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July 28, 2017 Volume 41, Issue 30

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INTRODUCTION

The *Illinois Register* is the official state document for publishing public notice of rulemaking activity initiated by State governmental agencies. The table of contents is arranged categorically by rulemaking activity and alphabetically by agency within each category.

Rulemaking activity consists of proposed or adopted new rules; amendments to or repealers of existing rules; and rules promulgated by emergency or peremptory action. Executive Orders and Proclamations issued by the Governor; notices of public information required by State Statute; and activities (meeting agendas; Statements of Objection or Recommendation, etc.) of the Joint Committee on Administrative Rules (JCAR), a legislative oversight committee which monitors the rulemaking activities of State Agencies; is also published in the Register.

The Register is a weekly update of the Illinois Administrative Code (a compilation of the rules adopted by State agencies). The most recent edition of the Code, along with the Register, comprise the most current accounting of State agencies' rulemakings.

The *Illinois Register* is the property of the State of Illinois, granted by the authority of the Illinois Administrative Procedure Act [5 ILCS 100/1-1, et seq.].

ILLINOIS REGISTER PUBLICATION SCHEDULE FOR 2017

Issue#	Rules Due Date	Date of Issue
1	December 27, 2016	January 6, 2017
2	January 3, 2017	January 13, 2017
3	January 9, 2017	January 20, 2017
4	January 17, 2017	January 27, 2017
5	January 23, 2017	February 3, 2017
6	January 30, 2017	February 10, 2017
7	February 6, 2017	February 17, 2017
8	February 14, 2017	February 24, 2017
9	February 21, 2017	March 3, 2017
10	February 27, 2017	March 10, 2017
11	March 6, 2017	March 17, 2017
12	March 13, 2017	March 24, 2017
13	March 20, 2017	March 31, 2017
14	March 27, 2017	April 7, 2017
15	April 3, 2017	April 14, 2017
16	April 10, 2017	April 21, 2017
17	April 17, 2017	April 28, 2017
18	April 24, 2017	May 5, 2017
19	May 1, 2017	May 12, 2017
20	May 8, 2017	May 19, 2017

21	May 15, 2017	May 26, 2017
22	May 22, 2017	June 2, 2017
23	May 30, 2017	June 9, 2017
24	June 5, 2017	June 16, 2017
25	June 12, 2017	June 23, 2017
26	June 19, 2017	June 30, 2017
27	June 26, 2017	July 7, 2017
28	July 3, 2017	July 14, 2017
29	July 10, 2017	July 21, 2017
30	July 17, 2017	July 28, 2017
31	July 24, 2017	August 4, 2017
32	July 31, 2017	August 11, 2017
33	August 7, 2017	August 18, 2017
34	August 14, 2017	August 25, 2017
35	August 21, 2017	September 1, 2017
36	August 28, 2017	September 8, 2017
37	September 5, 2017	September 15, 2017
38	September 11, 2017	September 22, 2017
39	September 18, 2017	September 29, 2017
40	September 25, 2017	October 6, 2017
41	October 2, 2017	October 13, 2017
42	October 10, 2017	October 20, 2017
43	October 16, 2017	October 27, 2017
44	October 23, 2017	November 3, 2017
45	October 30, 2017	November 13, 2017
46	November 6, 2017	November 17, 2017
47	November 13, 2017	November 27, 2017
48	November 20, 2017	December 1, 2017
49	November 27, 2017	December 8, 2017
50	December 4, 2017	December 15, 2017
51	December 11, 2017	December 26, 2017
52	December 18, 2017	December 29, 2017

DEPARTMENT OF FINANCIAL AND PROFESSIONAL REGULATION

NOTICE OF PROPOSED AMENDMENTS

- 1) Heading of the Part: Schedules of Maximum Rates to be Charged for Check Cashing and Writing of Money Orders by Community and Ambulatory Currency Exchanges
- 2) Code Citation: 38 Ill. Adm. Code 130
- 3)

<u>Section Numbers</u> :	<u>Proposed Actions</u> :
130.10	Amendment
130.20	Amendment
130.30	Amendment
130.40	Amendment
130.50	Amendment
130.60	Amendment
- 4) Statutory Authority: Implementing Sections 19.3 and 19.4 and authorized by Section 19 of the Currency Exchange Act [205 ILCS 405].
- 5) A Complete Description of the Subjects and Issues Involved: Currency exchange entities are regulated by the Illinois Department of Financial and Professional Regulation, Division of Financial Institutions ("Division"), pursuant to the Currency Exchange Act [205 ILCS 405], Section 19.3 of the Act provides that the Secretary shall set the maximum rate currency exchanges are allowed to charge for cashing checks. In February 2017, the currency exchange industry petitioned the Secretary for an increase in the maximum allowable rate for check-cashing. The request was granted and a hearing was held in Chicago on May 9, 2017. The currency exchange industry presented witnesses who offered testimony in support of increasing the check-cashing rates. The Woodstock Institute also appeared and expressed their objections to increasing the check-cashing rates. The Division issued its Statement of Findings on June 19, 2017, indicating that a rate increase is appropriate and stipulating that the Division shall have 30 days thereafter to initiate rulemaking to amend 38 Ill. Admin. Code 130 to codify the new rates.

Pursuant to the Statement of Findings: for all checks \$100 or less, the rate will be an amount equal to 2.5% of the face amount of the check plus a service charge of \$1.00; for all checks \$100.01 to \$1,250.00, the rate will be an amount equal to 2.5% of the face amount of the check; for all checks \$1,250.01 and greater, the rate will be an amount equal to 3% of the face amount of the check.

This rulemaking will amend Section 130.30 by updating the allowable checking-cashing rates, making numerous non-substantive changes to reflect the consolidation of agencies

DEPARTMENT OF FINANCIAL AND PROFESSIONAL REGULATION

NOTICE OF PROPOSED AMENDMENTS

into the Department of Financial and Professional Regulation and the creation of the Division of Financial Institutions, and updating statutory citations.

- 6) Published studies or reports, and sources of underlying data, used to compose this rulemaking: Statement of Findings in response to the Verified Petition to Increase the Maximum Allowable Check-Cashing Rate for Community Currency Exchanges. Please also see the Notice of Public Information published in the next issue of the *Illinois Register*.
- 7) Will this rulemaking replace any emergency rule currently in effect? No
- 8) Does this rulemaking contain an automatic repeal date? No
- 9) Does this rulemaking contain incorporations by reference? No
- 10) Are there any other rulemakings pending on this Part? No
- 11) Statement of Statewide Policy Objective: This rulemaking will not require a local government to establish, expand or modify its activities in such a way as to necessitate additional expenditures from local revenues.
- 12) Time, Place, and Manner in which interested persons may comment on this proposed rulemaking: Persons who wish to comment on this proposed rulemaking may submit written comments no later than 45 days after the publication of this Notice to:

Department of Financial and Professional Regulation
Attention: Craig Cellini
320 West Washington, 3rd Floor
Springfield IL 62786

217/785-0813
fax: 217/557-4451

All written comments received within 45 days after this issue of the *Illinois Register* will be considered.

- 13) Initial Regulatory Flexibility Analysis:

DEPARTMENT OF FINANCIAL AND PROFESSIONAL REGULATION

NOTICE OF PROPOSED AMENDMENTS

- A) Types of small businesses, small municipalities and not-for-profit corporations affected: Community and Ambulatory Currency Exchanges
 - B) Reporting, bookkeeping or other procedures required for compliance: Please review the proposed amendments to this Part.
 - C) Types of professional skills necessary for compliance: Administrative/clerical
- 14) Regulatory Agenda on which this rulemaking was summarized: These amendments were not included on either of the 2 most recent agendas because: IDFPR could not have anticipated the currency exchange industry having requested an increase in rates charged for cashing checks.

The full text of the Proposed Amendments begins on the next page:

DEPARTMENT OF FINANCIAL AND PROFESSIONAL REGULATION

NOTICE OF PROPOSED AMENDMENTS

TITLE 38: FINANCIAL INSTITUTIONS

CHAPTER I: DEPARTMENT OF FINANCIAL AND PROFESSIONAL REGULATION

PART 130

SCHEDULES OF MAXIMUM RATES TO BE CHARGED FOR
CHECK CASHING AND WRITING OF MONEY ORDERS BY
COMMUNITY AND AMBULATORY CURRENCY EXCHANGES

Section

130.10	Authority
130.20	Purposes
130.30	Maximum Rate – Check Cashing
130.40	Maximum Rate – Issuance of Money Orders
130.50	Disclosure Requirements – Check Cashing and Money Orders
130.60	Effective Date

AUTHORITY: Implementing Sections 19.3 and 19.4 and authorized by Section 19 of the Currency Exchange Act [205 ILCS 405].

SOURCE: Adopted at 2 Ill. Reg. 5, p. 1, effective January 27, 1978; amended at 4 Ill. Reg. 51, p. 104, effective January 1, 1981; emergency amendment at 5 Ill. Reg. 265, effective December 19, 1980, for a maximum of 150 days; codified at 7 Ill. Reg. 11721; amended at 9 Ill. Reg. 1375, effective January 17, 1985; amended at 10 Ill. Reg. 11892, effective July 1, 1986; amended at 20 Ill. Reg. 13596, effective October 1, 1996; amended at 32 Ill. Reg. 170, effective December 21, 2007; amended at 41 Ill. Reg. _____, effective _____.

Section 130.10 Authority

These rates are issued by the Director of the Department of Financial and Professional Regulation-Division of Financial Institutions (hereinafter referred to as the "Director") pursuant to Sections 19.3 and 19.4 of the Currency Exchange Act [205 ILCS 405] (the Act)~~(Ill. Rev. Stat. 1983, ch. 16 1/2, pars. 49.3 and 49.4)~~ and Section 5-35 of the Illinois Administrative Procedure Act [5 ILCS 100]~~(Ill. Rev. Stat. 1991, ch. 127, par. 1005-35)~~.

(Source: Amended at 41 Ill. Reg. _____, effective _____)

Section 130.20 Purposes

Pursuant to the authority set forth in Section 130.10, this Part establishes the~~these Rules~~

DEPARTMENT OF FINANCIAL AND PROFESSIONAL REGULATION

NOTICE OF PROPOSED AMENDMENTS

~~accomplish the purpose of setting~~ maximum rates ~~that which~~ can be charged by community and ambulatory currency exchanges for check cashing and writing money orders.

(Source: Amended at 41 Ill. Reg. _____, effective _____)

Section 130.30 Maximum Rate – Check Cashing

- a) The Maximum Rate. The maximum rate to be charged by community and ambulatory currency exchanges for cashing any check shall not exceed the following:
- 1) For all checks \$100 or less, an amount equal to ~~2.5%~~1.4% of the face amount of the check plus a service charge of \$1.00;
 - 2) For all checks \$100.01 ~~through \$1250 or greater~~, an amount equal to ~~2.5%~~2.25% of the face amount of the check;:-
 - 3) For all checks \$1250.01 or greater, an amount equal to 3% of the face amount of the check.
- b) Prohibition. No community or ambulatory currency exchange may charge a fee for cashing any check in excess of the maximum rate ~~as~~ set forth in subsection (a).

(Source: Amended at 41 Ill. Reg. _____, effective _____)

Section 130.40 Maximum Rate – Issuance of Money Orders

- a) The Maximum Rate. The Maximum rate to be charged by community and ambulatory currency exchanges for issuing any money order shall not exceed an amount equal to 1% of the face amount of the money order plus a service charged of ~~seventy five cents~~ (\$.75).
- b) Prohibition. No community or ambulatory currency exchange may charge a fee for issuing any money order in excess of the maximum rate ~~as~~ set forth in subsection (a) ~~above~~.

(Source: Amended at 41 Ill. Reg. _____, effective _____)

Section 130.50 Disclosure Requirements – Check Cashing And Money Orders

DEPARTMENT OF FINANCIAL AND PROFESSIONAL REGULATION

NOTICE OF PROPOSED AMENDMENTS

- a) Charging by ~~Means~~means of ~~Brackets~~brackets – Definition. Charging by means of brackets is a method of establishing fees for cashing checks or issuing money orders ~~in which~~whereby a community or ambulatory currency exchange establishes a set fee to be charged uniformly for cashing all checks or issuing all money orders within a certain range of stated face amounts.
- b) Checks – \$500.~~00~~ or ~~Less~~less. For all checks of the face amount of \$500.~~00~~ or less, each community and ambulatory currency exchange must post and display to the public the fees to be charged for cashing ~~those~~said checks by means of brackets as defined in ~~subsection~~Subsection (a)~~-above~~, provided that no fee charged within any bracket shall exceed the maximum rate ~~as~~set forth in Section 130.30(a), and provided further, that all fees and brackets for all checks of the face amount of \$500.~~00~~ or less must be fully and completely stated without resort to language such as "repeat" or its equivalent.
- c) Checks in Excess of \$500.~~00~~. For all checks of face amounts in excess of \$500.~~00~~, community and ambulatory currency exchanges need not, but may, post and display to the public the fees to be charged by means of brackets ~~as~~set forth in ~~subsections~~(a) and (b)~~-above~~. They must post and display to the public a statement setting forth the rate of fees to be charged for cashing checks in excess of their posted and displayed bracketed fees, and ~~the~~such posting and display must be done without resort to language such as "repeat" or its equivalent. In no event shall the rate or fee to be charged exceed the maximum rate for cashing checks ~~as~~set forth in Section 130.30(a).
- d) Money Orders – \$500 ~~or 00 00~~ Less. For all money orders of the face amount of \$500.~~00~~ or less, each community and ambulatory currency exchange must post and display to the public the fees to be charged to issue ~~said~~money orders by means of brackets as defined in ~~subsection~~(a)~~-above~~, provided that no fee charged within any bracket shall exceed the maximum rate as set forth in Section 130.40(a), and provided further that all fees and brackets for all money orders of the face amount of \$500.~~00~~ or less must be fully and completely stated without resort to language such as "repeat" or its equivalent.
- e) Money Orders ~~in~~Excess of \$500.~~00~~. For all money orders of face amounts in excess of \$500.~~00~~, community and ambulatory currency exchanges need not, but may, post and display to the public the fees to be charged by means of brackets as set forth in ~~subsections~~(a) and (d)~~-above~~. They must post and display to the

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public a statement setting forth the rate or fees to be charged for issuing money orders in excess of their posted and displayed bracketed fees, and ~~thesuch~~ posting and display must be done without resort to language such as "repeat" or its equivalent. In no event shall the rate or fee to be charged exceed the maximum rate for issuing money orders ~~as~~-set forth in Section 130.40(a). Nothing in this ~~PartRule~~ shall be construed to modify, amend or abrogate any rule or regulation of the Department of Financial ~~and Professional RegulationInstitutions~~ relating to the issuance of money orders.

- f) Posting Requirements. The public posting and display ~~as~~-required by ~~subsections Sections 130.50~~(b), (c) and (e) must be complete, detailed and unambiguous in lettering and numerals of no less than one-half inch in height and ~~thesuch~~ posting or display must be in a conspicuous place on the premises of the community currency exchange or in the location being served by the ambulatory currency exchange ~~in~~ such ~~a~~ manner that the posting or display is unobstructed and is clearly and easily visible and legible to the customers of the community or ambulatory currency exchange.
- g) Filing of Fees with Director. Within ~~thirty (30)~~ days ~~afterof~~ licensure, each community and ambulatory currency exchange must file with the Director ~~of the Department of Financial Institutions~~a full, complete and accurate statement of all charges and fees for rendering all services authorized by the Currency Exchange Act, ~~of the State of Illinois~~ including, but not limited to, all fees and charges for cashing checks and issuing money orders. Within ~~thirty (30)~~ days ~~afterof~~ the effective date of either any increase or decrease in any fees or charges for rendering any service authorized by the ~~Currency Exchange Act of the State of Illinois~~, including, but not limited to, fees and charges for cashing checks and issuing money orders, community and ambulatory currency exchanges must file with the Director a full, complete and accurate statement of all such increases or decreases.

(Source: Amended at 41 Ill. Reg. _____, effective _____)

Section 130.60 Effective Date

The Schedules of Maximum Rates to be Charged for Check Cashing and Writing Money Orders by Community and Ambulatory Currency Exchanges will become effective upon adoption of these 2017 amendatory changes~~be effective as of January 1, 1997.~~

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NOTICE OF PROPOSED AMENDMENTS

(Source: Amended at 41 Ill. Reg. _____, effective _____)

OFFICE OF THE COMPTROLLER

NOTICE OF PROPOSED RULES

- 1) Heading of the Part: Payments Remitted on Behalf of a Pension Fund
- 2) Code Citation: 74 Ill. Adm. Code 295
- 3)

<u>Section Numbers</u> :	<u>Proposed Actions</u> :
295.100	New Section
295.200	New Section
295.300	New Section
295.400	New Section
295.500	New Section
295.600	New Section
295.700	New Section
295.800	New Section
- 4) Statutory Authority: Implementing and authorized by Sections 3-125, 4-118, 5-168, 6-165, 7-172.1, 8-173, 9-184.5, 10-107.5, 11-169, 12-149.5, 13-503.5, and 22-104 of the Illinois Pension Code [40 ILCS 5] and authorized by Section 21 of the State Comptroller Act [15 ILCS 405].
- 5) A Complete Description of the Subjects and Issues Involved: PAs 96-1495, 99-8 and 100-23 provide that upon certification to the Illinois State Comptroller of delinquent payments from a unit of local government owed to a pension fund or retirement plan, the Comptroller shall reduce any State funds payable to the unit of local government and divert payment of the certified amounts to the pension fund or retirement plan owed the delinquent payments. These rules outline the procedures for this process.
- 6) Published studies or reports, and sources of underlying data used to compose this rulemaking: None
- 7) Will this proposed rulemaking replace an emergency rule currently in effect? No
- 8) Does this rulemaking contain an automatic repeal date? No
- 9) Does this proposed rulemaking contain incorporations by reference? No
- 10) Are there any other rulemakings pending on this Part? No
- 11) Statement of Statewide Policy Objective: This rulemaking does not create or expand a State mandate.

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- 12) Time, Place, and Manner in which interested persons may comment on this proposed rulemaking:

Whitney Rosen
General Counsel
Office of the Comptroller
325 W. Adams
Springfield IL 62704

217/782-6000
email: Whitney.Rosen@illinoiscomptroller.gov

- 13) Initial Regulatory Flexibility Analysis:

- A) Types of small businesses, small municipalities, and not-for-profit corporations affected: This rulemaking has the potential to impact all small municipalities that participate in a pension fund or a retirement plan under the Code.
- B) Reporting, bookkeeping or other procedures required for compliance: The funds must comply with the procedural requirements of this Part.
- C) Types of professional skills necessary for compliance: None

- 14) This rule was not included on either of the 2 most recent agendas because: The Illinois Office of the Comptroller did not anticipate the filing of this rulemaking at the time for submittal of a regulatory agenda. Accordingly, the Illinois Office of the Comptroller did not summarize the rulemaking in a regulatory agenda.

