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| **OTs – 102nd GA** |  |  |

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| [HB0016](https://ilga.gov/legislation/BillStatus.asp?DocNum=16&GAID=16&DocTypeID=HB&LegID=127825&SessionID=110&GA=102) |  | |  | | --- | | [Deb Conroy](https://ilga.gov/house/Rep.asp?MemberID=2863) | |  | | MEDICAID-AUTISM TREATMENT | 03/27/2021 | House | Rule 19(a) / Re-referred to Rules Committee |
| [HB0158](https://ilga.gov/legislation/BillStatus.asp?DocNum=158&GAID=16&DocTypeID=HB&LegID=127994&SessionID=110&GA=102) | h | |  | | --- | | [Camille Y. Lilly](https://ilga.gov/house/Rep.asp?MemberID=2826) | | [(Mattie Hunter)](https://ilga.gov/senate/Senator.asp?MemberID=2808) | | HEALTH CARE & HUMAN SERVICES | 04/27/2021 | House | Public Act . . . . . . . . . 102-0004 |
| [HB0159](https://ilga.gov/legislation/BillStatus.asp?DocNum=159&GAID=16&DocTypeID=HB&LegID=127995&SessionID=110&GA=102) |  | |  | | --- | | [Camille Y. Lilly](https://ilga.gov/house/Rep.asp?MemberID=2826) | |  | | HEALTH CARE & HUMAN SERVICES | 03/27/2021 | House | Rule 19(a) / Re-referred to Rules Committee |
| [HB0309](https://ilga.gov/legislation/BillStatus.asp?DocNum=309&GAID=16&DocTypeID=HB&LegID=128202&SessionID=110&GA=102) |  | |  | | --- | | [LaToya Greenwood](https://ilga.gov/house/Rep.asp?MemberID=2902) | |  | | IMPLICIT BIAS TRAINING HEALTH | 03/27/2021 | House | Rule 19(a) / Re-referred to Rules Committee |
| [HB0707](https://ilga.gov/legislation/BillStatus.asp?DocNum=707&GAID=16&DocTypeID=HB&LegID=129226&SessionID=110&GA=102) |  | |  | | --- | | [Daniel Didech](https://ilga.gov/house/Rep.asp?MemberID=2938) | |  | | TELEHEALTH INSURANCE COVERAGE | 03/27/2021 | House | Rule 19(a) / Re-referred to Rules Committee |
| [HB1822](https://ilga.gov/legislation/BillStatus.asp?DocNum=1822&GAID=16&DocTypeID=HB&LegID=130544&SessionID=110&GA=102) | h | |  | | --- | | [William Davis](https://ilga.gov/house/Rep.asp?MemberID=2801) | |  | | EARLY CHILDHOOD PROGRAM ELIGIB | 04/23/2021 | House | Rule 19(a) / Re-referred to Rules Committee |
| [HB1824](https://ilga.gov/legislation/BillStatus.asp?DocNum=1824&GAID=16&DocTypeID=HB&LegID=130546&SessionID=110&GA=102) |  | |  | | --- | | [Kathleen Willis](https://ilga.gov/house/Rep.asp?MemberID=2867) | |  | | BEHAVIOR ANALYST-LICENSURE | 03/27/2021 | House | Rule 19(a) / Re-referred to Rules Committee |
| [HB2474](https://ilga.gov/legislation/BillStatus.asp?DocNum=2474&GAID=16&DocTypeID=HB&LegID=131253&SessionID=110&GA=102) |  | |  | | --- | | [Deanne M. Mazzochi](https://ilga.gov/house/Rep.asp?MemberID=2920) | |  | | IEMA-LIC REVOCATION PROHIBITED | 03/27/2021 | House | Rule 19(a) / Re-referred to Rules Committee |
| [HB2554](https://ilga.gov/legislation/BillStatus.asp?DocNum=2554&GAID=16&DocTypeID=HB&LegID=131373&SessionID=110&GA=102) |  | |  | | --- | | [Theresa Mah](https://ilga.gov/house/Rep.asp?MemberID=2904) | | [(Emil Jones, III)](https://ilga.gov/senate/Senator.asp?MemberID=2823) | | TELEHEALTH-RULES-ACUPUNCTURE | 05/30/2021 | Senate | Rule 3-9(a) / Re-referred to Assignments |
| [HB2776](https://ilga.gov/legislation/BillStatus.asp?DocNum=2776&GAID=16&DocTypeID=HB&LegID=131630&SessionID=110&GA=102) | s | |  | | --- | | [LaToya Greenwood](https://ilga.gov/house/Rep.asp?MemberID=2902) | | [(Christopher Belt)](https://ilga.gov/senate/Senator.asp?MemberID=2927) | | DFPR-MILITARY LICENSING | 06/29/2021 | House | Sent to the Governor |
| [HB2881](https://ilga.gov/legislation/BillStatus.asp?DocNum=2881&GAID=16&DocTypeID=HB&LegID=131770&SessionID=110&GA=102) |  | |  | | --- | | [Deanne M. Mazzochi](https://ilga.gov/house/Rep.asp?MemberID=2920) | |  | | PHYSICAL THERAPY COMPACT | 03/27/2021 | House | Rule 19(a) / Re-referred to Rules Committee |
| [HB2896](https://ilga.gov/legislation/BillStatus.asp?DocNum=2896&GAID=16&DocTypeID=HB&LegID=131789&SessionID=110&GA=102) |  | |  | | --- | | [Deb Conroy](https://ilga.gov/house/Rep.asp?MemberID=2863) | |  | | EARLY INTERVENTION-TELEHEALTH | 03/27/2021 | House | Rule 19(a) / Re-referred to Rules Committee |
| [HB3100](https://ilga.gov/legislation/BillStatus.asp?DocNum=3100&GAID=16&DocTypeID=HB&LegID=132024&SessionID=110&GA=102) | b | |  | | --- | | [Delia C. Ramirez](https://ilga.gov/house/Rep.asp?MemberID=2948) | | [(Karina Villa)](https://ilga.gov/senate/Senator.asp?MemberID=2987) | | ANCRA-IMPLICIT BIAS TRAINING | 06/28/2021 | House | Sent to the Governor |
| [HB3170](https://ilga.gov/legislation/BillStatus.asp?DocNum=3170&GAID=16&DocTypeID=HB&LegID=132095&SessionID=110&GA=102) |  | |  | | --- | | [Maura Hirschauer](https://ilga.gov/house/Rep.asp?MemberID=2995) | |  | | IMPLICIT BIAS TRAINING ACT | 03/27/2021 | House | Rule 19(a) / Re-referred to Rules Committee |
| [HB3308](https://ilga.gov/legislation/BillStatus.asp?DocNum=3308&GAID=16&DocTypeID=HB&LegID=132242&SessionID=110&GA=102) | b | |  | | --- | | [Thaddeus Jones](https://ilga.gov/house/Rep.asp?MemberID=2833) | | [(Napoleon Harris, III)](https://ilga.gov/senate/Senator.asp?MemberID=2851) | | INS-TELEHEALTH SERVICES | 07/22/2021 | House | Public Act . . . . . . . . . 102-0104 |
| [HB3324](https://ilga.gov/legislation/BillStatus.asp?DocNum=3324&GAID=16&DocTypeID=HB&LegID=132258&SessionID=110&GA=102) |  | |  | | --- | | [Jackie Haas](https://ilga.gov/house/Rep.asp?MemberID=2981) | |  | | SCH CD-DYSLEXIA SCREENING | 03/27/2021 | House | Rule 19(a) / Re-referred to Rules Committee |
| [HB3498](https://ilga.gov/legislation/BillStatus.asp?DocNum=3498&GAID=16&DocTypeID=HB&LegID=132503&SessionID=110&GA=102) | h | |  | | --- | | [Deb Conroy](https://ilga.gov/house/Rep.asp?MemberID=2863) | | [(Mattie Hunter)](https://ilga.gov/senate/Senator.asp?MemberID=2808) | | TELEHEALTH SERVICES | 05/29/2021 | Senate | Rule 3-9(a) / Re-referred to Assignments |
| [HB3539](https://ilga.gov/legislation/BillStatus.asp?DocNum=3539&GAID=16&DocTypeID=HB&LegID=132562&SessionID=110&GA=102) |  | |  | | --- | | [Maura Hirschauer](https://ilga.gov/house/Rep.asp?MemberID=2995) | |  | | MEDICAID-EI & DOULA SERVICES | 03/27/2021 | House | Rule 19(a) / Re-referred to Rules Committee |
| [HB3619](https://ilga.gov/legislation/BillStatus.asp?DocNum=3619&GAID=16&DocTypeID=HB&LegID=132661&SessionID=110&GA=102) |  | |  | | --- | | [Fred Crespo](https://ilga.gov/house/Rep.asp?MemberID=2817) | |  | | COM COL-BACHELOR'S DEGREE | 03/27/2021 | House | Rule 19(a) / Re-referred to Rules Committee |
| [HB3706](https://ilga.gov/legislation/BillStatus.asp?DocNum=3706&GAID=16&DocTypeID=HB&LegID=132754&SessionID=110&GA=102) |  | |  | | --- | | [Natalie A. Manley](https://ilga.gov/house/Rep.asp?MemberID=2870) | |  | | SCH CD-SPECIAL ED-THERAPEUTICS | 03/27/2021 | House | Rule 19(a) / Re-referred to Rules Committee |
| [HB3758](https://ilga.gov/legislation/BillStatus.asp?DocNum=3758&GAID=16&DocTypeID=HB&LegID=132818&SessionID=110&GA=102) |  | |  | | --- | | [Ryan Spain](https://ilga.gov/house/Rep.asp?MemberID=2910) | |  | | INS CODE-TELEHEALTH SERVICES | 03/27/2021 | House | Rule 19(a) / Re-referred to Rules Committee |
| [HB3759](https://ilga.gov/legislation/BillStatus.asp?DocNum=3759&GAID=16&DocTypeID=HB&LegID=132820&SessionID=110&GA=102) |  | |  | | --- | | [Ryan Spain](https://ilga.gov/house/Rep.asp?MemberID=2910) | |  | | INS-TELEHEALTH PARITY ACT | 03/27/2021 | House | Rule 19(a) / Re-referred to Rules Committee |
| [HB3879](https://ilga.gov/legislation/BillStatus.asp?DocNum=3879&GAID=16&DocTypeID=HB&LegID=132965&SessionID=110&GA=102) |  | |  | | --- | | [Curtis J. Tarver, II](https://ilga.gov/house/Rep.asp?MemberID=2949) | | [(Karina Villa)](https://ilga.gov/senate/Senator.asp?MemberID=2987) | | DHFS-HEALTH CARE TELEMENTORING | 06/25/2021 | House | Sent to the Governor |
| [HB4012](https://ilga.gov/legislation/BillStatus.asp?DocNum=4012&GAID=16&DocTypeID=HB&LegID=135463&SessionID=110&GA=102) |  | |  | | --- | | [Anna Moeller](https://ilga.gov/house/Rep.asp?MemberID=2876) | |  | | REGULATORY SUNRISE REVIEW ACT | 06/02/2021 | House | Rule 19(a) / Re-referred to Rules Committee |
