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AN ACT concerning emergency health powers.

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

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ARTICLE 1. TITLE, FINDINGS, PURPOSES, AND DEFINITIONS

5 Section 1-1. Short title. This Act may be cited as the
6 Illinois Emergency Health Powers Act.

7 Section 1-5. Legislative findings. The General Assembly 8 finds that:

9 (1) The government must do more to protect the health,10 safety, and general well being of its citizens.

11 (2) New and emerging dangers, including emergent and 12 resurgent infectious diseases and incidents of civilian mass 13 casualties, pose serious and immediate threats.

14 (3) A renewed focus on the prevention, detection, 15 management, and containment of public health emergencies is 16 needed.

17 (4) Emergency health threats, including those caused by
18 bioterrorism, may require the exercise of extraordinary
19 government functions.

20 (5) This State must have the ability to respond, rapidly 21 and effectively, to potential or actual public health 22 emergencies.

23 (6) The exercise of emergency health powers must promote24 the common good.

25 (7) Emergency health powers must be grounded in a 26 thorough scientific understanding of public health threats 27 and disease transmission.

(8) Guided by principles of justice and
anti-discrimination, it is the duty of this State to act with
fairness and tolerance towards individuals and groups.

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(9) The rights of people to liberty, bodily integrity,
 and privacy must be respected to the fullest extent possible
 consistent with maintaining and preserving the public's
 health and security.

5 (10) This Act is necessary to protect the health and 6 safety of the citizens of this State.

7 Section 1-10. Purposes. The purposes of this Act are the8 following:

9 (0.5) To require the development of a comprehensive plan 10 to provide for a coordinated, appropriate response in the 11 event of a public health emergency.

12 (1) To authorize the collection of data and records, the 13 management of property, the protection of persons, and access 14 to communications.

15 (2) To facilitate the early detection of a health 16 emergency, and to allow for immediate investigation of such 17 an emergency by granting access to individuals' health 18 information under specified circumstances.

19 (3) To grant State officials the authority to use and
20 appropriate property as necessary for the care, treatment,
21 and housing of patients and to destroy contaminated
22 facilities or materials.

(4) To grant State and local officials the authority to provide care, treatment, and vaccination to persons who are ill or who have been exposed to contagious diseases, and to separate affected individuals from the population at large to interrupt disease transmission.

(5) To ensure that the needs of infected or exposed
persons are addressed to the fullest extent possible, given
the primary goal of controlling serious health threats.

31 (6) To provide State officials with the ability to
32 prevent, detect, manage, and contain emergency health threats
33 without unduly interfering with civil rights and liberties.

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Section 1-15. Definitions.

"Bioterrorism" is the intentional use 2 of (1)any microorganism, virus, infectious substance, or biological 3 4 product that may be engineered as a result of biotechnology, or any naturally occurring or bioengineered component of any 5 6 microorganism, virus, infectious substance, such or 7 biological product, to cause death, disease, or other 8 biological malfunction in a human, an animal, a plant, or 9 another living organism in order to influence the conduct of government or to intimidate or coerce a civilian population. 10

11 (2) "Chain of custody" is the methodology of tracking specimens for the purpose of maintaining control 12 and accountability from initial collection to final disposition 13 of the specimens and providing for accountability at 14 each 15 stage of collecting, handling, testing, storing, and 16 transporting the specimens and reporting test results.

17 (3) "Contagious disease" is an infectious disease that18 can be transmitted from person to person.

19 (4) "Health care facility" means all or part of any non-federal institution, building, or agency, whether public 20 21 or private (for-profit or nonprofit) that is used, operated, or designed to provide health services, medical treatment, or 22 23 nursing, rehabilitative, or preventive care to any person or persons. This includes, but is not limited to: ambulatory 24 25 surgical facilities, home health agencies, hospices, hospitals, infirmaries, intermediate care facilities, kidney 26 27 treatment centers, long-term care facilities, medical assistance facilities, mental health centers, outpatient 28 29 facilities, public health centers, rehabilitation facilities, 30 residential treatment facilities, skilled nursing facilities, and adult day-care centers. This also includes, but is not 31 32 limited to, the following related property when used for or in connection with the foregoing: laboratories; research 33 34 facilities; pharmacies; laundry facilities; health personnel

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training and lodging facilities; patient, guest, and health personnel food service facilities; and offices and office buildings for persons engaged in health care professions or services.

5 (5) "Health care provider" is any person or entity that б provides health care services including, but not limited to, 7 hospitals, medical clinics and offices, special care 8 facilities, medical laboratories, physicians, pharmacists, 9 dentists, physician assistants, nurse practitioners, 10 registered and other nurses, paramedics, emergency medical or 11 laboratory technicians, and ambulance and emergency medical 12 workers.

13 (6) "Infectious disease" is a disease caused by a living 14 organism or other pathogen, including a fungus, bacillus, 15 parasite, protozoan, or virus. An infectious disease may, or 16 may not, be transmissible from person to person, animal to 17 person, or insect to person.

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(7) "Infectious waste" is:

(a) "biological waste", which includes blood and
blood products, excretions, exudates, secretions,
suctioning and other body fluids, and waste materials
saturated with blood or body fluids;

(b) "cultures and stocks", which include etiologic
agents and associated biologicals, including specimen
cultures and dishes and devices used to transfer,
inoculate, and mix cultures, wastes from production of
biologicals and serums, and discarded live and attenuated
vaccines;

29 (c) "pathological waste", which includes biopsy 30 materials and all human tissues, anatomical parts that 31 emanate from surgery, obstetrical procedures, necropsy or 32 autopsy and laboratory procedures, and animal carcasses 33 exposed to pathogens in research and the bedding and 34 other waste from those animals, but does not include

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teeth or formaldehyde or other preservative agents; and

2 (d) "sharps", which include needles, I.V. tubing 3 with needles attached, scalpel blades, lancets, breakable 4 glass tubes, and syringes that have been removed from 5 their original sterile containers.

(8) "Isolation" is the physical separation 6 and confinement of an individual or groups or individuals 7 believed to be infected with a contagious or possibly 8 9 contagious disease from non-isolated individuals, in order to prevent or limit the transmission of the disease to 10 11 non-isolated individuals.

12 (9) "Mental health support personnel" include, but are 13 not limited to, psychiatrists, psychologists, social workers, 14 and volunteer crisis counseling groups.

15 (9.5) "Organized militia" includes the Illinois National 16 Guard, the army national guard, the air national guard, or 17 any other military force organized under the laws of this 18 State.

19 "Protected health information" is any information, (10)whether oral, written, electronic, visual, or any other form, 20 21 that relates to an individual's past, present, or future 22 physical or mental health status, condition, treatment, 23 service, products purchased, or provision of care, and that reveals the identity of the individual whose health care is 24 25 the subject of the information, or where there is a reasonable basis to believe that information could be used 26 (either alone or with other information that is, or 27 should reasonably be known to be, available to predictable 28 29 recipients of that information) to reveal the identity of 30 that individual.