The full Text of the Proposed Rules begins on the next page:

OFFICE OF THE COMPTROLLER

NOTICE OF PROPOSED RULES

TITLE 74: PUBLIC FINANCE
CHAPTER II: COMPTROLLER

PART 295

PAYMENTS REMITTED ON BEHALF OF A PENSION FUND

Section

295.100	Foreward
295.200	Definitions
295.300	Notification of a Fund's Claim Under Applicable Sections of the Code
295.400	Warrants Subject to Remittance
295.500	Processing a Certification Under Applicable Sections of the Code
295.600	Ascertaining the Amount Due and Payable to the Claimant
295.700	Notification of the Comptroller's Exercise of Remittance
295.800	Record Retention

AUTHORITY: Implementing and authorized by Sections 3-125, 4-118, 5-168, 6-165, 7-172.1, 8-173, 9-184.5, 10-107.5, 11-169, 12-149.5, 13-503.5 and 22-104 of the Illinois Pension Code [40 ILCS 5] and authorized by Section 21 of the State Comptroller Act [15 ILCS 405].

SOURCE: Adopted at 41 Ill. Reg. _____, effective _____.

Section 295.100 Foreward

This Part is adopted for the purpose of establishing procedures for remitting certified amounts delinquent to claimants in accordance with Articles 3, 4, 5, 6, 7, 8, 9, 10, 11, 12, 13 and 22 of the Illinois Pension Code.

Section 295.200 Definitions

As used in this Part, unless the context indicates otherwise, the following terms shall have the meanings specified:

"Act" means the "State Comptroller Act" [15 ILCS 405].

"Applicable Sections of the Code" means Code Sections 3-125, 4-118, 5-168, 6-165, 7-172.1, 8-173, 9-184.5, 10-107.5, 11-169, 12-149.5, 13-503.5 and 22-104.

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"Certified Amount Delinquent" means the amount of delinquent payments certified by a claimant pursuant to applicable Sections of the Code and this Part.

"Chief Executive Officer" means the President of the Board of Trustees of the fund or retirement plan.

"Claimant" means a pension fund or retirement plan authorized by the Code (i.e., Chicago and downstate police, firefighters and municipal employees, Cook County employees, and various other local government employees) to certify amounts delinquent and claim remittance under applicable Sections of the Code.

"Claim Eligible to be Remitted" means an amount authorized by applicable Sections of the Code to be remitted by the Comptroller that represents fund contributions certified by a claimant as delinquent.

"Code" means the Illinois Pension Code [40 ILCS 5].

"Comptroller" means the Comptroller of the State of Illinois or any employee of the Office of the Comptroller authorized by the Comptroller to perform the functions and duties required by the Act, the Code or this Part.

"Gross Amount of the Warrant" means that amount of money for which a State agency has authorized the Comptroller to order the payment.

"Payee" means any person who will receive payment in the form of a warrant from the Comptroller, as identified by the Government Unit Code or Federal Employer's Identification Number (FEIN) within a statement of notification under Section 295.300.

"Payee Subject to the Remittance" means the payee of any warrant from which the Comptroller has reduced a claim eligible to be remitted.

"Person" means any individual, corporation, company, association, firm, partnership, society, joint stock company, unit of local government or any other organization.

"Received a Voucher" means that point in time when the Comptroller has physically received the voucher in-house and has date-stamped the voucher.

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"Remittance" means a contrary claim or demand by which a given person's claim to a warrant of the Comptroller may be lessened or cancelled.

Section 295.300 Notification of a Fund's Claim Under Applicable Sections of the Code

- a) A claimant seeking remittance under applicable Sections of the Code shall notify the Comptroller in accordance with this Section.
- b) The Comptroller will not process a remittance under applicable Sections of the Code until the Comptroller has received a statement of notification from a claimant certifying that the certified amount delinquent has been established through notice and opportunity to be heard.
- c) For purposes of the applicable Sections of the Code and this Part, "statement of notification" of a claim eligible to be remitted shall be deemed to occur when the claimant in favor of which the claim has arisen has certified and submitted to the Comptroller the following information:
 - 1) the name and FEIN or Government Unit Code for the person against whom the claim exists;
 - 2) the certified amount delinquent then due and payable to the fund;
 - 3) the reason why there is an amount due to the fund;
 - 4) the time period to which the claim is attributable;
 - 5) a description of the type of notification given to the person against whom the claim exists and the type of opportunity to be heard afforded that person;
 - 6) a statement as to the outcome of any hearings or other proceedings held to establish the claim, or a statement that no hearing was requested; and
 - 7) the date of the final determination of the claim.
- d) The statement of notification shall be certified by the claimant's Chief Executive Officer. The authority to execute the statement of claim required by this Section may be delegated to a responsible person or persons. This delegation of authority

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shall be made on forms provided by the Comptroller and shall contain a signature sample of the persons to whom the delegation is made.

- e) A claimant that has submitted a claim to be remitted must notify the Comptroller as soon as possible, but in no case later than 30 days, after receiving notice of a change in the status of a claim. A change in status may occur when payments are received through other collection methods.

Section 295.400 Warrants Subject to Remittance

- a) Except as prohibited by federal statute, federal regulation or State statute, the Comptroller shall remit the amount the claimant certifies as delinquent from any warrant payable to the payee subject to remittance.
- b) A settlement payment by the State or any of its agencies to release any pending or potential claim against the State is eligible to be remitted.

Section 295.500 Processing a Certification Under Applicable Sections of the Code

This Section governs the processing of a certification under applicable Sections of the Code.

- a) Before making a remittance, the Comptroller shall review the statement of notification provided by the claimant notifying the Comptroller of the certified amounts delinquent.
- b) The Comptroller shall charge the State agency that submits a voucher against which a remittance is applied for the eligible amount of the voucher submitted. The Comptroller shall draw a warrant on the treasury or on other funds held by the State Treasurer in the amount of the claim eligible to be remitted and deposit that warrant into the State Offset Claims Fund. The State Offset Claims Fund is a trust fund established and administered by the Comptroller for the deposit of monies from a person's warrant pursuant to an offset and the subsequent payment of monies back to either the State agency requesting the offset or the original payee. The State Offset Claims Fund shall be used for the Comptroller's deposit of monies back to either the payee subject to the remittance or the claimant. If, after 60 days have elapsed from the date the Comptroller gives notice of the remittance as prescribed in Section 295.600(a), no protest is made by the payee subject to the remittance, the Comptroller shall issue a warrant on the State Offset Claims Fund for the amount of that deposit to the claimant entitled to the

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remittance. If a protest conforming to the requirements of Section 295.600(b) is made, the Comptroller shall not issue the warrant to the claimant until the Comptroller ascertains the amount due and payable as provided in Section 295.600(c).

- c) If the Comptroller receives a proper statement of notification for a remittance after he or she has drawn a warrant, the Comptroller shall, if feasible, reprocess the warrant in order that the remittance provided for in this Part may be implemented.
- d) If the amount of the claim eligible to be remitted is less than the amount to which the payee is entitled, the Comptroller shall draw a warrant for the balance of the amount of the voucher against which the Comptroller has made the remittance and shall issue that warrant to the payee subject to the remittance.

Section 295.600 Ascertaining the Amount Due and Payable to the Claimant

- a) Upon processing a claim eligible to be remitted, the Comptroller shall, as soon as is practicable, give notice in writing to the payee subject to remittance. The notice shall:
 - 1) state that a claimant has certified amounts delinquent and claims remittance under applicable Sections of the Code against a warrant on funds held by the State Treasurer that is now or that may become payable to the payee subject to remittance;
 - 2) identify the claimant seeking remittance and the reason for the remittance; and
 - 3) inform the payee that, if he or she does not owe any or all of the amount claimed to be due and payable to the claimant, the payee may, within 60 days after the Comptroller gives notice, make a written protest as prescribed in subsection (b). The notice to the payee shall be deemed to have been given if the notice is enclosed in a envelope plainly addressed to the payee, United States postage fully prepaid, and deposited in the United States mail. For purposes of this Section, the date "the Comptroller gives notice" shall mean the date of withholding, as indicated by the date on the written notice sent to the person subject to offset.

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NOTICE OF PROPOSED RULES

- b) Persons wishing to make a protest of the claim eligible to be remitted shall, within 60 days after the Comptroller gives notice as prescribed in subsection (a), notify the Comptroller in writing of:
- 1) the reasons for contesting the claim;
 - 2) the amount, if any, that the payee acknowledges to be due and payable to the claimant; and
 - 3) any other information that will enable the Comptroller to determine the amount, if any, that is due and payable to the claimant.
- c) Upon receipt of a timely protest, the Comptroller shall determine the amount due and payable to the claimant. This determination shall be made in light of all information relating to the transaction in the possession of the Comptroller and any other information the Comptroller may reasonably request and obtain from the claimant and the payee subject to remittance.
- d) If the Comptroller requests information from the claimant, the claimant shall respond within 90 days after the Comptroller's request. The Comptroller may grant a claimant an additional 90 day extension of time to respond for the following reasons:
- 1) the claimant is actively pursuing further investigation;
 - 2) the matter is in settlement negotiations; or
 - 3) other good cause shown by the claimant.
- e) From the deposit into the State Offset Claim Fund made pursuant to Section 295.500, the Comptroller shall issue a warrant to the claimant for the amount found due and payable to the claimant. Any balance of that deposit shall be returned to the payee subject to remittance.

Section 295.700 Notification of the Comptroller's Exercise of Remittance

Whenever the Comptroller exercises her or his authority under the applicable sections of the Code and this Part, the payee subject to remittance and the agency that originated the voucher shall be sent a copy of the voucher against which the remittance was made, or a written statement

OFFICE OF THE COMPTROLLER

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obtaining all relevant information from the voucher. The written statement shall include the reason for the remittance and shall indicate the amount of money deducted. The payee subject to remittance and the agency originating the voucher shall receive a copy of the written statement; however, the agency may waive its right to receive the written statement and the voucher. At the request of the claimant, the Comptroller shall notify the State agency, by letter or other means, of the remittance, including the amount of money remitted.

Section 295.800 Record Retention

The Comptroller shall retain a copy of the statement of notification prescribed in Section 295.600 in accordance with the State Records Act [5 ILCS 160] and the State Comptroller Act [15 ILCS 405].

STATE UNIVERSITIES RETIREMENT SYSTEM

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- 1) Heading of the Part: Universities Retirement
- 2) Code Citation: 80 Ill. Adm. Code 1600
- 3)

<u>Section Numbers:</u>	<u>Proposed Actions:</u>
1600.500	Amendment
1600.720	Amendment
- 4) Statutory Authority: 40 ILCS 5/15-177
- 5) A Complete Description of the Subjects and Issues Involved: The proposed rulemaking seeks to amend Sections 1600.500, and 1600.720. This rulemaking proposes adding a clarification to 1600.500 and further clarifies 1600.720 to further define election materials.
- 6) Published studies or reports, and sources of underlying data, used to compose this rulemaking: None
- 7) Will this rulemaking replace any emergency rule currently in effect? No
- 8) Does this rulemaking contain an automatic repeal date? No
- 9) Does this rulemaking contain incorporations by reference? No
- 10) Are there any other rulemakings pending on this Part? Yes

<u>Sections:</u>	<u>Proposed Actions:</u>	<u>Illinois Register Citations:</u>
1600.140	Amendment	41 Ill. Reg. 808; February 3, 2017
1600.550	Amendment	41 Ill. Reg. 808; February 3, 2017
1600.605	Amendment	41 Ill. Reg. 808; February 3, 2017
- 11) Statement of Statewide Policy Objective: This rulemaking does not affect units of local government.
- 12) Time, Place and Manner in which interested persons may comment on this proposed rulemaking: Comments on the proposed rulemaking may be submitted in writing for a period of 45 days following publication of this Notice to:

Albert J. Lee, Associate General Counsel

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State Universities Retirement System
1901 Fox Drive
Champaign IL 61820

217/378-8861

- 13) Initial Regulatory Flexibility Analysis:
- A) Types of small businesses, small municipalities and not-for-profit corporations affected: None
 - B) Reporting, bookkeeping or other procedures required for compliance: None
 - C) Types of professional skills necessary for compliance: None
- 14) Regulatory Agenda on which this rulemaking was summarized: July 2017

The full text of the Proposed Amendments begins on the next page:

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TITLE 80: PUBLIC OFFICIALS AND EMPLOYEES
SUBTITLE D: RETIREMENT SYSTEMS
CHAPTER II: STATE UNIVERSITIES RETIREMENT SYSTEMPART 1600
UNIVERSITIES RETIREMENT

SUBPART A: GENERAL

Section

1600.100	Definitions
1600.110	Freedom of Information Act
1600.120	Open Meetings Act
1600.130	Procurement
1600.140	Compliance with the Internal Revenue Code
1600.145	Compliance with Final 415 Treasury Regulations
1600.150	Group Trust Provisions

SUBPART B: CONTRIBUTIONS AND SERVICE CREDIT

Section

1600.202	Return to Employment
1600.203	Independent Contractors
1600.205	Earnings Subject to Withholding and Crediting
1600.210	Crediting Interest on Participant Contributions and Other Reserves
1600.220	Election to Make Contributions Covering Leave of Absence at Less Than 50% Pay
1600.230	Election to Pay Contributions Based upon Employment that Preceded Certification as a Participant
1600.240	Election to Make Contributions Covering Periods of Military Leave Protected under USERRA
1600.241	Survivor Benefits for Members Who Die While on Military Leave Protected under USERRA
1600.250	Sick Leave Accrual Schedule
1600.260	Part-time/Concurrent Service Adjustment
1600.270	Employer Contributions for Benefit Increases Resulting from Earnings Increases Exceeding 6%
1600.275	Employer Contributions for Employing Affected Annuitants

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SUBPART C: SURVIVORS AND BENEFICIARIES

Section

- 1600.300 Effective Beneficiary Designations
- 1600.305 Full-Time Student Survivors Insurance Beneficiaries
- 1600.310 Dependency of Beneficiaries
- 1600.320 Disability Claims Procedure (Renumbered)

SUBPART D: BENEFIT CALCULATION AND PAYMENT

Section

- 1600.400 Determination of Final Rate of Earnings Period
- 1600.410 Twenty Percent Limitation on Final Rate of Earnings Increases
- 1600.420 Making Preliminary Estimated Payments
- 1600.430 Excess Benefit Arrangement
- 1600.431 Indirect Payments to Minors and Legally Disabled Persons
- 1600.432 Indirect Payments to Child Survivors Through the Surviving Spouse
- 1600.440 Voluntary Deductions from Annuity Payments
- 1600.450 Overpayment Recovery

SUBPART E: DISABILITY CLAIMS AND ADMINISTRATIVE REVIEW

Section

- 1600.500 Administrative Staff Determinations and Rules for Appeal – Nature and Requirements of Formal Hearings
- 1600.510 Employer-Related Determinations and Rules for Appeal
- 1600.550 Disability Claims Procedure

SUBPART F: QUALIFIED ILLINOIS DOMESTIC RELATIONS ORDERS

Section

- 1600.600 Definitions
- 1600.605 Requirements for a Valid Qualified Illinois Domestic Relations Order
- 1600.610 Invalid Orders
- 1600.615 Filing a QILDRO with the System
- 1600.620 Modified QILDROs
- 1600.625 Benefits Affected by a QILDRO
- 1600.630 Effect of a Valid QILDRO
- 1600.635 QILDROs Against Persons Who Became Members Prior to July 1, 1999

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1600.640	Alternate Payee's Address
1600.645	Electing Form of Payment
1600.650	Automatic Annual Increases
1600.655	Expiration of a QILDRO
1600.660	Reciprocal Systems QILDRO Policy Statement
1600.665	Providing Benefit Information for Divorce Purposes

SUBPART G: BOARD TRUSTEE ELECTION

Section

1600.700	Nomination of Candidates
1600.705	Election Date/Election Day – Defined
1600.710	Petitions
1600.715	Eligible Voters
1600.720	Election Materials
1600.725	Casting Votes
1600.730	Return of Ballots and Ballot Counting Process
1600.735	Certification of Ballot Counting
1600.740	Challenges to Election Results
1600.745	Candidate Informational Communication
1600.750	Filling a Vacancy in the Term of an Elected Trustee

AUTHORITY: Implementing and authorized by Section 15-177 of the Illinois Pension Code [40 ILCS 5/15-177].

SOURCE: Amended September 2, 1977; amended at 2 Ill. Reg. 31, p.53, effective July 30, 1978; amended at 7 Ill. Reg. 8139, effective June 29, 1983; codified at 8 Ill. Reg. 19683; amended at 11 Ill. Reg. 15656, effective September 9, 1987; amended at 13 Ill. Reg. 18939, effective November 21, 1989; amended at 14 Ill. Reg. 6789, effective April 20, 1990; emergency amendment at 21 Ill. Reg. 4864, effective March 26, 1997, for a maximum of 150 days; amended at 21 Ill. Reg. 6095, effective May 2, 1997; amended at 21 Ill. Reg. 11962, effective August 13, 1997; amended at 21 Ill. Reg. 12653, effective August 28, 1997; amended at 22 Ill. Reg. 4116, effective February 9, 1998; amended at 23 Ill. Reg. 13667, effective November 1, 1999; amended at 25 Ill. Reg. 10206, effective July 30, 2001; amended at 28 Ill. Reg. 2292, effective January 23, 2004; expedited correction at 28 Ill. Reg. 7575, effective January 23, 2004; amended at 29 Ill. Reg. 2729, effective March 1, 2005; amended at 29 Ill. Reg. 11819, effective July 12, 2005; amended at 29 Ill. Reg. 14060, effective September 1, 2005; amended at 29 Ill. Reg. 14351, effective September 6, 2005; amended at 30 Ill. Reg. 6170, effective March 21, 2006; amended at 30 Ill. Reg. 7778, effective April 5, 2006; amended at 30 Ill. Reg. 9911, effective

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May 9, 2006; amended at 30 Ill. Reg. 17509, effective October 19, 2006; amended at 31 Ill. Reg. 4267, effective February 22, 2007; amended at 31 Ill. Reg. 4927, effective March 12, 2007; recodified at 31 Ill. Reg. 10194; amended at 32 Ill. Reg. 16515, effective September 25, 2008; emergency amendment at 33 Ill. Reg. 6525, effective April 27, 2009, for a maximum of 150 days; emergency expired September 23, 2009; amended at 33 Ill. Reg. 10757, effective July 1, 2009; amended at 33 Ill. Reg. 16755, effective November 23, 2009; amended at 34 Ill. Reg. 9523, effective June 25, 2010; amended at 35 Ill. Reg. 10952, effective June 22, 2011; amended at 36 Ill. Reg. 3938, effective February 22, 2012; amended at 37 Ill. Reg. 1309, effective January 15, 2013; amended at 37 Ill. Reg. 3866, effective March 15, 2013; amended at 37 Ill. Reg. 10698, effective June 26, 2013; amended at 37 Ill. Reg. 15517, effective September 12, 2013; amended at 38 Ill. Reg. 5659, effective February 11, 2014; emergency amendment at 38 Ill. Reg. 11376, effective May 9, 2014, for a maximum of 150 days; amended at 38 Ill. Reg. 16375, effective July 17, 2014; amended at 38 Ill. Reg. 17457, effective July 30, 2014; amended at 39 Ill. Reg. 8317, effective June 1, 2015; amended at 40 Ill. Reg. 8437, effective June 3, 2016; amended at 41 Ill. Reg. _____, effective _____.

