



Sen. Rachelle Crowe

Filed: 3/28/2022

10200SB0970sam003

LRB102 04884 CPF 38226 a

1 AMENDMENT TO SENATE BILL 970

2 AMENDMENT NO. _____. Amend Senate Bill 970, AS AMENDED,
3 by replacing everything after the enacting clause with the
4 following:

5 "Section 5. The Sexual Assault Survivors Emergency
6 Treatment Act is amended by changing Sections 1a, 1a-1, 2,
7 2-1, 2.1, 2.1-1, 5, 5-1, and 5.4 and by adding Section 1b as
8 follows:

9 (410 ILCS 70/1a) (from Ch. 111 1/2, par. 87-1a)

10 Sec. 1a. Definitions.

11 (a) In this Act:

12 "Advanced practice registered nurse" has the meaning
13 provided in Section 50-10 of the Nurse Practice Act.

14 "Ambulance provider" means an individual or entity that
15 owns and operates a business or service using ambulances or
16 emergency medical services vehicles to transport emergency

1 patients.

2 "Approved pediatric health care facility" means a health
3 care facility, other than a hospital, with a sexual assault
4 treatment plan approved by the Department to provide medical
5 forensic services to: (A) pediatric sexual assault survivors
6 who present with a complaint of sexual assault within a
7 minimum of 96 hours ~~the last 7 days~~ or who have disclosed past
8 sexual assault by a specific individual and were in the care of
9 that individual within a minimum of 96 hours; and (B) sexual
10 assault survivors at least 13 years of age but under 18 years
11 of age who present with a complaint of sexual assault within a
12 minimum of the last 7 days or who have disclosed past sexual
13 assault by a specific individual and were in the care of that
14 individual within a minimum of the last 7 days.

15 "Areawide sexual assault treatment plan" means a plan,
16 developed by hospitals or by hospitals and approved pediatric
17 health care facilities in a community or area to be served,
18 which provides for medical forensic services to sexual assault
19 survivors that shall be made available by each of the
20 participating hospitals and approved pediatric health care
21 facilities.

22 "Board-certified child abuse pediatrician" means a
23 physician certified by the American Board of Pediatrics in
24 child abuse pediatrics.

25 "Board-eligible child abuse pediatrician" means a
26 physician who has completed the requirements set forth by the

1 American Board of Pediatrics to take the examination for
2 certification in child abuse pediatrics.

3 "Department" means the Department of Public Health.

4 "Emergency contraception" means medication as approved by
5 the federal Food and Drug Administration (FDA) that can
6 significantly reduce the risk of pregnancy if taken within 72
7 hours after sexual assault.

8 "Follow-up healthcare" means healthcare services related
9 to a sexual assault, including laboratory services and
10 pharmacy services, rendered within 90 days of the initial
11 visit for medical forensic services.

12 "Health care professional" means a physician, a physician
13 assistant, a sexual assault forensic examiner, an advanced
14 practice registered nurse, a registered professional nurse, a
15 licensed practical nurse, or a sexual assault nurse examiner.

16 "Hospital" means a hospital licensed under the Hospital
17 Licensing Act or operated under the University of Illinois
18 Hospital Act, any outpatient center included in the hospital's
19 sexual assault treatment plan where hospital employees provide
20 medical forensic services, and an out-of-state hospital that
21 has consented to the jurisdiction of the Department under
22 Section 2.06.

23 "Illinois State Police Sexual Assault Evidence Collection
24 Kit" means a prepackaged set of materials and forms to be used
25 for the collection of evidence relating to sexual assault. The
26 standardized evidence collection kit for the State of Illinois

1 shall be the Illinois State Police Sexual Assault Evidence
2 Collection Kit.

3 "Law enforcement agency having jurisdiction" means the law
4 enforcement agency in the jurisdiction where an alleged sexual
5 assault or sexual abuse occurred.

6 "Licensed practical nurse" has the meaning provided in
7 Section 50-10 of the Nurse Practice Act.

8 "Medical forensic services" means health care delivered to
9 patients within or under the care and supervision of personnel
10 working in a designated emergency department of a hospital or
11 an approved pediatric health care facility. "Medical forensic
12 services" includes, but is not limited to, taking a medical
13 history, performing photo documentation, performing a physical
14 and anogenital examination, assessing the patient for evidence
15 collection, collecting evidence in accordance with a statewide
16 sexual assault evidence collection program administered by the
17 Illinois State Police using the Illinois State Police Sexual
18 Assault Evidence Collection Kit, if appropriate, assessing the
19 patient for drug-facilitated or alcohol-facilitated sexual
20 assault, providing an evaluation of and care for sexually
21 transmitted infection and human immunodeficiency virus (HIV),
22 pregnancy risk evaluation and care, and discharge and
23 follow-up healthcare planning.

24 "Pediatric health care facility" means a clinic or
25 physician's office that provides medical services to patients
26 under the age of 18 ~~pediatric patients~~.

1 "Pediatric sexual assault survivor" means a person under
2 the age of 13 who presents for medical forensic services in
3 relation to injuries or trauma resulting from a sexual
4 assault.

5 "Photo documentation" means digital photographs or
6 colposcope videos stored and backed up securely in the
7 original file format.

8 "Physician" means a person licensed to practice medicine
9 in all its branches.

10 "Physician assistant" has the meaning provided in Section
11 4 of the Physician Assistant Practice Act of 1987.

12 "Prepubescent sexual assault survivor" means a female who
13 is under the age of 18 years and has not had a first menstrual
14 cycle or a male who is under the age of 18 years and has not
15 started to develop secondary sex characteristics who presents
16 for medical forensic services in relation to injuries or
17 trauma resulting from a sexual assault.

18 "Qualified medical provider" means a board-certified child
19 abuse pediatrician, board-eligible child abuse pediatrician, a
20 sexual assault forensic examiner, or a sexual assault nurse
21 examiner who has access to photo documentation tools, and who
22 participates in peer review.

23 "Registered Professional Nurse" has the meaning provided
24 in Section 50-10 of the Nurse Practice Act.

25 "Sexual assault" means:

26 (1) an act of sexual conduct; as used in this

1 paragraph, "sexual conduct" has the meaning provided under
2 Section 11-0.1 of the Criminal Code of 2012; or

3 (2) any act of sexual penetration; as used in this
4 paragraph, "sexual penetration" has the meaning provided
5 under Section 11-0.1 of the Criminal Code of 2012 and
6 includes, without limitation, acts prohibited under
7 Sections 11-1.20 through 11-1.60 of the Criminal Code of
8 2012.

9 "Sexual assault forensic examiner" means a physician or
10 physician assistant who has completed training that meets or
11 is substantially similar to the Sexual Assault Nurse Examiner
12 Education Guidelines established by the International
13 Association of Forensic Nurses.

14 "Sexual assault nurse examiner" means an advanced practice
15 registered nurse or registered professional nurse who has
16 completed a sexual assault nurse examiner training program
17 that meets the Sexual Assault Nurse Examiner Education
18 Guidelines established by the International Association of
19 Forensic Nurses.

20 "Sexual assault services voucher" means a document
21 generated by a hospital or approved pediatric health care
22 facility at the time the sexual assault survivor receives
23 outpatient medical forensic services that may be used to seek
24 payment for any ambulance services, medical forensic services,
25 laboratory services, pharmacy services, and follow-up
26 healthcare provided as a result of the sexual assault.

1 "Sexual assault survivor" means a person who presents for
2 medical forensic services in relation to injuries or trauma
3 resulting from a sexual assault.

4 "Sexual assault transfer plan" means a written plan
5 developed by a hospital and approved by the Department, which
6 describes the hospital's procedures for transferring sexual
7 assault survivors to another hospital, and an approved
8 pediatric health care facility, if applicable, in order to
9 receive medical forensic services.

10 "Sexual assault treatment plan" means a written plan that
11 describes the procedures and protocols for providing medical
12 forensic services to sexual assault survivors who present
13 themselves for such services, either directly or through
14 transfer from a hospital or an approved pediatric health care
15 facility.

16 "Transfer hospital" means a hospital with a sexual assault
17 transfer plan approved by the Department.

18 "Transfer services" means the appropriate medical
19 screening examination and necessary stabilizing treatment
20 prior to the transfer of a sexual assault survivor to a
21 hospital or an approved pediatric health care facility that
22 provides medical forensic services to sexual assault survivors
23 pursuant to a sexual assault treatment plan or areawide sexual
24 assault treatment plan.

25 "Treatment hospital" means a hospital with a sexual
26 assault treatment plan approved by the Department to provide

1 medical forensic services to: (A) all sexual assault survivors
2 13 years of age or older who present with a complaint of sexual
3 assault within a minimum of the last 7 days or who have
4 disclosed past sexual assault by a specific individual and
5 were in the care of that individual within a minimum of the
6 last 7 days; and (B) pediatric sexual assault survivors who
7 present with a complaint of sexual assault within a minimum of
8 96 hours or who have disclosed past sexual assault by a
9 specific individual and were in the care of that individual
10 within a minimum of 96 hours.

11 "Treatment hospital with approved pediatric transfer"
12 means a hospital with a treatment plan approved by the
13 Department to provide medical forensic services to sexual
14 assault survivors 13 years old or older who present with a
15 complaint of sexual assault within a minimum of the last 7 days
16 or who have disclosed past sexual assault by a specific
17 individual and were in the care of that individual within a
18 minimum of the last 7 days.

19 (b) This Section is effective on and after January 1, 2024
20 ~~2022~~.