31 (11) "Public health authority" is the Department of 32 Public Health; any local government agency that acts 33 principally to protect or preserve the public's health; or 34 any person directly authorized to act on behalf of the

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1 Department of Public Health or local public health agency. 2 (12) A "public health emergency" is an occurrence or imminent threat of an illness or health condition that: 3 4 (a) is believed to be caused by any of the 5 following: (i) bioterrorism; 6 7 (ii) the appearance of a novel or previously controlled or eradicated infectious agent 8 or 9 biological toxin; (iii) a natural disaster; 10 (iv) a chemical attack or accidental release; 11 12 or (v) a nuclear attack or accident; and 13 poses a high probability of any of 14 (b) the 15 following harms: 16 (i) a large number of deaths in the affected 17 population; (ii) a large number of serious or long-term 18 19 disabilities in the affected population; or 20 (iii) widespread exposure to an infectious or 21 toxic agent that poses a significant risk of substantial future harm to a large number of people 22 23 in the affected population. (13) "Public safety authority" is the Department of 24 25 Police; any local government agency that acts State principally to protect or preserve the public safety; or any 26 person directly authorized to act on behalf of the Department 27 28 of State Police or local agency. (13.5) "Quarantine" is the physical separation and 29

29 (13.5) "Quarantine" is the physical separation and 30 confinement of an individual or groups of individuals, who 31 are or may have been exposed to a contagious or possibly 32 contagious disease and who do not show signs or symptoms of a 33 contagious disease, from non-quarantined individuals, to 34 prevent or limit the transmission of the disease to

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1 non-quarantined individuals.

2 (14) "Specimens" include, but are not limited to, blood,
3 sputum, urine, stool, other bodily fluids, wastes, tissues,
4 and cultures necessary to perform required tests.

5 (15) "Tests" include, but are not limited to, any 6 diagnostic or investigative analyses necessary to prevent the 7 spread of disease or protect the public's health, safety, and 8 welfare.

9 (16) "Trial court" is a circuit court in the district in 10 which isolation or quarantine is to occur, a court designated 11 by the Public Health Emergency Plan under Article 3 of this 12 Act, or a circuit court in the district in which a public 13 health emergency has been declared.

14 ARTICLE 3. PLANNING FOR A PUBLIC HEALTH EMERGENCY

15 Section 3-5. Public Health Emergency Planning Commission. 16 The Governor shall appoint a Public Health Emergency Planning 17 Commission ("the Commission"), consisting of the State Directors or Secretaries, or their designees, of agencies the 18 19 Governor deems relevant to public health emergency 20 preparedness, a representative group of state legislators, 21 members of the judiciary, and any other persons chosen by the Governor. The Governor shall also designate the chair of the 22 23 Commission.

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Section 3-10. Public Health Emergency Plan.

(a) Content. The Commission shall, within 6 months after
its appointment, deliver to the Governor a plan for
responding to a public health emergency that includes
provisions or guidelines on the following:

(1) Notifying and communicating with the population
during a state of public health emergency in compliance
with this Act.

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(2) Central coordination of resources, manpower,
 and services, including coordination of responses by
 State, local, tribal, and federal agencies.

4 (3) The location, procurement, storage, 5 transportation, maintenance, and distribution of 6 essential materials, including but not limited to medical 7 supplies, drugs, vaccines, food, shelter, clothing, and 8 beds.

9 (4) Compliance with the reporting requirements in 10 Section 5-5.

11 (5) The continued, effective operation of the 12 judicial system including, if deemed necessary, the 13 identification and training of personnel to serve as 14 emergency judges regarding matters of isolation and 15 quarantine as described in this Act.

16 (6) The method of evacuating populations, and17 housing and feeding the evacuated populations.

18 (7) The identification and training of health care
19 providers to diagnose and treat persons with infectious
20 diseases.

(8) The vaccination of persons, in compliance withthe provisions of this Act.

(9) The treatment of persons who have been exposed
to or who are infected with diseases or health conditions
that may be the cause of a public health emergency.

26 (10) The safe disposal of infectious wastes and
27 human remains in compliance with the provisions of this
28 Act.

(11) The safe and effective control of persons
isolated, quarantined, vaccinated, tested, or treated
during a state of public health emergency.

32 (12) Tracking the source and outcomes of infected33 persons.

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(13) Ensuring that each municipality and county

1 within the State identifies the following: 2 (i) sites where persons can be isolated or quarantined in compliance with the provisions of 3 4 this Act regarding the least restrictive means for isolation and quarantine, and requirements 5 for maintaining the safety, health, and dignity of those 6 7 isolated or quarantined; (ii) sites where medical supplies, food, and 8 9 other essentials can be distributed to the population; 10 11 (iii) sites where public health and emergency workers can be housed and fed; and 12 (iv) routes and means of transportation of 13 people and materials. 14 (13.5) Coordination with other states and the 15 16 federal government. (14) Cultural norms, values, religious principles, 17 18 and traditions that may be relevant. 19 (15) Other measures necessary to carry out the purposes of this Act. 20 (b) Distribution. The Commission shall distribute this 21 22 plan to those who will be responsible for its implementation, 23 other interested persons, and the public, and seek their review and comments. 24 25 (c) Review. The Commission shall annually review its 26 plan for responding to a public health emergency. ARTICLE 5. MEASURES TO DETECT AND TRACK 27 28 PUBLIC HEALTH EMERGENCIES Section 5-5. Reporting. 29 30 Illness or health condition. A health care provider, (1)coroner, or medical examiner shall report all cases of 31 persons who harbor any illness or health condition that may 32

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be potential causes of a public health emergency. Reportable illnesses and health conditions include, but are not limited to, the diseases caused by the biological agents listed in 42 C.F.R. Section 72, App. A (2000) and any illnesses or health conditions identified by the public health authority.

(2) Pharmacists. In addition to the foregoing 6 7 requirements for health care providers, a pharmacist must 8 report any unusual or increased prescription rates, unusual 9 types of prescriptions, or unusual trends in pharmacy visits that may be potential causes of a public health emergency. 10 11 Prescription-related events that require a report include, but are not limited to: 12

13 (a) an unusual increase in the number of or over-the-counter pharmaceuticals to 14 prescriptions 15 treat conditions that the public health authority 16 identifies through regulations;

17 (b) an unusual increase in the number of18 prescriptions for antibiotics; and

19 (c) any prescription that treats a disease that is
20 relatively uncommon or may be associated with
21 bioterrorism.

22 (3) Manner of reporting. The report must be made 23 electronically or in writing within 24 hours to the public health authority. The report must include as much of the 24 25 following information as is available: the specific illness or health condition that is the subject of the report; the 26 patient's name, date of birth, sex, race, occupation, 27 and current home and work addresses (including city and county); 28 29 the name and address of the health care provider, coroner, or 30 medical examiner and of the reporting individual, if different; and any other information needed to locate the 31 32 patient for follow-up. For cases related to animal or insect bites, the suspected locating information of the biting 33 34 animal or insect, and the name and address of any known

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1 owner, must be reported.

