois
- 17 Department of Healthcare and Family Services; the Secretary of
- 18 Human Services or his or her designee; the Executive Director,
- or a designee, of the Illinois Community College Board, the
- 20 Board of Higher Education, and the Illinois Planning Council on
- 21 Developmental Disabilities; the State Superintendent of
- 22 Education, or a designee; and a designee representing the
- 23 University of Illinois Division of Specialized Care for
- 24 Children. The Secretary of Human Services (or the member who is

- 1 the designee for the Secretary of Human Services) and the State
- 2 Superintendent of Education (or the member who is the designee
- 3 for the State Superintendent of Education) shall be co-chairs
- 4 of the Council. The co-chairs shall be responsible for ensuring
- 5 that the functions described in Section 3 of this Act are
- 6 carried out.
- 7 (Source: P.A. 94-793, eff. 5-19-06; 95-331, eff. 8-21-07.)
- 8 Section 50. The State Finance Act is amended by changing
- 9 Section 25 as follows:
- 10 (30 ILCS 105/25) (from Ch. 127, par. 161)
- 11 Sec. 25. Fiscal year limitations.
- 12 (a) All appropriations shall be available for expenditure
- for the fiscal year or for a lesser period if the Act making
- 14 that appropriation so specifies. A deficiency or emergency
- appropriation shall be available for expenditure only through
- 16 June 30 of the year when the Act making that appropriation is
- 17 enacted unless that Act otherwise provides.
- 18 (b) Outstanding liabilities as of June 30, payable from
- appropriations which have otherwise expired, may be paid out of
- 20 the expiring appropriations during the 2-month period ending at
- 21 the close of business on August 31. Any service involving
- 22 professional or artistic skills or any personal services by an
- 23 employee whose compensation is subject to income tax
- 24 withholding must be performed as of June 30 of the fiscal year

in order to be considered an "outstanding liability as of June 30" that is thereby eligible for payment out of the expiring appropriation.

(b-1) However, payment of tuition reimbursement claims under Section 14-7.03 or 18-3 of the School Code may be made by the State Board of Education from its appropriations for those respective purposes for any fiscal year, even though the claims reimbursed by the payment may be claims attributable to a prior fiscal year, and payments may be made at the direction of the State Superintendent of Education from the fund from which the appropriation is made without regard to any fiscal year limitations, except as required by subsection (j) of this Section. Beginning on June 30, 2021, payment of tuition reimbursement claims under Section 14-7.03 or 18-3 of the School Code as of June 30, payable from appropriations that have otherwise expired, may be paid out of the expiring appropriation during the 4-month period ending at the close of business on October 31.

(b-2) All outstanding liabilities as of June 30, 2010, payable from appropriations that would otherwise expire at the conclusion of the lapse period for fiscal year 2010, and interest penalties payable on those liabilities under the State Prompt Payment Act, may be paid out of the expiring appropriations until December 31, 2010, without regard to the fiscal year in which the payment is made, as long as vouchers for the liabilities are received by the Comptroller no later

1 than August 31, 2010.

(b-2.5) All outstanding liabilities as of June 30, 2011, payable from appropriations that would otherwise expire at the conclusion of the lapse period for fiscal year 2011, and interest penalties payable on those liabilities under the State Prompt Payment Act, may be paid out of the expiring appropriations until December 31, 2011, without regard to the fiscal year in which the payment is made, as long as vouchers for the liabilities are received by the Comptroller no later than August 31, 2011.

(b-3) Medical payments may be made by the Department of Veterans' Affairs from its appropriations for those purposes for any fiscal year, without regard to the fact that the medical services being compensated for by such payment may have been rendered in a prior fiscal year, except as required by subsection (j) of this Section. Beginning on June 30, 2021, medical payments payable from appropriations that have otherwise expired may be paid out of the expiring appropriation during the 4-month period ending at the close of business on October 31.

(b-4) Medical payments may be made by the Department of Healthcare and Family Services and medical payments and child care payments may be made by the Department of Human Services (as successor to the Department of Public Aid) from appropriations for those purposes for any fiscal year, without regard to the fact that the medical or child care services

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being compensated for by such payment may have been rendered in a prior fiscal year; and payments may be made at the direction

of the Department of Healthcare and Family Services from the

Health Insurance Reserve Fund and the Local Government Health

Insurance Reserve Fund without regard to any fiscal year

limitations, except as required by subsection (j) of this

Section. Beginning on June 30, 2021, medical payments made by

8 the Department of Healthcare and Family Services, child care

payments made by the Department of Human Services, and payments

made at the discretion of the Department of Healthcare and

Family Services from the Health Insurance Reserve Fund and the

Local Government Health Insurance Reserve Fund payable from

appropriations that have otherwise expired may be paid out of

the expiring appropriation during the 4-month period ending at

the close of business on October 31.

(b-5) Medical payments may be made by the Department of Human Services from its appropriations relating to substance abuse treatment services for any fiscal year, without regard to the fact that the medical services being compensated for by such payment may have been rendered in a prior fiscal year, provided the payments are made on a fee-for-service basis consistent with requirements established for Medicaid reimbursement by the Department of Healthcare and Family Services, except as required by subsection (j) of this Section. Beginning on June 30, 2021, medical payments made by the Department of Human Services relating to substance abuse treatment services payable from appropriations that have otherwise expired may be paid out of the expiring appropriation during the 4-month period ending at the close of business on

4 October 31.

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- (b-6) Additionally, payments may be made by the Department of Human Services from its appropriations, or any other State agency from its appropriations with the approval of the Department of Human Services, from the Immigration Reform and Control Fund for purposes authorized pursuant to Immigration Reform and Control Act of 1986, without regard to any fiscal year limitations, except as required by subsection (j) of this Section. Beginning on June 30, 2021, payments made by the Department of Human Services from the Immigration Reform and Control Fund for purposes authorized pursuant to the Immigration Reform and Control Act of 1986 payable from appropriations that have otherwise expired may be paid out of the expiring appropriation during the 4-month period ending at the close of business on October 31.
- (b-7) Payments may be made in accordance with a plan authorized by paragraph (11) or (12) of Section 405-105 of the Department of Central Management Services Law from appropriations for those payments without regard to fiscal year limitations.
- (c) Further, payments may be made by the Department of Public Health, the Department of Human Services (acting as successor to the Department of Public Health under the

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Department of Human Services Act), and the Department of Healthcare and Family Services (acting as successor to the Department of Human Services for the chronic renal disease and hemophilia programs) from their respective appropriations for grants for medical care to or on behalf of persons suffering from chronic renal disease, persons suffering from hemophilia, rape victims, and premature and high-mortality risk infants and their mothers and for grants for supplemental food supplies provided under the United States Department of Agriculture Women, Infants and Children Nutrition Program, for any fiscal year without regard to the fact that the services being compensated for by such payment may have been rendered in a prior fiscal year, except as required by subsection (j) of this Section. Beginning on June 30, 2021, payments made by the Department of Public Health, the Department of Human Services, and the Department of Healthcare and Family Services from their respective appropriations for grants for medical care to or on behalf of persons suffering from chronic renal disease, persons suffering from hemophilia, rape victims, and premature and high-mortality risk infants and their mothers and for grants for supplemental food supplies provided under the United States Department of Agriculture Women, Infants and Children Program payable from appropriations Nutrition that otherwise expired may be paid out of the appropriations during the 4-month period ending at the close of business on October 31.

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- (d) The Department of Public Health and the Department of Human Services (acting as successor to the Department of Public Health under the Department of Human Services Act) shall each annually submit to the State Comptroller, Senate President, Senate Minority Leader, Speaker of the House, House Minority Leader, and the respective Chairmen and Minority Spokesmen of the Appropriations Committees of the Senate and the House, on or before December 31, a report of fiscal year funds used to pay for services provided in any prior fiscal year. This report shall document by program or service category those expenditures from the most recently completed fiscal year used to pay for services provided in prior fiscal years.
- (e) The Department of Public Health and the Department of Healthcare and Family Services (acting as successor to the Department of Human Services for the chronic renal disease and hemophilia programs), the Department of Human Services (acting as successor to the Department of Public Aid), and the Department of Human Services making fee for service payments relating to substance abuse treatment services provided during a previous fiscal year shall each annually submit to the State Comptroller, Senate President, Senate Minority Leader, Speaker of the House, House Minority Leader, the respective Chairmen and Minority Spokesmen of the Appropriations Committees of the Senate and the House, on or before November 30, a report that shall document by program or service category those expenditures from the most recently completed fiscal year used

- 2 services for which claims were received in prior fiscal years.
- 3 (f) The Department of Human Services (as successor to the
- 4 Department of Public Aid) shall annually submit to the State
- 5 Comptroller, Senate President, Senate Minority Leader, Speaker
- of the House, House Minority Leader, and the respective
- 7 Chairmen and Minority Spokesmen of the Appropriations
- 8 Committees of the Senate and the House, on or before December
- 9 31, a report of fiscal year funds used to pay for services
- 10 (other than medical care) provided in any prior fiscal year.
- 11 This report shall document by program or service category those
- 12 expenditures from the most recently completed fiscal year used
- to pay for services provided in prior fiscal years.
- 14 (g) In addition, each annual report required to be
- 15 submitted by the Department of Healthcare and Family Services
- 16 under subsection (e) shall include the following information
- with respect to the State's Medicaid program:
- 18 (1) Explanations of the exact causes of the variance
- 19 between the previous year's estimated and actual
- 20 liabilities.
- 21 (2) Factors affecting the Department of Healthcare and
- Family Services' liabilities, including but not limited to
- 23 numbers of aid recipients, levels of medical service
- utilization by aid recipients, and inflation in the cost of
- 25 medical services.
- 26 (3) The results of the Department's efforts to combat

1 fraud and abuse.

- (h) As provided in Section 4 of the General Assembly Compensation Act, any utility bill for service provided to a General Assembly member's district office for a period including portions of 2 consecutive fiscal years may be paid from funds appropriated for such expenditure in either fiscal year.
- (i) An agency which administers a fund classified by the Comptroller as an internal service fund may issue rules for:
  - (1) billing user agencies in advance for payments or authorized inter-fund transfers based on estimated charges for goods or services;
  - (2) issuing credits, refunding through inter-fund transfers, or reducing future inter-fund transfers during the subsequent fiscal year for all user agency payments or authorized inter-fund transfers received during the prior fiscal year which were in excess of the final amounts owed by the user agency for that period; and
  - (3) issuing catch-up billings to user agencies during the subsequent fiscal year for amounts remaining due when payments or authorized inter-fund transfers received from the user agency during the prior fiscal year were less than the total amount owed for that period.
- User agencies are authorized to reimburse internal service funds for catch-up billings by vouchers drawn against their respective appropriations for the fiscal year in which the

- catch-up billing was issued or by increasing an authorized inter-fund transfer during the current fiscal year. For the purposes of this Act, "inter-fund transfers" means transfers without the use of the voucher-warrant process, as authorized
- 5 by Section 9.01 of the State Comptroller Act.
  - (i-1) Beginning on July 1, 2021, all outstanding liabilities, not payable during the 4-month lapse period as described in subsections (b-1), (b-3), (b-4), (b-5), (b-6), and (c) of this Section, that are made from appropriations for that purpose for any fiscal year, without regard to the fact that the services being compensated for by those payments may have been rendered in a prior fiscal year, are limited to only those claims that have been incurred but for which a proper bill or invoice as defined by the State Prompt Payment Act has not been received by September 30th following the end of the fiscal year in which the service was rendered.
    - (j) Notwithstanding any other provision of this Act, the aggregate amount of payments to be made without regard for fiscal year limitations as contained in subsections (b-1), (b-3), (b-4), (b-5), (b-6), and (c) of this Section, and determined by using Generally Accepted Accounting Principles, shall not exceed the following amounts:
- 23 (1) \$6,000,000,000 for outstanding liabilities related 24 to fiscal year 2012;
- 25 (2) \$5,300,000,000 for outstanding liabilities related 26 to fiscal year 2013;

- 1 (3) \$4,600,000,000 for outstanding liabilities related 2 to fiscal year 2014;
- 3 (4) \$4,000,000,000 for outstanding liabilities related 4 to fiscal year 2015;
- 5 (5) \$3,300,000,000 for outstanding liabilities related 6 to fiscal year 2016;
- 7 (6) \$2,600,000,000 for outstanding liabilities related 8 to fiscal year 2017;
- 9 (7) \$2,000,000,000 for outstanding liabilities related 10 to fiscal year 2018;
- 11 (8) \$1,300,000,000 for outstanding liabilities related 12 to fiscal year 2019;
- 13 (9) \$600,000,000 for outstanding liabilities related 14 to fiscal year 2020; and
- 15 (10) \$0 for outstanding liabilities related to fiscal 16 year 2021 and fiscal years thereafter.
- 17 (Source: P.A. 96-928, eff. 6-15-10; 96-958, eff. 7-1-10;
- 18 96-1501, eff. 1-25-11; 97-75, eff. 6-30-11; 97-333, eff.
- 19 8-12-11.)
- 20 Section 55. The School Code is amended by changing Section
- 21 2-3.70 as follows:
- 22 (105 ILCS 5/2-3.70) (from Ch. 122, par. 2-3.70)
- Sec. 2-3.70. Alcohol and substance abuse education and
- 24 prevention programs. To review, subject to the rules and