21 (Source: P.A. 101-81, eff. 7-12-19; 101-634, eff. 6-5-20;
22 102-22, eff. 6-25-21; 102-538, eff. 8-20-21; 102-674, eff.
23 11-30-21; revised 12-16-21.)

24 (410 ILCS 70/1a-1)

25 (Section scheduled to be repealed on December 31, 2023)

1 Sec. 1a-1. Definitions.

2 (a) In this Act:

3 "Advanced practice registered nurse" has the meaning
4 provided in Section 50-10 of the Nurse Practice Act.

5 "Ambulance provider" means an individual or entity that
6 owns and operates a business or service using ambulances or
7 emergency medical services vehicles to transport emergency
8 patients.

9 "Approved pediatric health care facility" means a health
10 care facility, other than a hospital, with a sexual assault
11 treatment plan approved by the Department to provide medical
12 forensic services to: (A) pediatric sexual assault survivors
13 who present with a complaint of sexual assault within a
14 minimum of 96 hours ~~the last 7 days~~ or who have disclosed past
15 sexual assault by a specific individual and were in the care of
16 that individual within a minimum of 96 hours; and (B) sexual
17 assault survivors at least 13 years of age but under 18 years
18 of age who present with a complaint of sexual assault within a
19 minimum of the last 7 days or who have disclosed past sexual
20 assault by a specific individual and were in the care of that
21 individual within a minimum of the last 7 days.

22 "Approved federally qualified health center" means a
23 facility as defined in Section 1905(1)(2)(B) of the federal
24 Social Security Act with a sexual assault treatment plan
25 approved by the Department to provide medical forensic
26 services to sexual assault survivors 13 years old or older who

1 present with a complaint of sexual assault within a minimum of
2 the last 7 days or who have disclosed past sexual assault by a
3 specific individual and were in the care of that individual
4 within a minimum of the last 7 days.

5 "Areawide sexual assault treatment plan" means a plan,
6 developed by hospitals or by hospitals, approved pediatric
7 health care facilities, and approved federally qualified
8 health centers in a community or area to be served, which
9 provides for medical forensic services to sexual assault
10 survivors that shall be made available by each of the
11 participating hospitals and approved pediatric health care
12 facilities.

13 "Board-certified child abuse pediatrician" means a
14 physician certified by the American Board of Pediatrics in
15 child abuse pediatrics.

16 "Board-eligible child abuse pediatrician" means a
17 physician who has completed the requirements set forth by the
18 American Board of Pediatrics to take the examination for
19 certification in child abuse pediatrics.

20 "Department" means the Department of Public Health.

21 "Emergency contraception" means medication as approved by
22 the federal Food and Drug Administration (FDA) that can
23 significantly reduce the risk of pregnancy if taken within 72
24 hours after sexual assault.

25 "Federally qualified health center" means a facility as
26 defined in Section 1905(1)(2)(B) of the federal Social

1 Security Act that provides primary care or sexual health
2 services.

3 "Follow-up healthcare" means healthcare services related
4 to a sexual assault, including laboratory services and
5 pharmacy services, rendered within 90 days of the initial
6 visit for medical forensic services.

7 "Health care professional" means a physician, a physician
8 assistant, a sexual assault forensic examiner, an advanced
9 practice registered nurse, a registered professional nurse, a
10 licensed practical nurse, or a sexual assault nurse examiner.

11 "Hospital" means a hospital licensed under the Hospital
12 Licensing Act or operated under the University of Illinois
13 Hospital Act, any outpatient center included in the hospital's
14 sexual assault treatment plan where hospital employees provide
15 medical forensic services, and an out-of-state hospital that
16 has consented to the jurisdiction of the Department under
17 Section 2.06-1.

18 "Illinois State Police Sexual Assault Evidence Collection
19 Kit" means a prepackaged set of materials and forms to be used
20 for the collection of evidence relating to sexual assault. The
21 standardized evidence collection kit for the State of Illinois
22 shall be the Illinois State Police Sexual Assault Evidence
23 Collection Kit.

24 "Law enforcement agency having jurisdiction" means the law
25 enforcement agency in the jurisdiction where an alleged sexual
26 assault or sexual abuse occurred.

1 "Licensed practical nurse" has the meaning provided in
2 Section 50-10 of the Nurse Practice Act.

3 "Medical forensic services" means health care delivered to
4 patients within or under the care and supervision of personnel
5 working in a designated emergency department of a hospital,
6 approved pediatric health care facility, or an approved
7 federally qualified health centers.

8 "Medical forensic services" includes, but is not limited
9 to, taking a medical history, performing photo documentation,
10 performing a physical and anogenital examination, assessing
11 the patient for evidence collection, collecting evidence in
12 accordance with a statewide sexual assault evidence collection
13 program administered by the Department of State Police using
14 the Illinois State Police Sexual Assault Evidence Collection
15 Kit, if appropriate, assessing the patient for
16 drug-facilitated or alcohol-facilitated sexual assault,
17 providing an evaluation of and care for sexually transmitted
18 infection and human immunodeficiency virus (HIV), pregnancy
19 risk evaluation and care, and discharge and follow-up
20 healthcare planning.

21 "Pediatric health care facility" means a clinic or
22 physician's office that provides medical services to patients
23 under the age of 18 ~~pediatric patients~~.

24 "Pediatric sexual assault survivor" means a person under
25 the age of 13 who presents for medical forensic services in
26 relation to injuries or trauma resulting from a sexual

1 assault.

2 "Photo documentation" means digital photographs or
3 colposcope videos stored and backed up securely in the
4 original file format.

5 "Physician" means a person licensed to practice medicine
6 in all its branches.

7 "Physician assistant" has the meaning provided in Section
8 4 of the Physician Assistant Practice Act of 1987.

9 "Prepubescent sexual assault survivor" means a female who
10 is under the age of 18 years and has not had a first menstrual
11 cycle or a male who is under the age of 18 years and has not
12 started to develop secondary sex characteristics who presents
13 for medical forensic services in relation to injuries or
14 trauma resulting from a sexual assault.

15 "Qualified medical provider" means a board-certified child
16 abuse pediatrician, board-eligible child abuse pediatrician, a
17 sexual assault forensic examiner, or a sexual assault nurse
18 examiner who has access to photo documentation tools, and who
19 participates in peer review.

20 "Registered Professional Nurse" has the meaning provided
21 in Section 50-10 of the Nurse Practice Act.

22 "Sexual assault" means:

23 (1) an act of sexual conduct; as used in this
24 paragraph, "sexual conduct" has the meaning provided under
25 Section 11-0.1 of the Criminal Code of 2012; or

26 (2) any act of sexual penetration; as used in this

1 paragraph, "sexual penetration" has the meaning provided
2 under Section 11-0.1 of the Criminal Code of 2012 and
3 includes, without limitation, acts prohibited under
4 Sections 11-1.20 through 11-1.60 of the Criminal Code of
5 2012.

6 "Sexual assault forensic examiner" means a physician or
7 physician assistant who has completed training that meets or
8 is substantially similar to the Sexual Assault Nurse Examiner
9 Education Guidelines established by the International
10 Association of Forensic Nurses.

11 "Sexual assault nurse examiner" means an advanced practice
12 registered nurse or registered professional nurse who has
13 completed a sexual assault nurse examiner training program
14 that meets the Sexual Assault Nurse Examiner Education
15 Guidelines established by the International Association of
16 Forensic Nurses.

17 "Sexual assault services voucher" means a document
18 generated by a hospital or approved pediatric health care
19 facility at the time the sexual assault survivor receives
20 outpatient medical forensic services that may be used to seek
21 payment for any ambulance services, medical forensic services,
22 laboratory services, pharmacy services, and follow-up
23 healthcare provided as a result of the sexual assault.

24 "Sexual assault survivor" means a person who presents for
25 medical forensic services in relation to injuries or trauma
26 resulting from a sexual assault.

1 "Sexual assault transfer plan" means a written plan
2 developed by a hospital and approved by the Department, which
3 describes the hospital's procedures for transferring sexual
4 assault survivors to another hospital, and an approved
5 pediatric health care facility, if applicable, in order to
6 receive medical forensic services.

7 "Sexual assault treatment plan" means a written plan that
8 describes the procedures and protocols for providing medical
9 forensic services to sexual assault survivors who present
10 themselves for such services, either directly or through
11 transfer from a hospital or an approved pediatric health care
12 facility.

13 "Transfer hospital" means a hospital with a sexual assault
14 transfer plan approved by the Department.

15 "Transfer services" means the appropriate medical
16 screening examination and necessary stabilizing treatment
17 prior to the transfer of a sexual assault survivor to a
18 hospital or an approved pediatric health care facility that
19 provides medical forensic services to sexual assault survivors
20 pursuant to a sexual assault treatment plan or areawide sexual
21 assault treatment plan.

22 "Treatment hospital" means a hospital with a sexual
23 assault treatment plan approved by the Department to provide
24 medical forensic services to: (A) all sexual assault survivors
25 13 years of age or older who present with a complaint of sexual
26 assault within a minimum of the last 7 days or who have

1 disclosed past sexual assault by a specific individual and
2 were in the care of that individual within a minimum of the
3 last 7 days; and (B) pediatric sexual assault survivors who
4 present with a complaint of sexual assault within a minimum of
5 96 hours or who have disclosed past sexual assault by a
6 specific individual and were in the care of that individual
7 within a minimum of 96 hours.

8 "Treatment hospital with approved pediatric transfer"
9 means a hospital with a treatment plan approved by the
10 Department to provide medical forensic services to sexual
11 assault survivors 13 years old or older who present with a
12 complaint of sexual assault within a minimum of the last 7 days
13 or who have disclosed past sexual assault by a specific
14 individual and were in the care of that individual within a
15 minimum of the last 7 days.