2 (4) Animal diseases. Every veterinarian, livestock owner, veterinary diagnostic laboratory director, or other 3 4 person having the care of animals must report animals having or suspected of having any disease that may be potential 5 6 causes of a public health emergency. The report must be made 7 electronically or in writing within 24 hours to the public health authority and must include as much of the following 8 9 information as is available: the specific illness or health condition that is the subject of the report, the suspected 10 11 locating information of the animal, the name and address of any known owner, and the name and address of the reporting 12 individual. 13

14 (5) Laboratories. For the purposes of this Section, the 15 definition of "health care provider" includes out-of-state 16 medical laboratories that have agreed to the reporting 17 requirements of this State. Results must be reported by the 18 laboratory that performs the test, but an in-state laboratory 19 that sends specimens to an out-of-state laboratory is also 20 responsible for reporting results.

(6) Enforcement. The public health authority may enforce
the provisions of this Section in accordance with existing
enforcement rules and regulations.

24 Section 5-10. Tracking. The public health authority shall ascertain the existence of cases of an illness or health 25 condition that may be a potential cause of a public health 26 emergency; investigate all such cases for sources of 27 infection and to ensure that they are subject to proper 28 29 control measures; and define the distribution of the illness or health condition. To fulfill these duties, the public 30 31 health authority shall identify exposed individuals as follows: 32

33 (1) Identification of individuals. Acting on information

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developed in accordance with Section 5-5, or other reliable information, the public health authority shall identify all individuals thought to have been exposed to an illness or health condition that may be a potential cause of a public health emergency.

6 (2) Interviewing of individuals. The public health authority shall counsel and interview such individuals to 7 assist in the positive identification of exposed individuals 8 9 and develop information relating to the source and spread of the illness or health condition. That information includes 10 11 the name and address (including municipality and county) of any person from whom the illness or health condition may have 12 been contracted and to whom the illness or health condition 13 may have spread. 14

(3) Examination of facilities or materials. The public 15 16 health authority shall, for examination purposes, close, evacuate, or decontaminate any facility or decontaminate or 17 destroy any material when the authority reasonably suspects 18 19 that the facility or material may endanger the public health. Enforcement. The public health authority may enforce 20 (4) 21 the provisions of this Section in accordance with existing 22 enforcement rules and regulations. An order of the public 23 health authority given to effectuate the purposes of this

24 Section shall be enforceable immediately by the public safety 25 authority.

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Section 5-15. Information sharing.

(1) Whenever the public safety authority or other State or local government agency learns of a case of a reportable illness or health condition, an unusual cluster, or a suspicious event that may be the case of a public health emergency, it shall immediately notify the public health authority.

33 (2) Whenever the public health authority learns of a

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1 case of a reportable illness or health condition, an unusual 2 cluster, or a suspicious event that it reasonably believes has the potential to be caused by bioterrorism, it must 3 4 immediately notify the public safety authority, tribal 5 authorities, and federal health and public safety 6 authorities.

7 (3) Sharing of information on reportable illnesses, 8 health conditions, unusual clusters, or suspicious events 9 between public health and safety authorities shall be 10 restricted to information necessary for the treatment, 11 control, investigation, and prevention of a public health 12 emergency.

13 ARTICLE 10. DECLARING STATE OF PUBLIC HEALTH EMERGENCY

14 Section 10-5. Declaration. A state of public health emergency may be declared by the Governor upon an occurrence 15 16 of a public health emergency as defined in Section 1-15. 17 Before making the declaration, the Governor shall consult with the public health authority and may consult with any 18 19 additional public health and other experts as needed. The 20 Governor may act to declare a public health emergency without 21 consulting with the public health authority or other experts when the situation calls for prompt and timely action. 22

23 Section 10-10. Content of declaration. A state of public 24 health emergency shall be declared by an executive order that 25 specifies:

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(a) the nature of the public health emergency;

(b) the political subdivisions or geographic areassubject to the declaration;

29 (c) the conditions that have brought about the public30 health emergency;

31 (d) the duration of the state of the public health

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1 emergency, if less than 30 days; and

2 (e) the primary public health authority responding to3 the emergency.

Section 10-15. Effect of declaration. The declaration of 4 5 a state of public health emergency shall activate the disaster response and recovery aspects of the State, local, 6 and inter-jurisdictional disaster emergency plans in the 7 8 affected political subdivisions or geographic areas. The declaration authorizes the deployment and use of any forces 9 10 to which the plans apply and the use or distribution of any supplies, equipment, and materials and facilities assembled, 11 stockpiled, or available under this Act. 12

13 (1) Emergency powers. During a state of public health14 emergency, the Governor may:

15 (a) Suspend the provisions of any regulatory statute prescribing procedures for conducting 16 State 17 business, or the orders, rules, and regulations of any State agency, if strict compliance would prevent, hinder, 18 or delay necessary action (including emergency purchases) 19 20 by the public health authority to respond to the public 21 health emergency and increase the health threat to the 22 population.

(b) Use all available resources of the State
government and its political subdivisions, as reasonably
necessary to respond to the public health emergency.

26 (c) Transfer the direction, personnel, or functions
27 of State departments and agencies to perform or
28 facilitate response and recovery programs regarding the
29 public health emergency.

30 (d) Mobilize all or any part of the Illinois
31 National Guard into service of the State. An order
32 directing the Illinois National Guard to report for
33 active duty shall state the purpose for which it is

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mobilized and the objectives to be accomplished.

2 (e) Provide aid to and seek aid from other states 3 in accordance with any interstate emergency compact made 4 with this State.

5 (f) Seek aid from the federal government in
6 accordance with federal programs or requirements.

7 (2) Coordination. The public health authority shall 8 coordinate all matters pertaining to the public health 9 emergency response of the State. The public health authority 10 has primary jurisdiction, responsibility, and authority for:

(a) Planning and executing public health emergency
 assessment, mitigation, preparedness response, and
 recovery for the State.

14 (b) Coordinating public health emergency response15 between State and local authorities.

16 (c) Collaborating with relevant federal government
 17 authorities, elected officials of other states, or
 18 private organizations or companies.

19 (d) Coordinating recovery operations and mitigation20 initiatives subsequent to public health emergencies.

(e) Organizing public information activities
 regarding public health emergency response operations.

23 Identification. After the declaration of a state of (3) public health emergency, special identification for all 24 25 public health personnel working during the emergency shall be issued as soon as possible. The identification shall indicate 26 27 the authority of the bearer to exercise public health functions and emergency powers during the state of public 28 29 health emergency. Public health personnel shall wear the 30 identification in plain view.

31 Section 10-20. Enforcement. During a state of public 32 health emergency, the public health authority may request 33 assistance in enforcing orders under this Act from the public safety authority. The public safety authority may request
 assistance from the Illinois National Guard in enforcing the
 orders of the public health authority.

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Section 10-25. Termination of declaration.