- 1 regulations of the State Board of Education, grants made
- 2 available to all education agencies by the Department of Public
- 3 <u>Health</u> Human Services for school based alcohol and substance
- 4 abuse education and prevention programs, and to enter into
- 5 agreements with the Department to establish such programs.
- 6 (Source: P.A. 89-507, eff. 7-1-97.)
- 7 Section 60. The Specialized Care for Children Act is
- 8 amended by changing Section 2 and by adding Section 4 as
- 9 follows:
- 10 (110 ILCS 345/2) (from Ch. 144, par. 67.2)
- 11 Sec. 2. An Advisory Board for Specialized Care for Children
- 12 is created to advise the University of Illinois relative to
- 13 qualifying for federal funds and aid in relation to the
- 14 administration of the Division of Specialized Care for
- 15 Children, to make recommendations to the University regarding
- the operation of services to children with special health care
- 17 needs, and to consult regarding professional considerations
- 18 dealing with services to children with special health care
- 19 needs. The Department of Public Health's Deputy Director for
- the Office of Community Health, Prevention, and Wellness or, if
- 21 the Deputy Director is not a physician, the Medical Director of
- 22 the Department of Public Health's Office of Community Health,
- 23 Prevention, and Wellness shall serve as chairperson. The
- 24 Advisory Board shall be composed of such health care

- 1 professionals as the Board of Trustees of the University of
- 2 Illinois deems necessary and appropriate, who shall all be
- 3 appointed to the Advisory Board by the Board of Trustees.
- 4 (Source: P.A. 91-207, eff. 7-20-99.)
- 5 (110 ILCS 345/4 new)
- 6 Sec. 4. Coordination of programs and services.
- 7 (a) In order to ensure collaboration between the University
- 8 of Illinois at Chicago's Division of Specialized Care for
- 9 Children and the Illinois Department of Public Health's Office
- of Community Health, Prevention, and Wellness, the 2
- departments shall undertake the activities set forth in this
- 12 Section.
- 13 (b) The Division of Specialized Care for Children and the
- 14 Department of Public Health shall collaborate to ensure that
- 15 individuals or families who receive services from either
- agency, whether directly or through contractors, are informed
- 17 of the services available from the other agency and that
- 18 individuals or community organizations that provide services
- 19 on behalf of either agency collaborate to ensure that services
- are appropriately coordinated for participating families. To
- 21 facilitate this collaboration, the administrators of the
- 22 Division of Specialized Care for Children's regional offices
- 23 shall meet on a quarterly basis with the administrators of the
- local health departments and other maternal and child health
- 25 service providers that serve their regions.

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(c) The Director of the University of Illinois at Chicago's

2 <u>Division of Specialized Care for Children and the Deputy</u>

Director for the Department of Public Health's Office of

Community Health, Prevention, and Wellness shall collaborate

and jointly conduct surveillance activities and apply the

principles of epidemiology to the design, management, and

evaluation of the State's services under Title V of the federal

Social Security Act.

- (d) The Director of the University of Illinois at Chicago's Division of Specialized Care for Children and the Deputy Director for the Department of Public Health's Office of Community Health, Prevention, and Wellness shall collaborate on the further development and funding of comprehensive community-based service delivery systems to improve the health and well-being of all children and families, including children with special health care needs.
- 17 (e) The Director of the University of Illinois at Chicago's Division of Specialized Care for Children and the Deputy 18 19 Director for the Department of Public Health's Office of 20 Community Health, Prevention, and Wellness shall report annually to the Advisory Board for Specialized Care for 21 22 Children and to the Community Health, Prevention, and Wellness 23 Advisory Board established by the Family Case Management Act on 24 their activities pursuant to this Section.

Section 65. The Illinois Public Aid Code is amended by

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changing Section 5-5.24 as follows:

2 (305 ILCS 5/5-5.24)

Sec. 5-5.24. Prenatal and perinatal care. The Department of Healthcare and Family Services may provide reimbursement under this Article for all prenatal and perinatal health care services that are provided for the purpose of preventing low-birthweight infants, reducing the need for neonatal intensive care hospital services, and promoting perinatal may include health. These services comprehensive assessments for pregnant women, women with infants, and infants, lactation counseling, nutrition counseling, childbirth support, psychosocial counseling, treatment and prevention of periodontal disease, and other support services that have been proven to improve birth outcomes. The Department shall maximize the use of preventive prenatal and perinatal health care services consistent with federal statutes, rules, and regulations. The Department of Public Aid (now Department of Healthcare and Family Services) shall develop a plan for prenatal and perinatal preventive health care and shall present the plan to the General Assembly by January 1, 2004. On or before January 1, 2006 and every 2 years thereafter, the Department, in collaboration with the Department of Public Health, shall report to the General Assembly concerning the effectiveness of prenatal and perinatal health care services reimbursed under this Section in preventing low-birthweight

- 1 infants and reducing the need for neonatal intensive care
- 2 hospital services. Each such report shall include an evaluation
- 3 of how the ratio of expenditures for treating low-birthweight
- 4 infants compared with the investment in promoting healthy
- 5 births and infants in local community areas throughout Illinois
- 6 relates to healthy infant development in those areas.
- 7 (Source: P.A. 95-331, eff. 8-21-07.)
- 8 Section 70. The Abused and Neglected Child Reporting Act is
- 9 amended by changing Sections 7.1 and 7.3b as follows:
- 10 (325 ILCS 5/7.1) (from Ch. 23, par. 2057.1)
- 11 Sec. 7.1. (a) To the fullest extent feasible, the
- 12 Department shall cooperate with and shall seek the cooperation
- and involvement of all appropriate public and private agencies,
- 14 including health, education, social service and law
- 15 enforcement agencies, religious institutions, courts of
- 16 competent jurisdiction, and agencies, organizations, or
- 17 programs providing or concerned with human services related to
- 18 the prevention, identification or treatment of child abuse or
- 19 neglect.
- 20 Such cooperation and involvement shall include joint
- 21 consultation and services, joint planning, joint case
- 22 management, joint public education and information services,
- joint utilization of facilities, joint staff development and
- 24 other training, and the creation of multidisciplinary case

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diagnostic, case handling, case management, and policy planning teams. Such cooperation and involvement shall also include consultation and planning with the Illinois Department of <a href="Public Health">Public Health</a> Human Services regarding referrals to designated perinatal centers of newborn children requiring protective custody under this Act, whose life or development may be threatened by a developmental disability or handicapping condition.

For implementing such intergovernmental cooperation and involvement, units of local government and public and private agencies may apply for and receive federal or State funds from the Department under this Act or seek and receive gifts from local philanthropic or other private local sources in order to augment any State funds appropriated for the purposes of this Act.

(b) The Department may establish up to 5 demonstrations of multidisciplinary teams to advise, review and monitor cases of child abuse and neglect brought by the Department or any member of the team. The Director shall determine the criteria by which certain cases of child abuse or neglect are brought to the multidisciplinary teams. The criteria shall include but not be limited to geographic area and classification of certain cases allegations of а severe where are nature. multidisciplinary team shall consist of 7 to 10 members appointed by the Director, including, but not limited to representatives from the medical, mental health, educational,

- 1 juvenile justice, law enforcement and social service fields.
- 2 (Source: P.A. 92-801, eff. 8-16-02.)
- 3 (325 ILCS 5/7.3b) (from Ch. 23, par. 2057.3b)
- 4 Sec. 7.3b. All persons required to report under Section 4 5 may refer to the Department of Human Services any pregnant 6 person in this State who is addicted as defined in the 7 Alcoholism and Other Drug Abuse and Dependency Act. 8 Department of Human Services shall notify the local family case 9 management Infant Mortality Reduction Network service provider 10 or Department funded prenatal care provider in the area in 11 which the person resides. The service provider shall prepare a 12 case management plan and assist the pregnant woman in obtaining counseling and treatment from a local substance abuse service 1.3 14 provider licensed by the Department of Human Services or a 15 licensed hospital which provides substance abuse treatment 16 services. The local family case management Infant Mortality Reduction Network service provider and Department funded 17 18 prenatal care provider shall monitor the pregnant woman through 19 the service program. The Department of Human Services shall 20 have the authority to promulgate rules and regulations to 21 implement this Section.
- 22 (Source: P.A. 88-670, eff. 12-2-94; 89-507 (Sections 9C-25 and
- 9M-5), eff. 7-1-97.)
- Section 75. The Early Intervention Services System Act is

- 1 amended by changing Sections 4 and 5 as follows:
- 2 (325 ILCS 20/4) (from Ch. 23, par. 4154)
- 3 Sec. 4. Illinois Interagency Council on Early
- 4 Intervention.
- 5 (a) There is established the Illinois Interagency Council
- on Early Intervention. The Council shall be composed of at
- 7 least 15 but not more than 25 members. The members of the
- 8 Council and the designated chairperson of the Council shall be
- 9 appointed by the Governor. The Council member representing the
- 10 lead agency may not serve as chairperson of the Council. The
- 11 Council shall be composed of the following members:
- 12 (1) The <u>Director of Public Health</u> <del>Secretary of Human</del>
- 13 <u>Services</u> (or his or her designee) and 2 additional
- 14 representatives of the Department of Public Health Human
- 15 <u>Services</u> designated by the <u>Director</u> <del>Secretary</del>, plus the
- Directors (or their designees) of the following State
- 17 agencies involved in the provision of or payment for early
- intervention services to eligible infants and toddlers and
- 19 their families:
- 20 (A) Illinois State Board of Education;
- 21 (B) (Blank);
- 22 (C) (Blank);
- 23 (D) Illinois Department of Children and Family
- 24 Services;
- 25 (E) (Blank) University of Illinois Division of

1	Specialized Care for Children;
2	(F) Illinois Department of Healthcare and Family
3	Services;
4	(G) Illinois Department of <u>Human Services</u> <del>Public</del>
5	Health;
6	(H) (Blank);
7	(I) Illinois Planning Council on Developmental
8	Disabilities; and
9	(J) Illinois Department of Insurance.
10	(2) Other members as follows:
11	(A) At least 20% of the members of the Council
12	shall be parents, including minority parents, of
13	infants or toddlers with disabilities or children with
14	disabilities aged 12 or younger, with knowledge of, or
15	experience with, programs for infants and toddlers
16	with disabilities. At least one such member shall be a
17	parent of an infant or toddler with a disability or a
18	child with a disability aged 6 or younger;
19	(B) At least 20% of the members of the Council
20	shall be public or private providers of early
21	intervention services;
22	(C) One member shall be a representative of the
23	General Assembly; and
24	(D) One member shall be involved in the preparation
25	of professional personnel to serve infants and

toddlers similar to those eligible for services under

1 this Act.

The Council shall meet at least quarterly and in such places as it deems necessary. Terms of the initial members appointed under paragraph (2) shall be determined by lot at the first Council meeting as follows: of the persons appointed under subparagraphs (A) and (B), one-third shall serve one year terms, one-third shall serve 2 year terms, and one-third shall serve 3 year terms; and of the persons appointed under subparagraphs (C) and (D), one shall serve a 2 year term and one shall serve a 3 year term. Thereafter, successors appointed under paragraph (2) shall serve 3 year terms. Once appointed, members shall continue to serve until their successors are appointed. No member shall be appointed to serve more than 2 consecutive terms.

Council members shall serve without compensation but shall be reimbursed for reasonable costs incurred in the performance of their duties, including costs related to child care, and parents may be paid a stipend in accordance with applicable requirements.

The Council shall prepare and approve a budget using funds appropriated for the purpose to hire staff, and obtain the services of such professional, technical, and clerical personnel as may be necessary to carry out its functions under this Act. This funding support and staff shall be directed by the lead agency.

(b) The Council shall:

- (1) advise and assist the lead agency in the performance of its responsibilities including but not limited to the identification of sources of fiscal and other support services for early intervention programs, and the promotion of interagency agreements which assign financial responsibility to the appropriate agencies;
- (2) advise and assist the lead agency in the preparation of applications and amendments to applications;
- (3) review and advise on relevant regulations and standards proposed by the related State agencies;
- (4) advise and assist the lead agency in the development, implementation and evaluation of the comprehensive early intervention services system; and
- (5) prepare and submit an annual report to the Governor and to the General Assembly on the status of early intervention programs for eligible infants and toddlers and their families in Illinois. The annual report shall include (i) the estimated number of eligible infants and toddlers in this State, (ii) the number of eligible infants and toddlers who have received services under this Act and the cost of providing those services, (iii) the estimated cost of providing services under this Act to all eligible infants and toddlers in this State, and (iv) data and other information as is requested to be included by the Legislative Advisory Committee established under Section

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1 13.50 of this Act. The report shall be posted by the lead 2 agency on the early intervention website as required under 3 paragraph (f) of Section 5 of this Act.

No member of the Council shall cast a vote on or participate substantially in any matter which would provide a direct financial benefit to that member or otherwise give the appearance of a conflict of interest under State law. All provisions and reporting requirements of the Illinois Governmental Ethics Act shall apply to Council members.

10 (Source: P.A. 95-331, eff. 8-21-07.)

11 (325 ILCS 20/5) (from Ch. 23, par. 4155)

Sec. 5. Lead Agency. The Department of <u>Public Health Human</u>
Services is designated the lead agency and shall provide leadership in establishing and implementing the coordinated, comprehensive, interagency and interdisciplinary system of early intervention services. The lead agency shall not have the sole responsibility for providing these services. Each participating State agency shall continue to coordinate those early intervention services relating to health, social service and education provided under this authority.