16 (b) This Section is repealed on December 31, 2023.

17 (Source: P.A. 101-634, eff. 6-5-20; 102-22, eff. 6-25-21;
18 102-674, eff. 11-30-21.)

19 (410 ILCS 70/1b new)

20 Sec. 1b. Subsequent medical forensic services; pediatric
21 sexual assault survivors. Medical forensic services, as
22 defined in this Act, including the evidence collection kit,
23 may be offered to pediatric sexual assault survivors who
24 present with a complaint of sexual assault or who have
25 disclosed past sexual assault past 96 hours at the clinical

1 discretion of the qualified medical provider. All pediatric
2 sexual assault survivors have access to a multidisciplinary
3 team as defined in Section 2.5 of the Children's Advocacy
4 Center Act. A member of the multidisciplinary team may access
5 a qualified medical provider to determine the need for
6 evidence collection beyond 96 hours.

7 (410 ILCS 70/2) (from Ch. 111 1/2, par. 87-2)

8 Sec. 2. Hospital and approved pediatric health care
9 facility requirements for sexual assault plans.

10 (a) Every hospital required to be licensed by the
11 Department pursuant to the Hospital Licensing Act, or operated
12 under the University of Illinois Hospital Act that provides
13 general medical and surgical hospital services shall provide
14 either (i) transfer services to all sexual assault survivors,
15 (ii) medical forensic services to all sexual assault
16 survivors, or (iii) transfer services to pediatric sexual
17 assault survivors and medical forensic services to sexual
18 assault survivors 13 years old or older, in accordance with
19 rules adopted by the Department.

20 In addition, every such hospital, regardless of whether or
21 not a request is made for reimbursement, shall submit to the
22 Department a plan to provide either (i) transfer services to
23 all sexual assault survivors, (ii) medical forensic services
24 to all sexual assault survivors, or (iii) transfer services to
25 pediatric sexual assault survivors and medical forensic

1 services to sexual assault survivors 13 years old or older
2 within the time frame established by the Department. The
3 Department shall approve such plan for either (i) transfer
4 services to all sexual assault survivors, (ii) medical
5 forensic services to all sexual assault survivors, or (iii)
6 transfer services to pediatric sexual assault survivors and
7 medical forensic services to sexual assault survivors 13 years
8 old or older, if it finds that the implementation of the
9 proposed plan would provide (i) transfer services or (ii)
10 medical forensic services for sexual assault survivors in
11 accordance with the requirements of this Act and provide
12 sufficient protections from the risk of pregnancy to sexual
13 assault survivors. Notwithstanding anything to the contrary in
14 this paragraph, the Department may approve a sexual assault
15 transfer plan for the provision of medical forensic services
16 if:

17 (1) a treatment hospital with approved pediatric
18 transfer has agreed, as part of an areawide treatment
19 plan, to accept sexual assault survivors 13 years of age
20 or older from the proposed transfer hospital, if the
21 treatment hospital with approved pediatric transfer is
22 geographically closer to the transfer hospital than a
23 treatment hospital or another treatment hospital with
24 approved pediatric transfer and such transfer is not
25 unduly burdensome on the sexual assault survivor; and

26 (2) a treatment hospital has agreed, as a part of an

1 areawide treatment plan, to accept sexual assault
2 survivors under 13 years of age from the proposed transfer
3 hospital and transfer to the treatment hospital would not
4 unduly burden the sexual assault survivor.

5 The Department may not approve a sexual assault transfer
6 plan unless a treatment hospital has agreed, as a part of an
7 areawide treatment plan, to accept sexual assault survivors
8 from the proposed transfer hospital and a transfer to the
9 treatment hospital would not unduly burden the sexual assault
10 survivor.

11 In counties with a population of less than 1,000,000, the
12 Department may not approve a sexual assault transfer plan for
13 a hospital located within a 20-mile radius of a 4-year public
14 university, not including community colleges, unless there is
15 a treatment hospital or out-of-state hospital with a sexual
16 assault treatment plan approved by the Department within a
17 30-mile 20-mile radius of the 4-year public university. A
18 hospital located within a 20-mile radius of a 4-year public
19 university, not including community colleges, may be approved
20 as a treatment hospital with pediatric transfer if there is a
21 treatment hospital or out-of-state hospital with a sexual
22 assault treatment plan within a 30-mile radius of the 4-year
23 public university.

24 A transfer must be in accordance with federal and State
25 laws and local ordinances.

26 A treatment hospital with approved pediatric transfer must

1 submit an areawide treatment plan under Section 3 of this Act
2 that includes a written agreement with a treatment hospital
3 stating that the treatment hospital will provide medical
4 forensic services to pediatric sexual assault survivors
5 transferred from the treatment hospital with approved
6 pediatric transfer. The areawide treatment plan may also
7 include an approved pediatric health care facility.

8 A transfer hospital must submit an areawide treatment plan
9 under Section 3 of this Act that includes a written agreement
10 with a treatment hospital stating that the treatment hospital
11 will provide medical forensic services to all sexual assault
12 survivors transferred from the transfer hospital. The areawide
13 treatment plan may also include an approved pediatric health
14 care facility. Notwithstanding anything to the contrary in
15 this paragraph, the areawide treatment plan may include a
16 written agreement with a treatment hospital with approved
17 pediatric transfer that is geographically closer than other
18 hospitals providing medical forensic services to sexual
19 assault survivors 13 years of age or older stating that the
20 treatment hospital with approved pediatric transfer will
21 provide medical services to sexual assault survivors 13 years
22 of age or older who are transferred from the transfer
23 hospital. If the areawide treatment plan includes a written
24 agreement with a treatment hospital with approved pediatric
25 transfer, it must also include a written agreement with a
26 treatment hospital stating that the treatment hospital will

1 provide medical forensic services to sexual assault survivors
2 under 13 years of age who are transferred from the transfer
3 hospital.

4 Beginning January 1, 2019, each treatment hospital and
5 treatment hospital with approved pediatric transfer shall
6 ensure that emergency department attending physicians,
7 physician assistants, advanced practice registered nurses, and
8 registered professional nurses providing clinical services,
9 who do not meet the definition of a qualified medical provider
10 in Section 1a of this Act, receive a minimum of 2 hours of
11 sexual assault training by July 1, 2020 or until the treatment
12 hospital or treatment hospital with approved pediatric
13 transfer certifies to the Department, in a form and manner
14 prescribed by the Department, that it employs or contracts
15 with a qualified medical provider in accordance with
16 subsection (a-7) of Section 5, whichever occurs first.

17 After July 1, 2020 or once a treatment hospital or a
18 treatment hospital with approved pediatric transfer certifies
19 compliance with subsection (a-7) of Section 5, whichever
20 occurs first, each treatment hospital and treatment hospital
21 with approved pediatric transfer shall ensure that emergency
22 department attending physicians, physician assistants,
23 advanced practice registered nurses, and registered
24 professional nurses providing clinical services, who do not
25 meet the definition of a qualified medical provider in Section
26 1a of this Act, receive a minimum of 2 hours of continuing

1 education on responding to sexual assault survivors every 2
2 years. Protocols for training shall be included in the
3 hospital's sexual assault treatment plan.

4 Sexual assault training provided under this subsection may
5 be provided in person or online and shall include, but not be
6 limited to:

7 (1) information provided on the provision of medical
8 forensic services;

9 (2) information on the use of the Illinois Sexual
10 Assault Evidence Collection Kit;

11 (3) information on sexual assault epidemiology,
12 neurobiology of trauma, drug-facilitated sexual assault,
13 child sexual abuse, and Illinois sexual assault-related
14 laws; and

15 (4) information on the hospital's sexual
16 assault-related policies and procedures.

17 The online training made available by the Office of the
18 Attorney General under subsection (b) of Section 10 may be
19 used to comply with this subsection.

20 (a-5) A hospital must submit a plan to provide either (i)
21 transfer services to all sexual assault survivors, (ii)
22 medical forensic services to all sexual assault survivors, or
23 (iii) transfer services to pediatric sexual assault survivors
24 and medical forensic services to sexual assault survivors 13
25 years old or older as required in subsection (a) of this
26 Section within 60 days of the Department's request. Failure to

1 submit a plan as described in this subsection shall subject a
2 hospital to the imposition of a fine by the Department. The
3 Department may impose a fine of up to \$500 per day until the
4 hospital submits a plan as described in this subsection.

5 (a-10) Upon receipt of a plan as described in subsection
6 (a-5), the Department shall notify the hospital whether or not
7 the plan is acceptable. If the Department determines that the
8 plan is unacceptable, the hospital must submit a modified plan
9 within 10 days of service of the notification. If the
10 Department determines that the modified plan is unacceptable,
11 or if the hospital fails to submit a modified plan within 10
12 days, the Department may impose a fine of up to \$500 per day
13 until an acceptable plan has been submitted, as determined by
14 the Department.

15 (b) An approved pediatric health care facility may provide
16 medical forensic services, in accordance with rules adopted by
17 the Department, to all pediatric sexual assault survivors who
18 present for medical forensic services in relation to injuries
19 or trauma resulting from a sexual assault. These services
20 shall be provided by a qualified medical provider.

21 A pediatric health care facility must participate in or
22 submit an areawide treatment plan under Section 3 of this Act
23 that includes a treatment hospital. If a pediatric health care
24 facility does not provide certain medical or surgical services
25 that are provided by hospitals, the areawide sexual assault
26 treatment plan must include a procedure for ensuring a sexual

1 assault survivor in need of such medical or surgical services
2 receives the services at the treatment hospital. The areawide
3 treatment plan may also include a treatment hospital with
4 approved pediatric transfer.