5 Executive order. The Governor shall terminate the (1)state of public health emergency by executive order upon 6 finding that the occurrence of an illness or health condition 7 that caused the emergency no longer poses a high probability 8 of a large number of deaths in the affected population, a 9 10 large number of incidents of permanent or long-term disability in the affected population, or a significant risk 11 of substantial future harm to a large number of people in the 12 affected population. 13

14 (2) Automatic termination. Notwithstanding any other 15 provision of this Act, the declaration of a state of public health emergency shall be terminated automatically 30 days 16 17 unless renewed by the Governor under the same standards and procedures set forth in this Article. Any such renewal shall 18 also be terminated automatically after 30 days unless renewed 19 20 by the Governor under the same standards and procedures set 21 forth in this Article.

State legislature. By adopting a joint resolution by 22 (3) a majority vote of both chambers, the General Assembly may 23 24 terminate a state of public health emergency at any time from the date of original declaration upon finding that the 25 occurrence of an illness or health condition that caused the 26 emergency does not or no longer poses a high probability of a 27 28 large numbers of deaths in the affected population, a large 29 number of incidents of serious permanent or long-term disability in the affected population, or a significant risk 30 of substantial future harm to a large number of people in the 31 affected population. Termination by the General Assembly 32 33 overrides any renewal by the Governor.

1 (4) Content of termination order. All orders terminating 2 the declaration of a state of public health emergency shall 3 indicate the nature of the emergency, the areas that were 4 threatened, and the conditions that make possible the 5 termination of the declaration.

6 ARTICLE 15. SPECIAL POWERS DURING STATE OF PUBLIC 7 HEALTH EMERGENCY; MANAGEMENT OF PROPERTY

8 Section 15-5. Emergency measures concerning facilities 9 and materials. The public health authority may exercise, for 10 such period as the state of public health emergency exists, 11 the following powers over facilities or materials:

12 (1) Facilities. To close, direct and compel the 13 evacuation of, or to decontaminate or cause to be 14 decontaminated any facility of which there is reasonable 15 cause to believe that it may endanger the public health.

16 (2) Materials. To decontaminate, cause to be 17 decontaminated, or destroy any material of which there is 18 reasonable cause to believe that it may endanger the public 19 health.

20 Section 15-10. Access to and control of facilities and 21 property; generally. The public health authority may 22 exercise, for such period as the state of public health 23 emergency exists, the following powers concerning facilities, 24 materials, roads, or public areas:

(1) Use of facilities and materials. To procure, by condemnation (including quick-take under Article VII of the Code of Civil Procedure) or otherwise, construct, lease, transport, store, maintain, renovate, or distribute materials and facilities as may be reasonable and necessary to respond to a public health emergency, with the right to take immediate possession. These materials and facilities include,

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but are not limited to, communication devices, carriers, real
 estate, fuels, food, and clothing.

(2) Use of health care facilities. To require a health 3 4 care facility to provide services or the use of its facility if those services or use are reasonable and necessary to 5 respond to the public health emergency as a condition of 6 7 licensure, authorization, or the ability to continue doing business in the State as a health care facility. The use of 8 9 health care facility may include transferring the the management and supervision of the health care facility to the 10 11 public health authority for a limited or unlimited period of time, but shall not exceed the termination of the declaration 12 13 of a state of public health emergency.

14 (3) Control of materials. To control, restrict, and 15 regulate by rationing and using quotas, prohibitions on 16 shipments, allocation, or other means, the use, sale, 17 dispensing, distribution, or transportation of food, fuel, 18 clothing, and other commodities, as may be reasonable and 19 necessary to respond to the public health emergency.

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(4) Control of roads and public areas.

(a) To prescribe routes, modes of transportation,
and destinations in connection with evacuation of persons
or the provision of emergency services.

(b) To control or limit ingress and egress to and
from any stricken or threatened public area, the movement
of persons within the area, and the occupancy of premises
in that area, if that action is reasonable and necessary
to respond to the public health emergency.

29 Section 15-15. Safe disposal of infectious waste. The 30 public health authority may exercise, for such period as the 31 state of public health emergency exists, the following powers 32 regarding the safe disposal of infectious waste:

33 (1) Adopt measures. To adopt and enforce measures to

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provide for the safe disposal of infectious waste as may be reasonable and necessary to respond to the public health emergency. These measures may include, but are not limited to, the collection, storage, handling, destruction, treatment, transportation, and disposal of infectious waste.

6 (2) Control of facilities. To require any business or 7 facility authorized to collect, store, handle, destroy, 8 treat, transport, and dispose of infectious waste under the 9 this State, and any landfill business or other such laws of property, to accept infectious waste, or provide services or 10 11 the use of the business, facility, or property if that action 12 is reasonable and necessary to respond to the public health emergency as a condition of licensure, authorization, or the 13 ability to continue doing business in the State as such a 14 15 business or facility. The use of the business, facility, or 16 property may include transferring the management and supervision of the business, facility, or property to the 17 public health authority for a limited or unlimited period of 18 19 time, but shall not exceed the termination of the declaration of a state of public health emergency. 20

(3) Use of facilities. To procure, by condemnation 21 (including quick-take under Article VII of the Code of Civil 22 23 Procedure) or otherwise, any business or facility authorized to collect, store, handle, destroy, treat, transport, and 24 25 dispose of infectious waste under the laws of this State and 26 any landfill business or other property as may be reasonable and necessary to respond to the public health emergency, with 27 the right to take immediate possession. 28

(4) Identification. All bags, boxes, or other containers
for infectious waste shall be clearly identified as
containing infectious waste and, if known, the type of
infectious waste.

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Section 15-20. Safe disposal of human remains. The public

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health authority may exercise, for such period as the state of public health emergency exists, the following powers regarding the safe disposal of human remains:

4 (1) Adopt measures. To adopt and enforce measures to 5 provide for the safe disposal of human remains as may be 6 reasonable and necessary to respond to the public health 7 emergency. These measures may include, but are not limited 8 to, the embalming, burial, cremation, interment, 9 disinterment, transportation, and disposal of human remains.

10 (2) Possession. To take possession or control of any11 human remains.

12 (3) Disposal. To order the disposal of any human remains 13 of a person who has died of a contagious disease through 14 burial or cremation within 24 hours after death. To the 15 extent possible, religious, cultural, family, and individual 16 beliefs of the deceased person or his or her family shall be 17 considered when disposing of any human remains.

(4) Control of facilities. To require any business or 18 19 facility authorized to embalm, bury, cremate, inter, disinter, transport, and dispose of human remains under the 20 21 laws of this State to accept any human remains or provide the 22 use of its business or facility if those actions are 23 reasonable and necessary to respond to a public health emergency. The use of the business or facility may include 24 25 transferring the management and supervision of the business or facility to the public health authority for a limited or 26 unlimited period of time, but shall not exceed 27 the termination of the declaration of a state of public health 28 29 emergency.

30 (5) Use of facilities. To procure, by condemnation 31 (including quick-take under Article VII of the Code of Civil 32 Procedure) or otherwise, any business or facility authorized 33 to embalm, bury, cremate, inter, disinter, transport, and 34 dispose of human remains under the laws of this State as may

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be reasonable and necessary to respond to a public health
 emergency, with the right to take immediate possession.

