

99TH GENERAL ASSEMBLY State of Illinois 2015 and 2016 HB6566

by Rep. Barbara Wheeler

SYNOPSIS AS INTRODUCED:

See Index

Amends the Illinois Abortion Law of 1975. Provides that a person may not perform an abortion of a fetus solely because of the fetus's race, color, national origin, ancestry, sex, or diagnosis or potential diagnosis of the fetus having Down syndrome or any other disability. Provides that at least 18 hours before an abortion is performed on a pregnant woman whose fetus is diagnosed with a lethal fetal anomaly, the physician who will perform the abortion shall: (1) orally and in person, inform the pregnant woman of the availability of perinatal hospice services; and (2) provide the pregnant woman copies of the perinatal hospice brochure developed by the Department of Public Health and the list of perinatal hospice providers and programs by printing the perinatal hospice brochure and list of perinatal hospice providers from the Department's Internet web site. Provides that the Department shall adopt rules within 90 days after the effective date of the amendatory Act to implement these provisions. Provides that the report of abortions submitted to the Department shall include the gender of the fetus, if detectable; and whether the fetus has been diagnosed with or has a potential diagnosis of having Down syndrome or any other disability. Provides that a person who knowingly or intentionally performs an abortion in violation of these provisions may be subject to: (1) disciplinary sanctions under the Medical Practice Act of 1987; and (2) civil liability for wrongful death. Amends the Medical Practice Act of 1987 to make conforming changes. Amends the Illinois Human Rights Act. Provides that it is unlawful discrimination under the Act to perform an abortion solely because of the race, color, sex, disability, national origin, or ancestry of the fetus. Effective immediately.

LRB099 21573 RLC 47960 b

FISCAL NOTE ACT MAY APPLY

1 AN AG	CT concern	ning health.
---------	------------	--------------

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

- Section 5. The Medical Practice Act of 1987 is amended by changing Section 22 as follows:
- 6 (225 ILCS 60/22) (from Ch. 111, par. 4400-22)
- 7 (Section scheduled to be repealed on December 31, 2016)
- 8 Sec. 22. Disciplinary action.
- 9 (A) The Department may revoke, suspend, place on probation,
 10 reprimand, refuse to issue or renew, or take any other
 11 disciplinary or non-disciplinary action as the Department may
 12 deem proper with regard to the license or permit of any person
 13 issued under this Act, including imposing fines not to exceed
 14 \$10,000 for each violation, upon any of the following grounds:
- 15 (1) Performance of an elective abortion in any place, 16 locale, facility, or institution other than:
- 17 (a) a facility licensed pursuant to the Ambulatory
 18 Surgical Treatment Center Act;
- 19 (b) an institution licensed under the Hospital 20 Licensing Act;
- (c) an ambulatory surgical treatment center or hospitalization or care facility maintained by the State or any agency thereof, where such department or

agency ha	as autho:	rity u	nder	la	w to	establish a	ind enfo	orce
standard	s for	the	ambu	ılat	cory	surgical	treatr	nent
centers,	hospita	lizat	ion,	or	care	facilities	under	its
managemei	nt and co	ont.rol	:					

- (d) ambulatory surgical treatment centers, hospitalization or care facilities maintained by the Federal Government; or
- (e) ambulatory surgical treatment centers, hospitalization or care facilities maintained by any university or college established under the laws of this State and supported principally by public funds raised by taxation.
- (2) Performance of an abortion procedure in a wilful and wanton manner on a woman who was not pregnant at the time the abortion procedure was performed.
- (2.5) Performance of an abortion procedure without complying with Sections 3.2, 3.3, and 3.4 of the Illinois Abortion Law of 1975.
- (3) A plea of guilty or nolo contendere, finding of guilt, jury verdict, or entry of judgment or sentencing, including, but not limited to, convictions, preceding sentences of supervision, conditional discharge, or first offender probation, under the laws of any jurisdiction of the United States of any crime that is a felony.
 - (4) Gross negligence in practice under this Act.
 - (5) Engaging in dishonorable, unethical or

- unprofessional conduct of a character likely to deceive, defraud or harm the public.
 - (6) Obtaining any fee by fraud, deceit, or misrepresentation.
 - (7) Habitual or excessive use or abuse of drugs defined in law as controlled substances, of alcohol, or of any other substances which results in the inability to practice with reasonable judgment, skill or safety.
 - (8) Practicing under a false or, except as provided by law, an assumed name.
 - (9) Fraud or misrepresentation in applying for, or procuring, a license under this Act or in connection with applying for renewal of a license under this Act.
 - (10) Making a false or misleading statement regarding their skill or the efficacy or value of the medicine, treatment, or remedy prescribed by them at their direction in the treatment of any disease or other condition of the body or mind.
 - (11) Allowing another person or organization to use their license, procured under this Act, to practice.
 - (12) Adverse action taken by another state or jurisdiction against a license or other authorization to practice as a medical doctor, doctor of osteopathy, doctor of osteopathic medicine or doctor of chiropractic, a certified copy of the record of the action taken by the other state or jurisdiction being prima facie evidence

thereof. This includes any adverse action taken by a State or federal agency that prohibits a medical doctor, doctor of osteopathy, doctor of osteopathic medicine, or doctor of chiropractic from providing services to the agency's participants.