5 The Department shall review a proposed sexual assault
6 treatment plan submitted by a pediatric health care facility
7 within 60 days after receipt of the plan. If the Department
8 finds that the proposed plan meets the minimum requirements
9 set forth in Section 5 of this Act and that implementation of
10 the proposed plan would provide medical forensic services for
11 pediatric sexual assault survivors, then the Department shall
12 approve the plan. If the Department does not approve a plan,
13 then the Department shall notify the pediatric health care
14 facility that the proposed plan has not been approved. The
15 pediatric health care facility shall have 30 days to submit a
16 revised plan. The Department shall review the revised plan
17 within 30 days after receipt of the plan and notify the
18 pediatric health care facility whether the revised plan is
19 approved or rejected. Until the Department has approved a
20 treatment plan, a A pediatric health care facility may not
21 provide medical forensic services to pediatric sexual assault
22 survivors who present with a complaint of sexual assault
23 within a minimum of 96 hours ~~the last 7 days~~ or who have
24 disclosed past sexual assault by a specific individual and
25 were in the care of that individual within a minimum of 96
26 hours ~~the last 7 days until the Department has approved a~~

1 ~~treatment plan.~~

2 If an approved pediatric health care facility is not open
3 24 hours a day, 7 days a week, it shall post signage at each
4 public entrance to its facility that:

5 (1) is at least 14 inches by 14 inches in size;

6 (2) directs those seeking services as follows: "If
7 closed, call 911 for services or go to the closest
8 hospital emergency department, (insert name) located at
9 (insert address).";

10 (3) lists the approved pediatric health care
11 facility's hours of operation;

12 (4) lists the street address of the building;

13 (5) has a black background with white bold capital
14 lettering in a clear and easy to read font that is at least
15 72-point type, and with "call 911" in at least 125-point
16 type;

17 (6) is posted clearly and conspicuously on or adjacent
18 to the door at each entrance and, if building materials
19 allow, is posted internally for viewing through glass; if
20 posted externally, the sign shall be made of
21 weather-resistant and theft-resistant materials,
22 non-removable, and adhered permanently to the building;
23 and

24 (7) has lighting that is part of the sign itself or is
25 lit with a dedicated light that fully illuminates the
26 sign.

1 A copy of the proposed sign must be submitted to the
2 Department and approved as part of the approved pediatric
3 health care facility's sexual assault treatment plan.

4 (c) Each treatment hospital, treatment hospital with
5 approved pediatric transfer, and approved pediatric health
6 care facility must enter into a memorandum of understanding
7 with a rape crisis center for medical advocacy services, if
8 these services are available to the treatment hospital,
9 treatment hospital with approved pediatric transfer, or
10 approved pediatric health care facility. With the consent of
11 the sexual assault survivor, a rape crisis counselor shall
12 remain in the exam room during the collection for forensic
13 evidence.

14 (d) Every treatment hospital, treatment hospital with
15 approved pediatric transfer, and approved pediatric health
16 care facility's sexual assault treatment plan shall include
17 procedures for complying with mandatory reporting requirements
18 pursuant to (1) the Abused and Neglected Child Reporting Act;
19 (2) the Abused and Neglected Long Term Care Facility Residents
20 Reporting Act; (3) the Adult Protective Services Act; and (iv)
21 the Criminal Identification Act.

22 (e) Each treatment hospital, treatment hospital with
23 approved pediatric transfer, and approved pediatric health
24 care facility shall submit to the Department every 6 months,
25 in a manner prescribed by the Department, the following
26 information:

1 (1) The total number of patients who presented with a
2 complaint of sexual assault.

3 (2) The total number of Illinois Sexual Assault
4 Evidence Collection Kits:

5 (A) offered to (i) all sexual assault survivors
6 and (ii) pediatric sexual assault survivors pursuant
7 to paragraph (1.5) of subsection (a-5) of Section 5;

8 (B) completed for (i) all sexual assault survivors
9 and (ii) pediatric sexual assault survivors; and

10 (C) declined by (i) all sexual assault survivors
11 and (ii) pediatric sexual assault survivors.

12 This information shall be made available on the
13 Department's website.

14 (f) This Section is effective on and after January 1,
15 2024.

16 (Source: P.A. 101-73, eff. 7-12-19; 101-634, eff. 6-5-20;
17 102-22, eff. 6-25-21; 102-674, eff. 11-30-21.)

18 (410 ILCS 70/2-1)

19 (Section scheduled to be repealed on December 31, 2023)

20 Sec. 2-1. Hospital, approved pediatric health care
21 facility, and approved federally qualified health center
22 requirements for sexual assault plans.

23 (a) Every hospital required to be licensed by the
24 Department pursuant to the Hospital Licensing Act, or operated
25 under the University of Illinois Hospital Act that provides

1 general medical and surgical hospital services shall provide
2 either (i) transfer services to all sexual assault survivors,
3 (ii) medical forensic services to all sexual assault
4 survivors, or (iii) transfer services to pediatric sexual
5 assault survivors and medical forensic services to sexual
6 assault survivors 13 years old or older, in accordance with
7 rules adopted by the Department.

8 In addition, every such hospital, regardless of whether or
9 not a request is made for reimbursement, shall submit to the
10 Department a plan to provide either (i) transfer services to
11 all sexual assault survivors, (ii) medical forensic services
12 to all sexual assault survivors, or (iii) transfer services to
13 pediatric sexual assault survivors and medical forensic
14 services to sexual assault survivors 13 years old or older
15 within the time frame established by the Department. The
16 Department shall approve such plan for either (i) transfer
17 services to all sexual assault survivors, (ii) medical
18 forensic services to all sexual assault survivors, or (iii)
19 transfer services to pediatric sexual assault survivors and
20 medical forensic services to sexual assault survivors 13 years
21 old or older, if it finds that the implementation of the
22 proposed plan would provide (i) transfer services or (ii)
23 medical forensic services for sexual assault survivors in
24 accordance with the requirements of this Act and provide
25 sufficient protections from the risk of pregnancy to sexual
26 assault survivors. Notwithstanding anything to the contrary in

1 this paragraph, the Department may approve a sexual assault
2 transfer plan for the provision of medical forensic services
3 if:

4 (1) a treatment hospital with approved pediatric
5 transfer has agreed, as part of an areawide treatment
6 plan, to accept sexual assault survivors 13 years of age
7 or older from the proposed transfer hospital, if the
8 treatment hospital with approved pediatric transfer is
9 geographically closer to the transfer hospital than a
10 treatment hospital or another treatment hospital with
11 approved pediatric transfer and such transfer is not
12 unduly burdensome on the sexual assault survivor; and

13 (2) a treatment hospital has agreed, as a part of an
14 areawide treatment plan, to accept sexual assault
15 survivors under 13 years of age from the proposed transfer
16 hospital and transfer to the treatment hospital would not
17 unduly burden the sexual assault survivor.

18 The Department may not approve a sexual assault transfer
19 plan unless a treatment hospital has agreed, as a part of an
20 areawide treatment plan, to accept sexual assault survivors
21 from the proposed transfer hospital and a transfer to the
22 treatment hospital would not unduly burden the sexual assault
23 survivor.

24 In counties with a population of less than 1,000,000, the
25 Department may not approve a sexual assault transfer plan for
26 a hospital located within a 20-mile radius of a 4-year public

1 university, not including community colleges, unless there is
2 a treatment hospital or out-of-state hospital with a sexual
3 assault treatment plan approved by the Department within a
4 30-mile ~~20-mile~~ radius of the 4-year public university. A
5 hospital located within a 20-mile radius of a 4-year public
6 university, not including community colleges, may be approved
7 as a treatment hospital with pediatric transfer if there is a
8 treatment hospital or out-of-state hospital with a sexual
9 assault treatment plan within a 30-mile radius of the 4-year
10 public university.

11 A transfer must be in accordance with federal and State
12 laws and local ordinances.

13 A treatment hospital with approved pediatric transfer must
14 submit an areawide treatment plan under Section 3-1 of this
15 Act that includes a written agreement with a treatment
16 hospital stating that the treatment hospital will provide
17 medical forensic services to pediatric sexual assault
18 survivors transferred from the treatment hospital with
19 approved pediatric transfer. The areawide treatment plan may
20 also include an approved pediatric health care facility.

21 A transfer hospital must submit an areawide treatment plan
22 under Section 3-1 of this Act that includes a written
23 agreement with a treatment hospital stating that the treatment
24 hospital will provide medical forensic services to all sexual
25 assault survivors transferred from the transfer hospital. The
26 areawide treatment plan may also include an approved pediatric

1 health care facility. Notwithstanding anything to the contrary
2 in this paragraph, the areawide treatment plan may include a
3 written agreement with a treatment hospital with approved
4 pediatric transfer that is geographically closer than other
5 hospitals providing medical forensic services to sexual
6 assault survivors 13 years of age or older stating that the
7 treatment hospital with approved pediatric transfer will
8 provide medical services to sexual assault survivors 13 years
9 of age or older who are transferred from the transfer
10 hospital. If the areawide treatment plan includes a written
11 agreement with a treatment hospital with approved pediatric
12 transfer, it must also include a written agreement with a
13 treatment hospital stating that the treatment hospital will
14 provide medical forensic services to sexual assault survivors
15 under 13 years of age who are transferred from the transfer
16 hospital.