3 (6) Labeling. Every human remains prior to disposal 4 shall be clearly labeled with all available information to 5 identify the decedent and the circumstances of death. Any 6 human remains of a deceased person with a contagious disease 7 shall have an external, clearly visible tag indicating that 8 the human remains are infected and, if known, the contagious 9 disease.

(7) Identification. Every person in charge of disposing 10 11 of any human remains shall maintain a written or electronic record of each human remains and all available information to 12 identify the decedent and the circumstances of death and 13 disposal. If a human remains cannot be identified before 14 disposal, a qualified person shall, to the extent possible, 15 16 take fingerprints and photographs of the human remains, obtain identifying dental information, and collect a DNA 17 specimen. All information gathered under this paragraph shall 18 19 be promptly forwarded to the public health authority.

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Section 15-25. Control of health care supplies.

21 (1) Procurement. The public health authority mav 22 and distribute anti-toxins, serums, vaccines, purchase immunizing agents, antibiotics, and other pharmaceutical 23 24 agents or medical supplies that it deems advisable in the interest of preparing for or controlling a public health 25 emergency, without any additional legislative authorization. 26

(2) Rationing. If a state of public health emergency results in a statewide or regional shortage or threatened shortage of any product covered by item (1), whether or not that product has been purchased by the public health authority, the public health authority may control, restrict, and regulate by rationing and using quotas, prohibitions on shipments, allocation, or other means, the use, sale,

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dispensing, distribution, or transportation of the relevant
 product necessary to protect the health, safety, and welfare
 of the people of the State.

4 (2.5) Priority. In making rationing or other supply and 5 distribution decisions, the public health authority may give 6 preference to health care providers, disaster response 7 personnel, and mortuary staff.

8 (3) Distribution. During a state of public health 9 emergency, the public health authority may procure, store, or distribute any anti-toxins, serums, vaccines, immunizing 10 11 agents, antibiotics, and other pharmaceutical agents or medical supplies located within the State as may be 12 reasonable and necessary to respond to a public health 13 emergency, with the right to take immediate possession. If a 14 15 public health emergency simultaneously affects more than one 16 state, nothing in this Section shall be construed to allow the public health authority to obtain anti-toxins, serums, 17 18 immunizing agents, antibiotics, vaccines, and other 19 pharmaceutical agents or medical supplies for the primary purpose of hoarding those items or preventing their fair and 20 21 equitable distribution among affected states.

22 Section 15-30. Compensation. The State shall pay just compensation to the owner of any facilities or materials that 23 24 are lawfully taken or appropriated by a public health 25 authority for its temporary or permanent use under this Article according to the procedures and standards set forth 26 in Section 35-25. Compensation shall not be provided for 27 28 facilities or materials that are closed, evacuated, 29 decontaminated, or destroyed when there is reasonable cause to believe that they may endanger the public health pursuant 30 31 to Section 15-5.

Section 15-35. Destruction of property. To the extent

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1 practical and consistent with the protection of public 2 health, before the destruction of any property under this Article, the public health authority shall 3 institute 4 appropriate civil proceedings against the property to be 5 destroyed in accordance with the existing laws and rules of the courts of this State or any such rules that may be 6 7 developed by the courts for use during a state of public 8 health emergency. Any property acquired by the public health 9 authority through those proceedings shall, after entry of the order or decree, be disposed of by destruction as the court 10 11 may direct.

12 ARTICLE 20. SPECIAL POWERS DURING A STATE OF PUBLIC
13 HEALTH EMERGENCY; PROTECTION OF PERSONS

Section 20-5. Protection of persons. During a state of public health emergency, the public health authority shall use every available means to prevent the transmission of infectious disease and to ensure that all cases of contagious disease are subject to proper control and treatment.

Section 20-10. Medical examination and testing. During a state of public health emergency the public health authority may perform physical examinations and tests as necessary for the diagnosis or treatment of individuals.

(a) Medical examinations or tests may be performed by
any qualified person authorized to do so by the public health
authority.

26 (b) Medical examinations or tests must not be such as 27 are reasonably likely to lead to serious harm to the affected 28 individual.

29 (c) The public health authority may isolate or 30 quarantine, pursuant to Section 20-15, any person whose 31 refusal of medical examination or testing results in

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1 uncertainty regarding whether he or she has been exposed to 2 or is infected with a contagious or possibly contagious 3 disease or otherwise poses a danger to public health.

Section 20-12. Vaccination and treatment. During a state
of public health emergency the public health authority may
exercise the following emergency powers over persons as
necessary to address the public health emergency:

8 (a) Vaccination. To vaccinate persons as protection 9 against infectious disease and to prevent the spread of 10 contagious or possibly contagious disease.

(1) Vaccination may be performed by any qualified person authorized to do so by the public health authority.

14 (2) A vaccine to be administered must not be such
15 as is reasonably likely to lead to serious harm to the
16 affected individual.

17 (3) To prevent the spread of contagious or possibly 18 contagious disease the public health authority may 19 isolate or quarantine, pursuant to Section 20-15, persons 20 who are unable or unwilling for reasons of health, 21 religion, or conscience to undergo vaccination pursuant 22 to this Section.

23 (b) Treatment. To treat persons exposed to or infected24 with disease.

(1) Treatment may be administered by any qualified
person authorized to do so by the public health
authority.

(2) Treatment must not be such as is reasonably
likely to lead to serious harm to the affected
individual.

31 (3) To prevent the spread of contagious or possibly
32 contagious disease the public health authority may
33 isolate or quarantine, pursuant to Section 20-15, persons

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who are unable or unwilling for reasons of health,
 religion, or conscience to undergo treatment pursuant to
 this Section.

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Section 20-15. Isolation and quarantine.

5 Authorization. During the public health emergency, (a) the public health authority may isolate (consistent with the 6 definition of "isolation" in Section 1-15) or quarantine 7 (consistent with the definition of quarantine in Section 8 1-15) an individual or groups of individuals. This includes 9 10 individuals or groups who have not been vaccinated, treated, tested, or examined pursuant to Sections 20-10 and 20-12. 11 The public health authority may also establish and maintain 12 places of isolation and quarantine, and set rules and make 13 14 orders. Failure to obey these rules, orders, or provisions 15 shall constitute a Class A misdemeanor.

16 (b) Conditions and principles. The public health 17 authority shall adhere to the following conditions and 18 principles when isolating or quarantining individuals or 19 groups of individuals:

(1) Isolation and quarantine must be by the least
restrictive means necessary to prevent the spread of a
contagious or possibly contagious disease to others and
may include, but are not limited to, confinement to
private homes or other private and public premises.

25 (2) Isolated individuals must be confined26 separately from quarantined individuals.

(3) The health status of isolated and quarantined
individuals must be monitored regularly to determine if
they require isolation or quarantine.

30 (4) If a quarantined individual subsequently
31 becomes infected or is reasonably believed to have become
32 infected with a contagious or possibly contagious disease
33 he or she must promptly be removed to isolation.

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1 (5) Isolated and quarantined individuals must be 2 immediately released when they pose no substantial risk 3 of transmitting a contagious or possibly contagious 4 disease to others.