| [SB0221](https://ilga.gov/legislation/BillStatus.asp?DocNum=221&GAID=16&DocTypeID=SB&LegID=130449&SessionID=110&GA=102) |  | |  | | --- | | [Bill Cunningham](https://ilga.gov/senate/Senator.asp?MemberID=2850) | |  | | HOME HEALTH-HOME SERVICES | 05/21/2021 | Senate | Rule 3-9(a) / Re-referred to Assignments |
| [SB0339](https://ilga.gov/legislation/BillStatus.asp?DocNum=339&GAID=16&DocTypeID=SB&LegID=131736&SessionID=110&GA=102) |  | |  | | --- | | [Omar Aquino](https://ilga.gov/senate/Senator.asp?MemberID=2894) | |  | | DHS-EARLY INTERVENTION RATES | 04/16/2021 | Senate | Rule 3-9(a) / Re-referred to Assignments |
| [SB0341](https://ilga.gov/legislation/BillStatus.asp?DocNum=341&GAID=16&DocTypeID=SB&LegID=131751&SessionID=110&GA=102) |  | |  | | --- | | [Mattie Hunter](https://ilga.gov/senate/Senator.asp?MemberID=2808) | |  | | MEDICAID TECHNICAL ASSISTANCE | 04/16/2021 | Senate | Rule 3-9(a) / Re-referred to Assignments |
| [SB0517](https://ilga.gov/legislation/BillStatus.asp?DocNum=517&GAID=16&DocTypeID=SB&LegID=133099&SessionID=110&GA=102) | s | |  | | --- | | [Meg Loughran Cappel](https://ilga.gov/senate/Senator.asp?MemberID=2982) | | [(Natalie A. Manley)](https://ilga.gov/house/Rep.asp?MemberID=2870) | | SCH CD-SPECIAL ED-THERAPEUTICS | 07/23/2021 | Senate | Public Act . . . . . . . . . 102-0150 |
| [SB0567](https://ilga.gov/legislation/BillStatus.asp?DocNum=567&GAID=16&DocTypeID=SB&LegID=133160&SessionID=110&GA=102) | s | |  | | --- | | [Ram Villivalam](https://ilga.gov/senate/Senator.asp?MemberID=2936) | | [(Anna Moeller)](https://ilga.gov/house/Rep.asp?MemberID=2876) | | OPTOMETRIC PRACTICE-TELEHEALTH | 07/23/2021 | Senate | Public Act . . . . . . . . . 102-0153 |
| [SB0677](https://ilga.gov/legislation/BillStatus.asp?DocNum=677&GAID=16&DocTypeID=SB&LegID=133284&SessionID=110&GA=102) | s | |  | | --- | | [Ram Villivalam](https://ilga.gov/senate/Senator.asp?MemberID=2936) | | [(Kathleen Willis)](https://ilga.gov/house/Rep.asp?MemberID=2867) | | PHYSICIANS-DEMENTIA TRAINING | 06/24/2021 | Senate | Sent to the Governor |
| [SB0925](https://ilga.gov/legislation/BillStatus.asp?DocNum=925&GAID=16&DocTypeID=SB&LegID=133552&SessionID=110&GA=102) |  | |  | | --- | | [Ram Villivalam](https://ilga.gov/senate/Senator.asp?MemberID=2936) | |  | | GOVERNMENT-TECH | 04/30/2021 | Senate | Rule 3-9(a) / Re-referred to Assignments |
| [SB1077](https://ilga.gov/legislation/BillStatus.asp?DocNum=1077&GAID=16&DocTypeID=SB&LegID=133709&SessionID=110&GA=102) |  | |  | | --- | | [Cristina H. Pacione-Zayas](https://ilga.gov/senate/Senator.asp?MemberID=2983) | |  | | REGULATION-TECH | 04/30/2021 | Senate | Rule 3-9(a) / Re-referred to Assignments |
| [SB1078](https://ilga.gov/legislation/BillStatus.asp?DocNum=1078&GAID=16&DocTypeID=SB&LegID=133710&SessionID=110&GA=102) | s | |  | | --- | | [Emil Jones, III](https://ilga.gov/senate/Senator.asp?MemberID=2823) | | [(Theresa Mah)](https://ilga.gov/house/Rep.asp?MemberID=2904) | | ATHLETIC TRAINERS/THERAPISTS | 08/06/2021 | Senate | Public Act . . . . . . . . . 102-0307 |
| [SB1079](https://ilga.gov/legislation/BillStatus.asp?DocNum=1079&GAID=16&DocTypeID=SB&LegID=133711&SessionID=110&GA=102) | s | |  | | --- | | [Melinda Bush](https://ilga.gov/senate/Senator.asp?MemberID=2848) | | [(Kelly M. Cassidy)](https://ilga.gov/house/Rep.asp?MemberID=2840) | | DFPR-HARASSMENT PREVENTION | 08/06/2021 | Senate | Public Act . . . . . . . . . 102-0308 |
| [SB1090](https://ilga.gov/legislation/BillStatus.asp?DocNum=1090&GAID=16&DocTypeID=SB&LegID=133722&SessionID=110&GA=102) |  | |  | | --- | | [Emil Jones, III](https://ilga.gov/senate/Senator.asp?MemberID=2823) | |  | | REGULATION-TECH | 05/21/2021 | Senate | Rule 3-9(a) / Re-referred to Assignments |
| [SB1592](https://ilga.gov/legislation/BillStatus.asp?DocNum=1592&GAID=16&DocTypeID=SB&LegID=134225&SessionID=110&GA=102) | s | |  | | --- | | [Laura Fine](https://ilga.gov/senate/Senator.asp?MemberID=2929) | | [(David A. Welter)](https://ilga.gov/house/Rep.asp?MemberID=2895) | | INS-DENIAL/SITE OF TREATMENT | 08/06/2021 | Senate | Public Act . . . . . . . . . 102-0322 |
| [SB1735](https://ilga.gov/legislation/BillStatus.asp?DocNum=1735&GAID=16&DocTypeID=SB&LegID=134375&SessionID=110&GA=102) |  | |  | | --- | | [Emil Jones, III](https://ilga.gov/senate/Senator.asp?MemberID=2823) | |  | | TELEHEALTH-RULES-ACUPUNCTURE | 02/26/2021 | Senate | Referred to Assignments |
| [SB1804](https://ilga.gov/legislation/BillStatus.asp?DocNum=1804&GAID=16&DocTypeID=SB&LegID=134457&SessionID=110&GA=102) |  | |  | | --- | | [Dale Fowler](https://ilga.gov/senate/Senator.asp?MemberID=2897) | |  | | DFPR-LICENSE EXTENSION | 04/16/2021 | Senate | Rule 3-9(a) / Re-referred to Assignments |
| [SB1832](https://ilga.gov/legislation/BillStatus.asp?DocNum=1832&GAID=16&DocTypeID=SB&LegID=134485&SessionID=110&GA=102) |  | |  | | --- | | [Cristina H. Pacione-Zayas](https://ilga.gov/senate/Senator.asp?MemberID=2983) | |  | | COM COL-BACHELOR'S DEGREE | 05/21/2021 | Senate | Rule 3-9(a) / Re-referred to Assignments |
| [SB1862](https://ilga.gov/legislation/BillStatus.asp?DocNum=1862&GAID=16&DocTypeID=SB&LegID=134516&SessionID=110&GA=102) |  | |  | | --- | | [Terri Bryant](https://ilga.gov/senate/Senator.asp?MemberID=2990) | |  | | OCCUPATIONAL THERAPY COMPACT | 04/16/2021 | Senate | Rule 3-9(a) / Re-referred to Assignments |
| [SB2241](https://ilga.gov/legislation/BillStatus.asp?DocNum=2241&GAID=16&DocTypeID=SB&LegID=134894&SessionID=110&GA=102) |  | |  | | --- | | [Laura M. Murphy](https://ilga.gov/senate/Senator.asp?MemberID=2890) | |  | | INS CODE-RIDING THERAPY | 04/16/2021 | Senate | Rule 3-9(a) / Re-referred to Assignments |
| [SB2243](https://ilga.gov/legislation/BillStatus.asp?DocNum=2243&GAID=16&DocTypeID=SB&LegID=134896&SessionID=110&GA=102) |  | |  | | --- | | [Laura M. Murphy](https://ilga.gov/senate/Senator.asp?MemberID=2890) | |  | | MUSIC THERAPY LICENSING | 05/07/2021 | Senate | Rule 3-9(a) / Re-referred to Assignments |
| [SB2310](https://ilga.gov/legislation/BillStatus.asp?DocNum=2310&GAID=16&DocTypeID=SB&LegID=134964&SessionID=110&GA=102) |  | |  | | --- | | [Brian W. Stewart](https://ilga.gov/senate/Senator.asp?MemberID=2926) | |  | | DFPR-LICENSEE SURVEY | 04/16/2021 | Senate | Rule 3-9(a) / Re-referred to Assignments |
| [SB2517](https://ilga.gov/legislation/BillStatus.asp?DocNum=2517&GAID=16&DocTypeID=SB&LegID=135171&SessionID=110&GA=102) |  | |  | | --- | | [Chapin Rose](https://ilga.gov/senate/Senator.asp?MemberID=2856) | |  | | ATHLETIC TRAINERS-VARIOUS | 02/26/2021 | Senate | Referred to Assignments |
| [SB2518](https://ilga.gov/legislation/BillStatus.asp?DocNum=2518&GAID=16&DocTypeID=SB&LegID=135172&SessionID=110&GA=102) |  | |  | | --- | | [Chapin Rose](https://ilga.gov/senate/Senator.asp?MemberID=2856) | |  | | TELEHEALTH-ATHLETIC TRAINERS | 02/26/2021 | Senate | Referred to Assignments |
| [SB2661](https://ilga.gov/legislation/BillStatus.asp?DocNum=2661&GAID=16&DocTypeID=SB&LegID=135315&SessionID=110&GA=102) | b | |  | | --- | | [Don Harmon](https://ilga.gov/senate/Senator.asp?MemberID=2806) | | [(Elizabeth Hernandez)](https://ilga.gov/house/Rep.asp?MemberID=2816) | | HLTH CARE PROF-LICENSE-EXTEND | 06/04/2021 | Senate | Public Act . . . . . . . . . 102-0012 |
| [SB2782](https://ilga.gov/legislation/BillStatus.asp?DocNum=2782&GAID=16&DocTypeID=SB&LegID=135458&SessionID=110&GA=102) |  | |  | | --- | | [Sara Feigenholtz](https://ilga.gov/senate/Senator.asp?MemberID=2977) | |  | | SCH CD-SPECIAL ED PROVIDER | 03/03/2021 | Senate | Referred to Assignments |
| [SB2800](https://ilga.gov/legislation/BillStatus.asp?DocNum=2800&GAID=16&DocTypeID=SB&LegID=135528&SessionID=110&GA=102) | h | |  | | --- | | [Don Harmon](https://ilga.gov/senate/Senator.asp?MemberID=2806) | | [(Emanuel Chris Welch)](https://ilga.gov/house/Rep.asp?MemberID=2859) | | **$STATE APPELLATE DEFENDER** | 06/17/2021 | Senate | Public Act . . . . . . . . . 102-0017 |
| \*\*\*\* | ***HA 3 - Budget & Capital Bill.*** | | | | | |