17 Beginning January 1, 2019, each treatment hospital and
18 treatment hospital with approved pediatric transfer shall
19 ensure that emergency department attending physicians,
20 physician assistants, advanced practice registered nurses, and
21 registered professional nurses providing clinical services,
22 who do not meet the definition of a qualified medical provider
23 in Section 1a-1 of this Act, receive a minimum of 2 hours of
24 sexual assault training by July 1, 2020 or until the treatment
25 hospital or treatment hospital with approved pediatric
26 transfer certifies to the Department, in a form and manner

1 prescribed by the Department, that it employs or contracts
2 with a qualified medical provider in accordance with
3 subsection (a-7) of Section 5-1, whichever occurs first.

4 After July 1, 2020 or once a treatment hospital or a
5 treatment hospital with approved pediatric transfer certifies
6 compliance with subsection (a-7) of Section 5-1, whichever
7 occurs first, each treatment hospital and treatment hospital
8 with approved pediatric transfer shall ensure that emergency
9 department attending physicians, physician assistants,
10 advanced practice registered nurses, and registered
11 professional nurses providing clinical services, who do not
12 meet the definition of a qualified medical provider in Section
13 1a-1 of this Act, receive a minimum of 2 hours of continuing
14 education on responding to sexual assault survivors every 2
15 years. Protocols for training shall be included in the
16 hospital's sexual assault treatment plan.

17 Sexual assault training provided under this subsection may
18 be provided in person or online and shall include, but not be
19 limited to:

20 (1) information provided on the provision of medical
21 forensic services;

22 (2) information on the use of the Illinois Sexual
23 Assault Evidence Collection Kit;

24 (3) information on sexual assault epidemiology,
25 neurobiology of trauma, drug-facilitated sexual assault,
26 child sexual abuse, and Illinois sexual assault-related

1 laws; and

2 (4) information on the hospital's sexual
3 assault-related policies and procedures.

4 The online training made available by the Office of the
5 Attorney General under subsection (b) of Section 10-1 may be
6 used to comply with this subsection.

7 (a-5) A hospital must submit a plan to provide either (i)
8 transfer services to all sexual assault survivors, (ii)
9 medical forensic services to all sexual assault survivors, or
10 (iii) transfer services to pediatric sexual assault survivors
11 and medical forensic services to sexual assault survivors 13
12 years old or older as required in subsection (a) of this
13 Section within 60 days of the Department's request. Failure to
14 submit a plan as described in this subsection shall subject a
15 hospital to the imposition of a fine by the Department. The
16 Department may impose a fine of up to \$500 per day until the
17 hospital submits a plan as described in this subsection. No
18 fine shall be taken or assessed until 12 months after the
19 effective date of this amendatory Act of the 102nd General
20 Assembly.

21 (a-10) Upon receipt of a plan as described in subsection
22 (a-5), the Department shall notify the hospital whether or not
23 the plan is acceptable. If the Department determines that the
24 plan is unacceptable, the hospital must submit a modified plan
25 within 10 days of service of the notification. If the
26 Department determines that the modified plan is unacceptable,

1 or if the hospital fails to submit a modified plan within 10
2 days, the Department may impose a fine of up to \$500 per day
3 until an acceptable plan has been submitted, as determined by
4 the Department. No fine shall be taken or assessed until 12
5 months after the effective date of this amendatory Act of the
6 102nd General Assembly.

7 (b) An approved pediatric health care facility may provide
8 medical forensic services, in accordance with rules adopted by
9 the Department, to all pediatric sexual assault survivors who
10 present for medical forensic services in relation to injuries
11 or trauma resulting from a sexual assault. These services
12 shall be provided by a qualified medical provider.

13 A pediatric health care facility must participate in or
14 submit an areawide treatment plan under Section 3-1 of this
15 Act that includes a treatment hospital. If a pediatric health
16 care facility does not provide certain medical or surgical
17 services that are provided by hospitals, the areawide sexual
18 assault treatment plan must include a procedure for ensuring a
19 sexual assault survivor in need of such medical or surgical
20 services receives the services at the treatment hospital. The
21 areawide treatment plan may also include a treatment hospital
22 with approved pediatric transfer.

23 The Department shall review a proposed sexual assault
24 treatment plan submitted by a pediatric health care facility
25 within 60 days after receipt of the plan. If the Department
26 finds that the proposed plan meets the minimum requirements

1 set forth in Section 5-1 of this Act and that implementation of
2 the proposed plan would provide medical forensic services for
3 pediatric sexual assault survivors, then the Department shall
4 approve the plan. If the Department does not approve a plan,
5 then the Department shall notify the pediatric health care
6 facility that the proposed plan has not been approved. The
7 pediatric health care facility shall have 30 days to submit a
8 revised plan. The Department shall review the revised plan
9 within 30 days after receipt of the plan and notify the
10 pediatric health care facility whether the revised plan is
11 approved or rejected. Until the Department has approved a
12 treatment plan, a A pediatric health care facility may not
13 provide medical forensic services to pediatric sexual assault
14 survivors who present with a complaint of sexual assault
15 within a minimum of 96 hours ~~the last 7 days~~ or who have
16 disclosed past sexual assault by a specific individual and
17 were in the care of that individual within a minimum of 96
18 hours ~~the last 7 days until the Department has approved a~~
19 ~~treatment plan.~~

20 If an approved pediatric health care facility is not open
21 24 hours a day, 7 days a week, it shall post signage at each
22 public entrance to its facility that:

23 (1) is at least 14 inches by 14 inches in size;

24 (2) directs those seeking services as follows: "If
25 closed, call 911 for services or go to the closest
26 hospital emergency department, (insert name) located at

1 (insert address).";

2 (3) lists the approved pediatric health care
3 facility's hours of operation;

4 (4) lists the street address of the building;

5 (5) has a black background with white bold capital
6 lettering in a clear and easy to read font that is at least
7 72-point type, and with "call 911" in at least 125-point
8 type;

9 (6) is posted clearly and conspicuously on or adjacent
10 to the door at each entrance and, if building materials
11 allow, is posted internally for viewing through glass; if
12 posted externally, the sign shall be made of
13 weather-resistant and theft-resistant materials,
14 non-removable, and adhered permanently to the building;
15 and

16 (7) has lighting that is part of the sign itself or is
17 lit with a dedicated light that fully illuminates the
18 sign.

19 (b-5) An approved federally qualified health center may
20 provide medical forensic services, in accordance with rules
21 adopted by the Department, to all sexual assault survivors 13
22 years old or older who present for medical forensic services
23 in relation to injuries or trauma resulting from a sexual
24 assault during the duration, and 90 days thereafter, of a
25 proclamation issued by the Governor declaring a disaster, or a
26 successive proclamation regarding the same disaster, in all

1 102 counties due to a public health emergency. These services
2 shall be provided by (i) a qualified medical provider,
3 physician, physician assistant, or advanced practice
4 registered nurse who has received a minimum of 10 hours of
5 sexual assault training provided by a qualified medical
6 provider on current Illinois legislation, how to properly
7 perform a medical forensic examination, evidence collection,
8 drug and alcohol facilitated sexual assault, and forensic
9 photography and has all documentation and photos peer reviewed
10 by a qualified medical provider or (ii) until the federally
11 qualified health care center certifies to the Department, in a
12 form and manner prescribed by the Department, that it employs
13 or contracts with a qualified medical provider in accordance
14 with subsection (a-7) of Section 5-1, whichever occurs first.

15 A federally qualified health center must participate in or
16 submit an areawide treatment plan under Section 3-1 of this
17 Act that includes a treatment hospital. If a federally
18 qualified health center does not provide certain medical or
19 surgical services that are provided by hospitals, the areawide
20 sexual assault treatment plan must include a procedure for
21 ensuring a sexual assault survivor in need of such medical or
22 surgical services receives the services at the treatment
23 hospital. The areawide treatment plan may also include a
24 treatment hospital with approved pediatric transfer or an
25 approved pediatric health care facility.

26 The Department shall review a proposed sexual assault

1 treatment plan submitted by a federally qualified health
2 center within 14 days after receipt of the plan. If the
3 Department finds that the proposed plan meets the minimum
4 requirements set forth in Section 5-1 and that implementation
5 of the proposed plan would provide medical forensic services
6 for sexual assault survivors 13 years old or older, then the
7 Department shall approve the plan. If the Department does not
8 approve a plan, then the Department shall notify the federally
9 qualified health center that the proposed plan has not been
10 approved. The federally qualified health center shall have 14
11 days to submit a revised plan. The Department shall review the
12 revised plan within 14 days after receipt of the plan and
13 notify the federally qualified health center whether the
14 revised plan is approved or rejected. A federally qualified
15 health center may not (i) provide medical forensic services to
16 sexual assault survivors 13 years old or older who present
17 with a complaint of sexual assault within a minimum of the
18 previous 7 days or (ii) who have disclosed past sexual assault
19 by a specific individual and were in the care of that
20 individual within a minimum of the previous 7 days until the
21 Department has approved a treatment plan.

22 If an approved federally qualified health center is not
23 open 24 hours a day, 7 days a week, it shall post signage at
24 each public entrance to its facility that:

25 (1) is at least 14 inches by 14 inches in size;

26 (2) directs those seeking services as follows: "If

1 closed, call 911 for services or go to the closest
2 hospital emergency department, (insert name) located at
3 (insert address).";

4 (3) lists the approved federally qualified health
5 center's hours of operation;

6 (4) lists the street address of the building;

7 (5) has a black background with white bold capital
8 lettering in a clear and easy to read font that is at least
9 72-point type, and with "call 911" in at least 125-point
10 type;

11 (6) is posted clearly and conspicuously on or adjacent
12 to the door at each entrance and, if building materials
13 allow, is posted internally for viewing through glass; if
14 posted externally, the sign shall be made of
15 weather-resistant and theft-resistant materials,
16 non-removable, and adhered permanently to the building;
17 and

18 (7) has lighting that is part of the sign itself or is
19 lit with a dedicated light that fully illuminates the
20 sign.