- (13) Violation of any provision of this Act or of the Medical Practice Act prior to the repeal of that Act, or violation of the rules, or a final administrative action of the Secretary, after consideration of the recommendation of the Disciplinary Board.
- (14) Violation of the prohibition against fee splitting in Section 22.2 of this Act.
- (15) A finding by the Disciplinary Board that the registrant after having his or her license placed on probationary status or subjected to conditions or restrictions violated the terms of the probation or failed to comply with such terms or conditions.
 - (16) Abandonment of a patient.
- (17) Prescribing, selling, administering, distributing, giving or self-administering any drug classified as a controlled substance (designated product) or narcotic for other than medically accepted therapeutic purposes.
- (18) Promotion of the sale of drugs, devices, appliances or goods provided for a patient in such manner as to exploit the patient for financial gain of the

physician.

- (19) Offering, undertaking or agreeing to cure or treat disease by a secret method, procedure, treatment or medicine, or the treating, operating or prescribing for any human condition by a method, means or procedure which the licensee refuses to divulge upon demand of the Department.
- (20) Immoral conduct in the commission of any act including, but not limited to, commission of an act of sexual misconduct related to the licensee's practice.
- (21) Wilfully making or filing false records or reports in his or her practice as a physician, including, but not limited to, false records to support claims against the medical assistance program of the Department of Healthcare and Family Services (formerly Department of Public Aid) under the Illinois Public Aid Code.
- (22) Wilful omission to file or record, or wilfully impeding the filing or recording, or inducing another person to omit to file or record, medical reports as required by law, or wilfully failing to report an instance of suspected abuse or neglect as required by law.
- (23) Being named as a perpetrator in an indicated report by the Department of Children and Family Services under the Abused and Neglected Child Reporting Act, and upon proof by clear and convincing evidence that the licensee has caused a child to be an abused child or neglected child as defined in the Abused and Neglected

Child Reporting Act.

- (24) Solicitation of professional patronage by any corporation, agents or persons, or profiting from those representing themselves to be agents of the licensee.
- (25) Gross and wilful and continued overcharging for professional services, including filing false statements for collection of fees for which services are not rendered, including, but not limited to, filing such false statements for collection of monies for services not rendered from the medical assistance program of the Department of Healthcare and Family Services (formerly Department of Public Aid) under the Illinois Public Aid Code.
- (26) A pattern of practice or other behavior which demonstrates incapacity or incompetence to practice under this Act.
- (27) Mental illness or disability which results in the inability to practice under this Act with reasonable judgment, skill or safety.
- (28) Physical illness, including, but not limited to, deterioration through the aging process, or loss of motor skill which results in a physician's inability to practice under this Act with reasonable judgment, skill or safety.
- (29) Cheating on or attempt to subvert the licensing examinations administered under this Act.
- (30) Wilfully or negligently violating the confidentiality between physician and patient except as

- 1 required by law.
 - (31) The use of any false, fraudulent, or deceptive statement in any document connected with practice under this Act.
 - (32) Aiding and abetting an individual not licensed under this Act in the practice of a profession licensed under this Act.
 - (33) Violating state or federal laws or regulations relating to controlled substances, legend drugs, or ephedra as defined in the Ephedra Prohibition Act.
 - (34) Failure to report to the Department any adverse final action taken against them by another licensing jurisdiction (any other state or any territory of the United States or any foreign state or country), by any peer review body, by any health care institution, by any professional society or association related to practice under this Act, by any governmental agency, by any law enforcement agency, or by any court for acts or conduct similar to acts or conduct which would constitute grounds for action as defined in this Section.
 - (35) Failure to report to the Department surrender of a license or authorization to practice as a medical doctor, a doctor of osteopathy, a doctor of osteopathic medicine, or doctor of chiropractic in another state or jurisdiction, or surrender of membership on any medical staff or in any medical or professional association or society, while

under disciplinary investigation by any of those authorities or bodies, for acts or conduct similar to acts or conduct which would constitute grounds for action as defined in this Section.

- (36) Failure to report to the Department any adverse judgment, settlement, or award arising from a liability claim related to acts or conduct similar to acts or conduct which would constitute grounds for action as defined in this Section.
- (37) Failure to provide copies of medical records as required by law.
- (38) Failure to furnish the Department, its investigators or representatives, relevant information, legally requested by the Department after consultation with the Chief Medical Coordinator or the Deputy Medical Coordinator.
- (39) Violating the Health Care Worker Self-Referral
- (40) Willful failure to provide notice when notice is required under the Parental Notice of Abortion Act of 1995.
- (41) Failure to establish and maintain records of patient care and treatment as required by this law.
- (42) Entering into an excessive number of written collaborative agreements with licensed advanced practice nurses resulting in an inability to adequately collaborate.