The lead agency is responsible for carrying out the following:

(a) The general administration, supervision, and monitoring of programs and activities receiving assistance under Section 673 of the Individuals with Disabilities

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Education Act (20 United States Code 1473).

- (b) The identification and coordination of all available resources within the State from federal, State, local and private sources.
- (c) The development of procedures to ensure that services are provided to eligible infants and toddlers and their families in a timely manner pending the resolution of any disputes among public agencies or service providers.
- (d) The resolution of intra-agency and interagency regulatory and procedural disputes.
- (e) The development and implementation of formal interagency agreements, and the entry into such agreements, between the lead agency and (i) the Department of Healthcare and Family Services, (ii) the University of Illinois Division of Specialized Care for Children, and (iii) other relevant State agencies that:
  - (1) define the financial responsibility of each agency for paying for early intervention services (consistent with existing State and federal law and rules, including the requirement that intervention funds be used as the payor of last resort), a hierarchical order of payment as among the agencies for early intervention services that are covered under or may be paid by programs in other procedures for direct agencies, and collecting reimbursements for payments made,

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resolving service and payment disputes; and

(2) include all additional components necessary to ensure meaningful cooperation and coordination.

Interagency agreements under this paragraph (e) must be reviewed and revised to implement the purposes of this amendatory Act of the 92nd General Assembly no later than 60 days after the effective date of this amendatory Act of the 92nd General Assembly.

(f) The maintenance of an early intervention website. Within 30 days after the effective date of this amendatory Act of the 92nd General Assembly, the lead agency shall post and keep posted on this website the following: (i) the current annual report required under subdivision (b) (5) of Section 4 of this Act, and the annual reports of the prior 3 years, (ii) the most recent Illinois application for funds prepared under Section 637 of the Individuals with Disabilities Education Act filed with the United States Department of Education, (iii) proposed modifications of the application prepared for public comment, (iv) notice of Council meetings, Council agendas, and minutes of its proceedings for at least the previous year, (v) proposed and final early intervention rules, (vi) requests for proposals, and (vii) all reports created for dissemination to the public that are related to the early intervention program, including reports prepared at the request of the Council, the General Assembly, and the Legislative

- 1 Advisory Committee established under Section 13.50 of this
- 2 Act. Each such document shall be posted on the website
- 3 within 3 working days after the document's completion.
- 4 (Source: P.A. 95-331, eff. 8-21-07.)
- 5 Section 80. The Interagency Board for Children who are Deaf
- or Hard-of-Hearing and have an Emotional or Behavioral Disorder
- 7 Act is amended by changing Section 4 as follows:
- 8 (325 ILCS 35/4) (from Ch. 23, par. 6704)
- 9 Sec. 4. Appointment. The Board shall consist of  $\frac{13}{12}$
- 10 members, one of whom shall be appointed by the Governor. The
- 11 State Superintendent of Education shall appoint 2 members, one
- 12 of whom shall be a parent of a child who is deaf or
- hard-of-hearing and has an emotional or behavioral disorder,
- 14 and one of whom shall be an employee of the agency. The
- 15 Director of Children and Family Services shall appoint 2
- 16 members, one of whom shall be a parent, foster parent, or legal
- 17 guardian of a child who is deaf or hard-of-hearing and has an
- 18 emotional or behavioral disorder, and one of whom shall be an
- 19 employee of the agency. The Secretary of Human Services shall
- 20 appoint 4 members, 2 of whom shall be parents of children who
- 21 are deaf or hard of hearing and have an emotional or behavioral
- 22 disorder, and 2 of whom shall be employees of the agency.
- The Director of Healthcare and Family Services shall
- 24 appoint one member who shall be an employee of the agency. The

- 1 Director of Public Health shall appoint one member who shall be
- 2 an employee of the agency. The Community and Residential
- 3 Services Authority for Behavior Disturbed and Severe
- 4 Emotionally Disturbed Students shall appoint one member who
- 5 shall be an employee of the Authority, and the Director of the
- 6 Division of Specialized Care for Children shall appoint one
- 7 member who shall be an employee of that agency.
- 8 Each appointing authority shall give preference to any
- 9 qualified deaf employee when making appointments to the Board.
- 10 (Source: P.A. 95-331, eff. 8-21-07.)
- 11 Section 85. The Community Services Act is amended by
- 12 changing Section 3 as follows:
- 13 (405 ILCS 30/3) (from Ch. 91 1/2, par. 903)
- Sec. 3. Responsibilities for Community Services. Pursuant
- to this Act, the Department of Human Services shall facilitate
- 16 the establishment of a comprehensive and coordinated array of
- 17 community services based upon a federal, State and local
- 18 partnership. In order to assist in implementation of this Act,
- 19 the Department shall prescribe and publish rules and
- 20 regulations. The Department may request the assistance of other
- 21 State agencies, including the Department of Public Health with
- 22 regard to substance abuse prevention, local government
- 23 entities, direct services providers, trade associations, and
- 24 others in the development of these regulations or other

- 1 policies related to community services.
- The Department shall assume the following roles and responsibilities for community services:
  - (a) Service Priorities. Within the service categories described in Section 2 of this Act, establish and publish priorities for community services to be rendered, and priority populations to receive these services.
    - (b) Planning. By January 1, 1994 and by January 1 of each third year thereafter, prepare and publish a Plan which describes goals and objectives for community services state-wide and for regions and subregions needs assessment, steps and time-tables for implementation of the goals also shall be included; programmatic goals and objectives for community services shall cover the service categories defined in Section 2 of this Act; the Department shall insure local participation in the planning process.
    - (c) Public Information and Education. Develop programs aimed at improving the relationship between communities and their residents with disabilities; prepare and disseminate public information and educational materials on the prevention of developmental disabilities, mental illness, and alcohol or drug dependence, and on available treatment and habilitation services for persons with these disabilities.
  - (d) Quality Assurance. Promulgate minimum program standards, rules and regulations to insure that Department funded services maintain acceptable quality and assure

enforcement of these standards through regular monitoring of services and through program evaluation; this applies except where this responsibility is explicitly given by law to another State agency.

(d-5) Accreditation requirements for providers of mental health and substance abuse treatment services. Except when the federal or State statutes authorizing a program, or the federal regulations implementing a program, are to the contrary, accreditation shall be accepted by the Department in lieu of the Department's facility or program certification or licensure onsite review requirements and shall be accepted as a substitute for the Department's administrative and program monitoring requirements, except as required by subsection (d-10), in the case of:

(1) Any organization from which the Department purchases mental health or substance abuse services and that is accredited under any of the following: the Comprehensive Accreditation Manual for Behavioral Health Care (Joint Commission on Accreditation of Healthcare Organizations (JCAHO)); the Comprehensive Accreditation Manual for Hospitals (JCAHO); the Standards Manual for the Council on Accreditation for Children and Family Services (Council on Accreditation for Children and Family Services (COA)); or the Standards Manual for Organizations Serving People with Disabilities (the Rehabilitation Accreditation Commission (CARF)).

- (2) Any mental health facility or program licensed or certified by the Department, or any substance abuse service licensed by the Department, that is accredited under any of the following: the Comprehensive Accreditation Manual for Behavioral Health Care (JCAHO); the Comprehensive Accreditation Manual for Hospitals (JCAHO); the Standards Manual for the Council on Accreditation for Children and Family Services (COA); or the Standards Manual for Organizations Serving People with Disabilities (CARF).
- (3) Any network of providers from which the Department purchases mental health or substance abuse services and that is accredited under any of the following: the Comprehensive Accreditation Manual for Behavioral Health Care (JCAHO); the Comprehensive Accreditation Manual for Hospitals (JCAHO); the Standards Manual for the Council on Accreditation for Children and Family Services (COA); the Standards Manual for Organizations Serving People with Disabilities (CARF); or the National Committee for Quality Assurance. A provider organization that is part of an accredited network shall be afforded the same rights under this subsection.
- (d-10) For mental health and substance abuse services, the Department may develop standards or promulgate rules that establish additional standards for monitoring and licensing accredited programs, services, and facilities that the Department has determined are not covered by the accreditation

- 1 standards and processes. These additional standards for
- 2 monitoring and licensing accredited programs, services, and
- 3 facilities and the associated monitoring must not duplicate the
- 4 standards and processes already covered by the accrediting
- 5 bodies.
- (d-15) The Department shall be given proof of compliance
- 7 with fire and health safety standards, which must be submitted
- 8 as required by rule.
- 9 (d-20) The Department, by accepting the survey or
- inspection of an accrediting organization, does not forfeit its
- 11 rights to perform inspections at any time, including contract
- monitoring to ensure that services are provided in accordance
- with the contract. The Department reserves the right to monitor
- 14 a provider of mental health and substance abuse treatment
- 15 services when the survey or inspection of an accrediting
- 16 organization has established any deficiency in the
- 17 accreditation standards and processes.
- 18 (d-25) On and after the effective date of this amendatory
- 19 Act of the 92nd General Assembly, the accreditation
- 20 requirements of this Section apply to contracted organizations
- 21 that are already accredited.
- (e) Program Evaluation. Develop a system for conducting
- 23 evaluation of the effectiveness of community services,
- 24 according to preestablished performance standards; evaluate
- 25 the extent to which performance according to established
- 26 standards aids in achieving the goals of this Act; evaluation

- data also shall be used for quality assurance purposes as well as for planning activities.
- 3 (f) Research. Conduct research in order to increase 4 understanding of mental illness, developmental disabilities 5 and alcohol and drug dependence.
  - (g) Technical Assistance. Provide technical assistance to provider agencies receiving funds or serving clients in order to assist these agencies in providing appropriate, quality services; also provide assistance and guidance to other State agencies and local governmental bodies serving the disabled in order to strengthen their efforts to provide appropriate community services; and assist provider agencies in accessing other available funding, including federal, State, local, third-party and private resources.
  - (h) Placement Process. Promote the appropriate placement of clients in community services through the development and implementation of client assessment and diagnostic instruments to assist in identifying the individual's service needs; client assessment instruments also can be utilized for purposes of program evaluation; whenever possible, assure that placements in State-operated facilities are referrals from community agencies.
  - (i) Interagency Coordination. Assume leadership in promoting cooperation among State health and human service agencies to insure that a comprehensive, coordinated community services system is in place; to insure persons with a

- disability access to needed services; and to insure continuity
- 2 of care and allow clients to move among service settings as
- 3 their needs change; also work with other agencies to establish
- 4 effective prevention programs.
- 5 (j) Financial Assistance. Provide financial assistance to
- 6 local provider agencies through purchase-of-care contracts and
- 7 grants, pursuant to Section 4 of this Act.
- 8 (Source: P.A. 95-682, eff. 10-11-07.)
- 9 Section 90. The Reduction of Racial and Ethnic Health
- 10 Disparities Act is amended by changing Sections 5 and 35 as
- 11 follows:
- 12 (410 ILCS 100/5)
- 13 Sec. 5. Legislative findings and intent.
- 14 (a) The General Assembly finds that despite State
- investments in health care programs, certain racial and ethnic
- 16 populations in Illinois continue to have significantly poorer
- 17 health outcomes when compared to non-Hispanic whites. The
- 18 General Assembly finds that local solutions to health care
- 19 problems can have a dramatic and positive effect on the health
- 20 status of these populations. Local governments and communities
- 21 are best equipped to: identify the health education, health
- 22 promotion, and disease prevention needs of the racial and
- 23 ethnic populations in their communities; mobilize the
- 24 community to address health outcome disparities; enlist and

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- organize local public and private resources and faith-based organizations to address these disparities; and evaluate the effectiveness of interventions.
  - (b) The Illinois Department of <u>Public Health</u> Human Services has several initiatives to reduce racial and ethnic disparities in infant mortality and diabetes, and the Illinois Department of <u>Public Health</u> has several initiatives to address asthma; breast, cervical, prostate, and colorectal cancer; kidney disease; HIV/AIDS; hepatitis C; sexually transmitted diseases; adult and child immunizations; cardiovascular disease; and accidental injuries and violence.
    - (c) It is therefore the intent of the General Assembly to funds within Illinois counties, in the form of "Reducing Racial and Ethnic Health Disparities: Closing the Gap" grants, to stimulate the development of community-based and neighborhood-based projects that will improve the health outcomes of racial and ethnic populations. Further, it is the intent of the General Assembly that these programs foster the development of coordinated, collaborative, and broad-based participation by public and private entities and by faith-based organizations. Finally, it is the intent of the General Assembly that the grant program function as a partnership faith-based between State governments, and local organizations, and private-sector health care providers, including managed care, voluntary health care resources, social service providers, and nontraditional partners.

- 1 (Source: P.A. 94-447, eff. 1-1-06.)
- 2 (410 ILCS 100/35)
- 3 Sec. 35. Continued operation of programs to reduce racial
- 4 and ethnic disparities in infant mortality and diabetes.
- 5 Subject to the amounts appropriated for that purpose, the
- 6 Illinois Department of <u>Public Health</u> <u>Human Services</u> shall
- 7 continue to operate programs to reduce racial and ethnic
- 8 disparities in infant mortality and diabetes.
- 9 (Source: P.A. 94-447, eff. 1-1-06.)
- 10 Section 95. The Illinois Family Case Management Act is
- amended by changing Sections 10 and 20 as follows:
- 12 (410 ILCS 212/10)
- 13 Sec. 10. Definitions. In this Act:
- 14 "Department" means the <del>Illinois</del> Department of Public
- 15 Health Human Services.
- 16 "Director" means the Director of Public Health.
- "Eligible participant" means: (i) subject to available
- appropriations, any pregnant woman or child through the age of
- one year enrolled in the Medicaid program on the effective date
- of this Act or whose income is up to 200% of the federal
- 21 poverty level; and (ii) subject to additional appropriations,
- 22 any child through the age of 4 years enrolled in Medicaid or
- 23 whose income is up to 200% of the federal poverty level.

