SENATE JOURNAL

STATE OF ILLINOIS

ONE HUNDRED THIRD GENERAL ASSEMBLY

91ST LEGISLATIVE DAY

THURSDAY, MARCH 14, 2024

11:08 O'CLOCK A.M.

NO. 91
[March 14, 2024]

SENATE
Daily Journal Index
91st Legislative Day

The Senate met pursuant to adjournment.
Senator Omar Aquino, Chicago, Illinois, presiding.
Prayer by Chaplain Carla Matrisch, Civil Service Ministries, Chatham, Illinois.
Senator Johnson led the Senate in the Pledge of Allegiance.

Senator Hunter moved that reading and approval of the Journal of Wednesday, March 13, 2024, be postponed, pending arrival of the printed Journal.
The motion prevailed.

REPORT RECEIVED

The Secretary placed before the Senate the following report:

IDCEO Illinois Live Theater Tax Credit Quarterly Report FY24 Q2, submitted by the Department of Commerce and Economic Opportunity.

The foregoing report was ordered received and placed on file in the Secretary's Office.

LEGISLATIVE MEASURES FILED

The following Floor amendments to the Senate Bills listed below have been filed with the Secretary and referred to the Committee on Assignments:

Amendment No. 1 to Senate Bill 2751
Amendment No. 1 to Senate Bill 3767

MESSAGE FROM THE PRESIDENT

OFFICE OF THE SENATE PRESIDENT
DON HARMON
STATE OF ILLINOIS

327 STATE CAPITOL
SPRINGFIELD, ILLINOIS 62706
217-782-2728

160 N. LASALLE ST., STE. 720
CHICAGO, ILLINOIS 60601
312-814-2075

March 13, 2024

Mr. Tim Anderson
Secretary of the Senate
Room 058 State House
Springfield, IL 62706

Dear Mr. Secretary:

Pursuant to Rule 2-10, I am cancelling Session scheduled for Friday, March 15.

Sincerely,
s/Don Harmon
Don Harmon
Senate President

cc: Senate Republican Leader John F. Curran

PRESENTATION OF CELEBRATION OF LIFE RESOLUTIONS

SENATE RESOLUTION NO. 845

Offered by Senator Rose and all Senators:
Mourns the death of Cleveland Darnell "Cleve" Peete Jr. of Champaign.

SENATE RESOLUTION NO. 846

Offered by Senator McClure and all Senators:
Mourns the passing of Bruce Alexander Campbell II of Tucson, Arizona, formerly of Springfield.

SENATE RESOLUTION NO. 847

Offered by Senator McClure and all Senators:
Mourns the death of Nancy June Scaife Beatty of Springfield.

SENATE RESOLUTION NO. 848

Offered by Senator McClure and all Senators:
Mourns the death of John D. "Jack" McDermott of Chatham.

SENATE RESOLUTION NO. 849

Offered by Senator McClure and all Senators:
Mourns the passing of Philip Sharp McCully of Toluca.

By unanimous consent, the foregoing resolutions were referred to the Resolutions Consent Calendar.

PRESENTATION OF CONGRATULATORY RESOLUTION

SENATE RESOLUTION NO. 844

Offered by Senators Feigenholtz - Ellman - Edly-Allen:
Recognizes the First Women's Bank during Women's History Month for their advocacy for women and dedication to supporting women and minority-owned business.

Under the Rules, the foregoing resolution was referred to the Committee on Assignments.

REPORTS FROM STANDING COMMITTEES

Senator Castro, Chair of the Committee on Executive, to which was referred **Senate Bills Numbered 2625, 3359 and 3452**, reported the same back with the recommendation that the bills do pass.
Under the rules, the bills were ordered to a second reading.

Senator Castro, Chair of the Committee on Executive, to which was referred **Senate Bills Numbered 2643, 2745, 3235 and 3630**, reported the same back with amendments having been adopted thereto, with the recommendation that the bills, as amended, do pass.
Under the rules, the bills were ordered to a second reading.

Senator Castro, Chair of the Committee on Executive, to which was referred the following Senate floor amendments, reported that the Committee recommends do adopt:

Senate Amendment No. 2 to Senate Bill 1
Senate Amendment No. 1 to Senate Bill 2665
Senate Amendment No. 2 to Senate Bill 3098

Under the rules, the foregoing floor amendments are eligible for consideration on second reading.

Senator Joyce, Chair of the Committee on State Government, to which was referred **Senate Bill No. 3434**, reported the same back with amendments having been adopted thereto, with the recommendation that the bill, as amended, do pass.

Under the rules, the bill was ordered to a second reading.

Senator Joyce, Chair of the Committee on State Government, to which was referred the following Senate floor amendments, reported that the Committee recommends do adopt:

Senate Amendment No. 1 to Senate Bill 2907
Senate Amendment No. 1 to Senate Bill 3805

Under the rules, the foregoing floor amendments are eligible for consideration on second reading.

Senator Glowiak Hilton, Chair of the Committee on Licensed Activities, to which was referred **Senate Bill No. 3467**, reported the same back with the recommendation that the bill do pass.

Under the rules, the bill was ordered to a second reading.

Senator Glowiak Hilton, Chair of the Committee on Licensed Activities, to which was referred **Senate Bills Numbered 2586 and 2731**, reported the same back with amendments having been adopted thereto, with the recommendation that the bills, as amended, do pass.

Under the rules, the bills were ordered to a second reading.

Senator Sims, Chair of the Special Committee on Criminal Law and Public Safety, to which was referred **Senate Bills Numbered 2626 and 2803**, reported the same back with amendments having been adopted thereto, with the recommendation that the bills, as amended, do pass.

Under the rules, the bills were ordered to a second reading.

Senator Sims, Chair of the Special Committee on Criminal Law and Public Safety, to which was referred the following Senate floor amendment, reported that the Committee recommends do adopt:

Senate Amendment No. 1 to Senate Bill 3463

Under the rules, the foregoing floor amendment is eligible for consideration on second reading.

Senator Villanueva, Chair of the Committee on Revenue, to which was referred **Senate Bills Numbered 2878, 3455, 3475 and 3496**, reported the same back with the recommendation that the bills do pass.

Under the rules, the bills were ordered to a second reading.

Senator Villanueva, Chair of the Committee on Revenue, to which was referred **Senate Bills Numbered 3426 and 3617**, reported the same back with amendments having been adopted thereto, with the recommendation that the bills, as amended, do pass.

Under the rules, the bills were ordered to a second reading.

Senator Holmes, Chair of the Committee on Local Government, to which was referred **Senate Bills Numbered 2879 and 3163**, reported the same back with the recommendation that the bills do pass.

Under the rules, the bills were ordered to a second reading.

Senator Holmes, Chair of the Committee on Local Government, to which was referred **Senate Bills Numbered 2778, 3429 and 3597**, reported the same back with amendments having been adopted thereto, with the recommendation that the bills, as amended, do pass.

Under the rules, the bills were ordered to a second reading.

Senator Stadelman, Chair of the Committee on Energy and Public Utilities, to which was referred **Senate Bills Numbered 3481, 3506 and 3758**, reported the same back with the recommendation that the bills do pass.

Under the rules, the bills were ordered to a second reading.

Senator Stadelman, Chair of the Committee on Energy and Public Utilities, to which was referred **Senate Bills Numbered 3648 and 3686**, reported the same back with amendments having been adopted thereto, with the recommendation that the bills, as amended, do pass.

Under the rules, the bills were ordered to a second reading.

READING BILLS OF THE SENATE A SECOND TIME

On motion of Senator McConchie, **Senate Bill No. 275** having been printed, was taken up, read by title a second time.

Committee Amendment No. 1 was postponed in the Committee on Transportation.

The following amendment was offered in the Committee on Transportation, adopted and ordered printed:

AMENDMENT NO. 2 TO SENATE BILL 275

AMENDMENT NO. 2 . Amend Senate Bill 275 on page 2, line 2, by replacing "January 1, 2027" with "July 1, 2027"; and

on page 2, lines 6 and 7, by replacing "December 31, 2024" with "January 1, 2027".

There being no further amendments, the foregoing Amendment No. 2 was ordered engrossed, and the bill, as amended, was ordered to a third reading.

On motion of Senator Murphy, **Senate Bill No. 2029** having been printed, was taken up, read by title a second time and ordered to a third reading.

On motion of Senator Porfirio, **Senate Bill No. 2601** having been printed, was taken up, read by title a second time.

The following amendment was offered in the Committee on Judiciary, adopted and ordered printed:

AMENDMENT NO. 1 TO SENATE BILL 2601

AMENDMENT NO. 1 . Amend Senate Bill 2601 by replacing everything after the enacting clause with the following:

"Section 5. The Landlord and Tenant Act is amended by adding Section 25 as follows:

(765 ILCS 705/25 new)

Sec. 25. Disclosure of potential flooding in rental and lease agreements.

(a) As used in this Section:

"Flood" and "flooding" mean a general or temporary condition of partial or complete inundation of a dwelling or property caused by:

(1) the overflow of inland or tidal waves;

(2) the unusual and rapid accumulation of runoff or surface waters from any established water source such as a river, stream, or drainage ditch; or

(3) rainfall.

"Lower-level unit" means any garden level unit, basement level unit, or first floor level unit.

(b) Every landlord shall clearly disclose to each of the landlord's tenants in writing prior to signing the lease for the rental property that a rental property is located in the Federal Emergency Management Agency (FEMA) Special Flood Hazard Area ("100-year floodplain") and if the landlord has actual knowledge that

the rental property or any portion of the parking areas of the real property containing the rental property has been subjected to flooding and the frequency of such flooding. Such disclosure shall also be included in the written lease or the written renewal lease and shall be signed by both parties.

(c) Every landlord who leases a lower-level unit shall clearly disclose to each of the landlord's lower-level unit tenants in writing prior to the signing of the lease for the lower-level unit if the lower-level unit or any portion of the real property containing the lower-level unit has experienced flooding in the last 10 years and shall disclose the frequency of such flooding. Such disclosure shall also be included in the written lease or the written renewal lease and shall be signed by both parties.

(d) The written disclosure shall look substantially similar to the following:

"(Landlord) [ ] is or [ ] is not aware that the rental property is located in a FEMA Special Flood Hazard Area ("100-year floodplain"). The property has experienced flooding [ ] times in the last 10 years. Even if the rental property is not in a Special Flood Hazard Area ("100-year floodplain"), the dwelling may still be susceptible to flooding. The Federal Emergency Management Agency (FEMA) maintains a flood map on its Internet website that is searchable by address, at no cost, to determine if a dwelling is located in a flood hazard area.

(Landlord) [ ] is or [ ] is not aware that the rental property you are renting has flooded at least once in the last 10 years. The rental property has flooded [ ] times in the last 10 years. Even if the dwelling has not flooded in the last 10 years, the dwelling may still be susceptible to flooding.

Most tenant insurance policies do not cover damage or loss incurred in a flood. You are encouraged to examine your policy to determine whether you are covered. If you are not, flood insurance may be available through FEMA's National Flood Insurance Program to cover your personal property in the event of a flood. Information regarding flood risks can be found at the dnr.illinois.gov (Illinois Department of Natural Resources), fema.gov (FEMA), and ready.gov/flood (U.S. National public service).

Landlords are required to disclose the above information pursuant to Section 25 of the Landlord and Tenant Act. A landlord's failure to comply with Section 25 of the Landlord and Tenant Act shall entitle the tenant to remedies as defined in that Section.

.....

(Tenant Signature) (Date)

.....

(Landlord Signature) (Date)"

(e) If a landlord fails to comply with subsection (b), and the tenant subsequently becomes aware that the property is located in the FEMA Special Flood Hazard Area ("100-year floodplain") the tenant may terminate the lease by giving written notice of termination to the landlord no later than the 30th day after a tenant becomes aware of the landlord's failure to comply with subsection (b), and the landlord shall return all rent and fees paid in advance no later than the 15th day after the tenant gave notice.

If a landlord fails to comply with subsection (b) or subsection (c) and flooding occurs that results in damage to the tenant's personal property, affects the habitability of the leased property, or affects the tenant's access to the leased property, the tenant may:

(1) terminate the lease by giving written notice to the landlord no later than the 30th day after the flood occurred and the landlord shall return all rent and fees paid in advance no later than the 15th day after the tenant gave notice; and

(2) bring an action against the landlord of the property to recover damages for personal property lost or damaged as a result of flooding.

(e) Exemptions. This Section does not apply to farm leases, concession leases, and rental properties owned or managed by the Department of Natural Resources.

(f) This Section may not be interpreted to permit the renting, leasing, or subleasing of lower-level units in a municipality if the municipality does not permit the renting, leasing, or subleasing of such units.".

There being no further amendments, the foregoing Amendment No. 1 was ordered engrossed, and the bill, as amended, was ordered to a third reading.

On motion of Senator Koehler, **Senate Bill No. 2606** having been printed, was taken up, read by title a second time.

The following amendment was offered in the Committee on Higher Education, adopted and ordered printed:

AMENDMENT NO. 1 TO SENATE BILL 2606

AMENDMENT NO. 1 . Amend Senate Bill 2606 by replacing everything after the enacting clause with the following:

"Section 5. The Mental Health Early Action on Campus Act is amended by changing Sections 5, 15, and 25 by adding Section 43 as follows:

(110 ILCS 58/5)

Sec. 5. Intent. This Act is intended to address gaps in mental health services on college campuses across Illinois, including both 2-year and 4-year institutions, through training, peer support, ~~and~~ community-campus partnerships, and academic days off.

(Source: P.A. 101-251, eff. 7-1-20.)

(110 ILCS 58/15)

Sec. 15. Purpose. The purpose of this Act is to accomplish all of the following:

(1) Further identify students with mental health needs and connect them to services.

(2) Increase access to support services on college campuses.

(3) Increase access to clinical mental health services on college campuses and in the surrounding communities for college students.

(4) Empower students through peer-to-peer support and training on identifying mental health needs and resources.

(5) Reduce administrative policies that put an undue burden on students seeking leave for their mental health conditions through technical assistance and training.

(6) Increase the number of academic days off to prevent health issues from escalating.

(Source: P.A. 101-251, eff. 7-1-20.)

(110 ILCS 58/25)

Sec. 25. Awareness. To raise mental health awareness on college campuses, each public college or university must do all of the following:

(1) Develop and implement an annual student orientation session aimed at raising awareness about mental health conditions and informing students about the public college's or university's student wellness day policy.

(2) Assess courses and seminars available to students through their regular academic experiences and implement mental health awareness curricula if opportunities for integration exist.

(3) Create and feature a page on its website or mobile application with information dedicated solely to the mental health resources available to students at the public college or university, including information about the public college's or university's student wellness day policy, and in the surrounding community.

(4) Distribute messages related to mental health resources that encourage help-seeking behavior through the online learning platform of the public college or university during high stress periods of the academic year, including, but not limited to, midterm or final examinations. These stigma-reducing strategies must be based on documented best practices.

(5) Three years after the effective date of this Act, implement an online screening tool to raise awareness and establish a mechanism to link or refer students of the public college or university to services. Screenings and resources must be available year round for students and, at a minimum, must (i) include validated screening tools for depression, an anxiety disorder, an eating disorder, substance use, alcohol-use disorder, post-traumatic stress disorder, and bipolar disorder, (ii) provide resources for immediate connection to services, if indicated, including emergency resources, (iii) provide general information about all mental health-related resources available to students of the public college or university, and (iv) function anonymously.

(6) At least once per term and at times of high academic stress, including midterm or final examinations, provide students information regarding online screenings and resources.

(7) Provide contact information for the National Suicide Prevention Lifeline (988), the Crisis Text Line, a local suicide prevention hotline, and the mental health counseling center or program of the public college or university on the back of each student identification card issued by the public college or university after July 1, 2022 (the effective date of Public Act 102-373) if the public college or university issues student identification cards. If the public college or university does not issue student identification cards to its students, the public college or university must publish the contact information on its website. The contact information shall identify each helpline that may be contacted

through text messaging. The contact information shall be included in the public college's or university's student handbook and also the student planner if a student planner is custom printed by the public college or university for distribution to students.

(Source: P.A. 101-251, eff. 7-1-20; 102-373, eff. 7-1-22; 102-416, eff. 7-1-22; 102-813, eff. 5-13-22.)

(110 ILCS 58/43 new)

Sec. 43. Student wellness days.

(a) As used in this Section:

"Academic day" means any day Monday through Friday during an academic term. "Academic day" does not include any academic day off that is already being provided by each public college or university for students during an academic term, including, but not limited to, fall breaks, winter breaks, spring breaks, public holidays, or any other academic day that a public college or university provides to enrolled students as not attending academic classes that is not a student wellness day.

"Academic term" means a division of the academic year during which a course of studies from each public college or university is offered. "Academic term" includes the spring academic semester and fall academic semester.

"Academic year" means the period of time from September 1 of one year through August 31 of the next year or as otherwise defined by the public college or university.

"Student wellness day" means an excused academic day of absence for a student from all academic enrolled courses during an academic term for any reason.

(b) In order to improve overall student health, beginning no later than the 2026-2027 academic year, the governing body of each public college or university shall adopt a student wellness day policy for each academic term that does one of the following:

(1) allows students to use a minimum of 2 student wellness days per academic term;

(2) provides students a minimum of 2 scheduled student wellness days per academic term; or

(3) allows students to use a minimum of one student wellness day per academic term and provides students a minimum of one scheduled student wellness day per academic term.

Each public college or university student wellness day policy adopted under this subsection shall apply to students who are enrolled in at least one academic course that lasts 9 weeks or longer during an academic term, unless the course conflicts with subsection (c) or subsection (d).

(c) A student wellness day policy adopted by a public college or university under subsection (b) shall not apply to a clinical component course, credit internship course, or a fieldwork placement course.

(d) Each public college or university shall determine whether its student wellness day policy adopted under subsection (b) shall apply to the following students:

(1) students who are only enrolled in courses that are 8 weeks or less during an academic term;

(2) students who are only enrolled in non-credited courses, unless the non-credited courses are remedial courses; or

(3) students who are only enrolled in non-standard courses, flexible term courses, or online courses during an academic term.

Each public college or university student wellness day policy may allow students under paragraph (1), (2), and (3) to either receive one or more scheduled student wellness day or use one or more student wellness day if the student wellness day is a part of the students public college or university student wellness days policy adopted under subsection (b) and the students courses are 8 weeks or less in length during an academic term.

(e) Student wellness days shall only be used on academic days. No student wellness days may be carried over from one academic term to the next academic term.

(f) No academic course work shall be assigned or due to students on a scheduled student wellness day, if the scheduled student wellness day does not conflict with any of the rules or policies established in subsection (b), (c), and (d).

(g) Nothing in this Section shall interfere with or in any way diminish the right of academic course instructors to bargain collectively with their employers through representatives of their own choosing to determine the responsibility of tracking any student wellness days that are used by students under this Section. No public college or university's student wellness day's policy under this Section shall infringe upon any academic course instructor's ability to allow students to miss additional academic course classes.

(h) At a minimum, for each academic year or academic term, beginning no later than the start of the 2026-2027 academic year, each public college or university shall provide information about the public college's or university's wellness day policy in its institutions academic student handbook. If a public college

or university schedules a student wellness day for students, the student wellness day shall be scheduled before the academic term begins, and a reasonable notice of the scheduled student wellness day date shall be provided to the students and course instructors that the student wellness day applies to before the academic term begins.

(i) Each public college or university shall only use the term "student wellness day" as the name of the day that a student does not have to attend an academic class or classes during an academic day under this Section.

Section 99. Effective date. This Act takes effect upon becoming law.".

There being no further amendments, the foregoing Amendment No. 1 was ordered engrossed, and the bill, as amended, was ordered to a third reading.

On motion of Senator Koehler, **Senate Bill No. 2628** having been printed, was taken up, read by title a second time.

The following amendment was offered in the Committee on State Government, adopted and ordered printed:

AMENDMENT NO. 1 TO SENATE BILL 2628

AMENDMENT NO. 1 . Amend Senate Bill 2628 by replacing everything after the enacting clause with the following:

"Section 5. The Rivers, Lakes, and Streams Act is amended by adding Section 18k as follows:
(615 ILCS 5/18k new)
Sec. 18k. National Flood Insurance Program State agency requirements.
(a) As used in this Section:
"Department" means the Department of Natural Resources.
"Development" and "developed" mean any man-made change to real estate, including, but not limited to:

(1) demolition, construction, reconstruction, repair, placement of a building, or any structural alteration to a building;

(2) substantial improvement of an existing building;

(3) installation of a manufactured home on a site, preparing a site for a manufactured home, or installing a travel trailer on a site for more than 180 days per year;

(4) installation of utilities, construction of roads, bridges, culverts, or similar projects;

(5) redevelopment of a site, or clearing of land as an adjunct of construction or construction or erection of levees, dams, walls, or fences;

(6) drilling, mining, filling, dredging, grading, excavation, paving, or other alterations of the ground surface;

(7) storage of materials, including the placement of gas or liquid storage tanks, and channel modifications or any other activity that might change the direction, height, or velocity of flood or surface waters.

"Development" and "developed" do not include resurfacing of pavement when there is no increase in elevation; construction of farm fencing; or gardening, plowing, and similar practices that do not involve filling, grading, or construction of levees.

"Special flood hazard area" means an area having special flood, mudflow or flood-related erosion hazards and shown on a Federal Emergency Management Agency Flood Hazard Boundary Map or Floor Insurance Rate Map as Zone A, AO, A1-A-30, AE, A99, AH, AR, AR/A, AR/AE, AR/AH, AR/AO, AR/A1-A30, V1-V30, VE or V.

"State agencies" means any department, commission, board, or agency under the jurisdiction of the Governor, any board, commission, agency, or authority which has a majority of its members appointed by the Governor, and the Governor's Office.

(b) The Department shall ensure that State agencies comply with National Flood Insurance Program requirements set forth in this Section.

(c) All State agencies shall obtain a special flood hazard area development permit before undertaking development activity on State-owned property that is located in a special flood hazard area. The Department

shall adopt an administrative rule setting forth a State special flood hazard area development program to ensure the following via the issuance of permits prior to any State agency development within a special flood hazard area:

(1) Review of all proposed new development in a special flood hazard area to ensure compliance with the standards set forth in the administrative rule.

(2) Monitoring and inspecting developments currently under construction in a special flood hazard area to ensure compliance with the standards set forth in the administrative rule.

(3) Correction, to the extent reasonably practical in the sole determination of the Department, of all previous development in a special flood hazard area found not to be in compliance with the standards set forth in the administrative rule.

(4) The standards set forth in the administrative rule shall, at a minimum, be as stringent as the federal regulations adopted by the Federal Emergency Management Agency to implement the National Flood Insurance Act (42 U.S.C. 4001 et seq.) that are published in 44 CFR 59 through 60.

(d) State agencies that administer grants or loans for financing a development within a special flood hazard area shall cooperate with the Department to ensure that participants in their programs are informed of the existence and location of special flood hazard areas and of any State or local floodplain requirements that are in effect in such areas.

(e) State agencies that are responsible for regulating or permitting a development within a special flood hazard area shall cooperate with the Department to ensure that participants in their programs are informed of the existence and location of special flood hazard areas and of any State or local floodplain requirements that are in effect in such areas.

(f) State agencies that are engaged in planning programs or promoting a program for the development shall cooperate with the Department to ensure that participants in their programs are informed of the existence and location of special flood hazard areas and of any State or local floodplain requirements in effect in such areas.

(g) The Department shall provide available special flood hazard area information to assist State agencies in complying with the requirements established by this Section. The Department may enter into a memorandum of understanding with a State agency to outline procedures and processes to review proposed development activity on State-owned property located in a special flood hazard area. Such a memorandum of understanding may allow for alternative approvals for the issuance of permits. If the Department enters into a memorandum of understanding with a State agency to allow an alternative permit process any permits or work completed under those alternatives is subject to audit and review by the Department.".

There being no further amendments, the foregoing Amendment No. 1 was ordered engrossed, and the bill, as amended, was ordered to a third reading.

On motion of Senator Murphy, **Senate Bill No. 2655** having been printed, was taken up, read by title a second time and ordered to a third reading.

On motion of Senator Morrison, **Senate Bill No. 2658** having been printed, was taken up, read by title a second time.

The following amendment was offered in the Committee on Public Health, adopted and ordered printed:

AMENDMENT NO. 1 TO SENATE BILL 2658

AMENDMENT NO. 1 . Amend Senate Bill 2658 on page 1, immediately below line 3, by inserting the following:

"Section 3. The Illinois Public Aid Code is amended by changing Section 5-5 as follows:

(305 ILCS 5/5-5)

Sec. 5-5. Medical services. The Illinois Department, by rule, shall determine the quantity and quality of and the rate of reimbursement for the medical assistance for which payment will be authorized, and the medical services to be provided, which may include all or part of the following: (1) inpatient hospital services; (2) outpatient hospital services; (3) other laboratory and X-ray services; (4) skilled nursing home services; (5) physicians' services whether furnished in the office, the patient's home, a hospital, a skilled nursing home, or elsewhere; (6) medical care, or any other type of remedial care furnished by licensed

practitioners; (7) home health care services; (8) private duty nursing service; (9) clinic services; (10) dental services, including prevention and treatment of periodontal disease and dental caries disease for pregnant individuals, provided by an individual licensed to practice dentistry or dental surgery; for purposes of this item (10), "dental services" means diagnostic, preventive, or corrective procedures provided by or under the supervision of a dentist in the practice of his or her profession; (11) physical therapy and related services; (12) prescribed drugs, dentures, and prosthetic devices; and eyeglasses prescribed by a physician skilled in the diseases of the eye, or by an optometrist, whichever the person may select; (13) other diagnostic, screening, preventive, and rehabilitative services, including to ensure that the individual's need for intervention or treatment of mental disorders or substance use disorders or co-occurring mental health and substance use disorders is determined using a uniform screening, assessment, and evaluation process inclusive of criteria, for children and adults; for purposes of this item (13), a uniform screening, assessment, and evaluation process refers to a process that includes an appropriate evaluation and, as warranted, a referral; "uniform" does not mean the use of a singular instrument, tool, or process that all must utilize; (14) transportation and such other expenses as may be necessary; (15) medical treatment of sexual assault survivors, as defined in Section 1a of the Sexual Assault Survivors Emergency Treatment Act, for injuries sustained as a result of the sexual assault, including examinations and laboratory tests to discover evidence which may be used in criminal proceedings arising from the sexual assault; (16) the diagnosis and treatment of sickle cell anemia; (16.5) services performed by a chiropractic physician licensed under the Medical Practice Act of 1987 and acting within the scope of his or her license, including, but not limited to, chiropractic manipulative treatment; and (17) any other medical care, and any other type of remedial care recognized under the laws of this State. The term "any other type of remedial care" shall include nursing care and nursing home service for persons who rely on treatment by spiritual means alone through prayer for healing.

Notwithstanding any other provision of this Section, a comprehensive tobacco use cessation program that includes purchasing prescription drugs or prescription medical devices approved by the Food and Drug Administration shall be covered under the medical assistance program under this Article for persons who are otherwise eligible for assistance under this Article.

Notwithstanding any other provision of this Code, reproductive health care that is otherwise legal in Illinois shall be covered under the medical assistance program for persons who are otherwise eligible for medical assistance under this Article.

Notwithstanding any other provision of this Section, all tobacco cessation medications approved by the United States Food and Drug Administration and all individual and group tobacco cessation counseling services and telephone-based counseling services and tobacco cessation medications provided through the Illinois Tobacco Quitline shall be covered under the medical assistance program for persons who are otherwise eligible for assistance under this Article. The Department shall comply with all federal requirements necessary to obtain federal financial participation, as specified in 42 CFR 433.15(b)(7), for telephone-based counseling services provided through the Illinois Tobacco Quitline, including, but not limited to: (i) entering into a memorandum of understanding or interagency agreement with the Department of Public Health, as administrator of the Illinois Tobacco Quitline; and (ii) developing a cost allocation plan for Medicaid-allowable Illinois Tobacco Quitline services in accordance with 45 CFR 95.507. The Department shall submit the memorandum of understanding or interagency agreement, the cost allocation plan, and all other necessary documentation to the Centers for Medicare and Medicaid Services for review and approval. Coverage under this paragraph shall be contingent upon federal approval.

Notwithstanding any other provision of this Code, the Illinois Department may not require, as a condition of payment for any laboratory test authorized under this Article, that a physician's handwritten signature appear on the laboratory test order form. The Illinois Department may, however, impose other appropriate requirements regarding laboratory test order documentation.

Upon receipt of federal approval of an amendment to the Illinois Title XIX State Plan for this purpose, the Department shall authorize the Chicago Public Schools (CPS) to procure a vendor or vendors to manufacture eyeglasses for individuals enrolled in a school within the CPS system. CPS shall ensure that its vendor or vendors are enrolled as providers in the medical assistance program and in any capitated Medicaid managed care entity (MCE) serving individuals enrolled in a school within the CPS system. Under any contract procured under this provision, the vendor or vendors must serve only individuals enrolled in a school within the CPS system. Claims for services provided by CPS's vendor or vendors to recipients of benefits in the medical assistance program under this Code, the Children's Health Insurance Program, or the Covering ALL KIDS Health Insurance Program shall be submitted to the Department or the MCE in which

the individual is enrolled for payment and shall be reimbursed at the Department's or the MCE's established rates or rate methodologies for eyeglasses.

On and after July 1, 2012, the Department of Healthcare and Family Services may provide the following services to persons eligible for assistance under this Article who are participating in education, training or employment programs operated by the Department of Human Services as successor to the Department of Public Aid:

(1) dental services provided by or under the supervision of a dentist; and

(2) eyeglasses prescribed by a physician skilled in the diseases of the eye, or by an optometrist, whichever the person may select.

On and after July 1, 2018, the Department of Healthcare and Family Services shall provide dental services to any adult who is otherwise eligible for assistance under the medical assistance program. As used in this paragraph, "dental services" means diagnostic, preventative, restorative, or corrective procedures, including procedures and services for the prevention and treatment of periodontal disease and dental caries disease, provided by an individual who is licensed to practice dentistry or dental surgery or who is under the supervision of a dentist in the practice of his or her profession.

On and after July 1, 2018, targeted dental services, as set forth in Exhibit D of the Consent Decree entered by the United States District Court for the Northern District of Illinois, Eastern Division, in the matter of Memisovski v. Maram, Case No. 92 C 1982, that are provided to adults under the medical assistance program shall be established at no less than the rates set forth in the "New Rate" column in Exhibit D of the Consent Decree for targeted dental services that are provided to persons under the age of 18 under the medical assistance program.

Notwithstanding any other provision of this Code and subject to federal approval, the Department may adopt rules to allow a dentist who is volunteering his or her service at no cost to render dental services through an enrolled not-for-profit health clinic without the dentist personally enrolling as a participating provider in the medical assistance program. A not-for-profit health clinic shall include a public health clinic or Federally Qualified Health Center or other enrolled provider, as determined by the Department, through which dental services covered under this Section are performed. The Department shall establish a process for payment of claims for reimbursement for covered dental services rendered under this provision.

On and after January 1, 2022, the Department of Healthcare and Family Services shall administer and regulate a school-based dental program that allows for the out-of-office delivery of preventative dental services in a school setting to children under 19 years of age. The Department shall establish, by rule, guidelines for participation by providers and set requirements for follow-up referral care based on the requirements established in the Dental Office Reference Manual published by the Department that establishes the requirements for dentists participating in the All Kids Dental School Program. Every effort shall be made by the Department when developing the program requirements to consider the different geographic differences of both urban and rural areas of the State for initial treatment and necessary follow-up care. No provider shall be charged a fee by any unit of local government to participate in the school-based dental program administered by the Department. Nothing in this paragraph shall be construed to limit or preempt a home rule unit's or school district's authority to establish, change, or administer a school-based dental program in addition to, or independent of, the school-based dental program administered by the Department.

The Illinois Department, by rule, may distinguish and classify the medical services to be provided only in accordance with the classes of persons designated in Section 5-2.

The Department of Healthcare and Family Services must provide coverage and reimbursement for amino acid-based elemental formulas, regardless of delivery method, for the diagnosis and treatment of (i) eosinophilic disorders and (ii) short bowel syndrome when the prescribing physician has issued a written order stating that the amino acid-based elemental formula is medically necessary.

The Illinois Department shall authorize the provision of, and shall authorize payment for, screening by low-dose mammography for the presence of occult breast cancer for individuals 35 years of age or older who are eligible for medical assistance under this Article, as follows:

(A) A baseline mammogram for individuals 35 to 39 years of age.

(B) An annual mammogram for individuals 40 years of age or older.

(C) A mammogram at the age and intervals considered medically necessary by the individual's health care provider for individuals under 40 years of age and having a family history of breast cancer, prior personal history of breast cancer, positive genetic testing, or other risk factors.

(D) A comprehensive ultrasound screening and MRI of an entire breast or breasts if a mammogram demonstrates heterogeneous or dense breast tissue or when medically necessary as determined by a physician licensed to practice medicine in all of its branches.

(E) A screening MRI when medically necessary, as determined by a physician licensed to practice medicine in all of its branches.

(F) A diagnostic mammogram when medically necessary, as determined by a physician licensed to practice medicine in all its branches, advanced practice registered nurse, or physician assistant.

The Department shall not impose a deductible, coinsurance, copayment, or any other cost-sharing requirement on the coverage provided under this paragraph; except that this sentence does not apply to coverage of diagnostic mammograms to the extent such coverage would disqualify a high-deductible health plan from eligibility for a health savings account pursuant to Section 223 of the Internal Revenue Code (26 U.S.C. 223).

All screenings shall include a physical breast exam, instruction on self-examination and information regarding the frequency of self-examination and its value as a preventative tool.

For purposes of this Section:

"Diagnostic mammogram" means a mammogram obtained using diagnostic mammography.

"Diagnostic mammography" means a method of screening that is designed to evaluate an abnormality in a breast, including an abnormality seen or suspected on a screening mammogram or a subjective or objective abnormality otherwise detected in the breast.

"Low-dose mammography" means the x-ray examination of the breast using equipment dedicated specifically for mammography, including the x-ray tube, filter, compression device, and image receptor, with an average radiation exposure delivery of less than one rad per breast for 2 views of an average size breast. The term also includes digital mammography and includes breast tomosynthesis.

"Breast tomosynthesis" means a radiologic procedure that involves the acquisition of projection images over the stationary breast to produce cross-sectional digital three-dimensional images of the breast.

If, at any time, the Secretary of the United States Department of Health and Human Services, or its successor agency, promulgates rules or regulations to be published in the Federal Register or publishes a comment in the Federal Register or issues an opinion, guidance, or other action that would require the State, pursuant to any provision of the Patient Protection and Affordable Care Act (Public Law 111-148), including, but not limited to, 42 U.S.C. 18031(d)(3)(B) or any successor provision, to defray the cost of any coverage for breast tomosynthesis outlined in this paragraph, then the requirement that an insurer cover breast tomosynthesis is inoperative other than any such coverage authorized under Section 1902 of the Social Security Act, 42 U.S.C. 1396a, and the State shall not assume any obligation for the cost of coverage for breast tomosynthesis set forth in this paragraph.

On and after January 1, 2016, the Department shall ensure that all networks of care for adult clients of the Department include access to at least one breast imaging Center of Imaging Excellence as certified by the American College of Radiology.

On and after January 1, 2012, providers participating in a quality improvement program approved by the Department shall be reimbursed for screening and diagnostic mammography at the same rate as the Medicare program's rates, including the increased reimbursement for digital mammography and, after January 1, 2023 (the effective date of Public Act 102-1018), breast tomosynthesis.

The Department shall convene an expert panel including representatives of hospitals, free-standing mammography facilities, and doctors, including radiologists, to establish quality standards for mammography.

On and after January 1, 2017, providers participating in a breast cancer treatment quality improvement program approved by the Department shall be reimbursed for breast cancer treatment at a rate that is no lower than 95% of the Medicare program's rates for the data elements included in the breast cancer treatment quality program.

The Department shall convene an expert panel, including representatives of hospitals, free-standing breast cancer treatment centers, breast cancer quality organizations, and doctors, including breast surgeons, reconstructive breast surgeons, oncologists, and primary care providers to establish quality standards for breast cancer treatment.

Subject to federal approval, the Department shall establish a rate methodology for mammography at federally qualified health centers and other encounter-rate clinics. These clinics or centers may also collaborate with other hospital-based mammography facilities. By January 1, 2016, the Department shall report to the General Assembly on the status of the provision set forth in this paragraph.

The Department shall establish a methodology to remind individuals who are age-appropriate for screening mammography, but who have not received a mammogram within the previous 18 months, of the importance and benefit of screening mammography. The Department shall work with experts in breast cancer outreach and patient navigation to optimize these reminders and shall establish a methodology for evaluating their effectiveness and modifying the methodology based on the evaluation.

The Department shall establish a performance goal for primary care providers with respect to their female patients over age 40 receiving an annual mammogram. This performance goal shall be used to provide additional reimbursement in the form of a quality performance bonus to primary care providers who meet that goal.

The Department shall devise a means of case-managing or patient navigation for beneficiaries diagnosed with breast cancer. This program shall initially operate as a pilot program in areas of the State with the highest incidence of mortality related to breast cancer. At least one pilot program site shall be in the metropolitan Chicago area and at least one site shall be outside the metropolitan Chicago area. On or after July 1, 2016, the pilot program shall be expanded to include one site in western Illinois, one site in southern Illinois, one site in central Illinois, and 4 sites within metropolitan Chicago. An evaluation of the pilot program shall be carried out measuring health outcomes and cost of care for those served by the pilot program compared to similarly situated patients who are not served by the pilot program.

The Department shall require all networks of care to develop a means either internally or by contract with experts in navigation and community outreach to navigate cancer patients to comprehensive care in a timely fashion. The Department shall require all networks of care to include access for patients diagnosed with cancer to at least one academic commission on cancer-accredited cancer program as an in-network covered benefit.

The Department shall provide coverage and reimbursement for a human papillomavirus (HPV) vaccine that is approved for marketing by the federal Food and Drug Administration for all persons between the ages of 9 and 45. Subject to federal approval, the Department shall provide coverage and reimbursement for a human papillomavirus (HPV) vaccine for persons of the age of 46 and above who have been diagnosed with cervical dysplasia with a high risk of recurrence or progression. The Department shall disallow any preauthorization requirements for the administration of the human papillomavirus (HPV) vaccine.

On or after July 1, 2022, individuals who are otherwise eligible for medical assistance under this Article shall receive coverage for perinatal depression screenings for the 12-month period beginning on the last day of their pregnancy. Medical assistance coverage under this paragraph shall be conditioned on the use of a screening instrument approved by the Department.

Any medical or health care provider shall immediately recommend, to any pregnant individual who is being provided prenatal services and is suspected of having a substance use disorder as defined in the Substance Use Disorder Act, referral to a local substance use disorder treatment program licensed by the Department of Human Services or to a licensed hospital which provides substance abuse treatment services. The Department of Healthcare and Family Services shall assure coverage for the cost of treatment of the drug abuse or addiction for pregnant recipients in accordance with the Illinois Medicaid Program in conjunction with the Department of Human Services.

All medical providers providing medical assistance to pregnant individuals under this Code shall receive information from the Department on the availability of services under any program providing case management services for addicted individuals, including information on appropriate referrals for other social services that may be needed by addicted individuals in addition to treatment for addiction.

The Illinois Department, in cooperation with the Departments of Human Services (as successor to the Department of Alcoholism and Substance Abuse) and Public Health, through a public awareness campaign, may provide information concerning treatment for alcoholism and drug abuse and addiction, prenatal health care, and other pertinent programs directed at reducing the number of drug-affected infants born to recipients of medical assistance.

Neither the Department of Healthcare and Family Services nor the Department of Human Services shall sanction the recipient solely on the basis of the recipient's substance abuse.

The Illinois Department shall establish such regulations governing the dispensing of health services under this Article as it shall deem appropriate. The Department should seek the advice of formal professional advisory committees appointed by the Director of the Illinois Department for the purpose of providing regular advice on policy and administrative matters, information dissemination and educational activities for medical and health care providers, and consistency in procedures to the Illinois Department.

The Illinois Department may develop and contract with Partnerships of medical providers to arrange medical services for persons eligible under Section 5-2 of this Code. Implementation of this Section may be by demonstration projects in certain geographic areas. The Partnership shall be represented by a sponsor organization. The Department, by rule, shall develop qualifications for sponsors of Partnerships. Nothing in this Section shall be construed to require that the sponsor organization be a medical organization.

The sponsor must negotiate formal written contracts with medical providers for physician services, inpatient and outpatient hospital care, home health services, treatment for alcoholism and substance abuse, and other services determined necessary by the Illinois Department by rule for delivery by Partnerships. Physician services must include prenatal and obstetrical care. The Illinois Department shall reimburse medical services delivered by Partnership providers to clients in target areas according to provisions of this Article and the Illinois Health Finance Reform Act, except that:

(1) Physicians participating in a Partnership and providing certain services, which shall be determined by the Illinois Department, to persons in areas covered by the Partnership may receive an additional surcharge for such services.

(2) The Department may elect to consider and negotiate financial incentives to encourage the development of Partnerships and the efficient delivery of medical care.

(3) Persons receiving medical services through Partnerships may receive medical and case management services above the level usually offered through the medical assistance program.

Medical providers shall be required to meet certain qualifications to participate in Partnerships to ensure the delivery of high quality medical services. These qualifications shall be determined by rule of the Illinois Department and may be higher than qualifications for participation in the medical assistance program. Partnership sponsors may prescribe reasonable additional qualifications for participation by medical providers, only with the prior written approval of the Illinois Department.

Nothing in this Section shall limit the free choice of practitioners, hospitals, and other providers of medical services by clients. In order to ensure patient freedom of choice, the Illinois Department shall immediately promulgate all rules and take all other necessary actions so that provided services may be accessed from therapeutically certified optometrists to the full extent of the Illinois Optometric Practice Act of 1987 without discriminating between service providers.

The Department shall apply for a waiver from the United States Health Care Financing Administration to allow for the implementation of Partnerships under this Section.

The Illinois Department shall require health care providers to maintain records that document the medical care and services provided to recipients of Medical Assistance under this Article. Such records must be retained for a period of not less than 6 years from the date of service or as provided by applicable State law, whichever period is longer, except that if an audit is initiated within the required retention period then the records must be retained until the audit is completed and every exception is resolved. The Illinois Department shall require health care providers to make available, when authorized by the patient, in writing, the medical records in a timely fashion to other health care providers who are treating or serving persons eligible for Medical Assistance under this Article. All dispensers of medical services shall be required to maintain and retain business and professional records sufficient to fully and accurately document the nature, scope, details and receipt of the health care provided to persons eligible for medical assistance under this Code, in accordance with regulations promulgated by the Illinois Department. The rules and regulations shall require that proof of the receipt of prescription drugs, dentures, prosthetic devices and eyeglasses by eligible persons under this Section accompany each claim for reimbursement submitted by the dispenser of such medical services. No such claims for reimbursement shall be approved for payment by the Illinois Department without such proof of receipt, unless the Illinois Department shall have put into effect and shall be operating a system of post-payment audit and review which shall, on a sampling basis, be deemed adequate by the Illinois Department to assure that such drugs, dentures, prosthetic devices and eyeglasses for which payment is being made are actually being received by eligible recipients. Within 90 days after September 16, 1984 (the effective date of Public Act 83-1439), the Illinois Department shall establish a current list of acquisition costs for all prosthetic devices and any other items recognized as medical equipment and supplies reimbursable under this Article and shall update such list on a quarterly basis, except that the acquisition costs of all prescription drugs shall be updated no less frequently than every 30 days as required by Section 5-5.12.

Notwithstanding any other law to the contrary, the Illinois Department shall, within 365 days after July 22, 2013 (the effective date of Public Act 98-104), establish procedures to permit skilled care facilities licensed under the Nursing Home Care Act to submit monthly billing claims for reimbursement purposes.

Following development of these procedures, the Department shall, by July 1, 2016, test the viability of the new system and implement any necessary operational or structural changes to its information technology platforms in order to allow for the direct acceptance and payment of nursing home claims.

Notwithstanding any other law to the contrary, the Illinois Department shall, within 365 days after August 15, 2014 (the effective date of Public Act 98-963), establish procedures to permit ID/DD facilities licensed under the ID/DD Community Care Act and MC/DD facilities licensed under the MC/DD Act to submit monthly billing claims for reimbursement purposes. Following development of these procedures, the Department shall have an additional 365 days to test the viability of the new system and to ensure that any necessary operational or structural changes to its information technology platforms are implemented.

The Illinois Department shall require all dispensers of medical services, other than an individual practitioner or group of practitioners, desiring to participate in the Medical Assistance program established under this Article to disclose all financial, beneficial, ownership, equity, surety or other interests in any and all firms, corporations, partnerships, associations, business enterprises, joint ventures, agencies, institutions or other legal entities providing any form of health care services in this State under this Article.

The Illinois Department may require that all dispensers of medical services desiring to participate in the medical assistance program established under this Article disclose, under such terms and conditions as the Illinois Department may by rule establish, all inquiries from clients and attorneys regarding medical bills paid by the Illinois Department, which inquiries could indicate potential existence of claims or liens for the Illinois Department.

Enrollment of a vendor shall be subject to a provisional period and shall be conditional for one year. During the period of conditional enrollment, the Department may terminate the vendor's eligibility to participate in, or may disenroll the vendor from, the medical assistance program without cause. Unless otherwise specified, such termination of eligibility or disenrollment is not subject to the Department's hearing process. However, a disenrolled vendor may reapply without penalty.

The Department has the discretion to limit the conditional enrollment period for vendors based upon the category of risk of the vendor.

Prior to enrollment and during the conditional enrollment period in the medical assistance program, all vendors shall be subject to enhanced oversight, screening, and review based on the risk of fraud, waste, and abuse that is posed by the category of risk of the vendor. The Illinois Department shall establish the procedures for oversight, screening, and review, which may include, but need not be limited to: criminal and financial background checks; fingerprinting; license, certification, and authorization verifications; unscheduled or unannounced site visits; database checks; prepayment audit reviews; audits; payment caps; payment suspensions; and other screening as required by federal or State law.

The Department shall define or specify the following: (i) by provider notice, the "category of risk of the vendor" for each type of vendor, which shall take into account the level of screening applicable to a particular category of vendor under federal law and regulations; (ii) by rule or provider notice, the maximum length of the conditional enrollment period for each category of risk of the vendor; and (iii) by rule, the hearing rights, if any, afforded to a vendor in each category of risk of the vendor that is terminated or disenrolled during the conditional enrollment period.

To be eligible for payment consideration, a vendor's payment claim or bill, either as an initial claim or as a resubmitted claim following prior rejection, must be received by the Illinois Department, or its fiscal intermediary, no later than 180 days after the latest date on the claim on which medical goods or services were provided, with the following exceptions:

(1) In the case of a provider whose enrollment is in process by the Illinois Department, the 180-day period shall not begin until the date on the written notice from the Illinois Department that the provider enrollment is complete.

(2) In the case of errors attributable to the Illinois Department or any of its claims processing intermediaries which result in an inability to receive, process, or adjudicate a claim, the 180-day period shall not begin until the provider has been notified of the error.

(3) In the case of a provider for whom the Illinois Department initiates the monthly billing process.

(4) In the case of a provider operated by a unit of local government with a population exceeding 3,000,000 when local government funds finance federal participation for claims payments.

For claims for services rendered during a period for which a recipient received retroactive eligibility, claims must be filed within 180 days after the Department determines the applicant is eligible. For claims

for which the Illinois Department is not the primary payer, claims must be submitted to the Illinois Department within 180 days after the final adjudication by the primary payer.

In the case of long term care facilities, within 120 calendar days of receipt by the facility of required prescreening information, new admissions with associated admission documents shall be submitted through the Medical Electronic Data Interchange (MEDI) or the Recipient Eligibility Verification (REV) System or shall be submitted directly to the Department of Human Services using required admission forms. Effective September 1, 2014, admission documents, including all prescreening information, must be submitted through MEDI or REV. Confirmation numbers assigned to an accepted transaction shall be retained by a facility to verify timely submittal. Once an admission transaction has been completed, all resubmitted claims following prior rejection are subject to receipt no later than 180 days after the admission transaction has been completed.

Claims that are not submitted and received in compliance with the foregoing requirements shall not be eligible for payment under the medical assistance program, and the State shall have no liability for payment of those claims.