**OTs – 102nd GA** Totals: 48 - (House Bills: 24) (Senate Bills: 24) (Other Bills: 0)

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|  | Legislative Information System | 8/16/2021 |
|  | 102nd General Assembly | 6:04:51 PM |
|  | **All Bills (Bill Order)** |  |
| Both Chambers | **OTs – 102nd GA** |  |

HB 16   
  
Short Description:  MEDICAID-AUTISM TREATMENT  
  
House Sponsors  
Rep. Deb Conroy-Katie Stuart, Tony McCombie, Barbara Hernandez, Charles Meier and Joyce Mason

Synopsis As Introduced  
      Amends the Medical Assistance Article of the Illinois Public Aid Code. Provides that the treatment of autism spectrum disorder through applied behavior analysis shall be covered under the medical assistance program for children with a diagnosis of autism spectrum disorder when ordered by a certified, registered, or licensed health care professional with expertise in treating the effects of autism spectrum disorders when the care is determined to be medically necessary and ordered by a physician licensed to practice medicine in all its branches. Provides that certain treatment shall be covered, including, but not limited to, psychiatric, psychological, rehabilitative, and therapeutic care. Effective July 1, 2021.  
  
Last Action

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| --- | --- | --- |
| **Date** | **Chamber** | **Action** |
| **3/27/2021** | **House** | **Rule 19(a) / Re-referred to Rules Committee** |

HB 158   
  
Short Description:  HEALTH CARE & HUMAN SERVICES  
  
House Sponsors  
Rep. Camille Y. Lilly-Mary E. Flowers-LaToya Greenwood-Emanuel Chris Welch-Carol Ammons, Kelly M. Cassidy, Delia C. Ramirez, Michelle Mussman, Greg Harris, Robyn Gabel, Anna Moeller, Anne Stava-Murray, Kambium Buckner, Curtis J. Tarver, II, Lakesia Collins, William Davis, Marcus C. Evans, Jr., La Shawn K. Ford, Jehan Gordon-Booth, Sonya M. Harper, Thaddeus Jones, Rita Mayfield, Debbie Meyers-Martin, Lamont J. Robinson, Jr., Justin Slaughter, Nicholas K. Smith, André Thapedi, Maurice A. West, II, Jawaharial Williams, Elizabeth Hernandez, Barbara Hernandez, Eva Dina Delgado, Fred Crespo, Edgar Gonzalez, Jr., Will Guzzardi, Lindsey LaPointe, Natalie A. Manley, Sue Scherer, Denyse Wang Stoneback, Dagmara Avelar, Kathleen Willis, Aaron M. Ortiz, Suzanne Ness and Jaime M. Andrade, Jr.  
  