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1 "Family Case Management program" or "program" means the 2 program established under Section 15 of this Act.

"Infant mortality rate" means the number of infant deaths per 1,000 live births as reported on a calendar year basis by the federal Department of Health and Human Services.

## "Secretary" means the Secretary of Human Services.

"Targeted Intensive Case Management" means services provided to any program-eligible pregnant woman or infant through the age of one, where an assessment has been performed that deems the participant at greater risk for infant mortality or morbidity.

- 12 (Source: P.A. 94-407, eff. 8-2-05.)
- 13 (410 ILCS 212/20)
- Sec. 20. <u>Community Health, Prevention, and Wellness</u>

  Maternal and Child Health Advisory Board.
- 16 (a) The Maternal and Child Health Advisory Board ("the 17 is created within the Department to advise Board") 18 Department on the implementation of this Act, including 19 assessments and advice regarding rate structure, and other 20 activities related to maternal and child health and infant 21 mortality reduction programs in the State of Illinois. The 22 Board shall consist of the Department of Public Health's Deputy Director of the Office of Community Health, Prevention, and 23 24 Wellness Secretary of Human Services (or his or her designee), 25 who shall serve as chairman, and one additional representative

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of the Department of Human Services designated by the Secretary who has direct responsibility with the family case management program; one representative each from the Departments of Children and Family Services, Human Services, and Healthcare and Family Services Public Health, and Public Aid; the Director of the University of Illinois at Chicago Division of Specialized Care for Children; and 4 members of the Illinois General Assembly, one each appointed by the President and Minority Leader of the Senate and the Speaker and Minority Leader of the House of Representatives. In addition, the Director of Public Health Governor shall appoint 20 additional members of the Board. Of the members appointed by the Director Governor, 2 shall be physicians licensed to practice medicine in all of its branches who currently serve patients enrolled in a Department-funded maternal and child health the family case management program, one of whom shall be an individual with a specialty in obstetrics and gynecology and one of whom shall be an individual with a specialty in pediatric medicine; 16 persons with expertise in the health of women, infants, young children, school-aged children, adolescents, and children with special health care needs and with expertise in public health, epidemiology, behavioral health, nursing, social work, substance abuse prevention, juvenile justice, oral health, child development, domestic violence, sexual assault, chronic disease prevention, health promotion, and education; 5 representatives, one each from certified local health

departments within the 5 counties with the largest number of family case management enrollees; 5 representatives from certified local health departments outside the Chicago metropolitan and collar counties areas that shall include a balance of urban and rural health departments; a registered professional nurse serving as a public health nurse within a certified local health department; 5 individuals representing community based programs currently providing family case management services within Cook County that are not certified local health departments; and 2 consumers who are receiving or have received family case management services. The members of the Board shall choose a chairperson and vice chairperson shall serve concurrently for 2-year terms.

Legislative members shall serve during their term of office in the Illinois General Assembly. The members appointed by the Director shall be selected to represent the racial, ethnic, and geographic diversity of the State's population and shall include direct service providers, faculty of the University of Illinois at Chicago School of Public Health's Maternal and Child Health Training Program, as well as other persons with relevant expertise. Members appointed by the Director Governor shall serve a term of 4 3 years or until their successors are appointed. The members first appointed by the Director under this amendatory Act of the 97th General Assembly shall be appointed to serve for staggered terms as follows: 7 members

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- shall be appointed for terms of 4 years, 7 members shall be appointed for terms of 3 years, and 6 members shall be appointed for terms of 2 years. Thereafter, all appointments shall be for terms of 4 years. Any member appointed to fill a vacancy occurring prior to the expiration of the term for which his or her predecessor was appointed shall be appointed for the remainder of such term. Members of the Board shall serve without compensation but shall be reimbursed for necessary expenses incurred in the performance of their duties.
- The Board shall advise the <u>Director</u> Secretary on improving the well-being of mothers, fathers, children, families, and adults, considering both physical and social determinants of health, and using a life-span approach to health promotion and disease prevention efforts related to maternal and child health programs, including infant mortality reduction, in the State of Illinois. In addition, the Board shall review and make recommendations to the Department and the Governor in regard to the system for maternal and child health programs, collaboration, and interrelation between delivery of programs, both within the Department and related programs in other departments including but not limited to Family Case Management, Targeted Intensive Prenatal Case Management, the Special Supplemental Nutrition Program for Women, Infants and Children (WIC), and HealthWorks, and the adequacy of family case management funding and reimbursement levels. In performing its duties, the Board may hold hearings

- 1 throughout the State and advise and receive advice from any
- 2 <u>State or local advisory bodies created to address maternal and</u>
- 3 <u>child health</u> the infant mortality problem.
- 4 (c) The Board shall participate in the development of the
- 5 <u>State's annual Maternal and Child Health Services Block Grant</u>
- 6 application and annual report report to the General Assembly,
- 7 on January 1 of each year, a listing of activities taken in
- 8 regard to this Act, other efforts to address maternal and child
- 9 health and infant mortality in Illinois, and proposed
- 10 recommendations regarding funding and reimbursement levels to
- 11 adequately support the family case management program. The
- initial members of the Board shall be appointed within 60 days
- 13 after the effective date of this amendatory Act of the 97th
- 14 General Assembly. The Board shall advise the Director on the
- 15 creation of the Office of Community Health, Prevention, and
- Wellness.
- 17 (Source: P.A. 94-407, eff. 8-2-05.)
- 18 Section 100. The Hearing Screening for Newborns Act is
- 19 amended by changing Sections 20 and 30 as follows:
- 20 (410 ILCS 213/20)
- Sec. 20. Hearing screening advisory committee. By July 1,
- 22 2000, the Department of <u>Public Health</u> Human Services shall
- organize an advisory committee including representatives from
- 24 the <del>Department of Public Health, the</del> University of Illinois

- 1 Division of Specialized Care for Children, public and private
- 2 hospitals, pediatric associations, audiologists, health
- 3 insurance plans, hearing-impaired persons, parents of
- 4 hearing-impaired children, and early intervention services.
- 5 The committee shall:
- 6 (a) Develop and conduct training for hospitals
- 7 implementing newborn hearing screening.
- 8 (b) Develop a tracking and follow-up program for diagnostic
- 9 hearing testing for those infants failing hospital-based
- screening, in order to diagnose congenital hearing loss.
- 11 (c) Develop a referral system to early intervention
- 12 services and hearing aids for those infants diagnosed with
- 13 hearing loss.
- 14 (d) Develop an application process for financial
- assistance by the Division of Specialized Care for Children for
- 16 follow-up diagnostic hearing testing of newborns failing
- hospital-based screening.
- 18 (e) Develop educational and informational materials for
- 19 hospital personnel, health care professionals, and parents on
- 20 appropriate follow-up procedures for infants failing
- 21 hospital-based screening.
- 22 (f) Monitor any reports made available to the State with
- respect to the hearing screening status of all newborns.
- 24 (g) Monitor the availability of third party reimbursement
- 25 for universal hospital-based hearing screening of newborn
- 26 infants.

- 1 (h) Review administrative rules and make recommendations
- 2 to the Department regarding such rules.
- 3 (Source: P.A. 91-67, eff. 7-9-99.)
- 4 (410 ILCS 213/30)
- 5 Sec. 30. Rules. The Department of <u>Public Health</u> Human
- 6 Services shall promulgate rules necessary to implement this
- 7 Act.
- 8 (Source: P.A. 91-67, eff. 7-9-99.)
- 9 Section 105. The Developmental Disability Prevention Act
- is amended by changing Section 8 as follows:
- 11 (410 ILCS 250/8) (from Ch. 111 1/2, par. 2108)
- 12 Sec. 8. The Department of Public Health, in cooperation
- 13 with the Department of Human Services, shall establish
- 14 guidelines for the development of areawide or local programs
- 15 designed to prevent high risk pregnancies through early
- 16 identification, screening, management, and followup of the
- 17 childbearing age high risk female. Such programs shall be based
- 18 on the local assessment typically by schools, health
- 19 departments, hospitals, perinatal centers, and local medical
- 20 societies of need and with emphasis on the coordination of
- 21 existing resources private and public and in conjunction with
- 22 local health planning agencies. Funding needs for
- 23 demonstration and continuing programs shall be determined by

- 1 the Department of <u>Public Health</u> Human Services and reported to
- 2 the General Assembly along with the guidelines for such
- 3 programs.
- 4 (Source: P.A. 89-507, eff. 7-1-97.)
- 5 Section 110. The WIC Vendor Management Act is amended by
- 6 changing Sections 2 and 3 as follows:
- 7 (410 ILCS 255/2) (from Ch. 111 1/2, par. 7552)
- 8 Sec. 2. The purpose of this Act is to establish the
- 9 statutory authority for the authorization, limitation,
- 10 education and compliance review of WIC retail vendors by the
- 11 Department of Public Health Human Services, and to enable the
- 12 Department to carry out its responsibilities for fiscal
- 13 management and accountability for the food delivery system
- 14 under its jurisdiction.
- 15 (Source: P.A. 89-507, eff. 7-1-97.)
- 16 (410 ILCS 255/3) (from Ch. 111 1/2, par. 7553)
- 17 Sec. 3. As used in this Act, unless the context otherwise
- 18 requires:
- 19 (a) "Department" means the Illinois Department of Public
- 20 Health Human Services.
- 21 (b) "Women, Infants and Children nutrition program" and
- "WIC" mean the federal Special Supplemental Food Program for
- 23 Women, Infants and Children created by federal Public Law

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- 1 92-433, as amended.
- 2 (Source: P.A. 89-507, eff. 7-1-97.)
- 3 Section 115. The Renal Disease Treatment Act is amended by changing Section 3 as follows:
- 5 (410 ILCS 430/3) (from Ch. 111 1/2, par. 22.33)
- Sec. 3. Duties of <u>the Department</u> <del>Departments</del> of Healthcare and Family Services <del>and Public Health</del>.
  - (A) The Department of Healthcare and Family Services shall:
    - (a) With the advice of the Renal Disease Advisory Committee, develop standards for determining eligibility for care and treatment under this program. Among other standards so developed under this paragraph, candidates, to be eligible for care and treatment, must be evaluated in a center properly staffed and equipped for such evaluation.
      - (b) (Blank).
- 16 (c) (Blank).
- (d) Extend financial assistance to persons suffering 17 from chronic renal diseases in obtaining the medical, 18 surgical, nursing, pharmaceutical, and technical services 19 20 necessary in caring for such diseases, including the 21 renting of home dialysis equipment. The Renal Disease 22 Advisory Committee shall recommend to the Department the 23 extent of financial assistance, including the reasonable 24 charges and fees, for:

1	(1) Treatment in a dialysis facility;
2	(2) Hospital treatment for dialysis and transplant
3	surgery;
4	(3) Treatment in a limited care facility;
5	(4) Home dialysis training; and
6	(5) Home dialysis.
7	(e) Assist in equipping dialysis centers.
8	(B) (Blank). The Department of Public Health shall:
9	(a) Assist in the development and expansion of programs
10	for the care and treatment of persons suffering from
11	chronic renal diseases, including dialysis and other
12	medical or surgical procedures and techniques that will
13	have a lifesaving effect in the care and treatment of
14	persons suffering from these diseases.
15	(b) Assist in the development of programs for the
16	prevention of chronic renal diseases.
17	(c) Institute and carry on an educational program among
18	physicians, hospitals, public health departments, and the
19	public concerning chronic renal diseases, including the
20	dissemination of information and the conducting of
21	educational programs concerning the prevention of chronic
22	renal diseases and the methods for the care and treatment
23	of persons suffering from these diseases.
24	(Source: P.A. 95-331, eff. 8-21-07.)