To the extent consistent with applicable information and privacy, security, and disclosure laws, State and federal agencies and departments shall provide the Illinois Department access to confidential and other information and data necessary to perform eligibility and payment verifications and other Illinois Department functions. This includes, but is not limited to: information pertaining to licensure; certification; earnings; immigration status; citizenship; wage reporting; unearned and earned income; pension income; employment; supplemental security income; social security numbers; National Provider Identifier (NPI) numbers; the National Practitioner Data Bank (NPDB); program and agency exclusions; taxpayer identification numbers; tax delinquency; corporate information; and death records.

The Illinois Department shall enter into agreements with State agencies and departments, and is authorized to enter into agreements with federal agencies and departments, under which such agencies and departments shall share data necessary for medical assistance program integrity functions and oversight. The Illinois Department shall develop, in cooperation with other State departments and agencies, and in compliance with applicable federal laws and regulations, appropriate and effective methods to share such data. At a minimum, and to the extent necessary to provide data sharing, the Illinois Department shall enter into agreements with State agencies and departments, and is authorized to enter into agreements with federal agencies and departments, including, but not limited to: the Secretary of State; the Department of Revenue; the Department of Public Health; the Department of Human Services; and the Department of Financial and Professional Regulation.

Beginning in fiscal year 2013, the Illinois Department shall set forth a request for information to identify the benefits of a pre-payment, post-adjudication, and post-edit claims system with the goals of streamlining claims processing and provider reimbursement, reducing the number of pending or rejected claims, and helping to ensure a more transparent adjudication process through the utilization of: (i) provider data verification and provider screening technology; and (ii) clinical code editing; and (iii) pre-pay, pre-adjudicated, or post-adjudicated predictive modeling with an integrated case management system with link analysis. Such a request for information shall not be considered as a request for proposal or as an obligation on the part of the Illinois Department to take any action or acquire any products or services.

The Illinois Department shall establish policies, procedures, standards and criteria by rule for the acquisition, repair and replacement of orthotic and prosthetic devices and durable medical equipment. Such rules shall provide, but not be limited to, the following services: (1) immediate repair or replacement of such devices by recipients; and (2) rental, lease, purchase or lease-purchase of durable medical equipment in a cost-effective manner, taking into consideration the recipient's medical prognosis, the extent of the recipient's needs, and the requirements and costs for maintaining such equipment. Subject to prior approval, such rules shall enable a recipient to temporarily acquire and use alternative or substitute devices or equipment pending repairs or replacements of any device or equipment previously authorized for such recipient by the Department. Notwithstanding any provision of Section 5-5f to the contrary, the Department may, by rule, exempt certain replacement wheelchair parts from prior approval and, for wheelchairs, wheelchair parts, wheelchair accessories, and related seating and positioning items, determine the wholesale price by methods other than actual acquisition costs.

The Department shall require, by rule, all providers of durable medical equipment to be accredited by an accreditation organization approved by the federal Centers for Medicare and Medicaid Services and recognized by the Department in order to bill the Department for providing durable medical equipment to

recipients. No later than 15 months after the effective date of the rule adopted pursuant to this paragraph, all providers must meet the accreditation requirement.

In order to promote environmental responsibility, meet the needs of recipients and enrollees, and achieve significant cost savings, the Department, or a managed care organization under contract with the Department, may provide recipients or managed care enrollees who have a prescription or Certificate of Medical Necessity access to refurbished durable medical equipment under this Section (excluding prosthetic and orthotic devices as defined in the Orthotics, Prosthetics, and Pedorthics Practice Act and complex rehabilitation technology products and associated services) through the State's assistive technology program's reutilization program, using staff with the Assistive Technology Professional (ATP) Certification if the refurbished durable medical equipment: (i) is available; (ii) is less expensive, including shipping costs, than new durable medical equipment of the same type; (iii) is able to withstand at least 3 years of use; (iv) is cleaned, disinfected, sterilized, and safe in accordance with federal Food and Drug Administration regulations and guidance governing the reprocessing of medical devices in health care settings; and (v) equally meets the needs of the recipient or enrollee. The reutilization program shall confirm that the recipient or enrollee is not already in receipt of the same or similar equipment from another service provider, and that the refurbished durable medical equipment equally meets the needs of the recipient or enrollee. Nothing in this paragraph shall be construed to limit recipient or enrollee choice to obtain new durable medical equipment or place any additional prior authorization conditions on enrollees of managed care organizations.

The Department shall execute, relative to the nursing home prescreening project, written inter-agency agreements with the Department of Human Services and the Department on Aging, to effect the following: (i) intake procedures and common eligibility criteria for those persons who are receiving non-institutional services; and (ii) the establishment and development of non-institutional services in areas of the State where they are not currently available or are undeveloped; and (iii) notwithstanding any other provision of law, subject to federal approval, on and after July 1, 2012, an increase in the determination of need (DON) scores from 29 to 37 for applicants for institutional and home and community-based long term care; if and only if federal approval is not granted, the Department may, in conjunction with other affected agencies, implement utilization controls or changes in benefit packages to effectuate a similar savings amount for this population; and (iv) no later than July 1, 2013, minimum level of care eligibility criteria for institutional and home and community-based long term care; and (v) no later than October 1, 2013, establish procedures to permit long term care providers access to eligibility scores for individuals with an admission date who are seeking or receiving services from the long term care provider. In order to select the minimum level of care eligibility criteria, the Governor shall establish a workgroup that includes affected agency representatives and stakeholders representing the institutional and home and community-based long term care interests. This Section shall not restrict the Department from implementing lower level of care eligibility criteria for community-based services in circumstances where federal approval has been granted.

The Illinois Department shall develop and operate, in cooperation with other State Departments and agencies and in compliance with applicable federal laws and regulations, appropriate and effective systems of health care evaluation and programs for monitoring of utilization of health care services and facilities, as it affects persons eligible for medical assistance under this Code.

The Illinois Department shall report annually to the General Assembly, no later than the second Friday in April of 1979 and each year thereafter, in regard to:

(a) actual statistics and trends in utilization of medical services by public aid recipients;

(b) actual statistics and trends in the provision of the various medical services by medical vendors;

(c) current rate structures and proposed changes in those rate structures for the various medical vendors; and

(d) efforts at utilization review and control by the Illinois Department.

The period covered by each report shall be the 3 years ending on the June 30 prior to the report. The report shall include suggested legislation for consideration by the General Assembly. The requirement for reporting to the General Assembly shall be satisfied by filing copies of the report as required by Section 3.1 of the General Assembly Organization Act, and filing such additional copies with the State Government Report Distribution Center for the General Assembly as is required under paragraph (t) of Section 7 of the State Library Act.

Rulemaking authority to implement Public Act 95-1045, if any, is conditioned on the rules being adopted in accordance with all provisions of the Illinois Administrative Procedure Act and all rules and

procedures of the Joint Committee on Administrative Rules; any purported rule not so adopted, for whatever reason, is unauthorized.

On and after July 1, 2012, the Department shall reduce any rate of reimbursement for services or other payments or alter any methodologies authorized by this Code to reduce any rate of reimbursement for services or other payments in accordance with Section 5-5e.

Because kidney transplantation can be an appropriate, cost-effective alternative to renal dialysis when medically necessary and notwithstanding the provisions of Section 1-11 of this Code, beginning October 1, 2014, the Department shall cover kidney transplantation for noncitizens with end-stage renal disease who are not eligible for comprehensive medical benefits, who meet the residency requirements of Section 5-3 of this Code, and who would otherwise meet the financial requirements of the appropriate class of eligible persons under Section 5-2 of this Code. To qualify for coverage of kidney transplantation, such person must be receiving emergency renal dialysis services covered by the Department. Providers under this Section shall be prior approved and certified by the Department to perform kidney transplantation and the services under this Section shall be limited to services associated with kidney transplantation.

Notwithstanding any other provision of this Code to the contrary, on or after July 1, 2015, all FDA approved forms of medication assisted treatment prescribed for the treatment of alcohol dependence or treatment of opioid dependence shall be covered under both fee-for-service ~~fee for service~~ and managed care medical assistance programs for persons who are otherwise eligible for medical assistance under this Article and shall not be subject to any (1) utilization control, other than those established under the American Society of Addiction Medicine patient placement criteria, (2) prior authorization mandate, or (3) lifetime restriction limit mandate.

On or after July 1, 2015, opioid antagonists prescribed for the treatment of an opioid overdose, including the medication product, administration devices, and any pharmacy fees or hospital fees related to the dispensing, distribution, and administration of the opioid antagonist, shall be covered under the medical assistance program for persons who are otherwise eligible for medical assistance under this Article. As used in this Section, "opioid antagonist" means a drug that binds to opioid receptors and blocks or inhibits the effect of opioids acting on those receptors, including, but not limited to, naloxone hydrochloride or any other similarly acting drug approved by the U.S. Food and Drug Administration. The Department shall not impose a copayment on the coverage provided for naloxone hydrochloride under the medical assistance program.

Upon federal approval, the Department shall provide coverage and reimbursement for all drugs that are approved for marketing by the federal Food and Drug Administration and that are recommended by the federal Public Health Service or the United States Centers for Disease Control and Prevention for pre-exposure prophylaxis and related pre-exposure prophylaxis services, including, but not limited to, HIV and sexually transmitted infection screening, treatment for sexually transmitted infections, medical monitoring, assorted labs, and counseling to reduce the likelihood of HIV infection among individuals who are not infected with HIV but who are at high risk of HIV infection.

A federally qualified health center, as defined in Section 1905(l)(2)(B) of the federal Social Security Act, shall be reimbursed by the Department in accordance with the federally qualified health center's encounter rate for services provided to medical assistance recipients that are performed by a dental hygienist, as defined under the Illinois Dental Practice Act, working under the general supervision of a dentist and employed by a federally qualified health center.

Within 90 days after October 8, 2021 (the effective date of Public Act 102-665), the Department shall seek federal approval of a State Plan amendment to expand coverage for family planning services that includes presumptive eligibility to individuals whose income is at or below 208% of the federal poverty level. Coverage under this Section shall be effective beginning no later than December 1, 2022.

Subject to approval by the federal Centers for Medicare and Medicaid Services of a Title XIX State Plan amendment electing the Program of All-Inclusive Care for the Elderly (PACE) as a State Medicaid option, as provided for by Subtitle I (commencing with Section 4801) of Title IV of the Balanced Budget Act of 1997 (Public Law 105-33) and Part 460 (commencing with Section 460.2) of Subchapter E of Title 42 of the Code of Federal Regulations, PACE program services shall become a covered benefit of the medical assistance program, subject to criteria established in accordance with all applicable laws.

Notwithstanding any other provision of this Code, community-based pediatric palliative care from a trained interdisciplinary team shall be covered under the medical assistance program as provided in Section 15 of the Pediatric Palliative Care Act.

Notwithstanding any other provision of this Code, within 12 months after June 2, 2022 (the effective date of Public Act 102-1037) and subject to federal approval, acupuncture services performed by an acupuncturist licensed under the Acupuncture Practice Act who is acting within the scope of his or her license shall be covered under the medical assistance program. The Department shall apply for any federal waiver or State Plan amendment, if required, to implement this paragraph. The Department may adopt any rules, including standards and criteria, necessary to implement this paragraph.

Notwithstanding any other provision of this Code, the medical assistance program shall, subject to ~~appropriation and~~ federal approval, reimburse hospitals for costs associated with a newborn screening test for the presence of metachromatic leukodystrophy, as required under the Newborn Metabolic Screening Act, at a rate not less than the fee charged by the Department of Public Health. Notwithstanding any other provision of this Code, the medical assistance program shall, subject to federal approval, also reimburse hospitals for costs associated with all newborn screening tests added on and after the effective date of this amendatory Act of the 103rd General Assembly to the Newborn Metabolic Screening Act and required to be performed under that Act at a rate not less than the fee charged by the Department of Public Health. The Department shall seek federal approval before the implementation of the newborn screening test fees by the Department of Public Health.

Notwithstanding any other provision of this Code, beginning on January 1, 2024, subject to federal approval, cognitive assessment and care planning services provided to a person who experiences signs or symptoms of cognitive impairment, as defined by the Diagnostic and Statistical Manual of Mental Disorders, Fifth Edition, shall be covered under the medical assistance program for persons who are otherwise eligible for medical assistance under this Article.

Notwithstanding any other provision of this Code, medically necessary reconstructive services that are intended to restore physical appearance shall be covered under the medical assistance program for persons who are otherwise eligible for medical assistance under this Article. As used in this paragraph, "reconstructive services" means treatments performed on structures of the body damaged by trauma to restore physical appearance.

(Source: P.A. 102-43, Article 30, Section 30-5, eff. 7-6-21; 102-43, Article 35, Section 35-5, eff. 7-6-21; 102-43, Article 55, Section 55-5, eff. 7-6-21; 102-95, eff. 1-1-22; 102-123, eff. 1-1-22; 102-558, eff. 8-20-21; 102-598, eff. 1-1-22; 102-655, eff. 1-1-22; 102-665, eff. 10-8-21; 102-813, eff. 5-13-22; 102-1018, eff. 1-1-23; 102-1037, eff. 6-2-22; 102-1038, eff. 1-1-23; 103-102, Article 15, Section 15-5, eff. 1-1-24; 103-102, Article 95, Section 95-15, eff. 1-1-24; 103-123, eff. 1-1-24; 103-154, eff. 6-30-23; 103-368, eff. 1-1-24; revised 12-15-23.)".

There being no further amendments, the foregoing Amendment No. 1 was ordered engrossed, and the bill, as amended, was ordered to a third reading.

On motion of Senator Morrison, **Senate Bill No. 2662** having been printed, was taken up, read by title a second time and ordered to a third reading.

On motion of Senator S. Turner, **Senate Bill No. 2667** having been printed, was taken up, read by title a second time.

The following amendment was offered in the Committee on Transportation, adopted and ordered printed:

AMENDMENT NO. 1 TO SENATE BILL 2667

AMENDMENT NO. 1 . Amend Senate Bill 2667 by replacing everything after the enacting clause with the following:

"Section 5. The State Finance Act is amended by adding Section 5.1015 as follows:
(30 ILCS 105/5.1015 new)
Sec. 5.1015. The Illinois USTA/Midwest Tennis Foundation Youth Tennis Fund.

Section 10. The Illinois Vehicle Code is amended by changing Section 3-699.14 as follows:
(625 ILCS 5/3-699.14)
Sec. 3-699.14. Universal special license plates.

(a) In addition to any other special license plate, the Secretary, upon receipt of all applicable fees and applications made in the form prescribed by the Secretary, may issue Universal special license plates to residents of Illinois on behalf of organizations that have been authorized by the General Assembly to issue decals for Universal special license plates. Appropriate documentation, as determined by the Secretary, shall accompany each application. Authorized organizations shall be designated by amendment to this Section. When applying for a Universal special license plate the applicant shall inform the Secretary of the name of the authorized organization from which the applicant will obtain a decal to place on the plate. The Secretary shall make a record of that organization and that organization shall remain affiliated with that plate until the plate is surrendered, revoked, or otherwise cancelled. The authorized organization may charge a fee to offset the cost of producing and distributing the decal, but that fee shall be retained by the authorized organization and shall be separate and distinct from any registration fees charged by the Secretary. No decal, sticker, or other material may be affixed to a Universal special license plate other than a decal authorized by the General Assembly in this Section or a registration renewal sticker. The special plates issued under this Section shall be affixed only to passenger vehicles of the first division, including motorcycles and autocycles, or motor vehicles of the second division weighing not more than 8,000 pounds. Plates issued under this Section shall expire according to the multi-year procedure under Section 3-414.1 of this Code.

(b) The design, color, and format of the Universal special license plate shall be wholly within the discretion of the Secretary. Universal special license plates are not required to designate "Land of Lincoln", as prescribed in subsection (b) of Section 3-412 of this Code. The design shall allow for the application of a decal to the plate. Organizations authorized by the General Assembly to issue decals for Universal special license plates shall comply with rules adopted by the Secretary governing the requirements for and approval of Universal special license plate decals. The Secretary may, in his or her discretion, allow Universal special license plates to be issued as vanity or personalized plates in accordance with Section 3-405.1 of this Code. The Secretary of State must make a version of the special registration plates authorized under this Section in a form appropriate for motorcycles and autocycles.

(c) When authorizing a Universal special license plate, the General Assembly shall set forth whether an additional fee is to be charged for the plate and, if a fee is to be charged, the amount of the fee and how the fee is to be distributed. When necessary, the authorizing language shall create a special fund in the State treasury into which fees may be deposited for an authorized Universal special license plate. Additional fees may only be charged if the fee is to be paid over to a State agency or to a charitable entity that is in compliance with the registration and reporting requirements of the Charitable Trust Act and the Solicitation for Charity Act. Any charitable entity receiving fees for the sale of Universal special license plates shall annually provide the Secretary of State a letter of compliance issued by the Attorney General verifying that the entity is in compliance with the Charitable Trust Act and the Solicitation for Charity Act.

(d) Upon original issuance and for each registration renewal period, in addition to the appropriate registration fee, if applicable, the Secretary shall collect any additional fees, if required, for issuance of Universal special license plates. The fees shall be collected on behalf of the organization designated by the applicant when applying for the plate. All fees collected shall be transferred to the State agency on whose behalf the fees were collected, or paid into the special fund designated in the law authorizing the organization to issue decals for Universal special license plates. All money in the designated fund shall be distributed by the Secretary subject to appropriation by the General Assembly.

(e) The following organizations may issue decals for Universal special license plates with the original and renewal fees and fee distribution as follows:

(1) The Illinois Department of Natural Resources.

(A) Original issuance: $25; with $10 to the Roadside Monarch Habitat Fund and $15 to the Secretary of State Special License Plate Fund.

(B) Renewal: $25; with $23 to the Roadside Monarch Habitat Fund and $2 to the Secretary of State Special License Plate Fund.

(2) Illinois Veterans' Homes.

(A) Original issuance: $26, which shall be deposited into the Illinois Veterans' Homes Fund.

(B) Renewal: $26, which shall be deposited into the Illinois Veterans' Homes Fund.

(3) The Illinois Department of Human Services for volunteerism decals.

(A) Original issuance: $25, which shall be deposited into the Secretary of State Special License Plate Fund.

(B) Renewal: $25, which shall be deposited into the Secretary of State Special License Plate Fund.

(4) The Illinois Department of Public Health.

(A) Original issuance: $25; with $10 to the Prostate Cancer Awareness Fund and $15 to the Secretary of State Special License Plate Fund.

(B) Renewal: $25; with $23 to the Prostate Cancer Awareness Fund and $2 to the Secretary of State Special License Plate Fund.

(5) Horsemen's Council of Illinois.

(A) Original issuance: $25; with $10 to the Horsemen's Council of Illinois Fund and $15 to the Secretary of State Special License Plate Fund.

(B) Renewal: $25; with $23 to the Horsemen's Council of Illinois Fund and $2 to the Secretary of State Special License Plate Fund.

(6) K9s for Veterans, NFP.

(A) Original issuance: $25; with $10 to the Post-Traumatic Stress Disorder Awareness Fund and $15 to the Secretary of State Special License Plate Fund.

(B) Renewal: $25; with $23 to the Post-Traumatic Stress Disorder Awareness Fund and $2 to the Secretary of State Special License Plate Fund.

(7) The International Association of Machinists and Aerospace Workers.

(A) Original issuance: $35; with $20 to the Guide Dogs of America Fund and $15 to the Secretary of State Special License Plate Fund.

(B) Renewal: $25; with $23 going to the Guide Dogs of America Fund and $2 to the Secretary of State Special License Plate Fund.

(8) Local Lodge 701 of the International Association of Machinists and Aerospace Workers.

(A) Original issuance: $35; with $10 to the Guide Dogs of America Fund, $10 to the Mechanics Training Fund, and $15 to the Secretary of State Special License Plate Fund.

(B) Renewal: $30; with $13 to the Guide Dogs of America Fund, $15 to the Mechanics Training Fund, and $2 to the Secretary of State Special License Plate Fund.

(9) Illinois Department of Human Services.

(A) Original issuance: $25; with $10 to the Theresa Tracy Trot - Illinois CancerCare Foundation Fund and $15 to the Secretary of State Special License Plate Fund.

(B) Renewal: $25; with $23 to the Theresa Tracy Trot - Illinois CancerCare Foundation Fund and $2 to the Secretary of State Special License Plate Fund.

(10) The Illinois Department of Human Services for developmental disabilities awareness decals.

(A) Original issuance: $25; with $10 to the Developmental Disabilities Awareness Fund and $15 to the Secretary of State Special License Plate Fund.

(B) Renewal: $25; with $23 to the Developmental Disabilities Awareness Fund and $2 to the Secretary of State Special License Plate Fund.

(11) The Illinois Department of Human Services for pediatric cancer awareness decals.

(A) Original issuance: $25; with $10 to the Pediatric Cancer Awareness Fund and $15 to the Secretary of State Special License Plate Fund.

(B) Renewal: $25; with $23 to the Pediatric Cancer Awareness Fund and $2 to the Secretary of State Special License Plate Fund.

(12) The Department of Veterans' Affairs for Fold of Honor decals.

(A) Original issuance: $25; with $10 to the Folds of Honor Foundation Fund and $15 to the Secretary of State Special License Plate Fund.

(B) Renewal: $25; with $23 to the Folds of Honor Foundation Fund and $2 to the Secretary of State Special License Plate Fund.

(13) The Illinois chapters of the Experimental Aircraft Association for aviation enthusiast decals.

(A) Original issuance: $25; with $10 to the Experimental Aircraft Association Fund and $15 to the Secretary of State Special License Plate Fund.

(B) Renewal: $25; with $23 to the Experimental Aircraft Association Fund and $2 to the Secretary of State Special License Plate Fund.

(14) The Illinois Department of Human Services for Child Abuse Council of the Quad Cities decals.

(A) Original issuance: $25; with $10 to the Child Abuse Council of the Quad Cities Fund and $15 to the Secretary of State Special License Plate Fund.

(B) Renewal: $25; with $23 to the Child Abuse Council of the Quad Cities Fund and $2 to the Secretary of State Special License Plate Fund.

(15) The Illinois Department of Public Health for health care worker decals.

(A) Original issuance: $25; with $10 to the Illinois Health Care Workers Benefit Fund, and $15 to the Secretary of State Special License Plate Fund.

(B) Renewal: $25; with $23 to the Illinois Health Care Workers Benefit Fund and $2 to the Secretary of State Special License Plate Fund.

(16) The Department of Agriculture for Future Farmers of America decals.

(A) Original issuance: $25; with $10 to the Future Farmers of America Fund and $15 to the Secretary of State Special License Plate Fund.

(B) Renewal: $25; with $23 to the Future Farmers of America Fund and $2 to the Secretary of State Special License Plate Fund.

(17) The Illinois Department of Public Health for autism awareness decals that are designed with input from autism advocacy organizations.

(A) Original issuance: $25; with $10 to the Autism Awareness Fund and $15 to the Secretary of State Special License Plate Fund.

(B) Renewal: $25; with $23 to the Autism Awareness Fund and $2 to the Secretary of State Special License Plate Fund.

(18) ~~(17)~~ The Department of Natural Resources for Lyme disease research decals.

(A) Original issuance: $25; with $10 to the Tick Research, Education, and Evaluation Fund and $15 to the Secretary of State Special License Plate Fund.

(B) Renewal: $25; with $23 to the Tick Research, Education, and Evaluation Fund and $2 to the Secretary of State Special License Plate Fund.

(19) ~~(17)~~ The IBEW Thank a Line Worker decal.

(A) Original issuance: $15, which shall be deposited into the Secretary of State Special License Plate Fund.

(B) Renewal: $2, which shall be deposited into the Secretary of State Special License Plate Fund.

(20) The Illinois USTA/Midwest Tennis Foundation for Youth Tennis decal.

(A) Original issuance: $40; with $25 to the Illinois USTA/Midwest Tennis Foundation Youth Tennis Fund and $15 to the Secretary of State Special License Plate Fund.

(B) Renewal: $40; with $38 to the Illinois USTA/Midwest Tennis Foundation Youth Tennis Fund and $2 to the Secretary of State Special License Plate Fund.

(f) The following funds are created as special funds in the State treasury:

(1) The Roadside Monarch Habitat Fund. All money in the Roadside Monarch Habitat Fund shall be paid as grants to the Illinois Department of Natural Resources to fund roadside monarch and other pollinator habitat development, enhancement, and restoration projects in this State.

(2) The Prostate Cancer Awareness Fund. All money in the Prostate Cancer Awareness Fund shall be paid as grants to the Prostate Cancer Foundation of Chicago.

(3) The Horsemen's Council of Illinois Fund. All money in the Horsemen's Council of Illinois Fund shall be paid as grants to the Horsemen's Council of Illinois.

(4) The Post-Traumatic Stress Disorder Awareness Fund. All money in the Post-Traumatic Stress Disorder Awareness Fund shall be paid as grants to K9s for Veterans, NFP for support, education, and awareness of veterans with post-traumatic stress disorder.

(5) The Guide Dogs of America Fund. All money in the Guide Dogs of America Fund shall be paid as grants to the International Guiding Eyes, Inc., doing business as Guide Dogs of America.

(6) The Mechanics Training Fund. All money in the Mechanics Training Fund shall be paid as grants to the Mechanics Local 701 Training Fund.

(7) The Theresa Tracy Trot - Illinois CancerCare Foundation Fund. All money in the Theresa Tracy Trot - Illinois CancerCare Foundation Fund shall be paid to the Illinois CancerCare Foundation for the purpose of furthering pancreatic cancer research.

(8) The Developmental Disabilities Awareness Fund. All money in the Developmental Disabilities Awareness Fund shall be paid as grants to the Illinois Department of Human Services to fund legal aid groups to assist with guardianship fees for private citizens willing to become guardians

for individuals with developmental disabilities but who are unable to pay the legal fees associated with becoming a guardian.

(9) The Pediatric Cancer Awareness Fund. All money in the Pediatric Cancer Awareness Fund shall be paid as grants to the Cancer Center at Illinois for pediatric cancer treatment and research.

(10) The Folds of Honor Foundation Fund. All money in the Folds of Honor Foundation Fund shall be paid as grants to the Folds of Honor Foundation to aid in providing educational scholarships to military families.

(11) The Experimental Aircraft Association Fund. All money in the Experimental Aircraft Association Fund shall be paid, subject to appropriation by the General Assembly and distribution by the Secretary, as grants to promote recreational aviation.

(12) The Child Abuse Council of the Quad Cities Fund. All money in the Child Abuse Council of the Quad Cities Fund shall be paid as grants to benefit the Child Abuse Council of the Quad Cities.

(13) The Illinois Health Care Workers Benefit Fund. All money in the Illinois Health Care Workers Benefit Fund shall be paid as grants to the Trinity Health Foundation for the benefit of health care workers, doctors, nurses, and others who work in the health care industry in this State.

(14) The Future Farmers of America Fund. All money in the Future Farmers of America Fund shall be paid as grants to the Illinois Association of Future Farmers of America.

(15) The Tick Research, Education, and Evaluation Fund. All money in the Tick Research, Education, and Evaluation Fund shall be paid as grants to the Illinois Lyme Association.

(16) The Illinois USTA/Midwest Tennis Foundation Youth Tennis Fund. All money in the Illinois USTA/Midwest Tennis Foundation Youth Tennis Fund shall be paid as grants to the Illinois USTA/Midwest Tennis Foundation Youth Tennis to aid USTA/Midwest districts in the State with exposing youth to the game of tennis.

(Source: P.A. 102-383, eff. 1-1-22; 102-422, eff. 8-20-21; 102-423, eff. 8-20-21; 102-515, eff. 1-1-22; 102-558, eff. 8-20-21; 102-809, eff. 1-1-23; 102-813, eff. 5-13-22; 103-112, eff. 1-1-24; 103-163, eff. 1-1-24; 103-349, eff. 1-1-24; revised 12-15-23.)".

There being no further amendments, the foregoing Amendment No. 1 was ordered engrossed, and the bill, as amended, was ordered to a third reading.

On motion of Senator Stadelman, **Senate Bill No. 2683** having been printed, was taken up, read by title a second time and ordered to a third reading.

On motion of Senator Porfirio, **Senate Bill No. 2690** having been printed, was taken up, read by title a second time and ordered to a third reading.

On motion of Senator Morrison, **Senate Bill No. 2697** having been printed, was taken up, read by title a second time.

The following amendment was offered in the Committee on Insurance, adopted and ordered printed:

AMENDMENT NO. 1 TO SENATE BILL 2697

AMENDMENT NO. 1 . Amend Senate Bill 2697 by replacing everything after the enacting clause with the following:

"Section 5. The State Employees Group Insurance Act of 1971 is amended by changing Section 6.11 as follows:

(5 ILCS 375/6.11)

Sec. 6.11. Required health benefits; Illinois Insurance Code requirements. The program of health benefits shall provide the post-mastectomy care benefits required to be covered by a policy of accident and health insurance under Section 356t of the Illinois Insurance Code. The program of health benefits shall provide the coverage required under Sections 356g, 356g.5, 356g.5-1, 356m, 356q, 356u, 356u.10, 356w, 356x, 356z.2, 356z.4, 356z.4a, 356z.6, 356z.8, 356z.9, 356z.10, 356z.11, 356z.12, 356z.13, 356z.14, 356z.15, 356z.17, 356z.22, 356z.25, 356z.26, 356z.29, 356z.30a, 356z.32, 356z.33, 356z.36, 356z.40, 356z.41, 356z.45, 356z.46, 356z.47, 356z.51, 356z.53, 356z.54, 356z.55, 356z.56, 356z.57, 356z.59, 356z.60, ~~and~~ 356z.61, ~~and~~ 356z.62, 356z.64, 356z.67, 356z.68, and 356z.70 of the Illinois Insurance Code. The program of health benefits must comply with Sections 155.22a, 155.37, 355b, 356z.19, 370c, and

370c.1 and Article XXXIIB of the Illinois Insurance Code. The program of health benefits shall provide the coverage required under Section 356m of the Illinois Insurance Code and, for the employees of the State Employee Group Insurance Program only, the coverage as also provided in Section 6.11B of this Act. The Department of Insurance shall enforce the requirements of this Section with respect to Sections 370c and 370c.1 of the Illinois Insurance Code; all other requirements of this Section shall be enforced by the Department of Central Management Services.

Rulemaking authority to implement Public Act 95-1045, if any, is conditioned on the rules being adopted in accordance with all provisions of the Illinois Administrative Procedure Act and all rules and procedures of the Joint Committee on Administrative Rules; any purported rule not so adopted, for whatever reason, is unauthorized.

(Source: P.A. 102-30, eff. 1-1-22; 102-103, eff. 1-1-22; 102-203, eff. 1-1-22; 102-306, eff. 1-1-22; 102-642, eff. 1-1-22; 102-665, eff. 10-8-21; 102-731, eff. 1-1-23; 102-768, eff. 1-1-24; 102-804, eff. 1-1-23; 102-813, eff. 5-13-22; 102-816, eff. 1-1-23; 102-860, eff. 1-1-23; 102-1093, eff. 1-1-23; 102-1117, eff. 1-13-23; 103-8, eff. 1-1-24; 103-84, eff. 1-1-24; 103-91, eff. 1-1-24; 103-420, eff. 1-1-24; 103-445, eff. 1-1-24; 103-535, eff. 8-11-23; 103-551, eff. 8-11-23; revised 8-29-23.)

Section 10. The Counties Code is amended by changing Section 5-1069.3 as follows:

(55 ILCS 5/5-1069.3)

Sec. 5-1069.3. Required health benefits. If a county, including a home rule county, is a self-insurer for purposes of providing health insurance coverage for its employees, the coverage shall include coverage for the post-mastectomy care benefits required to be covered by a policy of accident and health insurance under Section 356t and the coverage required under Sections 356g, 356g.5, 356g.5-1, 356q, 356u, 356u.10, 356w, 356x, 356z.4, 356z.4a, 356z.6, 356z.8, 356z.9, 356z.10, 356z.11, 356z.12, 356z.13, 356z.14, 356z.15, 356z.22, 356z.25, 356z.26, 356z.29, 356z.30a, 356z.32, 356z.33, 356z.36, 356z.40, 356z.41, 356z.45, 356z.46, 356z.47, 356z.48, 356z.51, 356z.53, 356z.54, 356z.56, 356z.57, 356z.59, 356z.60, ~~and~~ 356z.61, ~~and~~ 356z.62, 356z.64, 356z.67, 356z.68, and 356z.70 of the Illinois Insurance Code. The coverage shall comply with Sections 155.22a, 355b, 356z.19, and 370c of the Illinois Insurance Code. The Department of Insurance shall enforce the requirements of this Section. The requirement that health benefits be covered as provided in this Section is an exclusive power and function of the State and is a denial and limitation under Article VII, Section 6, subsection (h) of the Illinois Constitution. A home rule county to which this Section applies must comply with every provision of this Section.

Rulemaking authority to implement Public Act 95-1045, if any, is conditioned on the rules being adopted in accordance with all provisions of the Illinois Administrative Procedure Act and all rules and procedures of the Joint Committee on Administrative Rules; any purported rule not so adopted, for whatever reason, is unauthorized.

(Source: P.A. 102-30, eff. 1-1-22; 102-103, eff. 1-1-22; 102-203, eff. 1-1-22; 102-306, eff. 1-1-22; 102-443, eff. 1-1-22; 102-642, eff. 1-1-22; 102-665, eff. 10-8-21; 102-731, eff. 1-1-23; 102-804, eff. 1-1-23; 102-813, eff. 5-13-22; 102-816, eff. 1-1-23; 102-860, eff. 1-1-23; 102-1093, eff. 1-1-23; 102-1117, eff. 1-13-23; 103-84, eff. 1-1-24; 103-91, eff. 1-1-24; 103-420, eff. 1-1-24; 103-445, eff. 1-1-24; 103-535, eff. 8-11-23; 103-551, eff. 8-11-23; revised 8-29-23.)

Section 15. The Illinois Municipal Code is amended by changing Section 10-4-2.3 as follows:

(65 ILCS 5/10-4-2.3)

Sec. 10-4-2.3. Required health benefits. If a municipality, including a home rule municipality, is a self-insurer for purposes of providing health insurance coverage for its employees, the coverage shall include coverage for the post-mastectomy care benefits required to be covered by a policy of accident and health insurance under Section 356t and the coverage required under Sections 356g, 356g.5, 356g.5-1, 356q, 356u, 356u.10, 356w, 356x, 356z.4, 356z.4a, 356z.6, 356z.8, 356z.9, 356z.10, 356z.11, 356z.12, 356z.13, 356z.14, 356z.15, 356z.22, 356z.25, 356z.26, 356z.29, 356z.30a, 356z.32, 356z.33, 356z.36, 356z.40, 356z.41, 356z.45, 356z.46, 356z.47, 356z.48, 356z.51, 356z.53, 356z.54, 356z.56, 356z.57, 356z.59, 356z.60, ~~and~~ 356z.61, ~~and~~ 356z.62, 356z.64, 356z.67, 356z.68, and 356z.70 of the Illinois Insurance Code. The coverage shall comply with Sections 155.22a, 355b, 356z.19, and 370c of the Illinois Insurance Code. The Department of Insurance shall enforce the requirements of this Section. The requirement that health benefits be covered as provided in this is an exclusive power and function of the State and is a denial and limitation under Article VII, Section 6, subsection (h) of the Illinois Constitution. A home rule municipality to which this Section applies must comply with every provision of this Section.

Rulemaking authority to implement Public Act 95-1045, if any, is conditioned on the rules being adopted in accordance with all provisions of the Illinois Administrative Procedure Act and all rules and procedures of the Joint Committee on Administrative Rules; any purported rule not so adopted, for whatever reason, is unauthorized.

(Source: P.A. 102-30, eff. 1-1-22; 102-103, eff. 1-1-22; 102-203, eff. 1-1-22; 102-306, eff. 1-1-22; 102-443, eff. 1-1-22; 102-642, eff. 1-1-22; 102-665, eff. 10-8-21; 102-731, eff. 1-1-23; 102-804, eff. 1-1-23; 102-813, eff. 5-13-22; 102-816, eff. 1-1-23; 102-860, eff. 1-1-23; 102-1093, eff. 1-1-23; 102-1117, eff. 1-13-23; 103-84, eff. 1-1-24; 103-91, eff. 1-1-24; 103-420, eff. 1-1-24; 103-445, eff. 1-1-24; 103-535, eff. 8-11-23; 103-551, eff. 8-11-23; revised 8-29-23.)

Section 20. The School Code is amended by changing Section 10-22.3f as follows:

(105 ILCS 5/10-22.3f)

Sec. 10-22.3f. Required health benefits. Insurance protection and benefits for employees shall provide the post-mastectomy care benefits required to be covered by a policy of accident and health insurance under Section 356t and the coverage required under Sections 356g, 356g.5, 356g.5-1, 356q, 356u, 356u.10, 356w, 356x, 356z.4, 356z.4a, 356z.6, 356z.8, 356z.9, 356z.11, 356z.12, 356z.13, 356z.14, 356z.15, 356z.22, 356z.25, 356z.26, 356z.29, 356z.30a, 356z.32, 356z.33, 356z.36, 356z.40, 356z.41, 356z.45, 356z.46, 356z.47, 356z.51, 356z.53, 356z.54, 356z.56, 356z.57, 356z.59, 356z.60, ~~and~~ 356z.61, ~~and~~ 356z.62, 356z.64, 356z.67, 356z.68, and 356z.70 of the Illinois Insurance Code. Insurance policies shall comply with Section 356z.19 of the Illinois Insurance Code. The coverage shall comply with Sections 155.22a, 355b, and 370c of the Illinois Insurance Code. The Department of Insurance shall enforce the requirements of this Section.

Rulemaking authority to implement Public Act 95-1045, if any, is conditioned on the rules being adopted in accordance with all provisions of the Illinois Administrative Procedure Act and all rules and procedures of the Joint Committee on Administrative Rules; any purported rule not so adopted, for whatever reason, is unauthorized.

(Source: P.A. 102-30, eff. 1-1-22; 102-103, eff. 1-1-22; 102-203, eff. 1-1-22; 102-306, eff. 1-1-22; 102-642, eff. 1-1-22; 102-665, eff. 10-8-21; 102-731, eff. 1-1-23; 102-804, eff. 1-1-23; 102-813, eff. 5-13-22; 102-816, eff. 1-1-23; 102-860, eff. 1-1-23; 102-1093, eff. 1-1-23; 102-1117, eff. 1-13-23; 103-84, eff. 1-1-24; 103-91, eff. 1-1-24; 103-420, eff. 1-1-24; 103-445, eff. 1-1-24; 103-535, eff. 8-11-23; 103-551, eff. 8-11-23; revised 8-29-23.)

Section 25. The Illinois Insurance Code is amended by adding Section 356u.10 as follows:

(215 ILCS 5/356u.10 new)

Sec. 356u.10. Genetic testing and cancer risk management for an inherited gene mutation.

(a) In this Section, "genetic testing for an inherited mutation" means germline multi-gene testing for an inherited mutation associated with an increased risk of cancer in accordance with evidence-based, clinical practice guidelines.

(b) A group policy of accident and health insurance or managed care plan that is amended, delivered, issued, or renewed after January 1, 2026 shall provide coverage for clinical genetic testing for an inherited gene mutation for individuals with a personal or family history of cancer as recommended by a health care professional in accordance with current evidence-based clinical practice guidelines, including, but not limited to, the most recent version of the National Comprehensive Cancer Network clinical practice guidelines. The coverage shall limit the total amount that a covered person is required to pay for a clinical genetic test under this subsection to an amount not to exceed $50. This subsection (b) shall not apply to coverage of genetic testing to the extent such coverage would disqualify a high-deductible health plan from eligibility for a health savings account pursuant to Section 223 of the Internal Revenue Code.

(c) For individuals with a genetic test that is positive for an inherited mutation associated with an increased risk of cancer, coverage required under this Section shall include any cancer risk management strategy as recommended by a health care professional in accordance with current evidence-based clinical practice guidelines to the extent that the management recommendation is not already covered by the policy, except that coverage for risk management under this subsection (c) may be subject to a deductible, coinsurance, or other cost-sharing limitation so long as such limitation is not greater than that required for other related cancer risk management benefits covered under the policy.

Section 30. The Health Maintenance Organization Act is amended by changing Section 5-3 as follows:

(215 ILCS 125/5-3) (from Ch. 111 1/2, par. 1411.2)

Sec. 5-3. Insurance Code provisions.

(a) Health Maintenance Organizations shall be subject to the provisions of Sections 133, 134, 136, 137, 139, 140, 141.1, 141.2, 141.3, 143, 143c, 147, 148, 149, 151, 152, 153, 154, 154.5, 154.6, 154.7, 154.8, 155.04, 155.22a, 155.49, 355.2, 355.3, 355b, 355c, 356f, 356g.5-1, 356m, 356q, 356u.10, 356v, 356w, 356x, 356z.2, 356z.3a, 356z.4, 356z.4a, 356z.5, 356z.6, 356z.8, 356z.9, 356z.10, 356z.11, 356z.12, 356z.13, 356z.14, 356z.15, 356z.17, 356z.18, 356z.19, 356z.20, 356z.21, 356z.22, 356z.23, 356z.24, 356z.25, 356z.26, 356z.28, 356z.29, 356z.30, 356z.30a, 356z.31, 356z.32, 356z.33, 356z.34, 356z.35, 356z.36, 356z.37, 356z.38, 356z.39, 356z.40, 356z.41, 356z.44, 356z.45, 356z.46, 356z.47, 356z.48, 356z.49, 356z.50, 356z.51, 356z.53, 356z.54, 356z.55, 356z.56, 356z.57, 356z.58, 356z.59, 356z.60, 356z.61, 356z.62, 356z.64, 356z.65, 356z.67, 356z.68, 364, 364.01, 364.3, 367.2, 367.2-5, 367i, 368a, 368b, 368c, 368d, 368e, 370c, 370c.1, 401, 401.1, 402, 403, 403A, 408, 408.2, 409, 412, 444, and 444.1, paragraph (c) of subsection (2) of Section 367, and Articles IIA, VIII 1/2, XII, XII 1/2, XIII, XIII 1/2, XXV, XXVI, and XXXIIB of the Illinois Insurance Code.

(b) For purposes of the Illinois Insurance Code, except for Sections 444 and 444.1 and Articles XIII and XIII 1/2, Health Maintenance Organizations in the following categories are deemed to be "domestic companies":

(1) a corporation authorized under the Dental Service Plan Act or the Voluntary Health Services Plans Act;

(2) a corporation organized under the laws of this State; or

(3) a corporation organized under the laws of another state, 30% or more of the enrollees of which are residents of this State, except a corporation subject to substantially the same requirements in its state of organization as is a "domestic company" under Article VIII 1/2 of the Illinois Insurance Code.

(c) In considering the merger, consolidation, or other acquisition of control of a Health Maintenance Organization pursuant to Article VIII 1/2 of the Illinois Insurance Code,

(1) the Director shall give primary consideration to the continuation of benefits to enrollees and the financial conditions of the acquired Health Maintenance Organization after the merger, consolidation, or other acquisition of control takes effect;

(2)(i) the criteria specified in subsection (1)(b) of Section 131.8 of the Illinois Insurance Code shall not apply and (ii) the Director, in making his determination with respect to the merger, consolidation, or other acquisition of control, need not take into account the effect on competition of the merger, consolidation, or other acquisition of control;

(3) the Director shall have the power to require the following information:

(A) certification by an independent actuary of the adequacy of the reserves of the Health Maintenance Organization sought to be acquired;

(B) pro forma financial statements reflecting the combined balance sheets of the acquiring company and the Health Maintenance Organization sought to be acquired as of the end of the preceding year and as of a date 90 days prior to the acquisition, as well as pro forma financial statements reflecting projected combined operation for a period of 2 years;

(C) a pro forma business plan detailing an acquiring party's plans with respect to the operation of the Health Maintenance Organization sought to be acquired for a period of not less than 3 years; and

(D) such other information as the Director shall require.

(d) The provisions of Article VIII 1/2 of the Illinois Insurance Code and this Section 5-3 shall apply to the sale by any health maintenance organization of greater than 10% of its enrollee population (including, without limitation, the health maintenance organization's right, title, and interest in and to its health care certificates).

(e) In considering any management contract or service agreement subject to Section 141.1 of the Illinois Insurance Code, the Director (i) shall, in addition to the criteria specified in Section 141.2 of the Illinois Insurance Code, take into account the effect of the management contract or service agreement on the continuation of benefits to enrollees and the financial condition of the health maintenance organization to be managed or serviced, and (ii) need not take into account the effect of the management contract or service agreement on competition.

(f) Except for small employer groups as defined in the Small Employer Rating, Renewability and Portability Health Insurance Act and except for medicare supplement policies as defined in Section 363 of the Illinois Insurance Code, a Health Maintenance Organization may by contract agree with a group or other enrollment unit to effect refunds or charge additional premiums under the following terms and conditions:

(i) the amount of, and other terms and conditions with respect to, the refund or additional premium are set forth in the group or enrollment unit contract agreed in advance of the period for which a refund is to be paid or additional premium is to be charged (which period shall not be less than one year); and

(ii) the amount of the refund or additional premium shall not exceed 20% of the Health Maintenance Organization's profitable or unprofitable experience with respect to the group or other enrollment unit for the period (and, for purposes of a refund or additional premium, the profitable or unprofitable experience shall be calculated taking into account a pro rata share of the Health Maintenance Organization's administrative and marketing expenses, but shall not include any refund to be made or additional premium to be paid pursuant to this subsection (f)). The Health Maintenance Organization and the group or enrollment unit may agree that the profitable or unprofitable experience may be calculated taking into account the refund period and the immediately preceding 2 plan years.

The Health Maintenance Organization shall include a statement in the evidence of coverage issued to each enrollee describing the possibility of a refund or additional premium, and upon request of any group or enrollment unit, provide to the group or enrollment unit a description of the method used to calculate (1) the Health Maintenance Organization's profitable experience with respect to the group or enrollment unit and the resulting refund to the group or enrollment unit or (2) the Health Maintenance Organization's unprofitable experience with respect to the group or enrollment unit and the resulting additional premium to be paid by the group or enrollment unit.

In no event shall the Illinois Health Maintenance Organization Guaranty Association be liable to pay any contractual obligation of an insolvent organization to pay any refund authorized under this Section.

(g) Rulemaking authority to implement Public Act 95-1045, if any, is conditioned on the rules being adopted in accordance with all provisions of the Illinois Administrative Procedure Act and all rules and procedures of the Joint Committee on Administrative Rules; any purported rule not so adopted, for whatever reason, is unauthorized.

(Source: P.A. 102-30, eff. 1-1-22; 102-34, eff. 6-25-21; 102-203, eff. 1-1-22; 102-306, eff. 1-1-22; 102-443, eff. 1-1-22; 102-589, eff. 1-1-22; 102-642, eff. 1-1-22; 102-665, eff. 10-8-21; 102-731, eff. 1-1-23; 102-775, eff. 5-13-22; 102-804, eff. 1-1-23; 102-813, eff. 5-13-22; 102-816, eff. 1-1-23; 102-860, eff. 1-1-23; 102-901, eff. 7-1-22; 102-1093, eff. 1-1-23; 102-1117, eff. 1-13-23; 103-84, eff. 1-1-24; 103-91, eff. 1-1-24; 103-123, eff. 1-1-24; 103-154, eff. 6-30-23; 103-420, eff. 1-1-24; 103-426, eff. 8-4-23; 103-445, eff. 1-1-24; 103-551, eff. 8-11-23; revised 8-29-23.)

Section 35. The Voluntary Health Services Plans Act is amended by changing Section 10 as follows:

(215 ILCS 165/10) (from Ch. 32, par. 604)

Sec. 10. Application of Insurance Code provisions. Health services plan corporations and all persons interested therein or dealing therewith shall be subject to the provisions of Articles IIA and XII 1/2 and Sections 3.1, 133, 136, 139, 140, 143, 143c, 149, 155.22a, 155.37, 354, 355.2, 355.3, 355b, 356g, 356g.5, 356g.5-1, 356q, 356r, 356t, 356u, 356u.10, 356v, 356w, 356x, 356y, 356z.1, 356z.2, 356z.3a, 356z.4, 356z.4a, 356z.5, 356z.6, 356z.8, 356z.9, 356z.10, 356z.11, 356z.12, 356z.13, 356z.14, 356z.15, 356z.18, 356z.19, 356z.21, 356z.22, 356z.25, 356z.26, 356z.29, 356z.30, 356z.30a, 356z.32, 356z.33, 356z.40, 356z.41, 356z.46, 356z.47, 356z.51, 356z.53, 356z.54, 356z.56, 356z.57, 356z.59, 356z.60, 356z.61, 356z.62, 356z.64, 356z.67, 356z.68, 364.01, 364.3, 367.2, 368a, 401, 401.1, 402, 403, 403A, 408, 408.2, and 412, and paragraphs (7) and (15) of Section 367 of the Illinois Insurance Code.