SUBPART E: ADMINISTRATIVE REVIEW

Section 1600.500 Administrative Staff Determinations and Rules for Appeal – Nature and Requirements of Formal Hearings

- a) **Administrative Determination**
The Board of Trustees hereby delegates to the SURS administrative staff the responsibility for the daily claims-processing function of SURS, including making initial determinations as to all applications for annuities and benefits, service credit, or any other claims against or relating to SURS, consistent with the provisions of the Illinois Pension Code.

- b) **Review by Director of Member Services**
Any participant, annuitant or beneficiary adversely affected by the disposition of a claim by the administrative staff may file a written request for review by the SURS Director of Member Services or such other person as may be designated by the Executive Director. The designee shall have all the powers and duties of the Director of Member Services, as set forth in this subsection (b). A request for review by the Director of Member Services must be received within 35 days from the date of the decision from which review is sought. The Director of Member Services' review will be based upon all materials contained in the file, as well as any additional materials the claimant attaches to the written request for review filed with the Director of Member Services pertaining to the claim. All filings or

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submissions, whether optional or required under this Section, shall be considered timely if date stamped by SURS within the time prescribed. The Director of Member Services' decision shall be served on the participant, annuitant or beneficiary by delivery to a third-party commercial carrier or by registered or certified mail, return receipt requested.

- c) Review by the Claims Panel
- 1) A Claims Panel shall hear all administrative contested matters. The Panel shall meet periodically as determined by the Executive Director.
 - 2) Request for Review. Any participant, annuitant or beneficiary (hereinafter "claimant") adversely affected by the disposition of a claim by the Director of Member Services may request, in writing, a review by the Claims Panel and, at the same time, a copy of all relevant documents from the claimant's file. A request for review must be received by the General Counsel of SURS, or his or her designee, within 35 days from the date of the decision from which review is sought.
 - 3) Notice of Hearing. Upon receipt of a claimant's Request for Review, the Director of Member Services, or his or her designee, shall assign the claim a docket number; schedule the claim for the first available meeting of the Claims Panel; and notify the claimant, by a Notice of Hearing, that he or she is required to file a single Statement of Claim. The Notice of Hearing may be accompanied by any relevant documentation from the claimant's file.
 - 4) Statement of Claim. The Statement of Claim must be received by the SURS General Counsel, or his or her designee, no later than 35 days from the date of the mailing of the Notice of Hearing. The Statement of Claim shall include: a formal Appearance, containing the claimant's name, SURS identification number and address; the name and address of the claimant's authorized representative, if any; a statement of the facts forming the basis for the appeal; any documents or other materials the claimant wishes to be considered in conjunction with the appeal, in addition to those already contained in the claimant's file; whether the claimant desires a hearing or whether the claimant desires to waive a hearing and allow the Claims Panel to reach a decision based upon the Statement of Claim and the relevant documents in the claimant's file; a list

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of witnesses, if any, the claimant intends to present at a hearing; and an explanation of the relief sought. The Statement of Claim shall not exceed 15 pages in length, unless an exception is granted by the Claims Panel Hearing Officer. The Hearing Officer may grant a motion to Strike/Dismiss all or part of the Statement of Claim.

- 5) Response to Statement of Claim. SURS staff may submit a Response to the Statement of Claim, which shall also not exceed 15 pages in length, unless an exception is granted by the Claims Panel Hearing Officer.
- 6) Notification. The Notice of Hearing shall also provide a claimant *with written notice of: the date, time and place of the hearing; the subject matter of the hearing; and relevant procedural and substantive statutory and regulatory provisions* [5 ILCS 100/10-25]. The Notice shall inform the claimant that he or she will be afforded the opportunity to provide a statement of his or her position, present oral evidence, and conduct examination and cross-examination of witnesses as necessary for full and true disclosure of the facts. Notice shall also be given to the claimant that he or she is required to provide written confirmation, at least 14 days prior to the scheduled date of the hearing, of his or her intent to appear at the hearing, whether in person or by telephone conference call. The claimant is not required to physically appear at the hearing. The claimant may appear at the hearing by telephone conference call. The claimant may also choose to affirmatively waive his or her appearance at the hearing. In the absence of the claimant, the Claims Panel will consider the claimant's Statement of Claim and any documentary evidence, testimony evidence, argument and any other information properly presented to the Claims Panel by SURS staff during the scheduled hearing. ~~such other matters as may be properly brought before it at the hearing.~~
- 7) Pre-hearing Conference. Upon request of the General Counsel or upon the decision of the Hearing Officer, a pre-hearing conference shall be held for the purpose of simplification or definition of issues or procedures at the hearing.
- 8) Representation. The claimant and SURS may be represented by counsel or a designated spokesperson at the hearing.
- 9) Burden of Proof. It shall be the burden of the claimant to establish a right

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to the benefit claimed, or the right to the continuation of the benefit claimed in cases of revocation of the benefit by SURS, by establishing that right by a preponderance of the evidence.

- d) Discovery. All discovery is at the discretion of the Hearing Officer. Requests to take discovery must be made in writing to the Hearing Officer with notice to the other party. Discovery may be taken with the prior permission of the Hearing Officer only upon good cause shown, that is, if the evidence sought is material and cannot be obtained in any other way. Failure to comply with orders of the Hearing Officer may be sanctioned by the Hearing Officer, by means including, but not limited to, dismissal of a claim.
- e) Depositions
- 1) The Hearing Officer may order the taking of evidence depositions of a person, specifying the subject matter to be covered, under oral examination or written questions, for use as evidence at the hearing, provided:
 - A) The Hearing Officer has determined upon request that there is a need to preserve a person's testimony. The need to preserve a person's testimony shall be determined using criteria similar to that set forth under Illinois Supreme Court Rule 212(b);
 - B) The request is made on motion by a party who gives notice of the motion to the other party; and
 - C) The Hearing Officer has determined that an evidence deposition containing oral testimony will be necessary to the Claims Panel in determining the merits of the claim.
 - 2) The taking of depositions shall be in accordance with the provisions for taking depositions in civil cases, and the order for the taking of a deposition may provide that any designated books, papers, documents or tangible objects that are not privileged shall be produced at the same time and place.
 - 3) Any party to the hearing shall, during any deposition process, have the right to confront and cross-examine any witness whose deposition

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testimony is to be presented to the Claims Panel.

- 4) Depositions shall be taken in the county of residence or employment of the witness, unless the witness waives that right in writing.
 - 5) Depositions shall be taken at the cost of the party requesting the deposition.
- f) Subpoenas
- 1) The Hearing Officer may request the Secretary of the Board to issue a subpoena to compel the attendance of a witness at an evidence deposition or the production of documents when the witness has, or ~~the~~ documents contain, relevant evidence. A party may also request the Hearing Officer to request the Secretary of the Board to issue a subpoena to compel the attendance of a witness at an evidence deposition or the production of documents. The request shall either be in writing or on the record and shall:
 - A) Identify the witness or document sought; and
 - B) State the facts that will be proven by each witness or document sought.
 - 2) The Hearing Officer shall grant or deny the request, either in writing or on the record. If the request for subpoena is granted, the Hearing Officer shall, if necessary, reschedule the hearing to a specific date. The request for subpoena shall be denied if the Hearing Officer finds that the evidence sought is immaterial, irrelevant or cumulative. If the request for subpoena is denied, the specific reasons for denial of the request shall be made part of the record on appeal.
 - 3) If a witness fails to obey a subpoena, the party seeking enforcement of the subpoena shall prepare an application to the circuit court of the county in which the subpoenaed witness resides requesting enforcement of the subpoena, and shall present the application to the Hearing Officer, at the same time serving a copy of the application upon the other party. If satisfied that the subpoena was properly served and that the application is in proper form, the Hearing Officer shall sign a subpoena to be submitted

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with the application and the party seeking the subpoena may then file and prosecute the application in the circuit court, in the name of the Board. The petitioner in the application shall be styled as "Name of Petitioner ex rel. Board of Trustees of the State Universities Retirement System of Illinois" unless the petitioner is SURS, in which case the petition shall be brought in the name of the Board. In the event of an application being filed with the circuit court, the matter shall be continued pending the outcome of the application to enforce the subpoena.

- 4) The fees of witnesses for attendance and travel shall be the same as fees of witnesses before the circuit courts of this State and shall be paid by the party seeking the subpoena.
- g) Conduct of the Hearing
- 1) Hearing Officer. The hearing shall be conducted by the Hearing Officer. Other members of the Claims Panel may, but are not required to, attend the hearing. Members may attend hearings either in-person or by video or teleconference.
 - A) The Hearing Officer shall have full power to conduct the hearing and the presence of any other members of the Claims Panel is not required. The Hearing Officer shall be one of the members of the Claims Panel chosen by the Panel to be the Hearing Officer.
 - B) The Claims Panel shall consist of:
 - i) the Executive Director of SURS;
 - ii) an attorney licensed to practice law in the State of Illinois approved by the Board; and
 - iii) one other person, selected by the Chairperson of the Board of Trustees of SURS, who shall be a member of the Board, a participant in SURS or an attorney licensed to practice law in the State of Illinois.
 - C) Each member of the Panel shall be reimbursed for travel or other related expenses incurred in connection with his or her duties as a

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member of the Panel. If he or she is not a member of the Board or currently employed by one of the employers covered by SURS, the member shall receive reasonable compensation, as recommended by the Executive Director and approved by the Board, for time spent in reviewing claims and attending Panel hearings. At a minimum, the members of the Claims Panel shall have a general familiarity with the provisions of the Illinois Pension Code, this Part and the internal operating procedures of SURS.

- 2) Procedures
 - A) The Hearing Officer shall conduct a full and fair hearing, receive testimony of the claimant and admit exhibits into evidence, avoid delay, maintain order and make a sufficient record for a full and true disclosure of the facts and issues.
 - B) To accomplish these ends, the Hearing Officer shall make all procedural and evidentiary rulings necessary for the conduct of the hearing.
 - C) All testimony shall be taken under oath before an officer authorized to administer oaths by the laws of this State or of the United States or of the place where the testimony is to be given.
 - D) As a general matter, *the rules of evidence as applied in civil cases in the circuit courts of the State of Illinois shall be followed; however, evidence inadmissible under those rules may be admitted (except where precluded by statute) if it is of a type commonly relied upon by reasonably prudent persons in the conduct of their affairs. Any part of the evidence may be received in written form, provided that the interests of the parties will not be prejudiced. Notice may be taken of generally recognized technical facts within SURS' specialized knowledge and SURS' experience, technical competence and specialized knowledge may be used in evaluation of the evidence.* [5 ILCS 100/10-40]
 - E) The Hearing Officer, and any member of the Claims Panel attending the hearing, may ask questions necessary for better understanding of the facts or law.

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- F) The Hearing Officer shall have the authority to impose reasonable time limits for each party to present its case and shall, in general, have the power to manage and control the hearing process.
 - G) The hearing shall be open to the public unless the Hearing Officer, for good cause shown, determines otherwise.
- 3) Record of Proceedings. Two records of proceedings shall be kept that shall be in the form of:
- A) a non-verbatim "bystander's report"; and
 - B) either a stenographic transcription or a tape recording. The claimant may obtain a stenographic transcription or a copy of a tape recording of the hearing by making a timely request within 21 days after the close of the hearing and paying the actual cost entailed.
- 4) Disqualification; Ex Parte Communications
- A) Disqualification
 - i) *A Hearing Officer or other member of the Claims Panel may be disqualified on grounds of bias or conflict of interest. A motion to disqualify a Hearing Officer or other member of the Claims Panel for bias or conflict of interest shall be made to the Hearing Officer by any party to the hearing at least 14 days prior to the commencement of the hearing, with a copy of the motion to be simultaneously submitted to the General Counsel. The motion shall be heard, considered and ruled upon by the Hearing Officer at or prior to the commencement of the hearing. The movant shall have the burden of proof with respect to the motion to disqualify. Either an *adverse ruling* or the fact that a Hearing Officer or other member of the Claims Panel is an employee of SURS or has a contract with SURS, standing alone, shall not constitute bias or conflict of interest. [5 ILCS 100/10-30]*

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- ii) The Executive Director may not be called as a witness unless it is demonstrated that the Executive Director has relevant noncumulative personal knowledge of facts bearing upon the claim. The Executive Director may not be disqualified as a member of the Claims Panel on the basis that the Executive Director is responsible for the overall administration of SURS.
 - iii) In the event that a Hearing Officer or other member of the Claims Panel is disqualified or is otherwise unable to serve, the Board Chairperson may appoint another person to the Claims Panel and shall appoint another person if the Claims Panel is reduced to fewer than two members, or the Claims Panel shall appoint another Hearing Officer from among its members, as the case may be.
- B) Ex Parte Communications Prohibited-
- i) *Except in the disposition of matters that SURS is authorized by law to entertain or dispose of on an ex parte basis, the members of the Claims Panel shall not, after receiving notice of a hearing in a contested matter, communicate, directly or indirectly, in connection with any issue of fact, with any party, or in connection with any other issue with any party, or the representative of any party, except upon notice and opportunity for all parties to participate. However, an employee of SURS may communicate with other employees of SURS and an employee of SURS or member of the Claims Panel may have the aid and advice of one or more assistants. An ex parte communication received by any member of the Claims Panel shall be made a part of the record of the pending matter, including all written communications, all written responses to the communications, and a memorandum stating the substance of all oral communications and all responses made and the identity of each person from whom the ex parte communication was received. Communications regarding matters of procedure and practice, such as the format of*

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pleadings, number of copies required, manner of service, and status of proceedings, are not considered ex parte communications. [5 ILCS 100/10-60]

- ii) Any documentary evidence, testimony evidence, argument and any other information properly presented to the Claims Panel by SURS staff during a scheduled hearing held in the absence of a claimant who waived his or her right to participate in the hearing will not be deemed to be ex parte communications.

5) Decisions of the Claims Panel and Executive Committee

A) Claims Panel Decisions

- i) The record of proceedings shall be completed upon conclusion of the hearing by the Hearing Officer, unless the Hearing Officer determines to re-open the proceedings. Upon conclusion of all evidence and arguments, the Claims Panel shall privately deliberate and make a Decision as to the disposition of the claim based on the evidence of record. The Claims Panel Decision shall be served on all parties and their agents, if any, by delivery to a third-party commercial carrier or by registered or certified mail, return receipt requested. If a Statement of Exceptions to the Decision is not filed pursuant to this subsection (g)(5)(A), the Decision is final for all purposes and not subject to administrative or judicial review. However, if a Statement of Exceptions to the Decision is filed or, if the members of the Panel are unable to agree on a Decision, then the claim shall be presented to the Executive Committee for a final administrative decision.
- ii) If a Statement of Exceptions is filed, it must be received by SURS, along with a brief in support, within 21 days after the date of mailing of the Claims Panel Decision. Any responsive brief shall be received within 21 days after the filing of the Statement of Exceptions. Any reply brief shall be received within 14 days after the filing of the responsive

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brief. The filing of any responsive or reply brief is optional. The Executive Director, or his or her designee, shall provide the Executive Committee with a summary of the decision of the Claims Panel. The Executive Committee will make a final administrative decision based on the Claims Panel Decision, any dissenting opinion, any Statement of Exceptions and briefs properly filed.

- iii) If the claim is presented to the Executive Committee because the members of the Claims Panel are unable to agree on a Decision, the Executive Committee shall make a final administrative decision based on any opinions of the Claims Panel members, the record and any briefs properly filed by the claimant or SURS. The filing of any opening, responsive or reply brief in response to the Claims Panel decision is optional. Any opening brief shall be received by SURS within 21 days after receiving notification from the Hearing Officer that the Claims Panel was unable to agree on a Decision. Any responsive brief shall be received within 21 days after the filing of any opening brief. Any reply brief shall be received within 14 days after the filing of any responsive brief.
 - iv) All filings shall be served upon the opposing party and shall contain a certificate of service. Filing deadlines in this subsection (g)(5)(A) may be continued to a date certain by the Hearing Officer for good cause shown on written application filed with SURS prior to the expiration of the deadline sought to be continued.
- B) Executive Committee Decision
- i) When necessary pursuant to subsection (g)(5)(A), the Executive Committee of the Board shall make a decision on the claim. No oral argument shall be permitted before the Executive Committee unless otherwise determined by the Executive Committee.
 - ii) The Executive Committee shall render one of the following

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decisions with respect to the claim: affirmance of the administrative action, reversal of the administrative action, or remand of the case to the administrative staff for further consideration. Remand of the case to the administrative staff shall not be considered a final decision of the Executive Committee. A decision by the Executive Committee either reversing or affirming the decision of the administrative staff shall constitute a final decision for the purpose of review under the Administrative Review Law [735 ILCS 5/Art. III]. *A final decision of the Executive Committee shall be in writing or stated in the record.*

- iii) The Executive Committee may adopt, as its own, the findings of fact and conclusions of law of the Claims Panel. *Findings of fact, if set forth in statutory language, shall be accompanied by a concise and explicit statement of the underlying facts supporting the findings.*
- iv) *All decisions of the Executive Committee shall specify whether they are final and subject to the Administrative Review Law. [5 ILCS 100/10-50]*
- v) Parties and their agents, if any, shall be notified, personally, by delivery to a third-party commercial carrier, or by registered or certified mail, return receipt requested, of any decision of the Executive Committee. The date of mailing of the decision shall constitute the date of service for purposes of the Administrative Review Law or any other applicable law.

(Source: Amended at 41 Ill. Reg. _____, effective _____)

SUBPART G: BOARD TRUSTEE ELECTION

Section 1600.720 Election Materials

- a) The Board Secretary may procure a qualified election services vendor and determine the voting methods, specific voting instructions and security measures to be used in the election, subject to the approval of the Board.