21 A copy of the proposed sign must be submitted to the
22 Department and approved as part of the approved federally
23 qualified health center's sexual assault treatment plan.

24 (c) Each treatment hospital, treatment hospital with
25 approved pediatric transfer, approved pediatric health care
26 facility, and approved federally qualified health center must

1 enter into a memorandum of understanding with a rape crisis
2 center for medical advocacy services, if these services are
3 available to the treatment hospital, treatment hospital with
4 approved pediatric transfer, approved pediatric health care
5 facility, or approved federally qualified health center. With
6 the consent of the sexual assault survivor, a rape crisis
7 counselor shall remain in the exam room during the collection
8 for forensic evidence.

9 (d) Every treatment hospital, treatment hospital with
10 approved pediatric transfer, approved pediatric health care
11 facility, and approved federally qualified health center's
12 sexual assault treatment plan shall include procedures for
13 complying with mandatory reporting requirements pursuant to
14 (1) the Abused and Neglected Child Reporting Act; (2) the
15 Abused and Neglected Long Term Care Facility Residents
16 Reporting Act; (3) the Adult Protective Services Act; and (iv)
17 the Criminal Identification Act.

18 (e) Each treatment hospital, treatment hospital with
19 approved pediatric transfer, approved pediatric health care
20 facility, and approved federally qualified health center shall
21 submit to the Department every 6 months, in a manner
22 prescribed by the Department, the following information:

23 (1) The total number of patients who presented with a
24 complaint of sexual assault.

25 (2) The total number of Illinois Sexual Assault
26 Evidence Collection Kits:

1 (A) offered to (i) all sexual assault survivors
2 and (ii) pediatric sexual assault survivors pursuant
3 to paragraph (1.5) of subsection (a-5) of Section 5-1;

4 (B) completed for (i) all sexual assault survivors
5 and (ii) pediatric sexual assault survivors; and

6 (C) declined by (i) all sexual assault survivors
7 and (ii) pediatric sexual assault survivors.

8 This information shall be made available on the
9 Department's website.

10 (f) This Section is repealed on December 31, 2023.

11 (Source: P.A. 101-634, eff. 6-5-20; 102-22, eff. 6-25-21;
12 102-674, eff. 11-30-21.)

13 (410 ILCS 70/2.1) (from Ch. 111 1/2, par. 87-2.1)

14 Sec. 2.1. Plan of correction; penalties.

15 (a) If the Department surveyor determines that the
16 hospital or approved pediatric health care facility is not in
17 compliance with its approved plan, the surveyor shall provide
18 the hospital or approved pediatric health care facility with a
19 written list of the specific items of noncompliance within 10
20 working days after the conclusion of the on-site review. The
21 hospital shall have 10 working days to submit to the
22 Department a plan of correction which contains the hospital's
23 or approved pediatric health care facility's specific
24 proposals for correcting the items of noncompliance. The
25 Department shall review the plan of correction and notify the

1 hospital in writing within 10 working days as to whether the
2 plan is acceptable or unacceptable.

3 If the Department finds the Plan of Correction
4 unacceptable, the hospital or approved pediatric health care
5 facility shall have 10 working days to resubmit an acceptable
6 Plan of Correction. Upon notification that its Plan of
7 Correction is acceptable, a hospital or approved pediatric
8 health care facility shall implement the Plan of Correction
9 within 60 days.

10 (b) The failure of a hospital to submit an acceptable Plan
11 of Correction or to implement the Plan of Correction, within
12 the time frames required in this Section, will subject a
13 hospital to the imposition of a fine by the Department. The
14 Department may impose a fine of up to \$500 per day until a
15 hospital complies with the requirements of this Section. If a
16 hospital submits 2 Plans of Correction that are found to not be
17 acceptable by the Department, the hospital shall become
18 subject to the imposition of a fine by the Department.

19 If an approved pediatric health care facility fails to
20 submit an acceptable Plan of Correction or to implement the
21 Plan of Correction within the time frames required in this
22 Section, then the Department shall notify the approved
23 pediatric health care facility that the approved pediatric
24 health care facility may not provide medical forensic services
25 under this Act. The Department may impose a fine of up to \$500
26 per patient provided services in violation of this Act. If an

1 approved pediatric facility submits 2 Plans of Correction that
2 are found to not be acceptable by the Department, the approved
3 pediatric health care facility shall become subject to the
4 imposition of a fine by the Department and the termination of
5 its approved sexual assault treatment plan.

6 (c) Before imposing a fine pursuant to this Section, the
7 Department shall provide the hospital or approved pediatric
8 health care facility via certified mail with written notice
9 and an opportunity for an administrative hearing. Such hearing
10 must be requested within 10 working days after receipt of the
11 Department's Notice. All hearings shall be conducted in
12 accordance with the Department's rules in administrative
13 hearings.

14 (d) This Section is effective on and after January 1,
15 2024.

16 (Source: P.A. 101-81, eff. 7-12-19; 101-634, eff. 6-5-20;
17 102-22, eff. 6-25-21; 102-674, eff. 11-30-21.)

18 (410 ILCS 70/2.1-1)

19 (Section scheduled to be repealed on December 31, 2023)

20 Sec. 2.1-1. Plan of correction; penalties.

21 (a) If the Department surveyor determines that the
22 hospital, approved pediatric health care facility, or approved
23 federally qualified health center is not in compliance with
24 its approved plan, the surveyor shall provide the hospital,
25 approved pediatric health care facility, or approved federally

1 qualified health center with a written list of the specific
2 items of noncompliance within 10 working days after the
3 conclusion of the on-site review. The hospital, approved
4 pediatric health care facility, or approved federally
5 qualified health center shall have 10 working days to submit
6 to the Department a plan of correction which contains the
7 hospital's, approved pediatric health care facility's, or
8 approved federally qualified health center's specific
9 proposals for correcting the items of noncompliance. The
10 Department shall review the plan of correction and notify the
11 hospital, approved pediatric health care facility, or approved
12 federally qualified health center in writing within 10 working
13 days as to whether the plan is acceptable or unacceptable.

14 If the Department finds the Plan of Correction
15 unacceptable, the hospital, approved pediatric health care
16 facility, or approved federally qualified health center shall
17 have 10 working days to resubmit an acceptable Plan of
18 Correction. Upon notification that its Plan of Correction is
19 acceptable, a hospital, approved pediatric health care
20 facility, or approved federally qualified health center shall
21 implement the Plan of Correction within 60 days.

22 (b) The failure of a hospital to submit an acceptable Plan
23 of Correction or to implement the Plan of Correction, within
24 the time frames required in this Section, will subject a
25 hospital to the imposition of a fine by the Department. If a
26 hospital submits 2 Plans of Correction that are found to not be

1 acceptable by the Department, the facility shall become
2 subject to the imposition of a fine by the Department. The
3 Department may impose a fine of up to \$500 per day until a
4 hospital complies with the requirements of this Section. No
5 fine shall be taken or assessed until 12 months after the
6 effective date of this amendatory Act of the 102nd General
7 Assembly.

8 If an approved pediatric health care facility or approved
9 federally qualified health center fails to submit an
10 acceptable Plan of Correction or to implement the Plan of
11 Correction within the time frames required in this Section,
12 then the Department shall notify the approved pediatric health
13 care facility or approved federally qualified health center
14 that the approved pediatric health care facility or approved
15 federally qualified health center may not provide medical
16 forensic services under this Act. If an approved pediatric
17 health care facility or approved federally qualified health
18 center submits 2 Plans of Correction that are found to not be
19 acceptable by the Department, the facility shall become
20 subject to the imposition of a fine by the Department and the
21 termination of its approved sexual assault treatment plan. The
22 Department may impose a fine of up to \$500 per patient provided
23 services in violation of this Act. No fine shall be taken or
24 assessed until 12 months after the effective date of this
25 amendatory Act of the 102nd General Assembly.

26 (c) Before imposing a fine pursuant to this Section, the

1 Department shall provide the hospital, or approved pediatric
2 health care facility, or approved federally qualified health
3 center via certified mail with written notice and an
4 opportunity for an administrative hearing. Such hearing must
5 be requested within 10 working days after receipt of the
6 Department's Notice. All hearings shall be conducted in
7 accordance with the Department's rules in administrative
8 hearings.

9 (d) This Section is repealed on December 31, 2023.

10 (Source: P.A. 101-634, eff. 6-5-20; 102-22, eff. 6-25-21;
11 102-674, eff. 11-30-21.)

12 (410 ILCS 70/5) (from Ch. 111 1/2, par. 87-5)

13 Sec. 5. Minimum requirements for medical forensic services
14 provided to sexual assault survivors by hospitals and approved
15 pediatric health care facilities.

16 (a) Every hospital and approved pediatric health care
17 facility providing medical forensic services to sexual assault
18 survivors under this Act shall, as minimum requirements for
19 such services, provide, with the consent of the sexual assault
20 survivor, and as ordered by the attending physician, an
21 advanced practice registered nurse, or a physician assistant,
22 the services set forth in subsection (a-5).

23 Beginning January 1, 2024 ~~2023~~, a qualified medical
24 provider must provide the services set forth in subsection
25 (a-5).