Rulemaking authority to implement Public Act 95-1045, if any, is conditioned on the rules being adopted in accordance with all provisions of the Illinois Administrative Procedure Act and all rules and procedures of the Joint Committee on Administrative Rules; any purported rule not so adopted, for whatever reason, is unauthorized.

(Source: P.A. 102-30, eff. 1-1-22; 102-203, eff. 1-1-22; 102-306, eff. 1-1-22; 102-642, eff. 1-1-22; 102-665, eff. 10-8-21; 102-731, eff. 1-1-23; 102-775, eff. 5-13-22; 102-804, eff. 1-1-23; 102-813, eff. 5-13-22; 102-816, eff. 1-1-23; 102-860, eff. 1-1-23; 102-901, eff. 7-1-22; 102-1093, eff. 1-1-23; 102-1117, eff. 1-13-23; 103-84, eff. 1-1-24; 103-91, eff. 1-1-24; 103-420, eff. 1-1-24; 103-445, eff. 1-1-24; 103-551, eff.

8-11-23; revised 8-29-23.)".

There being no further amendments, the foregoing Amendment No. 1 was ordered engrossed, and the bill, as amended, was ordered to a third reading.

On motion of Senator Castro, **Senate Bill No. 2703** having been printed, was taken up, read by title a second time and ordered to a third reading.

On motion of Senator Castro, **Senate Bill No. 2704** having been printed, was taken up, read by title a second time.

The following amendment was offered in the Committee on Revenue, adopted and ordered printed:

AMENDMENT NO. 1 TO SENATE BILL 2704

AMENDMENT NO. 1 . Amend Senate Bill 2704 by replacing everything after the enacting clause with the following:

"Section 5. The Illinois Income Tax Act is amended by changing Section 234 as follows:

(35 ILCS 5/234)

Sec. 234. Volunteer emergency workers.

(a) For taxable years beginning on or after January 1, 2023 and beginning prior to January 1, 2028, each individual who (i) serves as a volunteer emergency worker for at least 9 months during the taxable year and (ii) does not receive compensation for his or her services as a volunteer emergency worker of more than $5,000 for the taxable year may apply to the Department for a credit against the taxes imposed by subsections (a) and (b) of Section 201. The amount of the credit shall be $500 per eligible individual. If a taxpayer described in this subsection (a) is a volunteer member of a county or municipal emergency services and disaster agency under the Illinois Emergency Management Agency Act, then the taxpayer must serve as a volunteer emergency worker with the county or municipal emergency services and disaster agency for at least 100 hours during the taxable year. The aggregate amount of all tax credits awarded by the Department under this Section in any calendar year may not exceed $5,000,000. Credits shall be awarded on a first-come first-served basis.

(b) A credit under this Section may not reduce a taxpayer's liability to less than zero.

(c) By January 24 of each year, the Office of the State Fire Marshal shall provide the Department of Revenue an electronic file with the names of volunteer emergency workers, other than volunteer emergency workers who are volunteer members of a county or municipal emergency services and disaster agency under the Illinois Emergency Management Agency Act, who (i) volunteered for at least 9 months during the immediately preceding calendar year, (ii) did not receive compensation for their services as a volunteer emergency worker of more than $5,000 during the immediately preceding calendar year, and (iii) are registered with the Office of the State Fire Marshal as of January 12 of the current year as meeting the requirements of items (i) and (ii) for the immediately preceding calendar year. The chief of the fire department, fire protection district, or fire protection association shall be responsible for notifying the State Fire Marshal of the volunteer emergency workers who met the requirements of items (i) and (ii) during the immediately preceding calendar year by January 12 of the current year. Notification shall be required in the format required by the State Fire Marshal. The chief of the fire department, fire protection district, or fire protection association shall be responsible for the verification and accuracy of their submission to the State Fire Marshal under this subsection.

By January 24, 2025, and by January 24 of each year thereafter, the Illinois Emergency Management Agency and Office of Homeland Security shall provide the Department of Revenue an electronic file with the names of volunteer emergency workers who (A) volunteered with a county or municipal emergency services and disaster agency pursuant to the Illinois Emergency Management Agency Act for at least 9 months during the immediately preceding calendar year, (B) did not receive compensation for their services as a volunteer emergency worker of more than $5,000 during the immediately preceding calendar year, (C) volunteered with a county or municipal emergency services and disaster agency pursuant to the Illinois Emergency Management Agency Act for at least 100 hours during the immediately preceding calendar year, and (D) are registered with the Illinois Emergency Management Agency and Office of Homeland Security as of January 12 of the current year as meeting the requirements of items (A), (B), and (C) for the immediately preceding calendar year. The coordinator of the emergency services and disaster agency shall

be responsible for notifying the Illinois Emergency Management Agency and Office of Homeland Security of the volunteer emergency workers who met the requirements of items (A), (B), and (C) during the immediately preceding calendar year by January 12 of the current year. Notification shall be in the format required by the Illinois Emergency Management Agency and Office of Homeland Security. The coordinator of the emergency services and disaster agency shall be responsible for the verification and accuracy of their submission to the Illinois Emergency Management Agency and Office of Homeland Security under this subsection.

(d) As used in this Section, "volunteer emergency worker" means a person who serves as a member, other than on a full-time career basis, of a fire department, fire protection district, or fire protection association that has a Fire Department Identification Number issued by the Office of the State Fire Marshal and who does not serve as a member on a full-time career basis for another fire department, fire protection district, fire protection association, or governmental entity. For taxable years beginning on or after January 1, 2024, "volunteer emergency worker" also means a person who is a volunteer member of a county or municipal emergency services and disaster agency pursuant to the Illinois Emergency Management Agency Act.

(e) The Department shall adopt rules to implement and administer this Section, including rules concerning applications for the tax credit.

(Source: P.A. 103-9, eff. 6-7-23.)

Section 99. Effective date. This Act takes effect upon becoming law.".

There being no further amendments, the foregoing Amendment No. 1 was ordered engrossed, and the bill, as amended, was ordered to a third reading.

On motion of Senator Collins, **Senate Bill No. 2715** having been printed, was taken up, read by title a second time and ordered to a third reading.

On motion of Senator Fine, **Senate Bill No. 2735** having been printed, was taken up, read by title a second time.

The following amendment was offered in the Committee on Insurance, adopted and ordered printed:

AMENDMENT NO. 1 TO SENATE BILL 2735

AMENDMENT NO. 1 . Amend Senate Bill 2735 by replacing everything after the enacting clause with the following:

"Section 5. The Illinois Insurance Code is amended by adding Section 355.6 as follows:

(215 ILCS 5/355.6 new)

Sec. 355.6. Health care provider reimbursement.

(a) In this Section, "health care provider" has the meaning given to the term "provider" in Section 370g.

(b) Any group or individual policy of accident and health insurance or managed care plan amended, delivered, issued, or renewed on or after January 1, 2026 shall offer all reasonably available methods of payment from the insurer or managed care plan, or its contracted vendor, to the contracted health care provider, which shall include, but not be limited to, payment by check and electronic funds transfer. An insurer or managed care plan shall not mandate payment by credit card. For purposes of this subsection, "credit card" means a single-use or virtual credit card provided in an electronic, digital, facsimile, physical, or paper format.

(c) If one of the available payment methods has a fee associated with it, the insurer or managed care plan, or its contracted vendor, shall, prior to initiating the first payment to an in-network health care provider or upon changing the payment methods available to a health care provider:

(1) notify the health care provider that there may be fees associated with a particular payment method and that the insurer or managed care plan, or its contracted vendor, shall disclose any fees beyond what the health care provider would normally pay to process a payment using that payment method; and

(2) provide the health care provider with clear instructions on the insurer's or managed care plan's, or its contracted vendor's, website or through means other than the contract offered to the health care provider as to how to select each method.

(d) If a health care provider requests a change in the available payment method, the insurer or managed care plan, or its contracted vendor, shall implement the change to the payment method selected by the health care provider within 30 business days, subject to federal and State verification measures to prevent fraud and abuse.

(e) An insurer or managed care plan shall not use a health care provider's preferred method of payment as a factor when deciding whether to provide credentials to a health care provider.

Section 10. The Health Maintenance Organization Act is amended by changing Section 5-3 as follows:

(215 ILCS 125/5-3) (from Ch. 111 1/2, par. 1411.2)

Sec. 5-3. Insurance Code provisions.

(a) Health Maintenance Organizations shall be subject to the provisions of Sections 133, 134, 136, 137, 139, 140, 141.1, 141.2, 141.3, 143, 143c, 147, 148, 149, 151, 152, 153, 154, 154.5, 154.6, 154.7, 154.8, 155.04, 155.22a, 155.49, 355.2, 355.3, 355.6, 355b, 355c, 356f, 356g.5-1, 356m, 356q, 356v, 356w, 356x, 356z.2, 356z.3a, 356z.4, 356z.4a, 356z.5, 356z.6, 356z.8, 356z.9, 356z.10, 356z.11, 356z.12, 356z.13, 356z.14, 356z.15, 356z.17, 356z.18, 356z.19, 356z.20, 356z.21, 356z.22, 356z.23, 356z.24, 356z.25, 356z.26, 356z.28, 356z.29, 356z.30, 356z.30a, 356z.31, 356z.32, 356z.33, 356z.34, 356z.35, 356z.36, 356z.37, 356z.38, 356z.39, 356z.40, 356z.41, 356z.44, 356z.45, 356z.46, 356z.47, 356z.48, 356z.49, 356z.50, 356z.51, 356z.53, 356z.54, 356z.55, 356z.56, 356z.57, 356z.58, 356z.59, 356z.60, 356z.61, 356z.62, 356z.64, 356z.65, 356z.67, 356z.68, 364, 364.01, 364.3, 367.2, 367.2-5, 367i, 368a, 368b, 368c, 368d, 368e, 370c, 370c.1, 401, 401.1, 402, 403, 403A, 408, 408.2, 409, 412, 444, and 444.1, paragraph (c) of subsection (2) of Section 367, and Articles IIA, VIII 1/2, XII, XII 1/2, XIII, XIII 1/2, XXV, XXVI, and XXXIIB of the Illinois Insurance Code.

(b) For purposes of the Illinois Insurance Code, except for Sections 444 and 444.1 and Articles XIII and XIII 1/2, Health Maintenance Organizations in the following categories are deemed to be "domestic companies":

(1) a corporation authorized under the Dental Service Plan Act or the Voluntary Health Services Plans Act;

(2) a corporation organized under the laws of this State; or

(3) a corporation organized under the laws of another state, 30% or more of the enrollees of which are residents of this State, except a corporation subject to substantially the same requirements in its state of organization as is a "domestic company" under Article VIII 1/2 of the Illinois Insurance Code.

(c) In considering the merger, consolidation, or other acquisition of control of a Health Maintenance Organization pursuant to Article VIII 1/2 of the Illinois Insurance Code,

(1) the Director shall give primary consideration to the continuation of benefits to enrollees and the financial conditions of the acquired Health Maintenance Organization after the merger, consolidation, or other acquisition of control takes effect;

(2)(i) the criteria specified in subsection (1)(b) of Section 131.8 of the Illinois Insurance Code shall not apply and (ii) the Director, in making his determination with respect to the merger, consolidation, or other acquisition of control, need not take into account the effect on competition of the merger, consolidation, or other acquisition of control;

(3) the Director shall have the power to require the following information:

(A) certification by an independent actuary of the adequacy of the reserves of the Health Maintenance Organization sought to be acquired;

(B) pro forma financial statements reflecting the combined balance sheets of the acquiring company and the Health Maintenance Organization sought to be acquired as of the end of the preceding year and as of a date 90 days prior to the acquisition, as well as pro forma financial statements reflecting projected combined operation for a period of 2 years;

(C) a pro forma business plan detailing an acquiring party's plans with respect to the operation of the Health Maintenance Organization sought to be acquired for a period of not less than 3 years; and

(D) such other information as the Director shall require.

(d) The provisions of Article VIII 1/2 of the Illinois Insurance Code and this Section 5-3 shall apply to the sale by any health maintenance organization of greater than 10% of its enrollee population (including, without limitation, the health maintenance organization's right, title, and interest in and to its health care certificates).

(e) In considering any management contract or service agreement subject to Section 141.1 of the Illinois Insurance Code, the Director (i) shall, in addition to the criteria specified in Section 141.2 of the Illinois Insurance Code, take into account the effect of the management contract or service agreement on the continuation of benefits to enrollees and the financial condition of the health maintenance organization to be managed or serviced, and (ii) need not take into account the effect of the management contract or service agreement on competition.

(f) Except for small employer groups as defined in the Small Employer Rating, Renewability and Portability Health Insurance Act and except for medicare supplement policies as defined in Section 363 of the Illinois Insurance Code, a Health Maintenance Organization may by contract agree with a group or other enrollment unit to effect refunds or charge additional premiums under the following terms and conditions:

(i) the amount of, and other terms and conditions with respect to, the refund or additional premium are set forth in the group or enrollment unit contract agreed in advance of the period for which a refund is to be paid or additional premium is to be charged (which period shall not be less than one year); and

(ii) the amount of the refund or additional premium shall not exceed 20% of the Health Maintenance Organization's profitable or unprofitable experience with respect to the group or other enrollment unit for the period (and, for purposes of a refund or additional premium, the profitable or unprofitable experience shall be calculated taking into account a pro rata share of the Health Maintenance Organization's administrative and marketing expenses, but shall not include any refund to be made or additional premium to be paid pursuant to this subsection (f)). The Health Maintenance Organization and the group or enrollment unit may agree that the profitable or unprofitable experience may be calculated taking into account the refund period and the immediately preceding 2 plan years.

The Health Maintenance Organization shall include a statement in the evidence of coverage issued to each enrollee describing the possibility of a refund or additional premium, and upon request of any group or enrollment unit, provide to the group or enrollment unit a description of the method used to calculate (1) the Health Maintenance Organization's profitable experience with respect to the group or enrollment unit and the resulting refund to the group or enrollment unit or (2) the Health Maintenance Organization's unprofitable experience with respect to the group or enrollment unit and the resulting additional premium to be paid by the group or enrollment unit.

In no event shall the Illinois Health Maintenance Organization Guaranty Association be liable to pay any contractual obligation of an insolvent organization to pay any refund authorized under this Section.

(g) Rulemaking authority to implement Public Act 95-1045, if any, is conditioned on the rules being adopted in accordance with all provisions of the Illinois Administrative Procedure Act and all rules and procedures of the Joint Committee on Administrative Rules; any purported rule not so adopted, for whatever reason, is unauthorized.

(Source: P.A. 102-30, eff. 1-1-22; 102-34, eff. 6-25-21; 102-203, eff. 1-1-22; 102-306, eff. 1-1-22; 102-443, eff. 1-1-22; 102-589, eff. 1-1-22; 102-642, eff. 1-1-22; 102-665, eff. 10-8-21; 102-731, eff. 1-1-23; 102-775, eff. 5-13-22; 102-804, eff. 1-1-23; 102-813, eff. 5-13-22; 102-816, eff. 1-1-23; 102-860, eff. 1-1-23; 102-901, eff. 7-1-22; 102-1093, eff. 1-1-23; 102-1117, eff. 1-13-23; 103-84, eff. 1-1-24; 103-91, eff. 1-1-24; 103-123, eff. 1-1-24; 103-154, eff. 6-30-23; 103-420, eff. 1-1-24; 103-426, eff. 8-4-23; 103-445, eff. 1-1-24; 103-551, eff. 8-11-23; revised 8-29-23.)".

There being no further amendments, the foregoing Amendment No. 1 was ordered engrossed, and the bill, as amended, was ordered to a third reading.

On motion of Senator McConchie, **Senate Bill No. 2740** having been printed, was taken up, read by title a second time.

The following amendment was offered in the Committee on Judiciary, adopted and ordered printed:

AMENDMENT NO. 1 TO SENATE BILL 2740

AMENDMENT NO. 1 . Amend Senate Bill 2740 by replacing everything after the enacting clause with the following:

"Section 5. The Condominium Property Act is amended by adding Section 18.12 as follows:
(765 ILCS 605/18.12 new)
Sec. 18.12. Accessible parking.
(a) The board of managers shall adopt a policy to reasonably accommodate a unit owner who is a person with a disability who requires accessible parking. Such a policy shall include, without limitation, the procedure for submitting a request for an accessible parking space and the time in which the board shall review the request. The time for review shall not be more than 45 days from the date the request is submitted. The board must review and make a decision on the request within a reasonable period of time. A copy of such policy shall be given to any unit owner upon request. The board of managers shall adopt such policy no later than 90 days after the effective date of this amendatory Act of the 103rd General Assembly for condominiums existing on said effective date or 90 days after the date of the election of the initial board of managers pursuant to Section 18.2 of this Act.
(b) The board of managers shall make reasonable efforts to facilitate a resolution between unit owners to provide for accessible parking when the association does not own or otherwise control parking that meets the accessible parking needs of a unit owner who is a person with a disability who requires accessible parking.
(c) For all new construction condominiums and conversion condominiums submitted to the provisions of this Act after the effective date of this amendatory Act of the 103rd General Assembly, all accessible parking spaces constructed or created in accordance with applicable federal, State, and local building and accessibility statutes, codes, and ordinances must remain part of the common elements. No developer or declarant shall construct, create, or otherwise make parking units (a unit as defined in Section 2 of this Act that is a parking space) or limited common elements of such accessible parking spaces. The board of managers has the authority to establish rules and regulations for the use of such common element accessible parking spaces, including, but not limited to, renting or licensing such common element accessible parking spaces to non-disabled unit owners, provided that the rules and regulations must provide that a unit owner who is a person with a disability who requires accessible parking has priority over non-disabled unit owners, and that non-disabled unit owners must immediately stop using such common element accessible parking space when a request by a unit owner who is a person with a disability for accessible parking is approved by the board.
Nothing in this subsection (c) shall preclude a disabled person from purchasing a parking unit or a residential unit to which a limited common element parking space is assigned, and no developer or declarant shall refuse to sell a parking unit to a disabled person or assign a limited common element parking space to a residential unit purchased by a disabled person. If a disabled person purchases a parking unit or a residential unit to which a limited common element parking space is assigned, that unit owner who is a person with a disability who requires accessible parking may request use of a common element accessible parking space in exchange for permitting the association use of that disabled unit owner's parking unit or limited common element parking space.
(d) Subsections (a) and (b) apply to all condominiums that have parking, regardless of whether the parking comprises parking units, limited common elements, common elements, or parking rights.".

There being no further amendments, the foregoing Amendment No. 1 was ordered engrossed, and the bill, as amended, was ordered to a third reading.

On motion of Senator Edly-Allen, **Senate Bill No. 2747** having been printed, was taken up, read by title a second time and ordered to a third reading.

On motion of Senator McConchie, **Senate Bill No. 2751** having been printed, was taken up, read by title a second time.
Floor Amendment No. 1 was referred to the Committee on Assignments earlier today.
There being no further amendments, the bill was ordered to a third reading.

On motion of Senator Hastings, **Senate Bill No. 2769** having been printed, was taken up, read by title a second time and ordered to a third reading.

On motion of Senator Hastings, **Senate Bill No. 2770** having been printed, was taken up, read by title a second time.

The following amendment was offered in the Committee on Labor, adopted and ordered printed:

AMENDMENT NO. 1 TO SENATE BILL 2770

AMENDMENT NO. 1 . Amend Senate Bill 2770 by replacing everything after the enacting clause with the following:

"Section 5. The Illinois Freedom to Work Act is amended by changing Section 10 as follows:

(820 ILCS 90/10)

Sec. 10. Prohibiting covenants not to compete and covenants not to solicit.

(a) No employer shall enter into a covenant not to compete with any employee unless the employee's actual or expected annualized rate of earnings exceeds $75,000 per year. This amount shall increase to $80,000 per year beginning on January 1, 2027, $85,000 per year beginning on January 1, 2032, and $90,000 per year beginning on January 1, 2037. A covenant not to compete entered into in violation of this subsection is void and unenforceable.

(b) No employer shall enter into a covenant not to solicit with any employee unless the employee's actual or expected annualized rate of earnings exceeds $45,000 per year. This amount shall increase to $47,500 per year beginning on January 1, 2027, $50,000 per year beginning on January 1, 2032, and $52,500 per year beginning on January 1, 2037. A covenant not to solicit entered into in violation of this subsection is void and unenforceable.

(c) No employer shall enter into a covenant not to compete or a covenant not to solicit with any employee who an employer terminates or furloughs or lays off as the result of business circumstances or governmental orders related to the COVID-19 pandemic or under circumstances that are similar to the COVID-19 pandemic, unless enforcement of the covenant not to compete includes compensation equivalent to the employee's base salary at the time of termination for the period of enforcement minus compensation earned through subsequent employment during the period of enforcement. A covenant not to compete or a covenant not to solicit entered into in violation of this subsection is void and unenforceable.

(d) A covenant not to compete is void and illegal with respect to individuals covered by a collective bargaining agreement under the Illinois Public Labor Relations Act or the Illinois Educational Labor Relations Act. ~~and~~

(e) A covenant not to compete or a covenant not to solicit is void and illegal with respect to individuals employed in construction, regardless of whether an individual is covered by a collective bargaining agreement. This subsection (e) ~~(d)~~ does not apply to construction employees who primarily perform management, engineering or architectural, design, or sales functions for the employer or who are shareholders, partners, or owners in any capacity of the employer.

(Source: P.A. 102-358, eff. 1-1-22.)".

There being no further amendments, the foregoing Amendment No. 1 was ordered engrossed, and the bill, as amended, was ordered to a third reading.

On motion of Senator Cunningham, **Senate Bill No. 2774** having been printed, was taken up, read by title a second time and ordered to a third reading.

On motion of Senator Ventura, **Senate Bill No. 2781** having been printed, was taken up, read by title a second time.

The following amendment was offered in the Committee on Environment and Conservation, adopted and ordered printed:

AMENDMENT NO. 1 TO SENATE BILL 2781

AMENDMENT NO. 1 . Amend Senate Bill 2781 by replacing everything after the enacting clause with the following:

"Section 1. Short title. This Act may be cited as the Healthy Forests, Wetlands, and Prairies Act.

Section 5. Findings. The General Assembly finds it is in the interest of the State to encourage natural solutions as one component of the State's efforts to reduce and remediate the impacts of climate change. Natural solutions must include planting native trees and other vegetation demonstrated to reduce carbon dioxide. To accomplish this purpose, the State must offer assistance to other units of local government that are taking steps to fight climate change by restoring forests, wetlands, prairies, and other landscapes that are native to Illinois and that are demonstrated to have a positive environmental impact.

Section 10. State goal. It is the goal of the State that there be no overall net loss of the State's existing forest, prairie, or wetland acres or their functional value due to State-supported activities. Further, the State and units of local government shall preserve, enhance, and create forests, prairies, and wetlands where practical in order to mitigate the impact of climate change and reduce carbon dioxide from the atmosphere.

Section 15. Receipt of federal moneys. The Department of Natural Resources may receive federal moneys to administer a Healthy Forests, Wetlands, and Prairies Grant Program.

Section 20. Establishment of the Healthy Forests, Wetlands, and Prairies Grant Program.

(a) The Department of Natural Resources, subject to appropriation, shall establish and administer a Healthy Forests, Wetlands, and Prairies Grant Program to restore degraded forest lands and native prairies and to promote the growth of native vegetation that removes carbon dioxide from the atmosphere and helps mitigate the impact of climate change.

(b) Entities that may apply to participate in the Healthy Forests, Wetlands, and Prairies Grant Program include:

(1) State agencies and units of local government, including, but not limited to, municipalities, townships, counties, forest preserves, and park districts;

(2) conservation land trusts;

(3) not-for-profit entities with conservation missions, including, but not limited to, climate change mitigation, preservation of natural lands, and conservation of the State's natural resources; and

(4) other entities that, because of their missions, are determined by the Department to be eligible recipients of the grants under this Act.

(c) At least 75% of the moneys appropriated for the Healthy Forests, Wetlands, and Prairies Grant Program shall be awarded to the State agencies, units of local government, land trusts, and other entities that the Department determines are eligible for a grant under this Section. The Department may use an amount not to exceed 23% of the moneys appropriated for the Program for the purposes of restoring degraded forest lands and native prairies and to promote the growth of native vegetation that remove carbon dioxide from the atmosphere and help mitigate the impact of climate change. The Department may use an amount not to exceed 2% of the moneys appropriated for the Healthy Forests, Wetlands, and Prairies Grant Program for administrative costs associated with the Program.

(d) The Department shall adopt any rules necessary for the implementation of this Act, including rules establishing requirements and timeframes for the submission of grant applications by entities that are authorized to apply to participate in the Healthy Forests, Wetlands, and Prairies Grant Program.

(e) Grants provided under this Act may be used by eligible entities for the purpose of:

(1) matching funds for federal or private dollars for projects that forward the goal of climate change mitigation through promotion of the management, planting, maintaining, and preserving of native grasses, plants, and trees;

(2) financing projects along roadways and in parks and forest preserves on public or private lands to plant native trees and prairie grasses demonstrated to absorb carbon;

(3) financing projects that promote the stewardship of existing public and private urban forests and natural lands, including the removal of invasive or nonnative plant species;

(4) funding regional teams tasked with planting native prairie grasses and trees, prescribed burning for the maintenance of natural lands, removing invasive plant species, and educational outreach; and

(5) promoting education and marketing regarding local projects or steps community members may take to promote the growth of native vegetation that removes carbon dioxide from the atmosphere.

Section 25. Healthy Forests, Wetlands, and Prairies Grant Fund. The Healthy Forest, Wetlands, and Prairies Grant Fund shall be administered by the Department of Natural Resources. The Fund may receive moneys appropriated by the General Assembly or from the federal government, private donations, or any other legal source. Subject to the limitations in subsection (c) of Section 20 of this Act, moneys in the Fund shall be used by the Department for the purpose of providing grant assistance in accordance with this Act and for the purpose of administering the grant program established under this Act.

Section 90. The Department of Natural Resources Act is amended by changing Section 1-15 as follows:

(20 ILCS 801/1-15)

Sec. 1-15. General powers and duties.

(a) It shall be the duty of the Department to investigate practical problems, implement studies, conduct research and provide assistance, information and data relating to the technology and administration of the natural history, entomology, zoology, and botany of this State; the geology and natural resources of this State; the water and atmospheric resources of this State; and the archeological and cultural history of this State.

(b) The Department (i) shall obtain, store, and process relevant data; recommend technological, administrative, and legislative changes and developments; cooperate with other federal, state, and local governmental research agencies, facilities, or institutes in the selection of projects for study; cooperate with the Board of Higher Education and with the public and private colleges and universities in this State in developing relevant interdisciplinary approaches to problems; and evaluate curricula at all levels of education and provide assistance to instructors and (ii) may sponsor an annual conference of leaders in government, industry, health, and education to evaluate the state of this State's environment and natural resources.

(c) The Director, in accordance with the Personnel Code, shall employ such personnel, provide such facilities, and contract for such outside services as may be necessary to carry out the purposes of the Department. Maximum use shall be made of existing federal and state agencies, facilities, and personnel in conducting research under this Act.

(c-5) The Department may use the services of, and enter into necessary agreements with, outside entities for the purpose of evaluating grant applications and for the purpose of administering or monitoring compliance with grant agreements. Contracts under this subsection shall not exceed 5 ~~2~~ years, without an executed extension ~~in length~~.

(d) In addition to its other powers, the Department has the following powers:

(1) To obtain, store, process, and provide data and information related to the powers and duties of the Department under this Act. This subdivision (d)(1) does ~~not~~ give authority to the Department to require reports from nongovernmental sources or entities.

(2) To cooperate with and support the Illinois Science and Technology Advisory Committee and the Illinois Coalition for the purpose of facilitating the effective operations and activities of such entities. Support may include, but need not be limited to, providing space for the operations of the Committee and the Illinois Coalition.

(e) The Department is authorized to make grants to local not-for-profit organizations for the purposes of development, management, maintenance, and study of wetland areas, forests, prairies, and other landscapes demonstrated to reduce the impact of climate change.

(f) The Department has the authority to accept, receive and administer on behalf of the State any gifts, bequests, donations, income from property rental and endowments. Any such funds received by the Department shall be deposited into the DNR Special Projects Fund, a trust fund in the State treasury, and used for the purposes of this Act or, when appropriate, for such purposes and under such restrictions, terms and conditions as are predetermined by the donor or grantor of such funds or property. Any accrued interest from money deposited into the DNR Special Projects Fund shall be reinvested into the Fund and used in the same manner as the principal. The Director shall maintain records which account for and assure that restricted funds or property are disbursed or used pursuant to the restrictions, terms or conditions of the donor.

(g) The Department shall recognize, preserve, and promote our special heritage of recreational hunting and trapping by providing opportunities to hunt and trap in accordance with the Wildlife Code.

(h) Within 5 years after the effective date of this amendatory Act of the 102nd General Assembly, the Department shall fly a United States Flag, an Illinois flag, and a POW/MIA flag at all State parks. Donations

may be made by groups and individuals to the DNR Special Projects Fund for costs related to the implementation of this subsection.
(Source: P.A. 102-388, eff. 1-1-22; 102-699, eff. 4-19-22; 103-363, eff. 7-28-23.)

Section 95. The State Finance Act is amended by adding Section 5.1015 as follows:
(30 ILCS 105/5.1015 new)
Sec. 5.1015. The Healthy Forests, Wetlands, and Prairies Grant Fund.".

There being no further amendments, the foregoing Amendment No. 1 was ordered engrossed, and the bill, as amended, was ordered to a third reading.

On motion of Senator Holmes, **Senate Bill No. 2798** having been printed, was taken up, read by title a second time and ordered to a third reading.

On motion of Senator Fine, **Senate Bill No. 2799** having been printed, was taken up, read by title a second time.

The following amendment was offered in the Committee on Judiciary, adopted and ordered printed:

AMENDMENT NO. 1 TO SENATE BILL 2799

AMENDMENT NO. 1 . Amend Senate Bill 2799 by replacing everything after the enacting clause with the following:

"Section 5. The Opening Meetings Act is amended by changing Sections 1.02 and 2 as follows:
(5 ILCS 120/1.02) (from Ch. 102, par. 41.02)
Sec. 1.02. For the purposes of this Act:

"Meeting" means any gathering, whether in person or by video or audio conference, telephone call, electronic means (such as, without limitation, electronic mail, electronic chat, and instant messaging), or other means of contemporaneous interactive communication, of a majority of a quorum of the members of a public body held for the purpose of discussing public business or, for a 5-member public body, a quorum of the members of a public body held for the purpose of discussing public business.

Accordingly, for a 5-member public body, 3 members of the body constitute a quorum and the affirmative vote of 3 members is necessary to adopt any motion, resolution, or ordinance, unless a greater number is otherwise required.

"Public body" includes all legislative, executive, administrative or advisory bodies of the State, counties, townships, cities, villages, incorporated towns, school districts and all other municipal corporations, boards, bureaus, committees or commissions of this State, and any subsidiary bodies of any of the foregoing including but not limited to committees and subcommittees which are supported in whole or in part by tax revenue, or which expend tax revenue, except the General Assembly and committees or commissions thereof. "Public body" includes tourism boards and convention or civic center boards located in counties that are contiguous to the Mississippi River with populations of more than 250,000 but less than 300,000. "Public body" includes the Health Facilities and Services Review Board. "Public body" does not include a child death review team or the Illinois Child Death Review Teams Executive Council established under the Child Death Review Team Act, an ethics commission acting under the State Officials and Employees Ethics Act, a regional youth advisory board or the Statewide Youth Advisory Board established under the Department of Children and Family Services Statewide Youth Advisory Board Act, ~~or~~ the Illinois Independent Tax Tribunal, or the regional interagency fatality review teams and the Illinois Fatality Review Team Advisory Council established under the Adult Protective Services Act.
(Source: P.A. 97-1129, eff. 8-28-12; 98-806, eff. 1-1-15.)

(5 ILCS 120/2) (from Ch. 102, par. 42)
Sec. 2. Open meetings.

(a) Openness required. All meetings of public bodies shall be open to the public unless excepted in subsection (c) and closed in accordance with Section 2a.

(b) Construction of exceptions. The exceptions contained in subsection (c) are in derogation of the requirement that public bodies meet in the open, and therefore, the exceptions are to be strictly construed, extending only to subjects clearly within their scope. The exceptions authorize but do not require the holding of a closed meeting to discuss a subject included within an enumerated exception.

(c) Exceptions. A public body may hold closed meetings to consider the following subjects:

(1) The appointment, employment, compensation, discipline, performance, or dismissal of specific employees, specific individuals who serve as independent contractors in a park, recreational, or educational setting, or specific volunteers of the public body or legal counsel for the public body, including hearing testimony on a complaint lodged against an employee, a specific individual who serves as an independent contractor in a park, recreational, or educational setting, or a volunteer of the public body or against legal counsel for the public body to determine its validity. However, a meeting to consider an increase in compensation to a specific employee of a public body that is subject to the Local Government Wage Increase Transparency Act may not be closed and shall be open to the public and posted and held in accordance with this Act.

(2) Collective negotiating matters between the public body and its employees or their representatives, or deliberations concerning salary schedules for one or more classes of employees.

(3) The selection of a person to fill a public office, as defined in this Act, including a vacancy in a public office, when the public body is given power to appoint under law or ordinance, or the discipline, performance or removal of the occupant of a public office, when the public body is given power to remove the occupant under law or ordinance.

(4) Evidence or testimony presented in open hearing, or in closed hearing where specifically authorized by law, to a quasi-adjudicative body, as defined in this Act, provided that the body prepares and makes available for public inspection a written decision setting forth its determinative reasoning.

(4.5) Evidence or testimony presented to a school board regarding denial of admission to school events or property pursuant to Section 24-24 of the School Code, provided that the school board prepares and makes available for public inspection a written decision setting forth its determinative reasoning.

(5) The purchase or lease of real property for the use of the public body, including meetings held for the purpose of discussing whether a particular parcel should be acquired.

(6) The setting of a price for sale or lease of property owned by the public body.

(7) The sale or purchase of securities, investments, or investment contracts. This exception shall not apply to the investment of assets or income of funds deposited into the Illinois Prepaid Tuition Trust Fund.

(8) Security procedures, school building safety and security, and the use of personnel and equipment to respond to an actual, a threatened, or a reasonably potential danger to the safety of employees, students, staff, the public, or public property.

(9) Student disciplinary cases.

(10) The placement of individual students in special education programs and other matters relating to individual students.

(11) Litigation, when an action against, affecting or on behalf of the particular public body has been filed and is pending before a court or administrative tribunal, or when the public body finds that an action is probable or imminent, in which case the basis for the finding shall be recorded and entered into the minutes of the closed meeting.

(12) The establishment of reserves or settlement of claims as provided in the Local Governmental and Governmental Employees Tort Immunity Act, if otherwise the disposition of a claim or potential claim might be prejudiced, or the review or discussion of claims, loss or risk management information, records, data, advice or communications from or with respect to any insurer of the public body or any intergovernmental risk management association or self insurance pool of which the public body is a member.

(13) Conciliation of complaints of discrimination in the sale or rental of housing, when closed meetings are authorized by the law or ordinance prescribing fair housing practices and creating a commission or administrative agency for their enforcement.

(14) Informant sources, the hiring or assignment of undercover personnel or equipment, or ongoing, prior or future criminal investigations, when discussed by a public body with criminal investigatory responsibilities.

(15) Professional ethics or performance when considered by an advisory body appointed to advise a licensing or regulatory agency on matters germane to the advisory body's field of competence.

(16) Self evaluation, practices and procedures or professional ethics, when meeting with a representative of a statewide association of which the public body is a member.

(17) The recruitment, credentialing, discipline or formal peer review of physicians or other health care professionals, or for the discussion of matters protected under the federal Patient Safety and Quality Improvement Act of 2005, and the regulations promulgated thereunder, including 42 C.F.R. Part 3 (73 FR 70732), or the federal Health Insurance Portability and Accountability Act of 1996, and the regulations promulgated thereunder, including 45 C.F.R. Parts 160, 162, and 164, by a hospital, or other institution providing medical care, that is operated by the public body.

(18) Deliberations for decisions of the Prisoner Review Board.

(19) Review or discussion of applications received under the Experimental Organ Transplantation Procedures Act.

(20) The classification and discussion of matters classified as confidential or continued confidential by the State Government Suggestion Award Board.

(21) Discussion of minutes of meetings lawfully closed under this Act, whether for purposes of approval by the body of the minutes or semi-annual review of the minutes as mandated by Section 2.06.

(22) Deliberations for decisions of the State Emergency Medical Services Disciplinary Review Board.

(23) The operation by a municipality of a municipal utility or the operation of a municipal power agency or municipal natural gas agency when the discussion involves (i) contracts relating to the purchase, sale, or delivery of electricity or natural gas or (ii) the results or conclusions of load forecast studies.

(24) Meetings of a residential health care facility resident sexual assault and death review team or the Executive Council under the Abuse Prevention Review Team Act.

(25) Meetings of an independent team of experts under Brian's Law.

(26) Meetings of a mortality review team appointed under the Department of Juvenile Justice Mortality Review Team Act.

(27) (Blank).

(28) Correspondence and records (i) that may not be disclosed under Section 11-9 of the Illinois Public Aid Code or (ii) that pertain to appeals under Section 11-8 of the Illinois Public Aid Code.

(29) Meetings between internal or external auditors and governmental audit committees, finance committees, and their equivalents, when the discussion involves internal control weaknesses, identification of potential fraud risk areas, known or suspected frauds, and fraud interviews conducted in accordance with generally accepted auditing standards of the United States of America.

(30) (Blank). ~~Those meetings or portions of meetings of a fatality review team or the Illinois Fatality Review Team Advisory Council during which a review of the death of an eligible adult in which abuse or neglect is suspected, alleged, or substantiated is conducted pursuant to Section 15 of the Adult Protective Services Act.~~

(31) Meetings and deliberations for decisions of the Concealed Carry Licensing Review Board under the Firearm Concealed Carry Act.

(32) Meetings between the Regional Transportation Authority Board and its Service Boards when the discussion involves review by the Regional Transportation Authority Board of employment contracts under Section 28d of the Metropolitan Transit Authority Act and Sections 3A.18 and 3B.26 of the Regional Transportation Authority Act.

(33) Those meetings or portions of meetings of the advisory committee and peer review subcommittee created under Section 320 of the Illinois Controlled Substances Act during which specific controlled substance prescriber, dispenser, or patient information is discussed.

(34) Meetings of the Tax Increment Financing Reform Task Force under Section 2505-800 of the Department of Revenue Law of the Civil Administrative Code of Illinois.

(35) Meetings of the group established to discuss Medicaid capitation rates under Section 5-30.8 of the Illinois Public Aid Code.

(36) Those deliberations or portions of deliberations for decisions of the Illinois Gaming Board in which there is discussed any of the following: (i) personal, commercial, financial, or other information obtained from any source that is privileged, proprietary, confidential, or a trade secret; or (ii) information specifically exempted from the disclosure by federal or State law.

(37) Deliberations for decisions of the Illinois Law Enforcement Training Standards Board, the Certification Review Panel, and the Illinois State Police Merit Board regarding certification and decertification.

(38) Meetings of the Ad Hoc Statewide Domestic Violence Fatality Review Committee of the Illinois Criminal Justice Information Authority Board that occur in closed executive session under subsection (d) of Section 35 of the Domestic Violence Fatality Review Act.

(39) Meetings of the regional review teams under subsection (a) of Section 75 of the Domestic Violence Fatality Review Act.

(40) Meetings of the Firearm Owner's Identification Card Review Board under Section 10 of the Firearm Owners Identification Card Act.

(d) Definitions. For purposes of this Section:

"Employee" means a person employed by a public body whose relationship with the public body constitutes an employer-employee relationship under the usual common law rules, and who is not an independent contractor.

"Public office" means a position created by or under the Constitution or laws of this State, the occupant of which is charged with the exercise of some portion of the sovereign power of this State. The term "public office" shall include members of the public body, but it shall not include organizational positions filled by members thereof, whether established by law or by a public body itself, that exist to assist the body in the conduct of its business.

"Quasi-adjudicative body" means an administrative body charged by law or ordinance with the responsibility to conduct hearings, receive evidence or testimony and make determinations based thereon, but does not include local electoral boards when such bodies are considering petition challenges.

(e) Final action. No final action may be taken at a closed meeting. Final action shall be preceded by a public recital of the nature of the matter being considered and other information that will inform the public of the business being conducted.

(Source: P.A. 102-237, eff. 1-1-22; 102-520, eff. 8-20-21; 102-558, eff. 8-20-21; 102-813, eff. 5-13-22; 103-311, eff. 7-28-23.)

Section 10. The Adult Protective Services Act is amended by changing Sections 2, 3, 3.1, 3.5, 4, 5, 6, 7, 7.1, 9, and 15 and by adding Section 5.1 as follows:

(320 ILCS 20/2) (from Ch. 23, par. 6602)

Sec. 2. Definitions. As used in this Act, unless the context requires otherwise:

(a) "Abandonment" means the desertion or willful forsaking of an eligible adult by an individual responsible for the care and custody of that eligible adult under circumstances in which a reasonable person would continue to provide care and custody. Nothing in this Act shall be construed to mean that an eligible adult is a victim of abandonment because of health care services provided or not provided by licensed health care professionals.

(a-1) "Abuse" means causing any physical, mental or sexual injury to an eligible adult, including exploitation of such adult's financial resources, and abandonment or subjecting an eligible adult to an environment which creates a likelihood of harm to the eligible adult's health, physical and emotional well-being, or welfare.

Nothing in this Act shall be construed to mean that an eligible adult is a victim of abuse, abandonment, neglect, or self-neglect for the sole reason that he or she is being furnished with or relies upon treatment by spiritual means through prayer alone, in accordance with the tenets and practices of a recognized church or religious denomination.

Nothing in this Act shall be construed to mean that an eligible adult is a victim of abuse because of health care services provided or not provided by licensed health care professionals.

Nothing in this Act shall be construed to mean that an eligible adult is a victim of abuse in cases of criminal activity by strangers, telemarketing scams, consumer fraud, internet fraud, home repair disputes, complaints against a homeowners' association, or complaints between landlords and tenants.

(a-5) "Abuser" means a person who is a family member, caregiver, or another person who has a continuing relationship with the eligible adult and abuses, abandons, neglects, or financially exploits an eligible adult.

(a-6) "Adult with disabilities" means a person aged 18 through 59 who resides in a domestic living situation and whose disability as defined in subsection (c-5) impairs his or her ability to seek or obtain protection from abuse, abandonment, neglect, or exploitation.

(a-7) "Caregiver" means a person who either as a result of a family relationship, voluntarily, or in exchange for compensation has assumed responsibility for all or a portion of the care of an eligible adult who needs assistance with activities of daily living or instrumental activities of daily living.

(b) "Department" means the Department on Aging of the State of Illinois.

(c) "Director" means the Director of the Department.

(c-5) "Disability" means a physical or mental disability, including, but not limited to, a developmental disability, an intellectual disability, a mental illness as defined under the Mental Health and Developmental Disabilities Code, or dementia as defined under the Alzheimer's Disease Assistance Act.

(d) "Domestic living situation" means a residence where the eligible adult at the time of the report lives alone or with his or her family or a caregiver, or others, or other community-based unlicensed facility, but is not:

(1) A licensed facility as defined in Section 1-113 of the Nursing Home Care Act;

(1.5) A facility licensed under the ID/DD Community Care Act;

(1.6) A facility licensed under the MC/DD Act;

(1.7) A facility licensed under the Specialized Mental Health Rehabilitation Act of 2013;

(2) A "life care facility" as defined in the Life Care Facilities Act;

(3) A home, institution, or other place operated by the federal government or agency thereof or by the State of Illinois;

(4) A hospital, sanitarium, or other institution, the principal activity or business of which is the diagnosis, care, and treatment of human illness through the maintenance and operation of organized facilities therefor, which is required to be licensed under the Hospital Licensing Act;

(5) A "community living facility" as defined in the Community Living Facilities Licensing Act;

(6) (Blank);

(7) A "community-integrated living arrangement" as defined in the Community-Integrated Living Arrangements Licensure and Certification Act or a "community residential alternative" as licensed under that Act;

(8) An assisted living or shared housing establishment as defined in the Assisted Living and Shared Housing Act; or

(9) A supportive living facility as described in Section 5-5.01a of the Illinois Public Aid Code.

(e) "Eligible adult" means either an adult with disabilities aged 18 through 59 or a person aged 60 or older who resides in a domestic living situation and is, or is alleged to be, abused, abandoned, neglected, or financially exploited by another individual or who neglects himself or herself. "Eligible adult" also includes an adult who resides in any of the facilities that are excluded from the definition of "domestic living situation" under paragraphs (1) through (9) of subsection (d), if either: (i) the alleged abuse, abandonment, or neglect occurs outside of the facility and not under facility supervision and the alleged abuser is a family member, caregiver, or another person who has a continuing relationship with the adult; or (ii) the alleged financial exploitation is perpetrated by a family member, caregiver, or another person who has a continuing relationship with the adult, but who is not an employee of the facility where the adult resides.

(f) "Emergency" means a situation in which an eligible adult is living in conditions presenting a risk of death or physical, mental or sexual injury and the provider agency has reason to believe the eligible adult is unable to consent to services which would alleviate that risk.

(f-1) "Financial exploitation" means the use of an eligible adult's resources by another to the disadvantage of that adult or the profit or advantage of a person other than that adult.

(f-3) "Investment advisor" means any person required to register as an investment adviser or investment adviser representative under Section 8 of the Illinois Securities Law of 1953, which for purposes of this Act excludes any bank, trust company, savings bank, or credit union, or their respective employees.

(f-5) "Mandated reporter" means any of the following persons while engaged in carrying out their professional duties:

(1) a professional or professional's delegate while engaged in: (i) social services, (ii) law enforcement, (iii) education, (iv) the care of an eligible adult or eligible adults, or (v) any of the occupations required to be licensed under the Behavior Analyst Licensing Act, the Clinical Psychologist Licensing Act, the Clinical Social Work and Social Work Practice Act, the Illinois Dental Practice Act, the Dietitian Nutritionist Practice Act, the Marriage and Family Therapy Licensing Act, the Medical Practice Act of 1987, the Naprapathic Practice Act, the Nurse Practice Act, the Nursing Home Administrators Licensing and Disciplinary Act, the Illinois Occupational Therapy Practice Act, the Illinois Optometric Practice Act of 1987, the Pharmacy Practice Act, the Illinois Physical Therapy Act, the Physician Assistant Practice Act of 1987, the Podiatric Medical Practice Act of 1987, the Respiratory Care Practice Act, the Professional Counselor and Clinical Professional Counselor Licensing and Practice Act, the Illinois Speech-Language Pathology and

Audiology Practice Act, the Veterinary Medicine and Surgery Practice Act of 2004, and the Illinois Public Accounting Act;

(1.5) an employee of an entity providing developmental disabilities services or service coordination funded by the Department of Human Services;

(2) an employee of a vocational rehabilitation facility prescribed or supervised by the Department of Human Services;

(3) an administrator, employee, or person providing services in or through an unlicensed community based facility;

(4) any religious practitioner who provides treatment by prayer or spiritual means alone in accordance with the tenets and practices of a recognized church or religious denomination, except as to information received in any confession or sacred communication enjoined by the discipline of the religious denomination to be held confidential;

(5) field personnel of the Department of Healthcare and Family Services, Department of Public Health, and Department of Human Services, and any county or municipal health department;

(6) personnel of the Department of Human Services, the Guardianship and Advocacy Commission, the State Fire Marshal, local fire departments, the Department on Aging and its subsidiary Area Agencies on Aging and provider agencies, except the State Long Term Care Ombudsman and any of his or her representatives or volunteers where prohibited from making such a report pursuant to 45 CFR 1324.11(e)(3)(iv);

(7) any employee of the State of Illinois not otherwise specified herein who is involved in providing services to eligible adults, including professionals providing medical or rehabilitation services and all other persons having direct contact with eligible adults;

(8) a person who performs the duties of a coroner or medical examiner;

(9) a person who performs the duties of a paramedic or an emergency medical technician; or

(10) a person who performs the duties of an investment advisor.