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- b) At least 30 business days prior to the Election Day, the following election materials~~the System~~ shall be emailed~~mail~~ to the eligible voter's latest email address known to the System~~the following election materials~~:
- 1) Electronic instructions for accessing an electronic~~A preprinted paper~~ ballot listing, in order determined by random, blind lottery conducted by the Board Secretary, either the contributing membership candidates or the annuitant candidates, depending on the basis for the individual's eligible voter status as provided in Section 1600.715, using the entire name of each candidate in the System records on the first day nomination petitions can be accepted;
 - 2) Instructions for accessing candidate~~Candidate~~ provided biographies in the location, format and length specified and approved by the Board Secretary;
 - 3) Instructions for voting methods as specified by the Board Secretary, including instructions for voting online or by phone. These instructions will also include the voting deadline.;
 - 4) ~~A preprinted, return envelope.~~
- c) For voters without a current email address on file with SURS, at least 30 business days prior to the Election Day, the following election materials shall be mailed to the eligible voter's latest mailing address known to the System:
- 1) A preprinted paper ballot listing, in order determined by random, blind lottery conducted by the Board Secretary, either the contributing membership candidates or the annuitant candidates, depending on the basis for the individual's eligible voter status as provided in Section 1600.715, using the entire name of each candidate in the System records on the first day nomination petitions can be accepted;
 - 2) Preprinted paper candidate provided biographies in the format and length specified and approved by the Board Secretary;

STATE UNIVERSITIES RETIREMENT SYSTEM

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- 3) Instructions for voting methods specified by the Board Secretary, including instructions for voting online, by phone or by regular mail. These instructions shall also include the voting deadline;
- 4) A preprinted, return envelope.
- de) If an eligible voter is unable to access his or her election materials as ~~has not received any or all of the election materials~~ specified in subsection (b) or did not receive the preprinted election materials mailed to him or her as specified in subsection (c), the eligible voter may request that the election vendor~~System~~ send replacement election materials to him or her by providing a current mailing address or a current email address. Preprinted paper ballots, candidate biographies and other election information~~Election materials~~ will not be mailed out within 5 business days prior to the Election Date; however, electronic ballots and instructions for accessing candidate election information~~election materials~~ will be electronically transmitted if ~~available and~~ authorized by the eligible voter at least one day prior to the Election Date. If an eligible voter incorrectly marks or spoils his or her paper ballot prior to returning it, the eligible voter may request a new set of election materials from the election vendor~~System~~ at least 5 business days prior to the Election Date. Paper ballots already mailed to the election vendor~~System~~ or electronic or phone ballots that have already been cast by the eligible voter, shall not be replaced or revoked. The member's identity as an eligible voter shall be authenticated prior to sending out replacement election materials.
- ed) If previously mailed election materials are returned to the election vendor~~System~~ undelivered at least 5 business days prior to the Election Date and a forwarding address has been provided, the election vendor~~System~~ shall mail election materials to the forwarding address via first class U.S. mail.
- f) If previously emailed electronic election materials are returned to the election vendor undelivered at least one day prior to the Election Date and an updated email address has been provided, the election vendor shall email election materials to the updated address on file.
- g) In addition to the election materials distributed by the election vendor, SURS will post candidate biographies, in the format and length specified and approved by the Board Secretary, on its website at least 30 days prior to the election.

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(Source: Amended at 41 Ill. Reg. _____, effective _____)

DEPARTMENT OF PUBLIC HEALTH

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- 1) Heading of the Part: Hospital Licensing Requirements
- 2) Code Citation: 77 Ill. Adm. Code 250
- 3)

<u>Section Numbers:</u>	<u>Proposed Actions:</u>
250.100	Amendment
250.105	Amendment
250.750	Amendment
250.1510	Amendment
250.2420	Amendment
- 4) Statutory Authority: Hospital Licensing Act [210 ILCS 85]
- 5) A Complete Description of the Subjects and Issues Involved: This rulemaking seeks to implement PA 99-454, which prohibited hospitals and other health care providers from billing sexual assault survivors for emergency care and forensic services. This rulemaking also inserts statutory language that clarifies the statutory-mandated deadlines for which the Department must conduct onsite inspections of construction projects and provide written approval for occupancy of new construction.

The economic effect of this proposed rulemaking is unknown. Therefore, the Department requests any information that would assist in calculating this effect.

The Department anticipates adoption of this rulemaking approximately six to nine months after publication of the Notice in the *Illinois Register*.
- 6) Published studies or reports, and sources of underlying data, used to compose this rulemaking: None
- 7) Will this rulemaking replace any emergency rule currently in effect? No
- 8) Does this rulemaking contain an automatic repeal date? No
- 9) Does this rulemaking contain incorporations by reference? Yes
- 10) Are there any other rulemakings pending on this Part? No
- 11) Statement of Statewide Policy Objective: This rulemaking does not create a State mandate.

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- 12) Time, Place and Manner in which interested persons may comment on this proposed rulemaking: Interested persons may present their comments concerning this rulemaking within 45 days after this issue of the *Illinois Register* to:

Elizabeth Paton
Assistant General Counsel
Department of Public Health
Division of Legal Services
535 W. Jefferson St., 5th Floor
Springfield IL 62761

217/782-2043
e-mail: dph.rules@illinois.gov

- 13) Initial Regulatory Flexibility Analysis:
- A) Types of small businesses, small municipalities and not-for-profit corporations affected: Hospitals
 - B) Reporting, bookkeeping or other procedures required for compliance: Hospitals will be required to draft vouchers for sexual assault victims. Hospitals will be required to track Department inspection deadlines.
 - C) Types of professional skills necessary for compliance: Bookkeeping
- 14) Regulatory Agenda on which this rulemaking was summarized: January 2016

The full text of the Proposed Amendments begins on the next page:

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NOTICE OF PROPOSED AMENDMENTS

TITLE 77: PUBLIC HEALTH
CHAPTER I: DEPARTMENT OF PUBLIC HEALTH
SUBCHAPTER b: HOSPITALS AND AMBULATORY CARE FACILITIES

PART 250
HOSPITAL LICENSING REQUIREMENTS

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250.100	Definitions
250.105	Incorporated and Referenced Materials
250.110	Application for and Issuance of Permit to Establish a Hospital
250.120	Application for and Issuance of a License to Operate a Hospital
250.130	Administration by the Department
250.140	Hearings
250.150	Definitions (Renumbered)
250.160	Incorporated and Referenced Materials (Renumbered)

SUBPART B: ADMINISTRATION AND PLANNING

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250.210	The Governing Board
250.220	Accounting
250.230	Planning
250.240	Admission and Discharge
250.245	Failure to Initiate Criminal Background Checks
250.250	Visiting Rules
250.260	Patients' Rights
250.265	Language Assistance Services
250.270	Manuals of Procedure
250.280	Agreement with Designated Organ Procurement Agencies
250.285	Smoking Restrictions
250.290	Safety Alert Notifications

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Section	
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250.315	House Staff Members
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SUBPART D: PERSONNEL SERVICE

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250.420	Personnel Records
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250.440	Education Programs
250.450	Personnel Health Requirements
250.460	Benefits

SUBPART E: LABORATORY

Section	
250.510	Laboratory Services
250.520	Blood and Blood Components
250.525	Designated Blood Donor Program
250.530	Proficiency Survey Program (Repealed)
250.540	Laboratory Personnel (Repealed)
250.550	Western Blot Assay Testing Procedures (Repealed)

SUBPART F: RADIOLOGICAL SERVICES

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250.610	General Diagnostic Procedures and Treatments
250.620	Radioactive Isotopes
250.630	General Policies and Procedures Manual

SUBPART G: GENERAL HOSPITAL EMERGENCY SERVICES

Section	
250.710	Classification of Emergency Services
250.720	General Requirements
250.725	Notification of Emergency Personnel

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- 250.730 Community or Areawide Planning
- 250.740 Disaster and Mass Casualty Program
- 250.750 Emergency Services for Sexual Assault Victims

SUBPART H: RESTORATIVE AND REHABILITATION SERVICES

- Section
- 250.810 Applicability of Other Parts of These Requirements
- 250.820 General
- 250.830 Classifications of Restorative and Rehabilitation Services
- 250.840 General Requirements for all Classifications
- 250.850 Specific Requirements for Comprehensive Physical Rehabilitation Services
- 250.860 Medical Direction
- 250.870 Nursing Care
- 250.880 Additional Allied Health Services
- 250.890 Animal-Assisted Therapy

SUBPART I: NURSING SERVICE AND ADMINISTRATION

- Section
- 250.910 Nursing Services
- 250.920 Organizational Plan
- 250.930 Role in hospital planning
- 250.940 Job descriptions
- 250.950 Nursing committees
- 250.960 Specialized nursing services
- 250.970 Nursing Care Plans
- 250.980 Nursing Records and Reports
- 250.990 Unusual Incidents
- 250.1000 Meetings
- 250.1010 Education Programs
- 250.1020 Licensure
- 250.1030 Policies and Procedures
- 250.1035 Domestic Violence Standards
- 250.1040 Patient Care Units
- 250.1050 Equipment for Bedside Care
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- 250.1075 Use of Restraints

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250.1080	Admission Procedures Affecting Care
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250.1110	Mandatory Overtime Prohibition
250.1120	Staffing Levels
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SUBPART J: SURGICAL AND RECOVERY ROOM SERVICES

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250.1210	Surgery
250.1220	Surgery Staff
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250.1240	Surgical Privileges
250.1250	Surgical Emergency Care
250.1260	Operating Room Register and Records
250.1270	Surgical Patients
250.1280	Equipment
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250.1300	Operating Room
250.1305	Visitors in Operating Room
250.1310	Cleaning of Operating Room
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SUBPART K: ANESTHESIA SERVICES

Section	
250.1410	Anesthesia Service

SUBPART L: RECORDS AND REPORTS

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250.1510	Medical Records
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250.1620	Facilities
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SUBPART N: HOUSEKEEPING AND LAUNDRY SERVICES

Section

250.1710	Housekeeping
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SUBPART O: OBSTETRIC AND NEONATAL SERVICE

Section

250.1810	Applicability of Other Provisions of this Part
250.1820	Obstetric and Neonatal Service (Perinatal Service)
250.1830	General Requirements for All Obstetric Departments
250.1840	Discharge of Newborn Infants from Hospital
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250.1850	Single Room Postpartum Care of Mother and Infant
250.1860	Special Programs (Repealed)
250.1870	Labor, Delivery, Recovery and Postpartum Care

SUBPART P: ENGINEERING AND MAINTENANCE OF THE PHYSICAL PLANT, SITE,
EQUIPMENT, AND SYSTEMS – HEATING, COOLING, ELECTRICAL, VENTILATION,
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Section

250.1910	Maintenance
250.1920	Emergency electric service
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250.1940	Ventilation, Heating, Air Conditioning, and Air Changing Systems

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250.1950	Grounds and Buildings Shall be Maintained
250.1960	Sewage, Garbage, Solid Waste Handling and Disposal
250.1970	Plumbing
250.1980	Fire and Safety

SUBPART Q: CHRONIC DISEASE HOSPITALS

Section	
250.2010	Definition
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SUBPART R: PHARMACY OR DRUG AND MEDICINE SERVICE

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250.2110	Service Requirements
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SUBPART S: PSYCHIATRIC SERVICES

Section	
250.2210	Applicability of other Parts of these Regulations
250.2220	Establishment of a Psychiatric Service
250.2230	The Medical Staff
250.2240	Nursing Service
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250.2270	Admission, Transfer and Discharge Procedures
250.2280	Care of Patients
250.2290	Special Medical Record Requirements for Psychiatric Hospitals and Psychiatric Units of General Hospitals or General Hospitals Providing Psychiatric Care
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250.2410	Applicability of these Standards
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	Facility
250.2430	Preparation of Drawings and Specifications – Submission Requirements
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250.2443	Advisory Committee
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SUBPART U: CONSTRUCTION REQUIREMENTS FOR EXISTING HOSPITALS

Section	
250.2610	Applicability of Subpart U
250.2620	Codes and Standards
250.2630	Existing General Hospital Requirements
250.2640	Details
250.2650	Finishes
250.2660	Mechanical
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250.2680	Electrical Requirements

SUBPART V: SPECIAL CARE AND/OR SPECIAL SERVICE UNITS

Section	
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SUBPART W: ALCOHOLISM AND INTOXICATION TREATMENT SERVICES

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250.2810	Applicability of Other Parts of These Requirements
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250.2830	Classification and Definitions of Service and Programs
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250.2870	Referral
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250.APPENDIX A	Codes and Standards (Repealed)
250.EXHIBIT A	Codes (Repealed)
250.EXHIBIT B	Standards (Repealed)
250.EXHIBIT C	Addresses of Sources (Repealed)
250.ILLUSTRATION A	Seismic Zone Map
250.TABLE A	Measurements Essential for Level I, II, III Hospitals
250.TABLE B	Sound Transmission Limitations in General Hospitals
250.TABLE C	Filter Efficiencies for Central Ventilation and Air Conditioning Systems in General Hospitals (Repealed)
250.TABLE D	General Pressure Relationships and Ventilation of Certain Hospital Areas (Repealed)
250.TABLE E	Piping Locations for Oxygen, Vacuum and Medical Compressed Air
250.TABLE F	General Pressure Relationships and Ventilation of Certain Hospital Areas
250.TABLE G	Insulation/Building Perimeter

AUTHORITY: Implementing and authorized by the Hospital Licensing Act [210 ILCS 85].

SOURCE: Rules repealed and new rules adopted August 27, 1978; emergency amendment at 2 Ill. Reg. 31, p. 73, effective July 24, 1978, for a maximum of 150 days; amended at 2 Ill. Reg. 21, p. 49, effective May 16, 1978; emergency amendment at 2 Ill. Reg. 31, p. 73, effective July 24, 1978, for a maximum of 150 days; amended at 2 Ill. Reg. 45, p. 85, effective November 6, 1978; amended at 3 Ill. Reg. 17, p. 88, effective April 22, 1979; amended at 4 Ill. Reg. 22, p. 233, effective May 20, 1980; amended at 4 Ill. Reg. 25, p. 138, effective June 6, 1980; amended at 5 Ill. Reg. 507, effective December 29, 1980; amended at 6 Ill. Reg. 575, effective December 30, 1981; amended at 6 Ill. Reg. 1655, effective January 27, 1982; amended at 6 Ill. Reg. 3296, effective March 15, 1982; amended at 6 Ill. Reg. 7835 and 7838, effective June 17, 1982; amended at 7 Ill. Reg. 962, effective January 6, 1983; amended at 7 Ill. Reg. 5218 and 5221, effective April 4, 1983 and April 5, 1983; amended at 7 Ill. Reg. 6964, effective May 17, 1983; amended at 7 Ill. Reg. 8546, effective July 12, 1983; amended at 7 Ill. Reg. 9610, effective August 2, 1983; codified at 8 Ill. Reg. 19752; amended at 8 Ill. Reg. 24148, effective November 29, 1984; amended at 9 Ill. Reg. 4802, effective April 1, 1985; amended at 10 Ill. Reg. 11931, effective September 1, 1986; amended at 11 Ill. Reg. 10283, effective July 1, 1987; amended at 11 Ill. Reg. 10642, effective July 1, 1987; amended at 12 Ill. Reg. 15080, effective October 1, 1988; amended at 12 Ill. Reg. 16760, effective October 1, 1988; amended at 13 Ill. Reg. 13232, effective September 1, 1989; amended at 14 Ill. Reg. 2342, effective February 15, 1990; amended at 14 Ill. Reg. 13824, effective September 1, 1990; amended at 15 Ill. Reg. 5328,

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effective May 1, 1991; amended at 15 Ill. Reg. 13811, effective October 1, 1991; amended at 17 Ill. Reg. 1614, effective January 25, 1993; amended at 17 Ill. Reg. 17225, effective October 1, 1993; amended at 18 Ill. Reg. 11945, effective July 22, 1994; amended at 18 Ill. Reg. 15390, effective October 10, 1994; amended at 19 Ill. Reg. 13355, effective September 15, 1995; emergency amendment at 20 Ill. Reg. 474, effective January 1, 1996, for a maximum of 150 days; emergency expired May 29, 1996; amended at 20 Ill. Reg. 3234, effective February 15, 1996; amended at 20 Ill. Reg. 10009, effective July 15, 1996; amended at 22 Ill. Reg. 3932, effective February 13, 1998; amended at 22 Ill. Reg. 9342, effective May 20, 1998; amended at 23 Ill. Reg. 1007, effective January 15, 1999; emergency amendment at 23 Ill. Reg. 3508, effective March 4, 1999, for a maximum of 150 days; amended at 23 Ill. Reg. 9513, effective August 1, 1999; amended at 23 Ill. Reg. 13913, effective November 15, 1999; amended at 24 Ill. Reg. 6572, effective April 11, 2000; amended at 24 Ill. Reg. 17196, effective November 1, 2000; amended at 25 Ill. Reg. 3241, effective February 15, 2001; amended at 27 Ill. Reg. 1547, effective January 15, 2003; amended at 27 Ill. Reg. 13467, effective July 25, 2003; amended at 28 Ill. Reg. 5880, effective March 29, 2004; amended at 28 Ill. Reg. 6579, effective April 15, 2004; amended at 29 Ill. Reg. 12489, effective July 27, 2005; amended at 31 Ill. Reg. 4245, effective February 20, 2007; amended at 31 Ill. Reg. 14530, effective October 3, 2007; amended at 32 Ill. Reg. 3756, effective February 27, 2008; amended at 32 Ill. Reg. 4213, effective March 10, 2008; amended at 32 Ill. Reg. 7932, effective May 12, 2008; amended at 32 Ill. Reg. 14336, effective August 12, 2008; amended at 33 Ill. Reg. 8306, effective June 2, 2009; amended at 34 Ill. Reg. 2528, effective January 27, 2010; amended at 34 Ill. Reg. 3331, effective February 24, 2010; amended at 34 Ill. Reg. 19031, effective November 17, 2010; amended at 34 Ill. Reg. 19158, effective November 23, 2010; amended at 35 Ill. Reg. 4556, effective March 4, 2011; amended at 35 Ill. Reg. 6386, effective March 31, 2011; amended at 35 Ill. Reg. 13875, effective August 1, 2011; amended at 36 Ill. Reg. 17413, effective December 3, 2012; amended at 38 Ill. Reg. 13280, effective June 10, 2014; amended at 39 Ill. Reg. 5443, effective March 25, 2015; amended at 39 Ill. Reg. 13041, effective September 3, 2015; amended at 41 Ill. Reg. 7154, effective June 12, 2017; amended at 41 Ill. Reg. _____, effective _____.

SUBPART A: GENERAL PROVISIONS

Section 250.100 Definitions

Abnormal Slide – a slide not having the characteristics of healthy tissue.

Act – the Hospital Licensing Act [210 ILCS 85].

Allied Health Personnel – persons other than medical staff members, licensed or registered by the State of Illinois or recognized by an organization acceptable to

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the Department and recognized to function within their licensed, registered or recognized capacity by the medical staff and the governing authority of the hospital.

Control Materials – a sample in which the chemical composition and physical properties resemble the specimen to be analyzed on which sufficient analyses have been run to give a reasonably good approximation of the concentration of the constituent being assayed. The control materials are routinely analyzed along with patient specimens to determine the precision and accuracy of the analytical process used.

Demonstration of proficiency – a laboratory meeting the standards for acceptable proficiency testing as stated in Section 250.530 by means of on-site analysis of specimens sent to the laboratory by agencies approved by the Department for that purpose.

Dentist – any person licensed to practice dentistry as provided in the Illinois Dental Practice Act [225 ILCS 25].

Department – the Illinois Department of Public Health.

Drugs – the term "drugs" means and includes:

articles recognized in the official United States Pharmacopoeia, official National Formulary, or any supplement to either of them and being intended for and having for their main use the diagnosis, cure, mitigation, treatment or prevention of disease in man or other animals;

all other articles intended for and having for their main use the diagnosis, cure, mitigation, treatment or prevention of disease in man or other animals;

articles (other than food) having for their main use and intended to affect the structure or any function of the body of man or other animals; and

articles having for their main use and intended for use as a component or any articles specified in this definition but does not include devices or their components, parts or accessories.