1 (a-5) A treatment hospital, a treatment hospital with
2 approved pediatric transfer, or an approved pediatric health
3 care facility shall provide the following services in
4 accordance with subsection (a):

5 (1) Appropriate medical forensic services without
6 delay, in a private, age-appropriate or
7 developmentally-appropriate space, required to ensure the
8 health, safety, and welfare of a sexual assault survivor
9 and which may be used as evidence in a criminal proceeding
10 against a person accused of the sexual assault, in a
11 proceeding under the Juvenile Court Act of 1987, or in an
12 investigation under the Abused and Neglected Child
13 Reporting Act.

14 Records of medical forensic services, including
15 results of examinations and tests, the Illinois State
16 Police Medical Forensic Documentation Forms, the Illinois
17 State Police Patient Discharge Materials, and the Illinois
18 State Police Patient Consent: Collect and Test Evidence or
19 Collect and Hold Evidence Form, shall be maintained by the
20 hospital or approved pediatric health care facility as
21 part of the patient's electronic medical record.

22 Records of medical forensic services of sexual assault
23 survivors under the age of 18 shall be retained by the
24 hospital for a period of 60 years after the sexual assault
25 survivor reaches the age of 18. Records of medical
26 forensic services of sexual assault survivors 18 years of

1 age or older shall be retained by the hospital for a period
2 of 20 years after the date the record was created.

3 Records of medical forensic services may only be
4 disseminated in accordance with Section 6.5 of this Act
5 and other State and federal law.

6 (1.5) An offer to complete the Illinois Sexual Assault
7 Evidence Collection Kit for: (A) any sexual assault
8 survivor 13 years of age or older who presents within a
9 minimum of the last 7 days of the assault or who has
10 disclosed past sexual assault by a specific individual and
11 was in the care of that individual within a minimum of the
12 last 7 days; and (B) any pediatric sexual assault survivor
13 who presents with a complaint of sexual assault within a
14 minimum of 96 hours or who has disclosed past sexual
15 assault by a specific individual and was in the care of
16 that individual within a minimum of 96 hours.

17 (A) Appropriate oral and written information
18 concerning evidence-based guidelines for the
19 appropriateness of evidence collection depending on
20 the sexual development of the sexual assault survivor,
21 the type of sexual assault, and the timing of the
22 sexual assault shall be provided to the sexual assault
23 survivor. ~~Evidence collection is encouraged for~~
24 ~~prepubescent sexual assault survivors who present to a~~
25 ~~hospital or approved pediatric health care facility~~
26 ~~with a complaint of sexual assault within a minimum of~~

1 ~~96 hours after the sexual assault.~~

2 Before January 1, 2024 ~~2023~~, the information
3 required under this subparagraph shall be provided in
4 person by the health care professional providing
5 medical forensic services directly to the sexual
6 assault survivor.

7 On and after January 1, 2024 ~~2023~~, the information
8 required under this subparagraph shall be provided in
9 person by the qualified medical provider providing
10 medical forensic services directly to the sexual
11 assault survivor.

12 The written information provided shall be the
13 information created in accordance with Section 10 of
14 this Act.

15 (B) Following the discussion regarding the
16 evidence-based guidelines for evidence collection in
17 accordance with subparagraph (A), evidence collection
18 must be completed at the sexual assault survivor's
19 request. A sexual assault nurse examiner conducting an
20 examination using the Illinois State Police Sexual
21 Assault Evidence Collection Kit may do so without the
22 presence or participation of a physician.

23 (2) Appropriate oral and written information
24 concerning the possibility of infection, sexually
25 transmitted infection, including an evaluation of the
26 sexual assault survivor's risk of contracting human

1 immunodeficiency virus (HIV) from sexual assault, and
2 pregnancy resulting from sexual assault.

3 (3) Appropriate oral and written information
4 concerning accepted medical procedures, laboratory tests,
5 medication, and possible contraindications of such
6 medication available for the prevention or treatment of
7 infection or disease resulting from sexual assault.

8 (3.5) After a medical evidentiary or physical
9 examination, access to a shower at no cost, unless
10 showering facilities are unavailable.

11 (4) An amount of medication, including HIV
12 prophylaxis, for treatment at the hospital or approved
13 pediatric health care facility and after discharge as is
14 deemed appropriate by the attending physician, an advanced
15 practice registered nurse, or a physician assistant in
16 accordance with the Centers for Disease Control and
17 Prevention guidelines and consistent with the hospital's
18 or approved pediatric health care facility's current
19 approved protocol for sexual assault survivors.

20 (5) Photo documentation of the sexual assault
21 survivor's injuries, anatomy involved in the assault, or
22 other visible evidence on the sexual assault survivor's
23 body to supplement the medical forensic history and
24 written documentation of physical findings and evidence
25 beginning July 1, 2019. Photo documentation does not
26 replace written documentation of the injury.

1 (6) Written and oral instructions indicating the need
2 for follow-up examinations and laboratory tests after the
3 sexual assault to determine the presence or absence of
4 sexually transmitted infection.

5 (7) Referral by hospital or approved pediatric health
6 care facility personnel for appropriate counseling.

7 (8) Medical advocacy services provided by a rape
8 crisis counselor whose communications are protected under
9 Section 8-802.1 of the Code of Civil Procedure, if there
10 is a memorandum of understanding between the hospital or
11 approved pediatric health care facility and a rape crisis
12 center. With the consent of the sexual assault survivor, a
13 rape crisis counselor shall remain in the exam room during
14 the medical forensic examination.

15 (9) Written information regarding services provided by
16 a Children's Advocacy Center and rape crisis center, if
17 applicable.

18 (10) A treatment hospital, a treatment hospital with
19 approved pediatric transfer, an out-of-state hospital as
20 defined in Section 5.4, or an approved pediatric health
21 care facility shall comply with the rules relating to the
22 collection and tracking of sexual assault evidence adopted
23 by the Illinois State Police under Section 50 of the
24 Sexual Assault Evidence Submission Act.

25 (11) Written information regarding the Illinois State
26 Police sexual assault evidence tracking system.

1 (a-7) By January 1, 2024 ~~2023~~, every hospital with a
2 treatment plan approved by the Department shall employ or
3 contract with a qualified medical provider to initiate medical
4 forensic services to a sexual assault survivor within 90
5 minutes of the patient presenting to the treatment hospital or
6 treatment hospital with approved pediatric transfer. The
7 provision of medical forensic services by a qualified medical
8 provider shall not delay the provision of life-saving medical
9 care.

10 (b) Any person who is a sexual assault survivor who seeks
11 medical forensic services or follow-up healthcare under this
12 Act shall be provided such services without the consent of any
13 parent, guardian, custodian, surrogate, or agent. If a sexual
14 assault survivor is unable to consent to medical forensic
15 services, the services may be provided under the Consent by
16 Minors to Health Care Services ~~Medical Procedures~~ Act, the
17 Health Care Surrogate Act, or other applicable State and
18 federal laws.

19 (b-5) Every hospital or approved pediatric health care
20 facility providing medical forensic services to sexual assault
21 survivors shall issue a voucher to any sexual assault survivor
22 who is eligible to receive one in accordance with Section 5.2
23 of this Act. The hospital shall make a copy of the voucher and
24 place it in the medical record of the sexual assault survivor.
25 The hospital shall provide a copy of the voucher to the sexual
26 assault survivor after discharge upon request.

1 (c) Nothing in this Section creates a physician-patient
2 relationship that extends beyond discharge from the hospital
3 or approved pediatric health care facility.

4 (d) This Section is effective on and after January 1, 2024
5 ~~2022~~.

6 (Source: P.A. 101-81, eff. 7-12-19; 101-377, eff. 8-16-19;
7 101-634, eff. 6-5-20; 102-22, eff. 6-25-21; 102-538, eff.
8 8-20-21; 102-674, eff. 11-30-21; revised 12-16-21.)

9 (410 ILCS 70/5-1)

10 (Section scheduled to be repealed on December 31, 2023)

11 Sec. 5-1. Minimum requirements for medical forensic
12 services provided to sexual assault survivors by hospitals,
13 approved pediatric health care facilities, and approved
14 federally qualified health centers.

15 (a) Every hospital, approved pediatric health care
16 facility, and approved federally qualified health center
17 providing medical forensic services to sexual assault
18 survivors under this Act shall, as minimum requirements for
19 such services, provide, with the consent of the sexual assault
20 survivor, and as ordered by the attending physician, an
21 advanced practice registered nurse, or a physician assistant,
22 the services set forth in subsection (a-5).

23 Beginning January 1, 2023, a qualified medical provider
24 must provide the services set forth in subsection (a-5).

25 (a-5) A treatment hospital, a treatment hospital with

1 approved pediatric transfer, or an approved pediatric health
2 care facility, or an approved federally qualified health
3 center shall provide the following services in accordance with
4 subsection (a):

5 (1) Appropriate medical forensic services without
6 delay, in a private, age-appropriate or
7 developmentally-appropriate space, required to ensure the
8 health, safety, and welfare of a sexual assault survivor
9 and which may be used as evidence in a criminal proceeding
10 against a person accused of the sexual assault, in a
11 proceeding under the Juvenile Court Act of 1987, or in an
12 investigation under the Abused and Neglected Child
13 Reporting Act.

14 Records of medical forensic services, including
15 results of examinations and tests, the Illinois State
16 Police Medical Forensic Documentation Forms, the Illinois
17 State Police Patient Discharge Materials, and the Illinois
18 State Police Patient Consent: Collect and Test Evidence or
19 Collect and Hold Evidence Form, shall be maintained by the
20 hospital or approved pediatric health care facility as
21 part of the patient's electronic medical record.