(g) "Neglect" means another individual's failure to provide an eligible adult with or willful withholding from an eligible adult the necessities of life including, but not limited to, food, clothing, shelter or health care. This subsection does not create any new affirmative duty to provide support to eligible adults. Nothing in this Act shall be construed to mean that an eligible adult is a victim of neglect because of health care services provided or not provided by licensed health care professionals.

(h) "Provider agency" means any public or nonprofit agency in a planning and service area that is selected by the Department or appointed by the regional administrative agency with prior approval by the Department on Aging to receive and assess reports of alleged or suspected abuse, abandonment, neglect, or financial exploitation. A provider agency is also referenced as a "designated agency" in this Act.

(i) "Regional administrative agency" means any public or nonprofit agency in a planning and service area that provides regional oversight and performs functions as set forth in subsection (b) of Section 3 of this Act. The Department shall designate an Area Agency on Aging as the regional administrative agency or, in the event the Area Agency on Aging in that planning and service area is deemed by the Department to be unwilling or unable to provide those functions, the Department may serve as the regional administrative agency or designate another qualified entity to serve as the regional administrative agency; any such designation shall be subject to terms set forth by the Department.

(i-5) "Self-neglect" means a condition that is the result of an eligible adult's inability, due to physical or mental impairments, or both, or a diminished capacity, to perform essential self-care tasks that substantially threaten his or her own health, including: providing essential food, clothing, shelter, and health care; and obtaining goods and services necessary to maintain physical health, mental health, emotional well-being, and general safety. The term includes compulsive hoarding, which is characterized by the acquisition and retention of large quantities of items and materials that produce an extensively cluttered living space, which significantly impairs the performance of essential self-care tasks or otherwise substantially threatens life or safety.

(j) "Substantiated case" means a reported case of alleged or suspected abuse, abandonment, neglect, financial exploitation, or self-neglect in which a provider agency, after assessment, determines that there is reason to believe abuse, abandonment, neglect, or financial exploitation has occurred.

(k) "Verified" means a determination that there is "clear and convincing evidence" that the specific injury or harm alleged was the result of abuse, abandonment, neglect, or financial exploitation.

(Source: P.A. 102-244, eff. 1-1-22; 102-953, eff. 5-27-22; 103-329, eff. 1-1-24.)

(320 ILCS 20/3) (from Ch. 23, par. 6603)

Sec. 3. Responsibilities.

(a) The Department shall establish, design, and manage a protective services program for eligible adults who have been, or are alleged to be, victims of abuse, abandonment, neglect, financial exploitation, or self-neglect. The Department may develop policies and procedures to effectively administer all aspects of the program defined in this Act. The Department shall contract with or fund, or contract with and fund, regional administrative agencies, provider agencies, or both, for the provision of those functions, and, contingent on adequate funding, with attorneys or legal services provider agencies for the provision of legal assistance pursuant to this Act. Contingent upon adequate funding, the Department, at its discretion, may provide funding for legal assistance for eligible adults. For self-neglect, the program shall include the following services for eligible adults who have been removed from their residences for the purpose of cleanup or repairs: temporary housing; counseling; and caseworker services to try to ensure that the conditions necessitating the removal do not reoccur.

(a-1) The Department shall by rule develop standards for minimum staffing levels and staff qualifications. The Department shall by rule establish mandatory standards for the investigation of abuse, abandonment, neglect, and financial exploitation~~, or self-neglect~~ of eligible adults and mandatory procedures for linking eligible adults to appropriate services and supports. For self-neglect, the Department may by rule establish mandatory standards for the provision of emergent casework and follow-up services to mitigate the risk of harm or death to the eligible adult.

(a-5) A provider agency shall, in accordance with rules promulgated by the Department, establish a multi-disciplinary team to act in an advisory role for the purpose of providing professional knowledge and expertise in the handling of complex abuse cases involving eligible adults. Each multi-disciplinary team shall consist of one volunteer representative from the following professions: banking or finance; disability care; health care; law; law enforcement; mental health care; and clergy. A provider agency may also choose to add representatives from the fields of substance abuse, domestic violence, sexual assault, or other related fields. To support multi-disciplinary teams in this role, law enforcement agencies and coroners or medical examiners shall supply records as may be requested in particular cases. Multi-disciplinary teams shall meet no less than 4 times annually.

(b) Each regional administrative agency shall designate provider agencies within its planning and service area with prior approval by the Department on Aging, monitor the use of services, provide technical assistance to the provider agencies and be involved in program development activities.

(c) Provider agencies shall assist, to the extent possible, eligible adults who need agency services to allow them to continue to function independently. Such assistance shall include, but not be limited to, receiving reports of alleged or suspected abuse, abandonment, neglect, financial exploitation, or self-neglect, conducting face-to-face assessments of such reported cases, determination of substantiated cases, referral of substantiated cases for necessary support services, referral of criminal conduct to law enforcement in accordance with Department guidelines, and provision of case work and follow-up services on substantiated cases. In the case of a report of alleged or suspected abuse, abandonment, or neglect that places an eligible adult at risk of injury or death, a provider agency shall respond to the report on an emergency basis in accordance with guidelines established by the Department by administrative rule and shall ensure that it is capable of responding to such a report 24 hours per day, 7 days per week. A provider agency may use an on-call system to respond to reports of alleged or suspected abuse, abandonment, or neglect after hours and on weekends.

(c-5) Where a provider agency has reason to believe that the death of an eligible adult may be the result of abuse, abandonment, or neglect, including any reports made after death, the agency shall immediately report the matter to both the appropriate law enforcement agency and the coroner or medical examiner. Between 30 and 45 days after making such a report, the provider agency again shall contact the law enforcement agency and coroner or medical examiner to determine whether any further action was taken. Upon request by a provider agency, a law enforcement agency and coroner or medical examiner shall supply a summary of its action in response to a reported death of an eligible adult. A copy of the report shall be maintained and all subsequent follow-up with the law enforcement agency and coroner or medical examiner shall be documented in the case record of the eligible adult. If the law enforcement agency, coroner, or medical examiner determines the reported death was caused by abuse, abandonment, or neglect by a caregiver, the law enforcement agency, coroner, or medical examiner shall inform the Department, and the Department shall report the caregiver's identity on the Registry as described in Section 7.5 of this Act.

(d) (Blank). ~~Upon sufficient appropriations to implement a statewide program, the Department shall implement a program, based on the recommendations of the Self-Neglect Steering Committee, for (i)~~

~~responding to reports of possible self-neglect, (ii) protecting the autonomy, rights, privacy, and privileges of adults during investigations of possible self-neglect and consequential judicial proceedings regarding competency, (iii) collecting and sharing relevant information and data among the Department, provider agencies, regional administrative agencies, and relevant seniors, (iv) developing working agreements between provider agencies and law enforcement, where practicable, and (v) developing procedures for collecting data regarding incidents of self-neglect.~~

(Source: P.A. 102-244, eff. 1-1-22.)

(320 ILCS 20/3.1)

Sec. 3.1. Adult protective services dementia training.

(a) This Section shall apply to any person who is employed by the Department in the Adult Protective Services division, or is contracted with the Department, and works on the development or implementation of social services to respond to and prevent adult abuse, neglect, or exploitation.

(b) The Department shall implement a dementia training program that must include instruction on the identification of people with dementia, risks such as wandering, communication impairments, and elder abuse, and the best practices for interacting with people with dementia.

(c) Training of at least 2 hours shall be completed at the start of employment with the Adult Protective Services division. ~~Persons who are employees of the Adult Protective Services division on the effective date of this amendatory Act of the 102nd General Assembly shall complete this training within 6 months after the effective date of this amendatory Act of the 102nd General Assembly.~~ The training shall cover the following subjects:

(1) Alzheimer's disease and dementia.

(2) Safety risks.

(3) Communication and behavior.

(d) Annual continuing education shall include at least 2 hours of dementia training covering the subjects described in subsection (c).

(e) This Section is designed to address gaps in current dementia training requirements for Adult Protective Services officials and improve the quality of training. If laws or rules existing on the effective date of this amendatory Act of the 102nd General Assembly contain more rigorous training requirements for Adult Protective Service officials, those laws or rules shall apply. Where there is overlap between this Section and other laws and rules, the Department shall interpret this Section to avoid duplication of requirements while ensuring that the minimum requirements set in this Section are met.

(f) The Department may adopt rules for the administration of this Section.

(Source: P.A. 102-4, eff. 4-27-21.)

(320 ILCS 20/3.5)

Sec. 3.5. Other responsibilities. The Department shall also be responsible for the following activities, contingent upon adequate funding; implementation shall be expanded to adults with disabilities upon the effective date of this amendatory Act of the 98th General Assembly, except those responsibilities under subsection (a), which shall be undertaken as soon as practicable:

(a) promotion of a wide range of endeavors for the purpose of preventing abuse, abandonment, neglect, financial exploitation, and self-neglect, including, but not limited to, promotion of public and professional education to increase awareness of abuse, abandonment, neglect, financial exploitation, and self-neglect; to increase reports; to establish access to and use of the Registry established under Section 7.5; and to improve response by various legal, financial, social, and health systems;

(b) coordination of efforts with other agencies, councils, and like entities, to include but not be limited to, the Administrative Office of the Illinois Courts, the Office of the Attorney General, the Illinois State Police, the Illinois Law Enforcement Training Standards Board, the State Triad, the Illinois Criminal Justice Information Authority, the Departments of Public Health, Healthcare and Family Services, and Human Services, the Illinois Guardianship and Advocacy Commission, the Family Violence Coordinating Council, the Illinois Violence Prevention Authority, and other entities which may impact awareness of, and response to, abuse, abandonment, neglect, financial exploitation, and self-neglect;

(c) collection and analysis of data;

(d) monitoring of the performance of regional administrative agencies and adult protective services agencies;

(e) promotion of prevention activities;

(f) establishing and coordinating an aggressive training program on the unique nature of adult abuse cases with other agencies, councils, and like entities, to include but not be limited to the Office of the Attorney General, the Illinois State Police, the Illinois Law Enforcement Training Standards Board, the State Triad, the Illinois Criminal Justice Information Authority, the State Departments of Public Health, Healthcare and Family Services, and Human Services, the Family Violence Coordinating Council, the Illinois Violence Prevention Authority, the agency designated by the Governor under Section 1 of the Protection and Advocacy for Persons with Developmental Disabilities Act, and other entities that may impact awareness of and response to abuse, abandonment, neglect, financial exploitation, and self-neglect;

(g) solicitation of financial institutions for the purpose of making information available to the general public warning of financial exploitation of adults and related financial fraud or abuse, including such information and warnings available through signage or other written materials provided by the Department on the premises of such financial institutions, provided that the manner of displaying or distributing such information is subject to the sole discretion of each financial institution; and

(g-1) developing by joint rulemaking with the Department of Financial and Professional Regulation minimum training standards which shall be used by financial institutions for their current and new employees with direct customer contact; the Department of Financial and Professional Regulation shall retain sole visitation and enforcement authority under this subsection (g-1); the Department of Financial and Professional Regulation shall provide bi-annual reports to the Department setting forth aggregate statistics on the training programs required under this subsection (g-1). ~~; and~~

~~(h) coordinating efforts with utility and electric companies to send notices in utility bills to explain to persons 60 years of age or older their rights regarding telemarketing and home repair fraud.~~

(Source: P.A. 102-244, eff. 1-1-22; 102-538, eff. 8-20-21; 102-813, eff. 5-13-22.)

(320 ILCS 20/4) (from Ch. 23, par. 6604)

Sec. 4. Reports of abuse, abandonment, or neglect.

(a) Any person who suspects the abuse, abandonment, neglect, financial exploitation, or self-neglect of an eligible adult may report this suspicion or information about the suspicious death of an eligible adult to an agency designated to receive such reports under this Act or to the Department.

(a-5) If any mandated reporter has reason to believe that an eligible adult, who because of a disability or other condition or impairment is unable to seek assistance for himself or herself, has, within the previous 12 months, been subjected to abuse, abandonment, neglect, or financial exploitation, the mandated reporter shall, within 24 hours after developing such belief, report this suspicion to an agency designated to receive such reports under this Act or to the Department. The agency designated to receive such reports under this Act or the Department may establish a manner in which a mandated reporter can make the required report through an Internet reporting tool. Information sent and received through the Internet reporting tool is subject to the same rules in this Act as other types of confidential reporting established by the designated agency or the Department. Whenever a mandated reporter is required to report under this Act in his or her capacity as a member of the staff of a medical or other public or private institution, facility, or agency, he or she shall make a report to an agency designated to receive such reports under this Act or to the Department in accordance with the provisions of this Act and may also notify the person in charge of the institution, facility, or agency or his or her designated agent that the report has been made. Under no circumstances shall any person in charge of such institution, facility, or agency, or his or her designated agent to whom the notification has been made, exercise any control, restraint, modification, or other change in the report or the forwarding of the report to an agency designated to receive such reports under this Act or to the Department. The privileged quality of communication between any professional person required to report and his or her patient or client shall not apply to situations involving abused, abandoned, neglected, or financially exploited eligible adults and shall not constitute grounds for failure to report as required by this Act.

(a-6) If a mandated reporter has reason to believe that the death of an eligible adult may be the result of abuse or neglect, the matter shall be reported to an agency designated to receive such reports under this Act or to the Department for subsequent referral to the appropriate law enforcement agency and the coroner or medical examiner in accordance with subsection (c-5) of Section 3 of this Act.

(a-7) A person making a report under this Act in the belief that it is in the alleged victim's best interest shall be immune from criminal or civil liability or professional disciplinary action on account of making the

report, notwithstanding any requirements concerning the confidentiality of information with respect to such eligible adult which might otherwise be applicable.

(a-9) Law enforcement officers shall continue to report incidents of alleged abuse pursuant to the Illinois Domestic Violence Act of 1986, notwithstanding any requirements under this Act.

(b) Any person, institution or agency participating in the making of a report, providing information or records related to a report, assessment, or services, or participating in the investigation of a report under this Act in good faith, or taking photographs or x-rays as a result of an authorized assessment, shall have immunity from any civil, criminal or other liability in any civil, criminal or other proceeding brought in consequence of making such report or assessment or on account of submitting or otherwise disclosing such photographs or x-rays to any agency designated to receive reports of alleged or suspected abuse, abandonment, or neglect. Any person, institution or agency authorized by the Department to provide assessment, intervention, or administrative services under this Act shall, in the good faith performance of those services, have immunity from any civil, criminal or other liability in any civil, criminal, or other proceeding brought as a consequence of the performance of those services. For the purposes of any civil, criminal, or other proceeding, the good faith of any person required to report, permitted to report, or participating in an investigation of a report of alleged or suspected abuse, abandonment, neglect, financial exploitation, or self-neglect shall be presumed.

(c) The identity of a person making a report of alleged or suspected abuse, abandonment, neglect, financial exploitation, or self-neglect or a report concerning information about the suspicious death of an eligible adult under this Act may be disclosed by the Department or other agency provided for in this Act only with such person's written consent or by court order, but is otherwise confidential.

(d) The Department shall by rule establish a system for filing and compiling reports made under this Act.

(e) Any physician who willfully fails to report as required by this Act shall be referred to the Illinois State Medical Disciplinary Board for action in accordance with subdivision (A)(22) of Section 22 of the Medical Practice Act of 1987. Any dentist or dental hygienist who willfully fails to report as required by this Act shall be referred to the Department of Financial and Professional Regulation for possible disciplinary action ~~in accordance with paragraph 19 of Section 23 of the Illinois Dental Practice Act~~. Any optometrist who willfully fails to report as required by this Act shall be referred to the Department of Financial and Professional Regulation for action in accordance with paragraph (15) of subsection (a) of Section 24 of the Illinois Optometric Practice Act of 1987. Any other mandated reporter required by this Act to report suspected abuse, abandonment, neglect, or financial exploitation who willfully fails to report the same is guilty of a Class A misdemeanor.

(Source: P.A. 102-244, eff. 1-1-22; 103-329, eff. 1-1-24.)

(320 ILCS 20/5) (from Ch. 23, par. 6605)

Sec. 5. Procedure.

(a) A provider agency, upon receiving a report of alleged or suspected abuse, abandonment, neglect, or financial exploitation, shall conduct a face-to-face assessment with respect to such report, in accordance with established law and Department protocols, procedures, and policies. A provider agency that receives a report of self-neglect shall follow the procedures set forth in Section 5.1 ~~designated to receive reports of alleged or suspected abuse, abandonment, neglect, financial exploitation, or self-neglect under this Act shall, upon receiving such a report, conduct a face-to-face assessment with respect to such report, in accord with established law and Department protocols, procedures, and policies. Face-to-face assessments, casework, and follow-up of reports of self-neglect by the provider agencies designated to receive reports of self-neglect shall be subject to sufficient appropriation for statewide implementation of assessments, casework, and follow-up of reports of self-neglect. In the absence of sufficient appropriation for statewide implementation of assessments, casework, and follow-up of reports of self-neglect, the designated adult protective services provider agency shall refer all reports of self-neglect to the appropriate agency or agencies as designated by the Department for any follow-up~~.

(b) The assessment shall include, but not be limited to, a visit to the residence of the eligible adult who is the subject of the report and shall include interviews or consultations regarding the allegations with service agencies, immediate family members, and individuals who may have knowledge of the eligible adult's circumstances based on the consent of the eligible adult in all instances, except where the provider agency is acting in the best interest of an eligible adult who is unable to seek assistance for himself or herself and where there are allegations against a caregiver who has assumed responsibilities in exchange for compensation. If, after the assessment, the provider agency determines that the case is substantiated it shall

develop a service care plan for the eligible adult and may report its findings at any time during the case to the appropriate law enforcement agency in accord with established law and Department protocols, procedures, and policies. In developing a case plan, the provider agency may consult with any other appropriate provider of services, and such providers shall be immune from civil or criminal liability on account of such acts. The plan shall include alternative suggested or recommended services which are appropriate to the needs of the eligible adult and which involve the least restriction of the eligible adult's activities commensurate with his or her needs. Only those services to which consent is provided in accordance with Section 9 of this Act shall be provided, contingent upon the availability of such services.

(c) ~~(b)~~ A provider agency shall refer evidence of crimes against an eligible adult to the appropriate law enforcement agency according to Department policies. A referral to law enforcement may be made at intake, at any time during the case, or after a report of a suspicious death, depending upon the circumstances. Where a provider agency has reason to believe the death of an eligible adult may be the result of abuse, abandonment, or neglect, the agency shall immediately report the matter to the coroner or medical examiner and shall cooperate fully with any subsequent investigation.

(d) ~~(c)~~ If any person other than the alleged victim refuses to allow the provider agency to begin an investigation, interferes with the provider agency's ability to conduct an investigation, or refuses to give access to an eligible adult, the appropriate law enforcement agency must be consulted regarding the investigation.

(Source: P.A. 102-244, eff. 1-1-22; 103-329, eff. 1-1-24.)

(320 ILCS 20/5.1 new)

Sec. 5.1. Procedure for self-neglect.

(a) A provider agency, upon receiving a report of self-neglect, shall conduct no less than 2 unannounced face-to-face visits at the residence of the eligible adult to administer, upon consent, the eligibility screening. The eligibility screening is intended to quickly determine if the eligible adult is posing a substantial threat to themselves or others. A full assessment phase shall not be completed for self-neglect cases, and with individual consent, verified self-neglect cases shall immediately enter the casework phase to begin service referrals to mitigate risk unless self-neglect occurs concurrently with another reported abuse type (abuse, neglect, or exploitation), a full assessment shall occur.

(b) The eligibility screening shall include, but is not limited to:

(1) an interview with the eligible adult;

(2) with eligible adult consent, interviews or consultations regarding the allegations with immediate family members, and other individuals who may have knowledge of the eligible adult's circumstances; and

(3) an inquiry of active service providers engaged with the eligible adult who are providing services that are mitigating the risk identified on the intake. These services providers may be, but are not limited to:

(i) Managed care organizations.

(ii) Case coordination units.

(iii) The Department of Human Services' Division of Rehabilitation Services.

(iv) The Department of Human Services' Division of Developmental Disabilities.

(v) The Department of Human Services' Division of Mental Health.

(c) During the visit, a provider agency shall obtain the consent of the eligible adult before initiating the eligibility screening. If the eligible adult cannot consent and no surrogate decision maker is established, and where the provider agency is acting in the best interest of an eligible adult who is unable to seek assistance for themselves, the provider agency shall conduct the eligibility screening as described in subsection (b).

(d) When the eligibility screening indicates that the individual is experiencing self-neglect, the provider agency shall within 10 business days and with client consent, develop an initial case plan.

(e) In developing a case plan, the provider agency shall consult with any other appropriate provider of services to ensure no duplications of services. Such providers shall be immune from civil or criminal liability on account of such acts except for intentional, willful, or wanton misconduct.

(f) The case plan shall be client directed and include recommended services which are appropriate to the needs and wishes of the individual, and which involve the least restriction of the individual's activities commensurate with the individual's needs.

(g) Only those services to which consent is provided in accordance with Section 9 of this Act shall be provided, contingent upon the availability of such services.

(320 ILCS 20/6) (from Ch. 23, par. 6606)

Sec. 6. Time. The Department shall by rule establish the period of time within which an assessment or eligibility screening shall begin and within which a service care plan shall be implemented. Such rules shall provide for an expedited response to emergency situations.

(Source: P.A. 85-1184.)

(320 ILCS 20/7) (from Ch. 23, par. 6607)

Sec. 7. Review. All services provided to an eligible adult shall be reviewed by the provider agency on at least a quarterly basis for up to one year to determine whether the service care plan should be continued or modified, except that, upon review, the Department on Aging may grant a waiver to extend the service care plan for up to one additional year. Provider agencies shall demonstrate responsiveness and timeliness to eligible adult needs in the provision of services.

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

(320 ILCS 20/7.1)

Sec. 7.1. Final investigative report. A provider agency shall prepare a final investigative report, upon the completion or closure of an investigation, in all cases of reported abuse, abandonment, neglect, financial exploitation, or self-neglect of an eligible adult, whether or not there is a substantiated finding. Upon eligible adult consent, notice of findings shall be provided to the eligible adult, the alleged abuser or abusers, and the reporter by the provider agency at the point of substantiation when provision of such would not create an environment of harm to the eligible adult. When a report is accepted, a notice of findings shall include only substantiation type (Substantiated, No Jurisdiction, Unable to locate, not substantiated).

(Source: P.A. 102-244, eff. 1-1-22.)

(320 ILCS 20/9) (from Ch. 23, par. 6609)

Sec. 9. Authority to consent to services.

(a) If an eligible adult consents to an assessment of a reported incident of suspected abuse, abandonment, neglect, financial exploitation, or eligibility screening for self-neglect and, following the assessment of such report, consents to services being provided according to the case plan, such services shall be arranged to meet the adult's needs, based upon the availability of resources to provide such services. If an adult withdraws his or her consent for an assessment of the reported incident or withdraws his or her consent for services and refuses to accept such services, the services shall not be provided.

(b) If it reasonably appears to the Department or other agency designated under this Act that a person is an eligible adult and lacks the capacity to consent to an assessment, or eligibility screen, of a reported incident of suspected abuse, abandonment, neglect, financial exploitation, or self-neglect or to necessary services, the Department or other agency shall take appropriate action necessary to ameliorate risk to the eligible adult if there is a threat of ongoing harm or another emergency exists. Once the emergent risk has been mitigated, the ~~The~~ Department or the provider ~~other~~ agency shall be authorized to seek the appointment of a temporary guardian as provided in Article XIa of the Probate Act of 1975 or surrogate decision-maker for the purpose of consenting to an assessment or eligibility screen of the reported incident and such services, together with an order for an evaluation of the eligible adult's physical, psychological, and medical condition and decisional capacity.

(c) A guardian of the person of an eligible adult may consent to an assessment of the reported incident and to services being provided according to the case plan. If an eligible adult lacks capacity to consent, an agent having authority under a power of attorney may consent to an assessment of the reported incident and to services. If the guardian or agent is the suspected abuser and he or she withdraws consent for the assessment of the reported incident, or refuses to allow services to be provided to the eligible adult, the Department, an agency designated under this Act, or the office of the Attorney General may request a court order seeking appropriate remedies, and may in addition request removal of the guardian and appointment of a successor guardian or request removal of the agent and appointment of a guardian.

(d) If an emergency exists and the Department or other agency designated under this Act reasonably believes that a person is an eligible adult and lacks the capacity to consent to necessary services, the Department or other agency may request an ex parte order from the circuit court of the county in which the petitioner or respondent resides or in which the alleged abuse, abandonment, neglect, financial exploitation, or self-neglect occurred, authorizing an assessment of a report of alleged or suspected abuse, abandonment, neglect, financial exploitation, or self-neglect or the provision of necessary services, or both, including relief available under the Illinois Domestic Violence Act of 1986 in accord with established law and Department protocols, procedures, and policies. Petitions filed under this subsection shall be treated as expedited proceedings. When an eligible adult is at risk of serious injury or death and it reasonably appears that the

eligible adult lacks capacity to consent to necessary services, the Department or other agency designated under this Act may take action necessary to ameliorate the risk in accordance with administrative rules promulgated by the Department.

(d-5) For purposes of this Section, an eligible adult "lacks the capacity to consent" if qualified staff of an agency designated under this Act reasonably determine, in accordance with administrative rules promulgated by the Department, that he or she appears either (i) unable to receive and evaluate information related to the assessment or services or (ii) unable to communicate in any manner decisions related to the assessment of the reported incident or services.

(e) Within 15 days after the entry of the ex parte emergency order, the order shall expire, or, if the need for assessment of the reported incident or services continues, the provider agency shall petition for the appointment of a guardian as provided in Article XIa of the Probate Act of 1975 for the purpose of consenting to such assessment or services or to protect the eligible adult from further harm.

(f) If the court enters an ex parte order under subsection (d) for an assessment of a reported incident of alleged or suspected abuse, abandonment, neglect, financial exploitation, or self-neglect, or for the provision of necessary services in connection with alleged or suspected self-neglect, or for both, the court, as soon as is practicable thereafter, shall appoint a guardian ad litem for the eligible adult who is the subject of the order, for the purpose of reviewing the reasonableness of the order. The guardian ad litem shall review the order and, if the guardian ad litem reasonably believes that the order is unreasonable, the guardian ad litem shall file a petition with the court stating the guardian ad litem's belief and requesting that the order be vacated.

(g) In all cases in which there is a substantiated finding of abuse, abandonment, neglect, or financial exploitation by a guardian, the Department shall, within 30 days after the finding, notify the Probate Court with jurisdiction over the guardianship.

(Source: P.A. 102-244, eff. 1-1-22.)

(320 ILCS 20/15)

Sec. 15. Fatality review teams.

(a) State policy.

(1) Both the State and the community maintain a commitment to preventing the abuse, abandonment, neglect, and financial exploitation of at-risk adults. This includes a charge to bring perpetrators of crimes against at-risk adults to justice and prevent untimely deaths in the community.

(2) When an at-risk adult dies, the response to the death by the community, law enforcement, and the State must include an accurate and complete determination of the cause of death, and the development and implementation of measures to prevent future deaths from similar causes.

(3) Multidisciplinary and multi-agency reviews of deaths can assist the State and counties in developing a greater understanding of the incidence and causes of premature deaths and the methods for preventing those deaths, improving methods for investigating deaths, and identifying gaps in services to at-risk adults.

(4) Access to information regarding the deceased person and his or her family by multidisciplinary and multi-agency fatality review teams is necessary in order to fulfill their purposes and duties.

(a-5) Definitions. As used in this Section:

"Advisory Council" means the Illinois Fatality Review Team Advisory Council.

"Review Team" means a regional interagency fatality review team.

(b) The Director, in consultation with the Advisory Council, law enforcement, and other professionals who work in the fields of investigating, treating, or preventing abuse, abandonment, or neglect of at-risk adults, shall appoint members to a minimum of one review team in each of the Department's planning and service areas. If a review team in an established planning and service area may be better served combining with adjacent planning and service areas for greater access to cases or expansion of expertise, then the Department maintains the right to combine review teams. Each member of a review team shall be appointed for a 2-year term and shall be eligible for reappointment upon the expiration of the term. A review team's purpose in conducting review of at-risk adult deaths is: (i) to assist local agencies in identifying and reviewing suspicious deaths of adult victims of alleged, suspected, or substantiated abuse, abandonment, or neglect in domestic living situations; (ii) to facilitate communications between officials responsible for autopsies and inquests and persons involved in reporting or investigating alleged or suspected cases of abuse, abandonment, neglect, or financial exploitation of at-risk adults and persons involved in providing services to at-risk adults; (iii) to evaluate means by which the death might have been prevented; and (iv) to

report its findings to the appropriate agencies and the Advisory Council and make recommendations that may help to reduce the number of at-risk adult deaths caused by abuse, abandonment, and neglect and that may help to improve the investigations of deaths of at-risk adults and increase prosecutions, if appropriate.

(b-5) Each such team shall be composed of representatives of entities and individuals including, but not limited to:

(1) the Department on Aging or the delegated regional administrative agency as appointed by the Department;

(2) coroners or medical examiners (or both);

(3) State's Attorneys;

(4) local police departments;

(5) forensic units;

(6) local health departments;

(7) a social service or health care agency that provides services to persons with mental illness, in a program whose accreditation to provide such services is recognized by the Division of Mental Health within the Department of Human Services;

(8) a social service or health care agency that provides services to persons with developmental disabilities, in a program whose accreditation to provide such services is recognized by the Division of Developmental Disabilities within the Department of Human Services;

(9) a local hospital, trauma center, or provider of emergency medicine;

(10) providers of services for eligible adults in domestic living situations; and

(11) a physician, psychiatrist, or other health care provider knowledgeable about abuse, abandonment, and neglect of at-risk adults.

(c) A review team shall review cases of deaths of at-risk adults occurring in its planning and service area (i) involving blunt force trauma or an undetermined manner or suspicious cause of death; (ii) if requested by the deceased's attending physician or an emergency room physician; (iii) upon referral by a health care provider; (iv) upon referral by a coroner or medical examiner; (v) constituting an open or closed case from an adult protective services agency, law enforcement agency, State's Attorney's office, or the Department of Human Services' Office of the Inspector General that involves alleged or suspected abuse, abandonment, neglect, or financial exploitation; or (vi) upon referral by a law enforcement agency or State's Attorney's office. If such a death occurs in a planning and service area where a review team has not yet been established, the Director shall request that the Advisory Council or another review team review that death. A team may also review deaths of at-risk adults if the alleged abuse, abandonment, or neglect occurred while the person was residing in a domestic living situation.

A review team shall meet not less than 2 ~~4~~ times a year to discuss cases for its possible review. Each review team, with the advice and consent of the Department, shall establish criteria to be used in discussing cases of alleged, suspected, or substantiated abuse, abandonment, or neglect for review and shall conduct its activities in accordance with any applicable policies and procedures established by the Department.

(c-5) The Illinois Fatality Review Team Advisory Council, consisting of one member from each review team in Illinois, shall be the coordinating and oversight body for review teams and activities in Illinois. The Director may appoint to the Advisory Council any ex-officio members deemed necessary. Persons with expertise needed by the Advisory Council may be invited to meetings. The Advisory Council must select from its members a chairperson and a vice-chairperson, each to serve a 2-year term. The chairperson or vice-chairperson may be selected to serve additional, subsequent terms. The Advisory Council must meet at least 2 ~~4~~ times during each calendar year.

The Department may provide or arrange for the staff support necessary for the Advisory Council to carry out its duties. The Director, in cooperation and consultation with the Advisory Council, shall appoint, reappoint, and remove review team members.

The Advisory Council has, but is not limited to, the following duties:

(1) To serve as the voice of review teams in Illinois.

(2) To oversee the review teams in order to ensure that the review teams' work is coordinated and in compliance with State statutes and the operating protocol.

(3) To ensure that the data, results, findings, and recommendations of the review teams are adequately used in a timely manner to make any necessary changes to the policies, procedures, and State statutes in order to protect at-risk adults.

(4) To collaborate with the Department in order to develop any legislation needed to prevent unnecessary deaths of at-risk adults.

(5) To ensure that the review teams' review processes are standardized in order to convey data, findings, and recommendations in a usable format.

(6) To serve as a link with review teams throughout the country and to participate in national review team activities.

(7) To provide the review teams with the most current information and practices concerning at-risk adult death review and related topics.

(8) To perform any other functions necessary to enhance the capability of the review teams to reduce and prevent at-risk adult fatalities.

The Advisory Council may prepare an annual report, in consultation with the Department, using aggregate data gathered by review teams and using the review teams' recommendations to develop education, prevention, prosecution, or other strategies designed to improve the coordination of services for at-risk adults and their families.

In any instance where a review team does not operate in accordance with established protocol, the Director, in consultation and cooperation with the Advisory Council, must take any necessary actions to bring the review team into compliance with the protocol.

(d) Any document or oral or written communication shared within or produced by the review team relating to a case discussed or reviewed by the review team is confidential and is not admissible as evidence in any civil or criminal proceeding, except for use by a State's Attorney's office in prosecuting a criminal case against a caregiver. Those records and information are, however, subject to discovery or subpoena, and are admissible as evidence, to the extent they are otherwise available to the public.

Any document or oral or written communication provided to a review team by an individual or entity, and created by that individual or entity solely for the use of the review team, is confidential, is not subject to disclosure to or discoverable by another party, and is not admissible as evidence in any civil or criminal proceeding, except for use by a State's Attorney's office in prosecuting a criminal case against a caregiver. Those records and information are, however, subject to discovery or subpoena, and are admissible as evidence, to the extent they are otherwise available to the public.

Each entity or individual represented on the fatality review team may share with other members of the team information in the entity's or individual's possession concerning the decedent who is the subject of the review or concerning any person who was in contact with the decedent, as well as any other information deemed by the entity or individual to be pertinent to the review. Any such information shared by an entity or individual with other members of the review team is confidential. The intent of this paragraph is to permit the disclosure to members of the review team of any information deemed confidential or privileged or prohibited from disclosure by any other provision of law. Release of confidential communication between domestic violence advocates and a domestic violence victim shall follow subsection (d) of Section 227 of the Illinois Domestic Violence Act of 1986 which allows for the waiver of privilege afforded to guardians, executors, or administrators of the estate of the domestic violence victim. This provision relating to the release of confidential communication between domestic violence advocates and a domestic violence victim shall exclude adult protective service providers.

A coroner's or medical examiner's office may share with the review team medical records that have been made available to the coroner's or medical examiner's office in connection with that office's investigation of a death.

Members of a review team and the Advisory Council are not subject to examination, in any civil or criminal proceeding, concerning information presented to members of the review team or the Advisory Council or opinions formed by members of the review team or the Advisory Council based on that information. A person may, however, be examined concerning information provided to a review team or the Advisory Council.

(d-5) Meetings of the review teams and the Advisory Council are exempt from ~~may be closed to the public under~~ the Open Meetings Act. Records and information provided to a review team and the Advisory Council, and records maintained by a team or the Advisory Council, are exempt from release under the Freedom of Information Act.

(e) A review team's recommendation in relation to a case discussed or reviewed by the review team, including, but not limited to, a recommendation concerning an investigation or prosecution, may be disclosed by the review team upon the completion of its review and at the discretion of a majority of its members who reviewed the case.

(e-5) The State shall indemnify and hold harmless members of a review team and the Advisory Council for all their acts, omissions, decisions, or other conduct arising out of the scope of their service on

the review team or Advisory Council, except those involving willful or wanton misconduct. The method of providing indemnification shall be as provided in the State Employee Indemnification Act.

(f) The Department, in consultation with coroners, medical examiners, and law enforcement agencies, shall use aggregate data gathered by and recommendations from the Advisory Council and the review teams to create an annual report and may use those data and recommendations to develop education, prevention, prosecution, or other strategies designed to improve the coordination of services for at-risk adults and their families. The Department or other State or county agency, in consultation with coroners, medical examiners, and law enforcement agencies, also may use aggregate data gathered by the review teams to create a database of at-risk individuals.

(g) The Department shall adopt such rules and regulations as it deems necessary to implement this Section.

(Source: P.A. 102-244, eff. 1-1-22.)

(320 ILCS 20/14 rep.)

Section 15. The Adult Protective Services Act is amended by repealing Section 14.".

There being no further amendments, the foregoing Amendment No. 1 was ordered engrossed, and the bill, as amended, was ordered to a third reading.

On motion of Senator McClure, **Senate Bill No. 2832** having been printed, was taken up, read by title a second time and ordered to a third reading.

On motion of Senator McClure, **Senate Bill No. 2859** having been printed, was taken up, read by title a second time and ordered to a third reading.

On motion of Senator Morrison, **Senate Bill No. 2861** having been printed, was taken up, read by title a second time.

The following amendment was offered in the Committee on Education, adopted and ordered printed:

AMENDMENT NO. 1 TO SENATE BILL 2861

AMENDMENT NO. 1 . Amend Senate Bill 2861 by replacing everything after the enacting clause with the following:

"Section 5. The Interscholastic Athletic Organization Act is amended by adding Section 1.25 as follows:

(105 ILCS 25/1.25 new)

Sec. 1.25. Spirit Rules Book. An association or other entity that has, as one of its purposes, promoting, sponsoring, regulating, or in any manner providing for interscholastic athletics or any form of athletic competition among schools and students within this State shall adopt the Spirit Rules Book published by the National Federation of State High School Associations or a similar document as the safety standards for student cheerleaders, spirit groups, and their coaches who participate in any school activity or extracurricular student activity sponsored or sanctioned by that association or other entity.

Section 99. Effective date. This Act takes effect January 1, 2025.".

There being no further amendments, the foregoing Amendment No. 1 was ordered engrossed, and the bill, as amended, was ordered to a third reading.

On motion of Senator Morrison, **Senate Bill No. 2849** having been printed, was taken up, read by title a second time.

The following amendment was offered in the Committee on Executive, adopted and ordered printed:

AMENDMENT NO. 1 TO SENATE BILL 2849

AMENDMENT NO. 1 . Amend Senate Bill 2849 by replacing everything after the enacting clause with the following:

"Section 5. The Illinois Aeronautics Act is amended by changing Section 42.1 as follows:

(620 ILCS 5/42.1)

Sec. 42.1. Regulation of unmanned aircraft systems.

(a) As used in this Section:

"Unmanned aircraft" means a device used or intended to be used for flight in the air that is operated without the possibility of direct human intervention within or on the device.

"Unmanned aircraft system" means an unmanned aircraft and its associated elements, including communication links and the components that control the unmanned aircraft, that are required for the safe and efficient operation of the unmanned aircraft in the National Airspace System ~~national airspace system~~.

(b) Except as otherwise provided in this Section, to ~~To~~ the extent that State-level oversight does not conflict with federal laws, rules, or regulations, the regulation of an unmanned aircraft system is an exclusive power and function of the State. No unit of local government, including home rule unit, may enact an ordinance or resolution to regulate unmanned aircraft systems. This Section is a denial and limitation of home rule powers and functions under subsection (h) of Section 6 of Article VII of the Illinois Constitution. This Section does not apply to any local ordinance enacted by a municipality of more than 1,000,000 inhabitants.

(b-5) Nothing in this Section shall be construed to deny a unit of local government the right to adopt reasonable rules related to the use by a private party of airspace that is above ground level of public property owned or controlled by that unit of local government. This subsection applies to publicly owned or controlled property that is intended or permitted to be used for recreational or conservation purposes, including, but not limited to, parks, playgrounds, aquatic facilities, wildlife areas, or other recreational facilities. Reasonable rules adopted pursuant to this subsection shall not supersede any administrative rules adopted by the Department or any federal laws, rules, or regulations.

(c) Nothing in this Section shall infringe or impede any current right or remedy available under existing State law.

(d) The Department may adopt any rules that it finds appropriate to address the safe and legal operation of unmanned aircraft systems in this State, so that those engaged in the operation of unmanned aircraft systems may so engage with the least possible restriction, consistent with their safety and with the safety and the rights of others, and in compliance with federal rules and regulations.

(Source: P.A. 100-735, eff. 8-3-18.)

Section 99. Effective date. This Act takes effect upon becoming law.".

There being no further amendments, the foregoing Amendment No. 1 was ordered engrossed, and the bill, as amended, was ordered to a third reading.

On motion of Senator Ventura, **Senate Bill No. 2872** having been printed, was taken up, read by title a second time.

The following amendment was offered in the Committee on Education, adopted and ordered printed:

AMENDMENT NO. 1 TO SENATE BILL 2872

AMENDMENT NO. 1 . Amend Senate Bill 2872 as follows:

on page 1, line 8, by replacing "shall" with "may"; and

on page 1, line 9, by replacing "once a week," with "20 minutes a week of"; and

on page 1, line 16, by replacing "local community-based" with "public and private community".

There being no further amendments, the foregoing Amendment No. 1 was ordered engrossed, and the bill, as amended, was ordered to a third reading.

On motion of Senator Martwick, **Senate Bill No. 2920** having been printed, was taken up, read by title a second time and ordered to a third reading.

On motion of Senator Johnson, **Senate Bill No. 2930** having been printed, was taken up, read by title a second time.

Committee Amendment No. 1 was postponed in the Committee on Judiciary.

The following amendment was offered in the Committee on Judiciary, adopted and ordered printed:

AMENDMENT NO. 2 TO SENATE BILL 2930

AMENDMENT NO. 2 . Amend Senate Bill 2930 by replacing everything after the enacting clause with the following:

"Section 5. The General Not For Profit Corporation Act of 1986 is amended by adding Section 114.15 as follows:

(805 ILCS 105/114.15 new)

Sec. 114.15. Demographic information of directors and officers.

(a) Within 30 days after filing its annual AG990-IL Charitable Organization Annual Report, a corporation that reports grants of $1,000,000 or more to other charitable organizations shall post on its publicly available website, if one exists, the aggregated demographic information of the corporation's directors and officers, including race, ethnicity, gender, disability status, veteran status, sexual orientation, and gender identity. The aggregated demographic information shall be accessible on the corporation's publicly available website for at least 3 years after it is posted.

(b) The Department of Human Rights shall work with community partners to prepare and publish a standardized list of demographic classifications to be used by corporations for the reporting of the aggregated demographic information of a corporation's directors and officers, including race, ethnicity, gender, disability status, veteran status, sexual orientation, and gender identity. The Department of Human Rights shall periodically review and update the list.

(c) In collecting the aggregated demographic information of its directors and officers, a corporation shall allow for an individual to decline to disclose any or all personal demographic information to the corporation.

Section 99. Effective date. This Act takes effect January 1, 2025.".

There being no further amendments, the foregoing Amendment No. 2 was ordered engrossed, and the bill, as amended, was ordered to a third reading.

On motion of Senator Stadelman, **Senate Bill No. 2933** having been printed, was taken up, read by title a second time.

The following amendment was offered in the Committee on Judiciary, adopted and ordered printed:

AMENDMENT NO. 1 TO SENATE BILL 2933

AMENDMENT NO. 1 . Amend Senate Bill 2933 on page 1, line 23, after "devices.", by inserting ""Medical debt" does not include debt charged to a credit card, but does include an open-end or closed-end extension of credit made by a financial institution to a borrower that may be used by the borrower solely for the purpose of the purchase of health care services.".

There being no further amendments, the foregoing Amendment No. 1 was ordered engrossed, and the bill, as amended, was ordered to a third reading.

On motion of Senator Stadelman, **Senate Bill No. 2934** having been printed, was taken up, read by title a second time and ordered to a third reading.

On motion of Senator Stadelman, **Senate Bill No. 2935** having been printed, was taken up, read by title a second time.

The following amendment was offered in the Committee on Judiciary, adopted and ordered printed:

AMENDMENT NO. 1 TO SENATE BILL 2935

AMENDMENT NO. 1 . Amend Senate Bill 2935 by replacing everything after the enacting clause with the following:

"Section 5. The Mobile Home Landlord and Tenant Rights Act is amended by adding Sections 6.25, 6.26, 6.27, 6.28, 6.29, 6.30, and 6.31 as follows:

(765 ILCS 745/6.25 new)

Sec. 6.25. Sale of mobile home parks; right of first refusal.

(a) If a mobile home park owner offers a mobile home park for sale, the owner shall provide written notice to the officers of the homeowners' association created pursuant to Section 6.27 of the offer stating the price and the terms and conditions of sale.

(b) The mobile home owners, by and through a homeowners' association as defined in Section 6.27, shall have the right to purchase the park provided the home owners and residents meet the price and terms and conditions of the mobile home park owner by executing a contract with the park owner within 60 days, unless agreed to otherwise, from the date of mailing of the notice and provided they have complied with Sections 6.27 through 6.31. If a contract between the park owner and the association is not executed within such 60-day period, then, unless the park owner thereafter elects to offer the park at a price materially lower than the price specified in the notice provided to the officers of the homeowners' association and residents, as the case may be, the park owner has no further obligations under this subsection. For purposes of this Section, a materially lower price shall be a price that is 20% or more lower than the price specified in the notice to the officers of the homeowners' association.

(c) If the park owner thereafter elects to offer the park at a price materially lower than the price specified in the notice, the homeowners, by and through the association, will have an additional 10 days to meet the price and terms and conditions of the park owner by executing a contract.

(d) If, within 60 days, plus any additional 10-day period, from the mailing of the notice required in this Section, no contract for sale signed by the association and the park owner has been reached, the right provided in this Section to purchase the park shall be void and of no further force and effect.

(e) Notices required by this Section shall be in writing and shall be delivered by placing the notice in the United States mail addressed to the officers of the homeowners' association. Each notice shall be deemed given upon the deposit of the notice in the United States mail.

(f) As used in this Section, "offer" means any solicitation made by the park owner to the general public.

(g) This Section does not apply to:

(1) Any sale or transfer to a person who would be included within the table of descent and distribution if the park owner were to die intestate.

(2) Any transfer by gift, devise, or operation of law.

(3) Any transfer by a corporation or entity to an affiliate. As used herein, "affiliate" means any shareholder of the transferring corporation or entity; any corporation or entity owned or controlled, directly or indirectly, by any shareholder of the transferring corporation; or any other corporation or entity owned or controlled, directly or indirectly, by any shareholder of the transferring corporation or entity.

(4) Any transfer by a partnership to any of its partners or by an individual or group of individuals to a partnership.

(5) Any conveyance of an interest in all or a portion of a mobile home park incidental to the financing of such mobile home park.

(6) Any conveyance resulting from the foreclosure of a mortgage, deed of trust, or other instrument encumbering a mobile home park or any deed given in lieu of foreclosure.

(7) Any sale or transfer between or among joint tenants or tenants in common owning a mobile home park.

(8) Any exchange of a mobile home park for other real property, whether or not the exchange also involves the payment of cash or other boot.

(9) The purchase of a mobile home park by a governmental entity under its powers of eminent domain.

(10) The sale of any mobile home park as part of a portfolio transaction. For purposes of this provision, "portfolio transaction" means a sale of 2 or more mobile home parks, other multifamily

buildings, units or properties of any type, RV parks in one transaction to one buyer, or multiple related buyers.

(765 ILCS 745/6.26 new)

Sec. 6.26. Affidavit of compliance with statutory requirements.

(a) A park owner may at any time record, in the official real estate records of the county or jurisdiction where a mobile home park is located, an affidavit in which the park owner certifies that: (i) with reference to an offer by the park owner for the sale of the park, the park owner has complied with the provisions of Section 6.25; (ii) notwithstanding the park owner's compliance with the provisions of Section 6.25, no contract has been executed for the sale of the park between the park owner and the park homeowners' association; (iii) the provisions of Section 6.25 are inapplicable to a particular sale or transfer of the park by the park owner and compliance with Section 6.25 is not required; or (iv) a particular sale or transfer of the park is exempted from the provisions of this Section. Any party acquiring an interest in a mobile home park and any and all title insurance companies and attorneys preparing, furnishing, or examining any evidence of title have the absolute right to rely on the truth and accuracy of all statements appearing in the affidavit and are under no obligation to inquire further as to any matter or fact relating to the park owner's compliance with the provisions of Section 6.25.

(b) It is the purpose and intention of this Section to preserve the marketability of title to mobile home parks, and, accordingly, the provisions of this Section shall be liberally construed in order that all persons may rely on the record title to mobile home parks.