5 (6) The needs of persons isolated and quarantined 6 shall be addressed in a systematic and competent fashion, 7 including, but not limited to, providing adequate food, 8 clothing, shelter, means of communication with those in 9 isolation or quarantine and outside these settings, 10 medication, and competent medical care.

(7) Premises used for isolation and quarantine shall be maintained in a safe and hygienic manner and be designed to minimize the likelihood of further transmission of infection or other harms to persons isolated and quarantined.

16 (8) To the extent possible, cultural and religious
17 beliefs should be considered in addressing the needs of
18 individuals and in establishing and maintaining isolation
19 and quarantine premises.

20 (c) Cooperation. Persons subject to isolation or 21 quarantine shall obey the public health authority's rules and 22 orders and shall not go beyond the isolation or quarantine 23 premises. Failure to obey these provisions shall constitute a 24 Class A misdemeanor.

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(d) Entry into isolation or quarantine premises.

26 (1) Authorized entry. The public health authority
27 may authorize physicians, health care workers, or others
28 access to individuals in isolation or quarantine as
29 necessary to meet the needs of isolated or quarantined
30 individuals.

31 (2) Unauthorized entry. No person, other than a
32 person authorized by the public health authority, shall
33 enter isolation or quarantine premises. Failure to obey
34 this provision shall constitute a Class A misdemeanor.

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1 (3) Potential isolation or quarantine. Any person 2 entering an isolation or quarantine premises with or 3 without authorization of the public health authority may 4 be isolated or quarantined pursuant to this Section.

5 Section 20-20. Procedures for isolation and quarantine. 6 During a public health emergency, the isolation and 7 quarantine of an individual or groups of individuals shall be 8 undertaken in accordance with the following procedures.

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(a) Temporary isolation and quarantine without notice.

10 (1) Authorization. The public health authority may 11 temporarily isolate or quarantine an individual or groups 12 of individuals through a written directive if delay in 13 imposing the isolation or quarantine would significantly 14 jeopardize the public health authority's ability to 15 prevent or limit the transmission of a contagious or 16 possibly contagious disease to others.

17 Content of directive. The written directive (2) shall specify the following: (i) the identity of the 18 individuals or groups of individuals subject to isolation 19 20 or quarantine; (ii) the premises subject to isolation or 21 quarantine; (iii) the date and time at which isolation or 22 quarantine commences; (iv) the suspected contagious disease if known; and (v) a copy of Article 6 and 23 24 relevant definitions of this Act.

25 (3) Copies. A copy of the written directive shall
26 be given to the individual to be isolated or quarantined
27 or, if the order applies to a group of individuals and it
28 is impractical to provide individual copies, it may be
29 posted in a conspicuous place in the isolation or
30 quarantine premises.

31 (4) Petition for continued isolation or quarantine.
32 Within 10 days after issuing the written directive, the
33 public health authority shall file a petition pursuant to

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subsection (b) for a court order authorizing the continued isolation or quarantine of the isolated or quarantined individual or groups of individuals.

(b) Isolation or quarantine with notice.

5 (1) Authorization. The public health authority may 6 make a written petition to the trial court for an order 7 authorizing the isolation or quarantine of an individual 8 or groups of individuals.

9 (2) Content of petition. А petition under subsection (b)(1) shall specify the following: (i) the 10 11 identity of the individuals or groups of individuals subject to isolation or quarantine; (ii) the premises 12 subject to isolation or quarantine; (iii) the date and 13 time at which isolation or quarantine commences; (iv) the 14 15 suspected contagious disease if known; (v) a statement of 16 compliance with the conditions and principles for isolation and quarantine of Section 20-15; and (vi) a 17 statement of the basis upon which isolation or quarantine 18 is justified in compliance with this Article. 19 The petition shall be accompanied by the sworn affidavit of 20 21 the public health authority attesting to the facts 22 asserted in the petition, together with any further 23 information that may be relevant and material to the court's consideration. 24

25 (3) Notice. Notice to the individuals or groups of
26 individuals identified in the petition shall be
27 accomplished within 24 hours in accordance with the rules
28 of civil procedure.

(4) Hearing. A hearing must be held on any petition filed pursuant to this subsection within 5 days after filing of the petition. In extraordinary circumstances and for good cause shown the public health authority may apply to continue the hearing date on a petition filed pursuant to this Section for up to 10 days, which

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continuance the court may grant in its discretion giving due regard to the rights of the affected individuals, the protection of the public's health, the severity of the emergency, and the availability of necessary witnesses and evidence.

6 (5) Order. The court shall grant the petition if, 7 by a preponderance of the evidence, isolation or 8 quarantine is shown to be reasonably necessary to prevent 9 or limit the transmission of a contagious or possibly 10 contagious disease to others.

11 (i) An order authorizing isolation or 12 quarantine may do so for a period not to exceed 30 13 days.

(ii) The order shall (a) identify the isolated 14 15 or quarantined individuals or groups of individuals 16 by name or shared or similar characteristics or 17 circumstances; (b) specify factual findings warranting isolation or quarantine pursuant to this 18 Act; (c) include any conditions necessary to ensure 19 that isolation or quarantine is carried out within 20 21 the stated purposes and restrictions of this Act; and (d) be served on affected individuals or groups 22 23 of individuals in accordance with the rules of civil 24 procedure.

(6) Continuances. Prior to the expiration of an
order issued pursuant to subsection (b)(5), the public
health authority may move to continue isolation or
quarantine for additional periods not to exceed 30 days
each. The court shall consider the motion in accordance
with standards set forth in subsection (b)(5).

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(c) Relief from isolation and quarantine.

32 (1) Release. An individual or group of individuals
33 isolated or quarantined pursuant to this Act may apply to
34 the trial court for an order to show cause why the

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1 individual or group of individuals should not be 2 released. The court shall rule on the application to show cause within 48 hours of its filing. If the court grants 3 4 the application, the court shall schedule a hearing on the order to show cause within 24 hours from issuance of 5 the order to show cause. The issuance of an order to show 6 7 cause shall not stay or enjoin an isolation or quarantine 8 order.

9 (2) Remedies for breach of conditions. An individuals isolated or 10 individual or groups of 11 quarantined pursuant to this Act may request a hearing in the trial court for remedies regarding breaches to the 12 13 conditions of isolation or quarantine. A request for a hearing shall not stay or enjoin an isolation 14 or 15 quarantine order.

16 (i) Upon receipt of a request under this 17 subsection alleging extraordinary circumstances 18 justifying the immediate granting of relief, the 19 court shall fix a date for hearing on the matters 20 alleged not more than 24 hours from receipt of the 21 request.

(ii) Otherwise, upon receipt of a request
under this subsection the court shall fix a date for
hearing on the matters alleged within 5 days from
receipt of the request.

(3) Extensions. In any proceedings brought for 26 relief extraordinary 27 under this subsection, in circumstances and for good cause shown the public health 28 29 authority may move the court to extend the time for a 30 hearing, which extension the court in its discretion may grant giving due regard to the rights of the affected 31 individuals, the protection of the public's health, the 32 severity of the emergency, and the availability of 33 34 necessary witnesses and evidence.