4

5

6

7

8

9

10

11

12

13

14

15

16

17

18

19

20

21

22

23

24

25

26

- 1 (43) Repeated failure to adequately collaborate with a 2 licensed advanced practice nurse.
 - (44) Violating the Compassionate Use of Medical Cannabis Pilot Program Act.
 - (45) Entering into an excessive number of written collaborative agreements with licensed prescribing psychologists resulting in an inability to adequately collaborate.
 - (46) Repeated failure to adequately collaborate with a licensed prescribing psychologist.

Except for actions involving the ground numbered (26), all proceedings to suspend, revoke, place on probationary status, or take any other disciplinary action as the Department may deem proper, with regard to a license on any of the foregoing grounds, must be commenced within 5 years next after receipt by the Department of a complaint alleging the commission of or notice of the conviction order for any of the acts described herein. Except for the grounds numbered (8), (9), (26), and (29), no action shall be commenced more than 10 years after the date of the incident or act alleged to have violated this Section. For actions involving the ground numbered (26), a pattern of practice or other behavior includes all incidents alleged to be part of the pattern of practice or other behavior that occurred, or a report pursuant to Section 23 of this Act received, within the 10-year period preceding the filing of the complaint. In the event of the settlement of any claim or cause

of action in favor of the claimant or the reduction to final judgment of any civil action in favor of the plaintiff, such claim, cause of action or civil action being grounded on the allegation that a person licensed under this Act was negligent in providing care, the Department shall have an additional period of 2 years from the date of notification to the Department under Section 23 of this Act of such settlement or final judgment in which to investigate and commence formal disciplinary proceedings under Section 36 of this Act, except as otherwise provided by law. The time during which the holder of the license was outside the State of Illinois shall not be included within any period of time limiting the commencement of disciplinary action by the Department.

The entry of an order or judgment by any circuit court establishing that any person holding a license under this Act is a person in need of mental treatment operates as a suspension of that license. That person may resume their practice only upon the entry of a Departmental order based upon a finding by the Disciplinary Board that they have been determined to be recovered from mental illness by the court and upon the Disciplinary Board's recommendation that they be permitted to resume their practice.

The Department may refuse to issue or take disciplinary action concerning the license of any person who fails to file a return, or to pay the tax, penalty or interest shown in a filed return, or to pay any final assessment of tax, penalty or

- 1 interest, as required by any tax Act administered by the
- 2 Illinois Department of Revenue, until such time as the
- 3 requirements of any such tax Act are satisfied as determined by
- 4 the Illinois Department of Revenue.
- 5 The Department, upon the recommendation of the
- 6 Disciplinary Board, shall adopt rules which set forth standards
- 7 to be used in determining:
- 8 (a) when a person will be deemed sufficiently
- 9 rehabilitated to warrant the public trust;
- 10 (b) what constitutes dishonorable, unethical or
- 11 unprofessional conduct of a character likely to deceive,
- defraud, or harm the public;
- 13 (c) what constitutes immoral conduct in the commission
- of any act, including, but not limited to, commission of an
- 15 act of sexual misconduct related to the licensee's
- 16 practice; and
- 17 (d) what constitutes gross negligence in the practice
- 18 of medicine.
- 19 However, no such rule shall be admissible into evidence in
- 20 any civil action except for review of a licensing or other
- 21 disciplinary action under this Act.
- 22 In enforcing this Section, the Disciplinary Board or the
- 23 Licensing Board, upon a showing of a possible violation, may
- 24 compel, in the case of the Disciplinary Board, any individual
- 25 who is licensed to practice under this Act or holds a permit to
- 26 practice under this Act, or, in the case of the Licensing

Board, any individual who has applied for licensure or a permit 1 2 pursuant to this Act, to submit to a mental or physical 3 examination and evaluation, or both, which may include a substance abuse or sexual offender evaluation, as required by 4 5 the Licensing Board or Disciplinary Board and at the expense of the Department. The Disciplinary Board or Licensing Board shall 6 specifically designate the examining physician licensed to 7 8 practice medicine in all of its branches or, if applicable, the 9 multidisciplinary team involved in providing the mental or 10 physical examination and evaluation, or both. The 11 multidisciplinary team shall be led by a physician licensed to 12 practice medicine in all of its branches and may consist of one 13 or more or a combination of physicians licensed to practice 14 medicine in all of its branches, licensed chiropractic 15 physicians, licensed clinical psychologists, licensed clinical social workers, licensed clinical professional counselors, and 16 17 other professional and administrative staff. Any examining physician or member of the multidisciplinary team may require 18 any person ordered to submit to an examination and evaluation 19 20 pursuant to this Section to submit to any additional 21 supplemental testing deemed necessary to complete 22 examination or evaluation process, including, but not limited 23 to, blood testing, urinalysis, psychological testing, neuropsychological testing. The Disciplinary Board, 24 25 Licensing Board, or the Department may order the examining physician or any member of the multidisciplinary team to 26