(765 ILCS 745/6.27 new)

Sec. 6.27. Homeowners' associations. In order to exercise the rights of a homeowners' association as provided in this Act, the mobile home owners shall form an association in compliance with this Section and Sections 6.28, 6.29, and 6.30, shall be a corporation or not-for-profit corporation and of which not less than two-thirds of all of the mobile home owners within the park shall have consented, in writing, to become members or shareholders. Upon incorporation of the association, all consenting mobile home owners in the park may become members or shareholders. "Member" or "shareholder" means a mobile homeowner who consents to be bound by the articles of incorporation, bylaws, and policies of the incorporated homeowners' association. The association may not have a member or shareholder who is not a bona fide owner of a mobile home located in the park. Upon incorporation and service of the notice described in Section 6.28, the association shall become the representative of all the mobile home owners in all matters relating to this Act, regardless of whether the homeowner is a member of the association.

(765 ILCS 745/6.28 new)

Sec. 6.28. Incorporation; notification of park owner.

(a) Upon receipt of its certificate of incorporation, the homeowners' association shall notify the park owner in writing of the incorporation and shall advise the park owner of the names and addresses of the officers of the homeowners' association by personal delivery upon the park owner's representative as designated in the lease or by certified mail, return receipt requested. Thereafter, the homeowners' association shall notify the park owner in writing by certified mail, return receipt requested, of any change of names and addresses of its president or registered agent. Upon election or appointment of new officers or board members, the homeowners' association shall notify the park owner in writing by certified mail, return receipt requested, of the names and addresses of the new officers or board members.

(b) Upon written request by the homeowners' association, the park owner shall notify the homeowners' association by certified mail, return receipt requested, of the name and address of the park owner, the park owner's agent for service of process, and the legal description of the park. Thereafter, in the event of a change in the name or address of the park owner or the park owner's agent for service of process, the park owner shall notify in writing the president or registered agent of the homeowners' association of such change by certified mail, return receipt requested.

(c) The homeowners' association shall file a notice of its right to purchase the mobile home park as set forth in Section 6.25. The notice shall contain the name of the association, the name of the park owner, and the address or legal description of the park. The notice shall be recorded with the county clerk in the county where the mobile home park is located. Within 10 days of the recording, the homeowners' association shall provide a copy of the recorded notice to the park owner at the address provided by the park owner by certified mail, return receipt requested.

(765 ILCS 745/6.29 new)

Sec. 6.29. Articles of incorporation. The articles of incorporation of a homeowners' association shall provide:

(1) That the association has the power to negotiate for, acquire, and operate the mobile home park on behalf of the mobile home owners.

(2) For the conversion of the mobile home park once acquired to a condominium, a cooperative, a subdivision form of ownership, or another type of ownership.

Upon acquisition of the property, the association, by action of its board of directors, shall be the entity that: (A) creates a condominium, cooperative, or subdivision; (B) is responsible for offers of sale or lease; or (C) if the home owners choose a different form of ownership, the entity that owns the record interest in the property is responsible for the operation of property.

(765 ILCS 745/6.30 new)

Sec. 6.30. Bylaws of homeowners' associations.

(a) The directors of the association and the operation shall be governed by the bylaws.

(b) The bylaws shall provide and, if they do not, shall be deemed to include, the following provisions:

(1) The form of administration of the association shall be described, providing for the titles of the officers and for a board of directors and specifying the powers, duties, manner of selection and removal, and compensation, if any, of officers and board members. Unless otherwise provided in the bylaws, the board of directors shall be composed of 5 members. The board of directors shall elect a president, secretary, and treasurer who shall perform the duties of those offices customarily performed by officers of corporations, and these officers shall serve without compensation and at the pleasure of the board of directors. The board of directors may elect and designate other officers and grant them those duties it deems appropriate.

(2) All other administrative and governance requirements to be included in the bylaws shall be as set forth in the Common Interest Community Association Act.

(765 ILCS 745/6.31 new)

Sec. 6.31. Powers and duties of homeowners' association.

(a) An association may contract, sue, or be sued with respect to the exercise or nonexercise of its powers. For these purposes, the powers of the association include, but are not limited to, the maintenance, management, and operation of the park property.

(b) The powers and duties of an association include those set forth in this Act and those set forth in the articles of incorporation and bylaws and any recorded declarations or restrictions encumbering the park property, if not inconsistent with this Act.

(c) An association has the power to make, levy, and collect assessments and to lease, maintain, repair, and replace the common areas upon purchase of the mobile home park.

(d) The association shall maintain the following items, when applicable, which constitute the official records of the association:

(1) A copy of the association's articles of incorporation and each amendment to the articles of incorporation.

(2) A copy of the bylaws of the association and each amendment to the bylaws.

(3) A copy of the written rules or policies of the association and each amendment to the written rules or policies.

(4) The approved minutes of all meetings of the members of an association and meetings open for members of the board of directors, and committees of the board, which minutes must be retained within this State for at least 5 years.

(5) A current roster of all members and their mailing addresses and lot identifications. The association shall also maintain the e-mail addresses and the numbers designated by members for receiving notice sent by electronic transmission of those members consenting to receive notice by electronic transmission. The e-mail addresses and numbers provided by members to receive notice by electronic transmission shall be removed from association records when consent to receive notice by electronic transmission is revoked. The association is not liable for an erroneous disclosure of the e-mail address or the number for receiving electronic transmission of notices.

(6) All of the association's insurance policies or copies thereof, which must be retained within this State for at least 5 years after the expiration date of the policy.

(7) A copy of all contracts or agreements to which the association is a party, including, without limitation, any written agreements with the park owner, lease, or other agreements or contracts under which the association or its members has any obligation or responsibility, which must be retained within this State for at least 5 years after the expiration date of the contract or agreement.

(8) The financial and accounting records of the association, kept according to good accounting practices. All financial and accounting records must be maintained within this State for at least 5 years. The financial and accounting records must include:

(A) Accurate, itemized, and detailed records of all receipts and expenditures.

(B) A current account and a periodic statement of the account for each member, designating the name and current address of each member who is obligated to pay dues or assessments, the due date and amount of each assessment or other charge against the member, the date and amount of each payment on the account, and the balance due.

(C) All tax returns, financial statements, and financial reports of the association.

(D) Any other records that identify, measure, record, or communicate financial information.

(i) All other written records of the association not specifically included in this Section that are related to the operation of the association must be retained within this State for at least 5 years or at least 5 years after the expiration date, as applicable.

(e) The official records shall be made available to a member for inspection or photocopying within 20 business days after receipt by the board or its designee of a written request submitted by certified mail, return receipt requested. The requirements of this Section are satisfied by having a copy of the official records available for inspection or copying in the park or, at the option of the association, by making the records available to a member electronically via the Internet or by allowing the records to be viewed in electronic format on a computer screen and printed upon request. If the association has a photocopy machine available where the records are maintained, it must provide a member with copies on request during the inspection if the entire request is no more than 25 pages. An association shall allow a member or his or her authorized representative to use a portable device, including a smartphone, tablet, portable scanner, or any other technology capable of scanning or taking photographs, to make an electronic copy of the official records in lieu of the association's providing the member or his or her authorized representative with a copy of such records. The association may not charge a fee to a member or his or her authorized representative for the use of a portable device.

(1) The failure of an association to provide access to the records within 20 business days after receipt of a written request submitted by certified mail, return receipt requested, creates a rebuttable presumption that the association willfully failed to comply with this subsection.

(2) The association may adopt reasonable written rules governing the frequency, time, location, notice, records to be inspected, and manner of inspections, but may not require a member to demonstrate a proper purpose for the inspection, state a reason for the inspection, or limit a member's right to inspect records to less than one business day per month. The association may impose fees to cover the costs of providing copies of the official records, including the costs of copying and for personnel to retrieve and copy the records if the time spent retrieving and copying the records exceeds 30 minutes and if the personnel costs do not exceed $20 per hour. The association shall maintain an adequate number of copies of the recorded governing documents, to ensure their availability to members and prospective members. Notwithstanding this paragraph, the following records are not accessible to members or homeowners:

(A) A record protected by the lawyer-client privilege and a record protected by the work-product privilege, including, but not limited to, a record prepared by an association attorney or prepared at the attorney's express direction that reflects a mental impression, conclusion, litigation strategy, or legal theory of the attorney or the association and that was prepared exclusively for civil or criminal litigation, for adversarial administrative proceedings, or in anticipation of such litigation or proceedings until the conclusion of the litigation or proceedings.

(B) E-mail addresses, telephone numbers, facsimile numbers, emergency contact information, any addresses for a homeowner other than as provided for association notice requirements, and other personal identifying information of any person, excluding the person's name, lot designation, mailing address, and property address. Notwithstanding the restrictions in this subparagraph, an association may print and distribute to homeowners a directory containing the name, park address, and telephone number of each homeowner. A homeowner may exclude his or her telephone number from the directory by so requesting in writing to the association. The association is not liable for the disclosure of information that is protected under

this subparagraph if the information is included in an official record of the association and is voluntarily provided by a homeowner and not requested by the association.

(C) An electronic security measure that is used by the association to safeguard data, including passwords.

(D) The software and operating system used by the association that allows the manipulation of data, even if the homeowner owns a copy of the same software used by the association. The data is part of the official records of the association.

(f) An outgoing board or committee member must relinquish all official records and property of the association in his or her possession or under his or her control to the incoming board within 5 days after the election or removal.

(g) An association has the power to purchase lots in the park and to acquire, hold, lease, mortgage, and convey them.

(h) An association shall use its best efforts to obtain and maintain adequate insurance to protect the association and the park property upon purchase of the mobile home park. A copy of each policy of insurance in effect shall be made available for inspection by owners at reasonable times.

(i) An association has the authority, without the joinder of any homeowner, to modify, move, or create any easement for ingress and egress or for the purpose of utilities if the easement constitutes part of or crosses the park property upon purchase of the mobile home park. This subsection does not authorize the association to modify or move any easement created in whole or in part for the use or benefit of anyone other than the members or crossing the property of anyone other than the members, without his or her consent or approval as required by law or the instrument creating the easement. Nothing in this subsection affects the rights of ingress or egress of any member of the association.".

There being no further amendments, the foregoing Amendment No. 1 was ordered engrossed, and the bill, as amended, was ordered to a third reading.

On motion of Senator Fine, **Senate Bill No. 2938** having been printed, was taken up, read by title a second time and ordered to a third reading.

On motion of Senator Bennett, **Senate Bill No. 2959** having been printed, was taken up, read by title a second time.

The following amendment was offered in the Committee on Transportation, adopted and ordered printed:

AMENDMENT NO. 1 TO SENATE BILL 2959

AMENDMENT NO. 1 . Amend Senate Bill 2959 by replacing everything after the enacting clause with the following:

"Section 5. The State Finance Act is amended by adding Section 5.1015 as follows:
(30 ILCS 105/5.1015 new)
Sec. 5.1015. The Sons of the American Legion Fund.

Section 10. The Illinois Vehicle Code is amended by changing Section 3-699.14 as follows:
(625 ILCS 5/3-699.14)
Sec. 3-699.14. Universal special license plates.

(a) In addition to any other special license plate, the Secretary, upon receipt of all applicable fees and applications made in the form prescribed by the Secretary, may issue Universal special license plates to residents of Illinois on behalf of organizations that have been authorized by the General Assembly to issue decals for Universal special license plates. Appropriate documentation, as determined by the Secretary, shall accompany each application. Authorized organizations shall be designated by amendment to this Section. When applying for a Universal special license plate the applicant shall inform the Secretary of the name of the authorized organization from which the applicant will obtain a decal to place on the plate. The Secretary shall make a record of that organization and that organization shall remain affiliated with that plate until the plate is surrendered, revoked, or otherwise cancelled. The authorized organization may charge a fee to offset the cost of producing and distributing the decal, but that fee shall be retained by the authorized organization and shall be separate and distinct from any registration fees charged by the Secretary. No decal, sticker, or

other material may be affixed to a Universal special license plate other than a decal authorized by the General Assembly in this Section or a registration renewal sticker. The special plates issued under this Section shall be affixed only to passenger vehicles of the first division, including motorcycles and autocycles, or motor vehicles of the second division weighing not more than 8,000 pounds. Plates issued under this Section shall expire according to the multi-year procedure under Section 3-414.1 of this Code.

(b) The design, color, and format of the Universal special license plate shall be wholly within the discretion of the Secretary. Universal special license plates are not required to designate "Land of Lincoln", as prescribed in subsection (b) of Section 3-412 of this Code. The design shall allow for the application of a decal to the plate. Organizations authorized by the General Assembly to issue decals for Universal special license plates shall comply with rules adopted by the Secretary governing the requirements for and approval of Universal special license plate decals. The Secretary may, in his or her discretion, allow Universal special license plates to be issued as vanity or personalized plates in accordance with Section 3-405.1 of this Code. The Secretary of State must make a version of the special registration plates authorized under this Section in a form appropriate for motorcycles and autocycles.

(c) When authorizing a Universal special license plate, the General Assembly shall set forth whether an additional fee is to be charged for the plate and, if a fee is to be charged, the amount of the fee and how the fee is to be distributed. When necessary, the authorizing language shall create a special fund in the State treasury into which fees may be deposited for an authorized Universal special license plate. Additional fees may only be charged if the fee is to be paid over to a State agency or to a charitable entity that is in compliance with the registration and reporting requirements of the Charitable Trust Act and the Solicitation for Charity Act. Any charitable entity receiving fees for the sale of Universal special license plates shall annually provide the Secretary of State a letter of compliance issued by the Attorney General verifying that the entity is in compliance with the Charitable Trust Act and the Solicitation for Charity Act.

(d) Upon original issuance and for each registration renewal period, in addition to the appropriate registration fee, if applicable, the Secretary shall collect any additional fees, if required, for issuance of Universal special license plates. The fees shall be collected on behalf of the organization designated by the applicant when applying for the plate. All fees collected shall be transferred to the State agency on whose behalf the fees were collected, or paid into the special fund designated in the law authorizing the organization to issue decals for Universal special license plates. All money in the designated fund shall be distributed by the Secretary subject to appropriation by the General Assembly.

(e) The following organizations may issue decals for Universal special license plates with the original and renewal fees and fee distribution as follows:

(1) The Illinois Department of Natural Resources.

(A) Original issuance: $25; with $10 to the Roadside Monarch Habitat Fund and $15 to the Secretary of State Special License Plate Fund.

(B) Renewal: $25; with $23 to the Roadside Monarch Habitat Fund and $2 to the Secretary of State Special License Plate Fund.

(2) Illinois Veterans' Homes.

(A) Original issuance: $26, which shall be deposited into the Illinois Veterans' Homes Fund.

(B) Renewal: $26, which shall be deposited into the Illinois Veterans' Homes Fund.

(3) The Illinois Department of Human Services for volunteerism decals.

(A) Original issuance: $25, which shall be deposited into the Secretary of State Special License Plate Fund.

(B) Renewal: $25, which shall be deposited into the Secretary of State Special License Plate Fund.

(4) The Illinois Department of Public Health.

(A) Original issuance: $25; with $10 to the Prostate Cancer Awareness Fund and $15 to the Secretary of State Special License Plate Fund.

(B) Renewal: $25; with $23 to the Prostate Cancer Awareness Fund and $2 to the Secretary of State Special License Plate Fund.

(5) Horsemen's Council of Illinois.

(A) Original issuance: $25; with $10 to the Horsemen's Council of Illinois Fund and $15 to the Secretary of State Special License Plate Fund.

(B) Renewal: $25; with $23 to the Horsemen's Council of Illinois Fund and $2 to the Secretary of State Special License Plate Fund.

(6) K9s for Veterans, NFP.

(A) Original issuance: $25; with $10 to the Post-Traumatic Stress Disorder Awareness Fund and $15 to the Secretary of State Special License Plate Fund.

(B) Renewal: $25; with $23 to the Post-Traumatic Stress Disorder Awareness Fund and $2 to the Secretary of State Special License Plate Fund.

(7) The International Association of Machinists and Aerospace Workers.

(A) Original issuance: $35; with $20 to the Guide Dogs of America Fund and $15 to the Secretary of State Special License Plate Fund.

(B) Renewal: $25; with $23 going to the Guide Dogs of America Fund and $2 to the Secretary of State Special License Plate Fund.

(8) Local Lodge 701 of the International Association of Machinists and Aerospace Workers.

(A) Original issuance: $35; with $10 to the Guide Dogs of America Fund, $10 to the Mechanics Training Fund, and $15 to the Secretary of State Special License Plate Fund.

(B) Renewal: $30; with $13 to the Guide Dogs of America Fund, $15 to the Mechanics Training Fund, and $2 to the Secretary of State Special License Plate Fund.

(9) Illinois Department of Human Services.

(A) Original issuance: $25; with $10 to the Theresa Tracy Trot - Illinois CancerCare Foundation Fund and $15 to the Secretary of State Special License Plate Fund.

(B) Renewal: $25; with $23 to the Theresa Tracy Trot - Illinois CancerCare Foundation Fund and $2 to the Secretary of State Special License Plate Fund.

(10) The Illinois Department of Human Services for developmental disabilities awareness decals.

(A) Original issuance: $25; with $10 to the Developmental Disabilities Awareness Fund and $15 to the Secretary of State Special License Plate Fund.

(B) Renewal: $25; with $23 to the Developmental Disabilities Awareness Fund and $2 to the Secretary of State Special License Plate Fund.

(11) The Illinois Department of Human Services for pediatric cancer awareness decals.

(A) Original issuance: $25; with $10 to the Pediatric Cancer Awareness Fund and $15 to the Secretary of State Special License Plate Fund.

(B) Renewal: $25; with $23 to the Pediatric Cancer Awareness Fund and $2 to the Secretary of State Special License Plate Fund.

(12) The Department of Veterans' Affairs for Fold of Honor decals.

(A) Original issuance: $25; with $10 to the Folds of Honor Foundation Fund and $15 to the Secretary of State Special License Plate Fund.

(B) Renewal: $25; with $23 to the Folds of Honor Foundation Fund and $2 to the Secretary of State Special License Plate Fund.

(13) The Illinois chapters of the Experimental Aircraft Association for aviation enthusiast decals.

(A) Original issuance: $25; with $10 to the Experimental Aircraft Association Fund and $15 to the Secretary of State Special License Plate Fund.

(B) Renewal: $25; with $23 to the Experimental Aircraft Association Fund and $2 to the Secretary of State Special License Plate Fund.

(14) The Illinois Department of Human Services for Child Abuse Council of the Quad Cities decals.

(A) Original issuance: $25; with $10 to the Child Abuse Council of the Quad Cities Fund and $15 to the Secretary of State Special License Plate Fund.

(B) Renewal: $25; with $23 to the Child Abuse Council of the Quad Cities Fund and $2 to the Secretary of State Special License Plate Fund.

(15) The Illinois Department of Public Health for health care worker decals.

(A) Original issuance: $25; with $10 to the Illinois Health Care Workers Benefit Fund, and $15 to the Secretary of State Special License Plate Fund.

(B) Renewal: $25; with $23 to the Illinois Health Care Workers Benefit Fund and $2 to the Secretary of State Special License Plate Fund.

(16) The Department of Agriculture for Future Farmers of America decals.

(A) Original issuance: $25; with $10 to the Future Farmers of America Fund and $15 to the Secretary of State Special License Plate Fund.

(B) Renewal: $25; with $23 to the Future Farmers of America Fund and $2 to the Secretary of State Special License Plate Fund.

(17) The Illinois Department of Public Health for autism awareness decals that are designed with input from autism advocacy organizations.

(A) Original issuance: $25; with $10 to the Autism Awareness Fund and $15 to the Secretary of State Special License Plate Fund.

(B) Renewal: $25; with $23 to the Autism Awareness Fund and $2 to the Secretary of State Special License Plate Fund.

(18) ~~(17)~~ The Department of Natural Resources for Lyme disease research decals.

(A) Original issuance: $25; with $10 to the Tick Research, Education, and Evaluation Fund and $15 to the Secretary of State Special License Plate Fund.

(B) Renewal: $25; with $23 to the Tick Research, Education, and Evaluation Fund and $2 to the Secretary of State Special License Plate Fund.

(19) ~~(17)~~ The IBEW Thank a Line Worker decal.

(A) Original issuance: $15, which shall be deposited into the Secretary of State Special License Plate Fund.

(B) Renewal: $2, which shall be deposited into the Secretary of State Special License Plate Fund.

(20) The Sons of the American Legion decal.

(A) Original issuance: $25; with $10 to the Sons of the American Legion Fund and $15 to the Secretary of State Special License Plate Fund.

(B) Renewal: $25; with $23 to the Sons of the American Legion Fund and $2 to the Secretary of State Special License Plate Fund.

(f) The following funds are created as special funds in the State treasury:

(1) The Roadside Monarch Habitat Fund. All money in the Roadside Monarch Habitat Fund shall be paid as grants to the Illinois Department of Natural Resources to fund roadside monarch and other pollinator habitat development, enhancement, and restoration projects in this State.

(2) The Prostate Cancer Awareness Fund. All money in the Prostate Cancer Awareness Fund shall be paid as grants to the Prostate Cancer Foundation of Chicago.

(3) The Horsemen's Council of Illinois Fund. All money in the Horsemen's Council of Illinois Fund shall be paid as grants to the Horsemen's Council of Illinois.

(4) The Post-Traumatic Stress Disorder Awareness Fund. All money in the Post-Traumatic Stress Disorder Awareness Fund shall be paid as grants to K9s for Veterans, NFP for support, education, and awareness of veterans with post-traumatic stress disorder.

(5) The Guide Dogs of America Fund. All money in the Guide Dogs of America Fund shall be paid as grants to the International Guiding Eyes, Inc., doing business as Guide Dogs of America.

(6) The Mechanics Training Fund. All money in the Mechanics Training Fund shall be paid as grants to the Mechanics Local 701 Training Fund.

(7) The Theresa Tracy Trot - Illinois CancerCare Foundation Fund. All money in the Theresa Tracy Trot - Illinois CancerCare Foundation Fund shall be paid to the Illinois CancerCare Foundation for the purpose of furthering pancreatic cancer research.

(8) The Developmental Disabilities Awareness Fund. All money in the Developmental Disabilities Awareness Fund shall be paid as grants to the Illinois Department of Human Services to fund legal aid groups to assist with guardianship fees for private citizens willing to become guardians for individuals with developmental disabilities but who are unable to pay the legal fees associated with becoming a guardian.

(9) The Pediatric Cancer Awareness Fund. All money in the Pediatric Cancer Awareness Fund shall be paid as grants to the Cancer Center at Illinois for pediatric cancer treatment and research.

(10) The Folds of Honor Foundation Fund. All money in the Folds of Honor Foundation Fund shall be paid as grants to the Folds of Honor Foundation to aid in providing educational scholarships to military families.

(11) The Experimental Aircraft Association Fund. All money in the Experimental Aircraft Association Fund shall be paid, subject to appropriation by the General Assembly and distribution by the Secretary, as grants to promote recreational aviation.

(12) The Child Abuse Council of the Quad Cities Fund. All money in the Child Abuse Council of the Quad Cities Fund shall be paid as grants to benefit the Child Abuse Council of the Quad Cities.

(13) The Illinois Health Care Workers Benefit Fund. All money in the Illinois Health Care Workers Benefit Fund shall be paid as grants to the Trinity Health Foundation for the benefit of health care workers, doctors, nurses, and others who work in the health care industry in this State.

(14) The Future Farmers of America Fund. All money in the Future Farmers of America Fund shall be paid as grants to the Illinois Association of Future Farmers of America.

(15) The Tick Research, Education, and Evaluation Fund. All money in the Tick Research, Education, and Evaluation Fund shall be paid as grants to the Illinois Lyme Association.

(16) The Sons of the American Legion Fund. All money in the Sons of the American Legion Fund shall be paid as grants to the Illinois Detachment of the Sons of the American Legion.

(Source: P.A. 102-383, eff. 1-1-22; 102-422, eff. 8-20-21; 102-423, eff. 8-20-21; 102-515, eff. 1-1-22; 102-558, eff. 8-20-21; 102-809, eff. 1-1-23; 102-813, eff. 5-13-22; 103-112, eff. 1-1-24; 103-163, eff. 1-1-24; 103-349, eff. 1-1-24; revised 12-15-23.)".

There being no further amendments, the foregoing Amendment No. 1 was ordered engrossed, and the bill, as amended, was ordered to a third reading.

On motion of Senator Fine, **Senate Bill No. 2960** having been printed, was taken up, read by title a second time and ordered to a third reading.

On motion of Senator D. Turner, **Senate Bill No. 2976** having been printed, was taken up, read by title a second time.

The following amendment was offered in the Committee on State Government, adopted and ordered printed:

AMENDMENT NO. 1 TO SENATE BILL 2976

AMENDMENT NO. 1 . Amend Senate Bill 2976 by replacing everything after the enacting clause with the following:

"Section 5. The Historic Preservation Act is amended by changing Sections 2, 4.5, 6, 8, 16, and 35 and by adding Sections 4.7 and 21 as follows:

(20 ILCS 3405/2) (from Ch. 127, par. 2702)

Sec. 2. For the purposes of this Act:

(a) (Blank);

(b) "Board" means the State Historic Preservation Board ~~(Blank)~~;

(b-5) "Department" means the Department of Natural Resources.

(c) "Director" means the Director of Natural Resources;

(d) (Blank);

(e) (Blank);

(f) (Blank); ~~and~~

(g) "Historic Sites and Preservation Division" means the Division of Historic Preservation within the Department of Natural Resources; and~~.~~

(h) "State Historic Site" means a property that has been deemed by the Board and the Department to have a State, national, or international level of historic significance.

(Source: P.A. 100-120, eff. 8-18-17; 100-695, eff. 8-3-18.)

(20 ILCS 3405/4.5)

Sec. 4.5. Division of Historic Preservation. On and after August 3, 2018 (the effective date of Public Act 100-695), the Division of Historic Preservation of the Department of Natural Resources ~~Office of Land Management~~ shall be created. The head of the Division shall be known as the Division Manager of Historic Preservation. The Department of Natural Resources may employ or retain other persons to assist in the discharge of its functions, subject to the Personnel Code and any other applicable Department policies.

(Source: P.A. 101-81, eff. 7-12-19; 102-1005, eff. 5-27-22.)

(20 ILCS 3405/4.7 new)

Sec. 4.7. State Historic Preservation Board.

(a) The State Historic Preservation Board is hereby created within the Department.

(b) The Board shall consist of 9 voting members appointed by the Governor and the Director of the Department, or the Director's designee, who shall serve as an ex-officio nonvoting member of the Board. Of the members appointed by the Governor:

(1) 2 members shall have a relevant background in public history or a background in teaching or researching either the history of Illinois or the history of historically marginalized communities;

(2) one member shall have experience in library studies or archival work in Illinois;

(3) 3 members shall be representatives of a community-based organization working on historic preservation in Illinois;

(4) one member shall have experience with the federal Americans with Disabilities Act of 1990;

(5) one member shall have experience working on federal historic designations; and

(6) one member shall be a museum professional.

The chairperson of the Board shall be named by the Governor from among the voting members of the Board. Each member of the Board shall serve a 3-year term and until a successor is appointed by the Governor. The Governor may remove a Board member for incompetence, dereliction of duty, or malfeasance. Of those members appointed by the Governor, at least 5 of the members shall represent historically excluded and marginalized people. The Governor's Office, with the assistance of the Department, shall be responsible for ensuring that 5 of the appointed members of the Board consist of people who represent historically excluded and marginalized people. Knowledge in the following areas shall be prioritized in making appointments to the Board: the culture, traditions, and history of American Indians and Native Americans, Black Americans, Latinos, Latinas, and Hispanic Americans, Asian Americans and Pacific Islanders, the LGBTQIA+ community, immigrants and refugees, people with disabilities, and veterans' organizations; women's history; the history of Illinois' agriculture, architecture, armed forces, arts, civics, cultural geography, ecology, education, faith-based communities, folklore, government, industry, labor, law, medicine, and transportation; anthropology; archaeology; cultural exhibits and museums; heritage tourism; historic preservation; and social justice.

(c) Board meetings shall be called at regular intervals set by the Board, on the request of the Department, or upon written notice signed by at least 5 members of the Board, but in no event less than once quarterly.

(d) A majority of the members of the Board constitutes a quorum for the transaction of business at a meeting of the Board. If a quorum is met, a majority of the members present and serving is required for official action of the Board.

(e) All business that the Board is authorized to perform shall be conducted at a public meeting of the Board, held in compliance with the Open Meetings Act.

(f) Public records of the Board are subject to disclosure under the Freedom of Information Act.

(g) The members of the Board shall serve without compensation but shall be entitled to reimbursement for all necessary expenses incurred in the performance of their official duties as members of the Board from funds appropriated for that purpose. Reimbursement for travel, meals, and lodging shall be in accordance with the rules of the Governor's Travel Control Board.

(h) The Board has the following powers and duties:

(1) The Board shall adopt rules in accordance with the Illinois Administrative Procedure Act, for the administration and execution of the powers granted under this Act. All rules that are authorized to be adopted under this Act shall be adopted after consultation with and written approval by the Department.

(2) The Board shall list, delist, create specific list designations, create designation definitions, create property assessment criteria, or change the listing designation of State Historic Sites. Such actions shall be undertaken by administrative rule. The listing, delisting, creation of specific list designations or designation definitions, or change of listing designation by the Board shall only be done with the written approval of the Director of Natural Resources. When listing, delisting, or making a change of listing designation, the Board shall consider, but is not limited to, the following:

(A) the budgetary impact on the full historic sites portfolio when taking such action;

(B) if the action includes the stories of historically excluded and marginalized people;

(C) the geographic balance of the portfolio;

(D) disability access;

(E) opportunities to coordinate with federal historic designations or federal funding opportunities; and

(F) any other criteria that have been set out in administrative rule.

(3) The Board shall advise the Department on methods of assistance, protection, conservation, and management of State Historic Sites, which are all subject to Department approval and available appropriations to implement those recommendations.

(i) The Department shall provide administrative support to the Board.

(20 ILCS 3405/6) (from Ch. 127, par. 2706)

Sec. 6. Jurisdiction. The Department shall have jurisdiction over the ~~following described~~ areas which are ~~hereby~~ designated by administrative rule as State Historic Sites~~, State Memorials, and Miscellaneous Properties~~. Those ~~These~~ sites have been deemed by the Board and the Department to have a continuing State, national, or international level of historic ~~historical~~ significance and the stewardship and caretaking responsibilities to protect and promote are hereby bestowed upon the Department. The Board is authorized to modify, remove, or add to the list of State Historic Sites that are listed in administrative rule in compliance with this Act. The following sites shall comprise the initial list of State Historic Sites that the Board shall initially list in administrative rule, but shall be subject to modification, removal, or additions by the Board and the Department pursuant to this Act:

~~State Historic Sites~~

Albany Mounds State Historic Site, Whiteside County;
Apple River Fort State Historic Site, Jo Daviess County;
Bishop Hill State Historic Site, Henry County;
Black Hawk State Historic Site, Rock Island County;
Bryant Cottage State Historic Site, Piatt County;
Cahokia Courthouse State Historic Site, St. Clair County;
Cahokia Mounds State Historic Site, in Madison and St. Clair Counties (however, the Illinois State Museum shall act as curator of artifacts pursuant to the provisions of the Archaeological and Paleontological Resources Protection Act);
Crenshaw House State Historic Site, Gallatin County;
Dana-Thomas House State Historic Site, Sangamon County;
David Davis Mansion State Historic Site, McLean County;
Douglas Tomb State Historic Site, Cook County;
Fort de Chartres State Historic Site, Randolph County;
Fort Kaskaskia State Historic Site, Randolph County;
Grand Village of the Illinois, LaSalle County;
U. S. Grant Home State Historic Site, Jo Daviess County;
Hotel Florence, Cook County;
Jarrot Mansion State Historic Site, St. Clair County;
Jubilee College State Historic Site, Peoria County;
Kincaid Mounds State Historic Site, Massac and Pope Counties;
Lewis and Clark State Historic Site, Madison County;
Lincoln-Herndon Law Offices State Historic Site, Sangamon County;
Lincoln Log Cabin State Historic Site, Coles County;
Lincoln's New Salem State Historic Site, Menard County;
Lincoln Tomb State Historic Site, Sangamon County;
Martin Boismenue House State Historic Site, St. Clair County;
Pierre Menard Home State Historic Site, Randolph County;
Metamora Courthouse State Historic Site, Woodford County;
Moore Home State Historic Site, Coles County;
Mount Pulaski Courthouse State Historic Site, Logan County;
Old Market House State Historic Site, Jo Daviess County;
Old State Capitol State Historic Site, Sangamon County;
Postville Courthouse State Historic Site, Logan County;
Pullman Factory, Cook County;
Rose Hotel, Hardin County;
Carl Sandburg State Historic Site, Knox County;
Shawneetown Bank State Historic Site, Gallatin County;
Vachel Lindsay Home, Sangamon County;
Vandalia State House State Historic Site, Fayette County; and

Washburne House State Historic Site, Jo Daviess County.

~~State Memorials~~

Buel House, Pope County;
Campbell's Island State Memorial, Rock Island County;
Governor Bond State Memorial, Randolph County;
Governor Coles State Memorial, Madison County;
Governor Horner State Memorial, Cook County;
Governor Small State Memorial, Kankakee County;
Illinois Vietnam Veterans State Memorial, Sangamon County;
Kaskaskia Bell State Memorial, Randolph County;
Korean War Memorial, Sangamon County;
Lincoln Monument State Memorial, Lee County;
Lincoln Trail State Memorial, Lawrence County;
Lovejoy State Memorial, Madison County;
Norwegian Settlers State Memorial, LaSalle County;
Wild Bill Hickok State Memorial, LaSalle County; and
World War II Veterans Memorial, Sangamon County.

~~Miscellaneous Properties~~

Emerald Mound, St. Clair County;
Halfway Tavern, Marion County; and
Hofmann Tower, Cook County.

(Source: P.A. 102-246, eff. 1-1-22; 102-1005, eff. 5-27-22.)

(20 ILCS 3405/8)

Sec. 8. Business plans. The Department shall create an individual business plan for each historic site related to Abraham Lincoln that is listed in the relevant administrative rule ~~Section 6 of this Act~~. Each business plan must address ways to enhance tourism at the historic site and the historic aspect of each site. The Department may seek assistance from the Department of Commerce and Economic Opportunity when creating the business plans. The Department shall complete the business plans no later than January 1, 2008.
(Source: P.A. 100-695, eff. 8-3-18.)

(20 ILCS 3405/16) (from Ch. 127, par. 2716)

Sec. 16. The Department shall have the following additional powers:

(a) To hire agents and employees necessary to carry out the duties and purposes of this Act.

(b) To take all measures necessary to erect, maintain, preserve, restore, and conserve all State Historic Sites ~~and State Memorials~~, except when supervision and maintenance is otherwise provided by law. This authorization includes the power to enter into contracts, acquire and dispose of real and personal property, and enter into leases of real and personal property. The Department has the power to acquire, for purposes authorized by law, any real property in fee simple subject to a life estate in the seller in not more than 3 acres of the real property acquired, subject to the restrictions that the life estate shall be used for residential purposes only and that it shall be non-transferable.

(c) To provide recreational facilities, including campsites, lodges and cabins, trails, picnic areas, and related recreational facilities, at all sites under the jurisdiction of the Department.

(d) To lay out, construct, and maintain all needful roads, parking areas, paths or trails, bridges, camp or lodge sites, picnic areas, lodges and cabins, and any other structures and improvements necessary and appropriate in any State historic site or easement thereto; and to provide water supplies, heat and light, and sanitary facilities for the public and living quarters for the custodians and keepers of State historic sites.

(e) To grant licenses and rights-of-way within the areas controlled by the Department for the construction, operation, and maintenance upon, under or across the property, of facilities for water, sewage, telephone, telegraph, electric, gas, or other public service, subject to the terms and conditions as may be determined by the Department.

(f) To authorize the officers, employees, and agents of the Department, for the purposes of investigation and to exercise the rights, powers, and duties vested and that may be vested in it, to enter and cross all lands and waters in this State, doing no damage to private property.

(g) To transfer jurisdiction of or exchange any realty under the control of the Department to any other Department of the State Government, or to any agency of the Federal Government, or to acquire or accept Federal lands, when any transfer, exchange, acquisition, or acceptance is advantageous to the State and is approved in writing by the Governor.

(h) To erect, supervise, and maintain all public monuments and memorials erected by the State, except when the supervision and maintenance of public monuments and memorials is otherwise provided by law.

(i) To accept, hold, maintain, and administer, as trustee, property given in trust for educational or historic purposes for the benefit of the People of the State of Illinois and to dispose of any property under the terms of the instrument creating the trust.

(j) To lease concessions on any property under the jurisdiction of the Department for a period not exceeding 25 years and to lease a concession complex at Lincoln's New Salem State Historic Site for which a cash incentive has been authorized under Section 5.1 of this Act for a period not to exceed 40 years. All leases, for whatever period, shall be made subject to the written approval of the Governor. All concession leases extending for a period in excess of 10 years, will contain provisions for the Department to participate, on a percentage basis, in the revenues generated by any concession operation.

The Department is authorized to allow for provisions for a reserve account and a leasehold account within Department concession lease agreements for the purpose of setting aside revenues for the maintenance, rehabilitation, repair, improvement, and replacement of the concession facility, structure, and equipment of the Department that are part of the leased premises.

The lessee shall be required to pay into the reserve account a percentage of gross receipts, as set forth in the lease, to be set aside and expended in a manner acceptable to the Department by the concession lessee for the purpose of ensuring that an appropriate amount of the lessee's moneys are provided by the lessee to satisfy the lessee's incurred responsibilities for the operation of the concession facility under the terms and conditions of the concession lease.

The lessee account shall allow for the amortization of certain authorized expenses that are incurred by the concession lessee but that are not an obligation of the lessee under the terms and conditions of the lease agreement. The Department may allow a reduction of up to 50% of the monthly rent due for the purpose of enabling the recoupment of the lessee's authorized expenditures during the term of the lease.

(k) To sell surplus agricultural products grown on land owned by or under the jurisdiction of the Department, when the products cannot be used by the Department.

(l) To enforce the laws of the State and the rules and regulations of the Department in or on any lands owned, leased, or managed by the Department.

(m) To cooperate with private organizations and agencies of the State of Illinois by providing areas and the use of staff personnel where feasible for the sale of publications on the historic and cultural heritage of the State and craft items made by Illinois craftsmen. These sales shall not conflict with existing concession agreements. The Department is authorized to negotiate with the organizations and agencies for a portion of the monies received from sales to be returned to the Department's Historic Sites Fund for the furtherance of interpretive and restoration programs.

(n) To establish local bank or savings and loan association accounts, upon the written authorization of the Director, to temporarily hold income received at any of its properties. The local accounts established under this Section shall be in the name of the Department and shall be subject to regular audits. The balance in a local bank or savings and loan association account shall be forwarded to the Department for deposit with the State Treasurer on Monday of each week if the amount to be deposited in a fund exceeds $500.

No bank or savings and loan association shall receive public funds as permitted by this Section, unless it has complied with the requirements established under Section 6 of the Public Funds Investment Act.

(o) To accept offers of gifts, gratuities, or grants from the federal government, its agencies, or offices, or from any person, firm, or corporation.

(p) To make reasonable rules and regulations as may be necessary to discharge the duties of the Department.

(q) With appropriate cultural organizations, to further and advance the goals of the Department.

(r) To make grants for the purposes of planning, survey, rehabilitation, restoration, reconstruction, landscaping, and acquisition of Illinois properties (i) designated individually in the National Register of Historic Places, (ii) designated as a landmark under a county or municipal landmark ordinance, or (iii) located within a National Register of Historic Places historic district or a locally designated historic district when the Director determines that the property is of historic significance whenever an appropriation is made therefor by the General Assembly or whenever gifts or grants are received for that purpose and to promulgate regulations as may be necessary or desirable to carry out the purposes of the grants.

Grantees may, as prescribed by rule, be required to provide matching funds for each grant. Grants made under this subsection shall be known as Illinois Heritage Grants.

Every owner of a historic property, or the owner's agent, is eligible to apply for a grant under this subsection.

(s) To establish and implement a pilot program for charging admission to State historic sites. Fees may be charged for special events, admissions, and parking or any combination; fees may be charged at all sites or selected sites. All fees shall be deposited into the Illinois Historic Sites Fund. The Department shall have the discretion to set and adjust reasonable fees at the various sites, taking into consideration various factors, including, but not limited to: cost of services furnished to each visitor, impact of fees on attendance and tourism, and the costs expended collecting the fees. The Department shall keep careful records of the income and expenses resulting from the imposition of fees, shall keep records as to the attendance at each historic site, and shall report to the Governor and General Assembly by January 31 after the close of each year. The report shall include information on costs, expenses, attendance, comments by visitors, and any other information the Department may believe pertinent, including:

(1) Recommendations as to whether fees should be continued at each State historic site.

(2) How the fees should be structured and imposed.

(3) Estimates of revenues and expenses associated with each site.

(t) To provide for overnight tent and trailer campsites and to provide suitable housing facilities for student and juvenile overnight camping groups. The Department shall charge rates similar to those charged by the Department for the same or similar facilities and services.

(u) To engage in marketing activities designed to promote the sites and programs administered by the Department. In undertaking these activities, the Department may take all necessary steps with respect to products and services, including, but not limited to, retail sales, wholesale sales, direct marketing, mail order sales, telephone sales, advertising and promotion, purchase of product and materials inventory, design, printing and manufacturing of new products, reproductions, and adaptations, copyright and trademark licensing and royalty agreements, and payment of applicable taxes. In addition, the Department shall have the authority to sell advertising in its publications and printed materials. All income from marketing activities shall be deposited into the Illinois Historic Sites Fund.

(v) To review and approve in writing rules adopted by the Board.

(Source: P.A. 102-1005, eff. 5-27-22.)

(20 ILCS 3405/21 new)

Sec. 21. Annual report. Beginning in 2025, the Department shall submit an annual report, on or before June 30, to the General Assembly containing a full list of the State Historic Sites and the sites designations, as recommended by the Board and approved by the Department.

(20 ILCS 3405/35)

Sec. 35. Products manufactured in the United States. State Historic Sites~~, State Memorials,~~ and other properties that are under the jurisdiction of the Department under Section 6 of this Act shall set aside a booth or section for the sale of products manufactured in the United States. As used in this Section, "products manufactured in the United States" means assembled articles, materials, or supplies for which design, final assembly, processing, packaging, testing, or other process that adds value, quality, or reliability occurred in the United States.

(Source: P.A. 100-695, eff. 8-3-18.)

Section 10. The Illinois Historic Sites Advisory Council Act is amended by changing Sections 1, 2, and 3 as follows:

(20 ILCS 3410/1) (from Ch. 127, par. 133d1)

Sec. 1. This Act shall be known as the Illinois National Register ~~Historic Sites~~ Advisory Council Act.
(Source: P.A. 101-81, eff. 7-12-19.)

(20 ILCS 3410/2) (from Ch. 127, par. 133d2)

Sec. 2. As used in this Act:

(a) "Council" means the Illinois National Register ~~Historic Sites~~ Advisory Council.

(b) (Blank).

(c) (Blank).

(c-5) "Department" means the Department of Natural Resources.

(d) "Director" means the Director of Natural Resources, or his or her designee.

(d-1) "Historic resource" means any property which is either publicly or privately held and which:

(1) is listed in the National Register of Historic Places (hereafter "National Register");

(2) has been formally determined by the Director to be eligible for listing in the National Register as defined in Section 106 of Title 16 of the United States Code;

(3) has been nominated by the Director and the Illinois National Register ~~Historic Sites~~ Advisory Council for listing in the National Register; or

(4) meets one or more criteria for listing in the National Register, as determined by the Director.

(e) "Place" means (1) any parcel or contiguous grouping of parcels of real estate under common or related ownership or control, where any significant improvements are at least 40 years old, or (2) any aboriginal mound, fort, earthwork, village, location, burial ground, historic or prehistoric ruin, mine case or other location which is or may be the source of important archeological data.

(f) (Blank).

(g) (Blank).

(h) (Blank).

(i) (Blank).
(Source: P.A. 100-695, eff. 8-3-18.)

(20 ILCS 3410/3) (from Ch. 127, par. 133d3)

Sec. 3. There is recognized and established hereunder the Illinois National Register ~~Historic Sites~~ Advisory Council, previously established pursuant to federal ~~Federal~~ regulations, hereafter called the Council. Starting on January 1, 2025 the ~~The~~ Council shall consist of 9 ~~15~~ members. Of these, there shall be at least 2 ~~3~~ historians, at least 2 ~~3~~ architectural historians, or architects with a preservation background, and at least 2 ~~3~~ archeologists. The remaining 3 ~~6~~ members shall be drawn from supporting fields and have a preservation interest. Supporting fields shall include but not be limited to historical geography, law, urban planning, local government officials, and members of other preservation commissions. All voting members of the Council shall be appointed by the Director. The Director may remove a member of the Council for incompetence, dereliction of duty, or malfeasance.

The Council Chairperson shall be appointed by the Director from the Council membership and shall serve at the Director's pleasure.

The Executive Director of the Abraham Lincoln Presidential Library and Museum and the Director of the Illinois State Museum shall serve on the Council in advisory capacity as non-voting members.

Terms of membership shall be 3 years and shall be staggered by the Director to assure continuity of representation. Council members shall serve until a replacement is named by the Director.

The Council shall meet at least 3 times each year. Additional meetings may be held at the call of the chairperson or at the call of the Director.

Members shall serve without compensation, but shall be reimbursed for actual expenses incurred in the performance of their duties.

A majority of the members of the Council constitutes a quorum for the transaction of business at a meeting of the Council. If a quorum is met, a majority of the members present and serving is required for official action of the Council.

All business that the Council is authorized to perform shall be conducted at a public meeting of the Council, held in compliance with the Open Meetings Act.

Records of the Council are subject to the Freedom of Information Act.
(Source: P.A. 100-120, eff. 8-18-17; 100-695, eff. 8-3-18.)

(20 ILCS 3415/Act rep.)

Section 15. The Historical Sites Listing Act is repealed.

Section 99. Effective date. This Act takes effect upon becoming law, except that Section 10 takes effect on January 1, 2025.".

There being no further amendments, the foregoing Amendment No. 1 was ordered engrossed, and the bill, as amended, was ordered to a third reading.

On motion of Senator Cunningham, **Senate Bill No. 2979** having been printed, was taken up, read by title a second time and ordered to a third reading.

On motion of Senator Loughran Cappel, **Senate Bill No. 2987** having been printed, was taken up, read by title a second time.

The following amendment was offered in the Committee on Education, adopted and ordered printed:

AMENDMENT NO. 1 TO SENATE BILL 2987

AMENDMENT NO. 1 . Amend Senate Bill 2987 by replacing everything after the enacting clause with the following:

"Section 5. The School Code is amended by changing Section 10-16a as follows:

(105 ILCS 5/10-16a)

Sec. 10-16a. School board member's ~~leadership~~ training.

(a) This Section applies to all school board members serving pursuant to Section 10-10 of this Code ~~who have been elected after the effective date of this amendatory Act of the 97th General Assembly or appointed to fill a vacancy of at least one year's duration after the effective date of this amendatory Act of the 97th General Assembly~~.

(a-5) In this Section, "trauma" has the meaning ascribed to that term in subsection (b) of Section 3-11 of this Code.

(b) Every voting member of a school board of a school district ~~elected or appointed for a term beginning after the effective date of this amendatory Act of the 97th General Assembly~~, within ~~a year after the effective date of this amendatory Act of the 97th General Assembly or~~ the first year of his or her first term, shall complete a minimum of 4 hours of professional development and leadership training covering topics in education and labor law, financial oversight and accountability, fiduciary responsibilities of a school board member, ~~and, beginning with the 2023-2024 school year,~~ trauma-informed practices for students and staff, and, improving student outcomes. The school district shall maintain on its Internet website, if any, the names of all voting members of the school board who have successfully completed the training.

(b-5) The training regarding trauma-informed practices for students and staff required by this Section must include information that is relevant to and within the scope of the duties of a school board member. Such information may include, but is not limited to:

(1) the recognition of and care for trauma in students and staff;

(2) the relationship between staff wellness and student learning;

(3) the effect of trauma on student behavior and learning;

(4) the prevalence of trauma among students, including the prevalence of trauma among student populations at higher risk of experiencing trauma;

(5) the effects of implicit or explicit bias on recognizing trauma among various student groups in connection with race, ethnicity, gender identity, sexual orientation, socio-economic status, and other relevant factors; and

(6) effective district and school practices that are shown to:

(A) prevent and mitigate the negative effect of trauma on student behavior and learning; and

(B) support the emotional wellness of staff.

(b-10) The training regarding improving student outcomes required by this Section must include information that is relevant to and within the scope of the duties of a school board member.