Senate Sponsors  
(Sen. Mattie Hunter-Robert Peters, Mike Simmons-Jacqueline Y. Collins-Patricia Van Pelt, Patrick J. Joyce, Ann Gillespie, Emil Jones, III-Kimberly A. Lightford, Cristina Castro, Cristina H. Pacione-Zayas, Elgie R. Sims, Jr., Napoleon Harris, III, Karina Villa, Julie A. Morrison and Doris Turner)

Synopsis As Introduced  
      Creates the Community Health Worker Certification and Reimbursement Act. Amends various Acts regarding medical staff credentials; electronic posters and signs; N95 masks; Legionella bacteria testing; continuing education on implicit bias awareness; overdoses; the Prescription Monitoring Program; a dementia training program; taxation of blood sugar testing materials; funding of safety-net hospitals; a Child Care Assistance Program Eligibility Calculator; managed care organizations; Federally Qualified Health Centers; care coordination; billing; the Medicaid Business Opportunity Commission; reimbursement rates; doula services; personal care of family members; the State Health Assessment; the State Health Improvement Plan; child care training; and a Medicaid Managed Care Oversight Commission. Creates the Behavioral Health Workforce Education Center of Illinois Act. Creates the Underlying Causes of Crime and Violence Study Act. Creates the Special Commission on Gynecologic Cancer Act. Creates the Racial Impact Note Act to require the estimate of the impact on racial and ethnic minorities of certain bills. Creates the Health and Human Services Task Force and Study Act to review health and human service departments and programs. Creates the Anti-Racism Commission Act concerning elimination of systemic racism. Creates the Sickle Cell Prevention, Care, and Treatment Program Act regarding programs and other matters. Amends the Illinois Health Facilities Planning Act in relation to the Health Facilities and Services Review Board, facility closure, and other matters. Creates the Medicaid Technical Assistance Act. Repeals, adds, and changes other provisions. Effective immediately.  
  
House Committee Amendment No. 1  
     Replaces everything after the enacting clause with the provisions of the introduced bill with the following changes: Removes language requiring the SHA and SHIP Partnership to regularly evaluate and update the State Health Assessment and track implementation of the State Health Improvement Plan with revisions as necessary. In provisions amending the Illinois Controlled Substances Act and regarding the Prescription Monitoring Program: (1) presents the findings of the General Assembly; (2) provides that opioid treatment programs may not transmit information without patient consent, and reports made may not be utilized for law enforcement purposes; and (3) provides that treatment of a patient may not be conditioned upon his or her consent to reporting. Removes provisions amending the Illinois Public Aid Code regarding child care. Removes language requiring the Department of Healthcare and Family Services to issue quarterly reports to the Governor and the General Assembly indicating: (i) the number of determinations of noncompliance since the last quarter; (ii) the number of financial penalties imposed; and (iii) the outcome or status of each determination. Makes other changes.  
  
House Floor Amendment No. 3  
     Removes provisions amending the Illinois Controlled Substances Act regarding the Prescription Monitoring Program. Makes changes in provisions amending the Adult Protective Services Act regarding adult protective services dementia training. In provisions regarding increasing access to primary care in hospitals, removes language providing that the program developed by the Department of Healthcare and Family Services shall encourage coordination between FQHCs and hospitals. In the Sickle Cell Prevention, Care, and Treatment Program Act, provides that expenditures from the Sickle Cell Chronic Disease Fund shall be subject to appropriation. Makes the following changes to the Medicaid Technical Assistance Center Act: (1) provides that the Center: (i) shall undertake efforts to identify and engage community-based providers offering behavioral health services or services addressing the social determinants of health, especially those predominantly serving communities of color or those operating within or near service deserts, for the purpose of offering training and technical assistance to them through the Center; and (ii) is committed to the principle that all Medicaid recipients have accessible and equitable physical and mental health care services; (2) requires all providers served through the Center to deliver services notwithstanding the patient's race, color, gender, gender identity, age, ancestry, marital status, military status, religion, national origin, disability status, sexual orientation, order of protection status, or immigration status; and (3) provides that moneys in the Medicaid Technical Assistance Center Fund shall be used for specified purposes, subject to appropriation. Makes other changes.  
  
Last Action

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| **Date** | **Chamber** | **Action** |
| **4/27/2021** | **House** | **Public Act . . . . . . . . . 102-0004** |

HB 159   
  
Short Description:  HEALTH CARE & HUMAN SERVICES  
  
House Sponsors  
Rep. Camille Y. Lilly

Synopsis As Introduced  
      Creates the Community Health Worker Certification and Reimbursement Act. Amends various Acts regarding medical staff credentials; electronic posters and signs; N95 masks; Legionella bacteria testing; continuing education on implicit bias awareness; overdoses; the Prescription Monitoring Program; a dementia training program; taxation of blood sugar testing materials; funding of safety-net hospitals; a Child Care Assistance Program Eligibility Calculator; managed care organizations; Federally Qualified Health Centers; care coordination; billing; the Medicaid Business Opportunity Commission; reimbursement rates; doula services; personal care of family members; the State Health Assessment; the State Health Improvement Plan; child care training; and a Medicaid Managed Care Oversight Commission. Creates the Behavioral Health Workforce Education Center of Illinois Act. Creates the Underlying Causes of Crime and Violence Study Act. Creates the Special Commission on Gynecologic Cancer Act. Creates the Racial Impact Note Act to require the estimate of the impact on racial and ethnic minorities of certain bills. Creates the Health and Human Services Task Force and Study Act to review health and human service departments and programs. Creates the Anti-Racism Commission Act concerning elimination of systemic racism. Creates the Sickle Cell Prevention, Care, and Treatment Program Act regarding programs and other matters. Amends the Illinois Health Facilities Planning Act in relation to the Health Facilities and Services Review Board, facility closure, and other matters. Repeals, adds, and changes other provisions. Effective immediately.  
  
Last Action

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| **Date** | **Chamber** | **Action** |
| **3/27/2021** | **House** | **Rule 19(a) / Re-referred to Rules Committee** |

HB 309   
  
Short Description:  IMPLICIT BIAS TRAINING HEALTH  
  
House Sponsors  
Rep. LaToya Greenwood, Stephanie A. Kifowit and Barbara Hernandez

Synopsis As Introduced  
      Creates the Implicit Bias Training for Health Care Professionals Act. Provides that in order to renew a license as a health care professional in the State, a licensee shall complete an evidence-based implicit bias training, which shall include the promotion of bias-reducing strategies to address how unintended biases regarding race, ethnicity, gender, identity, sexual orientation, socioeconomic status, or other characteristics affect the health care industry. Specifies information that shall be included in the implicit bias training. Provides that the Department of Financial and Professional Regulation shall adopt rules to implement the Act.  
  
Last Action

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| **Date** | **Chamber** | **Action** |
| **3/27/2021** | **House** | **Rule 19(a) / Re-referred to Rules Committee** |

HB 707   
  
Short Description:  TELEHEALTH INSURANCE COVERAGE  
  
House Sponsors  
Rep. Daniel Didech, Jonathan Carroll, Stephanie A. Kifowit, Suzanne Ness and Lindsey LaPointe

Synopsis As Introduced  
      Amends the Illinois Insurance Code. In provisions concerning coverage for telehealth services, provides that if an individual or group policy of accident or health insurance provides coverage for telehealth services, reimbursement for services provided through telehealth services shall be equivalent to reimbursement for the same services provided through in-person consultation.  
  
Last Action

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| **Date** | **Chamber** | **Action** |
| **3/27/2021** | **House** | **Rule 19(a) / Re-referred to Rules Committee** |

HB 1822   
  
Short Description:  EARLY CHILDHOOD PROGRAM ELIGIB  
  
House Sponsors  
Rep. William Davis and Kathleen Willis

Synopsis As Introduced  
      Creates the Early Childhood Program Eligibility Screening Act. Establishes the Early Childhood Program Eligibility Screening Program to coordinate the enrollment of children into early childhood programs that receive 90% or more of their funding through federal and State funds and that provide services to children from birth to 5 years of age. Sets forth requirements for the program. Provides that the program shall be implemented and administered by the Governor's Office of Early Childhood Development, which shall act in cooperation with other programs serving young children in the community. Requires the Governor's Office of Early Childhood Development to develop a Universal Early Childhood Program Application. Provides that each early childhood program in a community that receives 90% or more of its funding through federal and State funds and that provides services to children from birth to 5 years of age shall use the application to determine a family's eligibility for any and all of the community's early childhood programs. Sets forth what must be included on the application. Contains provisions concerning enrollment and placement. Provides for rulemaking.  
  