2

3

5

6

7

8

9

10

11

12

13

14

15

16

17

18

19

20

21

22

23

24

25

26

provide to the Department, the Disciplinary Board, or the Licensing Board any and all records, including business records, that relate to the examination and evaluation, including any supplemental testing performed. The Disciplinary Board, the Licensing Board, or the Department may order the examining physician or any member of the multidisciplinary team present testimony concerning this examination evaluation of the licensee, permit holder, or applicant, including testimony concerning any supplemental testing or documents relating to the examination and evaluation. No information, report, record, or other documents in any way related to the examination and evaluation shall be excluded by reason of any common law or statutory privilege relating to communication between the licensee, permit holder, applicant and the examining physician or any member of the multidisciplinary team. No authorization is necessary from the licensee, permit holder, or applicant ordered to undergo an evaluation and examination for the examining physician or any member of the multidisciplinary team to provide information, reports, records, or other documents or to provide testimony regarding the examination and evaluation. The individual to be examined may have, at his or her own expense, another physician of his or her choice present during all aspects of the examination. Failure of any individual to submit to mental or physical examination and evaluation, or both, when directed, shall result in an automatic suspension, without

2

3

5

6

7

8

9

10

11

12

13

14

15

16

17

18

19

20

21

22

23

24

25

26

hearing, until such time as the individual submits to the examination. If the Disciplinary Board or Licensing Board finds a physician unable to practice following an examination and evaluation because of the reasons set forth in this Section, the Disciplinary Board or Licensing Board shall require such physician to submit to care, counseling, or treatment by physicians, or other health care professionals, approved or designated by the Disciplinary Board, as a condition for issued, continued, reinstated, or renewed licensure practice. Any physician, whose license was granted pursuant to Sections 9, 17, or 19 of this Act, or, continued, reinstated, renewed, disciplined or supervised, subject to such terms, conditions or restrictions who shall fail to comply with such terms, conditions or restrictions, or to complete a required program of care, counseling, or treatment, as determined by the Chief Medical Coordinator or Deputy Medical Coordinators, shall be referred to the Secretary for a determination as to whether the licensee shall have their license suspended immediately, pending a hearing by the Disciplinary Board. In instances in which the Secretary immediately suspends a license under this Section, a hearing upon such person's license must be convened by the Disciplinary Board within 15 days after such suspension and completed without appreciable delay. Disciplinary Board shall have the authority to review the subject physician's record of treatment and counseling regarding the impairment, to the extent permitted by applicable

1 federal statutes and regulations safeguarding the 2 confidentiality of medical records.

An individual licensed under this Act, affected under this Section, shall be afforded an opportunity to demonstrate to the Disciplinary Board that they can resume practice in compliance with acceptable and prevailing standards under the provisions of their license.

The Department may promulgate rules for the imposition of fines in disciplinary cases, not to exceed \$10,000 for each violation of this Act. Fines may be imposed in conjunction with other forms of disciplinary action, but shall not be the exclusive disposition of any disciplinary action arising out of conduct resulting in death or injury to a patient. Any funds collected from such fines shall be deposited in the Medical Disciplinary Fund.

All fines imposed under this Section shall be paid within 60 days after the effective date of the order imposing the fine or in accordance with the terms set forth in the order imposing the fine.

(B) The Department shall revoke the license or permit issued under this Act to practice medicine or a chiropractic physician who has been convicted a second time of committing any felony under the Illinois Controlled Substances Act or the Methamphetamine Control and Community Protection Act, or who has been convicted a second time of committing a Class 1 felony under Sections 8A-3 and 8A-6 of the Illinois Public Aid Code. A

- person whose license or permit is revoked under this subsection 1 2 B shall be prohibited from practicing medicine or treating 3 human ailments without the use of drugs and without operative
- surgery. 4

6

8

9

10

11

12

- (C) The Department shall not revoke, suspend, place on probation, reprimand, refuse to issue or renew, or take any 7 other disciplinary or non-disciplinary action against the license or permit issued under this Act to practice medicine to a physician based solely upon the recommendation of the physician to an eligible patient regarding, or prescription for, or treatment with, an investigational drug, biological product, or device.
- 13 Disciplinary Board shall recommend to The 14 Department civil penalties and any other appropriate 15 discipline in disciplinary cases when the Board finds that a 16 physician willfully performed an abortion with 17 knowledge that the person upon whom the abortion has been performed is a minor or an incompetent person without notice as 18 required under the Parental Notice of Abortion Act of 1995. 19 20 Upon the Board's recommendation, the Department shall impose, for the first violation, a civil penalty of \$1,000 and for a 21 22 second or subsequent violation, a civil penalty of \$5,000.
- 23 (Source: P.A. 98-601, eff. 12-30-13; 98-668, eff. 6-25-14;
- 98-1140, eff. 12-30-14; 99-270, eff. 1-1-16.) 24
 - Section 10. The Illinois Abortion Law of 1975 is amended by