Section 120. The Juvenile Court Act of 1987 is amended by

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1 changing Section 5-715 as follows:

- 2 (705 ILCS 405/5-715)
- 3 Sec. 5-715. Probation.
  - (1) The period of probation or conditional discharge shall not exceed 5 years or until the minor has attained the age of 21 years, whichever is less, except as provided in this Section for a minor who is found to be guilty for an offense which is first degree murder, a Class X felony or a forcible felony. The juvenile court may terminate probation or conditional discharge and discharge the minor at any time if warranted by the conduct of the minor and the ends of justice; provided, however, that the period of probation for a minor who is found to be guilty for an offense which is first degree murder, a Class X felony, or a forcible felony shall be at least 5 years.
    - (2) The court may as a condition of probation or of conditional discharge require that the minor:
- 17 (a) not violate any criminal statute of any 18 jurisdiction;
  - (b) make a report to and appear in person before any person or agency as directed by the court;
  - (c) work or pursue a course of study or vocational
    training;
    - (d) undergo medical or psychiatric treatment, rendered by a psychiatrist or psychological treatment rendered by a clinical psychologist or social work services rendered by a

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1	clinical social worker, or treatment for drug addiction or
2	alcoholism;
3	(e) attend or reside in a facility established for the

- (e) attend or reside in a facility established for the instruction or residence of persons on probation;
  - (f) support his or her dependents, if any;
- (g) refrain from possessing a firearm or other dangerous weapon, or an automobile;
- (h) permit the probation officer to visit him or her at his or her home or elsewhere:
  - (i) reside with his or her parents or in a foster home;
  - (j) attend school;
- (j-5) with the consent of the superintendent of the facility, attend an educational program at a facility other than the school in which the offense was committed if he or she committed a crime of violence as defined in Section 2 of the Crime Victims Compensation Act in a school, on the real property comprising a school, or within 1,000 feet of the real property comprising a school;
  - (k) attend a non-residential program for youth;
- (1) make restitution under the terms of subsection (4) of Section 5-710;
  - (m) contribute to his or her own support at home or in a foster home;
    - (n) perform some reasonable public or community
      service;
      - (o) participate with community corrections programs

including unified delinquency intervention services administered by the Department of <u>Public Health</u> <u>Human Services</u> subject to Section 5 of the Children and Family Services Act;

- (p) pay costs;
- (q) serve a term of home confinement. In addition to any other applicable condition of probation or conditional discharge, the conditions of home confinement shall be that the minor:
  - (i) remain within the interior premises of the place designated for his or her confinement during the hours designated by the court;
  - (ii) admit any person or agent designated by the court into the minor's place of confinement at any time for purposes of verifying the minor's compliance with the conditions of his or her confinement; and
  - (iii) use an approved electronic monitoring device if ordered by the court subject to Article 8A of Chapter V of the Unified Code of Corrections;
- (r) refrain from entering into a designated geographic area except upon terms as the court finds appropriate. The terms may include consideration of the purpose of the entry, the time of day, other persons accompanying the minor, and advance approval by a probation officer, if the minor has been placed on probation, or advance approval by the court, if the minor has been placed on conditional

discharge;

- (s) refrain from having any contact, directly or indirectly, with certain specified persons or particular types of persons, including but not limited to members of street gangs and drug users or dealers;
- (s-5) undergo a medical or other procedure to have a tattoo symbolizing allegiance to a street gang removed from his or her body;
- (t) refrain from having in his or her body the presence of any illicit drug prohibited by the Cannabis Control Act, the Illinois Controlled Substances Act, or the Methamphetamine Control and Community Protection Act, unless prescribed by a physician, and shall submit samples of his or her blood or urine or both for tests to determine the presence of any illicit drug; or
- (u) comply with other conditions as may be ordered by the court.
- (3) The court may as a condition of probation or of conditional discharge require that a minor found guilty on any alcohol, cannabis, methamphetamine, or controlled substance violation, refrain from acquiring a driver's license during the period of probation or conditional discharge. If the minor is in possession of a permit or license, the court may require that the minor refrain from driving or operating any motor vehicle during the period of probation or conditional discharge, except as may be necessary in the course of the

- 1 minor's lawful employment.
  - (3.5) The court shall, as a condition of probation or of conditional discharge, require that a minor found to be guilty and placed on probation for reasons that include a violation of Section 3.02 or Section 3.03 of the Humane Care for Animals Act or paragraph (d) of subsection (1) of Section 21-1 of the Criminal Code of 1961 undergo medical or psychiatric treatment rendered by a psychiatrist or psychological treatment rendered by a clinical psychologist. The condition may be in addition to any other condition.
    - (3.10) The court shall order that a minor placed on probation or conditional discharge for a sex offense as defined in the Sex Offender Management Board Act undergo and successfully complete sex offender treatment. The treatment shall be in conformance with the standards developed under the Sex Offender Management Board Act and conducted by a treatment provider approved by the Board. The treatment shall be at the expense of the person evaluated based upon that person's ability to pay for the treatment.
    - (4) A minor on probation or conditional discharge shall be given a certificate setting forth the conditions upon which he or she is being released.
    - (5) The court shall impose upon a minor placed on probation or conditional discharge, as a condition of the probation or conditional discharge, a fee of \$50 for each month of probation or conditional discharge supervision ordered by the court,

unless after determining the inability of the minor placed on probation or conditional discharge to pay the fee, the court assesses a lesser amount. The court may not impose the fee on a minor who is made a ward of the State under this Act while the minor is in placement. The fee shall be imposed only upon a minor who is actively supervised by the probation and court services department. The court may order the parent, guardian, or legal custodian of the minor to pay some or all of the fee on the minor's behalf.

(6) The General Assembly finds that in order to protect the public, the juvenile justice system must compel compliance with the conditions of probation by responding to violations with swift, certain, and fair punishments and intermediate sanctions. The Chief Judge of each circuit shall adopt a system of structured, intermediate sanctions for violations of the terms and conditions of a sentence of supervision, probation or conditional discharge, under this Act.

The court shall provide as a condition of a disposition of probation, conditional discharge, or supervision, that the probation agency may invoke any sanction from the list of intermediate sanctions adopted by the chief judge of the circuit court for violations of the terms and conditions of the sentence of probation, conditional discharge, or supervision, subject to the provisions of Section 5-720 of this Act.

(Source: P.A. 96-1414, eff. 1-1-11.)

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Section 125. The Cannabis Control Act is amended by changing Section 10.2 as follows:

## (720 ILCS 550/10.2) (from Ch. 56 1/2, par. 710.2)

Sec. 10.2. (a) Twelve and one-half percent of all amounts collected as fines pursuant to the provisions of this Act shall be paid into the Youth Drug Abuse Prevention Fund, which is hereby created in the State treasury, to be used by the Department of Human Services for the funding of programs and services for drug-abuse treatment, and the Department of Public Health prevention and education services, for juveniles.

- (b) Eighty-seven and one-half percent of the proceeds of all fines received under the provisions of this Act shall be transmitted to and deposited in the treasurer's office at the level of government as follows:
  - enforcement personnel representing differing units of local government, the court levying the fine shall equitably allocate 50% of the fine among these units of local government and shall allocate 37 1/2% to the county general corporate fund. In the event that the seizure was made by law enforcement personnel representing a unit of local government from a municipality where the number of inhabitants exceeds 2 million in population, the court levying the fine shall allocate 87 1/2% of the fine to that unit of local government. If the seizure was made by a

combination of law enforcement personnel representing differing units of local government, and at least one of those units represents a municipality where the number of inhabitants exceeds 2 million in population, the court shall equitably allocate 87 1/2% of the proceeds of the fines received among the differing units of local government.

- (2) If such seizure was made by State law enforcement personnel, then the court shall allocate 37 1/2% to the State treasury and 50% to the county general corporate fund.
- (3) If a State law enforcement agency in combination with a law enforcement agency or agencies of a unit or units of local government conducted the seizure, the court shall equitably allocate 37 1/2% of the fines to or among the law enforcement agency or agencies of the unit or units of local government which conducted the seizure and shall allocate 50% to the county general corporate fund.
- enforcement agency or agencies of the unit or units of local government pursuant to subsection (b) shall be made available to that law enforcement agency as expendable receipts for use in the enforcement of laws regulating controlled substances and cannabis. The proceeds of fines awarded to the State treasury shall be deposited in a special fund known as the Drug Traffic Prevention Fund, except that amounts distributed to the

- Secretary of State shall be deposited into the Secretary of 1 2 State Evidence Fund to be used as provided in Section 2-115 of the Illinois Vehicle Code. Monies from this fund may be used by 3 the Department of State Police for use in the enforcement of 5 laws regulating controlled substances and cannabis; to satisfy 6 provisions of the Intergovernmental 7 Enforcement Act; to defray costs and expenses associated with 8 returning violators of this Act, the Illinois Controlled 9 Substances Act, and the Methamphetamine Control and Community 10 Protection Act only, as provided in such Acts, when punishment 11 of the crime shall be confinement of the criminal in the 12 penitentiary; and all other monies shall be paid into the 13 general revenue fund in the State treasury.
- 14 (Source: P.A. 94-556, eff. 9-11-05.)
- Section 130. The Narcotics Profit Forfeiture Act is amended by changing Sections 5 and 5.2 as follows:
- 17 (725 ILCS 175/5) (from Ch. 56 1/2, par. 1655)
- Sec. 5. (a) A person who commits the offense of narcotics racketeering shall:
- 20 (1) be guilty of a Class 1 felony; and
- 21 (2) be subject to a fine of up to \$250,000.
- A person who commits the offense of narcotics racketeering or who violates Section 3 of the Drug Paraphernalia Control Act shall forfeit to the State of Illinois: (A) any profits or

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proceeds and any property or property interest he has acquired or maintained in violation of this Act or Section 3 of the Drug Paraphernalia Control Act or has used to facilitate a violation of this Act that the court determines, after a forfeiture hearing, under subsection (b) of this Section to have been acquired or maintained as a result of narcotics racketeering or violating Section 3 of the Drug Paraphernalia Control Act, or used to facilitate narcotics racketeering; and (B) any interest in, security of, claim against, or property or contractual right of any kind affording a source of influence over, any enterprise which he has established, operated, controlled, conducted, or participated in the conduct of, in violation of this Act or Section 3 of the Drug Paraphernalia Control Act, that the court determines, after a forfeiture hearing, under subsection (b) of this Section to have been acquired or maintained as a result of narcotics racketeering or violating Section 3 of the Drug Paraphernalia Control Act or used to facilitate narcotics racketeering.

(b) The court shall, upon petition by the Attorney General or State's Attorney, at any time subsequent to the filing of an information or return of an indictment, conduct a hearing to determine whether any property or property interest is subject to forfeiture under this Act. At the forfeiture hearing the people shall have the burden of establishing, by a preponderance of the evidence, that property or property interests are subject to forfeiture under this Act. There is a

- rebuttable presumption at such hearing that any property or property interest of a person charged by information or indictment with narcotics racketeering or who is convicted of a violation of Section 3 of the Drug Paraphernalia Control Act is subject to forfeiture under this Section if the State establishes by a preponderance of the evidence that:
  - (1) such property or property interest was acquired by such person during the period of the violation of this Act or Section 3 of the Drug Paraphernalia Control Act or within a reasonable time after such period; and
  - (2) there was no likely source for such property or property interest other than the violation of this Act or Section 3 of the Drug Paraphernalia Control Act.
  - (c) In an action brought by the People of the State of Illinois under this Act, wherein any restraining order, injunction or prohibition or any other action in connection with any property or property interest subject to forfeiture under this Act is sought, the circuit court which shall preside over the trial of the person or persons charged with narcotics racketeering as defined in Section 4 of this Act or violating Section 3 of the Drug Paraphernalia Control Act shall first determine whether there is probable cause to believe that the person or persons so charged has committed the offense of narcotics racketeering as defined in Section 4 of this Act or a violation of Section 3 of the Drug Paraphernalia Control Act and whether the property or property interest is subject to

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forfeiture pursuant to this Act.

In order to make such a determination, prior to entering any such order, the court shall conduct a hearing without a jury, wherein the People shall establish that there is: (i) probable cause that the person or persons so charged have committed the offense of narcotics racketeering or violating Section 3 of the Drug Paraphernalia Control Act and (ii) probable cause that any property or property interest may be subject to forfeiture pursuant to this Act. Such hearing may be conducted simultaneously with a preliminary hearing, if the prosecution is commenced by information or complaint, or by motion of the People, at any stage in the proceedings. The court may accept a finding of probable cause at a preliminary hearing following the filing of an information charging the offense of narcotics racketeering as defined in Section 4 of this Act or the return of an indictment by a grand jury charging the offense of narcotics racketeering as defined in Section 4 of this Act or after a charge is filed for violating Section 3 of the Drug Paraphernalia Control Act as sufficient evidence of probable cause as provided in item (i) above.

Upon such a finding, the circuit court shall enter such restraining order, injunction or prohibition, or shall take such other action in connection with any such property or property interest subject to forfeiture under this Act, as is necessary to insure that such property is not removed from the jurisdiction of the court, concealed, destroyed or otherwise

disposed of by the owner of that property or property interest prior to a forfeiture hearing under subsection (b) of this Section. The Attorney General or State's Attorney shall file a certified copy of such restraining order, injunction or other prohibition with the recorder of deeds or registrar of titles of each county where any such property of the defendant may be located. No such injunction, restraining order or other prohibition shall affect the rights of any bona fide purchaser, mortgagee, judgment creditor or other lien holder arising prior to the date of such filing.

The court may, at any time, upon verified petition by the defendant, conduct a hearing to release all or portions of any such property or interest which the court previously determined to be subject to forfeiture or subject to any restraining order, injunction, or prohibition or other action. The court may release such property to the defendant for good cause shown and within the sound discretion of the court.

- (d) Prosecution under this Act may be commenced by the Attorney General or a State's Attorney.
- (e) Upon an order of forfeiture being entered pursuant to subsection (b) of this Section, the court shall authorize the Attorney General to seize any property or property interest declared forfeited under this Act and under such terms and conditions as the court shall deem proper. Any property or property interest that has been the subject of an entered restraining order, injunction or prohibition or any other

- action filed under subsection (c) shall be forfeited unless the claimant can show by a preponderance of the evidence that the property or property interest has not been acquired or maintained as a result of narcotics racketeering or has not been used to facilitate narcotics racketeering.
  - (f) The Attorney General or his designee is authorized to sell all property forfeited and seized pursuant to this Act, unless such property is required by law to be destroyed or is harmful to the public, and, after the deduction of all requisite expenses of administration and sale, shall distribute the proceeds of such sale, along with any moneys forfeited or seized, in accordance with subsection (g) or (h), whichever is applicable.
  - (g) All monies and the sale proceeds of all other property forfeited and seized pursuant to this Act shall be distributed as follows:
    - (1) An amount equal to 50% shall be distributed to the unit of local government whose officers or employees conducted the investigation into narcotics racketeering and caused the arrest or arrests and prosecution leading to the forfeiture. Amounts distributed to units of local government shall be used for enforcement of laws governing narcotics activity. In the event, however, that the investigation, arrest or arrests and prosecution leading to the forfeiture were undertaken solely by a State agency, the portion provided hereunder shall be paid into the Drug

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Traffic Prevention Fund in the State treasury to be used for enforcement of laws governing narcotics activity.