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Federally designated organ procurement agency – the organ procurement agency designated by the Secretary of the U.S. Department of Health and Human Services for the service area in which a hospital is located; except that in the case of a hospital located in a county adjacent to Wisconsin which currently contracts with an organ procurement agency located in Wisconsin that is not the organ procurement agency designated by the U.S. Secretary of Health and Human Services for the service area in which the hospital is located, if the hospital applies for a waiver pursuant to 42 USC 1320b-8(a), it may designate an organ procurement agency located in Wisconsin to be thereafter deemed its federally designated organ procurement agency for the purposes of the Act. (Section 3(F) of the Act)

Follow-up healthcare – healthcare services related to a sexual assault, including laboratory services and pharmacy services, rendered within 90 days after the initial visit for hospital emergency services. (Section 1a of the Sexual Assault Survivors Emergency Treatment Act)

Hospital – the term "hospital" shall have the meaning ascribed in Section 3(A) of the Act.

Hospitalization – the reception or care of any person in any hospital either as an inpatient or as an outpatient.

House Staff Member – an individual who is a graduate of a medical, dental, osteopathic, or podiatric school; who is licensed as appropriate; who is appointed to the hospital's medical, osteopathic, dental, or podiatric graduate training program that is approved or recognized in accordance with the statutory requirements applicable to the practitioner; and who is participating in patient care under the direction of licensed practitioners who have clinical privileges in the hospital and are members of the hospital's medical staff.

Licensed Practical Nurse – a person with a valid Illinois license to practice as a practical nurse under the Nurse Practice Act.

Medical Staff – an organized body composed of the following individuals granted the privilege by the governing authority of the hospital to practice in the hospital: persons who are graduates of a college or school approved or recognized by the Illinois Department of Financial and Professional Regulation, and who are currently licensed by the Department of Financial and Professional Regulation to

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practice medicine in all its branches; practice dental surgery; or, practice podiatric medicine in Illinois, regardless of the title of the degree awarded by the approving college or school.

Medicines – drugs or chemicals or preparations of drugs or chemicals in suitable form intended for and having for their main use the prevention, treatment, relief, or cure of diseases in man or animals when used either internally or externally.

Normal Slide – a slide having the characteristics of healthy tissue.

Nurse – a registered nurse or licensed practical nurse as defined in the Nurse Practice Act.

Nursing Staff – registered nurses, licensed practical nurses, nursing assistants and others who render patient care under the supervision of a registered professional nurse.

Patient Care Unit or Nursing Care Unit – an organized unit in which nursing services are provided on a continuous basis. This unit is a clearly defined administrative and geographic area to which specific nursing staff is assigned.

Pharmacist – a person who is licensed as a pharmacist under the Pharmacy Practice Act.

Pharmacy – the term "Practice of Pharmacy" includes, but is not limited to:

the soliciting of prescriptions;

the compounding of prescriptions;

the dispensing of any drug or medicine on a prescription;

the transfer of any drug or medicine from one container into another container that is to be delivered to or for the ultimate patient, on a prescription, or to or for the ultimate consumer, without a prescription;
and

the placing of directions for use or other required labeling information on a container of any drug or medicine which is to be delivered to or for the

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ultimate consumer, without a prescription.

The term "pharmacy" or "a drug store" as referred to in Section 3 of the Pharmacy Practice Act, means and includes that area licensed by the Department of Financial and Professional Regulation in which the practice of pharmacy is conducted. Any room or designated area where drugs and medicines are dispensed (including the repackaging for distribution to a nursing station or storage area) shall be considered to be a pharmacy and be licensed by the Department of Financial and Professional Regulation.

Physical Rehabilitation Facility – a licensed specialty hospital or clearly defined special unit or program of an acute care hospital providing physical rehabilitation services either through the facility's own staff members or when appropriate, through the mechanism of formal affiliations and consultations.

Physical Rehabilitation Services – a complete, intensive multi-disciplinary process of individualized, time-limited, goal-oriented services, including evaluation, restoration, personal adjustment, and continuous medical care under the supervision and direction of a physician "qualified by training and experience in physical rehabilitation." Physical rehabilitation has two major components: inpatient and outpatient care. Both components involve the patient and, whenever possible, the family in establishing treatment goals and discharge plans, and consist of the following scope of services available for inpatient care: physician, rehabilitation nursing, physical therapy, occupational therapy, speech therapy, audiology, prosthetic and orthotic services, as well as rehabilitation counseling, social services, recreational therapy, psychology, pastoral care, and vocational counseling. Basic scope of services for outpatient facilities shall include at least a physician, physical therapy, occupational therapy, speech therapy, vocational services, psychology and social service. The purpose of multi-faceted services is to reduce the disability and dependency in activities of daily living while promoting optimal personal adjustment in dimensions such as psychological, social, economic, spiritual and vocational.

Physician – a person licensed to practice medicine in all of its branches as provided in the Medical Practice Act of 1987.

Physician's Assistant – a person authorized to practice under the Physician Assistant Practice Act of 1987.

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Podiatrist – a person licensed to practice podiatry under the Podiatric Medical Practice Act of 1987.

Reference Materials – a sample in which the chemical composition and physical properties resemble the specimen to be analyzed on which sufficient analyses have been run to give a reasonably good approximation of the concentration of the constituent being assayed. The reference materials are routinely analyzed along with patient specimens to determine the precision and accuracy of the analytical process used.

Registered Nurse – a person with a valid Illinois license to practice as a registered professional nurse under the Nurse Practice Act.

Safe Lifting Equipment and Accessories – mechanical equipment designed to lift, move, reposition, and transfer patients, including, but not limited to, fixed and portable ceiling lifts, sit-to-stand lifts, slide sheets and boards, slings, and repositioning and turning sheets. (Section 6.25(a) of the Act)

Save Lifting Team – at least 2 individuals who are trained in the use of both safe lifting techniques and safe lifting equipment and accessories, including the responsibility for knowing the location and condition of such equipment and accessories. (Section 6.25(a) of the Act)

Standard Solution – a solution used for calibration in which the concentration is determined solely by dissolving a weighted amount of primary standard material in an appropriate amount of solvent.

Tissue bank – any facility or program operating in Illinois that is certified by the American Association of Tissue Banks or the Eye Bank Association of America and is involved in procuring, furnishing, donating, or distributing corneas, bones, or other human tissue for the purpose of injecting, transfusing or transplanting any of them into the human body. "Tissue bank" does not include a licensed blood bank. For the purposes of the Act, "tissue" does not include organs. (Section 3(G) of the Act)

(Source: Amended at 41 Ill. Reg. _____, effective _____)

Section 250.105 Incorporated and Referenced Materials

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- a) The following regulations and standards are incorporated in this Part:
- 1) Private and Professional Association Standards:
 - A) American Society for Testing and Materials (ASTM), Standard No. E90-99 (2002): Standard Test Method for Laboratory Measurement of Airborne Sound Transmission Loss of Building Partitions and Elements, which may be obtained from the American Society for Testing and Materials, 100 Barr Harbor Drive, West Conshohocken, Pennsylvania 19428-2959. (See Section 250.2420.)
 - B) The following standards of the American Society of Heating, Refrigerating, and Air Conditioning Engineers (ASHRAE), which may be obtained from the American Society of Heating, Refrigerating, and Air-Conditioning Engineers, Inc., 1791 Tullie Circle, N.E., Atlanta, Georgia 30329: (See Section 250.2480.)
 - i) ASHRAE Handbook of Fundamentals (2005)
 - ii) ASHRAE Handbook for HVAC Systems and Equipment (2004)
 - iii) ASHRAE Handbook-HVAC Applications (2003)
 - C) The following standards of the National Fire Protection Association (NFPA), which may be obtained from the National Fire Protection Association, 1 Batterymarch Park, Quincy, Massachusetts 02169:
 - i) NFPA 101 (2000): Life Safety Code (See Sections 250.2420, 250.2450, 250.2460, 250.2470, and 250.2490.)
 - ii) NFPA 10 (1998): Standards for Portable Fire Extinguishers (See Section 250.1980.)
 - iii) NFPA 13 (1999): Standards for the Installation of Sprinkler Systems (See Sections 250.2490 and 250.2670.)

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- iv) NFPA 14 (2000): Standard for the Installation of Standpipe, Private Hydrants and Hose Systems (See Sections 250.2490 and 250.2670.)
- v) NFPA 25 (1998): Standard for the Inspection, Testing and Maintenance of Water-Based Fire Protection Systems
- vi) NFPA 30 (1996): Flammable and Combustible Liquids Code (See Section 250.1980.)
- vii) NFPA 45 (1996): Standard on Fire Protection for Laboratories Using Chemicals
- viii) NFPA 54 (1999): National Fuel Gas Code
- ix) NFPA 70 (1999): National Electrical Code (See Sections 250.2440 and 250.2500.)
- x) NFPA 72 (1999): National Fire Alarm Code
- xi) NFPA 80 (1999): Standard for Fire Doors and Fire Windows (See Section 250.2450.)
- xii) NFPA 82 (1999): Standard on Incinerators and Waste and Linen Handling Systems and Equipment (See Section 250.2440.)
- xiii) NFPA 90A (1999): Standard for Installation of Air Conditioning and Ventilating Systems (See Sections 250.2480 and 250.2660.)
- xiv) NFPA 96 (1998): Standard for Ventilation Control and Fire Protection of Commercial Cooking Operations (See Section 250.2660.)
- xv) NFPA 99 (1999): Standard for Health Care Facilities (See Sections 250.1410, 250.1910, 250.1980, 250.2460, 250.2480, 250.2490 and 250.2660.)

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- xvi) NFPA 101-A (2001): Guide on Alternative Approaches to Life Safety (See Section 250.2620.)
 - xvii) NFPA 110 (1999): Standard for Emergency and Standby Power Systems
 - xviii) NFPA 220 (1999): Standard on Types of Building Construction (See Sections 250.2470 and 250.2620.)
 - xix) NFPA 221 (1997): Standard for Fire Walls and Fire Barrier Walls
 - xx) NFPA 241 (1996): Standard for Safeguarding Construction, Alteration and Demolition Operations
 - xxi) NFPA 255 and 258 (2000): Standard Method of Test of Surface Burning Characteristics of Building Materials, and Recommended Practice for Determining Smoke Generation of Solid Materials (See Section 250.2480.)
 - xxii) NFPA 701 (1999): Standard Methods of Fire Tests for Flame Propagation of Textiles and Films (See Sections 250.2460 and 250.2650.)
- D) American Academy of Pediatrics and American College of Obstetricians and Gynecologists, Guidelines for Perinatal Care, Seventh Edition (2012), which may be obtained from the American College of Obstetricians and Gynecologists Distribution Center, P.O. Box 933104, Atlanta, Georgia 31193-3104 (800-762-2264) (See Section 250.1820.)
- E) American College of Obstetricians and Gynecologists, Guidelines for Women's Healthcare, Fourth Edition (2014), which may be obtained from the American College of Obstetricians and Gynecologists Distribution Center, P.O. Box 933104, Atlanta, Georgia 31193-3104 (800-762-2264) (See Section 250.1820.)
- F) American Academy of Pediatrics (AAP), Red Book: Report of the Committee on Infectious Diseases, 28th Edition (2009), which may

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be obtained from the American Academy of Pediatrics, 141 Northwest Point Blvd., Elk Grove Village, Illinois 60007 (See Section 250.1820.)

- G) American Academy of Pediatrics and the American Heart Association, 2011 American Heart Association (AHA) Guidelines for Cardiopulmonary Resuscitation (CPR) and Emergency Cardiovascular Care (ECC) of Pediatric and Neonatal Patients: Neonatal Resuscitation Guidelines, which may be obtained from the American Academy of Pediatrics, 141 Northwest Point Blvd., Elk Grove Village, Illinois 60007, or at pediatrics.aappublications.org/cgi/reprint/117/5/e1029.pdf (See Section 250.1830.)
- H) National Association of Neonatal Nurses, Position Statement #3009 Minimum RN Staffing in NICUs, which may be obtained from the National Association of Neonatal Nurses, 4700 W. Lake Ave., Glenview, Illinois 60025, or at nann.org/pdf/08_3009_rev.pdf (See Section 250.1830.)
- I) National Council on Radiation Protection and Measurements (NCRP), Report 49: Structural Shielding Design and Evaluation for Medical Use of X-rays and Gamma Rays of Energies up to 10 MeV (1976) and NCRP Report 102: Medical X-Ray, Electron Beam and Gamma-Ray Protection for Energies Up to 50 MeV (Equipment Design, Performance and Use) (1989), which may be obtained from the National Council on Radiation Protection and Measurements, 7910 Woodmont Ave., Suite 800, Bethesda, Maryland 20814-3095 (See Sections 250.2440 and 250.2450.)
- J) DOD Penetration Test Method MIL STD 282 (1995): Filter Units, Protective Clothing, Gas-mask Components and Related Products: Performance Test Methods, which may be obtained from Naval Publications and Form Center, 5801 Tabor Avenue, Philadelphia, Pennsylvania 19120 (See Section 250.2480.)
- K) National Association of Plumbing-Heating-Cooling Contractors (PHCC), National Standard Plumbing Code (2003), which may be obtained from the National Association of Plumbing-

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Cooling Contractors, 180 S. Washington Street, P.O. Box 6808,
Falls Church, Virginia 22046 (703-237-8100)

- L) The International Code Council, International Building Code (2000), which may be obtained from the International Code Council, 4051 Flossmoor Road, Country Club Hills, Illinois 60477-5795 (See Section 250.2420.)
 - M) American National Standards Institute, Specifications for Making Buildings and Facilities Accessible to, and Usable by, the Physically Handicapped (1968), which may be obtained from the American National Standards Institute, 25 West 433rd Street, 4th Floor, New York, New York 10036 (See Section 250.2420.)
 - N) Accreditation Council for Graduate Medical Education, Essentials of Accredited Residencies in Graduate Medical Education (1997), which may be obtained from the Accreditation Council for Graduate Medical Education, 515 North State Street, Suite 2000, Chicago, Illinois 60610 (See Section 250.315.)
 - O) The Joint Commission, 2006 Hospital Accreditation Standards (HAS), Standard PC.3.10, which may be obtained from the Joint Commission, One Renaissance Boulevard, Oakbrook Terrace, Illinois 60181 (See Section 250.1035.)
 - P) National Quality Forum, Safe Practices for Better Health Care (2009), which may be obtained from the National Quality Forum, 601 13th Street, NW, Suite 500 North, Washington DC 20005, or from www.qualityforum.org
- 2) Federal Government Publications:
- A) Department of Health and Human Services, United States Public Health Service, Centers for Disease Control and Prevention, "Guideline for Isolation Precautions: Preventing Transmission of Infectious Agents in Healthcare Settings 2007" and "Guidelines for Infection Control in Health Care Personnel, 1998, which may be obtained from National Technical Information Service (NTIS), U.S. Department of Commerce, 5285 Port Royal Road,

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Springfield, Virginia 22161 (See Section 250.1100.)

- B) Department of Health and Human Services, United States Public Health Service, Centers for Disease Control and Prevention, "Guidelines for Environmental Infection Control in Health-Care Facilities: Recommendations – Animals in Health Care Facilities", "Morbidity and Mortality Weekly Report", June 6, 2003/Vol. 52/No. RR-10, which may be obtained from the Centers for Disease Control and Prevention, 1600 Clifton Road, MS K-95, Atlanta, Georgia 30333
 - C) Department of Health and Human Services, United States Public Health Services, Centers for Disease Control and Prevention, "Guidelines for Hand Hygiene in Health-Care Settings", October 25, 2002, which may be obtained from the National Technical Information Services (NTIS), U.S. Department of Commerce, 5285 Port Royal Road, Springfield, Virginia 22161
 - D) Department of Health and Human Services, United States Public Health Service, Centers for Disease Control and Prevention, "Guidelines for Disinfection and Sterilization in Healthcare Facilities, 2008", which may be obtained from the Centers for Disease Control and Prevention, 1600 Clifton Road, Atlanta, Georgia 30333
 - E) National Center for Health Statistics and World Health Organization, Geneva, Switzerland, "International Classification of Diseases", 10th Revision, Clinical Modification (ICD-10-CM) (1990), Version for 2015, which can be accessed at <http://www.who.int/classifications/icd/en/>
- 3) Federal Regulations
- A) 45 CFR 46.101, To What Does the Policy Apply? (October 1, 2014)
 - B) 45 CFR 46.103(b), Assuring Compliance with this Policy – Research Conducted or Supported by any Federal Department or Agency (October 1, 2014)

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- C) 42 CFR 482, Conditions of Participation for Hospitals (October 1, 2014)
 - D) 21 CFR, Food and Drugs (April 1, 2014)
 - E) 42 CFR 489.20, Basic Commitments (October 1, 2014)
 - F) 29 CFR 1910.1030, Bloodborne Pathogens (July 1, 2014)
 - G) 42 CFR 413.65(d) and (e), Requirements for a determination that a facility or an organization has provider-based status (October 1, 2014)
- b) All incorporations by reference of federal regulations and guidelines and the standards of nationally recognized organizations refer to the regulations, guidelines and standards on the date specified and do not include any editions or amendments subsequent to the date specified.
- c) The following statutes and State regulations are referenced in this Part:
- 1) State of Illinois statutes:
 - A) Hospital Licensing Act [210 ILCS 85]
 - B) Illinois Health Facilities Planning Act [20 ILCS 3960]
 - C) Medical Practice Act of 1987 [225 ILCS 60]
 - D) Podiatric Medical Practice Act of 1987 [225 ILCS 100]
 - E) Pharmacy Practice Act [225 ILCS 85]
 - F) Physician Assistant Practice Act of 1987 [225 ILCS 95]
 - G) Illinois Clinical Laboratory and Blood Bank Act [210 ILCS 25]
 - H) X-ray Retention Act [210 ILCS 90]

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- D) Safety Glazing Materials Act [430 ILCS 60]
- J) Mental Health and Developmental Disabilities Code [405 ILCS 5]
- K) Nurse Practice Act [225 ILCS 65]
- L) Health Care Worker Background Check Act [225 ILCS 46]
- M) MRSA Screening and Reporting Act [210 ILCS 83]
- N) Hospital Report Card Act [210 ILCS 88]
- O) Illinois Adverse Health Care Events Reporting Law of 2005 [410 ILCS 522]
- P) Smoke Free Illinois Act [410 ILCS 82]
- Q) Health Care Surrogate Act [755 ILCS 40]
- R) Perinatal HIV Prevention Act [410 ILCS 335]
- S) Hospital Infant Feeding Act [210 ILCS 81]
- T) Medical Patient Rights Act [410 ILCS 50]
- U) Hospital Emergency Service Act [210 ILCS 80]
- V) Illinois Anatomical Gift Act [775 ILCS 50]
- W) Illinois Public Aid Code [305 ILCS 5]
- X) Illinois Alcoholism and Other Drug Abuse and Dependency Act [20 ILCS 305]
- Y) ID/DD Community Care Act [210 ILCS 47]
- Z) Specialized Mental Health Rehabilitation Act [210 ILCS 48]
- AA) Veterinary Medicine and Surgery Practice Act of 2004 [225 ILCS