House Committee Amendment No. 1  
     Replaces everything after the enacting clause. Reinserts the contents of the bill with the following changes. Renames the Act to the Early Childhood Program Recruitment and Eligibility Screening Pilot Program Act. Renames the program created under the Act to the Early Childhood Program Recruitment and Eligibility Screening Pilot Program. Provides that the State Board of Education (rather than the Governor's Office of Early Childhood Development) shall implement and administer the pilot program. Removes early intervention services or programs, Child and Family Connections offices, the Child Find Project, and the Maternal, Infant, and Early Childhood Home Visiting Program as programs included in the pilot program. Provides that the Early Childhood Program Recruitment and Eligibility Screening Pilot Program shall begin with the 2021-2022 school year and shall operate for a period of 2 school years in which either Pilot Program One or Pilot Program Two shall be implemented as determined by the location of the participating entity; defines "participating entity". Provides that the State Board of Education (rather than the Governor's Office of Early Childhood Development) shall develop a Universal Early Childhood Program Application. Adds an effective date of July 1, 2021.  
  
Last Action

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| **Date** | **Chamber** | **Action** |
| **4/23/2021** | **House** | **Rule 19(a) / Re-referred to Rules Committee** |

HB 1824   
  
Short Description:  BEHAVIOR ANALYST-LICENSURE  
  
House Sponsors  
Rep. Kathleen Willis

Synopsis As Introduced  
      Creates the Behavior Analyst Licensing Act. Provides for licensure of behavior analysts and assistant behavior analysts. Creates the Advisory Board of Behavior Analysts. Provides qualifications for licensure application, including for those who have met certain requirements before the effective date of the Act. Establishes the powers and duties of the Department of Financial and Professional Regulation, including, but not limited to, adopting rules setting forth minimum standards for licensure, taking disciplinary or nondisciplinary actions, and authorizing examinations. Provides for grounds for disciplinary actions and for civil and criminal penalties for violations of the Act. Creates provisions concerning hearings, appointment of hearing officers, and rehearings. Provides for judicial review of all final administrative decisions of the Department. Amends the Regulatory Sunset Act. Provides that the Behavior Analyst Licensing Act is repealed on January 1, 2032. Effective immediately.  
  
Last Action

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| **Date** | **Chamber** | **Action** |
| **3/27/2021** | **House** | **Rule 19(a) / Re-referred to Rules Committee** |

HB 2474   
  
Short Description:  IEMA-LIC REVOCATION PROHIBITED  
  
House Sponsors  
Rep. Deanne M. Mazzochi

Synopsis As Introduced  
      Amends the Illinois Emergency Management Agency Act. Provides that no occupational or professional license issued by any State agency to a business or person may be revoked or suspended based upon a failure to comply with an executive order related to the COVID-19 Pandemic, unless a court order has been obtained to allow such license revocation or suspension. Provides that no State agency or employee of that State agency may enter on to the premises of a business or person for the purpose of effectuating the revocation or suspension of an occupational or professional license based upon a failure to comply with an executive order related to the COVID-19 Pandemic, unless a court order has been obtained to allow the enforcing State agency to enter on to the premises for such purpose and notice has been provided to the relevant State legislators of the district in which the business or person resides. Effective immediately.  
  
Last Action

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| **Date** | **Chamber** | **Action** |
| **3/27/2021** | **House** | **Rule 19(a) / Re-referred to Rules Committee** |

HB 2554   
  
Short Description:  TELEHEALTH-RULES-ACUPUNCTURE  
  
House Sponsors  
Rep. Theresa Mah, Mike Murphy and Mark L. Walker  
  
Senate Sponsors  
(Sen. Emil Jones, III)

Synopsis As Introduced  
      Amends the Telehealth Act. Provides that the Department of Financial and Professional Regulation, in consultation with the appropriate advisory board, may adopt rules to clarify applicable services and administer the Act. Changes the definition of "health care professional" to include acupuncturists.  
  
Last Action

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| **Date** | **Chamber** | **Action** |
| **5/30/2021** | **Senate** | **Rule 3-9(a) / Re-referred to Assignments** |

HB 2776   
  
Short Description:  DFPR-MILITARY LICENSING  
  
House Sponsors  
Rep. LaToya Greenwood-Jay Hoffman-Katie Stuart, Charles Meier, Norine K. Hammond, Tony McCombie, Andrew S. Chesney, Dave Vella, Deanne M. Mazzochi, Angelica Guerrero-Cuellar, Mark Luft, Natalie A. Manley, Debbie Meyers-Martin, Daniel Swanson and Dan Caulkins  
  
Senate Sponsors  
(Sen. Christopher Belt, Rachelle Crowe-Jason Plummer and Steve Stadelman-Doris Turner)

Synopsis As Introduced  
      Amends the Civil Administrative Code of Illinois. Provides that service members and their spouses may engage in the practice of their occupation or profession without being licensed in the State of Illinois, subject to outlined circumstances and limitations. Provides that each director of a department that issues an occupational or professional license shall verify that the existing license for a service member or military spouse is in good standing from any state, commonwealth, or territory of the United States or the District of Columbia. Provides that if an existing license for a service member or military spouse is in good standing, the Department of Financial and Professional Regulation shall waive any examination, educational, or experience requirements enabling exception to state licensure requirements. Provides that a department may adopt any rules necessary for the implementation and administration of provisions regarding military license exceptions and by rule shall provide for fees for administration.  
  
Senate Committee Amendment No. 1  
     Replaces everything after the enacting clause. Amends the Civil Administrative Code of Illinois. Provides that review and determination of an application for a professional license to a service member or his or her spouse shall be expedited by the department processing the application within 30 days (instead of 60) after the date on which the department receives all necessary documentation. Includes any required information from State and federal agencies as necessary documentation. Removes language requiring that the requirements for licensure in another state in which the service member or his or her spouse is licensed be substantially equivalent to the standards for licensure of this State. Provides instead that an application for licensure by a service member or his or her spouse must include proof that the applicant meets the requirements and standards for licensure through endorsement or reciprocity for the occupation or profession for which the applicant is applying.  
  
Last Action

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| **Date** | **Chamber** | **Action** |
| **6/29/2021** | **House** | **Sent to the Governor** |

HB 2881   
  
Short Description:  PHYSICAL THERAPY COMPACT  
  
House Sponsors  
Rep. Deanne M. Mazzochi

Synopsis As Introduced  
      Amends the Illinois Physical Therapy Act. Provides that the State of Illinois ratifies and approves the Physical Therapy Licensure Compact. Provides that the purpose of the Compact is to facilitate interstate practice of physical therapy with the goal of improving public access to physical therapy services, and states that the Compact preserves the regulatory authority of states to protect public health and safety through the current system of state licensure. The Compact contains provisions concerning definitions, state participation in the Compact, active duty military personnel and their spouses, adverse actions, establishment of the Physical Therapy Compact Commission, a data system, rulemaking, oversight, dispute resolution, and enforcement, date of implementation, withdrawal, construction, and severability.  
  
Last Action

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| **Date** | **Chamber** | **Action** |
| **3/27/2021** | **House** | **Rule 19(a) / Re-referred to Rules Committee** |

HB 2896   
  
Short Description:  EARLY INTERVENTION-TELEHEALTH  
  
House Sponsors  
Rep. Deb Conroy-Robyn Gabel, Margaret Croke, Theresa Mah, Lindsey LaPointe, Maura Hirschauer, Kelly M. Cassidy, Anna Moeller, Terra Costa Howard, Daniel Didech and Katie Stuart

Synopsis As Introduced  
      Amends the Early Intervention Services System Act. Permits an early intervention provider to deliver via telehealth any type of early intervention services authorized under the Act to the extent of his or her scope of practice as established in his or her respective licensing Act consistent with the standards of care for in-person services. Requires parents to be informed of the availability of early intervention services provided through telehealth. Amends the Illinois Insurance Code. Provides that a policy of accident and health insurance that provides coverage for early intervention services must also provide coverage for early intervention services delivered via telehealth by providers listed under the Early Intervention Services System Act, subject to any restriction or limitation under a provider's respective licensing Act on the delivery of early intervention services via telehealth. Amends the Telehealth Act. Expands the definition of "telehealth" to include the delivery of early intervention services provided by way of an interactive telecommunications system. Expands the definition of "health professional" to include certain professional personnel who are authorized by State law to provide behavioral health services or early intervention services (rather than mental health services). Provides that a health care professional, including any early intervention provider, may engage in the practice of telehealth in Illinois to the extent of his or her scope of practice as established in his or her respective licensing Act consistent with the standards of care for in-person services. Amends the Illinois Public Aid Code. Requires the Department of Healthcare and Family Services to reimburse early intervention providers who deliver early intervention services to medical assistance recipients via telehealth.  
  