1	changing Sections 10 and 11 and by adding Sections 3.2, 3.3,
2	and 3.4 as follows:
3	(720 ILCS 510/3.2 new)
4	Sec. 3.2. Sex selective and disability abortion ban.
5	(a) As used in this Section:
6	"Any other disability" means any disease, defect, or
7	disorder that is genetically inherited. The term includes
8	the following:
9	(1) a physical disability;
10	(2) a mental or intellectual disability;
11	(3) a physical disfigurement;
12	(4) scoliosis;
13	(5) dwarfism;
14	(6) Down syndrome;
15	(7) albinism;
16	(8) amelia; or
17	(9) a physical or mental disease.
18	The term does not include a lethal fetal anomaly.
19	"Down syndrome" means a chromosomal disorder
20	associated with an extra chromosome 21 or an effective
21	trisomy for chromosome 21.
22	"Potential diagnosis" refers to the presence of some
23	risk factors that indicate that a health problem may occur.
24	"Sex selective abortion" means an abortion that is
25	performed solely because of the sex of the fetus.

(b)	Αŗ	person	may	not	int	tenti	ona	lly	perf	orm	or	atte	empt	to
perform	ı an	abort	ion	befo	re	the	ear	lier	of	vial	oil	ity	of	the
fetus o	r 20	weeks	of	post	fert	iliz	zati	on a	ge i:	f the	e pe	erso	n kr	nows
that th	e pr	egnant	wom	an is	see	ekino	g a s	sex	seled	ctive	e ab	ort	ion.	

- (c) A person may not intentionally perform or attempt to perform an abortion after viability of the fetus or 20 weeks of postfertilization age if the person knows that the pregnant woman is seeking a sex selective abortion.
- (d) A person may not intentionally perform or attempt to perform an abortion before the earlier of viability of the fetus or 20 weeks of postfertilization age if the person knows that the pregnant woman is seeking the abortion solely because the fetus has been diagnosed with Down syndrome or has a potential diagnosis of Down syndrome.
- (e) A person may not intentionally perform or attempt to perform an abortion after viability of the fetus or 20 weeks of postfertilization age if the person knows that the pregnant woman is seeking the abortion solely because the fetus has been diagnosed with Down syndrome or has a potential diagnosis of Down syndrome.
- (f) A person may not intentionally perform or attempt to perform an abortion before the earlier of viability of the fetus or 20 weeks of postfertilization age if the person knows that the pregnant woman is seeking the abortion solely because the fetus has been diagnosed with any other disability or has a potential diagnosis of any other disability.

(g) A person may not intentionally perform or attempt to
perform an abortion after viability of the fetus or 20 weeks of
postfertilization age if the person knows that the pregnant
woman is seeking the abortion solely because the fetus has been
diagnosed with any other disability or has a potential
diagnosis of any other disability.
(h) A person may not intentionally perform or attempt to

- (h) A person may not intentionally perform or attempt to perform an abortion before the earlier of viability of the fetus or 20 weeks of postfertilization age if the person knows that the pregnant woman is seeking the abortion solely because of the race, color, national origin, or ancestry of the fetus.
- (i) A person may not intentionally perform or attempt to perform an abortion after viability of the fetus or 20 weeks of postfertilization age if the person knows that the pregnant woman is seeking the abortion solely because of the race, color, national origin, or ancestry of the fetus.
- (j) A person who knowingly or intentionally performs an abortion in violation of this Section may be subject to:
- (1) disciplinary sanctions under Section 22 of the Medical Practice Act of 1987; and
- 21 (2) civil liability for wrongful death.
- 22 <u>(k) A pregnant woman upon whom an abortion is performed in</u>
 23 <u>violation of this Section may not be prosecuted for violating</u>
 24 or conspiring to violate this Section.

<pre>Sec. 3.3. Perinatal hospice.</pre>

- (a) The purpose of this Section is to ensure that:
- (1) women considering abortion after receiving a diagnosis of a lethal fetal anomaly are informed of the availability of perinatal hospice care; and
 - (2) women choosing abortion after receiving a diagnosis of a lethal fetal anomaly are making a fully informed decision.
 - (b) As used in this Section:

"Lethal fetal anomaly" means a fetal condition diagnosed before birth that, if the pregnancy results in a live birth, will with reasonable certainty result in the death of the child not more than 3 months after the child's birth.

"Perinatal hospice" means the provision of comprehensive, supportive care to a pregnant woman and her family beginning with the diagnosis of a lethal fetal anomaly and continuing through the live birth and death of the woman's child as a result of the lethal fetal anomaly. The term includes counseling and medical care provided by maternal-fetal medical specialists, obstetricians, neonatologists, anesthesia specialists, specialty nurses, clergy, social workers, and others that are focused on alleviating fear and ensuring that the woman and her family experience the life and death of the child in a comfortable and supportive environment.