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- BB) Alternative Health Care Delivery Act [210 ILCS 3]
- CC) Gestational Surrogacy Act [750 ILCS 47]
- DD) Code of Civil Procedure [\(Medical Studies\)](#) [735 ILCS 5/8-2101]
- [EE\) Sexual Assault Survivors Emergency Treatment Act \[410 ILCS 70\]](#)

2) State of Illinois Administrative Rules:

- A) Department of Public Health, Illinois Plumbing Code (77 Ill. Adm. Code 890)
- B) Department of Public Health, Sexual Assault Survivors Emergency Treatment Code (77 Ill. Adm. Code 545)
- C) Department of Public Health, Control of Communicable Diseases Code (77 Ill. Adm. Code 690)
- D) Department of Public Health, Food Service Sanitation Code (77 Ill. Adm. Code 750)
- E) Department of Public Health, Public Area Sanitary Practice Code (77 Ill. Adm. Code 895)
- F) Department of Public Health, Maternal Death Review (77 Ill. Adm. Code 657)
- G) Department of Public Health, Control of Sexually Transmissible Infections Code (77 Ill. Adm. Code 693)
- H) Department of Public Health, Control of Tuberculosis Code (77 Ill. Adm. Code 696)
- I) Department of Public Health, Health Care Worker Background Check Code (77 Ill. Adm. Code 955)

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- J) Department of Public Health, Language Assistance Services Code (77 Ill. Adm. Code 940)
 - K) Department of Public Health, Regionalized Perinatal Health Care Code (77 Ill. Adm. Code 640)
 - L) Health Facilities and Services Review Board, Narrative and Planning Policies (77 Ill. Adm. Code 1100)
 - M) Health Facilities and Services Review Board, Processing, Classification Policies and Review Criteria (77 Ill. Adm. Code 1110)
 - N) Department of Public Health, Private Sewage Disposal Code (77 Ill. Adm. Code 905)
 - O) Department of Public Health, Ambulatory Surgical Treatment Center Licensing Requirements (77 Ill. Adm. Code 205)
 - P) Capital Development Board, Illinois Accessibility Code (71 Ill. Adm. Code 400)
 - Q) State Fire Marshal, Boiler and Pressure Vessel Safety (41 Ill. Adm. Code 120)
 - R) State Fire Marshal, Fire Prevention and Safety (41 Ill. Adm. Code 100)
 - S) Illinois Emergency Management Agency, Standards for Protection Against Radiation (32 Ill. Adm. Code 340)
 - T) Illinois Emergency Management Agency, Use of X-rays in the Healing Arts Including Medical, Dental, Podiatry, and Veterinary Medicine (32 Ill. Adm. Code 360)
- 3) Federal Statutes:

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- A) Health Insurance Portability and Accountability Act of 1996 (110 USC 1936)
- B) Emergency Medical Treatment & Labor Act (42 USC 1395dd)

(Source: Amended at 41 Ill. Reg. _____, effective _____)

SUBPART G: GENERAL HOSPITAL EMERGENCY SERVICES

Section 250.750 Emergency Services for Sexual Assault Victims

- a) All hospitals providing emergency services ~~shall be required to~~ render care to victims of sexual assault. ~~The Such~~ care shall be in accordance with 77 Ill. Adm. Code 545.60 ~~(Treatment of Sexual Assault Survivors) the Victims.~~
- b) A hospital may fulfill its obligation to provide emergency service to sexual assault victims by participating in an areawide plan for emergency service in accordance with 77 Ill. Adm. Code 545.50 ~~(Areawide Sexual Assault Treatment Plans) Treatment of Sexual Assault Victims, as now or hereafter amended.~~
- c) Pursuant to, but not limited to, Sections 7 and 7.5 of the Sexual Assault Survivors Emergency Treatment Act, a hospital shall not seek payment from a sexual assault survivor who presents at a hospital for emergency and forensic services. If the Department becomes aware that a sexual assault survivor has been billed for treatment, the Department will refer the matter to the Office of the Attorney General for enforcement.
- d) The hospital shall provide a sexual assault survivor with a voucher. For the purposes of this Section, a voucher is a document generated by a hospital at the time the sexual assault survivor receives hospital emergency and forensic services that a sexual assault survivor may present to providers for follow-up healthcare. (Section 1a of the Sexual Assault Survivors Emergency Treatment Act)

(Source: Amended at 41 Ill. Reg. _____, effective _____)

SUBPART L: RECORDS AND REPORTS

Section 250.1510 Medical Records

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- a) Facilities
 - 1) The hospital shall maintain medical record facilities with adequate supplies and equipment.
 - 2) Medical records shall be stored safely. Medical records shall be handled so as to assure safety from water seepage or fire damage and are to be safeguarded from unauthorized use.
- b) Organization
 - 1) Responsible Personnel
 - A) A qualified health information practitioner (registered health information administrator or accredited health information technician) shall be employed or contracted as the director of the medical records department.
 - B) The director of the medical records department shall participate in educational programs relative to health information activities, on-the-job training and orientation of other medical record personnel, and in-service health information educational programs. Professional consultation services shall be provided for the health information practitioner.
 - 2) An adequate, accurate, timely, and complete medical record shall be maintained for each patient. Minimum requirements for medical record content are :
 - A) Patient identification and admission information;
 - B) The history of the patient as to chief complaints, present illness and pertinent medical history, family history, and social history;
 - C) A physical examination report;
 - D) Provisional diagnosis;
 - E) Diagnostic and therapeutic reports on laboratory test results, x-ray

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findings, any surgical procedure performed, any pathological examination, any consultation, and any other diagnostic or therapeutic procedure performed;

- F) Orders and progress notes made by the attending physician and, when applicable, by other members of the medical staff and allied health personnel;
 - G) Observations notes and vital sign charting made by nursing personnel; and
 - H) Conclusions as to the primary and any associated diagnoses; brief clinical resume; disposition at discharge, including instructions and medications; and any autopsy findings on a hospital death.
- 3) For record requirements pertaining to obstetric patients and newborn infants, see Section 250.1830(h).
 - 4) A committee of the organized medical staff shall be responsible for reviewing medical records to ensure adequate documentation, completeness, promptness, and clinical pertinence.
 - 5) The hospital shall establish requirements for the completion of medical records and for the retention period for medical records. Definite policies and procedures pertaining to the use of medical records and the release of medical record information shall be issued, and discharge diagnoses shall be expressed in terminology of a recognized disease nomenclature.
 - 6) When a hospital provides a sexual assault survivor with a voucher in compliance with Section 250.750(d), the hospital shall make a copy of the voucher and place it in the medical record of the sexual assault survivor. The hospital shall provide a copy of the voucher to the sexual assault survivor after discharge upon request. (Section 5(b-5) of the Sexual Assault Survivors Emergency Treatment Act)
- c) Authentication of Medical Record Entries
 - 1) All entries into the medical record shall be authenticated by the individual who made or authorized the entry. "Authentication," for purposes of this

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Section, means identification of the author of a medical record entry by that author, and confirmation that the contents are what the author intended, except that telephone orders may be authenticated by the ordering practitioner or another practitioner who is responsible for the care of the patient and who is authorized to write orders pursuant to Section 250.330.

- 2) Medical record entries shall include all notes, orders or observations made by direct patient care providers and any other individuals required to make the entries in the medical record, and written interpretive reports of diagnostic tests or specific treatments, including, but not limited to, radiologic or electrocardiographic reports, operative reports, reports of pathologic examination of tissue and other similar reports. The medical record may include entries that are transmitted by facsimile machine, provided that the faxed copies are on non-thermal paper and that the faxed copies are dated and authenticated pursuant to hospital policy approved by the medical staff.
- 3) Written signatures or initials and electronic signatures or computer-generated signature codes are acceptable as authentication. All signatures or initials, whether written, electronic, or computer-generated, shall include the initials of the signer's credentials.
- 4) If a hospital uses electronic signatures or computer-generated signature codes for authentication purposes, the hospital's medical staff and governing board shall adopt a policy that permits authentication by electronic or computer-generated signature. The policy shall identify those categories of the medical staff, allied health staff or other personnel within the hospital who are authorized to authenticate patient records using electronic or computer-generated signatures.
- 5) At a minimum, the policy shall include adequate safeguards to ensure confidentiality, including, but not limited to, the following:
 - A) Each user shall be assigned a unique identifier that is generated through a confidential access code.
 - B) The hospital shall certify in writing that each identifier is kept strictly confidential. This certification shall include a commitment

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to terminate a user's use of a particular identifier if it is found that the identifier has been misused. "Misused" shall mean that the user has allowed another person or persons to use his or her personally assigned identifier, or that the identifier has otherwise been inappropriately used.

- C) The user shall certify in writing that he or she is the only person with user access to the identifier and the only person authorized to use the signature code.
 - D) The hospital shall monitor the use of identifiers periodically and take corrective action as needed. The process by which the hospital will conduct the monitoring shall be described in the policy.
- 6) A system employing the use of electronic signatures or computer-generated signature codes for authentication shall include a verification process to ensure that the content of authenticated entries is accurate. The verification process shall include, at a minimum, the following provisions:
- A) The system shall require completion of certain designated fields for each type of document before the document may be authenticated, with no blanks, gaps or obvious contradictory statements appearing within those designated fields. The system shall also require that previously authenticated entries are corrected or supplemented by additional entries, separately authenticated and made after the original entry.
 - B) The system shall allow the user to verify that the document is accurate and that the signature has been properly recorded.
 - C) The hospital shall, as part of its quality assurance activities, periodically sample records generated by the system to verify the accuracy and integrity of the system.
- 7) A user may terminate authorization for use of electronic or computer-generated signature upon written notice to the Director of Medical Records or other person designated by the hospital's policy.

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- 8) Each report generated by a user shall be separately authenticated.
- d) Indexing
- 1) A patient index that serves as a key to the location of the medical record of each person who is or has been an inpatient shall be maintained as a perpetual master index. A daily register of patients admitted to the hospital and babies born in the hospital shall be maintained.
 - 2) Medical records shall be classified and indexed according to diagnoses, surgical procedures, and physician, and other indices shall be developed as deemed necessary for the advancement of medical care.
 - 3) The International Classification of Diseases shall be used as the statistical classification for purposes of uniformity and ~~compatibility~~~~compatability~~ of data between and among hospitals.
- e) Preservation
- 1) All original medical records or photographs of records shall be preserved in accordance with Section 6.17 of the Act.
 - 2) The hospital shall have a policy for the preservation of patient medical records if the hospital closes.

(Source: Amended at 41 Ill. Reg. _____, effective _____)

SUBPART T: DESIGN AND CONSTRUCTION STANDARDS

Section 250.2420 Submission of Plans for New Construction, Alterations or Additions to Existing Facility

- a) New Construction, Addition, or Major Alteration
- 1) ~~When construction is contemplated,~~ For all construction of either ~~for~~ new buildings or additions or ~~material~~ alterations to existing buildings coming within the scope of this Part, design development drawings and outline specifications shall be submitted to the Department for review. Approval of design development drawings and specifications shall be obtained from

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the Department prior to starting final working drawings and specifications. Comments or approval shall be provided within 30 days after receipt by the Department.

- 2) Final Drawings
 - A) The final working drawings and specifications shall be submitted to the Department for review and approval prior to the beginning of construction. Alternative methods of design development and construction may be acceptable subject to the approval of the Department. Department approval is ~~null and~~ void if construction contracts are not executed and construction is not started within one year after the plan approval date. Comments by the Department shall be provided within 60 days after the day on which the submission is deemed complete.
 - B) The Department shall be notified of the award of construction contracts.
- 3) Any contract modifications that affect or change the function, design, or purpose of a facility shall be submitted to the Department for approval prior to ~~proceeding with~~ ~~authorizing the~~ modifications. Comments or approval shall be provided within 30 days after receipt by the Department.
- 4) *The Department will conduct an on-site inspection of the completed project no later than 15 business days after notification from the applicant that the project has been completed and all certifications required by the Department have been received and accepted by the Department. The Department may extend this deadline only if a federally mandated survey time frame takes precedence. The Department will provide written approval for occupancy to the applicant within 5 working days after the Department's final inspection, provided the applicant has demonstrated substantial compliance. Occupancy of new major construction is prohibited until Department approval is received, unless the Department has not acted within the time frames provided in Section 8(g) of the Act and this subsection (a)(4), in which case the construction shall be deemed approved. Occupancy will be authorized after any required health inspection by the Department has been conducted. (Section 8(g) of the Act)*~~The Department shall be notified when construction has been~~

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~~completed or whenever any area is occupied.~~

- 5) As-built drawings shall be maintained by the hospital. For the purposes of this Section, "as-built drawings" are the original design drawings revised to reflect any changes made in the field, including, but not limited to, design changes issued by change order, component relocations required for coordination, or rerouting of distribution systems.
- b) Minor Alterations and Remodeling. Minor alterations or remodeling changes that do not affect the structural integrity of the building, that do not change functional operation, that do not affect fire safety, and that do not add beds or facilities over those for which the hospital is licensed do not need to need not be submitted for approval.
- c) Alterations of Water Supply, Plumbing and Drainage. No system of water supply, plumbing, sewage, garbage or refuse disposal shall be installed, nor shall any ~~such~~ existing system be ~~materially~~ altered or extended, until complete plans and specifications for the installation, alteration or extension have been submitted to the Department and have been reviewed and approved.
- d) Codes and Standards
 - 1) Nothing ~~stated~~ in this Part shall relieve the sponsor from compliance with building codes, ordinances, and regulations that are enforced by city or county jurisdictions.
 - 2) The recommendations of the International Building Code shall apply insofar as ~~the such~~ recommendations are not in conflict with ~~the standards set forth in~~ this Part or with the ~~National Fire Protection Association (NFPA) Standard No. 101. For construction of new buildings or additions, renovations, or alterations to existing buildings coming within the scope of this Part in municipalities with no building code of their own, the hospital may comply with the International Building Code, "Life Safety Code."~~ ~~The International Building Code is intended as a model code for municipalities with no building code of their own.~~
 - 3) The codes and standards referenced in this Part ~~may can~~ be ordered from the various agencies at the addresses listed in Section ~~250.105250.160~~ and are effective on the dates cited in that Section.

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(Source: Amended at 41 Ill. Reg. _____, effective _____)

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- 1) Heading of the Part: Sexual Assault Survivors Emergency Treatment Code
- 2) Code Citation: 77 Ill. Adm. Code 545
- 3)

<u>Section Numbers:</u>	<u>Proposed Actions:</u>
545.20	Amendment
545.100	New Section
- 4) Statutory Authority: Sexual Assault Survivors Emergency Treatment Act [410 ILCS 70]
- 5) A Complete Description of the Subjects and Issues Involved: This rulemaking seeks to implement PA 99-454 with regard to the required written notice that advises survivors that they should not be directly billed for emergency services, that they will receive a voucher for follow-up care, and phone numbers for reporting violations of the Act. The rulemaking also updates the definition section.

The economic effect of this proposed rulemaking is unknown. Therefore, the Department requests any information that would assist in calculating this effect.

The Department anticipates adoption of this rulemaking approximately six to nine months after publication of the Notice in the *Illinois Register*.

- 6) Published studies or reports, and sources of underlying data, used to compose this rulemaking: None
- 7) Will this rulemaking replace any emergency rule currently in effect? No
- 8) Does this rulemaking contain an automatic repeal date? No
- 9) Does this rulemaking contain incorporations by reference? No
- 10) Are there any other rulemakings pending on this Part? No
- 11) Statement of Statewide Policy Objective: This rulemaking does not create a State mandate.
- 12) Time, Place and Manner in which interested persons may comment on this proposed rulemaking: Interested persons may present their comments concerning this rulemaking within 45 days after this issue of the *Illinois Register* to:

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Springfield IL 62761

217/782-2043
e-mail: dph.rules@illinois.gov

- 13) Initial Regulatory Flexibility Analysis:
- A) Types of small businesses, small municipalities and not-for-profit corporations affected: Hospitals
 - B) Reporting, bookkeeping or other procedures required for compliance: Hospitals will be required to draft notice forms that comply with the Act and Part 545.
 - C) Types of professional skills necessary for compliance: Accounting
- 14) Regulatory Agenda on which this rulemaking was summarized: January 2017

The full text of the Proposed Amendments begins on the next page:

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TITLE 77: PUBLIC HEALTH
CHAPTER I: DEPARTMENT OF PUBLIC HEALTH
SUBCHAPTER f: EMERGENCY SERVICES AND HIGHWAY SAFETYPART 545
SEXUAL ASSAULT SURVIVORS
EMERGENCY TREATMENT CODE

Section

- 545.10 Applicability
545.20 Definitions
545.25 Incorporated and Referenced Materials
545.30 Application of Rules (Repealed)
545.35 Development and Approval of Plans
545.40 Program Administration (Repealed)
545.50 Areawide Sexual Assault Treatment Plans
545.60 Treatment of Sexual Assault Survivors
545.65 Transfer of Sexual Assault Survivors
545.67 Compliance Review
545.70 Requirements of Sexual Assault Transfer Plans (Repealed)
545.80 Approval of a Sexual Assault Treatment Plan (Repealed)
545.90 Approval of a Sexual Assault Transfer Plan (Repealed)
545.95 Emergency Contraception
545.100 [Written Notice to Sexual Assault Survivors](#)~~Hospital Charges and Reimbursement (Repealed)~~
- 545.APPENDIX A Sexual Assault Treatment Plan Form
545.APPENDIX B Sexual Assault Transfer Plan Form
545.APPENDIX C Emergency Contraception Protocols

AUTHORITY: Implementing and authorized by the Sexual Assault Survivors Emergency Treatment Act [410 ILCS 70].

SOURCE: Filed December 30, 1977; rules repealed and new rules adopted at 5 Ill. Reg. 1139, effective January 23, 1981; codified at 8 Ill. Reg. 16334; amended at 11 Ill. Reg. 1589, effective February 1, 1987; amended at 12 Ill. Reg. 20790, effective December 1, 1988; emergency amendment at 26 Ill. Reg. 5151, effective April 1, 2002, for a maximum of 150 days; emergency expired August 28, 2002; amended at 27 Ill. Reg. 1567, effective January 15, 2003; amended at

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33 Ill. Reg. 14588, effective October 9, 2009; amended at 34 Ill. Reg. 12214, effective August 4, 2010; amended at 41 Ill. Reg. _____, effective _____.

Section 545.20 Definitions

Act – the Sexual Assault Survivors Emergency Treatment Act [410 ILCS 70].

Advanced practice nurse or APN – a person who has met the qualifications of a certified nurse midwife (CNM); certified nurse practitioner (CNP); certified registered nurse anesthetist (CRNA); or clinical nurse specialist (CNS) and has been licensed by the Department of Financial and Professional Regulation, as defined in the Nurse Practice Act. (Section 50-5 of the Nurse Practice Act)

Ambulance provider – an individual or entity that owns and operates a business or service using ambulances or emergency medical services vehicles to transport emergency patients. (Section 1a of the Act)

Areawide sexual assault treatment plan or areawide plan – a plan, developed by the hospitals in the community or area to be served, which provides for hospital emergency services to sexual assault survivors that shall be made available by each of the participating hospitals. (Section 1a of the Act)

Caregiver – any person who is legally responsible for providing care to the patient or who renders support to the patient.