Last Action

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| **Date** | **Chamber** | **Action** |
| **3/27/2021** | **House** | **Rule 19(a) / Re-referred to Rules Committee** |

HB 3100   
  
Short Description:  ANCRA-IMPLICIT BIAS TRAINING  
  
House Sponsors  
Rep. Delia C. Ramirez, Michelle Mussman, Joyce Mason and Angelica Guerrero-Cuellar  
  
Senate Sponsors  
(Sen. Karina Villa, David Koehler-Jacqueline Y. Collins and Adriane Johnson-Patricia Van Pelt)

Synopsis As Introduced  
      Amends the Abused and Neglected Child Reporting Act. Requires mandated reporters to complete an initial implicit bias training within 3 months of their date of engagement in a professional or official capacity as a mandated reporter, with certain exceptions, and at least every 3 years thereafter. Provides that the implicit bias trainings shall be in-person or web-based and shall include, at a minimum, information on implicit bias and racial and ethnic sensitivity. Requires the implicit bias trainings to provide tools to adjust automatic patterns of thinking and ultimately eliminate discriminatory behaviors. Provides that, during these trainings, mandated reporters shall complete a pretest to assess baseline implicit bias levels, an implicit bias training task, and a posttest to reevaluate bias levels after training. Provides that the implicit bias curriculum for mandated reporters shall be developed within one year after the effective date of the amendatory Act and shall be created in consultation with organizations demonstrating expertise and or experience in the areas of implicit bias, youth and adolescent developmental issues, prevention of child abuse, exploitation, and neglect, culturally diverse family systems, and the child welfare system. Provides that implicit bias training shall be provided through the Department of Children and Family Services, through authorized entities.  
  
House Floor Amendment No. 1  
     Requires mandated reporters to complete an initial mandated reporter training, including a section on implicit bias training (rather than an initial mandated reporter training and an initial implicit bias training).  
  
Senate Committee Amendment No. 1  
     Replaces all references to "implicit bias training" with "implicit bias". Provides that the implicit bias section (rather than the implicit bias trainings) shall be in-person or web-based and shall include information on certain topics. Provides that the mandated reporter training, including a section on implicit bias training, shall be provided through the Department of Children and Family Services (rather than the mandated reporter training and the implicit bias training shall be provided through the Department).  
  
Last Action

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| **Date** | **Chamber** | **Action** |
| **6/28/2021** | **House** | **Sent to the Governor** |

HB 3170   
  
Short Description:  IMPLICIT BIAS TRAINING ACT  
  
House Sponsors  
Rep. Maura Hirschauer

Synopsis As Introduced  
      Creates the Implicit Bias Training for Health Care Professionals Act. Provides that in order to renew a license as a health care professional in the State, a licensee shall complete an evidence-based implicit bias training, which shall include the promotion of bias-reducing strategies to address how unintended biases regarding gender identity or sexual orientation affect the health care industry. Specifies information that shall be included in the implicit bias training. Provides that the Department of Financial and Professional Regulation shall adopt rules to implement the Act.  
  
Last Action

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| **Date** | **Chamber** | **Action** |
| **3/27/2021** | **House** | **Rule 19(a) / Re-referred to Rules Committee** |

HB 3308   
  
Short Description:  INS-TELEHEALTH SERVICES  
  
House Sponsors  
Rep. Thaddeus Jones-Deb Conroy-Dan Brady-Bob Morgan-Rita Mayfield, Stephanie A. Kifowit, LaToya Greenwood, Camille Y. Lilly, Deanne M. Mazzochi, Nicholas K. Smith, Keith P. Sommer, Mark L. Walker, Janet Yang Rohr, Anthony DeLuca, Robyn Gabel, Tony McCombie, Anna Moeller, Thomas Morrison, Mike Murphy, Adam Niemerg, Sue Scherer, Chris Bos, Suzanne Ness, Debbie Meyers-Martin and Dagmara Avelar  
  
Senate Sponsors  
(Sen. Napoleon Harris, III-Cristina H. Pacione-Zayas-Jacqueline Y. Collins, Thomas Cullerton, Sally J. Turner-Linda Holmes, Dan McConchie, Laura Fine, Meg Loughran Cappel, John Connor, Michael E. Hastings, Sue Rezin, Suzy Glowiak Hilton, Doris Turner, Rachelle Crowe, Karina Villa, Steve Stadelman, Jason A. Barickman, Adriane Johnson, Julie A. Morrison, Patrick J. Joyce, Patricia Van Pelt, Scott M. Bennett, Cristina Castro-Mattie Hunter, Bill Cunningham, Sara Feigenholtz, Christopher Belt, Elgie R. Sims, Jr., Steven M. Landek, Laura M. Murphy, Laura Ellman and Mike Simmons)

Synopsis As Introduced  
      Amends the Illinois Insurance Code. Includes the delivery of covered health care services by way of telephone usage in the definition of "telehealth services". Provides that health care services that are covered under an individual or group policy of accident or health insurance must be covered when delivered via telehealth services when clinically appropriate, subject to specified conditions (rather than requiring an individual or group policy of accident or health insurance to comply with specified conditions if it provides coverage for telehealth services). Provides that patient cost-sharing may be no more than if the health care service were delivered in person. Provides that no excepted benefit policy may deny or reduce any benefit to a patient based on the use of clinically appropriate telehealth services in the course of satisfying the policy's benefit criteria.  
  
House Committee Amendment No. 1  
     Replaces everything after the enacting clause with the provisions of the introduced bill with the following changes. In provisions concerning health care services that are covered under an individual or group policy of accident and health insurance that must be covered when delivered via telehealth services when clinically appropriate, provides that reimbursement to a health care provider for telehealth services for behavioral health services provided through an interactive telecommunications system shall be made on the same basis, in the same manner, and at the same rate as would be applied for the same services if they had been delivered in-person and shall include reasonable compensation to a facility that serves as the originating site at the time a telehealth service is rendered. Provides that with respect to telehealth benefits provided in an individual or group policy of accident or health insurance, insurers may not (rather than an individual or group policy of accident or health insurance may not) require patients to use a separate panel of health care providers to receive telehealth service coverage and reimbursement; create geographic or facility restrictions or requirements for telehealth services; require patients or health care providers to prove a hardship or access barrier before the approval of telehealth services for coverage or reimbursement; negotiate different contract rates for telehealth services and in-person services for behavioral health services; or impose upon telehealth services utilization review requirements that are unnecessary, duplicative, or unwarranted or impose any treatment limitations, prior authorization, documentation, or recordkeeping requirements that are more stringent than the requirements applicable to the same health care service when rendered in-person. Provides that health care providers shall determine the appropriateness of specific sites, technology platforms, and technology vendors for a telehealth service, as long as delivered services adhere to privacy laws. Defines terms.  
  
House Floor Amendment No. 2  
     Replaces everything after the enacting clause with the provisions of the introduced bill with the following changes. Provides that a health insurer shall reimburse a network provider for behavioral health services delivered through telehealth on at least the same basis and at the same rate as if delivered in-person. Provides that a health insurer may establish reasonable requirements and parameters for telehealth services. Further amends the Illinois Insurance Code. Creates the Telehealth Payment Parity Task Force to review and study the use of telehealth services in the State with respect to payment and reimbursement parity for health care providers providing such services. Sets forth provisions concerning election of a chairperson, compensation, and appointments of members of the Telehealth Payment Parity Task Force. Provides that the task force shall submit its findings and recommendations to the Governor and General Assembly by December 31, 2021. Provides that the task force is dissolved on January 1, 2023. Amends the Telehealth Act. In provisions concerning use of telehealth, provides that services provided by telehealth shall be consistent with all federal and State privacy, security, and confidentiality laws. Provides that health care professionals shall determine the appropriateness of specific sites, technology platforms, and technology vendors for a telehealth service, as long as delivered services adhere to specified privacy laws. Provides that health care professionals shall maintain documentation and recordkeeping in accordance with specified provisions of the Illinois Administrative Code. Amends the Early Intervention Services System Act. Permits an early intervention provider to deliver via telehealth any type of early intervention services authorized under the Act to the extent of his or her scope of practice as established in his or her respective licensing Act consistent with the standards of care for in-person services. Requires parents to be informed of the availability of early intervention services provided through telehealth. Provides that parents shall make the final decision as to whether accepted early intervention services are delivered in person or via telehealth. Defines terms. Makes other changes. Effective immediately.  
  