22 Records of medical forensic services of sexual assault
23 survivors under the age of 18 shall be retained by the
24 hospital for a period of 60 years after the sexual assault
25 survivor reaches the age of 18. Records of medical
26 forensic services of sexual assault survivors 18 years of

1 age or older shall be retained by the hospital for a period
2 of 20 years after the date the record was created.

3 Records of medical forensic services may only be
4 disseminated in accordance with Section 6.5-1 of this Act
5 and other State and federal law.

6 (1.5) An offer to complete the Illinois Sexual Assault
7 Evidence Collection Kit for: (A) any sexual assault
8 survivor 13 years of age or older who presents within a
9 minimum of the last 7 days of the assault or who has
10 disclosed past sexual assault by a specific individual and
11 was in the care of that individual within a minimum of the
12 last 7 days; and (B) any pediatric sexual assault survivor
13 who presents with a complaint of sexual assault within a
14 minimum of 96 hours or who has disclosed past sexual
15 assault by a specific individual and was in the care of
16 that individual within a minimum of 96 hours.

17 (A) Appropriate oral and written information
18 concerning evidence-based guidelines for the
19 appropriateness of evidence collection depending on
20 the sexual development of the sexual assault survivor,
21 the type of sexual assault, and the timing of the
22 sexual assault shall be provided to the sexual assault
23 survivor. ~~Evidence collection is encouraged for~~
24 ~~prepubescent sexual assault survivors who present to a~~
25 ~~hospital or approved pediatric health care facility~~
26 ~~with a complaint of sexual assault within a minimum of~~

1 ~~96 hours after the sexual assault.~~

2 Before January 1, 2023, the information required
3 under this subparagraph shall be provided in person by
4 the health care professional providing medical
5 forensic services directly to the sexual assault
6 survivor.

7 On and after January 1, 2023, the information
8 required under this subparagraph shall be provided in
9 person by the qualified medical provider providing
10 medical forensic services directly to the sexual
11 assault survivor.

12 The written information provided shall be the
13 information created in accordance with Section 10-1 of
14 this Act.

15 (B) Following the discussion regarding the
16 evidence-based guidelines for evidence collection in
17 accordance with subparagraph (A), evidence collection
18 must be completed at the sexual assault survivor's
19 request. A sexual assault nurse examiner conducting an
20 examination using the Illinois State Police Sexual
21 Assault Evidence Collection Kit may do so without the
22 presence or participation of a physician.

23 (2) Appropriate oral and written information
24 concerning the possibility of infection, sexually
25 transmitted infection, including an evaluation of the
26 sexual assault survivor's risk of contracting human

1 immunodeficiency virus (HIV) from sexual assault, and
2 pregnancy resulting from sexual assault.

3 (3) Appropriate oral and written information
4 concerning accepted medical procedures, laboratory tests,
5 medication, and possible contraindications of such
6 medication available for the prevention or treatment of
7 infection or disease resulting from sexual assault.

8 (3.5) After a medical evidentiary or physical
9 examination, access to a shower at no cost, unless
10 showering facilities are unavailable.

11 (4) An amount of medication, including HIV
12 prophylaxis, for treatment at the hospital or approved
13 pediatric health care facility and after discharge as is
14 deemed appropriate by the attending physician, an advanced
15 practice registered nurse, or a physician assistant in
16 accordance with the Centers for Disease Control and
17 Prevention guidelines and consistent with the hospital's
18 or approved pediatric health care facility's current
19 approved protocol for sexual assault survivors.

20 (5) Photo documentation of the sexual assault
21 survivor's injuries, anatomy involved in the assault, or
22 other visible evidence on the sexual assault survivor's
23 body to supplement the medical forensic history and
24 written documentation of physical findings and evidence
25 beginning July 1, 2019. Photo documentation does not
26 replace written documentation of the injury.

1 (6) Written and oral instructions indicating the need
2 for follow-up examinations and laboratory tests after the
3 sexual assault to determine the presence or absence of
4 sexually transmitted infection.

5 (7) Referral by hospital or approved pediatric health
6 care facility personnel for appropriate counseling.

7 (8) Medical advocacy services provided by a rape
8 crisis counselor whose communications are protected under
9 Section 8-802.1 of the Code of Civil Procedure, if there
10 is a memorandum of understanding between the hospital or
11 approved pediatric health care facility and a rape crisis
12 center. With the consent of the sexual assault survivor, a
13 rape crisis counselor shall remain in the exam room during
14 the medical forensic examination.

15 (9) Written information regarding services provided by
16 a Children's Advocacy Center and rape crisis center, if
17 applicable.

18 (10) A treatment hospital, a treatment hospital with
19 approved pediatric transfer, an out-of-state hospital as
20 defined in Section 5.4, or an approved pediatric health
21 care facility shall comply with the rules relating to the
22 collection and tracking of sexual assault evidence adopted
23 by the Department of State Police under Section 50 of the
24 Sexual Assault Evidence Submission Act.

25 (11) Written information regarding the Illinois State
26 Police sexual assault evidence tracking system.

1 (a-7) By January 1, 2023, every hospital with a treatment
2 plan approved by the Department shall employ or contract with
3 a qualified medical provider to initiate medical forensic
4 services to a sexual assault survivor within 90 minutes of the
5 patient presenting to the treatment hospital or treatment
6 hospital with approved pediatric transfer. The provision of
7 medical forensic services by a qualified medical provider
8 shall not delay the provision of life-saving medical care.

9 (b) Any person who is a sexual assault survivor who seeks
10 medical forensic services or follow-up healthcare under this
11 Act shall be provided such services without the consent of any
12 parent, guardian, custodian, surrogate, or agent. If a sexual
13 assault survivor is unable to consent to medical forensic
14 services, the services may be provided under the Consent by
15 Minors to Medical Procedures Act, the Health Care Surrogate
16 Act, or other applicable State and federal laws.

17 (b-5) Every hospital, approved pediatric health care
18 facility, or approved federally qualified health center
19 providing medical forensic services to sexual assault
20 survivors shall issue a voucher to any sexual assault survivor
21 who is eligible to receive one in accordance with Section
22 5.2-1 of this Act. The hospital, approved pediatric health
23 care facility, or approved federally qualified health center
24 shall make a copy of the voucher and place it in the medical
25 record of the sexual assault survivor. The hospital, approved
26 pediatric health care facility, or approved federally

1 qualified health center shall provide a copy of the voucher to
2 the sexual assault survivor after discharge upon request.

3 (c) Nothing in this Section creates a physician-patient
4 relationship that extends beyond discharge from the hospital,
5 or approved pediatric health care facility, or approved
6 federally qualified health center.

7 (d) This Section is repealed on December 31, 2023.

8 (Source: P.A. 101-634, eff. 6-5-20; 102-22, eff. 6-25-21;
9 102-674, eff. 11-30-21.)

10 (410 ILCS 70/5.4)

11 Sec. 5.4. Out-of-state hospitals.

12 (a) Nothing in this Section shall prohibit the transfer of
13 a patient in need of medical services from a hospital that has
14 been designated as a trauma center by the Department in
15 accordance with Section 3.90 of the Emergency Medical Services
16 (EMS) Systems Act.

17 (b) A transfer hospital, treatment hospital with approved
18 pediatric transfer, or approved pediatric health care facility
19 may transfer a sexual assault survivor to an out-of-state
20 hospital that is located in a county that borders Illinois ~~has~~
21 ~~been designated as a trauma center by the Department under~~
22 ~~Section 3.90 of the Emergency Medical Services (EMS) Systems~~
23 ~~Act~~ if the out-of-state hospital: (1) submits an areawide
24 treatment plan approved by the Department; and (2) has
25 certified the following to the Department in a form and manner

1 prescribed by the Department that the out-of-state hospital
2 will:

3 (i) consent to the jurisdiction of the Department in
4 accordance with Section 2.06 of this Act;

5 (ii) comply with all requirements of this Act
6 applicable to treatment hospitals, including, but not
7 limited to, offering evidence collection to: (A) any
8 Illinois sexual assault survivor 13 years of age or older
9 who presents with a complaint of sexual assault within a
10 minimum of the last 7 days or who has disclosed past sexual
11 assault by a specific individual and was in the care of
12 that individual within a minimum of the last 7 days and not
13 billing the sexual assault survivor for medical forensic
14 services or 90 days of follow-up healthcare; and (B) any
15 Illinois pediatric sexual assault survivor who presents
16 with a complaint of sexual assault within a minimum of 96
17 hours or who has disclosed past sexual assault by a
18 specific individual and was in the care of that individual
19 within a minimum of 96 hours and not billing the sexual
20 assault survivor for medical forensic services or 90 days
21 of follow-up healthcare;

22 (iii) use an Illinois State Police Sexual Assault
23 Evidence Collection Kit to collect forensic evidence from
24 an Illinois sexual assault survivor;

25 (iv) ensure its staff cooperates with Illinois law
26 enforcement agencies and are responsive to subpoenas

1 issued by Illinois courts; and

2 (v) provide appropriate transportation upon the
3 completion of medical forensic services back to the
4 transfer hospital or treatment hospital with pediatric
5 transfer where the sexual assault survivor initially
6 presented seeking medical forensic services, unless the
7 sexual assault survivor chooses to arrange his or her own
8 transportation.

9 (c) Subsection (b) of this Section is inoperative on and
10 after January 1, 2029 ~~2024~~.

11 (Source: P.A. 100-775, eff. 1-1-19.)".