1	(c) The Department shall develop a perinatal hospice
2	brochure and post the perinatal hospice brochure on the
3	Department's Internet web site.
4	(d) The perinatal brochure developed under this Section
5	must include the following:
6	(1) a description of the health care and other services
7	available from perinatal hospice;
8	(2) information that medical assistance benefits may
9	be available for prenatal care, childbirth, and perinatal
10	hospice; and
11	(3) information regarding accessing grief counseling
12	and other human services, and the types of services that
13	are available through this service.
14	(e) The Department shall develop and regularly update a
15	list of all perinatal hospice providers and programs in this
16	State. The Department may include on the list perinatal hospice
17	providers and programs in other states that provide care to
18	residents of this State. The Department shall post the list of
19	perinatal hospice providers and programs on the Department's
20	Internet web site.
21	(f) The Department shall develop a form on which a pregnant
22	woman certifies, at the time of receiving a diagnosis that the
23	pregnant woman's unborn child has a lethal fetal anomaly, that
24	the pregnant woman has received the following:
25	(1) a copy of the perinatal hospice brochure developed
26	under this Section;

Τ.	(2) a fist of the permatar mospice providers and
2	programs developed under subsection (e) of this Section.
3	(g) The provider diagnosing the pregnant woman's unborn
4	child with the lethal fetal anomaly shall, at the time of
5	diagnosis:
6	(1) provide the pregnant woman with a written copy of:
7	(A) the perinatal brochure developed under
8	subsection (c) of this Section; and
9	(B) the certification form developed by the
10	Department under subsection (f); and
11	(2) have the pregnant woman complete the certification
12	form.
13	(h) The Department shall adopt rules within 90 days after
14	the effective date of this amendatory Act of the 99th General
15	Assembly to implement this Section.
16	(720 ILCS 510/3.4 new)
17	Sec. 3.4. Prohibited abortions.
18	(a) A person may not perform an abortion of a fetus solely
19	because of the fetus's race, color, national origin, ancestry,
20	sex, or diagnosis or potential diagnosis of the fetus having
21	Down syndrome or any other disability.
22	(b) At least 18 hours before an abortion is performed on a
23	pregnant woman whose unborn child has been diagnosed with a
24	lethal fetal anomaly, the physician who will perform the
25	abortion shall:

1	(1) orally	and ir	n person,	inform	the j	pregnant	woman	of
2 the	availabili	tv of p	erinatal	hospice	serv	ices; and	d	

(2) provide the pregnant woman copies of the perinatal hospice brochure developed by the Department under subsection (c) of Section 3.3 of this Act and the list of perinatal hospice providers and programs developed under subsection (e) of Section 3.3 of this Act, by printing the perinatal hospice brochure and list of perinatal hospice providers from the Department's Internet web site.

The requirements of this subsection are in addition to the other requirements of this Section.

(c) If a pregnant woman described in subsection (b) chooses to have an abortion rather than continuing the pregnancy in perinatal hospice care, the pregnant woman shall certify in writing, on a form developed by the Department under subsection (f) of Section 3.3 of this Act, at least 18 hours before the abortion is performed, that the pregnant woman has been provided the information described in subsection (b) in the manner required by subsection (b) of this Section.

(720 ILCS 510/10) (from Ch. 38, par. 81-30)

Sec. 10. A report of each abortion performed shall be made to the Department on forms prescribed by it. Such report forms shall not identify the patient by name, but by an individual number to be noted in the patient's permanent record in the possession of the physician, and shall include information

- 1 concerning:
- 2 (1) Identification of the physician who performed the
- 3 abortion and the facility where the abortion was performed and
- 4 a patient identification number;
- 5 (2) State in which the patient resides;
- 6 (3) Patient's date of birth, race and marital status;
- 7 (4) Number of prior pregnancies;
- 8 (5) Date of last menstrual period;
- 9 (6) Type of abortion procedure performed;
- 10 (7) Complications and whether the abortion resulted in a
- 11 live birth;
- 12 (8) The date the abortion was performed;
- 13 (9) Medical indications for any abortion performed when the
- 14 fetus was viable;
- 15 (10) The information required by Sections 6(1)(b) and
- 16 6(4)(b) of this Act, if applicable;
- 17 (11) Basis for any medical judgment that a medical
- 18 emergency existed when required under Sections 6(2)(a) and 6(6)
- 19 and when required to be reported in accordance with this
- 20 Section by any provision of this Law; and
- 21 (12) The pathologist's test results pursuant to Section 12
- 22 of this Act;
- 23 (13) The gender of the fetus, if detectable; and
- 24 (14) Whether the fetus has been diagnosed with or has a
- 25 potential diagnosis of having Down syndrome or any other
- 26 disability.

Such form shall be completed by the hospital or other licensed facility, signed by the physician who performed the abortion or pregnancy termination, and transmitted to the Department not later than 10 days following the end of the month in which the abortion was performed.

In the event that a complication of an abortion occurs or becomes known after submission of such form, a correction using the same patient identification number shall be submitted to the Department within 10 days of its becoming known.

The Department may prescribe rules and regulations regarding the administration of this Law and shall prescribe regulations to secure the confidentiality of the woman's identity in the information to be provided under the "Vital Records Act". All reports received by the Department shall be treated as confidential and the Department shall secure the woman's anonymity. Such reports shall be used only for statistical purposes.