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1 (d) Proceedings. A record of the proceedings pursuant to 2 this Section shall be made and retained. In the event that, 3 given a state of public health emergency, parties can not 4 personally appear before the court, proceedings may be 5 conducted by their authorized representatives and be held via 6 any means that allows all parties to fully participate.

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(e) Court to appoint counsel and consolidate claims.

8 (1) Appointment. The court shall appoint counsel at 9 State expense to represent individuals or groups of individuals who are or who are about to be isolated or 10 11 quarantined pursuant to the provisions of this Act and 12 who not otherwise represented by are counsel. shall be made 13 Appointments in accordance with the procedures to be specified in the Public Health Emergency 14 15 Plan and shall last throughout the duration of the 16 isolation or quarantine of the individual or groups of individuals. The public health authority must provide 17 adequate means of communication between those individuals 18 19 or groups and their counsel.

(2) Consolidation. any proceedings brought 20 In 21 pursuant to this Section, to promote the fair and 22 efficient operation of justice and having given due 23 regard to the rights of the affected individuals, the protection of the public's health, the severity of 24 the 25 emergency, and the availability of necessary witnesses and evidence, the court may order the consolidation of 26 individual claims into group or claims where: 27

28 (i) the number of individuals involved or to 29 be affected is so large as to render individual 30 participation impractical;

31 (ii) there are questions of law or fact common 32 to the individual claims or rights to be determined; 33 (iii) the group claims or rights to be 34 determined are typical of the affected individuals'

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claims or rights; and

2 (iv) the entire group will be adequately3 represented in the consolidation.

Section 20-25. Collection of laboratory 4 specimens; 5 performance of tests. The public health authority may, for such period as the state of public health emergency exists, 6 7 collect specimens and perform tests on living persons as 8 provided in Section 20-10 and also upon deceased persons and any animal, living or deceased, and acquire any previously 9 10 collected specimens or test results that are reasonable and necessary to respond to a public health emergency. 11

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(1) Marking. All specimens shall be clearly marked.

Contamination. Specimen collection, 13 (2) handling, storage, and transport to the testing site shall be performed 14 15 in a manner that will reasonably preclude specimen contamination or adulteration and provide for the 16 safe collection, storage, handling, and transport of the specimen. 17

18 (3) Chain of custody. Any person authorized to collect 19 specimens or perform tests shall use chain of custody 20 procedures to ensure proper record keeping, handling, 21 labeling, and identification of specimens to be tested. This 22 requirement applies to all specimens, including specimens 23 collected using on-site testing kits.

(4) Criminal investigation. Recognizing that, during a state of public health emergency, any specimen collected or test performed may be evidence in a criminal investigation, any business, facility, or agency authorized to collect specimens or perform tests shall provide such support as is reasonable and necessary to aid in a relevant criminal investigation.

31 Section 20-30. Access and disclosure of protected health 32 information.

1 (1)Access. Access to protected health information of 2 persons who have participated in medical testing, treatment, vaccination, isolation, or quarantine programs or efforts by 3 4 the public health authority during a public health emergency 5 shall be limited to those persons having a legitimate need to б acquire or use the information to: 7 (1) provide treatment to the individual who is the 8 subject of the health information; 9 (2) conduct epidemiologic research; or (3) investigate the causes of transmission. 10 11 (2) Disclosure. Protected health information held by the public health authority shall not be disclosed to others 12 without individual written, specific informed consent, except 13 for disclosures made: 14 15 (a) directly to the individual; 16 (b) to the individual's immediate family members or personal representative; 17 (c) to appropriate federal agencies or authorities 18 19 pursuant to federal law; (d) pursuant to a court order to avert a clear 20 21 danger to an individual or the public health; or (e) to identify a deceased individual or determine 22 23 the manner or cause of death. 24 Section 20-35. Licensing and appointment of health personnel. The public health authority may exercise, for such 25 period as the state of public health emergency exists, 26 the 27 following emergency powers regarding licensing and appointment of health personnel: 28 29 (0.5) Health care providers. To require in-state health care providers to assist in the performance of vaccination, 30 а

31 treatment, examination, or testing of any individual as a 32 condition of licensure, authorization, or the ability to 33 continue to function as a health care provider in this State. 1 (1) Health care providers from other jurisdictions. To 2 appoint and prescribe the duties of such out-of-state 3 emergency health care providers as may be reasonable and 4 necessary to respond to a public health emergency.

appointment of out-of-state emergency 5 (a) The 6 health care providers may be for a limited or unlimited 7 time, but shall not exceed the termination of the declaration of a state of public health emergency. The 8 9 public health authority may terminate the out-of-state appointments at any time or for any reason if the 10 11 termination will not jeopardize the health, safety, and welfare of the people of this State. 12

(b) The public health authority may waive any or 13 all licensing requirements, permits, or fees required by 14 15 State statutes and applicable orders, rules, or 16 regulations for health care providers from other jurisdictions to practice in this State. 17

18 (c) Any out-of-state emergency health care provider 19 appointed under this Section shall not be held liable for any civil damages as a result of medical care or 20 21 treatment related to the emergency response unless the 22 damages result from providing, or failing to provide, 23 medical or treatment under circumstances care demonstrating a reckless disregard for the consequences 24 25 so as to affect the life or health of the patient.

26 (2) Personnel to perform duties of medical examiner or 27 coroner. To authorize the medical examiner or coroner to 28 appoint and prescribe the duties of emergency assistant 29 medical examiners or coroners as may be required for the 30 proper performance of the duties of the office.

31 (a) The appointment of emergency assistant medical
32 examiners or coroners under this Section may be for a
33 limited or unlimited time, but shall not exceed the
34 termination of the declaration of a state of public

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health emergency. The medical examiner or coroner may
 terminate emergency appointments at any time or for any
 reason if the termination will not impede the performance
 of the duties of the office.

5 (b) The medical examiner or coroner may waive 6 licensing requirements, permits, or fees required by the 7 State statutes and applicable orders, rules, or 8 regulations for the performance of these duties.

9 (c) Any emergency assistant medical examiner or 10 coroner appointed under this Section and acting without 11 malice and within the scope of the prescribed duties is 12 immune from civil liability in the performance of those 13 duties.

14ARTICLE 25. PUBLIC INFORMATION REGARDING PUBLIC15HEALTH EMERGENCY

16 Section 25-5. Dissemination of information. The public 17 health authority shall inform the people of the State when a 18 state of public health emergency has been declared or 19 terminated, how to protect themselves during a state of 20 public health emergency, and what actions are being taken to 21 control the emergency.

(1) Means of dissemination. The public health authority
shall provide information by all available and reasonable
means calculated to bring the information promptly to the
attention of the general public.

26 (2) Languages. If the public health authority has reason 27 to believe there are large numbers of people of the State who 28 lack sufficient skills in English to understand the 29 information, the public health authority shall make 30 reasonable efforts to provide the information in the primary 31 languages of those people as well as in English.

32 (3) Accessibility. The provision of information shall be

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made in a manner accessible to individuals with disabilities.