Senate Committee Amendment No. 1  
     Replaces everything after the enacting clause with the provisions of the engrossed bill with the following changes. Provides that an individual or group policy of accident or health insurance that is amended, delivered, issued, or renewed on or after the effective date of the amendatory Act shall cover telehealth services, e-visits, and virtual check-ins rendered by a health care professional when clinically appropriate and medically necessary to insureds, enrollees, and members in the same manner as any other benefits covered under the policy. Provides that an individual or group policy of accident or health insurance may provide reimbursement to a facility that serves as the originating site at the time a telehealth service is rendered. Sets forth provisions with which coverage for telehealth services shall comply. Provides that an individual or group policy of accident or health insurance shall notify health care professionals and facilities of any instructions necessary to facilitate billing for telehealth services, e-visits, and virtual check-ins. Provides that the Department of Insurance and the Department of Public Health shall commission a report to the General Assembly and shall submit the report by December 31, 2026. Provides that the Department of Insurance may adopt rules to implement the provisions. Provides that specified provisions are inoperative on and after January 1, 2028. Removes provisions concerning the Telehealth Payment Parity Task Force. Defines terms. Further amends the Telehealth Act. Changes a reference to "telehealth" to "telehealth services." Removes language that provides that health care professionals shall maintain documentation and recordkeeping in accordance with specified provisions of the Illinois Administrative Code. Defines terms. Amends the Illinois Administrative Procedure Act to provide for emergency rulemaking. Makes other changes. Effective immediately.  
  
Last Action

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| **Date** | **Chamber** | **Action** |
| **7/22/2021** | **House** | **Public Act . . . . . . . . . 102-0104** |

HB 3324   
  
Short Description:  SCH CD-DYSLEXIA SCREENING  
  
House Sponsors  
Rep. Jackie Haas-Keith P. Sommer and Anne Stava-Murray

Synopsis As Introduced  
      Amends the School Code. Provides for dyslexia screening guidelines and rules. Requires the State Board of Education to provide technical assistance for specific learning disabilities to school districts. Provides that, beginning with the 2021-2022 school year, each school district must screen students in grades kindergarten through second for the risk factors of dyslexia using a universal screener. Sets forth what the screening must include. Provides for additional screening for a student who is determined to be at risk, or at some risk, for dyslexia to determine if the student has the characteristics of dyslexia. Requires the use of a multi-tiered system of support framework if screening indicates that a student has some risk factors for dyslexia or has the characteristics of dyslexia. Sets forth provisions concerning exceptions to screening, dyslexia intervention services, and reporting. Effective July 1, 2021.  
  
Last Action

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| **Date** | **Chamber** | **Action** |
| **3/27/2021** | **House** | **Rule 19(a) / Re-referred to Rules Committee** |

HB 3498   
  
Short Description:  TELEHEALTH SERVICES  
  
House Sponsors  
Rep. Deb Conroy-Greg Harris-Norine K. Hammond-Ryan Spain-Bob Morgan, Michael J. Zalewski, Jonathan Carroll, Lindsey LaPointe, Patrick Windhorst, Kambium Buckner, Tim Butler, Daniel Swanson, Michael Halpin, Maura Hirschauer, Curtis J. Tarver, II, Robyn Gabel, Amy Elik, Michael T. Marron, Keith P. Sommer, Thomas M. Bennett, Randy E. Frese, Mark Luft, Kelly M. Cassidy, Martin J. Moylan, Chris Miller, Margaret Croke, Jeff Keicher, Barbara Hernandez, Amy Grant, Daniel Didech, Kelly M. Burke, Deanne M. Mazzochi, Chris Bos, Suzanne Ness, Will Guzzardi, Tony McCombie, Jehan Gordon-Booth, Dagmara Avelar, Terra Costa Howard, Angelica Guerrero-Cuellar, Natalie A. Manley, Maurice A. West, II, Joe Sosnowski, Lakesia Collins, Elizabeth Hernandez, Seth Lewis, Joyce Mason, Delia C. Ramirez, Emanuel Chris Welch, Eva Dina Delgado, Ann M. Williams, Jaime M. Andrade, Jr., Nicholas K. Smith, Katie Stuart, Dave Severin, Dan Caulkins, Robert Rita, Anthony DeLuca, Paul Jacobs, Debbie Meyers-Martin, Sue Scherer, Stephanie A. Kifowit and Lawrence Walsh, Jr.  
  
Senate Sponsors  
(Sen. Mattie Hunter-Patricia Van Pelt-Doris Turner-Laura M. Murphy, Rachelle Crowe, Sally J. Turner-Dale Fowler, Robert Peters, Jason Plummer, Mike Simmons, Laura Fine, John Connor, Cristina Castro, Laura Ellman, Linda Holmes, Adriane Johnson, David Koehler, Jacqueline Y. Collins, Donald P. DeWitte, Ann Gillespie, Bill Cunningham, Elgie R. Sims, Jr., Ram Villivalam, Christopher Belt, Melinda Bush, Terri Bryant, Jil Tracy, Julie A. Morrison, Karina Villa, Jason A. Barickman, Patrick J. Joyce, Craig Wilcox, Thomas Cullerton, Celina Villanueva and Sara Feigenholtz)

Synopsis As Introduced  
      Amends the Telehealth Act. Provides that the Act applies to all health insurance coverage offered by health insurance issuers regulated by the Department of Insurance or the Department of Healthcare and Family Services and the medical assistance program authorized under the Illinois Public Aid Code. Provides that any policy, contract, or certificate of health insurance coverage that does not distinguish between in-network and out-of-network providers shall be subject to the Act as though all providers were in-network. Provides that health insurance issuers shall cover all telehealth services rendered by a health care professional to deliver any clinically appropriate, medically necessary covered services. Restricts health insurance issuers from engaging in specified activities. Provides that health care professionals and facilities shall determine the appropriateness of specific sites, technology platforms, and technology vendors for a telehealth service, as long as delivered services adhere to privacy laws. Changes the term "telehealth" to "telehealth services". Makes corresponding changes. Defines terms. Amends the Illinois Insurance Code. In provisions concerning coverage for telehealth services, makes changes to definitions. Provides that coverage and reimbursement for telehealth services delivered by health care professionals and facilities shall comply with the Telehealth Act. Makes other changes. Amends the Illinois Public Aid Code. Provides that the Department and managed care organizations shall comply with the Telehealth Act and removes provisions concerning behavioral health and medical services via telehealth. Makes other changes. Amends the Illinois Administrative Procedure Act to provide for emergency rulemaking. Effective immediately.  
  
House Floor Amendment No. 1  
     Replaces everything after the enacting clause. Amends the Illinois Insurance Code. Provides that an individual or group policy of accident or health insurance or a managed care plan that is amended, delivered, issued, or renewed on or after the effective date of the amendatory Act shall cover all telehealth services rendered by a health care professional to deliver any clinically appropriate, medically necessary covered services, and shall not engage in specified activities. Provides that any policy, contract, or certificate of health insurance coverage that does not distinguish between in-network and out-of-network providers shall be subject to the Act as though all providers were in-network. Provides that health care professionals and facilities shall determine the appropriateness of specific sites, technology platforms, and technology vendors for a telehealth service, as long as delivered services adhere to privacy laws. Provides that there shall be no restrictions on originating site requirements for telehealth coverage or reimbursement to the distant site. Defines terms. Amends the Telehealth Act. Changes the term "telehealth" to "telehealth services". Amends the Illinois Public Aid Code. Provides that the Department of Healthcare and Family Services and managed care organizations shall comply with specified provisions of the Illinois Insurance Code and removes provisions concerning behavioral health and medical services via telehealth. Amends the Illinois Administrative Procedure Act to provide for emergency rulemaking. In provisions concerning coverage for telehealth services, removes language that provides that coverage and reimbursement for telehealth services delivered by health care professionals and facilities shall comply with the Telehealth Act. Removes changes to the Telehealth Act. Makes other changes. Effective immediately.  
  
House Floor Amendment No. 2  
     In provisions in the Illinois Administrative Procedure Act concerning emergency rulemaking, provides that provisions allowing the Department of Insurance and the Department of Healthcare and Family Services to adopt emergency rules are repealed on January 1, 2022 (rather than January 1, 2026). In provisions concerning coverage for telehealth services, provides that an individual or group policy of accident or health insurance or a managed care plan that is amended, delivered, issued, or renewed on or after the effective date of the amendatory Act shall not require that in-person contact occur between a health care professional and a patient (rather than in-person contact shall not occur between a health care professional and a patient, except before an initial e-visit or virtual check-in in order to establish a patient relationship).  
  