(c) The training on financial oversight, accountability, fiduciary responsibilities, ~~and, beginning with the 2023-24 school year,~~ trauma-informed practices for students and staff, and improving student outcomes shall ~~may~~ be provided by a statewide ~~an~~ association established under this Code for the purpose of training

school board members or by other qualified providers approved by the State Board of Education, in consultation with an association so established.

(d) The State Board of Education may adopt rules that are necessary for the administration of the provisions of this Section.

(Source: P.A. 102-638, eff. 1-1-23; 103-413, eff. 1-1-24.)

Section 99. Effective date. This Act takes effect June 1, 2025.".

There being no further amendments, the foregoing Amendment No. 1 was ordered engrossed, and the bill, as amended, was ordered to a third reading.

On motion of Senator Harmon, **Senate Bill No. 3000** having been printed, was taken up, read by title a second time and ordered to a third reading.

On motion of Senator Harmon, **Senate Bill No. 3001** having been printed, was taken up, read by title a second time and ordered to a third reading.

On motion of Senator Harmon, **Senate Bill No. 3002** having been printed, was taken up, read by title a second time and ordered to a third reading.

On motion of Senator Harmon, **Senate Bill No. 3003** having been printed, was taken up, read by title a second time and ordered to a third reading.

On motion of Senator Harmon, **Senate Bill No. 3004** having been printed, was taken up, read by title a second time and ordered to a third reading.

On motion of Senator Harmon, **Senate Bill No. 3005** having been printed, was taken up, read by title a second time and ordered to a third reading.

On motion of Senator Harmon, **Senate Bill No. 3006** having been printed, was taken up, read by title a second time and ordered to a third reading.

On motion of Senator Harmon, **Senate Bill No. 3007** having been printed, was taken up, read by title a second time and ordered to a third reading.

On motion of Senator Harmon, **Senate Bill No. 3008** having been printed, was taken up, read by title a second time and ordered to a third reading.

On motion of Senator Harmon, **Senate Bill No. 3009** having been printed, was taken up, read by title a second time and ordered to a third reading.

On motion of Senator Harmon, **Senate Bill No. 3010** having been printed, was taken up, read by title a second time and ordered to a third reading.

On motion of Senator Harmon, **Senate Bill No. 3011** having been printed, was taken up, read by title a second time and ordered to a third reading.

On motion of Senator Harmon, **Senate Bill No. 3012** having been printed, was taken up, read by title a second time and ordered to a third reading.

On motion of Senator Harmon, **Senate Bill No. 3013** having been printed, was taken up, read by title a second time and ordered to a third reading.

On motion of Senator Harmon, **Senate Bill No. 3014** having been printed, was taken up, read by title a second time and ordered to a third reading.

On motion of Senator Harmon, **Senate Bill No. 3015** having been printed, was taken up, read by title a second time and ordered to a third reading.

On motion of Senator Harmon, **Senate Bill No. 3016** having been printed, was taken up, read by title a second time and ordered to a third reading.

On motion of Senator Harmon, **Senate Bill No. 3017** having been printed, was taken up, read by title a second time and ordered to a third reading.

On motion of Senator Harmon, **Senate Bill No. 3018** having been printed, was taken up, read by title a second time and ordered to a third reading.

On motion of Senator Harmon, **Senate Bill No. 3019** having been printed, was taken up, read by title a second time and ordered to a third reading.

On motion of Senator Harmon, **Senate Bill No. 3020** having been printed, was taken up, read by title a second time and ordered to a third reading.

On motion of Senator Harmon, **Senate Bill No. 3021** having been printed, was taken up, read by title a second time and ordered to a third reading.

On motion of Senator Harmon, **Senate Bill No. 3022** having been printed, was taken up, read by title a second time and ordered to a third reading.

On motion of Senator Harmon, **Senate Bill No. 3023** having been printed, was taken up, read by title a second time and ordered to a third reading.

On motion of Senator Harmon, **Senate Bill No. 3024** having been printed, was taken up, read by title a second time and ordered to a third reading.

On motion of Senator Harmon, **Senate Bill No. 3025** having been printed, was taken up, read by title a second time and ordered to a third reading.

On motion of Senator Harmon, **Senate Bill No. 3026** having been printed, was taken up, read by title a second time and ordered to a third reading.

On motion of Senator Harmon, **Senate Bill No. 3027** having been printed, was taken up, read by title a second time and ordered to a third reading.

On motion of Senator Harmon, **Senate Bill No. 3028** having been printed, was taken up, read by title a second time and ordered to a third reading.

On motion of Senator Harmon, **Senate Bill No. 3029** having been printed, was taken up, read by title a second time and ordered to a third reading.

On motion of Senator Harmon, **Senate Bill No. 3030** having been printed, was taken up, read by title a second time and ordered to a third reading.

On motion of Senator Harmon, **Senate Bill No. 3031** having been printed, was taken up, read by title a second time and ordered to a third reading.

On motion of Senator Harmon, **Senate Bill No. 3032** having been printed, was taken up, read by title a second time and ordered to a third reading.

On motion of Senator Harmon, **Senate Bill No. 3033** having been printed, was taken up, read by title a second time and ordered to a third reading.

On motion of Senator Harmon, **Senate Bill No. 3034** having been printed, was taken up, read by title a second time and ordered to a third reading.

On motion of Senator Harmon, **Senate Bill No. 3035** having been printed, was taken up, read by title a second time and ordered to a third reading.

On motion of Senator Harmon, **Senate Bill No. 3036** having been printed, was taken up, read by title a second time and ordered to a third reading.

On motion of Senator Harmon, **Senate Bill No. 3037** having been printed, was taken up, read by title a second time and ordered to a third reading.

On motion of Senator Harmon, **Senate Bill No. 3038** having been printed, was taken up, read by title a second time and ordered to a third reading.

On motion of Senator Harmon, **Senate Bill No. 3039** having been printed, was taken up, read by title a second time and ordered to a third reading.

On motion of Senator Harmon, **Senate Bill No. 3040** having been printed, was taken up, read by title a second time and ordered to a third reading.

On motion of Senator Harmon, **Senate Bill No. 3041** having been printed, was taken up, read by title a second time and ordered to a third reading.

On motion of Senator Harmon, **Senate Bill No. 3042** having been printed, was taken up, read by title a second time and ordered to a third reading.

On motion of Senator Harmon, **Senate Bill No. 3043** having been printed, was taken up, read by title a second time and ordered to a third reading.

On motion of Senator Harmon, **Senate Bill No. 3044** having been printed, was taken up, read by title a second time and ordered to a third reading.

On motion of Senator Harmon, **Senate Bill No. 3045** having been printed, was taken up, read by title a second time and ordered to a third reading.

On motion of Senator Harmon, **Senate Bill No. 3046** having been printed, was taken up, read by title a second time and ordered to a third reading.

On motion of Senator Harmon, **Senate Bill No. 3047** having been printed, was taken up, read by title a second time and ordered to a third reading.

On motion of Senator Harmon, **Senate Bill No. 3048** having been printed, was taken up, read by title a second time and ordered to a third reading.

On motion of Senator Harmon, **Senate Bill No. 3049** having been printed, was taken up, read by title a second time and ordered to a third reading.

On motion of Senator Harmon, **Senate Bill No. 3050** having been printed, was taken up, read by title a second time and ordered to a third reading.

On motion of Senator Harmon, **Senate Bill No. 3051** having been printed, was taken up, read by title a second time and ordered to a third reading.

On motion of Senator Harmon, **Senate Bill No. 3052** having been printed, was taken up, read by title a second time and ordered to a third reading.

On motion of Senator Harmon, **Senate Bill No. 3053** having been printed, was taken up, read by title a second time and ordered to a third reading.

On motion of Senator Harmon, **Senate Bill No. 3054** having been printed, was taken up, read by title a second time and ordered to a third reading.

On motion of Senator Harmon, **Senate Bill No. 3055** having been printed, was taken up, read by title a second time and ordered to a third reading.

On motion of Senator Harmon, **Senate Bill No. 3056** having been printed, was taken up, read by title a second time and ordered to a third reading.

On motion of Senator Harmon, **Senate Bill No. 3057** having been printed, was taken up, read by title a second time and ordered to a third reading.

On motion of Senator Harmon, **Senate Bill No. 3058** having been printed, was taken up, read by title a second time and ordered to a third reading.

On motion of Senator Harmon, **Senate Bill No. 3059** having been printed, was taken up, read by title a second time and ordered to a third reading.

On motion of Senator Harmon, **Senate Bill No. 3060** having been printed, was taken up, read by title a second time and ordered to a third reading.

On motion of Senator Harmon, **Senate Bill No. 3061** having been printed, was taken up, read by title a second time and ordered to a third reading.

On motion of Senator Harmon, **Senate Bill No. 3062** having been printed, was taken up, read by title a second time and ordered to a third reading.

On motion of Senator Harmon, **Senate Bill No. 3063** having been printed, was taken up, read by title a second time and ordered to a third reading.

On motion of Senator Harmon, **Senate Bill No. 3064** having been printed, was taken up, read by title a second time and ordered to a third reading.

On motion of Senator Harmon, **Senate Bill No. 3065** having been printed, was taken up, read by title a second time and ordered to a third reading.

On motion of Senator Harmon, **Senate Bill No. 3066** having been printed, was taken up, read by title a second time and ordered to a third reading.

On motion of Senator Harmon, **Senate Bill No. 3067** having been printed, was taken up, read by title a second time and ordered to a third reading.

On motion of Senator Harmon, **Senate Bill No. 3068** having been printed, was taken up, read by title a second time and ordered to a third reading.

On motion of Senator Harmon, **Senate Bill No. 3069** having been printed, was taken up, read by title a second time and ordered to a third reading.

On motion of Senator Koehler, **Senate Bill No. 3077** having been printed, was taken up, read by title a second time.

The following amendment was offered in the Committee on Agriculture, adopted and ordered printed:

AMENDMENT NO. 1 TO SENATE BILL 3077

AMENDMENT NO. 1 . Amend Senate Bill 3077 by replacing everything after the enacting clause with the following:

"Section 1. Short title. This Act may be cited as the Local Food Infrastructure Grant Act.

Section 5. Definitions. In this Act:

"Department" means the Department of Agriculture.

"Director" means the Director of Agriculture.

"Fund" means the Local Food Infrastructure Grant Fund.

"Grant administrator" means the Department or a nonprofit organization that is exempt from taxation under Section 501(c)(3) of the Internal Revenue Code, that represents farmers, and that has entered into a subcontract with the Department under Section 15 to administer the grant.

"Grantee" means the person or entity to whom a grant is made from the Fund.

"Lender" means a federal or State chartered bank, a federal land bank, a production credit association, a bank for cooperatives, a federal or State chartered savings and loan association, a federal or State chartered building and loan association, a small business investment company, or any other institution qualified within this State to originate and service loans, including, but not limited to, an insurance company, a credit union, and a mortgage loan company.

"Lender" includes a wholly owned subsidiary of a manufacturer, seller, or distributor of goods or services that makes loans to businesses or individuals, commonly known as a captive finance company.

"Liability" includes, but is not limited to, accounts payable; notes or other indebtedness owed to any source; taxes; rent; amounts owed on real estate contracts or real estate mortgages; judgments; accrued interest payable; and any other liability.

"State" means the State of Illinois.

"Underserved farmer" means a farmer or rancher who meets the United States Department of Agriculture criteria to be designated as a beginning farmer, socially disadvantaged farmer, veteran farmer, or limited resource farmer.

"Underserved community" means a community that has limited or no access to resources or that is otherwise disenfranchised as determined by the Department. These communities may include people who are socioeconomically disadvantaged; people with limited English proficiency; geographically isolated or educationally disenfranchised people; people of color as well as ethnic and national origin minorities; women and children; individuals with disabilities and others with access and functional needs; and seniors.

"Value-added agricultural product" means any farm or agricultural product or by-product that has its value enhanced through processing in Illinois, packaging in Illinois, or any other activity in Illinois.

Section 10. Findings.

(a) The General Assembly finds that the following conditions exist in this State:

(1) Small fruit, vegetable, and livestock farmers are vital to the health and wealth of Illinois communities, yet Illinois does not currently have infrastructure in place to support local food farmers or to feed Illinois communities.

(2) An estimated 95% of the food consumed in Illinois is purchased from outside of our borders, resulting in the export of billions of food dollars outside our State rather than the enhancement of our local food economies.

(3) A shift of just 10% toward local food purchasing by Illinois individuals, families, schools, institutions, and State agencies could generate billions in economic growth for our State.

(4) For Illinois families, businesses, schools, and institutions to shift their purchasing practices, Illinois must invest in supporting critical local food infrastructure needed to bolster processing, aggregation, and distribution of local food.

(b) The General Assembly determines and declares that there exist conditions in the State that require the Department to issue grants on behalf of the State for the development of local food processing, aggregation, and distribution.

Section 15. Local Food Infrastructure Grant Program. Funding appropriated for the Local Food Infrastructure Grant Program shall be allocated to the Department. The Department may enter into a subcontract agreement with a nonprofit organization that is exempt from taxation under Section 501(c)(3) of the Internal Revenue Code and that represents farmers in order to administer the grant program established under this Act, so long as the administration of the grant program by the grant administrator adheres to the requirements of this Act, including the following requirements:

(1) Eligible grant applicants shall include any one or more of the following entities that store, process, package, aggregate, or distribute value-added agricultural products or plan to do so:

(A) Illinois farms with less than 50 employees;

(B) Illinois cooperatives with less than 50 employees;

(C) Illinois processing facilities with less than 50 employees;

(D) Illinois food businesses with less than 50 employees;

(E) Illinois food hubs with less than 50 employees;

(F) Illinois nonprofit organizations; and

(G) units of local government in Illinois.

Grant proposals may be submitted to the grant administrator by individuals, groups, partnerships, or collaborations. A recipient of grant funding under this Act whose project is funded in a grant cycle is not eligible to apply for grant funding under this Act for that project in the next funding cycle nor is any other person eligible to apply for grant funding for that project in the next funding cycle. However, any person may apply for grant funding under this Act for such project in any subsequent funding cycles.

(2) Grant awards shall be available for collaborative and individual projects at the following award amounts:

(A) for a collaborative project, a grant of $1,000 to $250,000 may be awarded; and

(B) for an individual project, a grant of $1,000 to $75,000 may be awarded.

(3) All funded projects must show comparable investments by the recipient in the development and progression of the project being funded or must show evidence of being a high need project. The recipient's comparable investments may be provided in cash, cash-equivalent investments, bonds, irrevocable letters of credit, time and labor, or any combination of those matching fund sources. Acceptable providers of matching funds include, but are not limited to, commercial, municipal, and private lenders; leasing companies; and grantors of funds. A project may be designated as a high need project if at least one of the following conditions is met:

(A) the project can demonstrate that it is filling a gap in critical infrastructure for its region or community that is unlikely to be resolved without the grant investment; or

(B) the project can demonstrate that the grant investment will primarily serve underserved farmers or underserved communities.

(4) All grant funding provided under this Act must be used for purchasing, leasing to own, renting, building, or installing infrastructure related to the processing, storage, aggregation, or distribution of value-added agricultural products. Allowable expenses include, but are not limited to:

(A) equipment used in the production of value-added agricultural products;

(B) milling or pressing equipment;

(C) creamery or milk product processing and packaging equipment;

(D) food hub development or expansion;

(E) cooler walls and refrigeration units;

(F) grading, packing, labeling, packaging, or sorting equipment;

(G) refrigerated trucks;

(H) custom exempt mobile slaughter units and livestock processing equipment;

(I) agroforestry processing equipment; and

(J) local fish and shrimp processing.

Grant funding provided under this Act may not be used for labor, marketing, or promotion or for the costs of production agriculture, such as costs for the purchase of hoop houses, irrigation, or other infrastructure related to starting or increasing agricultural production.

Section 17. Local Food Infrastructure Grant Fund. The Local Food Infrastructure Grant Fund is created as a special fund in the State treasury. Appropriations and moneys from any public or private source may be deposited into the Fund. The Fund shall be used for the purposes of this Act. Repayments of grants made under this Section shall be deposited into the Fund. A maximum of 10% of all funds appropriated through the Fund may be used by the Department for the costs of administering the grant within the Department or the cost of subcontracting a grant administrator.

Section 20. Program administration.

(a) The grant administrator shall create an independent Local Food Infrastructure Steering Committee to guide the implementation and evaluation of the grant program created by this Act. The Steering Committee shall be composed of, at a minimum, the following members: at least 3 farmers, including one specialty crop farmer, one livestock farmer, and one farmer of color; one representative from the local food processing industry; one representative from a nonprofit organization serving farmers of color; one representative from a nonprofit organization serving farmers at large; and one representative from the Illinois Stewardship Alliance Local Food Farmer Caucus so long as the Caucus exists.

(b) The Steering Committee's responsibilities shall include advising the Department and any other grant administrator on the following matters:

(1) application requirements and terms of grant agreements;

(2) grant criteria and preferences, including additional criteria and preferences to be adopted by the Department by rule;

(3) the meaning of the term "collaborative project" to be codified in Department rules;

(4) grant review and selection;

(5) project reporting requirements for funded projects; and

(6) evaluation of program success and adjustment of criteria, requirements, preferences, program implementation, and other elements of the grant program as needed to ensure that the grant program meets its intended purpose and complies with this Act.

(c) An applicant for grant funding under this Act must, at a minimum, be an Illinois resident, as defined by Department rule, and provide the names, addresses, and occupations of all project owners, the project address, relevant credit and financial information (including, but not limited to, assets and liabilities), and any other information deemed necessary by the grant administrator for review of the grant application. A grant award is subject to modification or alteration under the condition that the grant award is subject to any modifications that may be required by changes in State law or rules. The Department shall provide written notice to the recipient or, if subcontracting with another grant administrator, the other grant administrator of any amendment to the Act or rules adopted under the Act and the effective date of those amendments.

(d) The grant administrator, in reviewing the applications, must consider, but is not limited to considering, the following criteria:

(1) whether the project has a reasonable assurance of increasing the availability and accessibility of Illinois agricultural products among Illinois communities;

(2) whether there is an adequate and realistic budget projection; and

(3) whether the application meets the eligibility requirements and the project costs are eligible under this Act.

(e) Preference for grants shall be given to the following types of proposals:

(1) proposals that have established favorable community support;

(2) proposals that increase the availability of Illinois agricultural products to underserved communities in Illinois;

(3) proposals that positively impact underserved farmers in Illinois;

(4) proposals from established farmers and food businesses;

(5) proposals that facilitate long-term economic development in the local food sector;

(6) proposals that demonstrate comparable investments by the anticipated recipient;

(7) proposals for high need projects; and

(8) proposals that are submitted by small and very small farms and food businesses.

Section 25. Report. The grant administrator must annually file with the Governor and General Assembly and publish publicly each year a written report detailing the impact of the Local Food Infrastructure Grant Program for the previous calendar year. The report must include:

(1) a complete list of all applications for grants under this Act that were received during the previous calendar year;

(2) a complete list of all persons that were awarded a grant under this Act in the previous calendar year and the nature and amount of their awards; and

(3) a statement of the economic impact of the grants made in the previous calendar year, which may include jobs created, local food sales increased, and communities served.

Section 30. Liability. The Director, the grant administrator, the Local Food Infrastructure Steering Committee, Department employees, and any persons authorized to execute grants are not personally liable on account of the grants made under this Act and are not subject to any personal liability or accountability by reason of the issuance of the grants.

Section 35. Default or termination of grant agreement.

(a) If the recipient of a grant violates any of the terms of the grant agreement, the grant administrator shall send a written notice to the recipient that the recipient is in default, and the recipient shall be given the opportunity to correct the violations.

(b) If the violation is not corrected within 30 days after receipt of the notification, the grant administrator may take any one or more of the following actions:

(1) The grant administrator may declare due and payable the amount of the grant, or any portion of it, and cease additional grant payments not yet made to the grant recipient.

(2) The grant administrator may take any other action considered appropriate to protect the interest of the project.

(c) The grant administrator may determine that a recipient has failed to faithfully perform the terms and conditions of the scope of work of the project when:

(1) The grant administrator has notified the recipient in writing of the existence of circumstances such as misapplication of grant funds, failure to match grant funds, evidence of fraud and abuse, repeated failure to meet performance timelines or standards, or failure to resolve negotiated points of the agreement.

(2) The recipient fails to develop and implement a corrective action plan within 30 calendar days of the grant administrator's notice.

(d) A grant may be terminated as provided in this subsection:

(1) If there is no appropriation for the grant program for a specific year, all grants for that year will be terminated in full. If there is an insufficient appropriation for the grant program for a specific year, the grant administrator may make proportionate cuts to all recipients.

(2) If the grant administrator determines that the recipient has failed to comply with the terms and conditions of the grant agreement, the grant administrator may terminate the grant in whole, or in part, at any time before the date of completion.

(3) If the grant administrator determines that the continuation of the project would not produce beneficial results commensurate with the further expenditure of funds, the grant administrator may terminate the grant in whole, or in part, at any time before the date of completion.

(4) If the recipient refuses or elects not to complete the grant agreement and terminate the grant, the recipient shall notify the grant administrator within 10 days after the date upon which performance ceases. Upon receipt of the notification, the grant shall be declared terminated, and the grant administrator may declare due and payable the amount of the grant and may cease additional grant payments not yet made to the grantee.

(e) Any money collected from the default or termination of a grant shall be placed into the Fund and expended for the purposes of this Act.

Section 40. Construction. This Act is necessary for the welfare of this State and must be liberally construed to effectuate its purposes. The Department may adopt rules that are consistent with and necessary for the implementation and administration of this Act.

Section 900. The State Finance Act is amended by adding Section 5.1015 as follows:
(30 ILCS 105/5.1015 new)
Sec. 5.1015. The Local Food Infrastructure Grant Fund.

Section 999. Effective date. This Act takes effect upon becoming law.".

There being no further amendments, the foregoing Amendment No. 1 was ordered engrossed, and the bill, as amended, was ordered to a third reading.

On motion of Senator Joyce, **Senate Bill No. 3091** having been printed, was taken up, read by title a second time and ordered to a third reading.

On motion of Senator Loughran Cappel, **Senate Bill No. 3098** having been printed, was taken up, read by title a second time.

Committee Amendment No. 1 was held in the Committee on Assignments.

Senator Loughran Cappel offered the following amendment and moved its adoption:

AMENDMENT NO. 2 TO SENATE BILL 3098

AMENDMENT NO. 2 . Amend Senate Bill 3098 on page 1, line 6, by replacing "Section 1" with "Sections 1 and 2"; and

on page 2, line 23, by inserting "under 21 years of age" after "anyone"; and

on page 9, lines 2 and 18, by deleting "(a-5.2)," wherever it appears; and

on page 10, line 12, by deleting "(a-5.2),"; and

on page 11, line 8, by deleting "(a-5.2),"; and

on page 12, line 1, by deleting "(a-5.2),"; and

on page 12, by replacing lines 20 and 21 with the following:

"(720 ILCS 675/2) (from Ch. 23, par. 2358)
Sec. 2. Penalties.

(a) Any person who violates subsection (a), (a-5), (a-5.1), (a-5.2), (a-8), (b), or (d) of Section 1 of this Act is guilty of a petty offense. For the first offense in a 24-month period, the person shall be fined $200 if his or her employer has a training program that facilitates compliance with minimum-age tobacco laws. For the second offense in a 24-month period, the person shall be fined $400 if his or her employer has a training program that facilitates compliance with minimum-age tobacco laws. For the third offense in a 24-month period, the person shall be fined $600 if his or her employer has a training program that facilitates compliance with minimum-age tobacco laws. For the fourth or subsequent offense in a 24-month period, the person shall be fined $800 if his or her employer has a training program that facilitates compliance with minimum-age tobacco laws. For the purposes of this subsection, the 24-month period shall begin with the person's first violation of the Act. The penalties in this subsection are in addition to any other penalties prescribed under the Cigarette Tax Act and the Tobacco Products Tax Act of 1995.

(a-5) Any retailer who violates subsection (a), (a-5), (a-5.1), (a-5.2), (a-8), (b), or (d) of Section 1 of this Act is guilty of a petty offense. For the first offense in a 24-month period, the retailer shall be fined $200 if it does not have a training program that facilitates compliance with minimum-age tobacco laws. For the second offense in a 24-month period, the retailer shall be fined $400 if it does not have a training program that facilitates compliance with minimum-age tobacco laws. For the third offense within a 24-month period, the retailer shall be fined $600 if it does not have a training program that facilitates compliance with minimum-age tobacco laws. For the fourth or subsequent offense in a 24-month period, the retailer shall be fined $800 if it does not have a training program that facilitates compliance with minimum-age tobacco laws. For the purposes of this subsection, the 24-month period shall begin with the

person's first violation of the Act. The penalties in this subsection are in addition to any other penalties prescribed under the Cigarette Tax Act and the Tobacco Products Tax Act of 1995.

(a-6) For the purpose of this Act, a training program that facilitates compliance with minimum-age tobacco laws must include at least the following elements: (i) it must explain that only individuals displaying valid identification demonstrating that they are 21 years of age or older shall be eligible to purchase tobacco products, electronic cigarettes, or alternative nicotine products and (ii) it must explain where a clerk can check identification for a date of birth. The training may be conducted electronically. Each retailer that has a training program shall require each employee who completes the training program to sign a form attesting that the employee has received and completed tobacco training. The form shall be kept in the employee's file and may be used to provide proof of training.

(b) If a person under 21 years of age violates subsection (a-6) of Section 1, he or she is guilty of a Class A misdemeanor.

(c) (Blank).

(d) (Blank).

(e) (Blank).

(f) (Blank).

(g) (Blank).

(h) All moneys collected as fines for violations of subsection (a), (a-5), (a-5.1), (a-6), (a-8), (b), or (d) of Section 1 shall be distributed in the following manner:

(1) one-half of each fine shall be distributed to the unit of local government or other entity that successfully prosecuted the offender; and

(2) one-half shall be remitted to the State to be used for enforcing this Act.

Any violation of subsection (a) or (a-5) of Section 1 shall be reported to the Department of Revenue within 7 business days.

(Source: P.A. 101-2, eff. 7-1-19; 102-558, eff. 8-20-21.)".

The motion prevailed.

And the amendment was adopted and ordered printed.

There being no further amendments, the foregoing Amendment No. 2 was ordered engrossed, and the bill, as amended, was ordered to a third reading.

On motion of Senator Edly-Allen, **Senate Bill No. 3110** having been printed, was taken up, read by title a second time and ordered to a third reading.

On motion of Senator Cunningham, **Senate Bill No. 3111** having been printed, was taken up, read by title a second time and ordered to a third reading.

On motion of Senator Cunningham, **Senate Bill No. 3112** having been printed, was taken up, read by title a second time and ordered to a third reading.

On motion of Senator Morrison, **Senate Bill No. 3116** having been printed, was taken up, read by title a second time.

The following amendment was offered in the Committee on Public Health, adopted and ordered printed:

AMENDMENT NO. 1 TO SENATE BILL 3116

AMENDMENT NO. 1 . Amend Senate Bill 3116 by replacing everything after the enacting clause with the following:

"Section 5. The Department of Public Health Powers and Duties Law of the Civil Administrative Code of Illinois is amended by adding Section 2310-711 as follows:

(20 ILCS 2310/2310-711 new)

Sec. 2310-711. Training; cell phone medical information. The Department shall require and approve a program to train EMS personnel, as that term is defined in Section 3.5 of the Emergency Medical Services (EMS) Systems Act, to access a cell phone's medical identification or medical information application. The Department shall adopt rules to implement this Section. EMS personnel may not be charged any fee for

training required under this Section and may not be required to complete the training until at least 6 months after adoption of rules under this Section.

Section 10. The Illinois State Police Law of the Civil Administrative Code of Illinois is amended by changing Section 2605-51 as follows:

(20 ILCS 2605/2605-51)

Sec. 2605-51. Division of the Academy and Training.

(a) The Division of the Academy and Training shall exercise, but not be limited to, the following functions:

(1) Oversee and operate the Illinois State Police Training Academy.

(2) Train and prepare new officers for a career in law enforcement, with innovative, quality training and educational practices.

(3) Offer continuing training and educational programs for Illinois State Police employees.

(4) Oversee the Illinois State Police's recruitment initiatives.

(5) Oversee and operate the Illinois State Police's quartermaster.

(6) Duties assigned to the Illinois State Police in Article 5, Chapter 11 of the Illinois Vehicle Code concerning testing and training officers on the detection of impaired driving.

(7) Duties assigned to the Illinois State Police in Article 108B of the Code of Criminal Procedure.

(a-5) Successful completion of the Illinois State Police Academy satisfies the minimum standards pursuant to subsections (a), (b), and (d) of Section 7 of the Illinois Police Training Act and exempts State police officers from the Illinois Law Enforcement Training Standards Board's State Comprehensive Examination and Equivalency Examination. Satisfactory completion shall be evidenced by a commission or certificate issued to the officer.

(b) The Division of the Academy and Training shall exercise the rights, powers, and duties vested in the former Division of State Troopers by Section 17 of the Illinois State Police Act.

(c) Specialized training.

(1) Training; cultural diversity. The Division of the Academy and Training shall provide training and continuing education to State police officers concerning cultural diversity, including sensitivity toward racial and ethnic differences. This training and continuing education shall include, but not be limited to, an emphasis on the fact that the primary purpose of enforcement of the Illinois Vehicle Code is safety and equal and uniform enforcement under the law.

(2) Training; death and homicide investigations. The Division of the Academy and Training shall provide training in death and homicide investigation for State police officers. Only State police officers who successfully complete the training may be assigned as lead investigators in death and homicide investigations. Satisfactory completion of the training shall be evidenced by a certificate issued to the officer by the Division of the Academy and Training. The Director shall develop a process for waiver applications for officers whose prior training and experience as homicide investigators may qualify them for a waiver. The Director may issue a waiver, at his or her discretion, based solely on the prior training and experience of an officer as a homicide investigator.

(A) The Division shall require all homicide investigator training to include instruction on victim-centered, trauma-informed investigation. This training must be implemented by July 1, 2023.

(B) The Division shall cooperate with the Division of Criminal Investigation to develop a model curriculum on victim-centered, trauma-informed investigation. This curriculum must be implemented by July 1, 2023.

(3) Training; police dog training standards. All police dogs used by the Illinois State Police for drug enforcement purposes pursuant to the Cannabis Control Act, the Illinois Controlled Substances Act, and the Methamphetamine Control and Community Protection Act shall be trained by programs that meet the certification requirements set by the Director or the Director's designee. Satisfactory completion of the training shall be evidenced by a certificate issued by the Division of the Academy and Training.

(4) Training; post-traumatic stress disorder. The Division of the Academy and Training shall conduct or approve a training program in post-traumatic stress disorder for State police officers. The purpose of that training shall be to equip State police officers to identify the symptoms of post-traumatic stress disorder and to respond appropriately to individuals exhibiting those symptoms.

(5) Training; opioid antagonists. The Division of the Academy and Training shall conduct or approve a training program for State police officers in the administration of opioid antagonists as defined in paragraph (1) of subsection (e) of Section 5-23 of the Substance Use Disorder Act that is in accordance with that Section. As used in this Section, "State police officers" includes full-time or part-time State police officers, investigators, and any other employee of the Illinois State Police exercising the powers of a peace officer.

(6) Training; sexual assault and sexual abuse.

(A) Every 3 years, the Division of the Academy and Training shall present in-service training on sexual assault and sexual abuse response and report writing training requirements, including, but not limited to, the following:

(i) recognizing the symptoms of trauma;

(ii) understanding the role trauma has played in a victim's life;

(iii) responding to the needs and concerns of a victim;

(iv) delivering services in a compassionate, sensitive, and nonjudgmental manner;

(v) interviewing techniques in accordance with the curriculum standards in this paragraph (6);

(vi) understanding cultural perceptions and common myths of sexual assault and sexual abuse; and

(vii) report writing techniques in accordance with the curriculum standards in this paragraph (6).

(B) This training must also be presented in all full and part-time basic law enforcement academies.

(C) Instructors providing this training shall have successfully completed training on evidence-based, trauma-informed, victim-centered responses to cases of sexual assault and sexual abuse and have experience responding to sexual assault and sexual abuse cases.

(D) The Illinois State Police shall adopt rules, in consultation with the Office of the Attorney General and the Illinois Law Enforcement Training Standards Board, to determine the specific training requirements for these courses, including, but not limited to, the following:

(i) evidence-based curriculum standards for report writing and immediate response to sexual assault and sexual abuse, including trauma-informed, victim-centered interview techniques, which have been demonstrated to minimize retraumatization, for all State police officers; and

(ii) evidence-based curriculum standards for trauma-informed, victim-centered investigation and interviewing techniques, which have been demonstrated to minimize retraumatization, for cases of sexual assault and sexual abuse for all State police officers who conduct sexual assault and sexual abuse investigations.

(7) Training; human trafficking. The Division of the Academy and Training shall conduct or approve a training program in the detection and investigation of all forms of human trafficking, including, but not limited to, involuntary servitude under subsection (b) of Section 10-9 of the Criminal Code of 2012, involuntary sexual servitude of a minor under subsection (c) of Section 10-9 of the Criminal Code of 2012, and trafficking in persons under subsection (d) of Section 10-9 of the Criminal Code of 2012. This program shall be made available to all cadets and State police officers.

(8) Training; hate crimes. The Division of the Academy and Training shall provide training for State police officers in identifying, responding to, and reporting all hate crimes.

(9) Training; cell phone medical information. The Division of the Academy and Training shall develop and require each State police officer to complete training on accessing and utilizing medical information stored in cell phones. The Division may use the program approved under Section 2310-711 of the Department of Public Health Powers and Duties Law of the Civil Administrative Code of Illinois to develop the Division's program.

(d) The Division of the Academy and Training shall administer and conduct a program consistent with 18 U.S.C. 926B and 926C for qualified active and retired Illinois State Police officers.

(Source: P.A. 102-538, eff. 8-20-21; 102-756, eff. 5-10-22; 102-813, eff. 5-13-22; 103-34, eff. 1-1-24.)

Section 15. The Illinois Police Training Act is amended by adding Section 10.25 as follows:

(50 ILCS 705/10.25 new)

Sec. 10.25. Training; cell phone medical information. The Board shall develop and require each law enforcement officer to participate in training on accessing and utilizing medical information stored in cell phones. The Board may use the program approved under Section 2310-711 of the Department of Public Health Powers and Duties Law of the Civil Administrative Code of Illinois to develop the Board's program.

Section 99. Effective date. This Act takes effect January 1, 2025.".

There being no further amendments, the foregoing Amendment No. 1 was ordered engrossed, and the bill, as amended, was ordered to a third reading.

On motion of Senator Halpin, **Senate Bill No. 3132** having been printed, was taken up, read by title a second time and ordered to a third reading.

On motion of Senator Stadelman, **Senate Bill No. 3133** having been printed, was taken up, read by title a second time and ordered to a third reading.

On motion of Senator D. Turner, **Senate Bill No. 3134** having been printed, was taken up, read by title a second time.

The following amendment was offered in the Committee on Public Health, adopted and ordered printed:

AMENDMENT NO. 1 TO SENATE BILL 3134

AMENDMENT NO. 1 . Amend Senate Bill 3134 by replacing everything after the enacting clause with the following:

"Section 5. The Emergency Medical Services (EMS) Systems Act is amended by changing Section 3.40 as follows:

(210 ILCS 50/3.40)

Sec. 3.40. EMS System Participation Suspensions and Due Process.

(a) An EMS Medical Director may suspend from participation within the System any EMS personnel, EMS Lead Instructor (LI), individual, individual provider or other participant considered not to be meeting the requirements of the Program Plan of that approved EMS System. An EMS Medical Director must submit a suspension order to the Department describing which requirements of the Program Plan were not met and the suspension's duration. The Department shall review and confirm receipt of the suspension order, request additional information, or initiate an investigation. The Department shall incorporate the duration of that suspension into any further action taken by the Department to suspend, revoke, or refuse to issue or renew the license of the individual or entity for any violation of this Act or the Program Plan arising from the same conduct for which the suspension order was issued if the suspended party has neither requested a Department hearing on the suspension nor worked as a provider in any other System during the term of the suspension.

(b) Prior to suspending any individual or entity, an EMS Medical Director shall provide an opportunity for a hearing before the local System review board in accordance with subsection (f) and the rules promulgated by the Department.

(1) If the local System review board affirms or modifies the EMS Medical Director's suspension order, the individual or entity shall have the opportunity for a review of the local board's decision by the State EMS Disciplinary Review Board, pursuant to Section 3.45 of this Act.

(2) If the local System review board reverses or modifies the EMS Medical Director's order, the EMS Medical Director shall have the opportunity for a review of the local board's decision by the State EMS Disciplinary Review Board, pursuant to Section 3.45 of this Act.

(3) The suspension shall commence only upon the occurrence of one of the following:

(A) the individual or entity has waived the opportunity for a hearing before the local System review board;

(B) the order has been affirmed or modified by the local system review board and the individual or entity has waived the opportunity for review by the State Board; or

(C) the order has been affirmed or modified by the local system review board, and the local board's decision has been affirmed or modified by the State Board.

(c) An individual interviewed or investigated by the local system review board or the Department shall have the right to a union representative and legal counsel of the individual's choosing present at any interview. The union representative must comply with any confidentiality requirements and requirements for the protection of any patient information presented during the proceeding.

(d) An EMS Medical Director may immediately suspend an EMR, EMD, EMT, EMT-I, A-EMT, Paramedic, ECRN, PHRN, LI, PHPA, PHAPRN, or other individual or entity if he or she finds that the continuation in practice by the individual or entity would constitute an imminent danger to the public. The suspended individual or entity shall be issued an immediate verbal notification followed by a written suspension order by the EMS Medical Director which states the length, terms and basis for the suspension.

(1) Within 24 hours following the commencement of the suspension, the EMS Medical Director shall deliver to the Department, by messenger, telefax, or other Department-approved electronic communication, a copy of the suspension order and copies of any written materials which relate to the EMS Medical Director's decision to suspend the individual or entity. All medical and patient-specific information, including Department findings with respect to the quality of care rendered, shall be strictly confidential pursuant to the Medical Studies Act (Part 21 of Article VIII of the Code of Civil Procedure).

(2) Within 24 hours following the commencement of the suspension, the suspended individual or entity may deliver to the Department, by messenger, telefax, or other Department-approved electronic communication, a written response to the suspension order and copies of any written materials which the individual or entity feels are appropriate. All medical and patient-specific information, including Department findings with respect to the quality of care rendered, shall be strictly confidential pursuant to the Medical Studies Act.

(3) Within 24 hours following receipt of the EMS Medical Director's suspension order or the individual or entity's written response, whichever is later, the Director or the Director's designee shall determine whether the suspension should be stayed pending an opportunity for a hearing or review in accordance with this Act, or whether the suspension should continue during the course of that hearing or review. When an immediate suspension order is not stayed, the Director or the Director's designee within the Department shall identify if that suspension shall immediately apply to statewide participation only in situations when a licensee has been charged with a crime while performing the licensee's official duties as an EMR, EMD, EMT, EMT-I, A-EMT, Paramedic, ECRN, TNS, PHRN, LI, PHPA, or PHAPRN and the licensee's continuation to practice poses the possibility of imminent harm to the public based off factual evidence provided to the Department. The determination to issue an immediate statewide suspension shall not deny the right to due process to a licensee. The Director or the Director's designee shall issue this determination to the EMS Medical Director, who shall immediately notify the suspended individual or entity. The suspension shall remain in effect during this period of review by the Director or the Director's designee.

(e) Upon issuance of a suspension order for reasons directly related to medical care, the EMS Medical Director shall also provide the individual or entity with the opportunity for a hearing before the local System review board, in accordance with subsection (f) and the rules promulgated by the Department.

(1) If the local System review board affirms or modifies the EMS Medical Director's suspension order, the individual or entity shall have the opportunity for a review of the local board's decision by the State EMS Disciplinary Review Board, pursuant to Section 3.45 of this Act.

(2) If the local System review board reverses or modifies the EMS Medical Director's suspension order, the EMS Medical Director shall have the opportunity for a review of the local board's decision by the State EMS Disciplinary Review Board, pursuant to Section 3.45 of this Act.

(3) The suspended individual or entity may elect to bypass the local System review board and seek direct review of the EMS Medical Director's suspension order by the State EMS Disciplinary Review Board.

(f) The Resource Hospital shall designate a local System review board in accordance with the rules of the Department, for the purpose of providing a hearing to any individual or entity participating within the System who is suspended from participation by the EMS Medical Director. The EMS Medical Director shall arrange for a certified shorthand reporter to make a stenographic record of that hearing and thereafter prepare a transcript of the proceedings. The EMS Medical Director shall inform the individual of the individual's right to have a union representative and legal counsel of the individual's choosing present at any interview. The union representative must comply with any confidentiality requirements and requirements for the protection of any patient information presented during the proceeding. The transcript, all documents or

materials received as evidence during the hearing and the local System review board's written decision shall be retained in the custody of the EMS system. The System shall implement a decision of the local System review board unless that decision has been appealed to the State Emergency Medical Services Disciplinary Review Board in accordance with this Act and the rules of the Department.

(g) The Resource Hospital shall implement a decision of the State Emergency Medical Services Disciplinary Review Board which has been rendered in accordance with this Act and the rules of the Department.

(Source: P.A. 103-521, eff. 1-1-24.)

Section 99. Effective date. This Act takes effect upon becoming law.".

There being no further amendments, the foregoing Amendment No. 1 was ordered engrossed, and the bill, as amended, was ordered to a third reading.

On motion of Senator Castro, **Senate Bill No. 3136** having been printed, was taken up, read by title a second time.

The following amendment was offered in the Committee on Judiciary, adopted and ordered printed:

AMENDMENT NO. 1 TO SENATE BILL 3136

AMENDMENT NO. 1 . Amend Senate Bill 3136 on page 4, by replacing line 26 with the following:

"(6) The exclusive collective bargaining representative of the majority of front-line employees at the Department of Children and Family Services, or the representative's designee.

(7) The Secretary of Human Services, or the"; and

on page 5, line 2, by replacing "(7)" with "(8)"; and

on page 5, line 4, by replacing "(8)" with "(9)"; and

on page 7, by deleting lines 13 through 22; and

by deleting pages 8 through 15; and

on page 16, by deleting lines 1 through 4 and lines 8 through 23; and

by deleting pages 17 through 28; and

on page 29, by deleting lines 1 through 4; and

on page 48, line 22, by deleting "Section 105,".

There being no further amendments, the foregoing Amendment No. 1 was ordered engrossed, and the bill, as amended, was ordered to a third reading.

On motion of Senator Feigenholtz, **Senate Bill No. 3138** having been printed, was taken up, read by title a second time.

The following amendment was offered in the Committee on Higher Education, adopted and ordered printed:

AMENDMENT NO. 1 TO SENATE BILL 3138

AMENDMENT NO. 1 . Amend Senate Bill 3138 by replacing everything after the enacting clause with the following:

"Section 5. The Children and Family Services Act is amended by changing Section 8 as follows:

(20 ILCS 505/8) (from Ch. 23, par. 5008)

Sec. 8. Scholarships and fee waivers; tuition waiver.

(a) Each year the Department shall select a minimum of 53 students (at least 4 of whom shall be children of veterans) to receive scholarships and fee waivers which will enable them to attend and complete their post-secondary education at a community college, university, or college. Youth shall be selected from among the youth for whom the Department has court-ordered legal responsibility, youth who aged out of care at age 18 or older, or youth formerly under care who have been adopted or who have been placed in private guardianship. Recipients must have earned a high school diploma from an accredited institution or a State of Illinois High School Diploma or have met the State criteria for high school graduation before the start of the school year for which they are applying for the scholarship and waiver. Scholarships and fee waivers shall be available to students for at least 5 years, provided they are continuing to work toward graduation and completion of a certificate or degree program. Unused scholarship dollars and fee waivers shall be reallocated to new recipients. No later than January 1, 2015, the Department shall promulgate rules identifying the criteria for "continuing to work toward graduation" and for reallocating unused scholarships and fee waivers. Selection shall be made on the basis of several factors, including, but not limited to, scholastic record, aptitude, and general interest in higher education. The selection committee shall include at least 2 individuals formerly under the care of the Department who have completed their post-secondary education. In accordance with this Act, tuition scholarships and fee waivers shall be available to such students at any university or college maintained by the State of Illinois. The Department shall provide maintenance and school expenses, except tuition and fees, during the academic years to supplement the students' earnings or other resources so long as they consistently maintain scholastic records which are acceptable to their schools and to the Department. Students may attend other colleges and universities, if scholarships are awarded to them, and receive the same benefits for maintenance and other expenses as those students attending any Illinois State community college, university, or college under this Section. Beginning with recipients receiving scholarships and waivers in August 2014, the Department shall collect data and report annually to the General Assembly on measures of success, including (i) the number of youth applying for and receiving scholarships or waivers, (ii) the percentage of scholarship or waiver recipients who complete their college or university degree within 5 years, (iii) the average length of time it takes for scholarship or waiver recipients to complete their college or university degree, (iv) the reasons that scholarship or waiver recipients are discharged or fail to complete their college or university degree, (v) when available, youths' outcomes 5 years and 10 years after being awarded the scholarships or waivers, and (vi) budget allocations for maintenance and school expenses incurred by the Department.

(b) Youth shall receive a tuition and fee waiver to assist them in attending and completing their post-secondary education at any community college, university, or college maintained by the State of Illinois if they are youth for whom the Department has court-ordered legal responsibility, youth who aged out of care at age 18 or older, or youth formerly under care who have been adopted and were the subject of an adoption assistance agreement or who have been placed in private guardianship and were the subject of a subsidized guardianship agreement.

To receive a waiver under this subsection, an applicant must:

(1) have earned a high school diploma from an accredited institution or a State of Illinois High School Diploma or have met the State criteria for high school graduation before the start of the school year for which the applicant is applying for the waiver;

(2) enroll in a qualifying post-secondary education before the applicant reaches the age of 26; and

(3) apply for federal and State grant assistance by completing the Free Application for Federal Student Aid.

The community college or public university that an applicant attends must waive any tuition and fee amounts that exceed the amounts paid to the applicant under the ~~federal Pell Grant Program or the~~ State's Monetary Award Program.

Tuition and fee waivers shall be available to a student for at least the first 5 years the student is enrolled in a community college, university, or college maintained by the State of Illinois so long as the student continues to work toward graduation and completion of a certificate or degree program. ~~makes satisfactory progress toward completing the student's degree.~~ The age requirement and 5-year cap on tuition and fee waivers under this subsection shall be waived and eligibility for tuition and fee waivers shall be extended for any applicant or student who the Department determines was unable to enroll in a qualifying post-secondary school or complete an academic term because the applicant or student: (i) was called into active duty with the United States Armed Forces; (ii) was deployed for service in the United States Public

Health Service Commissioned Corps; or (iii) volunteered in the Peace Corps or the AmeriCorps. The Department shall extend eligibility for a qualifying applicant or student by the total number of months or years during which the applicant or student served on active duty with the United States Armed Forces, was deployed for service in the United States Public Health Service Commissioned Corps, or volunteered in the Peace Corps or the AmeriCorps. The number of months an applicant or student served on active duty with the United States Armed Forces shall be rounded up to the next higher year to determine the maximum length of time to extend eligibility for the applicant or student.

The Department may provide the student with a stipend to cover maintenance and school expenses, except tuition and fees, during the academic years to supplement the student's earnings or other resources so long as the student consistently maintains scholastic records which are acceptable to the student's school and to the Department.

The Department shall develop outreach programs to ensure that youths who qualify for the tuition and fee waivers under this subsection who are high school students in grades 9 through 12 or who are enrolled in a high school equivalency testing program are aware of the availability of the tuition and fee waivers.

(c) Subject to appropriation, the Department shall provide eligible youth an apprenticeship stipend to cover those costs associated with entering and sustaining through completion an apprenticeship, including, but not limited to fees, tuition for classes, work clothes, rain gear, boots, and occupation-specific tools. The following youth may be eligible for the apprenticeship stipend provided under this subsection: youth for whom the Department has court-ordered legal responsibility; youth who aged out of care at age 18 or older; or youth formerly under care who have been adopted and were the subject of an adoption assistance agreement or who have been placed in private guardianship and were the subject of a subsidized guardianship agreement.