(2) An amount equal to 12.5% shall be distributed to the county in which the prosecution resulting in the forfeiture was instituted, deposited in a special fund in the county treasury and appropriated to the State's Attorney for use in the enforcement of laws governing narcotics activity.

An amount equal to 12.5% shall be distributed to the Office of the State's Attorneys Appellate Prosecutor and deposited in the Narcotics Profit Forfeiture Fund, which is hereby created in the State treasury, to be used by the Office of the State's Attorneys Appellate Prosecutor for additional expenses incurred in prosecuting appeals arising under this Act. Any amounts remaining in the Fund after all additional expenses have been paid shall be used Office to reduce the participating county the by contributions to the Office on a pro-rated basis as determined by the board of governors of the Office of the State's Attorneys Appellate Prosecutor based on the populations of the participating counties.

(3) An amount equal to 25% shall be paid into the Drug Traffic Prevention Fund in the State treasury to be used by the Department of State Police for funding Metropolitan Enforcement Groups created pursuant to the Intergovernmental Drug Laws Enforcement Act. Any amounts

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remaining in the Fund after full funding of Metropolitan Enforcement Groups shall be used for enforcement, by the State or any unit of local government, of laws governing narcotics activity.

- (h) Where the investigation or indictment for the offense of narcotics racketeering or a violation of Section 3 of the Drug Paraphernalia Control Act has occurred under the provisions of the Statewide Grand Jury Act, all monies and the sale proceeds of all other property shall be distributed as follows:
  - (1)60% shall be distributed to the metropolitan enforcement group, local, municipal, county, or State law agency or agencies which conducted enforcement participated in the investigation resulting forfeiture. The distribution shall bear a reasonable relationship to the degree of direct participation of the law enforcement agency in the effort resulting in the forfeiture, taking into account the total value of the property forfeited and the total law enforcement effort with respect to the violation of the law on which the forfeiture is based. Amounts distributed to the agency or agencies shall be used for the enforcement of laws governing cannabis and controlled substances.
  - (2) 25% shall be distributed by the Attorney General as grants to drug education, treatment and prevention programs approved by the Department of Public Health and

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drug treatment programs licensed or approved by the Department of Human Services. In making these grants, the Attorney General shall take into account the plans and service priorities of, and the needs identified by, the Department of Human Services.

- (3) 15% shall be distributed to the Attorney General and the State's Attorney, if any, participating in the prosecution resulting in the forfeiture. The distribution shall bear a reasonable relationship to the degree of direct participation in the prosecution of the offense, taking into account the total value of the property forfeited and the total amount of time spent in preparing and presenting the case, the complexity of the case and other similar factors. Amounts distributed to the Attorney General under this paragraph shall be retained in a fund held by the State Treasurer as ex-officio custodian to be designated as the Statewide Grand Jury Prosecution Fund and paid out upon the direction of the Attorney General for expenses incurred in criminal prosecutions arising under the Statewide Grand Jury Act. Amounts distributed to a State's Attorney shall be deposited in a special fund in county treasury and appropriated to the State's Attorney for use in the enforcement of laws governing narcotics activity.
- (i) All monies deposited pursuant to this Act in the Drug Traffic Prevention Fund established under Section 5-9-1.2 of

- 1 the Unified Code of Corrections are appropriated, on a
- 2 continuing basis, to the Department of State Police to be used
- 3 for funding Metropolitan Enforcement Groups created pursuant
- 4 to the Intergovernmental Drug Laws Enforcement Act or otherwise
- 5 for the enforcement of laws governing narcotics activity.
- 6 (Source: P.A. 89-507, eff. 7-1-97.)
- 7 (725 ILCS 175/5.2) (from Ch. 56 1/2, par. 1655.2)
- 8 Sec. 5.2. (a) Twelve and one-half percent of all amounts
- 9 collected as fines pursuant to the provisions of this Act shall
- 10 be paid into the Youth Drug Abuse Prevention Fund, which is
- 11 hereby created in the State treasury, to be used by the
- 12 Department of Human Services for the funding of programs and
- 13 services for drug-abuse treatment for juveniles, and by the
- 14 Department of Public Health for prevention and education
- 15 services, for juveniles.
- 16 (b) Eighty-seven and one-half percent of the proceeds of
- 17 all fines received under the provisions of this Act shall be
- 18 transmitted to and deposited in the treasurer's office at the
- 19 level of government as follows:
- 20 (1) If such seizure was made by a combination of law
- 21 enforcement personnel representing differing units of
- local government, the court levying the fine shall
- equitably allocate 50% of the fine among these units of
- local government and shall allocate 37 1/2% to the county
- 25 general corporate fund. In the event that the seizure was

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made by law enforcement personnel representing a unit of local government from a municipality where the number of inhabitants exceeds 2 million in population, the court levying the fine shall allocate 87 1/2% of the fine to that unit of local government. If the seizure was made by a combination of law enforcement personnel representing differing units of local government, and at least one of those units represents a municipality where the number of inhabitants exceeds 2 million in population, the court shall equitably allocate 87 1/2% of the proceeds of the fines received among the differing units of local government.

- (2) If such seizure was made by State law enforcement personnel, then the court shall allocate 37 1/2% to the State treasury and 50% to the county general corporate fund.
- (3) If a State law enforcement agency in combination with a law enforcement agency or agencies of a unit or units of local government conducted the seizure, the court shall equitably allocate 37 1/2% of the fines to or among the law enforcement agency or agencies of the unit or units of local government which conducted the seizure and shall allocate 50% to the county general corporate fund.
- (c) The proceeds of all fines allocated to the law enforcement agency or agencies of the unit or units of local government pursuant to subsection (b) shall be made available

to that law enforcement agency as expendable receipts for use 1 2 in the enforcement of laws regulating controlled substances and cannabis. The proceeds of fines awarded to the State treasury 3 shall be deposited in a special fund known as the Drug Traffic 5 Prevention Fund. Monies from this fund may be used by the 6 Department of State Police for use in the enforcement of laws regulating controlled substances and cannabis; to satisfy 7 8 funding provisions of the Intergovernmental Drug 9 Enforcement Act; to defray costs and expenses associated with 10 returning violators of the Cannabis Control Act and the 11 Illinois Controlled Substances Act only, as provided in those 12 Acts, when punishment of the crime shall be confinement of the criminal in the penitentiary; and all other monies shall be 13 14 paid into the general revenue fund in the State treasury.

- 15 (Source: P.A. 89-507, eff. 7-1-97.)
- Section 135. The Probation and Probation Officers Act is amended by changing Section 16.1 as follows:
- 18 (730 ILCS 110/16.1)
- 19 Sec. 16.1. Redeploy Illinois Program.
- 20 (a) The purpose of this Section is to encourage the 21 deinstitutionalization of juvenile offenders by establishing 22 projects in counties or groups of counties that reallocate 23 State funds from juvenile correctional confinement to local 24 jurisdictions, which will establish a continuum of local,

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community-based sanctions and treatment alternatives juvenile offenders who would be incarcerated if those local services and sanctions did not exist. It is also intended to offer alternatives, when appropriate, to avoid commitment to the Department of Juvenile Justice, to direct child welfare for minors charged with a criminal offense or adjudicated delinquent under Section 5 of the Children and Family Services Act. The allotment of funds will be based on a formula that rewards local jurisdictions for the establishment or expansion of local alternatives to incarceration, and requires them to pay for utilization of incarceration as a In addition, there shall be an allocation of sanction. resources (amount to be determined annually by the Redeploy Illinois Oversight Board) set aside at the beginning of each fiscal year to be made available for any county or groups of counties which need resources only occasionally for services to avoid commitment to the Department of Juvenile Justice for a limited number of youth. This redeployment of funds shall be made in a manner consistent with the Juvenile Court Act of 1987 and the following purposes and policies:

- (1) The juvenile justice system should protect the community, impose accountability to victims and communities for violations of law, and equip juvenile offenders with competencies to live responsibly and productively.
  - (2) Juveniles should be treated in the least

restrictive manner possible while maintaining the safety of the community.

- (3) A continuum of services and sanctions from least restrictive to most restrictive should be available in every community.
- (4) There should be local responsibility and authority for planning, organizing, and coordinating service resources in the community. People in the community can best choose a range of services which reflect community values and meet the needs of their own youth.
- (5) Juveniles who pose a threat to the community or themselves need special care, including secure settings. Such services as detention, long-term incarceration, or residential treatment are too costly to provide in each community and should be coordinated and provided on a regional or Statewide basis.
- (6) The roles of State and local government in creating and maintaining services to youth in the juvenile justice system should be clearly defined. The role of the State is to fund services, set standards of care, train service providers, and monitor the integration and coordination of services. The role of local government should be to oversee the provision of services.
- (b) Each county or circuit participating in the Redeploy Illinois program must create a local plan demonstrating how it will reduce the county or circuit's utilization of secure

- confinement of juvenile offenders in the Illinois Department of

  Juvenile Justice or county detention centers by the creation or

  expansion of individualized services or programs that may

  include but are not limited to the following:
  - (1) Assessment and evaluation services to provide the juvenile justice system with accurate individualized case information on each juvenile offender including mental health, substance abuse, educational, and family information;
  - (2) Direct services to individual juvenile offenders including educational, vocational, mental health, substance abuse, supervision, and service coordination; and
  - (3) Programs that seek to restore the offender to the community, such as victim offender panels, teen courts, competency building, enhanced accountability measures, restitution, and community service. The local plan must be directed in such a manner as to emphasize an individualized approach to providing services to juvenile offenders in an integrated community based system including probation as the broker of services. The plan must also detail the reduction in utilization of secure confinement. The local plan shall be limited to services and shall not include costs for:
    - (i) capital expenditures;
    - (ii) renovations or remodeling;

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1 (iii) personnel costs for probation.

The local plan shall be submitted to the Department of Public Health Human Services.

- (c) A county or group of counties may develop an agreement with the Department of Public Health Human Services to reduce their number of commitments of juvenile offenders, excluding minors sentenced based upon a finding of guilt of first degree murder or an offense which is a Class X forcible felony as defined in the Criminal Code of 1961, to the Department of Juvenile Justice, and then use the savings to develop local programming for youth who would otherwise have been committed to the Department of Juvenile Justice. A county or group of counties shall agree to limit their commitments to 75% of the level of commitments from the average number of juvenile commitments for the past 3 years, and will receive the savings to redeploy for local programming for juveniles who would otherwise be held in confinement. For any county or group of counties with a decrease of juvenile commitments of at least 25%, based on the average reductions of the prior 3 years, which are chosen to participate or continue as sites, the Redeploy Illinois Oversight Board has the authority to reduce the required percentage of future commitments to achieve the purpose of this Section. The agreement shall set forth the following:
- 25 (1) a Statement of the number and type of juvenile 26 offenders from the county who were held in secure

con	finen	ment by	the Illi	nois I	Depa	rtment	of	Juvenil	e Just	ice
or	in	county	detent	ion t	the	previ	ous	year,	and	an
exp	lanat	cion of	which,	and h	how	many,	of	these	offend	ers
migh	nt b	e serve	d through	gh th	e pi	roposed	l Re	edeploy	Illin	ois
Prod	gram	for which	ch the fu	ınds s	hall	be use	ed;			

- (2) a Statement of the service needs of currently confined juveniles;
- (3) a Statement of the type of services and programs to provide for the individual needs of the juvenile offenders, and the research or evidence base that qualifies those services and programs as proven or promising practices;
- (4) a budget indicating the costs of each service or program to be funded under the plan;
- (5) a summary of contracts and service agreements indicating the treatment goals and number of juvenile offenders to be served by each service provider; and
- (6) a Statement indicating that the Redeploy Illinois Program will not duplicate existing services and programs. Funds for this plan shall not supplant existing county funded programs.
- (d) (Blank).
- (d-5) A county or group of counties that does not have an approved Redeploy Illinois program, as described in subsection (b), and that has committed fewer than 10 Redeploy eligible youth to the Department of Juvenile Justice on average over the previous 3 years, may develop an individualized agreement with

- the Department of <u>Public Health</u> Human Services through the Redeploy Illinois program to provide services to youth to avoid commitment to the Department of Juvenile Justice. The agreement shall set forth the following:
  - (1) a statement of the number and type of juvenile offenders from the county who were at risk under any of the categories listed above during the 3 previous years, and an explanation of which of these offenders would be served through the proposed Redeploy Illinois program for which the funds shall be used, or through individualized contracts with existing Redeploy programs in neighboring counties;
    - (2) a statement of the service needs;
  - (3) a statement of the type of services and programs to provide for the individual needs of the juvenile offenders, and the research or evidence that qualifies those services and programs as proven or promising practices;
  - (4) a budget indicating the costs of each service or program to be funded under the plan;
  - (5) a summary of contracts and service agreements indicating the treatment goals and number of juvenile offenders to be served by each service provider; and
  - (6) a statement indicating that the Redeploy Illinois program will not duplicate existing services and programs. Funds for this plan shall not supplant existing county funded programs.