Department – the Department of Public Health. (Section 1a of the Act)

Drug-facilitated sexual assault – the use of a ~~chemical submissive agent~~controlled substance, commonly called a "date rape drug", in the commission of a sex offense, given without consent of the victim, that produces relaxant effects, including blackouts, coma, impaired judgment and/or loss of coordination.

Emergency contraception – medication as approved by the federal Food and Drug Administration (FDA) that can significantly reduce the risk of pregnancy if taken within 72 hours after sexual assault. (Section 1a of the Act)

Follow-up healthcare – healthcare services related to a sexual assault, including laboratory services and pharmacy services, rendered within 90 days after the initial visit for hospital emergency services. (Section 1a of the Act)

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Forensic services – the collection of evidence pursuant to a statewide sexual assault evidence collection program administered by the Department of State Police, using the Illinois State Police Sexual Assault Evidence Collection Kit. (Section 1a of the Act)

Health care professional – a physician, a physician assistant, or an advanced practice nurse. (Section 1a of the Act)

Hospital – has the meaning given to that term in the Hospital Licensing Act. (Section 1a of the Act)

Hospital emergency services – health care delivered to outpatients within or under the care and supervision of personnel working in a designated emergency department of a hospital, including, but not limited to, care ordered by such personnel for a sexual assault survivor in the emergency department. (Section 1a of the Act)

Illinois State Police Sexual Assault Evidence Collection Kit – a prepackaged set of materials and forms to be used for the collection of evidence relating to sexual assault. The standardized evidence collection kit for the State of Illinois shall be the Illinois State Police Sexual Assault Evidence Collection Kit. (Section 1a of the Act)

Nurse – a person licensed under the Nurse Practice Act. (Section 1a of the Act)

Physician – a person licensed to practice medicine in all its branches as defined in the Medical Practice Act of 1987. (Section 1a of the Act) ~~Physician assistant – any person not a physician who has been certified as a physician assistant by the National Commission on the Certification of Physician Assistants or equivalent successor agency and performs procedures under the supervision of a physician as defined in the Physician Assistant Practice Act of 1987. (Section 4 of the Physician Assistant Practice Act of 1987)~~

Physician assistant – any person not a physician who has been certified as a physician assistant by the National Commission on the Certification of Physician Assistants or equivalent successor agency and performs procedures under the supervision of a physician as defined in the Physician Assistant Practice Act of 1987. (Section 4 of the Physician Assistant Practice Act of 1987)

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Sexual assault – an act of nonconsensual sexual conduct or sexual penetration, as defined in Section ~~11-0.112-12~~ of the Criminal Code of ~~2012-1961~~, including, without limitation, acts prohibited under Sections ~~11-1.20 through 11-1.60 of the Criminal Code of 2012-12-13 through 12-16 of the Criminal Code of 1961~~.

(Section 1a of the Act)

Sexual assault nurse examiner – a registered nurse who has completed a sexual assault nurse examiner (SANE) training program that meets the Forensic Sexual Assault Nurse Examiner Education Guidelines established by the International Association of Forensic Nurses. (Section 6.4(c) of the Act)

Sexual assault survivor or survivor – a person who presents for hospital emergency services in relation to injuries or trauma resulting from a sexual assault. (Section 1a of the Act)

Sexual assault transfer plan – a written plan developed by a hospital and approved by the Department, which describes the hospital's procedures for transferring sexual assault survivors to another hospital in order to receive emergency treatment. (Section 1a of the Act)

Sexual assault treatment plan – a written plan developed by a hospital that describes the hospital's procedures and protocols for providing hospital emergency services and forensic services to sexual assault survivors who present themselves for such services, either directly or through transfer from another hospital. (Section 1a of the Act)

Transfer hospital – a hospital that provides only transfer services to sexual assault survivors, pursuant to an Areawide Sexual Assault Treatment Plan.

Transfer services – the appropriate medical screening examination and necessary stabilizing treatment prior to the transfer of a sexual assault survivor to a hospital that provides hospital emergency services and forensic services to sexual assault survivors pursuant to a sexual assault treatment plan or areawide sexual assault treatment plan. (Section 1a of the Act)

Treatment hospital – a hospital that provides hospital emergency treatment services and forensic evidence collection to sexual assault survivors, pursuant to a sexual assault treatment plan or areawide sexual assault treatment plan.

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Unauthorized personnel – all individuals whose presence in the examination room is not desired or required either by the hospital and/or by the survivor (e.g., representatives of the media).

Voucher – a document generated by a hospital at the time the sexual assault survivor receives hospital emergency and forensic services that a sexual assault survivor may present to providers to cover the cost of any follow-up healthcare. (Section 1a of the Act)

(Source: Amended at 41 Ill. Reg. _____, effective _____)

Section 545.100 Written Notice to Sexual Assault Survivors~~Hospital Charges and Reimbursement (Repealed)~~

- a) Every hospital providing treatment services to sexual assault survivors in accordance with a plan approved under Section 2 of the Act and this Section shall provide a written notice to a sexual assault survivor. The written notice shall include, but is not limited to, the following:
- 1) A statement that the sexual assault survivor should not be directly billed by any ambulance provider providing transportation services, or by any hospital, health care professional, laboratory, or pharmacy for the services the sexual assault survivor received as an outpatient at the hospital;
 - 2) A statement that a sexual assault survivor who is admitted to a hospital may be billed for inpatient services provided by a hospital, health care professional, laboratory, or pharmacy;
 - 3) A statement that, prior to the sexual assault survivor leaving the emergency department of the treating facility, the hospital will give the sexual assault survivor a voucher for follow-up healthcare if the sexual assault survivor is eligible to receive a voucher;
 - 4) The definition of "follow-up healthcare" as set forth in Section 1a of the Act and Section 545.20 of this Part;
 - 5) A phone number the sexual assault survivor may call should the sexual

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assault survivor receive a bill from the hospital for hospital emergency services and forensic services; and

6) The toll-free phone number of the Office of the Illinois Attorney General, Crime Victim Services Division, that the sexual assault survivor may call should the sexual assault survivor receive a bill from an ambulance provider, a health care professional, a laboratory, or a pharmacy.

b) This Section shall not apply to hospitals that provide transfer services as defined under Section 1a of the Act and Section 545.20 of this Part. (Section 7.5 of the Act)

(Source: Old Section repealed at 33 Ill. Reg. 14588 and new Section added at 41 Ill. Reg. _____, effective _____)

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- 1) Heading of the Part: Video Gaming (General)
- 2) Code Citation: 11 Ill. Adm. Code 1800
- 3) Section Number: 1800.320 Adopted Action:
Amendment
- 4) Statutory Authority: Authorized by the Video Gaming Act [230 ILCS 40], specifically Section 78 (a) (3) of that Act [230 ILCS 40/78 (a) (3)].
- 5) Effective Date of Rules: July 13, 2017
- 6) Does this rulemaking contain an automatic repeal date? No
- 7) Does this rulemaking contain incorporations by reference? No
- 8) A copy of the adopted rules, including any material incorporated by reference, is on file in the principal office and is available for public inspection.
- 9) Notice of Proposal published in the *Illinois Register*: 41 Ill. Reg. 2696; February 24, 2017
- 10) Has JCAR issued a Statement of Objection to this rulemaking? No
- 11) Differences between Proposal and Final Version: The rulemaking gave the Board authority to decide whether a terminal operator has used "coercion, deception or improper inducement to persuade a licensed video gaming operator to enter into or renew a use agreement". The final version provides that the Board has authority to decide whether "a terminal operator or anyone on its behalf has used coercion, deception, or an inducement or incentive in violation of Section 25(c) of the Video Gaming Act [230 ILCS 40/25] or this Part to persuade a licensed video gaming location to enter into or renew a use agreement".

The rulemaking gave the Administrator authority to require a conference with the parties *after* the Administrator had rendered a recommended decision. The final version provides that such a conference will be held *before* the Administrator has issued a recommended decision.

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The final version adds new language requiring notification to parties of the Administrator's recommended decision.

The final version contains stylistic improvements and corrective changes which are non-substantive in character.

- 12) Have all the changes agreed upon by the Agency and JCAR been made as indicated in the agreement letter issued by JCAR? Yes
- 13) Will this rulemaking replace any emergency rule currently in effect? Yes
- 14) Are there any rulemakings pending on this Part? Yes

<u>Section Numbers:</u>	<u>Proposed Actions:</u>	<u>Illinois Register Citation:</u>
1800.250	Amendment	41 Ill. Reg. 2751; March 3, 2017
1800.110	Amendment	41 Ill. Reg. 2777; March 10, 2017
1800.320	Amendment	41 Ill. Reg. 2777; March 10, 2017
1800.1710	New Section	41 Ill. Reg. 2777; March 10, 2017
1800.1720	New Section	41 Ill. Reg. 2777; March 10, 2017
1800.1730	New Section	41 Ill. Reg. 2777; March 10, 2017
1800.1740	New Section	41 Ill. Reg. 2777; March 10, 2017
1800.810	Amendment	41 Ill. Reg. 3088; March 17, 2017
1800.570	Amendment	41 Ill. Reg. 7409; June 30, 2017
1800.595	New Section	41 Ill. Reg. 7409; June 30, 2017
1800.615	Amendment	41 Ill. Reg. 7409; June 30, 2017
1800.715	Amendment	41 Ill. Reg. 7409; June 30, 2017

- 15) Summary and Purpose of Rulemaking: The present rulemaking will replace an Emergency Rulemaking (41 Ill. Reg. 2696, effective February 7, 2017).

Under the procedures established by this rulemaking, the Board shall decide a petition brought by a terminal operator or licensed video gaming location alleging that a use agreement, or portion thereof, is invalid or unenforceable. Issues which the Administrator has authority to decide include, but are not limited to, the following:

Where two or more use agreements between a licensed video gaming location and one or more terminal operators have overlapping effective dates, which of the agreements is valid during the period of overlap.

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Whether a use agreement, or portion thereof, complies with the requirements of the Video Gaming Act and rules.

Whether a renewal provision in a use agreement poses such obstacles against non-renewal, or confusion about the procedures for non-renewal, as to constitute an undue burden on the licensed video gaming location which has entered into it.

Whether a terminal operator has used coercion, deception or inducements or incentives in violation of Section 25(c) of the Video Gaming Act [230 ILCS 40/25(c) or this Part to persuade a licensed video gaming operator to enter into, or renew, a use agreement.

Persons challenging a use agreement shall file a petition with the Administrator. The petition shall include detailed facts and reasons upon which the petitioner relies in arguing that a use agreement, or portion thereof, is invalid or unenforceable. Petitions may include documentary evidence and affidavits. A petitioner shall bear the burden of proof by clear and convincing evidence.

Following submission of a petition meeting procedural requirements, the Administrator shall promptly send by certified mail a complete copy of the petition, including supporting documents, to each non-petitioning terminal operator or licensed video gaming location named in the petition. Non-petitioning parties named in the petition shall have 21 days to file a response.

After the expiration of the 21-day response period, the Administrator shall issue a written recommended decision on the validity or enforceability of the contested use agreement, or contested portions thereof, based on the contents of the petition and any responses. The Administrator's recommended decision shall set forth the reasons the Administrator is recommending the granting or denial of petition. Where the petition asserts more than one claim as to the use agreement's validity or enforceability, the Administrator shall render a separate recommended decision for each claim.

Before rendering a recommended decision, the Administrator may require the parties to attend a conference to attempt to settle their disputes.

A petitioning party or party named in a petition brought under this subsection may file exceptions to the recommended decision of the Administrative Law Judge with the Board no later than 14 days after receipt of the recommended decision. Exceptions shall specify

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each finding of fact and conclusion of law to which exception is taken. There shall be no oral argument on exceptions.

Any relief given by the Board under this rulemaking is limited to deciding which use agreement, or portion thereof, is valid for the placement and operation of video gaming terminals in a licensed video gaming location. The Board has the express authority to order a licensed terminal operator to remove its Video Gaming Terminals from a licensed establishment if a use agreement, or portion thereof, is invalidated. The Board shall not award monetary damages of any kind. Any failure by a party to abide by the Board's decision shall subject the licensee to discipline.

The Board shall review the entire record, including the petitions filed, the Administrator's recommended decision, and any exceptions filed, and shall issue a written order including the bases for its decision. A final Board order shall become effective upon personal delivery to a party or upon posting by certified or overnight express mail to the party's last known address.

16) Information and Questions regarding these adopted rules may be addressed to:

Agostino Lorenzini
General Counsel
Illinois Gaming Board
160 North LaSalle Street
Chicago IL 60601

fax: 312/814-7253

The full text of the Adopted Amendment begins on the next page:

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NOTICE OF ADOPTED AMENDMENT

TITLE 11: ALCOHOL, HORSE RACING, LOTTERY, AND VIDEO GAMING
SUBTITLE D: VIDEO GAMING
CHAPTER I: ILLINOIS GAMING BOARD

PART 1800
VIDEO GAMING (GENERAL)

SUBPART A: GENERAL PROVISIONS

Section	
1800.110	Definitions
1800.115	Gender
1800.120	Inspection
1800.130	Board Meetings

SUBPART B: DUTIES OF LICENSEES

Section	
1800.210	General Duties of All Video Gaming Licensees
1800.220	Continuing Duty to Report Information
1800.230	Duties of Licensed Manufacturers
1800.240	Duties of Licensed Distributors
1800.250	Duties of Licensed Video Terminal Operators
1800.260	Duties of Licensed Technicians and Licensed Terminal Handlers
1800.270	Duties of Licensed Video Gaming Locations

SUBPART C: STANDARDS OF CONDUCT FOR LICENSEES

Section	
1800.310	Grounds for Disciplinary Actions
1800.320	Minimum Standards for Use Agreements
1800.330	Economic Disassociation

SUBPART D: LICENSING QUALIFICATIONS

Section	
1800.410	Coverage of Subpart
1800.420	Qualifications for Licensure
1800.430	Persons with Significant Influence or Control

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1800.440 Undue Economic Concentration

SUBPART E: LICENSING PROCEDURES

Section

1800.510 Coverage of Subpart
1800.520 Applications
1800.530 Submission of Application
1800.540 Application Fees
1800.550 Consideration of Applications by the Board
1800.555 Withdrawal of Applications and Surrender of Licenses
1800.560 Issuance of License
1800.570 Renewal of License
1800.580 Renewal Fees and Dates
1800.590 Death and Change of Ownership of Video Gaming Licensee

SUBPART F: DENIALS OF APPLICATIONS FOR LICENSURE

Section

1800.610 Coverage of Subpart
1800.615 Requests for Hearing
1800.620 Appearances
1800.625 Appointment of Administrative Law Judge
1800.630 Discovery
1800.635 Subpoenas
1800.640 Motions for Summary Judgment
1800.650 Proceedings
1800.660 Evidence
1800.670 Prohibition on Ex Parte Communication
1800.680 Sanctions and Penalties
1800.690 Transmittal of Record and Recommendation to the Board
1800.695 Status of Applicant for Licensure Upon Filing Request for Hearing

SUBPART G: DISCIPLINARY ACTIONS AGAINST LICENSEES

Section

1800.710 Coverage of Subpart
1800.715 Notice of Proposed Disciplinary Action Against Licensees
1800.720 Hearings in Disciplinary Actions

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1800.725	Appearances
1800.730	Appointment of Administrative Law Judge
1800.735	Discovery
1800.740	Subpoenas
1800.745	Motions for Summary Judgment
1800.750	Proceedings
1800.760	Evidence
1800.770	Prohibition on Ex Parte Communication
1800.780	Sanctions and Penalties
1800.790	Transmittal of Record and Recommendation to the Board
1800.795	Persons Subject to Proposed Orders of Economic Disassociation

SUBPART H: LOCATION OF VIDEO GAMING TERMINALS IN
LICENSED VIDEO GAMING LOCATIONS

Section

1800.810	Location and Placement of Video Gaming Terminals
1800.815	Licensed Video Gaming Locations Within Malls
1800.820	Measurement of Distances from Locations
1800.830	Waivers of Location Restrictions

SUBPART I: SECURITY INTERESTS

Section

1800.910	Approvals Required, Applicability, Scope of Approval
1800.920	Notice of Enforcement of a Security Interest
1800.930	Prior Registration

SUBPART J: TRANSPORTATION, REGISTRATION,
AND DISTRIBUTION OF VIDEO GAMING TERMINALS

Section

1800.1010	Restriction on Sale, Distribution, Transfer, Supply and Operation of Video Gaming Terminals
1800.1020	Transportation of Video Gaming Terminals into the State
1800.1030	Receipt of Video Gaming Terminals in the State
1800.1040	Transportation of Video Gaming Terminals Between Locations in the State
1800.1050	Approval to Transport Video Gaming Terminals Outside of the State
1800.1060	Placement of Video Gaming Terminals

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- 1800.1065 Registration of Video Gaming Terminals
- 1800.1070 Disposal of Video Gaming Terminals

SUBPART K: STATE-LOCAL RELATIONS

- Section
- 1800.1110 State-Local Relations

SUBPART L: FINGERPRINTING OF APPLICANTS

- Section
- 1800.1210 Definitions
- 1800.1220 Entities Authorized to Perform Fingerprinting
- 1800.1230 Qualification as a Livescan Vendor
- 1800.1240 Fingerprinting Requirements
- 1800.1250 Fees for Fingerprinting
- 1800.1260 Grounds for Revocation, Suspension and Denial of Contract

SUBPART M: PUBLIC ACCESS TO INFORMATION

- Section
- 1800.1310 Public Requests for Information

SUBPART N: PAYOUT DEVICES AND REQUIREMENTS

- Section
- 1800.1410 Ticket Payout Devices
- 1800.1420 Redemption of Tickets Following Removal or Unavailability of Ticket Payout Devices

SUBPART O: NON-PAYMENT OF TAXES

- Section
- 1800.1510 Non-Payment of Taxes

SUBPART P: CENTRAL COMMUNICATIONS SYSTEM

- Section
- 1800.1610 Use of Gaming Device or Individual Game Performance Data

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AUTHORITY: Implementing and authorized by the Video Gaming Act [230 ILCS 40].