To receive a stipend under this subsection, an applicant must:

(1) be enrolled in an apprenticeship training program approved or recognized by the Illinois Department of Employment Security or an apprenticeship program approved by the United States Department of Labor;

(2) not be a recipient of a scholarship or fee waiver under subsection (a) or (b); and

(3) be under the age of 26 before enrolling in a qualified apprenticeship program.

Apprenticeship stipends shall be available to an eligible youth for a maximum of 5 years after the youth enrolls in a qualifying apprenticeship program so long as the youth makes satisfactory progress toward completing the youth's apprenticeship. The age requirement and 5-year cap on the apprenticeship stipend provided under this subsection shall be extended for any applicant who the Department determines was unable to enroll in a qualifying apprenticeship program because the applicant: (i) was called into active duty with the United States Armed Forces; (ii) was deployed for service in the United States Public Health Service Commissioned Corps; or (iii) volunteered in the Peace Corps or the AmeriCorps. The Department shall extend eligibility for a qualifying applicant by the total number of months or years during which the applicant served on active duty with the United States Armed Forces, was deployed for service in the United States Public Health Service Commissioned Corps, or volunteered in the Peace Corps or the AmeriCorps. The number of months an applicant served on active duty with the United States Armed Forces shall be rounded up to the next higher year to determine the maximum length of time to extend eligibility for the applicant.

The Department shall develop outreach programs to ensure that youths who qualify for the apprenticeship stipends under this subsection who are high school students in grades 9 through 12 or who are enrolled in a high school equivalency testing program are aware of the availability of the apprenticeship stipend.

(Source: P.A. 102-1100, eff. 1-1-23; 103-22, eff. 8-8-23; 103-154, eff. 6-30-23.)

Section 99. Effective date. This Act takes effect upon becoming law.".

There being no further amendments, the foregoing Amendment No. 1 was ordered engrossed, and the bill, as amended, was ordered to a third reading.

On motion of Senator Stadelman, **Senate Bill No. 3151** having been printed, was taken up, read by title a second time.

The following amendment was offered in the Committee on Education, adopted and ordered printed:

AMENDMENT NO. 1 TO SENATE BILL 3151

AMENDMENT NO. 1 . Amend Senate Bill 3151 by replacing everything after the enacting clause with the following:

"Section 5. The School Code is amended by changing Section 27-24.2 as follows:

(105 ILCS 5/27-24.2) (from Ch. 122, par. 27-24.2)

Sec. 27-24.2. Safety education; driver education course. Instruction shall be given in safety education in each of grades one through 8, equivalent to one class period each week, and any school district which maintains grades 9 through 12 shall offer a driver education course in any such school which it operates. Its curriculum shall include content dealing with Chapters 11, 12, 13, 15, and 16 of the Illinois Vehicle Code, the rules adopted pursuant to those Chapters insofar as they pertain to the operation of motor vehicles, and the portions of the Litter Control Act relating to the operation of motor vehicles. The course of instruction given in grades 10 through 12 shall include an emphasis on the development of knowledge, attitudes, habits, and skills necessary for the safe operation of motor vehicles, including motorcycles insofar as they can be taught in the classroom, and instruction on distracted driving as a major traffic safety issue. In addition, the course shall include instruction on special hazards existing at and required safety and driving precautions that must be observed at emergency situations, highway construction and maintenance zones, including worker safety in highway construction and maintenance zones, and railroad crossings and the approaches thereto. Beginning with the 2017-2018 school year, the course shall also include instruction concerning law enforcement procedures for traffic stops, including a demonstration of the proper actions to be taken during a traffic stop and appropriate interactions with law enforcement. The course of instruction required of each eligible student at the high school level shall consist of a minimum of 30 clock hours of classroom instruction and a minimum of 6 clock hours of individual behind-the-wheel instruction in a dual control car on public roadways taught by a driver education instructor endorsed by the State Board of Education. A school district's decision to allow a student to take a portion of the driver education course through a distance learning program must be determined on a case-by-case basis and must be approved by the school's administration, including the student's driver education teacher, and the student's parent or guardian. Under no circumstances may the student take the entire driver education course through a distance learning program. Both the classroom instruction part and the practice driving part of a driver education course shall be open to a resident or non-resident student attending a non-public school in the district wherein the course is offered. Each student attending any public or non-public high school in the district must receive a passing grade in at least 8 courses during the previous 2 semesters prior to enrolling in a driver education course, or the student shall not be permitted to enroll in the course; provided that the local superintendent of schools (with respect to a student attending a public high school in the district) or chief school administrator (with respect to a student attending a non-public high school in the district) may waive the requirement if the superintendent or chief school administrator, as the case may be, deems it to be in the best interest of the student. A student may be allowed to commence the classroom instruction part of such driver education course prior to reaching age 15 if such student then will be eligible to complete the entire course within 12 months after being allowed to commence such classroom instruction.

A school district may offer a driver education course in a school by contracting with a commercial driver training school to provide both the classroom instruction part and the practice driving part or either one without having to request a modification or waiver of administrative rules of the State Board of Education if the school district approves the action during a public hearing on whether to enter into a contract with a commercial driver training school. The public hearing shall be held at a regular or special school board meeting prior to entering into such a contract. If a school district chooses to approve a contract with a commercial driver training school, then the district must provide evidence to the State Board of Education that the commercial driver training school with which it will contract holds a license issued by the Secretary of State under Article IV of Chapter 6 of the Illinois Vehicle Code and that each instructor employed by the commercial driver training school to provide instruction to students served by the school district holds a valid teaching license issued under the requirements of this Code and rules of the State Board of Education. Such evidence must include, but need not be limited to, a list of each instructor assigned to teach students served by the school district, which list shall include the instructor's name, personal identification number as required by the State Board of Education, birth date, and driver's license number. Once the contract is entered into, the school district shall notify the State Board of Education of any changes in the personnel providing instruction either (i) within 15 calendar days after an instructor leaves the program or (ii) before a new instructor is hired. Such notification shall include the instructor's name,

personal identification number as required by the State Board of Education, birth date, and driver's license number. If the school district maintains an Internet website, then the district shall post a copy of the final contract between the district and the commercial driver training school on the district's Internet website. If no Internet website exists, then the school district shall make available the contract upon request. A record of all materials in relation to the contract must be maintained by the school district and made available to parents and guardians upon request. The instructor's date of birth and driver's license number and any other personally identifying information as deemed by the federal Driver's Privacy Protection Act of 1994 must be redacted from any public materials.

Such a course may be commenced immediately after the completion of a prior course. Teachers of such courses shall meet the licensure requirements of this Code and regulations of the State Board as to qualifications. Except for a contract with a Certified Driver Rehabilitation Specialist, a school district that contracts with a third party to teach a driver education course under this Section must ensure the teacher meets the educator licensure and endorsement requirements under Article 21B and must follow the same evaluation and observation requirements that apply to non-tenured teachers under Article 24A. The teacher evaluation must be conducted by a school administrator employed by the school district and must be submitted annually to the district superintendent and all school board members for oversight purposes.

Subject to rules of the State Board of Education, the school district may charge a reasonable fee, not to exceed $50, to students who participate in the course, unless a student is unable to pay for such a course, in which event the fee for such a student must be waived. However, the district may increase this fee to an amount not to exceed $250 by school board resolution following a public hearing on the increase, which increased fee must be waived for students who participate in the course and are unable to pay for the course. The total amount from driver education fees and reimbursement from the State for driver education must not exceed the total cost of the driver education program in any year and must be deposited into the school district's driver education fund as a separate line item budget entry. All moneys deposited into the school district's driver education fund must be used solely for the funding of a high school driver education program approved by the State Board of Education that uses driver education instructors endorsed by the State Board of Education.

(Source: P.A. 101-183, eff. 8-2-19; 101-450, eff. 8-23-19; 102-558, eff. 8-20-21.)

Section 99. Effective date. This Act takes effect August 1, 2024.".

There being no further amendments, the foregoing Amendment No. 1 was ordered engrossed, and the bill, as amended, was ordered to a third reading.

On motion of Senator Cunningham, **Senate Bill No. 3155** having been printed, was taken up, read by title a second time and ordered to a third reading.

On motion of Senator Johnson, **Senate Bill No. 3157** having been printed, was taken up, read by title a second time.

The following amendment was offered in the Committee on Financial Institutions, adopted and ordered printed:

AMENDMENT NO. 1 TO SENATE BILL 3157

AMENDMENT NO. 1 . Amend Senate Bill 3157 by replacing everything after the enacting clause with the following:

"Section 5. The State Treasurer Act is amended by changing Section 10 and by adding Section 17.2 as follows:

(15 ILCS 505/10) (from Ch. 130, par. 10)

Sec. 10. Direct deposit of State payments. The Treasurer shall not pay out of the treasury any money, except upon the warrant of the State Comptroller, provided that warrants shall not be required where payments are made by the Comptroller:

(1) to providers of community-based mental health services; ~~,~~

(2) to persons receiving benefit payments under the State pension systems; ~~,~~

(3) to individuals receiving assistance under Article III of the Illinois Public Aid Code; ~~, or~~

(4) to a public agency as defined in the Public Funds Investment Act; or ~~,~~

(5) by direct deposit or by the electronic ~~direct deposit or~~ transfer of funds.

These payments, however, shall only be made upon the approval of the Treasurer, in the form and method provided by the rules or regulations adopted under Section 9.03 of the State Comptroller Act.
(Source: P.A. 87-132; 87-653; 87-685; 87-751; 87-895; 88-643, eff. 1-1-95.)

(15 ILCS 505/17.2 new)

Sec. 17.2. Non-profit investment pool.

(a) The State Treasurer may establish and administer a non-profit investment pool and an electronic payment processing program to supplement and enhance investment opportunities and secure electronic payment options otherwise available to not-for-profit corporations in this State.

(b) The Treasurer may receive funds paid into the non-profit investment pool by a not-for-profit corporation that is exempt from taxation under Section 501(c)(3), 501(c)(4), or 501(c)(6) of the Internal Revenue Code for the purpose of holding and investing those funds.

(c) The Treasurer may invest the funds constituting the non-profit investment pool in the same manner, in the same types of investments, and subject to the same limitations provided for the investment of funds in the State Treasury. The Treasurer shall develop, publish, and implement an investment policy covering the management of funds in the non-profit investment pool. The policy shall be published each year as part of the audit of the non-profit investment pool by the Auditor General, which shall be distributed to all participants. The Treasurer shall notify all non-profit investment pool participants in writing, and the Treasurer shall publish in at least one newspaper of general circulation in both Springfield and Chicago any changes to a previously published investment policy at least 30 calendar days before implementing the policy. Any investment policy adopted by the Treasurer shall be reviewed, and updated if necessary, within 90 days after the installation of a new Treasurer.

(d) The Treasurer shall adopt rules for the efficient administration of the non-profit investment pool, including the minimum amounts that may be deposited in the non-profit investment pool and the minimum period of time that deposits shall be retained in the non-profit investment pool. The rules shall provide for the administrative expenses of the non-profit investment pool to be paid from its earnings and for the interest earnings in excess of such expenses to be credited or paid monthly to the not-for-profit corporations participating in the non-profit investment pool in a manner which equitably reflects the differing amounts of their respective investments in the non-profit investment pool and the differing periods of time for which the amounts were in the custody of the non-profit investment pool.

(e) Upon creating a non-profit investment pool, the State Treasurer shall give bond with 2 or more sufficient sureties, payable to not-for-profit corporations that participate in the non-profit investment pool for the benefit of the not-for-profit corporations that have funds that are paid into the non-profit investment pool for investment, in the penal sum of $150,000, conditioned for the faithful discharge of the State Treasurer's duties in relation to the non-profit investment pool.

Section 10. The Accountability for the Investment of Public Funds Act is amended by changing Section 10 as follows:

(30 ILCS 237/10)

Sec. 10. Online information concerning investment of public funds. Each State agency shall make available on the Internet, and update at least monthly, no later than the end of each month ~~by the 15th of the month~~, sufficient information concerning the investment of any public funds held by that State agency to identify the following:

(1) the amount of funds held by that agency on the last day of the preceding month or the average daily balance for the preceding month;

(2) the total monthly investment income and yield for all funds invested by that agency;

(3) the asset allocation of the investments made by that agency; and

(4) a complete listing of all approved depository institutions, commercial paper issuers, and broker-dealers approved to do business with that agency.

(Source: P.A. 93-499, eff. 1-1-04.)

Section 99. Effective date. This Act takes effect upon becoming law.".

There being no further amendments, the foregoing Amendment No. 1 was ordered engrossed, and the bill, as amended, was ordered to a third reading.

On motion of Senator Edly-Allen, **Senate Bill No. 3164** having been printed, was taken up, read by title a second time and ordered to a third reading.

On motion of Senator Koehler, **Senate Bill No. 3165** having been printed, was taken up, read by title a second time and ordered to a third reading.

On motion of Senator Koehler, **Senate Bill No. 3166** having been printed, was taken up, read by title a second time and ordered to a third reading.

On motion of Senator Koehler, **Senate Bill No. 3174** having been printed, was taken up, read by title a second time and ordered to a third reading.

On motion of Senator Castro, **Senate Bill No. 3180** having been printed, was taken up, read by title a second time.

The following amendment was offered in the Committee on Labor, adopted and ordered printed:

AMENDMENT NO. 1 TO SENATE BILL 3180

AMENDMENT NO. 1. Amend Senate Bill 3180 on page 1, by replacing lines 7 through 19 as follows:

"Sec. 8.2. Child performers; hour requirements. A child performer who works in a television, motion".

There being no further amendments, the foregoing Amendment No. 1 was ordered engrossed, and the bill, as amended, was ordered to a third reading.

On motion of Senator Collins, **Senate Bill No. 3182** having been printed, was taken up, read by title a second time.

The following amendment was offered in the Committee on Judiciary, adopted and ordered printed:

AMENDMENT NO. 1 TO SENATE BILL 3182

AMENDMENT NO. 1. Amend Senate Bill 3182 on page 1, line 10, by replacing "mother of her" with "patient of the ~~mother of her~~"; and

on page 1, lines 15 and 22, by replacing "mother" with "patient ~~mother~~"; and

on page 2, line 10, after "develop", by inserting "language on"; and

on page 2, by replacing lines 12 through 19 with "gestational parent. This section of language shall be known as a "Liam's Law notice". The "Liam's Law notice" shall be available in both English and Spanish."; and

on page 3, line 2, by replacing "mother" with "patient ~~mother~~"; and

on page 5, by replacing lines 2 through 12 with the following:

"(b) After each fetal death that occurs in this State after a gestation period of at least 20 completed weeks, the State Registrar of Vital Records shall, only upon request by a parent named on the fetal death certificate, prepare and issue a certificate of birth resulting in stillbirth. ~~After each fetal death that occurs in this State after a gestation period of at least 26 completed weeks, the person who files a fetal death certificate in connection with that death as required under Section 20 shall, only upon request by the woman who delivered the stillborn fetus, also prepare a certificate of stillbirth. The person shall prepare the certificate on the form prescribed and furnished by the State Registrar and in accordance with the rules adopted by the State Registrar.~~"; and

on page 5, line 17, by replacing "forms" with "language"; and

on page 5, line 18, by replacing "form" with "language"; and

on page 6, lines 18 and 19, by replacing "upon becoming law" with "July 1, 2025".

There being no further amendments, the foregoing Amendment No. 1 was ordered engrossed, and the bill, as amended, was ordered to a third reading.

On motion of Senator Tracy, **Senate Bill No. 3207** having been printed, was taken up, read by title a second time and ordered to a third reading.

On motion of Senator Hunter, **Senate Bill No. 3203** having been printed, was taken up, read by title a second time.

The following amendment was offered in the Committee on Insurance, adopted and ordered printed:

AMENDMENT NO. 1 TO SENATE BILL 3203

AMENDMENT NO. 1 . Amend Senate Bill 3203 by replacing everything after the enacting clause with the following:

"Section 5. The State Employees Group Insurance Act of 1971 is amended by changing Section 6.11 as follows:

(5 ILCS 375/6.11)

Sec. 6.11. Required health benefits; Illinois Insurance Code requirements. The program of health benefits shall provide the post-mastectomy care benefits required to be covered by a policy of accident and health insurance under Section 356t of the Illinois Insurance Code. The program of health benefits shall provide the coverage required under Sections 356g, 356g.5, 356g.5-1, 356m, 356q, 356u, 356w, 356x, 356z.2, 356z.4, 356z.4a, 356z.5, 356z.6, 356z.8, 356z.9, 356z.10, 356z.11, 356z.12, 356z.13, 356z.14, 356z.15, 356z.17, 356z.22, 356z.25, 356z.26, 356z.29, 356z.30a, 356z.32, 356z.33, 356z.36, 356z.40, 356z.41, 356z.45, 356z.46, 356z.47, 356z.51, 356z.53, 356z.54, 356z.55, 356z.56, 356z.57, 356z.59, 356z.60, ~~and~~ 356z.61, ~~and~~ 356z.62, 356z.64, 356z.67, 356z.68, and 356z.70 of the Illinois Insurance Code. The program of health benefits must comply with Sections 155.22a, 155.37, 355b, 356z.19, 370c, and 370c.1 and Article XXXIIB of the Illinois Insurance Code. The program of health benefits shall provide the coverage required under Section 356m of the Illinois Insurance Code and, for the employees of the State Employee Group Insurance Program only, the coverage as also provided in Section 6.11B of this Act. The Department of Insurance shall enforce the requirements of this Section with respect to Sections 370c and 370c.1 of the Illinois Insurance Code; all other requirements of this Section shall be enforced by the Department of Central Management Services.

Rulemaking authority to implement Public Act 95-1045, if any, is conditioned on the rules being adopted in accordance with all provisions of the Illinois Administrative Procedure Act and all rules and procedures of the Joint Committee on Administrative Rules; any purported rule not so adopted, for whatever reason, is unauthorized.

(Source: P.A. 102-30, eff. 1-1-22; 102-103, eff. 1-1-22; 102-203, eff. 1-1-22; 102-306, eff. 1-1-22; 102-642, eff. 1-1-22; 102-665, eff. 10-8-21; 102-731, eff. 1-1-23; 102-768, eff. 1-1-24; 102-804, eff. 1-1-23; 102-813, eff. 5-13-22; 102-816, eff. 1-1-23; 102-860, eff. 1-1-23; 102-1093, eff. 1-1-23; 102-1117, eff. 1-13-23; 103-8, eff. 1-1-24; 103-84, eff. 1-1-24; 103-91, eff. 1-1-24; 103-420, eff. 1-1-24; 103-445, eff. 1-1-24; 103-535, eff. 8-11-23; 103-551, eff. 8-11-23; revised 8-29-23.)

Section 10. The Illinois Insurance Code is amended by changing Section 356z.5 as follows:

(215 ILCS 5/356z.5)

Sec. 356z.5. Prescription inhalants.

(a) In this Section, "prescription inhaler" means a prescribed medical device that delivers inhaled medications used to treat breathing for persons suffering from asthma or other life-threatening bronchial ailments. "Prescription inhaler" includes metered-dose inhalers, nebulizers, and dry powder inhalers. "Prescription inhaler" does not include inhalers available over the counter without a prescription to provide temporary relief from respiratory symptoms.

(b) A group or individual policy of accident and health insurance or managed care plan amended, delivered, issued, or renewed through December 31, 2025 ~~after the effective date of this amendatory Act of the 93rd General Assembly~~ that provides coverage for prescription drugs may not deny or limit coverage for

prescription inhalers ~~inhalants~~ to enable persons to breathe when suffering from asthma or other life-threatening bronchial ailments based upon any restriction on the number of days before an inhaler refill may be obtained if, contrary to those restrictions, the inhalants have been ordered or prescribed by the treating physician and are medically appropriate.

(c) A group or individual policy of accident and health insurance or managed care plan amended, delivered, issued, or renewed on or after January 1, 2026 that provides coverage for prescription drugs may not deny or limit, except as otherwise provided in this subsection, coverage for prescription inhalers to enable persons to breathe when suffering from asthma or other life-threatening bronchial ailments based upon any restriction on the number of days before an inhaler refill may be obtained if, contrary to those restrictions, the inhalants have been ordered or prescribed by the treating physician and are medically appropriate. A group or individual policy of accident and health insurance or managed care plan subject to this subsection shall limit the total amount that a covered person is required to pay for a covered prescription inhaler to an amount not to exceed $25 dollars per 30-day supply.

(d) Nothing in this Section prevents a group or individual policy of accident and health insurance or managed care plan from reducing a covered person's cost sharing to an amount less than the amount specified in subsection (c).

(e) Coverage for prescription inhalers shall not be subject to any deductible; except that this provision does not apply to the extent such coverage would disqualify a high-deductible health plan from eligibility for a health savings account pursuant to Section 223 of the Internal Revenue Code (26 U.S.C. 223).

(f) The Department may adopt rules necessary to implement and administer this Section and to align with federal requirements. The Department may use any of its enforcement powers to obtain a group or individual policy of accident and health insurance's or managed care plan's compliance with this Section.

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

There being no further amendments, the foregoing Amendment No. 1 was ordered engrossed, and the bill, as amended, was ordered to a third reading.

On motion of Senator Villa, **Senate Bill No. 3209** having been printed, was taken up, read by title a second time and ordered to a third reading.

On motion of Senator D. Turner, **Senate Bill No. 3216** having been printed, was taken up, read by title a second time and ordered to a third reading.

On motion of Senator D. Turner, **Senate Bill No. 3219** having been printed, was taken up, read by title a second time and ordered to a third reading.

On motion of Senator Belt, **Senate Bill No. 3237** having been printed, was taken up, read by title a second time and ordered to a third reading.

On motion of Senator Belt, **Senate Bill No. 3238** having been printed, was taken up, read by title a second time and ordered to a third reading.

On motion of Senator Belt, **Senate Bill No. 3239** having been printed, was taken up, read by title a second time and ordered to a third reading.

On motion of Senator Loughran Cappel, **Senate Bill No. 3241** having been printed, was taken up, read by title a second time and ordered to a third reading.

On motion of Senator Fowler, **Senate Bill No. 3265** having been printed, was taken up, read by title a second time and ordered to a third reading.

On motion of Senator Gillespie, **Senate Bill No. 3268** having been printed, was taken up, read by title a second time and ordered to a third reading.

On motion of Senator Holmes, **Senate Bill No. 3275** having been printed, was taken up, read by title a second time and ordered to a third reading.

On motion of Senator Bennett, **Senate Bill No. 3277** having been printed, was taken up, read by title a second time.

The following amendment was offered in the Committee on Public Health, adopted and ordered printed:

AMENDMENT NO. 1 TO SENATE BILL 3277

AMENDMENT NO. 1 . Amend Senate Bill 3277 on page 1, line 12, by replacing "The" with "Subject to appropriation, the".

There being no further amendments, the foregoing Amendment No. 1 was ordered engrossed, and the bill, as amended, was ordered to a third reading.

On motion of Senator Villa, **Senate Bill No. 3279** having been printed, was taken up, read by title a second time and ordered to a third reading.

On motion of Senator Feigenholtz, **Senate Bill No. 3282** having been printed, was taken up, read by title a second time and ordered to a third reading.

On motion of Senator Peters, **Senate Bill No. 3285** having been printed, was taken up, read by title a second time and ordered to a third reading.

On motion of Senator Simmons, **Senate Bill No. 3297** having been printed, was taken up, read by title a second time and ordered to a third reading.

On motion of Senator Syverson, **Senate Bill No. 3302** having been printed, was taken up, read by title a second time and ordered to a third reading.

On motion of Senator Simmons, **Senate Bill No. 3309** having been printed, was taken up, read by title a second time.

The following amendment was offered in the Committee on Transportation, adopted and ordered printed:

AMENDMENT NO. 1 TO SENATE BILL 3309

AMENDMENT NO. 1 . Amend Senate Bill 3309 on page 1, by replacing lines 14 through 16 with "alerting pedestrians or cyclists of highway crossings at least 150 feet in advance of the crossing. If".

There being no further amendments, the foregoing Amendment No. 1 was ordered engrossed, and the bill, as amended, was ordered to a third reading.

On motion of Senator Cunningham, **Senate Bill No. 3314** having been printed, was taken up, read by title a second time and ordered to a third reading.

On motion of Senator McConchie, **Senate Bill No. 3323** having been printed, was taken up, read by title a second time.

Committee Amendment No. 1 was postponed in the Committee on Judiciary.

The following amendments were offered in the Committee on Judiciary, adopted and ordered printed:

AMENDMENT NO. 2 TO SENATE BILL 3323

AMENDMENT NO. 2 . Amend Senate Bill 3323 on page 10, by inserting immediately below line 12 the following:

"Section 51. Enforcement. The Attorney General shall have the authority to enforce this Act. The Attorney General may investigate any complaint or reported violation of this Act and, if necessary to ensure compliance, may do any or all of the following:

(1) Conduct an investigation to determine if a violation of this Act exists. This includes the power to:

(A) require an individual or entity to file a statement or report in writing under oath or otherwise, as to all information the Attorney General may consider;

(B) examine under oath any person alleged to have participated in or with knowledge of the violations; and

(C) issue subpoenas or conduct hearings in aid of any investigation.

(2) Bring an action for an injunction to halt construction or alteration of any electric vehicle charging station or to require compliance with this Act by any electric vehicle charging station that has been or is being constructed or altered in violation of this Act.

(3) Bring an action for mandamus.

(4) Bring an action for penalties as follows: any owner of an electric vehicle charging station in violation of this Act is subject to civil penalties in a sum not to exceed S250 per day, and each day the owner is in violation of this Act constitutes a separate offense.

(5) Bring an action for any other appropriate relief, including, but not limited to, in lieu of a civil action, the entry of an assurance of voluntary compliance with the individual or entity deemed to have violated this Act.".

AMENDMENT NO. 3 TO SENATE BILL 3323

AMENDMENT NO. 3 . Amend Senate Bill 3323 on page 1, immediately below line 5, by inserting the following:

"Section 3. Applicability. This Act does not apply to a charger owned by a resident of any of the following if the charger is not used for a commercial purpose:

(1) a single-family home;

(2) a condominium association;

(3) a common interest community association;

(4) a master association; or

(5) a residential housing cooperative.".

There being no further amendments, the foregoing Amendments Numbered 2 and 3 were ordered engrossed, and the bill, as amended, was ordered to a third reading.

On motion of Senator Martwick, **Senate Bill No. 3343** having been printed, was taken up, read by title a second time and ordered to a third reading.

On motion of Senator Martwick, **Senate Bill No. 3348** having been printed, was taken up, read by title a second time and ordered to a third reading.

On motion of Senator Ellman, **Senate Bill No. 3350** having been printed, was taken up, read by title a second time.

Committee Amendment No. 1 was postponed in the Committee on Public Health.

The following amendment was offered in the Committee on Public Health, adopted and ordered printed:

AMENDMENT NO. 2 TO SENATE BILL 3350

AMENDMENT NO. 2 . Amend Senate Bill 3350 by replacing everything after the enacting clause with the following:

"Section 5. The Substance Use Disorder Act is amended by changing Section 5-23 as follows:

(20 ILCS 301/5-23)

Sec. 5-23. Drug Overdose Prevention Program.

(a) Reports.

(1) The Department may publish annually a report on drug overdose trends statewide that reviews State death rates from available data to ascertain changes in the causes or rates of fatal and nonfatal drug overdose. The report shall also provide information on interventions that would be effective in reducing the rate of fatal or nonfatal drug overdose and on the current substance use disorder treatment capacity within the State. The report shall include an analysis of drug overdose information reported to the Department of Public Health pursuant to subsection (e) of Section 3-3013 of the Counties Code, Section 6.14g of the Hospital Licensing Act, and subsection (j) of Section 22-30 of the School Code.

(2) The report may include:

(A) Trends in drug overdose death rates.

(B) Trends in emergency room utilization related to drug overdose and the cost impact of emergency room utilization.

(C) Trends in utilization of pre-hospital and emergency services and the cost impact of emergency services utilization.

(D) Suggested improvements in data collection.

(E) A description of other interventions effective in reducing the rate of fatal or nonfatal drug overdose.

(F) A description of efforts undertaken to educate the public about unused medication and about how to properly dispose of unused medication, including the number of registered collection receptacles in this State, mail-back programs, and drug take-back events.

(G) An inventory of the State's substance use disorder treatment capacity, including, but not limited to:

(i) The number and type of licensed treatment programs in each geographic area of the State.

(ii) The availability of medication-assisted treatment at each licensed program and which types of medication-assisted treatment are available.

(iii) The number of recovery homes that accept individuals using medication-assisted treatment in their recovery.

(iv) The number of medical professionals currently authorized to prescribe buprenorphine and the number of individuals who fill prescriptions for that medication at retail pharmacies as prescribed.

(v) Any partnerships between programs licensed by the Department and other providers of medication-assisted treatment.

(vi) Any challenges in providing medication-assisted treatment reported by programs licensed by the Department and any potential solutions.

(b) Programs; drug overdose prevention.

(1) The Department may establish a program to provide for the production and publication, in electronic and other formats, of drug overdose prevention, recognition, and response literature. The Department may develop and disseminate curricula for use by professionals, organizations, individuals, or committees interested in the prevention of fatal and nonfatal drug overdose, including, but not limited to, drug users, jail and prison personnel, jail and prison inmates, drug treatment professionals, emergency medical personnel, hospital staff, families and associates of drug users, peace officers, firefighters, public safety officers, needle exchange program staff, and other persons. In addition to information regarding drug overdose prevention, recognition, and response, literature produced by the Department shall stress that drug use remains illegal and highly dangerous and that complete abstinence from illegal drug use is the healthiest choice. The literature shall provide information and resources for substance use disorder treatment.

The Department may establish or authorize programs for prescribing, dispensing, or distributing opioid antagonists for the treatment of drug overdose and for dispensing and distributing fentanyl test strips to further promote harm reduction efforts and prevent an overdose. Such programs may include the prescribing of opioid antagonists for the treatment of drug overdose to a person who is not at risk of opioid overdose but who, in the judgment of the health care professional, may be in a position to assist another individual during an opioid-related drug overdose and who has received basic instruction on how to administer an opioid antagonist.

(2) The Department may provide advice to State and local officials on the growing drug overdose crisis, including the prevalence of drug overdose incidents, programs promoting the disposal

of unused prescription drugs, trends in drug overdose incidents, and solutions to the drug overdose crisis.

(3) The Department may support drug overdose prevention, recognition, and response projects by facilitating the acquisition of opioid antagonist medication approved for opioid overdose reversal, facilitating the acquisition of opioid antagonist medication approved for opioid overdose reversal, providing trainings in overdose prevention best practices, facilitating the acquisition of fentanyl test strips to test for the presence of fentanyl, a fentanyl analog, or a drug adulterant within a controlled substance, connecting programs to medical resources, establishing a statewide standing order for the acquisition of needed medication, establishing learning collaboratives between localities and programs, and assisting programs in navigating any regulatory requirements for establishing or expanding such programs.

(4) In supporting best practices in drug overdose prevention programming, the Department may promote the following programmatic elements:

(A) Training individuals who currently use drugs in the administration of opioid antagonists approved for the reversal of an opioid overdose and in the use of fentanyl test strips to test for the presence of fentanyl, a fentanyl analog, or a drug adulterant within a controlled substance.

(B) Directly distributing opioid antagonists approved for the reversal of an opioid overdose rather than providing prescriptions to be filled at a pharmacy.

(B-1) Directly distributing fentanyl test strips to test for the presence of fentanyl, a fentanyl analog, or a drug adulterant within a controlled substance.

(C) Conducting street and community outreach to work directly with individuals who are using drugs.

(D) Employing community health workers or peer recovery specialists who are familiar with the communities served and can provide culturally competent services.

(E) Collaborating with other community-based organizations, substance use disorder treatment centers, or other health care providers engaged in treating individuals who are using drugs.

(F) Providing linkages for individuals to obtain evidence-based substance use disorder treatment.

(G) Engaging individuals exiting jails or prisons who are at a high risk of overdose.

(H) Providing education and training to community-based organizations who work directly with individuals who are using drugs and those individuals' families and communities.

(I) Providing education and training on drug overdose prevention and response to emergency personnel and law enforcement.

(J) Informing communities of the important role emergency personnel play in responding to accidental overdose.

(K) Producing and distributing targeted mass media materials on drug overdose prevention and response, the potential dangers of leaving unused prescription drugs in the home, and the proper methods for disposing of unused prescription drugs.

(c) Grants.

(1) The Department may award grants, in accordance with this subsection, to create or support local drug overdose prevention, recognition, and response projects. Local health departments, correctional institutions, hospitals, universities, community-based organizations, and faith-based organizations may apply to the Department for a grant under this subsection at the time and in the manner the Department prescribes. Eligible grant activities include, but are not limited to, purchasing and distributing opioid antagonists and fentanyl test strips, hiring peer recovery specialists or other community members to conduct community outreach, and hosting public health fairs or events to distribute opioid antagonists and fentanyl test strips, promote harm reduction activities, and provide linkages to community partners.

(2) In awarding grants, the Department shall consider the overall rate of opioid overdose, the rate of increase in opioid overdose, and racial disparities in opioid overdose experienced by the communities to be served by grantees. The Department shall encourage all grant applicants to develop interventions that will be effective and viable in their local areas.

(3) (Blank).

(3.5) Any hospital licensed under the Hospital Licensing Act or organized under the University of Illinois Hospital Act shall be deemed to have met the standards and requirements set forth in this Section to enroll in the drug overdose prevention program upon completion of the enrollment process except that proof of a standing order and attestation of programmatic requirements shall be waived for enrollment purposes. Reporting mandated by enrollment shall be necessary to carry out or attain eligibility for associated resources under this Section for drug overdose prevention projects operated on the licensed premises of the hospital and operated by the hospital or its designated agent. The Department shall streamline hospital enrollment for drug overdose prevention programs by accepting such deemed status under this Section in order to reduce barriers to hospital participation in drug overdose prevention, recognition, or response projects. Subject to appropriation, any hospital under this paragraph and any other organization deemed eligible by the Department shall be enrolled to receive fentanyl test strips from the Department and distribute fentanyl test strips upon enrollment in the Drug Overdose Prevention Program.

(4) In addition to moneys appropriated by the General Assembly, the Department may seek grants from private foundations, the federal government, and other sources to fund the grants under this Section and to fund an evaluation of the programs supported by the grants.

(d) Health care professional prescription of opioid antagonists.

(1) A health care professional who, acting in good faith, directly or by standing order, prescribes or dispenses an opioid antagonist to: (a) a patient who, in the judgment of the health care professional, is capable of administering the drug in an emergency, or (b) a person who is not at risk of opioid overdose but who, in the judgment of the health care professional, may be in a position to assist another individual during an opioid-related drug overdose and who has received basic instruction on how to administer an opioid antagonist shall not, as a result of his or her acts or omissions, be subject to: (i) any disciplinary or other adverse action under the Medical Practice Act of 1987, the Physician Assistant Practice Act of 1987, the Nurse Practice Act, the Pharmacy Practice Act, or any other professional licensing statute or (ii) any criminal liability, except for willful and wanton misconduct.

(1.5) Notwithstanding any provision of or requirement otherwise imposed by the Pharmacy Practice Act, the Medical Practice Act of 1987, or any other law or rule, including, but not limited to, any requirement related to labeling, storage, or recordkeeping, a health care professional or other person acting under the direction of a health care professional may, directly or by standing order, obtain, store, and dispense an opioid antagonist to a patient in a facility that includes, but is not limited to, a hospital, a hospital affiliate, or a federally qualified health center if the patient information specified in paragraph (4) of this subsection is provided to the patient. A person acting in accordance with this paragraph shall not, as a result of his or her acts or omissions, be subject to: (i) any disciplinary or other adverse action under the Medical Practice Act of 1987, the Physician Assistant Practice Act of 1987, the Nurse Practice Act, the Pharmacy Practice Act, or any other professional licensing statute; or (ii) any criminal liability, except for willful and wanton misconduct.

(2) A person who is not otherwise licensed to administer an opioid antagonist may in an emergency administer without fee an opioid antagonist if the person has received the patient information specified in paragraph (4) of this subsection and believes in good faith that another person is experiencing a drug overdose. The person shall not, as a result of his or her acts or omissions, be (i) liable for any violation of the Medical Practice Act of 1987, the Physician Assistant Practice Act of 1987, the Nurse Practice Act, the Pharmacy Practice Act, or any other professional licensing statute, or (ii) subject to any criminal prosecution or civil liability, except for willful and wanton misconduct.

(3) A health care professional prescribing an opioid antagonist to a patient shall ensure that the patient receives the patient information specified in paragraph (4) of this subsection. Patient information may be provided by the health care professional or a community-based organization, substance use disorder program, or other organization with which the health care professional establishes a written agreement that includes a description of how the organization will provide patient information, how employees or volunteers providing information will be trained, and standards for documenting the provision of patient information to patients. Provision of patient information shall be documented in the patient's medical record or through similar means as determined by agreement between the health care professional and the organization. The Department, in consultation with statewide organizations representing physicians, pharmacists, advanced practice registered nurses, physician assistants, substance use disorder programs, and other interested groups,

shall develop and disseminate to health care professionals, community-based organizations, substance use disorder programs, and other organizations training materials in video, electronic, or other formats to facilitate the provision of such patient information.

(4) For the purposes of this subsection:

"Opioid antagonist" means a drug that binds to opioid receptors and blocks or inhibits the effect of opioids acting on those receptors, including, but not limited to, naloxone hydrochloride or any other similarly acting drug approved by the U.S. Food and Drug Administration.

"Health care professional" means a physician licensed to practice medicine in all its branches, a licensed physician assistant with prescriptive authority, a licensed advanced practice registered nurse with prescriptive authority, an advanced practice registered nurse or physician assistant who practices in a hospital, hospital affiliate, or ambulatory surgical treatment center and possesses appropriate clinical privileges in accordance with the Nurse Practice Act, or a pharmacist licensed to practice pharmacy under the Pharmacy Practice Act.

"Patient" includes a person who is not at risk of opioid overdose but who, in the judgment of the physician, advanced practice registered nurse, or physician assistant, may be in a position to assist another individual during an overdose and who has received patient information as required in paragraph (2) of this subsection on the indications for and administration of an opioid antagonist.

"Patient information" includes information provided to the patient on drug overdose prevention and recognition; how to perform rescue breathing and resuscitation; opioid antagonist dosage and administration; the importance of calling 911; care for the overdose victim after administration of the overdose antagonist; and other issues as necessary.

(e) Drug overdose response policy.

(1) Every State and local government agency that employs a law enforcement officer or fireman as those terms are defined in the Line of Duty Compensation Act must possess opioid antagonists and must establish a policy to control the acquisition, storage, transportation, and administration of such opioid antagonists and to provide training in the administration of opioid antagonists. A State or local government agency that employs a fireman as defined in the Line of Duty Compensation Act but does not respond to emergency medical calls or provide medical services shall be exempt from this subsection.

(2) Every publicly or privately owned ambulance, special emergency medical services vehicle, non-transport vehicle, or ambulance assist vehicle, as described in the Emergency Medical Services (EMS) Systems Act, that responds to requests for emergency services or transports patients between hospitals in emergency situations must possess opioid antagonists.

(3) Entities that are required under paragraphs (1) and (2) to possess opioid antagonists may also apply to the Department for a grant to fund the acquisition of opioid antagonists and training programs on the administration of opioid antagonists.

(Source: P.A. 101-356, eff. 8-9-19; 102-598, eff. 1-1-22.)

Section 10. The Overdose Prevention and Harm Reduction Act is amended by changing Section 5 as follows:

(410 ILCS 710/5)

Sec. 5. Needle and hypodermic syringe access program.

(a) Any governmental or nongovernmental organization, including a local health department, community-based organization, or a person or entity, that promotes scientifically proven ways of mitigating health risks associated with drug use and other high-risk behaviors may establish and operate a needle and hypodermic syringe access program. The objective of the program shall be accomplishing all of the following:

(1) reducing the spread of HIV, AIDS, viral hepatitis, and other bloodborne diseases;

(2) reducing the potential for needle stick injuries from discarded contaminated equipment; and

(3) facilitating connections or linkages to evidence-based treatment.

(b) Programs established under this Act shall provide all of the following:

(1) Disposal of used needles and hypodermic syringes.

(2) Needles, hypodermic syringes, and other safer drug consumption supplies, at no cost and in quantities sufficient to ensure that needles, hypodermic syringes, or other supplies are not shared or reused.

(3) Educational materials or training on:

(A) overdose prevention and intervention; and

(B) the prevention of HIV, AIDS, viral hepatitis, and other common bloodborne diseases resulting from shared drug consumption equipment and supplies.

(4) Access to opioid antagonists approved for the reversal of an opioid overdose, or referrals to programs that provide access to opioid antagonists approved for the reversal of an opioid overdose.

(5) Linkages to needed services, including mental health treatment, housing programs, substance use disorder treatment, and other relevant community services.

(6) Individual consultations from a trained employee tailored to individual needs.

(7) If feasible, a hygienic, separate space for individuals who need to administer a prescribed injectable medication that can also be used as a quiet space to gather composure in the event of an adverse on-site incident, such as a nonfatal overdose.

(8) If feasible, access to on-site drug adulterant testing supplies.

(9) If feasible, access to fentanyl test strips to test for the presence of fentanyl, a fentanyl analog, or a drug adulterant within a controlled substance.

(c) Notwithstanding any provision of the Illinois Controlled Substances Act, the Drug Paraphernalia Control Act, or any other law, no employee or volunteer of or participant in a program established under this Act shall be charged with or prosecuted for possession of any of the following:

(1) Needles, hypodermic syringes, or other drug consumption paraphernalia obtained from or returned, directly or indirectly, to a program established under this Act.

(2) Residual amounts of a controlled substance contained in used needles, used hypodermic syringes, or other used drug consumption paraphernalia obtained from or returned, directly or indirectly, to a program established under this Act.

(3) Drug adulterant testing supplies obtained from or returned, directly or indirectly, to a program established under this Act or a pharmacy, hospital, clinic, or other health care facility or medical office dispensing drug adulterant testing supplies in accordance with Section 10. This paragraph also applies to any employee or customer of a pharmacy, hospital, clinic, or other health care facility or medical office dispensing drug adulterant testing supplies in accordance with Section 10.

(4) Any residual amounts of controlled substances used in the course of testing the controlled substance to determine the chemical composition and potential threat of the substances obtained for consumption that are obtained from or returned, directly or indirectly, to a program established under this Act. This paragraph also applies to any person using drug adulterant testing supplies procured in accordance with Section 10 of this Act.

In addition to any other applicable immunity or limitation on civil liability, a law enforcement officer who, acting on good faith, arrests or charges a person who is thereafter determined to be entitled to immunity from prosecution under this subsection (c) shall not be subject to civil liability for the arrest or filing of charges.

(d) Prior to the commencing of operations of a program established under this Act, the governmental or nongovernmental organization shall submit to the Illinois Department of Public Health all of the following information:

(1) the name of the organization, agency, group, person, or entity operating the program;

(2) the areas and populations to be served by the program; and

(3) the methods by which the program will meet the requirements of subsection (b) of this Section.

The Department of Public Health may adopt rules to implement this subsection.

(Source: P.A. 101-356, eff. 8-9-19; 102-1039, eff. 6-2-22.)".

There being no further amendments, the foregoing Amendment No. 2 was ordered engrossed, and the bill, as amended, was ordered to a third reading.

On motion of Senator Ellman, **Senate Bill No. 3351** having been printed, was taken up, read by title a second time and ordered to a third reading.

On motion of Senator Castro, **Senate Bill No. 3362** having been printed, was taken up, read by title a second time and ordered to a third reading.

On motion of Senator Johnson, **Senate Bill No. 3378** having been printed, was taken up, read by title a second time and ordered to a third reading.

On motion of Senator Rose, **Senate Bill No. 3402** having been printed, was taken up, read by title a second time and ordered to a third reading.

On motion of Senator Rose, **Senate Bill No. 3405** having been printed, was taken up, read by title a second time and ordered to a third reading.

On motion of Senator McClure, **Senate Bill No. 3406** having been printed, was taken up, read by title a second time.

Committee Amendment No. 1 was held in the Committee on Assignments.

There being no further amendments, the bill was ordered to a third reading.

On motion of Senator Joyce, **Senate Bill No. 3407** having been printed, was taken up, read by title a second time and ordered to a third reading.

On motion of Senator Morrison, **Senate Bill No. 3414** having been printed, was taken up, read by title a second time.

Committee Amendment No. 1 was held in the Committee on Assignments.

The following amendment was offered in the Committee on Insurance, adopted and ordered printed:

AMENDMENT NO. 2 TO SENATE BILL 3414

AMENDMENT NO. 2 . Amend Senate Bill 3414 by replacing everything after the enacting clause with the following:

"Section 5. The Illinois Insurance Code is amended by changing Section 356z.59 as follows:

(215 ILCS 5/356z.59)

Sec. 356z.59. Coverage for continuous glucose monitors.

(a) A group or individual policy of accident and health insurance or a managed care plan that is amended, delivered, issued, or renewed before January 1, 2026 ~~on or after January 1, 2024~~ shall provide coverage for medically necessary continuous glucose monitors for individuals who are diagnosed with any form of diabetes mellitus ~~type 1 or type 2 diabetes~~ and require insulin for the management of their diabetes. A group or individual policy of accident and health insurance or a managed care plan that is amended, delivered, issued, or renewed on or after January 1, 2026 shall provide coverage for continuous glucose monitors, related supplies, and training in the use of continuous glucose monitors for any individual if the policy is in full alignment with Medicare and the following requirements are met:

(1) the individual is diagnosed with diabetes mellitus;

(2) the continuous glucose monitor has been prescribed by a physician licensed under the Medical Practice Act of 1987 or a certified nurse practitioner or physician assistant with a collaborative agreement with the physician;

(3) the continuous glucose monitor has been prescribed in accordance with the Food and Drug Administration's indications for use;

(4) the prescriber has concluded that the individual or individual's caregiver has sufficient training in using the continuous glucose monitor, which may be evidenced by the prescriber having prescribed a continuous glucose monitor, and has attested that the patient will be provided with that training;

(5) the individual either:

(A) uses insulin for treatment via one or more injections or infusions of insulin per day, and only one injection or infusion of one type of insulin shall be sufficient utilization of insulin to qualify for a continuous glucose monitor under this Section; or

(B) has reported a history of problematic hypoglycemia with documentation to the individual's medical provider showing at least one of the following:

(i) recurrent hypoglycemic events characterized by an altered mental or physical state, despite multiple attempts to adjust medications or modify the diabetes treatment plan, as documented by a medical provider; or

(ii) a history of at least one hypoglycemic event characterized by an altered mental or physical state requiring third-party assistance for treatment of hypoglycemia, as documented by the individual's medical provider, which may be self-reported by the individual; third-party assistance shall not, in any event, be deemed to require that the individual had been admitted to a hospital or visited an emergency department; and

(6) within 6 months prior to prescribing a continuous glucose monitor, the medical provider prescribing the continuous glucose monitor had an in-person or covered telehealth visit with the individual to evaluate the individual's diabetes control and has determined that the criteria of paragraphs (1) through (5) are met.

Notwithstanding any other provision of this Section, to qualify for a continuous glucose monitor under this Section, an individual is not required to have a diagnosis of uncontrolled diabetes; have a history of emergency room visits or hospitalizations; or show improved glycemic control.

All continuous glucose monitors covered under this Section shall be approved for use by individuals, and the choice of device shall be made based upon the individual's circumstances and medical needs in consultation with the individual's medical provider, subject to the terms of the policy.

(b) Any individual who is diagnosed with diabetes mellitus and meets the requirements of this Section shall not be required to obtain prior authorization for coverage for a continuous glucose monitor, and coverage shall be continuous once the continuous glucose monitor is prescribed.

(c) A group or individual policy of accident and health insurance or a managed care plan that is amended, delivered, issued, or renewed on or after January 1, 2026 shall not impose a deductible, coinsurance, copayment, or any other cost-sharing requirement on the coverage of one continuous glucose monitor, as provided under this Section. The provisions of this subsection do not apply to coverage under this Section to the extent such coverage would disqualify a high-deductible health plan from eligibility for a health savings account pursuant to the federal Internal Revenue Code, 26 U.S.C. 23.

(Source: P.A. 102-1093, eff. 1-1-23; 103-154, eff. 6-30-23.)