- (e) The Department of <u>Public Health</u> <u>Human Services</u> shall be responsible for the following:
  - (1) Reviewing each Redeploy Illinois Program plan for compliance with standards established for such plans. A plan may be approved as submitted, approved with modifications, or rejected. No plan shall be considered for approval if the circuit or county is not in full compliance with all regulations, standards and guidelines pertaining to the delivery of basic probation services as established by the Supreme Court.
  - (2) Monitoring on a continual basis and evaluating annually both the program and its fiscal activities in all counties receiving an allocation under the Redeploy Illinois Program. Any program or service that has not met the goals and objectives of its contract or service agreement shall be subject to denial for funding in subsequent years. The Department of Public Health Human Services shall evaluate the effectiveness of the Redeploy Illinois Program in each circuit or county. In determining the future funding for the Redeploy Illinois Program under this Act, the evaluation shall include, as a primary indicator of success, a decreased number of confinement days for the county's juvenile offenders.
- (f) Any Redeploy Illinois Program allocations not applied for and approved by the Department of <u>Public Health</u> <u>Human</u> Services shall be available for redistribution to approved

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plans for the remainder of that fiscal year. Any county that invests local moneys in the Redeploy Illinois Program shall be given first consideration for any redistribution of allocations. Jurisdictions participating in Redeploy Illinois that exceed their agreed upon level of commitments to the Department of Juvenile Justice shall reimburse the Department of Corrections for each commitment above the agreed upon level.

- (g) Implementation of Redeploy Illinois.
  - (1) Oversight of Redeploy Illinois.
  - (i) Redeploy Illinois Oversight Board. The Department of Public Health Human Services shall convene an oversight board to oversee the Redeploy Illinois Program. The Board shall include, but not be limited to, designees from the Department of Juvenile the Department of Human Services, Administrative Office of Illinois Courts, the Illinois Juvenile Justice Commission, the Illinois Criminal Information Authority, the Department of Justice Children and Family Services, the State Board of Education, the Cook County State's Attorney, and a State's Attorney selected by the President of the Illinois State's Attorney's Association, the Cook County Public Defender, a representative of defense bar appointed by the Chief Justice of the Illinois Supreme Court, a representative of probation appointed by the Chief Justice of the Illinois Supreme

Court, and judicial representation appointed by the
Chief Justice of the Illinois Supreme Court. Up to an
additional 9 members may be appointed by the <u>Director</u>
of Public Health Secretary of Human Services from
recommendations by the Oversight Board; these
appointees shall possess a knowledge of juvenile
justice issues and reflect the collaborative
public/private relationship of Redeploy programs.

- (ii) Responsibilities of the Redeploy Illinois Oversight Board. The Oversight Board shall:
  - (A) Identify jurisdictions to be included in the program of Redeploy Illinois.
  - (B) Develop a formula for reimbursement of local jurisdictions for local and community-based services utilized in lieu of commitment to the Department of Juvenile Justice, as well as for any charges for local jurisdictions for commitments above the agreed upon limit in the approved plan.
  - (C) Identify resources sufficient to support the administration and evaluation of Redeploy Illinois.
  - (D) Develop a process and identify resources to support on-going monitoring and evaluation of Redeploy Illinois.
  - (E) Develop a process and identify resources to support training on Redeploy Illinois.

1	(E-5)	Review	proposed	individual	ized
2	agreements	and appr	ove where	appropriate	the
3	distributio	on of resour	ces.		
4	(F) Re	port to th	e Governor	and the Gen	eral

- (F) Report to the Governor and the General Assembly on an annual basis on the progress of Redeploy Illinois.
- (iii) Length of Planning Phase. The planning phase may last up to, but may in no event last longer than, July 1, 2004.
- (2) (Blank).
- (3) There shall be created the Redeploy County Review Committee composed of the designees of the <u>Director of Public Health Secretary of Human Services</u> and the Directors of Juvenile Justice, of Children and Family Services, and of the Governor's Office of Management and Budget who shall constitute a subcommittee of the Redeploy Illinois Oversight Board.
- (h) Responsibilities of the County Review Committee. The County Review Committee shall:
  - (1) Review individualized agreements from counties requesting resources on an occasional basis for services for youth described in subsection (d-5).
  - (2) Report its decisions to the Redeploy Illinois Oversight Board at regularly scheduled meetings.
  - (3) Monitor the effectiveness of the resources in meeting the mandates of the Redeploy Illinois program set

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- forth in this Section so these results might be included in the Report described in clause (g)(1)(ii)(F).
  - (4) During the third quarter, assess the amount of remaining funds available and necessary to complete the fiscal year so that any unused funds may be distributed as defined in subsection (f).
  - (5) Ensure that the number of youth from any applicant county receiving individualized resources will not exceed the previous three-year average of Redeploy eligible recipients and that counties are in conformity with all other elements of this law.
- 12 (i) Implementation of this Section is subject to appropriation.
- (j) Rulemaking authority to implement this amendatory Act of the 95th General Assembly, if any, is conditioned on the rules being adopted in accordance with all provisions of and procedures and rules implementing the Illinois Administrative Procedure Act; any purported rule not so adopted, for whatever reason, is unauthorized.
- 20 (Source: P.A. 94-696, eff. 6-1-06; 94-1032, eff. 1-1-07; 21 95-1050, eff. 1-1-10.)
- Section 140. The Illinois Domestic Violence Act of 1986 is amended by changing Section 214 as follows:
- 24 (750 ILCS 60/214) (from Ch. 40, par. 2312-14)

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- 1 Sec. 214. Order of protection; remedies.
- 2 (a) Issuance of order. If the court finds that petitioner has been abused by a family or household member or that 3 petitioner is a high-risk adult who has been abused, neglected, 4 5 or exploited, as defined in this Act, an order of protection prohibiting the abuse, neglect, or exploitation shall issue; 6 7 provided that petitioner must also satisfy the requirements of 8 one of the following Sections, as appropriate: Section 217 on 9 emergency orders, Section 218 on interim orders, or Section 219 10 on plenary orders. Petitioner shall not be denied an order of 11 protection because petitioner or respondent is a minor. The 12 court, when determining whether or not to issue an order of protection, shall not require physical manifestations of abuse 13 on the person of the victim. Modification and extension of 14 prior orders of protection shall be in accordance with this 15 16 Act.
  - (b) Remedies and standards. The remedies to be included in an order of protection shall be determined in accordance with this Section and one of the following Sections, as appropriate: Section 217 on emergency orders, Section 218 on interim orders, and Section 219 on plenary orders. The remedies listed in this subsection shall be in addition to other civil or criminal remedies available to petitioner.
  - (1) Prohibition of abuse, neglect, or exploitation.

    Prohibit respondent's harassment, interference with personal liberty, intimidation of a dependent, physical

abuse, or willful deprivation, neglect or exploitation, as defined in this Act, or stalking of the petitioner, as defined in Section 12-7.3 of the Criminal Code of 1961, if such abuse, neglect, exploitation, or stalking has occurred or otherwise appears likely to occur if not prohibited.

- (2) Grant of exclusive possession of residence. Prohibit respondent from entering or remaining in any residence, household, or premises of the petitioner, including one owned or leased by respondent, if petitioner has a right to occupancy thereof. The grant of exclusive possession of the residence, household, or premises shall not affect title to real property, nor shall the court be limited by the standard set forth in Section 701 of the Illinois Marriage and Dissolution of Marriage Act.
  - (A) Right to occupancy. A party has a right to occupancy of a residence or household if it is solely or jointly owned or leased by that party, that party's spouse, a person with a legal duty to support that party or a minor child in that party's care, or by any person or entity other than the opposing party that authorizes that party's occupancy (e.g., a domestic violence shelter). Standards set forth in subparagraph (B) shall not preclude equitable relief.
  - (B) Presumption of hardships. If petitioner and respondent each has the right to occupancy of a

residence or household, the court shall balance (i) the hardships to respondent and any minor child or dependent adult in respondent's care resulting from entry of this remedy with (ii) the hardships to petitioner and any minor child or dependent adult in petitioner's care resulting from continued exposure to the risk of abuse (should petitioner remain at the residence or household) or from loss of possession of the residence or household (should petitioner leave to avoid the risk of abuse). When determining the balance of hardships, the court shall also take into account the accessibility of the residence or household. Hardships need not be balanced if respondent does not have a right to occupancy.

The balance of hardships is presumed to favor possession by petitioner unless the presumption is rebutted by a preponderance of the evidence, showing that the hardships to respondent substantially outweigh the hardships to petitioner and any minor child or dependent adult in petitioner's care. The court, on the request of petitioner or on its own motion, may order respondent to provide suitable, accessible, alternate housing for petitioner instead of excluding respondent from a mutual residence or household.

(3) Stay away order and additional prohibitions. Order

respondent to stay away from petitioner or any other person protected by the order of protection, or prohibit respondent from entering or remaining present at petitioner's school, place of employment, or other specified places at times when petitioner is present, or both, if reasonable, given the balance of hardships. Hardships need not be balanced for the court to enter a stay away order or prohibit entry if respondent has no right to enter the premises.

- (A) If an order of protection grants petitioner exclusive possession of the residence, or prohibits respondent from entering the residence, or orders respondent to stay away from petitioner or other protected persons, then the court may allow respondent access to the residence to remove items of clothing and personal adornment used exclusively by respondent, medications, and other items as the court directs. The right to access shall be exercised on only one occasion as the court directs and in the presence of an agreed-upon adult third party or law enforcement officer.
- (B) When the petitioner and the respondent attend the same public, private, or non-public elementary, middle, or high school, the court when issuing an order of protection and providing relief shall consider the severity of the act, any continuing physical danger or

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emotional distress to the petitioner, the educational rights guaranteed to the petitioner and respondent under federal and State law, the availability of a transfer of the respondent to another school, a change of placement or a change of program of the respondent, the expense, difficulty, and educational disruption that would be caused by a transfer of the respondent to another school, and any other relevant facts of the case. The court may order that the respondent not attend the public, private, or non-public elementary, middle, or high school attended by the petitioner, order that the respondent accept a change of placement or change of program, as determined by the school district or private or non-public school, or place restrictions on the respondent's movements within the school attended by the petitioner. The respondent bears the burden of proving by a preponderance of the evidence that a transfer, change of placement, or change of program of the respondent is not available. The respondent also bears the burden of production with respect to the expense, difficulty, and educational disruption that would be caused by a transfer of the respondent to another school. A transfer, change of placement, or change of program is not unavailable to the respondent solely on the ground that the respondent does not agree with the school district's or private or

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non-public school's transfer, change of placement, or change of program or solely on the ground that the respondent fails or refuses to consent or otherwise does not take an action required to effectuate a transfer, change of placement, or change of program. When a court orders a respondent to stay away from the public, private, or non-public school attended by the petitioner and the respondent requests a transfer to another attendance center within the respondent's school district or private or non-public school, the school district or private or non-public school shall have sole discretion to determine the attendance center to which the respondent is transferred. In the event the court order results in a transfer of the minor respondent to another attendance center, a change in the respondent's placement, or a change of the respondent's program, the parents, quardian, or legal custodian of the respondent is responsible for transportation and other costs associated with the transfer or change.

(C) The court may order the parents, guardian, or legal custodian of a minor respondent to take certain actions or to refrain from taking certain actions to ensure that the respondent complies with the order. The court may order the parents, guardian, or legal custodian of a minor respondent to take certain actions

or to refrain from taking certain actions to ensure that the respondent complies with the order. In the event the court orders a transfer of the respondent to another school, the parents, guardian, or legal custodian of the respondent is responsible for transportation and other costs associated with the change of school by the respondent.

- (4) Counseling. Require or recommend the respondent to undergo counseling for a specified duration with a social worker, psychologist, clinical psychologist, psychiatrist, family service agency, alcohol or substance abuse program, mental health center guidance counselor, agency providing services to elders, program designed for domestic violence abusers or any other guidance service the court deems appropriate. The Court may order the respondent in any intimate partner relationship to report to a an Illinois Department of Public Health Human Services protocol approved partner abuse intervention program for an assessment and to follow all recommended treatment.
- (5) Physical care and possession of the minor child. In order to protect the minor child from abuse, neglect, or unwarranted separation from the person who has been the minor child's primary caretaker, or to otherwise protect the well-being of the minor child, the court may do either or both of the following: (i) grant petitioner physical care or possession of the minor child, or both, or (ii)

order respondent to return a minor child to, or not remove a minor child from, the physical care of a parent or person in loco parentis.

If a court finds, after a hearing, that respondent has committed abuse (as defined in Section 103) of a minor child, there shall be a rebuttable presumption that awarding physical care to respondent would not be in the minor child's best interest.

(6) Temporary legal custody. Award temporary legal custody to petitioner in accordance with this Section, the Illinois Marriage and Dissolution of Marriage Act, the Illinois Parentage Act of 1984, and this State's Uniform Child-Custody Jurisdiction and Enforcement Act.

If a court finds, after a hearing, that respondent has committed abuse (as defined in Section 103) of a minor child, there shall be a rebuttable presumption that awarding temporary legal custody to respondent would not be in the child's best interest.