SOURCE: Adopted by emergency rulemaking at 33 Ill. Reg. 14793, effective October 19, 2009, for a maximum of 150 days; adopted at 34 Ill. Reg. 2893, effective February 22, 2010; emergency amendment at 34 Ill. Reg. 8589, effective June 15, 2010, for a maximum of 150 days; emergency expired November 11, 2010; amended at 35 Ill. Reg. 1369, effective January 5, 2011; emergency amendment at 35 Ill. Reg. 13949, effective July 29, 2011, for a maximum of 150 days; emergency expired December 25, 2011; amended at 36 Ill. Reg. 840, effective January 6, 2012; amended by emergency rulemaking at 36 Ill. Reg. 4150, effective February 29, 2012, for a maximum of 150 days; amended at 36 Ill. Reg. 5455, effective March 21, 2012; amended at 36 Ill. Reg. 10029, effective June 28, 2012; emergency amendment at 36 Ill. Reg. 11492, effective July 6, 2012, for a maximum of 150 days; emergency expired December 2, 2012; emergency amendment at 36 Ill. Reg. 12895, effective July 24, 2012, for a maximum of 150 days; amended at 36 Ill. Reg. 13178, effective July 30, 2012; amended at 36 Ill. Reg. 15112, effective October 1, 2012; amended at 36 Ill. Reg. 17033, effective November 21, 2012; expedited correction at 39 Ill. Reg. 8183, effective November 21, 2012; amended at 36 Ill. Reg. 18550, effective December 14, 2012; amended at 37 Ill. Reg. 810, effective January 11, 2013; amended at 37 Ill. Reg. 4892, effective April 1, 2013; amended at 37 Ill. Reg. 7750, effective May 23, 2013; amended at 37 Ill. Reg. 18843, effective November 8, 2013; emergency amendment at 37 Ill. Reg. 19882, effective November 26, 2013, for a maximum of 150 days; emergency amendment suspended by the Joint Committee on Administrative Rules at 38 Ill. Reg. 3384, effective January 14, 2014; suspension withdrawn at 38 Ill. Reg. 5897; emergency repeal of emergency amendment at 38 Ill. Reg. 7337, effective March 12, 2014, for the remainder of the 150 days; amended at 38 Ill. Reg. 849, effective December 27, 2013; amended at 38 Ill. Reg. 14275, effective June 30, 2014; amended at 38 Ill. Reg. 19919, effective October 2, 2014; amended at 39 Ill. Reg. 5401, effective March 27, 2015; amended at 39 Ill. Reg. 5593, effective April 1, 2015; amended at 40 Ill. Reg. 2952, effective January 27, 2016; amended at 40 Ill. Reg. 8760, effective June 14, 2016; amended at 40 Ill. Reg. 12762, effective August 19, 2016; amended at 40 Ill. Reg. 15131, effective October 18, 2016; emergency amendment at 41 Ill. Reg. 2696, effective February 7, 2017, for a maximum of 150 days; emergency expired July 6, 2017; amended at 41 Ill. Reg. 2939, effective February 24, 2017; amended at 41 Ill. Reg. 4499, effective April 14, 2017; amended at 41 Ill. Reg. 10300, effective July 13, 2017.

SUBPART C: STANDARDS OF CONDUCT FOR LICENSEES

Section 1800.320 Minimum Standards for Use Agreements

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- a) In addition to the requirements set forth in the Act, a Use Agreement must satisfy the following:
- 1a) Only be between:
 - A1) a licensed terminal operator that, beginning July 15, 2014, is licensed by the Board at the time the Use Agreement is signed; and
 - B2) a licensed establishment, licensed truck stop establishment, licensed veterans establishment or licensed fraternal establishment;
 - 2b) Contain an affirmative statement that no inducement was offered or accepted regarding the placement or operation of video gaming terminals in a licensed establishment, licensed truck stop establishment, licensed veterans establishment or licensed fraternal establishment;
 - 3e) Contain an indemnity and hold harmless provision on behalf of the State, the Board, and its agents relative to any cause of action arising from a use agreement;
 - 4d) Prohibit any assignment other than from a licensed terminal operator to another licensed terminal operator;
 - 5e) Contain a provision that releases the video gaming location from any continuing contractual obligation to the terminal operator in the event that the terminal operator has its license revoked or denied, has its renewal denied, or surrenders its license.
- b) Petitions
- 1) The Board shall decide a petition brought by a terminal operator or licensed video gaming location alleging that a Use Agreement, or portion of a Use Agreement, is invalid or unenforceable. Issues the Board has authority to decide under this subsection (b) include, but are not limited to, the following:
 - A) When two or more Use Agreements between a licensed video gaming location and one or more terminal operators have

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overlapping effective dates, which of the Use Agreements is valid during the period of overlap.

- B) Whether a Use Agreement, or portion of a Use Agreement, complies with the requirements of the Act and this Part.
- C) Whether a renewal provision in a Use Agreement poses such obstacles against non-renewal, or confusion about the procedures for non-renewal, as to constitute an undue burden on the licensed video gaming location that has entered into the provision.
- D) Whether a terminal operator or anyone on its behalf has used coercion, deception, or an inducement or incentive in violation of Section 25(c) of the Act or this Part to persuade a licensed video gaming location to enter into or renew a Use Agreement.

2) Petitions under this subsection (b) shall be in writing and shall include an original and one copy. Any petitioner under this Section shall bear the burden of proof by clear and convincing evidence. A petition shall contain the following:

- A) The name, current address and current telephone number of the petitioner.
- B) Detailed facts and reasons upon which the petitioner relies in arguing that a Use Agreement, or portion of a Use Agreement, is invalid or unenforceable. Petitions may include documentary evidence and affidavits.
- C) A signature of the petitioner.
- D) A verification of the petition in the following form:

"The undersigned certifies that the statements set forth in this petition are true and correct, except as to matters therein stated to be on information and belief, and as to such matters the undersigned certifies that he or she verily believes the same to be true."

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- E) A notarization.
- 3) Following receipt of a petition meeting the requirements of subsection (b)(2), the Administrator shall promptly send by certified mail to each non-petitioning terminal operator or licensed video gaming location named in the petition a complete copy of the petition, including all submitted documents. Non-petitioning parties named in the petition must file a response within 21 days after their receipt of the petition. All responses shall be in writing and shall include an original and one copy. A response shall be deemed filed on the date on which it is postmarked. The response shall contain the following:
- A) The name, current address and current telephone number of the licensee.
- B) A clear and concise statement admitting or denying each of the allegations set forth in the petition.
- C) For all allegations that the licensee denies, detailed facts and reasons upon which the non-petitioning party relies in arguing that the Use Agreement, or portion of the Use Agreement, is valid or enforceable. Responses may include documentary evidence and affidavits.
- D) A signature of the licensee.
- E) A verification of the licensee in the following form:
- "The undersigned certifies that the statements set forth in this response are true and correct, except as to matters therein stated to be on information and belief, and as to such matters the undersigned certifies that he or she verily believes the same to be true."
- F) A notarization.
- 4) The Administrator shall promptly provide a petitioning party with complete copies of all submitted responses meeting the requirements of subsection (c)(2).

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- 5) Before rendering a recommended decision, the Administrator may require the parties to attend a conference to attempt to settle any dispute under this subsection (b)(5).
- 6) Administrator's Recommended Decision
 - A) Following the expiration of the 21-day response period, the Administrator shall issue a written recommended decision on the validity or enforceability of the contested Use Agreement, or contested portions of the Use Agreement, based on the contents of the petition and any responses.
 - B) The Administrator's recommended decision shall set forth the reasons the Administrator is recommending the granting or denial of the petition. When the petition asserts more than one claim as to the validity or enforceability of the Use Agreement, or a portion of the Use Agreement, the Administrator shall separately decide each claim.
 - C) Copies of the Administrator's recommended decision shall be served on each party by personal delivery, certified mail or overnight express mail to the party's last known address.
- 7) A petitioning party or party named in a petition brought under this subsection (b) may file exceptions to the recommended decision of the Administrator. The exception shall be filed with the Board no later than 14 days after receipt of the recommended decision. Exceptions shall specify each finding of fact and conclusion of law to which exception is taken. There shall be no oral argument on exceptions.
- 8) Prior to the Board rendering a decision, the Administrator may require the parties to attend a conference to attempt to settle any dispute under this subsection (b).
- 9) Any relief given by the Board under this subsection (b) shall be limited to deciding which Use Agreement, or portion of the Use Agreement, is valid for the placement and operation of video gaming terminals in a licensed video gaming location. The Board has the express authority to order a

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licensed terminal operator to remove its Video Gaming Terminals from a licensed establishment if a Use Agreement, or portion of the Use Agreement, is invalidated. The Board shall not award monetary damages of any kind. Any failure by a party to abide by the Board's decision shall subject the licensee to discipline.

10) Final Board Order

- A) The Board shall review the entire record, including the petitions filed, the Administrator's recommended decision, and any exceptions filed, and shall render a written order including the bases for its decision.
- B) Copies of the final Board order shall be served on each licensee by personal delivery, certified mail or overnight express mail to the licensee's last known address.
- C) A final Board order shall become effective upon personal delivery to a party or upon posting by certified or overnight express mail to the party's last known address.

(Source: Amended at 41 Ill. Reg. 10300, effective July 13, 2017)

JOINT COMMITTEE ON ADMINISTRATIVE RULES
ILLINOIS GENERAL ASSEMBLY

SECOND NOTICES RECEIVED

The following second notice was received during the period of July 11, 2017 through July 17, 2017. The following rulemaking is scheduled for review at the Committee's August 15, 2017 meeting. Other items not contained in this published list may also be considered. Members of the public wishing to express their views with respect to a rulemaking should submit written comments to the Committee at the following address: Joint Committee on Administrative Rules, 700 Stratton Bldg., Springfield IL 62706.

<u>Second Notice Expires</u>	<u>Agency and Rule</u>	<u>Start of First Notice</u>	<u>JCAR Meeting</u>
8/25/17	<u>Department of Financial and Professional Regulation, Funeral Directors and Embalmers Licensing Code (68 Ill. Adm. Code 1250)</u>	5/19/17 41 Ill. Reg. 5114	8/15/17

CHIEF PROCUREMENT OFFICER FOR GENERAL SERVICES

NOTICE OF PUBLIC INFORMATION

NOTICE OF CAMPAIGN CONTRIBUTION VIOLATION OF PROCUREMENT CODE

1. Statutory Authority: Section 50-37 of the Illinois Procurement Code, 30 ILCS 500/50-37, prohibits business entities with contracts and solicitations worth in excess of \$50,000.00 in combined annual value pending with a given officeholder responsible for awarding the contracts from making campaign contributions to campaign committees established to promote the candidacy of the officeholder or any other declared candidate for that office. The prohibition also extends to contributions made by various affiliated persons and businesses of a business entity that is subject to the prohibition. Section 50-37 requires that notice of violation of the prohibition and the penalty imposed is to be published in the *Illinois Register*.
2. Name of Contributor: Robert C. Macklin, Owner, Macklin Incorporated
3. Date of Violation: October 14, 2014
4. Description of Violation: Robert C. Macklin is listed as an "Executive Employee", "Owner", and "CEO" of Macklin Incorporated on its registration with the Board of Elections. In addition, per the disclosures, his ownership percentage is 19%. Mr. Macklin made a contribution of \$250.00 to the Citizens for Rauner, Inc. political fund on October 14, 2014. At the time of the contribution, Bruce Rauner was the Republican candidate for Governor of the State of Illinois in the 2014 general election and is currently the elected Governor of the State of Illinois. As Mr. Macklin is an "executive employee" and his ownership percentage is in excess of 7.5%, his October 14, 2014 contribution was prohibited.
5. Summary of Action Taken by the Agency: Section 50-37 provides that State contracts with a business entity that violates the campaign contribution prohibition are voidable at the discretion of the chief procurement officer. The Chief Procurement Officer for General Services has notified Macklin Incorporated of the apparent violation, reviewed responsive material provided by Macklin Incorporated, and has considered the value, status, and necessity of the contracts. In addition, the Chief Procurement Officer has taken into consideration the recognition by Macklin Incorporated of the violation and its understanding of the necessity to avoid such situations in the future. The Chief Procurement Officer finds that voiding affected contracts, bids or proposals would not be in the best interest of the State.

CHIEF PROCUREMENT OFFICER FOR GENERAL SERVICES

NOTICE OF PUBLIC INFORMATION

As required by Section 50-37(e) of the Procurement Code, Citizens for Rauner, Inc., is required to pay to the State an amount equal to the value of the contribution within 30 days of the publication of this notice.

PROCLAMATIONS

2017-124 (Revised)
Gubernatorial Disaster Declaration
Clinton, Jackson, Marshall, Union and Woodford Counties

WHEREAS, beginning April 28, 2017, severe storms moved through Illinois generating heavy rainfall; and,

WHEREAS, according to the National Weather Service, some areas of the state received in excess of ten inches of rain over a three-day period, causing flash flooding and widespread river flooding; and,

WHEREAS, a second storm system that began affecting Illinois on May 3, 2017, produced significant rainfall, exacerbating the flood conditions; and,

WHEREAS, the high precipitation totals resulted in near-record flooding on several rivers throughout the state, most notably the Big Muddy, Kaskaskia and Mississippi Rivers, as well as major and moderate flooding on numerous Illinois waterways; and,

WHEREAS, the flooding has caused significant property damage and resulted in costly emergency protective measures and permanent infrastructure damages for state and local governments, especially damaged roadways; and,

WHEREAS, based on reports received by the Illinois Emergency Management Agency, local resources and capabilities have been exhausted and State resources are needed to respond to and recover from the effects of the severe storms; and,

WHEREAS, these conditions provide legal justification under section 7 of the Illinois Emergency Management Act for the issuance of a proclamation of disaster.

NOW, THEREFORE, in the interest of aiding the people of Illinois and the local governments responsible for ensuring public health and safety, I, Bruce Rauner, Governor of the State of Illinois, hereby proclaim as follows:

Section 1. Pursuant to the provisions of Section 7 of the Illinois Emergency Management Agency Act, 20 ILCS 3305/7, I find that a disaster exists within the State of Illinois and specifically declare Alexander, Clinton, Jackson, Marshall, Union and Woodford Counties as disaster areas.

Section 2. The Illinois Emergency Management Agency is directed to continue implementation of the State Emergency Operations Plan and to coordinate State resources to support local governments in disaster response and recovery operations.

PROCLAMATIONS

Section 3. This proclamation shall be effective immediately and remain in effect for 30 days.

Issued by the Governor May 24, 2017

Filed by the Secretary of State July 14, 2017

2017-135**Gubernatorial Disaster Declaration
McHenry, Lake, and Kane Counties**

WHEREAS, on the night of July 11 and into the morning of July 12, 2017, multiple waves of thunderstorms moved across northeast Illinois, producing copious rainfall rates; and

WHEREAS, according to the National Weather Service, some areas of Lake County received in excess of seven inches of rain as a result of the storms, causing immediate flash flooding and river flooding, especially on the Des Plaines River; and

WHEREAS, the same storm system dumped more than seven inches of rain across southern Wisconsin upriver from the Chain O' Lakes, which will significantly impact the Fox River levels in McHenry and Kane Counties; and

WHEREAS, the Des Plaines and Fox Rivers are experiencing record-level crests in some locations, with additional crests expected into next week and prolonged flooding in those areas anticipated; and

WHEREAS, the flooding has caused large-scale property damage to residential and commercial properties, resulted in costly emergency protective measures, and compromised public works infrastructure; and

WHEREAS, based on reports received by the Illinois Emergency Management Agency, local resources and capabilities have been exhausted and State resources are needed to respond to and recover from the effects of the severe storms; and

WHEREAS, these conditions provide legal justification under section 7 of the Illinois Emergency Management Act for the issuance of a proclamation of disaster.

NOW, THEREFORE, in the interest of aiding the people of Illinois and the local governments responsible for ensuring public health and safety, I, Bruce Rauner, Governor of the State of Illinois, hereby proclaim as follows:

PROCLAMATIONS

Section 1. Pursuant to the provisions of Section 7 of the Illinois Emergency Management Agency Act, 20 ILCS 3305/7, I find that a disaster exists within the State of Illinois and specifically declare Kane, Lake and McHenry Counties as disaster areas.

Section 2. The Illinois Emergency Management Agency is directed to continue implementation of the State Emergency Operations Plan, as it has been doing since July 12, and to coordinate State resources to support local governments in disaster response and recovery operations.

Section 3. To aid with emergency purchases necessary for response and other emergency powers as authorized by the Illinois Emergency Management Agency Act, the provisions of the Illinois Procurement Code that would in any way prevent, hinder or delay necessary action in coping with the disaster are suspended to the extent they are not required by federal law.

Section 4: This proclamation can facilitate a request for Federal disaster assistance if a complete and comprehensive assessment of damage indicates that effective recovery is beyond the capabilities of the State and affected local governments.

Section 5: This proclamation shall be effective immediately and remain in effect for 30 days.

Issued by the Governor July 14, 2017

Filed by the Secretary of State July 14, 2017

2017-136
Gubernatorial Disaster Declaration
Cook County

WHEREAS, on the night of July 11 and into the morning of July 12, 2017, multiple waves of thunderstorms moved across northeast Illinois, producing copious rainfall rates; and,

WHEREAS, according to the National Weather Service, some areas of Lake County received in excess of seven inches of rain as a result of the storms, causing immediate flash flooding and river flooding, especially on the Des Plaines River; and,

WHEREAS, the same storm system dumped more than seven inches of rain across southern Wisconsin upriver from the Chain O' Lakes, which is impacting the Fox River levels in McHenry and Kane Counties; and,

WHEREAS, the Des Plaines and Fox Rivers are experiencing record-level crests in some locations and prolonged flooding in those areas anticipated; and,

PROCLAMATIONS

WHEREAS, the flooding has caused large-scale property damage to residential and commercial properties, resulted in costly emergency protective measures, and compromised public works infrastructure; and,

WHEREAS, on July 14, 2017, Kane, Lake and McHenry Counties were designated as state disaster areas as a result of this flooding; and,

WHEREAS, communities in northern Cook County are also experiencing significant impacts as a result of flood waters; and,

WHEREAS, based on reports received by the Illinois Emergency Management Agency, local resources and capabilities have been exhausted and State resources are needed to respond to and recover from the effects of the severe storms; and,

WHEREAS, these conditions provide legal justification under section 7 of the Illinois Emergency Management Act for the issuance of a proclamation of disaster;

NOW, THEREFORE, in the interest of aiding the people of Illinois and the local governments responsible for ensuring public health and safety, I, Bruce Rauner, Governor of the State of Illinois, hereby proclaim as follows:

Section 1. Pursuant to the provisions of Section 7 of the Illinois Emergency Management Agency Act, 20 ILCS 3305/7, I find that a disaster exists within the State of Illinois and specifically declare Cook County a disaster area.

Section 2. The Illinois Emergency Management Agency is directed to continue implementation of the State Emergency Operations Plan, as it has been doing since July 12, and to coordinate State resources to support local governments in disaster response and recovery operations.

Section 3. To aid with emergency purchases necessary for response and other emergency powers as authorized by the Illinois Emergency Management Agency Act, the provisions of the Illinois Procurement Code that would in any way prevent, hinder or delay necessary action in coping with the disaster are suspended to the extent they are not required by federal law.

Section 4: This proclamation can facilitate a request for Federal disaster assistance if a complete and comprehensive assessment of damage indicates that effective recovery is beyond the capabilities of the State and affected local governments.

Section 5: This proclamation shall be effective immediately and remain in effect for 30 days.

Issued by the Governor July 17, 2017

PROCLAMATIONS

Filed by the Secretary of State July 17, 2017

ILLINOIS ADMINISTRATIVE CODE
Issue Index - With Effective Dates

Rules acted upon in Volume 41, Issue 30 are listed in the Issues Index by Title number, Part number, Volume and Issue. Inquiries about the Issue Index may be directed to the Administrative Code Division at (217) 782-7017/18.

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