Section 10. The Illinois Public Aid Code is amended by adding Section 5-16.8a as follows:

(305 ILCS 5/5-16.8a new)

Sec. 5-16.8a. Rules concerning continuous glucose monitor coverage. The Department shall adopt rules to implement the changes made to Section 356z.59 of the Illinois Insurance Code, as applied to the medical assistance program. The rules shall, at a minimum, provide that:

(1) the ordering provider must be a physician licensed under the Medical Practice Act of 1987 or a certified nurse practitioner or physician assistant with a collaborative agreement with the physician;

(2) continuous glucose monitors are not required to have an alarm when glucose levels are outside the pre-determined range; the capacity to generate predictive alerts in case of impending hypoglycemia; or the ability to transmit real-time glucose values and alerts to the patient and designated other persons;

(3) the beneficiary is not required to need intensive insulin therapy;

(4) the beneficiary is not required to have a recent history of emergency room visits or hospitalizations related to hypoglycemia, hyperglycemia, or ketoacidosis;

(5) if the beneficiary has gestational diabetes, the beneficiary is not required to have suboptimal glycemic control that is likely to harm the beneficiary or the fetus;

(6) if a beneficiary has diabetes mellitus and the beneficiary does not meet the coverage requirements or if the beneficiary is in a population in which continuous glucose monitor usage has not been well-studied, requests shall be reviewed, on a case-by-case basis, for medical necessity and approved if appropriate; and

(7) the beneficiary is not required to obtain prior authorization for coverage for a continuous glucose monitor, and that coverage is continuous once the continuous glucose monitor is prescribed.

Section 99. Effective date. This Act takes effect July 1, 2024.".

There being no further amendments, the foregoing Amendment No. 2 was ordered engrossed, and the bill, as amended, was ordered to a third reading.

On motion of Senator Johnson, **Senate Bill No. 3418** having been printed, was taken up, read by title a second time and ordered to a third reading.

On motion of Senator Gillespie, **Senate Bill No. 3421** having been printed, was taken up, read by title a second time.

Committee Amendment No. 1 was held in the Committee on Assignments.

The following amendment was offered in the Committee on Judiciary, adopted and ordered printed:

AMENDMENT NO. 2 TO SENATE BILL 3421

AMENDMENT NO. 2 . Amend Senate Bill 3421 by replacing everything after the enacting clause with the following:

"Section 5. The Illinois Power of Attorney Act is amended by changing Section 2-8 as follows:

(755 ILCS 45/2-8) (from Ch. 110 1/2, par. 802-8)

Sec. 2-8. Reliance on document purporting to establish an agency.

(a) Any person who acts in good faith reliance on a copy of a document purporting to establish an agency will be fully protected and released to the same extent as though the reliant had dealt directly with the named principal as a fully-competent person. The named agent shall furnish an affidavit or Agent's Certification and Acceptance of Authority to the reliant on demand stating that the instrument relied on is a true copy of the agency and that, to the best of the named agent's knowledge, the named principal is alive and the relevant powers of the named agent have not been altered or terminated; but good faith reliance on a document purporting to establish an agency will protect the reliant without the affidavit or Agent's Certification and Acceptance of Authority.

(b) Upon request, the named agent in a power of attorney shall furnish an Agent's Certification and Acceptance of Authority to the reliant in substantially the following form:

AGENT'S CERTIFICATION AND ACCEPTANCE OF AUTHORITY

I, ... (insert name of agent), certify that the attached is a true copy of a power of attorney naming the undersigned as agent or successor agent for ..... (insert name of principal).

I certify that to the best of my knowledge the principal had the capacity to execute the power of attorney, is alive, and has not revoked the power of attorney; that my powers as agent have not been altered or terminated; and that the power of attorney remains in full force and effect.

I accept appointment as agent under this power of attorney.

This certification and acceptance is made under penalty of perjury.*

Dated: .....

.....
(Agent's Signature)

.....
(Print Agent's Name)

.....
(Agent's Address)

*(NOTE: Perjury is defined in Section 32-2 of the Criminal Code of 2012, and is a Class 3 felony.)

(c) Any person dealing with an agent named in a copy of a document purporting to establish an agency may presume, in the absence of actual knowledge to the contrary, that the document purporting to establish the agency was validly executed, that the agency was validly established, that the named principal was competent at the time of execution, and that, at the time of reliance, the named principal is alive, the agency was validly established and has not terminated or been amended, the relevant powers of the named agent were properly and validly granted and have not terminated or been amended, and the acts of the named agent conform to the standards of this Act. No person relying on a copy of a document purporting to

establish an agency shall be required to see to the application of any property delivered to or controlled by the named agent or to question the authority of the named agent.

(d) Each person to whom a direction by the named agent in accordance with the terms of the copy of the document purporting to establish an agency is communicated shall comply with that direction, and any person who fails to comply arbitrarily or without reasonable cause shall be subject to civil liability for any damages resulting from noncompliance. A health care provider who complies with Section 4-7 shall not be deemed to have acted arbitrarily or without reasonable cause.

(e) Unreasonable cause to refuse to honor. It shall be deemed unreasonable for a third party to refuse to honor an Illinois statutory short form power of attorney for property properly executed in accordance with the laws in effect at the time of its execution, if the only reason for the refusal is any of or more than one of the following: (1) the power of attorney is not on a form the third party receiving such power prescribes, regardless of any form the terms of any account agreement between the principal and third party requires; (2) there has been a lapse of time since the execution of the power of attorney; (3) on the face of the statutory short form power of attorney, there is a lapse of time between the date of acknowledgment of the signature of the principal and the date of the acceptance by the agent; (4) the document provided does not bear an original signature, original witness, or original notarization but is accompanied by a properly executed Agent's Certification and Acceptance of Authority, Successor Agent's Certification and Acceptance of Authority, or Co-Agent's Certification and Acceptance of Authority bearing the original signature of the named agent; or (5) the document appoints an entity as the agent. Nothing in this Section shall be interpreted as prohibiting or limiting a third party from requiring the named agent to furnish a properly executed Agent's Certification and Acceptance of Authority, Successor Agent's Certification and Acceptance of Authority, or Co-Agent's Certification and Acceptance of Authority under this Act.

(f) Reasonable cause to refuse to honor. Reasons for which it shall be deemed reasonable cause for a third party to refuse to honor a power of attorney for property include, but are not limited to, the following:

(1) the refusal by the agent to provide an affidavit or properly executed Agent's Certification and Acceptance of Authority, Successor Agent's Certification and Acceptance of Authority, or Co-Agent's Certification and Acceptance of Authority;

(2) the refusal by the agent to provide a copy of the original document that is certified to be valid by an attorney, a court order, or governmental entity;

(3) the person's good faith referral of the principal and the agent or a person acting for or with the agent to the local adult protective services unit;

(4) actual knowledge or a reasonable basis for believing in the existence of a report having been made by any person to the local adult protective services unit alleging physical or financial abuse, neglect, exploitation, or abandonment of the principal by the agent or a person acting for the agent;

(5) actual knowledge of the principal's death or a reasonable basis for believing the principal has died;

(6) actual knowledge of the incapacity of the principal or a reasonable basis for believing the principal is incapacitated if the power of attorney tendered is a nondurable power of attorney;

(7) actual knowledge or a reasonable basis for believing that the principal was incapacitated at the time the power of attorney was executed;

(8) actual knowledge or a reasonable basis for believing: (A) the power of attorney was procured through fraud, duress, or undue influence, or (B) the agent is engaged in fraud or abuse of the principal;

(9) actual notice of the termination or revocation of the power of attorney or a reasonable basis for believing that the power of attorney has been terminated or revoked;

(10) the refusal by a title insurance company to underwrite title insurance for a gift of real property made pursuant to a statutory short form power of attorney that does not contain express instructions or purposes of the principal with respect to gifts in paragraph 3 of the statutory short form power of attorney;

(11) the refusal of the principal's attorney to provide a certificate that the power of attorney is valid;

(12) a missing or incorrect signature, an invalid notarization, or an unacceptable power of attorney identification;

(13) the third party: (A) has filed a suspicious activity report as described by 31 U.S.C. 5318(g) with respect to the principal or agent; (B) believes in good faith that the principal or agent has a prior criminal history involving financial crimes; or (C) has had a previous, unsatisfactory business

relationship with the agent due to or resulting in material loss to the third party, financial mismanagement by the agent, or litigation between the third party and the agent alleging substantial damages; or

(14) the third party has reasonable cause to suspect the abuse, abandonment, neglect, or financial exploitation of the principal, if the principal is an eligible adult under the Adult Protective Services Act.

(Source: P.A. 96-1195, eff. 7-1-11; 97-1150, eff. 1-25-13.)".

There being no further amendments, the foregoing Amendment No. 2 was ordered engrossed, and the bill, as amended, was ordered to a third reading.

On motion of Senator Belt, **Senate Bill No. 3422** having been printed, was taken up, read by title a second time and ordered to a third reading.

On motion of Senator Murphy, **Senate Bill No. 3432** having been printed, was taken up, read by title a second time and ordered to a third reading.

On motion of Senator Simmons, **Senate Bill No. 3451** having been printed, was taken up, read by title a second time and ordered to a third reading.

On motion of Senator Halpin, **Senate Bill No. 3460** having been printed, was taken up, read by title a second time.

The following amendments were offered in the Committee on Judiciary, adopted and ordered printed:

AMENDMENT NO. 1 TO SENATE BILL 3460

AMENDMENT NO. 1 . Amend Senate Bill 3460 on page 2, line 7, by adding after "mail" the following: ", or by any other electronic record pursuant to the Uniform Electronic Transactions Act".

AMENDMENT NO. 2 TO SENATE BILL 3460

AMENDMENT NO. 2 . Amend Senate Bill 3460 on page 8, by replacing line 17 with "person or by verified mail of the".

There being no further amendments, the foregoing Amendments Numbered 1 and 2 were ordered engrossed, and the bill, as amended, was ordered to a third reading.

On motion of Senator Porfirio, **Senate Bill No. 3479** having been printed, was taken up, read by title a second time and ordered to a third reading.

On motion of Senator Rose, **Senate Bill No. 3513** having been printed, was taken up, read by title a second time.

The following amendment was offered in the Committee on Judiciary, adopted and ordered printed:

AMENDMENT NO. 1 TO SENATE BILL 3513

AMENDMENT NO. 1 . Amend Senate Bill 3513 on page 2, by replacing lines 4 and 5 with "subsection (a) if the applicant submits, in the form and manner prescribed by the Secretary of State, a signed statement that the applicant (i) is a licensed attorney or judge or is employed by a licensed attorney or the court and (ii) has read and understood the version of the Act that is in effect at the time of application.".

There being no further amendments, the foregoing Amendment No. 1 was ordered engrossed, and the bill, as amended, was ordered to a third reading.

On motion of Senator Lewis, **Senate Bill No. 3514** having been printed, was taken up, read by title a second time and ordered to a third reading.

On motion of Senator Johnson, **Senate Bill No. 3529** having been printed, was taken up, read by title a second time.

The following amendment was offered in the Committee on Public Health, adopted and ordered printed:

AMENDMENT NO. 1 TO SENATE BILL 3529

AMENDMENT NO. 1 . Amend Senate Bill 3529 by replacing everything after the enacting clause with the following:

"(410 ILCS 235/3 rep.)
(410 ILCS 235/4 rep.)
(410 ILCS 235/5 rep.)
Section 5. The Pertussis Vaccine Act is amended by repealing Sections 3, 4, and 5.".

There being no further amendments, the foregoing Amendment No. 1 was ordered engrossed, and the bill, as amended, was ordered to a third reading.

On motion of Senator Hastings, **Senate Bill No. 3538** having been printed, was taken up, read by title a second time and ordered to a third reading.

On motion of Senator Glowiak Hilton, **Senate Bill No. 3547** having been printed, was taken up, read by title a second time and ordered to a third reading.

On motion of Senator Feigenholtz, **Senate Bill No. 3550** having been printed, was taken up, read by title a second time.

The following amendment was offered in the Committee on Financial Institutions, adopted and ordered printed:

AMENDMENT NO. 1 TO SENATE BILL 3550

AMENDMENT NO. 1 . Amend Senate Bill 3550 on page 1, line 6, by deleting "18.4,"; and

by deleting line 16 on page 5 through line 20 on page 7; and

by replacing line 6 on page 8 through line 11 on page 9 with the following:

"(20 ILCS 1205/6a) (from Ch. 17, par. 107)
Sec. 6a. The Secretary ~~Director~~ may, in accordance with the ~~The~~ Illinois Administrative Procedure Act, adopt reasonable rules with respect to the administration and enforcement of any Act the administration of which is vested in the Division ~~Director or the Department~~.
(Source: P.A. 81-205.)"; and

on page 11, line 16, after "shall", by inserting ", by and with the advice and consent of the Senate,"; and

on page 15, by deleting lines 15 through 21; and

on page 16, line 11, after the period, by inserting "Nothing in this Section shall be construed as requiring a regulated person to enter a consent order or settlement agreement with the Secretary."; and

on page 21, line 11, by replacing "charges ~~interest~~ at" with "~~interest at~~".

There being no further amendments, the foregoing Amendment No. 1 was ordered engrossed, and the bill, as amended, was ordered to a third reading.

On motion of Senator Villivalam, **Senate Bill No. 3558** having been printed, was taken up, read by title a second time and ordered to a third reading.

On motion of Senator E. Harriss, **Senate Bill No. 3563** having been printed, was taken up, read by title a second time and ordered to a third reading.

On motion of Senator E. Harriss, **Senate Bill No. 3566** having been printed, was taken up, read by title a second time and ordered to a third reading.

On motion of Senator E. Harriss, **Senate Bill No. 3571** having been printed, was taken up, read by title a second time.

The following amendment was offered in the Committee on Education, adopted and ordered printed:

AMENDMENT NO. 1 TO SENATE BILL 3571

AMENDMENT NO. 1 . Amend Senate Bill 3571 by replacing everything after the enacting clause with the following:

"Section 5. The School Code is amended by adding Sections 10-20.87 and 34-18.85 as follows:

(105 ILCS 5/10-20.87 new)

Sec. 10-20.87. Automated external defibrillator; attendance centers and extracurricular activities.

(a) As used in this Section, "automated external defibrillator" has the meaning provided in the Automated External Defibrillator Act.

(b) A school district shall require all attendance centers to have present during the school day and during a school-sponsored extracurricular activity on school grounds at least one automated external defibrillator.

(c) An automated external defibrillator installed and maintained in accordance with the Physical Fitness Facility Medical Emergency Preparedness Act may be used to satisfy the requirements of this Section.

(105 ILCS 5/34-18.85 new)

Sec. 34-18.85. Automated external defibrillator; attendance centers and extracurricular activities.

(a) As used in this Section, "automated external defibrillator" has the meaning provided in the Automated External Defibrillator Act.

(b) The school district shall require all attendance centers to have present during the school day and during a school-sponsored extracurricular activity on school grounds at least one automated external defibrillator.

(c) An automated external defibrillator installed and maintained in accordance with the Physical Fitness Facility Medical Emergency Preparedness Act may be used to satisfy the requirements of this Section.".

There being no further amendments, the foregoing Amendment No. 1 was ordered engrossed, and the bill, as amended, was ordered to a third reading.

On motion of Senator Castro, **Senate Bill No. 3594** having been printed, was taken up, read by title a second time.

The following amendment was offered in the Committee on Higher Education, adopted and ordered printed:

AMENDMENT NO. 1 TO SENATE BILL 3594

AMENDMENT NO. 1 . Amend Senate Bill 3594 by replacing everything after the enacting clause with the following:

"Section 5. The Illinois Articulation Initiative Act is amended by changing Section 15 as follows:

(110 ILCS 152/15)

Sec. 15. Participation. All public institutions shall participate in the Illinois Articulation Initiative through submission and review of their courses for statewide transfer. All public institutions shall maintain a complete Illinois Articulation Initiative General Education Core Curriculum package, and all public institutions shall submit and maintain up to 4 core courses in each of the Illinois Articulation Initiative majors, provided the public institution has equivalent majors and courses. All public institutions shall

provide faculty, as appointed by the Board of Higher Education for public universities and the Illinois Community College Board for public community colleges, to serve on panels in the review of courses.

If, in a given academic year, a public institution does not have an equivalent major, lower-division courses, or both that align with the major panel's descriptors and course approval criteria, then the public institution shall be considered to be compliant with this Section for that academic year, as determined by the Board of Higher Education and the Illinois Community College Board, in coordination with the director of the Illinois Articulation Initiative.

(Source: P.A. 103-469, eff. 1-1-24.)

Section 99. Effective date. This Act takes effect upon becoming law.".

There being no further amendments, the foregoing Amendment No. 1 was ordered engrossed, and the bill, as amended, was ordered to a third reading.

On motion of Senator Edly-Allen, **Senate Bill No. 3601** having been printed, was taken up, read by title a second time and ordered to a third reading.

On motion of Senator McClure, **Senate Bill No. 3622** having been printed, was taken up, read by title a second time and ordered to a third reading.

On motion of Senator Porfirio, **Senate Bill No. 3631** having been printed, was taken up, read by title a second time and ordered to a third reading.

On motion of Senator Peters, **Senate Bill No. 3650** having been printed, was taken up, read by title a second time.

The following amendment was offered in the Committee on Labor, adopted and ordered printed:

AMENDMENT NO. 1 TO SENATE BILL 3650

AMENDMENT NO. 1 . Amend Senate Bill 3650 by replacing everything after the enacting clause with the following:

"Section 5. The Day and Temporary Labor Services Act is amended by changing Sections 5, 10, 11, 42, 45, and 85 as follows:

(820 ILCS 175/5)

Sec. 5. Definitions. As used in this Act:

"Applicant" means a natural person who seeks a work assignment at a day and temporary labor service agency.

"Day or temporary laborer" means a natural person who contracts for employment with a day and temporary labor service agency.

"Day and temporary labor" means work performed by a day or temporary laborer at a third party client, the duration of which may be specific or undefined, pursuant to a contract or understanding between the day and temporary labor service agency and the third party client. "Day and temporary labor" does not include labor or employment of a professional or clerical nature.

"Day and temporary labor service agency" means any person or entity engaged in the business of employing day or temporary laborers to provide services, for a fee, to or for any third party client pursuant to a contract with the day and temporary labor service agency and the third party client.

"Department" means the Department of Labor.

"Interested party" means an organization that monitors or is attentive to compliance with public or worker safety laws, wage and hour requirements, or other statutory requirements.

"Labor dispute" means any controversy concerning wages, hours, terms, or conditions of employment.

"Third party client" means any person that contracts with a day and temporary labor service agency for obtaining day or temporary laborers.

"Person" means every natural person, firm, partnership, co-partnership, limited liability company, corporation, association, business trust, or other legal entity, or its legal representatives, agents, or assigns.

(Source: P.A. 103-437, eff. 8-4-23.)

(820 ILCS 175/10)

Sec. 10. Employment notice and application receipt. ~~Notice.~~

(a) Employment notice. Whenever a day and temporary labor service agency agrees to send one or more persons to work as day or temporary laborers, the day and temporary labor service agency shall provide to each day or temporary laborer, at the time of dispatch, a statement containing the following items on a form approved by the Department:

(1) the name of the day or temporary laborer;

(2) the name and nature of the work to be performed and the types of equipment, protective clothing, and training that are required for the task;

(3) the wages offered;

(4) the name and address of the destination of each day or temporary laborer;

(5) terms of transportation; and

(6) whether a meal or equipment, or both, are provided, either by the day and temporary labor service agency or the third party client, and the cost of the meal and equipment, if any.

If a day or temporary laborer is assigned to the same assignment for more than one day, the day and temporary labor service agency is required to provide the employment notice only on the first day of the assignment and on any day that any of the terms listed on the employment notice are changed.

If the day or temporary laborer is not placed with a third party client or otherwise contracted to work for that day, the day and temporary labor service agency shall, upon request, provide the day and temporary laborer with a confirmation that the day or temporary laborer sought work, signed by an employee of the day and temporary labor service agency, which shall include the name of the agency, the name and address of the day or temporary laborer, and the date and the time that the day or temporary laborer receives the confirmation.

(b) (Blank). ~~No day and temporary labor service agency may send any day or temporary laborer to any place where a strike, a lockout, or other labor trouble exists.~~

(b-5) Application receipt. If an applicant seeks a work assignment as a day or temporary laborer with a day and temporary labor service agency, including in-person, online, or through an app-based system, and is not placed with a third party client or otherwise contracted to work for that day by the day and temporary labor service agency, the day and temporary labor service agency shall provide the applicant with a confirmation that the applicant sought work, signed by an employee of the day and temporary labor service agency, on a form approved by the Department, that shall include:

(1) the name and location of the day and temporary labor service agency and branch office;

(2) the name and address of the applicant;

(3) the date and the time that the applicant sought the work assignment;

(4) the manner in which the applicant sought the work assignment; and

(5) the specific work sites or type of jobs sought by the applicant, if applicable.

(c) The Department shall recommend to day and temporary labor service agencies that those agencies employ personnel who can effectively communicate information required in subsections (a) and (b-5) ~~(b)~~ to day or temporary laborers in Spanish, Polish, or any other language that is generally understood in the locale of the day and temporary labor service agency.

(Source: P.A. 99-78, eff. 7-20-15; 100-517, eff. 6-1-18.)

(820 ILCS 175/11)

Sec. 11. Right to refuse assignment to a labor dispute.

(a) No day and temporary labor service agency may send a day or temporary laborer to a place where a strike, ~~a~~ lockout, or work stoppage ~~other labor trouble~~ exists because of a labor dispute or where a picket, bannering, handbilling, or other job action exists because of a labor dispute without providing, at or before the time of dispatch, a statement, in writing and in a language that the day and temporary laborer understands, informing the day or temporary laborer of the labor dispute and the day or temporary laborer's right to refuse the assignment without prejudice to receiving another assignment. This Section shall not apply to any strike, lockout, or other work stoppage or any picket, bannering, handbilling, or other job action, that has been ruled unlawful by any court or government agency authorized to make that determination.

(b) The failure by a day and temporary labor service agency to provide any of the information required by this Section shall constitute a notice violation under Section 95. The failure of a day and temporary labor service agency to provide each piece of information required by this Section at each time it is required by this Section shall constitute a separate and distinct notice violation. If a day and temporary labor service agency claims that it has provided a notice as required under this Section electronically, the

day and temporary labor service agency shall bear the burden of showing that the notice was provided if there is a dispute.

(Source: P.A. 103-437, eff. 8-4-23.)

(820 ILCS 175/42)

Sec. 42. Equal pay for equal work.

(a) Beginning on and after April 1, 2024, a ~~A~~ day or temporary laborer who is assigned to work and performs work at a third party client for more than 90 calendar days within a 12-month period shall be paid as follows: ~~not less than the rate of pay and equivalent benefits as the lowest paid~~

(1) if there is a directly hired comparator employee of the third party client with the same or substantially similar level of seniority at the company and performing the same or substantially similar work on jobs the performance of which requires substantially similar skill, effort, and responsibility, and that are performed under similar working conditions:

(A) not less than the straight-time hourly rate of pay or hourly equivalent of the lowest paid directly hired comparator employee of the third party client who is entitled to overtime under the Fair Labor Standards Act, of 1938, as amended, with the same or substantially similar level of seniority at the company and performing the same or substantially similar work on jobs the performance of which requires substantially similar skill, effort, and responsibility, and that are performed under similar working conditions; and

(B) substantially similar benefits to the job classification of employees performing the same or substantially similar work on jobs and performed under similar working conditions. A day and temporary labor service agency may pay the hourly average cash equivalent of the actual cost of the benefits the third party client provides the applicable directly hired employees in lieu of benefits required under this paragraph; or~~.~~

(2) if ~~If~~ there is not a directly hired comparator ~~comparative~~ employee of the third party client, the day or temporary laborer shall be paid:

(A) not less than the straight-time hourly rate of pay or hourly ~~and~~ equivalent ~~benefits~~ of the lowest paid directly ~~direct~~ hired employee of the third party client who is entitled to overtime under the Fair Labor Standards Act of 1938, as amended, ~~company~~ with the closest level of seniority at the third party client; and ~~company.~~

(B) substantially similar benefits of the classification of employees performing the same or substantially similar work on jobs. A day and temporary labor service agency may pay the hourly cash equivalent of the actual cost of the benefits the third party client provides the applicable directly hired employees in lieu of benefits required under this paragraph ~~Section~~.

(b) The payment of equivalent pay and substantially similar benefits as required by subsections (a) shall not be required if the applicable direct hire comparator employees are covered by a valid collective bargaining agreement in effect on April 1, 2024 during the period covered by that current collective bargaining agreement. Thereafter, payment of substantially similar benefits to a day or temporary laborer as required by subparagraph (B) of paragraph (1) of subsection (a) and subparagraph (B) of paragraph (2) of subsection (a) shall not be required if the applicable direct hire comparator employees are covered by a valid collective bargaining agreement during any period covered by the collective bargaining agreement.

(c) Upon request, a third party client to which a day or temporary laborer has been assigned for more than 90 calendar days shall be obligated to timely provide the day and temporary labor service agency with all necessary information related to job duties, working conditions, pay, and benefits it provides to the applicable classification of directly hired employees necessary for the day and temporary labor service agency to comply with this Section. Upon receipt of the accurate and complete information described in this subsection from the third party client, it shall be the responsibility and duty of the day and temporary labor service agency to calculate and determine the straight-time hourly rate of pay and the benefits it shall offer to the day or temporary laborer, including any cash equivalent. The failure by a third party client to provide any of the information required under this Section shall constitute a notice violation by the third party client under Section 95. For purposes of this Section, the day and temporary labor service agency shall be considered a person aggrieved as described in Section 95. ~~For the purposes of this Section, the calculation of the 90 calendar days may not begin until April 1, 2024.~~

(d) For the purposes of this Section, "seniority" means the number of months a day or temporary laborer has been assigned to the third party client compared to the number of months a directly hired comparator employee has been employed by the third party client.

(Source: P.A. 103-437, eff. 8-4-23; 103-564, eff. 11-17-23.)

(820 ILCS 175/45)

Sec. 45. Registration; Department of Labor.

(a) A day and temporary labor service agency which is located, operates or transacts business within this State shall register with the Department of Labor in accordance with rules adopted by the Department for day and temporary labor service agencies and shall be subject to this Act and any rules adopted under this Act. Each day and temporary labor service agency shall provide proof of an employer account number issued by the Department of Employment Security for the payment of unemployment insurance contributions as required under the Unemployment Insurance Act, and proof of valid workers' compensation insurance in effect at the time of registration covering all of its employees. If, at any time, a day and temporary labor service agency's workers' compensation insurance coverage lapses, the agency shall have an affirmative duty to report the lapse of such coverage to the Department and the agency's registration shall be suspended until the agency's workers' compensation insurance is reinstated. The Department may assess each day and temporary labor service agency a non-refundable registration fee not exceeding $3,000 per year per agency and a non-refundable fee not to exceed $750 for each branch office or other location where the agency regularly contracts with day or temporary laborers for services. The fee may be paid by check, money order, or the State Treasurer's E-Pay program or any successor program, and the Department may not refuse to accept a check on the basis that it is not a certified check or a cashier's check. The Department may charge an additional fee to be paid by a day and temporary labor service agency if the agency, or any person on the agency's behalf, issues or delivers a check to the Department that is not honored by the financial institution upon which it is drawn. The Department shall also adopt rules for violation hearings and penalties for violations of this Act or the Department's rules in conjunction with the penalties set forth in this Act.

(a-1) At the time of registration with the Department of Labor each year, the day and temporary labor service agency shall submit to the Department of Labor a report containing the information identified in paragraph (9) of subsection (a) of Section 12, broken down by branch office, in the aggregate for all day or temporary laborers assigned within Illinois and subject to this Act during the preceding year. This information shall be submitted on a form created by the Department of Labor. The Department of Labor shall aggregate the information submitted by all registering day and temporary labor service agencies by removing identifying data and shall have the information available to the public only on a municipal and county basis. As used in this paragraph, "identifying data" means any and all information that: (i) provides specific information on individual worker identity; (ii) identifies the service agency in any manner; and (iii) identifies clients utilizing the day and temporary labor service agency or any other information that can be traced back to any specific registering day and temporary labor service agency or its client. The information and reports submitted to the Department of Labor under this subsection by the registering day and temporary labor service agencies are exempt from inspection and copying under Section 7.5 of the Freedom of Information Act.

(b) It is a violation of this Act to operate a day and temporary labor service agency without first registering with the Department in accordance with subsection (a) of this Section. The Department shall create and maintain at regular intervals on its website, accessible to the public: (1) a list of all registered day and temporary labor service agencies in the State whose registration is in good standing; (2) a list of day and temporary labor service agencies in the State whose registration has been suspended, including the reason for the suspension, the date the suspension was initiated, and the date, if known, the suspension is to be lifted; and (3) a list of day and temporary labor service agencies in the State whose registration has been revoked, including the reason for the revocation and the date the registration was revoked. The Department has the authority to assess a penalty against any day and temporary labor service agency that fails to register with the Department of Labor in accordance with this Act or any rules adopted under this Act of $500 for each violation. Each day during which a day and temporary labor service agency operates without registering with the Department shall be a separate and distinct violation of this Act.

(c) A day and temporary labor service agency applying for registration with the Department ~~An applicant~~ is not eligible to register to operate a day and temporary labor service agency under this Act if the day and temporary labor service agency applying for registration with the Department ~~applicant~~ or any of its officers, directors, partners, or managers or any owner of 25% or greater beneficial interest:

(1) has been involved, as owner, officer, director, partner, or manager, of any day and temporary labor service agency whose registration has been revoked or has been suspended without being reinstated within the 5 years immediately preceding the filing of the application; or

(2) is under the age of 18.

(d) Every agency shall post and keep posted at each location, in a position easily accessible to all day or temporary laborers ~~s~~, notices as supplied and required by the Department containing a copy or summary of the provisions of the Act and a notice which informs the public of a toll-free telephone number for day or temporary laborers and the public to file wage dispute complaints and other alleged violations by day and temporary labor service agencies. Every day and temporary labor service agency employing day or temporary laborers who communicate with the day and temporary labor service agency by electronic communication shall also provide all required notices by email to its day or temporary laborers or on a website, regularly used by the employer to communicate work-related information, that all day or temporary laborers are able to regularly access, freely and without interference. Such notices shall be in English and any other language generally understood in the locale of the day and temporary labor service agency.
(Source: P.A. 103-201, eff. 1-1-24; 103-437, eff. 8-4-23; revised 12-15-23.)

(820 ILCS 175/85)

Sec. 85. Third party clients.

(a) It is a violation of this Act for a third party client to enter into a contract for the employment of day or temporary laborers with any day and temporary labor service agency not registered under Section 45 of this Act. A third party client has a duty to verify a day and temporary labor service agency's status with the Department before entering into a contract with such an agency, and on March 1 and September 1 of each year. A day and temporary labor service agency shall be required to provide each of its third party clients with proof of valid registration issued by the Department at the time of entering into a contract. A day and temporary labor service agency shall be required to notify, both by telephone and in writing, each day or temporary laborer it employs and each third party client with whom it has a contract within 24 hours of any denial, suspension, or revocation of its registration by the Department. All contracts between any day and temporary labor service agency and any third party client shall be considered null and void from the date any such denial, suspension, or revocation of registration becomes effective and until such time as the day and temporary labor service agency becomes registered and considered in good standing by the Department as provided in Section 50 and Section 55. Upon request, the Department shall provide to a third party client a list of entities registered as day and temporary labor service agencies. The Department shall provide on the Internet a list of entities registered as day and temporary labor service agencies. A third party client may rely on information provided by the Department or maintained on the Department's website pursuant to Section 45 of this Act and shall be held harmless if such information maintained or provided by the Department was inaccurate. Any third party client that violates this provision of the Act is subject to a civil penalty of not less than $100 and not to exceed $1,500. Each day during which a third party client contracts with a day and temporary labor service agency not registered under Section 45 of this Act shall constitute a separate and distinct offense.

(b) If a third party client leases or contracts with a day and temporary service agency for the services of a day or temporary laborer, the third party client shall share all legal responsibility and liability for the payment of wages under the Illinois Wage Payment and Collection Act and the Minimum Wage Law.

(c) Before the assignment of an employee to a worksite employer, a day and temporary labor service agency must:

(1) inquire about the client company's safety and health practices and hazards at the actual workplace where the day or temporary laborer will be working to assess the safety conditions, workers tasks, and the client company's safety program; these activities are required at the start of any contract to place day or temporary laborers and may include visiting the client company's actual worksite. If, during the inquiry or anytime during the period of the contract, the day and temporary labor service agency becomes aware of existing job hazards that are not mitigated by the client company, the day and temporary labor service agency must make the client company aware, urge the client company to correct it, and document these efforts, otherwise the day and temporary labor service agency must remove the day or temporary laborers from the client company's worksite;

(2) provide training to the day or temporary laborer for general awareness safety training for recognized industry hazards the day or temporary laborer may encounter at the client company's worksite. Industry hazard training must be completed, in the preferred language of the day or temporary laborer, and must be provided at no expense to the day or temporary laborer. The training date and training content must be maintained by the day and temporary staffing agency and provided to the day or temporary laborer;

(3) transmit a general description of the training program including topics covered to the client company, whether electronically or on paper, at the start of the contract with the client company;

(4) provide the Department's hotline number for the employee to call to report safety hazards and concerns as part of the employment materials provided to the day or temporary laborer; and

(5) inform the day or temporary laborer who the day or temporary laborer should report safety concerns to at the workplace.

Nothing in this Section shall diminish any existing client company or a day and temporary labor service agency's responsibility as an employer to provide a place of employment free from recognized hazards or to otherwise comply with other health and safety or employment laws. The client company and the day and temporary labor service agency are responsible for compliance with this Section and the rules adopted under this Section.

(d) Before the day or temporary laborer engages in work for a client company, the client company must:

(1) document and inform the day and temporary labor service agency about anticipated job hazards likely encountered by the day or temporary laborer;

(2) review the safety and health awareness training provided by the day and temporary labor service agency to determine if it addresses recognized hazards for the client company's industry;

(3) provide specific training tailored to the particular hazards at the client company's worksite consistent with training requirements provided for in standards, guidances, or best practices issued by the federal Occupational Safety and Health Administration; and

(4) document and maintain records of site-specific training and provide confirmation that the training occurred to the day and temporary labor service agency within 3 business days of providing the training.

(e) If the client company changes the job tasks or work location and new hazards may be encountered, the client company must:

(1) inform both the day and temporary labor service agency and the day or temporary laborer; and

(2) inform both the day and temporary labor service agency staffing agency and the day or temporary laborer of job hazards not previously covered before the day or temporary laborer undertakes the new tasks and update personal protective equipment and training for the new job tasks consistent with training requirements provided for in standards, guidances, or best practices issued by the federal Occupational Safety and Health Administration, if necessary.

(f) A day and temporary labor service agency or day or temporary laborer may refuse a new job task at the worksite when the task has not been reviewed or if the day or temporary laborer has not had appropriate training to do the new task.

(g) A client company that supervises a day or temporary laborer must provide worksite specific training to the day or temporary laborer and must allow a day and temporary labor service agency to visit any worksite where the day or temporary laborer works or will be working to observe and confirm the client company's training and information related to the worksite's job tasks, safety and health practices, and hazards.

(Source: P.A. 103-437, eff. 8-4-23.)

Section 99. Effective date. This Act takes effect April 1, 2024.".

There being no further amendments, the foregoing Amendment No. 1 was ordered engrossed, and the bill, as amended, was ordered to a third reading.

On motion of Senator Peters, **Senate Bill No. 3652** having been printed, was taken up, read by title a second time.

The following amendment was offered in the Committee on Judiciary, adopted and ordered printed:

AMENDMENT NO. 1 TO SENATE BILL 3652

AMENDMENT NO. 1 . Amend Senate Bill 3652 on page 4, after line 18, by inserting:

"Section 99. Effective date. This Act takes effect January 1, 2026.".

There being no further amendments, the foregoing Amendment No. 1 was ordered engrossed, and the bill, as amended, was ordered to a third reading.

On motion of Senator Murphy, **Senate Bill No. 3661** having been printed, was taken up, read by title a second time.

The following amendment was offered in the Committee on Health and Human Services, adopted and ordered printed:

AMENDMENT NO. 1 TO SENATE BILL 3661

AMENDMENT NO. 1 . Amend Senate Bill 3661 by replacing everything after the enacting clause with the following:

"Section 5. The Health Care Worker Background Check Act is amended by changing Section 15 as follows:

(225 ILCS 46/15)

Sec. 15. Definitions. In this Act:

"Applicant" means an individual enrolling in a training program, seeking employment, whether paid or on a volunteer basis, with a health care employer who has received a bona fide conditional offer of employment.

"Conditional offer of employment" means a bona fide offer of employment by a health care employer to an applicant, which is contingent upon the receipt of a report from the Department of Public Health indicating that the applicant does not have a record of conviction of any of the criminal offenses enumerated in Section 25.

"Department" means the Department of Public Health.

"Direct care" means the provision of nursing care or assistance with feeding, dressing, movement, bathing, toileting, or other personal needs, including home services as defined in the Home Health, Home Services, and Home Nursing Agency Licensing Act.

The entity responsible for inspecting and licensing, certifying, or registering the health care employer may, by administrative rule, prescribe guidelines for interpreting this definition with regard to the health care employers that it licenses.

"Director" means the Director of Public Health.

"Disqualifying offenses" means those offenses set forth in Section 25 of this Act.

"Employee" means any individual hired, employed, or retained, whether paid or on a volunteer basis, to which this Act applies.

"Finding" means the Department's determination of whether an allegation is verified and substantiated.

"Fingerprint-based criminal history records check" means a livescan fingerprint-based criminal history records check submitted as a fee applicant inquiry in the form and manner prescribed by the Illinois State Police.

"Health care employer" means:

(1) the owner or licensee of any of the following:

(i) a community living facility, as defined in the Community Living Facilities Licensing Act;

(ii) a life care facility, as defined in the Life Care Facilities Act;

(iii) a long-term care facility;

(iv) a home health agency, home services agency, or home nursing agency as defined in the Home Health, Home Services, and Home Nursing Agency Licensing Act;

(v) a hospice care program or volunteer hospice program, as defined in the Hospice Program Licensing Act;

(vi) a hospital, as defined in the Hospital Licensing Act;

(vii) (blank);

(viii) a nurse agency, as defined in the Nurse Agency Licensing Act;

(ix) a respite care provider, as defined in the Respite Program Act;

(ix-a) an establishment licensed under the Assisted Living and Shared Housing Act;

(x) a supportive living program, as defined in the Illinois Public Aid Code;

(xi) early childhood intervention programs as described in 59 Ill. Adm. Code 121;

(xii) the University of Illinois Hospital, Chicago;

(xiii) programs funded by the Department on Aging through the Community Care Program;

(xiv) programs certified to participate in the Supportive Living Program authorized pursuant to Section 5-5.01a of the Illinois Public Aid Code;

(xv) programs listed by the Emergency Medical Services (EMS) Systems Act as Freestanding Emergency Centers;

(xvi) locations licensed under the Alternative Health Care Delivery Act;

(2) a day training program certified by the Department of Human Services;

(3) a community integrated living arrangement operated by a community mental health and developmental service agency, as defined in the Community-Integrated Living Arrangements Licensure and Certification Act;

(4) the State Long Term Care Ombudsman Program, including any regional long term care ombudsman programs under Section 4.04 of the Illinois Act on the Aging, only for the purpose of securing background checks;

(5) the Department of Corrections or a third-party vendor employing certified nursing assistants working with the Department of Corrections; ~~or~~

(6) a financial management services entity contracted with the Department of Human Services, Division of Developmental Disabilities, which is not the employer of personal support workers but supports individuals receiving participant directed services, to administer the individuals' employer authority. A financial management services entity assists participants in completing background check requirements, collecting and processing time sheets for support workers, and processing payroll, withholding, filing, and payment of applicable federal, State, and local employment-related taxes and insurance; or

(7) a Comprehensive Community Mental Health Center certified by the Department of Human Services.

"Initiate" means obtaining from a student, applicant, or employee his or her social security number, demographics, a disclosure statement, and an authorization for the Department of Public Health or its designee to request a fingerprint-based criminal history records check; transmitting this information electronically to the Department of Public Health; conducting Internet searches on certain web sites, including without limitation the Illinois Sex Offender Registry, the Department of Corrections' Sex Offender Search Engine, the Department of Corrections' Inmate Search Engine, the Department of Corrections Wanted Fugitives Search Engine, the National Sex Offender Public Registry, and the List of Excluded Individuals and Entities database on the website of the Health and Human Services Office of Inspector General to determine if the applicant has been adjudicated a sex offender, has been a prison inmate, or has committed Medicare or Medicaid fraud, or conducting similar searches as defined by rule; and having the student, applicant, or employee's fingerprints collected and transmitted electronically to the Illinois State Police.

"Livescan vendor" means an entity whose equipment has been certified by the Illinois State Police to collect an individual's demographics and inkless fingerprints and, in a manner prescribed by the Illinois State Police and the Department of Public Health, electronically transmit the fingerprints and required data to the Illinois State Police and a daily file of required data to the Department of Public Health. The Department of Public Health shall negotiate a contract with one or more vendors that effectively demonstrate that the vendor has 2 or more years of experience transmitting fingerprints electronically to the Illinois State Police and that the vendor can successfully transmit the required data in a manner prescribed by the Department of Public Health. Vendor authorization may be further defined by administrative rule.

"Long-term care facility" means a facility licensed by the State or certified under federal law as a long-term care facility, including without limitation facilities licensed under the Nursing Home Care Act, the Specialized Mental Health Rehabilitation Act of 2013, the ID/DD Community Care Act, or the MC/DD Act, a supportive living facility, an assisted living establishment, or a shared housing establishment or registered as a board and care home.

"Resident" means a person, individual, or patient under the direct care of a health care employer or who has been provided goods or services by a health care employer.

(Source: P.A. 102-226, eff. 7-30-21; 102-503, eff. 8-20-21; 102-538, eff. 8-20-21; 102-813, eff. 5-13-22; 103-303, eff. 1-1-24.)".

There being no further amendments, the foregoing Amendment No. 1 was ordered engrossed, and the bill, as amended, was ordered to a third reading.

On motion of Senator Feigenholtz, **Senate Bill No. 3679** having been printed, was taken up, read by title a second time.

The following amendment was offered in the Committee on Executive, adopted and ordered printed:

AMENDMENT NO. 1 TO SENATE BILL 3679

AMENDMENT NO. 1 . Amend Senate Bill 3679 on page 31, line 7, by replacing "65" with "60".

There being no further amendments, the foregoing Amendment No. 1 was ordered engrossed, and the bill, as amended, was ordered to a third reading.

On motion of Senator Villa, **Senate Bill No. 3680** having been printed, was taken up, read by title a second time and ordered to a third reading.

On motion of Senator D. Turner, **Senate Bill No. 3691** having been printed, was taken up, read by title a second time and ordered to a third reading.

On motion of Senator Gillespie, **Senate Bill No. 3694** having been printed, was taken up, read by title a second time and ordered to a third reading.

On motion of Senator Johnson, **Senate Bill No. 3716** having been printed, was taken up, read by title a second time and ordered to a third reading.

On motion of Senator Cervantes, **Senate Bill No. 3740** having been printed, was taken up, read by title a second time and ordered to a third reading.

On motion of Senator Morrison, **Senate Bill No. 3741** having been printed, was taken up, read by title a second time and ordered to a third reading.

On motion of Senator Cunningham, **Senate Bill No. 3755** having been printed, was taken up, read by title a second time and ordered to a third reading.

On motion of Senator Villa, **Senate Bill No. 3763** having been printed, was taken up, read by title a second time and ordered to a third reading.

On motion of Senator Glowiak Hilton, **Senate Bill No. 3767** having been printed, was taken up, read by title a second time.

Floor Amendment No. 1 was referred to the Committee on Assignments earlier today.

There being no further amendments, the bill was ordered to a third reading.

On motion of Senator Villivalam, **Senate Bill No. 3771** having been printed, was taken up, read by title a second time and ordered to a third reading.

On motion of Senator Villa, **Senate Bill No. 3779** having been printed, was taken up, read by title a second time and ordered to a third reading.

On motion of Senator Simmons, **Senate Bill No. 3784** having been printed, was taken up, read by title a second time and ordered to a third reading.

On motion of Senator Johnson, **Senate Bill No. 3793** having been printed, was taken up, read by title a second time and ordered to a third reading.

On motion of Senator Villanueva, **Senate Bill No. 3807** having been printed, was taken up, read by title a second time and ordered to a third reading.

PRESENTATION OF CONGRATULATORY RESOLUTION

SENATE RESOLUTION NO. 850

Offered by Senator D. Turner:

Congratulates the Greater Springfield Chamber of Commerce on being awarded 5-star accreditation by the U.S. Chamber of Commerce. Commends the chamber for its continued service and dedication to its members.

Under the Rules, the foregoing resolution was referred to the Committee on Assignments.

PRESENTATION OF RESOLUTION

Senator Villivalam offered the following Senate Joint Resolution and, having asked and obtained unanimous consent to suspend the rules for its immediate consideration, moved its adoption:

SENATE JOINT RESOLUTION NO. 52

RESOLVED, BY THE SENATE OF THE ONE HUNDRED THIRD GENERAL ASSEMBLY OF THE STATE OF ILLINOIS, THE HOUSE OF REPRESENTATIVES CONCURRING HEREIN, that when the Senate adjourns on Thursday, March 14, 2024, it stands adjourned until Wednesday, March 20, 2024, or to the call of the President; and when the House of Representatives adjourns on Thursday, March 14, 2024, it stands adjourned until Wednesday, March 20, 2024, or to the call of the Speaker.

The motion prevailed.

And the resolution was adopted.

Ordered that the Secretary inform the House of Representatives thereof and ask their concurrence therein.

CELEBRATION OF LIFE RESOLUTION CONSENT CALENDAR

SENATE RESOLUTION NO. 833

Offered by Senator McClure and all Senators:

Mourns the passing of Charles Robert "Chuck" McMullen of Quincy.

SENATE RESOLUTION NO. 834

Offered by Senator McClure and all Senators:

Mourns the passing of the Honorable Benjamin K. Miller, former Chief Justice of the Supreme Court of Illinois.

SENATE RESOLUTION NO. 835

Offered by Senator Murphy and all Senators:

Mourns the death of Richard DiPietro of Park Ridge.

SENATE RESOLUTION NO. 836

Offered by Senator Morrison and all Senators:

Mourns the death of Marjorie Ettlinger of Highland Park.

SENATE RESOLUTION NO. 839

Offered by Senator McClure and all Senators:
Mourns the death of James H. "Jim" McGrath of Springfield.

SENATE RESOLUTION NO. 840

Offered by Senator Belt and all Senators:
Mourns the death of Billie Jean Miller.

SENATE RESOLUTION NO. 841

Offered by Senator Hunter and all Senators:
Mourns the death of Nia Odeoti-Hassan.

SENATE RESOLUTION NO. 842

Offered by Senator McClure and all Senators:
Mourns the death of Ronald J. "Ron" Stone of Springfield.

SENATE RESOLUTION NO. 843

Offered by Senator McClure and all Senators:
Mourns the passing of Dominic Andrew "Dom" Saccomano.

SENATE RESOLUTION NO. 845

Offered by Senator Rose and all Senators:
Mourns the death of Cleveland Darnell "Cleve" Peete Jr. of Champaign.

SENATE RESOLUTION NO. 846

Offered by Senator McClure and all Senators:
Mourns the passing of Bruce Alexander Campbell II of Tucson, Arizona, formerly of Springfield.

SENATE RESOLUTION NO. 847

Offered by Senator McClure and all Senators:
Mourns the death of Nancy June Scaife Beatty of Springfield.

SENATE RESOLUTION NO. 848

Offered by Senator McClure and all Senators:
Mourns the death of John D. "Jack" McDermott of Chatham.

SENATE RESOLUTION NO. 849

Offered by Senator McClure and all Senators:
Mourns the passing of Philip Sharp McCully of Toluca.

The Chair moved the adoption of the Resolutions Consent Calendar.
The motion prevailed, and the resolutions were adopted.

LEGISLATIVE MEASURES FILED

The following Floor amendment to the Senate Bill listed below has been filed with the Secretary and referred to the Committee on Assignments:

Amendment No. 1 to Senate Bill 3547

The following Committee amendment to the Senate Bill listed below has been filed with the Secretary and referred to the Committee on Assignments:

Amendment No. 1 to Senate Bill 3462

At the hour of 12:30 o'clock p.m., pursuant to **Senate Joint Resolution No. 52**, the Chair announced that the Senate stands adjourned until Wednesday, March 20, 2024, at 2:00 o'clock p.m., or until the call of the President.