Upon 30 days public notice, the Department is empowered to require reporting of any additional information which, in the sound discretion of the Department, is necessary to develop statistical data relating to the protection of maternal or fetal life or health, or is necessary to enforce the provisions of this Law, or is necessary to develop useful criteria for medical decisions. The Department shall annually report to the General Assembly all statistical data gathered under this Law and its recommendations to further the purpose of this Law.

The requirement for reporting to the General Assembly shall 1 2 be satisfied by filing copies of the report with the Speaker, 3 Minority Leader and the Clerk of the House Representatives and the President, the Minority Leader and the 4 5 Secretary of the Senate and the Legislative Research Unit, as required by Section 3.1 of "An Act to revise the law in 6 relation to the General Assembly", approved February 25, 1874, 7 as amended, and filing such additional copies with the State 8 9 Government Report Distribution Center for the General Assembly 10 as is required under paragraph (t) of Section 7 of the State 11 Library Act.

12 (Source: P.A. 84-1438.)

14

15

16

17

18

19

20

21

22

23

24

25

13 (720 ILCS 510/11) (from Ch. 38, par. 81-31)

Sec. 11. (1) Any person who intentionally violates any provision of this Law, other than those described in Section 3.2, 3.3, or 3.4 of this Act, commits a Class A misdemeanor unless a specific penalty is otherwise provided. Any person who intentionally falsifies any writing required by this Law commits a Class A misdemeanor.

Intentional, knowing, reckless, or negligent violations of this Law shall constitute unprofessional conduct which causes public harm under Section 22 of the Medical Practice Act of 1987, as amended; Section 70-5 of the Nurse Practice Act, and Section 21 of the Physician Assistant Practice Act of 1987, as amended.

2

3

5

6

7

8

9

10

11

12

13

14

15

16

17

18

19

20

21

22

23

24

25

- Intentional, knowing, reckless or negligent violations of this Law will constitute grounds for refusal, denial, revocation, suspension, or withdrawal of license, certificate, or permit under Section 30 of the Pharmacy Practice Act, as amended; Section 7 of the Ambulatory Surgical Treatment Center Act, effective July 19, 1973, as amended; and Section 7 of the Hospital Licensing Act.
- (2) Any hospital or licensed facility which, or any physician who intentionally, knowingly, or recklessly fails to submit a complete report to the Department in accordance with the provisions of Section 10 of this Law and any person who intentionally, knowingly, recklessly or negligently fails to maintain the confidentiality of any reports required under this Law or reports required by Sections 10.1 or 12 of this Law commits a Class B misdemeanor.
- (3) Any person who sells any drug, medicine, instrument or other substance which he knows to be an abortifacient and which is in fact an abortifacient, unless upon prescription of a physician, is guilty of a Class B misdemeanor. Any person who prescribes or administers any instrument, medicine, drug or substance or device, which other he knows to be an abortifacient, and which is in fact an abortifacient, and intentionally, knowingly or recklessly fails to inform the person for whom it is prescribed or upon whom it administered that it is an abortifacient commits a Class C misdemeanor.

- 1 (4) Any person who intentionally, knowingly or recklessly
- 2 performs upon a woman what he represents to that woman to be an
- 3 abortion when he knows or should know that she is not pregnant
- 4 commits a Class 2 felony and shall be answerable in civil
- 5 damages equal to 3 times the amount of proved damages.
- 6 (Source: P.A. 95-639, eff. 10-5-07; 95-689, eff. 10-29-07;
- 7 95-876, eff. 8-21-08.)
- 8 Section 15. The Illinois Human Rights Act is amended by
- 9 changing Section 1-103 as follows:
- 10 (775 ILCS 5/1-103) (from Ch. 68, par. 1-103)
- 11 Sec. 1-103. General Definitions. When used in this Act,
- 12 unless the context requires otherwise, the term:
- 13 (A) Age. "Age" means the chronological age of a person who
- 14 is at least 40 years old, except with regard to any practice
- described in Section 2-102, insofar as that practice concerns
- training or apprenticeship programs. In the case of training or
- apprenticeship programs, for the purposes of Section 2-102,
- 18 "age" means the chronological age of a person who is 18 but not
- 19 yet 40 years old.
- 20 (B) Aggrieved Party. "Aggrieved party" means a person who
- 21 is alleged or proved to have been injured by a civil rights
- 22 violation or believes he or she will be injured by a civil
- 23 rights violation under Article 3 that is about to occur.
- (C) Charge. "Charge" means an allegation filed with the

- 1 Department by an aggrieved party or initiated by the Department
- 2 under its authority.
- 3 (D) Civil Rights Violation. "Civil rights violation"
- 4 includes and shall be limited to only those specific acts set
- 5 forth in Sections 2-102, 2-103, 2-105, 3-102, 3-102.1, 3-103,
- 6 3-104, 3-104.1, 3-105, 3-105.1, 4-102, 4-103, 5-102, 5A-102,
- 7 6-101, and 6-102 of this Act.
- 8 (E) Commission. "Commission" means the Human Rights
- 9 Commission created by this Act.
- 10 (F) Complaint. "Complaint" means the formal pleading filed
- 11 by the Department with the Commission following an
- 12 investigation and finding of substantial evidence of a civil
- 13 rights violation.
- 14 (G) Complainant. "Complainant" means a person including
- 15 the Department who files a charge of civil rights violation
- with the Department or the Commission.
- 17 (H) Department. "Department" means the Department of Human
- 18 Rights created by this Act.
- 19 (I) Disability. "Disability" means a determinable physical
- or mental characteristic of a person, including, but not
- 21 limited to, a determinable physical characteristic which
- 22 necessitates the person's use of a guide, hearing or support
- 23 dog, the history of such characteristic, or the perception of
- 24 such characteristic by the person complained against, which may
- result from disease, injury, congenital condition of birth or
- 26 functional disorder and which characteristic:

(1) For purposes of Article 2 is unrelated to the	е
person's ability to perform the duties of a particular job	b
or position and, pursuant to Section 2-104 of this Act, a	a
person's illegal use of drugs or alcohol is not a	a
disability;	

- (2) For purposes of Article 3, is unrelated to the person's ability to acquire, rent or maintain a housing accommodation;
- (3) For purposes of Article 4, is unrelated to a person's ability to repay;
- (4) For purposes of Article 5, is unrelated to a person's ability to utilize and benefit from a place of public accommodation;
- (5) For purposes of Article 5, also includes any mental, psychological, or developmental disability, including autism spectrum disorders.
- (J) Marital Status. "Marital status" means the legal status of being married, single, separated, divorced or widowed.
- (J-1) Military Status. "Military status" means a person's status on active duty in or status as a veteran of the armed forces of the United States, status as a current member or veteran of any reserve component of the armed forces of the United States, including the United States Army Reserve, United States Marine Corps Reserve, United States Navy Reserve, United States Air Force Reserve, and United States Coast Guard Reserve, or status as a current member or veteran of the

22

23

24

25

- 1 Illinois Army National Guard or Illinois Air National Guard.
- 2 (K) National Origin. "National origin" means the place in 3 which a person or one of his or her ancestors was born.
- 4 (K-5) "Order of protection status" means a person's status
 5 as being a person protected under an order of protection issued
 6 pursuant to the Illinois Domestic Violence Act of 1986 or an
 7 order of protection issued by a court of another state.
- (L) Person. "Person" includes one or more individuals, 8 9 associations organizations, partnerships, or labor 10 organizations, labor unions, joint apprenticeship committees, 11 or union labor associations, corporations, the State of 12 Illinois and its instrumentalities, political subdivisions, units of local government, legal representatives, trustees in 13 14 bankruptcy or receivers.
- 15 (L-5) Pregnancy. "Pregnancy" means pregnancy, childbirth, 16 or medical or common conditions related to pregnancy or 17 childbirth.
- 18 (M) Public Contract. "Public contract" includes every 19 contract to which the State, any of its political subdivisions 20 or any municipal corporation is a party.
 - (N) Religion. "Religion" includes all aspects of religious observance and practice, as well as belief, except that with respect to employers, for the purposes of Article 2, "religion" has the meaning ascribed to it in paragraph (F) of Section 2-101.
 - (O) Sex. "Sex" means the status of being male or female.

8

9

10

11

- 1 (0-1) Sexual orientation. "Sexual orientation" means
 2 actual or perceived heterosexuality, homosexuality,
 3 bisexuality, or gender-related identity, whether or not
 4 traditionally associated with the person's designated sex at
 5 birth. "Sexual orientation" does not include a physical or
 6 sexual attraction to a minor by an adult.
 - (P) Unfavorable Military Discharge. "Unfavorable military discharge" includes discharges from the Armed Forces of the United States, their Reserve components or any National Guard or Naval Militia which are classified as RE-3 or the equivalent thereof, but does not include those characterized as RE-4 or "Dishonorable".
- Unlawful Discrimination. "Unlawful discrimination" 13 14 means: (1) discrimination against a person because of his or 15 her race, color, religion, national origin, ancestry, age, sex, 16 marital status, order of protection status, disability, 17 military status, sexual orientation, pregnancy, or unfavorable discharge from military service as those terms are defined in 18 19 this Section; or (2) the performance of an abortion solely 20 because of the race, color, sex, disability, national origin, 21 or ancestry of the fetus. As used in this subsection (Q), 22 "fetus" has the meaning ascribed to it in Section 2 of the 23 Illinois Abortion Law of 1975.
- 24 (Source: P.A. 97-410, eff. 1-1-12; 97-813, eff. 7-13-12;
- 25 98-1050, eff. 1-1-15.)
- Section 99. Effective date. This Act takes effect upon

becoming law.

1		INDEX
2	Statutes amend	led in order of appearance
3	225 ILCS 60/22	from Ch. 111, par. 4400-22
4	720 ILCS 510/3.2 new	
5	720 ILCS 510/3.3 new	
6	720 ILCS 510/3.4 new	
7	720 ILCS 510/10	from Ch. 38, par. 81-30
8	720 ILCS 510/11	from Ch. 38, par. 81-31

9 775 ILCS 5/1-103 from Ch. 68, par. 1-103