(7) Visitation. Determine the visitation rights, if any, of respondent in any case in which the court awards physical care or temporary legal custody of a minor child to petitioner. The court shall restrict or deny respondent's visitation with a minor child if the court finds that respondent has done or is likely to do any of the following: (i) abuse or endanger the minor child during visitation; (ii) use the visitation as an opportunity to

abuse or harass petitioner or petitioner's family or household members; (iii) improperly conceal or detain the minor child; or (iv) otherwise act in a manner that is not in the best interests of the minor child. The court shall not be limited by the standards set forth in Section 607.1 of the Illinois Marriage and Dissolution of Marriage Act. If the court grants visitation, the order shall specify dates and times for the visitation to take place or other specific parameters or conditions that are appropriate. No order for visitation shall refer merely to the term "reasonable visitation".

Petitioner may deny respondent access to the minor child if, when respondent arrives for visitation, respondent is under the influence of drugs or alcohol and constitutes a threat to the safety and well-being of petitioner or petitioner's minor children or is behaving in a violent or abusive manner.

If necessary to protect any member of petitioner's family or household from future abuse, respondent shall be prohibited from coming to petitioner's residence to meet the minor child for visitation, and the parties shall submit to the court their recommendations for reasonable alternative arrangements for visitation. A person may be approved to supervise visitation only after filing an affidavit accepting that responsibility and acknowledging accountability to the court.

(8)	Re	moval	or	conce	eal	ment	of	mino	or chi	ild.	Prohib	oit
responde	ent	from	n rem	oving	a	mino	r c	hild	from	the	State	or
conceal	ina	the o	child	wit.h:	in	the S	t.at.	e.				

- (9) Order to appear. Order the respondent to appear in court, alone or with a minor child, to prevent abuse, neglect, removal or concealment of the child, to return the child to the custody or care of the petitioner or to permit any court-ordered interview or examination of the child or the respondent.
- (10) Possession of personal property. Grant petitioner exclusive possession of personal property and, if respondent has possession or control, direct respondent to promptly make it available to petitioner, if:
  - (i) petitioner, but not respondent, owns the property; or
  - (ii) the parties own the property jointly; sharing it would risk abuse of petitioner by respondent or is impracticable; and the balance of hardships favors temporary possession by petitioner.

If petitioner's sole claim to ownership of the property is that it is marital property, the court may award petitioner temporary possession thereof under the standards of subparagraph (ii) of this paragraph only if a proper proceeding has been filed under the Illinois Marriage and Dissolution of Marriage Act, as now or hereafter amended.

L	No	order	under	this	provision	shall	affect	title	to
2	propert	ZV.							

- (11) Protection of property. Forbid the respondent from taking, transferring, encumbering, concealing, damaging or otherwise disposing of any real or personal property, except as explicitly authorized by the court, if:
  - (i) petitioner, but not respondent, owns the property; or
  - (ii) the parties own the property jointly, and the balance of hardships favors granting this remedy.

If petitioner's sole claim to ownership of the property is that it is marital property, the court may grant petitioner relief under subparagraph (ii) of this paragraph only if a proper proceeding has been filed under the Illinois Marriage and Dissolution of Marriage Act, as now or hereafter amended.

The court may further prohibit respondent from improperly using the financial or other resources of an aged member of the family or household for the profit or advantage of respondent or of any other person.

(11.5) Protection of animals. Grant the petitioner the exclusive care, custody, or control of any animal owned, possessed, leased, kept, or held by either the petitioner or the respondent or a minor child residing in the residence or household of either the petitioner or the respondent and order the respondent to stay away from the

animal and forbid the respondent from taking, transferring, encumbering, concealing, harming, or otherwise disposing of the animal.

- (12) Order for payment of support. Order respondent to pay temporary support for the petitioner or any child in the petitioner's care or custody, when the respondent has a legal obligation to support that person, in accordance with the Illinois Marriage and Dissolution of Marriage Act, which shall govern, among other matters, the amount of support, payment through the clerk and withholding of income to secure payment. An order for child support may be granted to a petitioner with lawful physical care or custody of a child, or an order or agreement for physical care or custody, prior to entry of an order for legal custody. Such a support order shall expire upon entry of a valid order granting legal custody to another, unless otherwise provided in the custody order.
- (13) Order for payment of losses. Order respondent to pay petitioner for losses suffered as a direct result of the abuse, neglect, or exploitation. Such losses shall include, but not be limited to, medical expenses, lost earnings or other support, repair or replacement of property damaged or taken, reasonable attorney's fees, court costs and moving or other travel expenses, including additional reasonable expenses for temporary shelter and restaurant meals.

(i) Losses affecting family needs. If a party is
entitled to seek maintenance, child support or
property distribution from the other party under the
Illinois Marriage and Dissolution of Marriage Act, as
now or hereafter amended, the court may order
respondent to reimburse petitioner's actual losses, to
the extent that such reimbursement would be
"appropriate temporary relief", as authorized by
subsection (a)(3) of Section 501 of that Act.

- (ii) Recovery of expenses. In the case of an improper concealment or removal of a minor child, the court may order respondent to pay the reasonable expenses incurred or to be incurred in the search for and recovery of the minor child, including but not limited to legal fees, court costs, private investigator fees, and travel costs.
- (14) Prohibition of entry. Prohibit the respondent from entering or remaining in the residence or household while the respondent is under the influence of alcohol or drugs and constitutes a threat to the safety and well-being of the petitioner or the petitioner's children.
  - (14.5) Prohibition of firearm possession.
  - (a) Prohibit a respondent against whom an order of protection was issued from possessing any firearms during the duration of the order if the order:
    - (1) was issued after a hearing of which such

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person received actual notice, and at which such person had an opportunity to participate;

- (2) restrains such person from harassing, stalking, or threatening an intimate partner of such person or child of such intimate partner or person, or engaging in other conduct that would place an intimate partner in reasonable fear of bodily injury to the partner or child; and
- (3) (i) includes a finding that such person represents a credible threat to the physical safety of such intimate partner or child; or (ii) by its terms explicitly prohibits the use, attempted use, or threatened use of physical force against such intimate partner or child that would reasonably be expected to cause bodily injury.

Firearm Owner's Identification Card in the possession of the respondent, except as provided in subsection (b), shall be ordered by the court to be turned over to the local law enforcement agency for safekeeping. The court shall issue a warrant for seizure of any firearm and Firearm Owner's Identification Card in possession the respondent, to be kept by the local law enforcement agency for safekeeping, except as provided subsection (b). The period of safekeeping shall be for the duration of the order of protection. The firearm or

firearms and Firearm Owner's Identification Card shall be returned to the respondent at the end of the order of protection.

- (b) If the respondent is a peace officer as defined in Section 2-13 of the Criminal Code of 1961, the court shall order that any firearms used by the respondent in the performance of his or her duties as a peace officer be surrendered to the chief law enforcement executive of the agency in which the respondent is employed, who shall retain the firearms for safekeeping for the duration of the order of protection.
- (c) Upon expiration of the period of safekeeping, if the firearms or Firearm Owner's Identification Card cannot be returned to respondent because respondent cannot be located, fails to respond to requests to retrieve the firearms, or is not lawfully eligible to possess a firearm, upon petition from the local law enforcement agency, the court may order the local law enforcement agency to destroy the firearms, use the firearms for training purposes, or for any other application as deemed appropriate by the local law enforcement agency; or that the firearms be turned over to a third party who is lawfully eligible to possess firearms, and who does not reside with respondent.
- (15) Prohibition of access to records. If an order of protection prohibits respondent from having contact with

the minor child, or if petitioner's address is omitted under subsection (b) of Section 203, or if necessary to prevent abuse or wrongful removal or concealment of a minor child, the order shall deny respondent access to, and prohibit respondent from inspecting, obtaining, or attempting to inspect or obtain, school or any other records of the minor child who is in the care of petitioner.

- (16) Order for payment of shelter services. Order respondent to reimburse a shelter providing temporary housing and counseling services to the petitioner for the cost of the services, as certified by the shelter and deemed reasonable by the court.
- (17) Order for injunctive relief. Enter injunctive relief necessary or appropriate to prevent further abuse of a family or household member or further abuse, neglect, or exploitation of a high-risk adult with disabilities or to effectuate one of the granted remedies, if supported by the balance of hardships. If the harm to be prevented by the injunction is abuse or any other harm that one of the remedies listed in paragraphs (1) through (16) of this subsection is designed to prevent, no further evidence is necessary that the harm is an irreparable injury.
- (c) Relevant factors; findings.
- (1) In determining whether to grant a specific remedy, other than payment of support, the court shall consider

relevant factors, including but not limited to the following:

- (i) the nature, frequency, severity, pattern and consequences of the respondent's past abuse, neglect or exploitation of the petitioner or any family or household member, including the concealment of his or her location in order to evade service of process or notice, and the likelihood of danger of future abuse, neglect, or exploitation to petitioner or any member of petitioner's or respondent's family or household; and
- (ii) the danger that any minor child will be abused or neglected or improperly removed from the jurisdiction, improperly concealed within the State or improperly separated from the child's primary caretaker.
- (2) In comparing relative hardships resulting to the parties from loss of possession of the family home, the court shall consider relevant factors, including but not limited to the following:
  - (i) availability, accessibility, cost, safety, adequacy, location and other characteristics of alternate housing for each party and any minor child or dependent adult in the party's care;
    - (ii) the effect on the party's employment; and
  - (iii) the effect on the relationship of the party, and any minor child or dependent adult in the party's

car	e, to	family,	school,	church	and	community.
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- (3) Subject to the exceptions set forth in paragraph (4) of this subsection, the court shall make its findings in an official record or in writing, and shall at a minimum set forth the following:
  - (i) That the court has considered the applicable relevant factors described in paragraphs (1) and (2) of this subsection.
  - (ii) Whether the conduct or actions of respondent, unless prohibited, will likely cause irreparable harm or continued abuse.
  - (iii) Whether it is necessary to grant the requested relief in order to protect petitioner or other alleged abused persons.
- (4) For purposes of issuing an ex parte emergency order of protection, the court, as an alternative to or as a supplement to making the findings described in paragraphs (c)(3)(i) through (c)(3)(iii) of this subsection, may use the following procedure:

When a verified petition for an emergency order of protection in accordance with the requirements of Sections 203 and 217 is presented to the court, the court shall examine petitioner on oath or affirmation. An emergency order of protection shall be issued by the court if it appears from the contents of the petition and the examination of petitioner that the averments are

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sufficient to indicate abuse by respondent and to support the granting of relief under the issuance of the emergency order of protection.

married (5) Never parties. No rights or responsibilities for a minor child born outside of marriage attach to a putative father until a father and child relationship has been established under the Illinois Parentage Act of 1984, the Illinois Public Aid Code, Section 12 of the Vital Records Act, the Juvenile Court Act of 1987, the Probate Act of 1985, the Revised Uniform Reciprocal Enforcement of Support Act, the Uniform Interstate Family Support Act, the Expedited Child Support Act of 1990, any judicial, administrative, or other act of another state or territory, any other Illinois statute, or by any foreign nation establishing the father and child relationship, any other proceeding substantially conformity with the Personal Responsibility and Work Opportunity Reconciliation Act of 1996 (Pub. L. 104-193), or where both parties appeared in open court or at an administrative hearing acknowledging under admitting by affirmation the existence of a father and child relationship. Absent such an adjudication, finding, or acknowledgement, no putative father shall be granted temporary custody of the minor child, visitation with the minor child, or physical care and possession of the minor child, nor shall an order of payment for support of the

1 minor child be entered.

- (d) Balance of hardships; findings. If the court finds that the balance of hardships does not support the granting of a remedy governed by paragraph (2), (3), (10), (11), or (16) of subsection (b) of this Section, which may require such balancing, the court's findings shall so indicate and shall include a finding as to whether granting the remedy will result in hardship to respondent that would substantially outweigh the hardship to petitioner from denial of the remedy. The findings shall be an official record or in writing.
  - (e) Denial of remedies. Denial of any remedy shall not be based, in whole or in part, on evidence that:
    - (1) Respondent has cause for any use of force, unless that cause satisfies the standards for justifiable use of force provided by Article VII of the Criminal Code of 1961;
      - (2) Respondent was voluntarily intoxicated;
    - (3) Petitioner acted in self-defense or defense of another, provided that, if petitioner utilized force, such force was justifiable under Article VII of the Criminal Code of 1961;
    - (4) Petitioner did not act in self-defense or defense of another;
    - (5) Petitioner left the residence or household to avoid further abuse, neglect, or exploitation by respondent;
    - (6) Petitioner did not leave the residence or household to avoid further abuse, neglect, or exploitation by

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          respondent;
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              (7) Conduct by any family or household member excused
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          the abuse, neglect, or exploitation by respondent, unless
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          that same conduct would have excused such abuse, neglect,
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          or exploitation if the parties had not been family or
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          household members.
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      (Source: P.A. 96-701, eff. 1-1-10; 96-1239, eff. 1-1-11;
      97-158, eff. 1-1-12; 97-294, eff. 1-1-12; revised 10-4-11.)
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          (20 ILCS 1305/10-5 rep.)
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          (20 ILCS 1305/10-6 rep.)
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          (20 ILCS 1305/10-7 rep.)
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          (20 ILCS 1305/10-25 rep.)
          (20 ILCS 1305/10-33 rep.)
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14
          (20 ILCS 1305/10-35 rep.)
15
          (20 ILCS 1305/10-45 rep.)
16
          (20 ILCS 1305/10-50 rep.)
          Section 900. The Department of Human Services Act is
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