Section 25-10. Access to mental health support personnel. 2 3 During and after the declaration of a state of public health emergency, the public health authority shall 4 provide 5 information about and referrals to mental health support personnel to address psychological responses to the public 6 7 health emergency.

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ARTICLE 35. MISCELLANEOUS

Section 35-5. Titles. For the purposes of this Act, 9 titles and subtitles of Articles, Sections, and subsections 10 are instructive, but not binding. 11

12 Section 35-10. Rules. The public health authority and other affected agencies must adopt rules that are reasonable 13 14 and necessary to implement and effectuate this Act. The 15 public health authority and other affected agencies may enforce the provisions of this Act through the imposition of 16 17 fines and penalties, the issuance of orders, and such other 18 remedies as are provided by law, but nothing in this Section 19 shall be construed to limit specific enforcement powers enumerated in this Act. 20

21 Section 35-15. Financing and expenses.

Transfer of funds. The Governor may transfer from 22 (1)any fund available to the Governor in the State treasury such 23 24 sums as may be necessary during a public health emergency.

25 Repayment. Moneys so transferred shall be repaid to (2) the fund from which they were transferred when moneys become 26 27 available for that purpose, by legislative appropriation or 28 otherwise.

(3) Conditions. A transfer of funds by the Governor 29

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1 under the provisions of this Section may be made only when 2 one or more of the following conditions exist:

(a) No appropriation or other authorization is 3 4 available to meet the public health emergency.

(b) An appropriation is insufficient to meet the 5 public health emergency. 6

(c) Federal moneys available for such a public 7 8 health emergency require the use of State or other public 9 moneys.

Expenses. All expenses incurred by the State during 10 (4) 11 a state of public health emergency shall be subject to the following limitations: 12

(a) No expense shall be incurred against the moneys 13 authorized under this Section, without the approval of 14 15 the Governor.

16 (b) The aggregate amount of all expenses incurred under the provisions of this Section shall not exceed 17 \$50,000,000 for any fiscal year. 18

19 (c) Moneys authorized for a state of public health emergency in prior fiscal years may be used in subsequent 20 21 fiscal years only for the public health emergency for 22 which they were authorized. Moneys authorized for a 23 public health emergency in prior fiscal years, and expended in subsequent fiscal years for the public health 24 25 emergency for which they were authorized, apply toward the \$50,000,000 expense limit for the fiscal year in 26 which they were authorized. 27

Section 35-20. Liability. 28

29 State immunity. Neither the State, its political (1)subdivisions, nor, except in cases of gross negligence or 30 31 willful misconduct, the Governor, the public health authority, or any other State or local official referenced in 32 this Act, is liable for the death of or any injury to 33

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persons, or damage to property, as a result of complying with or attempting to comply with this Act or any rule adopted under this Act during a state of public health emergency.

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(2) Private liability.

5 (a) During a state of public health emergency, any owning or controlling real estate or other 6 person 7 premises who voluntarily and without compensation grants 8 а license or privilege, or otherwise permits the 9 designation or use of the whole or any part or parts of estate or premises for the purpose of 10 that real 11 sheltering persons, together with that person's successors in interest, if any, is not civilly liable for 12 negligently causing the death of, or injury to, 13 any person on or about the real estate or premises under the 14 15 license, privilege, or other permission, for or 16 negligently causing loss of, or damage to, the property 17 of that person.

(b) During a state of public health emergency, 18 any 19 private person, firm, or corporation and employees and 20 agents of that person, firm, or corporation in the performance of a contract with, and under the direction 21 22 of, the State or its political subdivisions under this 23 is not civilly liable for causing the death of, or Act injury to, any person or damage to any property except in 24 25 the event of gross negligence or willful misconduct.

(c) During a state of public health emergency, any 26 27 private person, firm, or corporation and employees and agents of that person, firm, or corporation, who renders 28 29 assistance or advice at the request of the State or its 30 political subdivisions under this Act is not civilly liable for causing the death of, or injury to, any person 31 or damage to any property except in the event of gross 32 negligence or willful misconduct. 33

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(d) The immunities provided in this Section do not

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apply to any private person, firm, or corporation or employees and agents of that person, firm, or corporation whose act or omission caused in whole or in part the public health emergency and who would otherwise be liable for that act or omission.

6 Section 35-25. Compensation.

7 (1) Taking. Compensation for property shall be made only 8 if private property is lawfully taken or appropriated by a 9 public health authority for its temporary or permanent use 10 during a state of public health emergency declared by the 11 Governor under this Act.

12 (2) Actions. Any action against the State with regard to 13 the payment of compensation shall be brought in the courts of 14 this State in accordance with existing court laws and rules, 15 or any such rules that may be developed by the courts for use 16 during a state of public health emergency.

The 17 (3) Amount. amount of compensation shall be calculated in the same manner as compensation due for taking 18 19 property pursuant to non-emergency eminent domain of 20 procedures, as provided in Article VII of the Code of Civil 21 Procedure, except that the amount of compensation calculated for items obtained under Section 15-25 shall be limited to 22 the costs incurred to produce the item. 23

24 Section 35-30. Severability. The provisions of this Act 25 are severable under Section 1.31 of the Statute on Statutes.

26 Section 35-35. Saving clause. This Act does not 27 explicitly preempt other laws or regulations that preserve to a greater degree the powers of the Governor or public health 28 29 authority, provided such laws or regulations are consistent, do not otherwise restrict or interfere, with the 30 and 31 operation or enforcement of the provisions of this Act.

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Section 35-40. Conflicting laws.

2 (1) Federal supremacy. This Act does not restrict any3 person from complying with federal law or regulations.

4 (2) Prior conflicting acts. To the extent of any
5 conflict between this Act and other State or local laws,
6 rules, or regulations concerning public health powers, the
7 provisions of this Act apply.

8 Section 35-50. Home rule. All units of local government, including home rule units, and school districts must comply 9 with the provisions of this Act. All units of local 10 government, including home rule units, and school districts 11 must act in a manner consistent with the provisions of this 12 Act. This Act is a denial and limitation of home rule powers 13 and functions under subsection (i) of Section 6 of Article 14 15 VII of the Illinois Constitution.

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ARTICLE 90. AMENDATORY PROVISIONS

Section 90-5. The State Mandates Act is amended by adding Section 8.26 as follows:

19 (30 ILCS 805/8.26 new)

20 <u>Sec. 8.26. Exempt mandate.</u> Notwithstanding Sections 6 21 and 8 of this Act, no reimbursement by the State is required 22 for the implementation of any mandate created by the Illinois 23 <u>Emergency Health Powers Act.</u>

- 24 Section 90-10. The Code of Civil Procedure is amended by 25 adding Section 7-103.139 as follows:
- 26 (735 ILCS 5/7-103.139 new)

27 <u>Sec. 7-103.139. Quick-take; public health emergencies.</u>
 28 <u>Quick-take proceedings under Section 7-103 may be used as</u>

1 provided in the Illinois Emergency Health Powers Act.

2 ARTICLE 99. EFFECTIVE DATE

3 Section 99-1. Effective date. This Act takes effect upon
4 becoming law.