Last Action

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| **Date** | **Chamber** | **Action** |
| **5/29/2021** | **Senate** | **Rule 3-9(a) / Re-referred to Assignments** |

HB 3539   
  
Short Description:  MEDICAID-EI & DOULA SERVICES  
  
House Sponsors  
Rep. Maura Hirschauer

Synopsis As Introduced  
      Amends the Medical Assistance Article of the Illinois Public Aid Code. Provides that early intervention services and doula services shall be covered under the medical assistance program, subject to federal approval. Provides that no later than December 31, 2021, the Department of Healthcare and Family Services shall develop a payment methodology for early intervention services and a payment methodology for doula services and shall submit to the federal Centers for Medicare and Medicaid Services a Title XIX State Plan amendment to implement the amendatory Act. Effective immediately.  
  
Last Action

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| **Date** | **Chamber** | **Action** |
| **3/27/2021** | **House** | **Rule 19(a) / Re-referred to Rules Committee** |

HB 3619   
  
Short Description:  COM COL-BACHELOR'S DEGREE  
  
House Sponsors  
Rep. Fred Crespo, Lance Yednock, Delia C. Ramirez, Dave Vella, Edgar Gonzalez, Jr., Dagmara Avelar and Michelle Mussman

Synopsis As Introduced  
      Amends the Public Community College Act. Allows the board of trustees of a community college district to establish and offer a baccalaureate-level early childhood education program and confer a bachelor of applied science degree in early childhood education and a Professional Educator License with endorsements in early childhood education and early childhood special education under certain conditions. Provides for an application for approval from the Illinois Community College Board. Sets forth college requirements and prohibitions. Provides that a candidate for educator licensure must successfully complete applicable testing requirements prior to the issuance of an educator license and any endorsements. Provides for a statewide evaluation of such programs.  
  
Last Action

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| **Date** | **Chamber** | **Action** |
| **3/27/2021** | **House** | **Rule 19(a) / Re-referred to Rules Committee** |

HB 3706   
  
Short Description:  SCH CD-SPECIAL ED-THERAPEUTICS  
  
House Sponsors  
Rep. Natalie A. Manley-William Davis

Synopsis As Introduced  
      Amends the Children with Disabilities Article of the School Code. Includes public therapeutics programs in the definition of "special educational facilities and services". In a provision requiring a school district to pay the cost of tuition for special education and related services if a child attends a non-public school or special education facility, a public out-of-state school, or a special education facility owned and operated by a county government unit, provides that the special education and related services includes public therapeutics programs.  
  
Last Action

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| **Date** | **Chamber** | **Action** |
| **3/27/2021** | **House** | **Rule 19(a) / Re-referred to Rules Committee** |

HB 3758   
  
Short Description:  INS CODE-TELEHEALTH SERVICES  
  
House Sponsors  
Rep. Ryan Spain and Chris Miller

Synopsis As Introduced  
      Amends the Illinois Insurance Code. Provides that individual or group policies of accident or health insurance that cover telehealth services must provide coverage for telehealth services used to treat a mental, emotional, nervous, or substance use disorder or condition.  
  
Last Action

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| **Date** | **Chamber** | **Action** |
| **3/27/2021** | **House** | **Rule 19(a) / Re-referred to Rules Committee** |

HB 3759   
  
Short Description:  INS-TELEHEALTH PARITY ACT  
  
House Sponsors  
Rep. Ryan Spain and Chris Miller

Synopsis As Introduced  
      Creates the Telehealth Parity Act. Requires all health insurance issuers regulated by the Department of Insurance to cover the costs of all telehealth services rendered by in-network providers to deliver any clinically appropriate, medically necessary covered services and treatments to insureds, enrollees, and members under each policy, contract, or certificate of health insurance coverage. Provides that health insurance issuers shall not impose upon telehealth services utilization review requirements that are unnecessary, duplicative, or unwarranted nor impose any treatment limitations that are more stringent than the requirements applicable to the same health care service when rendered in-person. Provides that, for telehealth services that relate to COVID-19 delivered by in-network providers, health insurance issuers shall not impose any prior authorization requirements. Contains provisions prohibiting cost-sharing for telehealth services, describing eligible services, and allowing use of non-public facing remote communication products under certain circumstances. Effective immediately.  
  
Last Action

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| **Date** | **Chamber** | **Action** |
| **3/27/2021** | **House** | **Rule 19(a) / Re-referred to Rules Committee** |

HB 3879   
  
Short Description:  DHFS-HEALTH CARE TELEMENTORING  
  
House Sponsors  
Rep. Curtis J. Tarver, II, Keith R. Wheeler, Seth Lewis, LaToya Greenwood, Anna Moeller and Emanuel Chris Welch  
  
Senate Sponsors  
(Sen. Karina Villa, Robert Peters-Patricia Van Pelt and Laura M. Murphy)

Synopsis As Introduced  
      Amends the Department of Healthcare and Family Services Law of the Civil Administrative Code of Illinois. Requires the Department of Healthcare and Family Services to designate one or more health care telementoring entities based on an application to be developed by the Department. Allows approved applicants from Illinois to be eligible for State funding in accordance with rules developed by the Department. Provides that funding shall be provided based on the number of physicians who are assisted by each approved health care telementoring entity and the hours of assistance provided to each physician. Defines "health care telementoring".  
  
Last Action

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| **Date** | **Chamber** | **Action** |
| **6/25/2021** | **House** | **Sent to the Governor** |

HB 4012   
  
Short Description:  REGULATORY SUNRISE REVIEW ACT  
  
House Sponsors  
Rep. Anna Moeller-Theresa Mah, Kelly M. Burke and Margaret Croke

Synopsis As Introduced  
      Creates the Regulatory Sunrise Review Act. Establishes a process to investigate and review the necessity of new regulation over a previously unregulated profession or occupation or the expansion of the scope of practice thereof. Provides that any professional or occupational group or organization, any individual, or any other interested party may submit to the Department of Financial and Professional Regulation an application for sunrise review of proposed legislation to regulate a profession or occupation that at the time of application does not require authorization by any agency of the State to practice or the expansion of the scope of practice of a licensed profession or occupation. Establishes minimum criteria for sunrise review. Provides that the Department shall establish the Sunrise Review Unit to consider applications for sunrise review. Specifies actions the Department may take in the course of considering an application for sunrise review. Provides that after evaluating the application, the Department shall submit its final report to the General Assembly. Effective July 1, 2022.  
  
Last Action

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| **Date** | **Chamber** | **Action** |
| **6/2/2021** | **House** | **Rule 19(a) / Re-referred to Rules Committee** |

SB 221   
  
Short Description:  HOME HEALTH-HOME SERVICES  
  
Senate Sponsors  
Sen. Bill Cunningham  
  
Synopsis As Introduced  
     Amends the Home Health, Home Services, and Home Nursing Agency Licensing Act. Provides that "home services" includes assistance with: bathing without client self-direction, including areas of the body other than those areas with special skin care needs; applying topical prescription lotions to rashes, skin tears, stage 1 or 2 decubiti, and first and second degree burns; applying compression stockings; assisting with normal feeding, including pre-measured, thickened liquids; applying shampoo in hair care treatment requiring a prescription; permitting nail filing of clients with conditions that might involve peripheral circulatory conditions; assisting with personal, mechanical, or electronic transfers of clients when the client can assist with transfer; assisting with ambulation of clients using adaptative equipment for ambulation; assisting with changing oxygen tanks, adjusting oxygen flow, and turning oxygen tanks on and off; and repositioning clients every 2 hours or as instructed by the plan of care.  
  
Last Action

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| **Date** | **Chamber** | **Action** |
| **5/21/2021** | **Senate** | **Rule 3-9(a) / Re-referred to Assignments** |

SB 339   
  
Short Description:  DHS-EARLY INTERVENTION RATES  
  
Senate Sponsors  
Sen. Omar Aquino-Cristina H. Pacione-Zayas, Robert Peters and Ram Villivalam  
  
Synopsis As Introduced  
     Amends the Early Intervention Services System Act. Provides that for State fiscal years 2022 and 2023, the Department of Human Services shall increase reimbursement rates for early intervention services and related services by 4% each State fiscal year. Effective immediately.  
  
Last Action

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| **Date** | **Chamber** | **Action** |
| **4/16/2021** | **Senate** | **Rule 3-9(a) / Re-referred to Assignments** |

SB 341   
  
Short Description:  MEDICAID TECHNICAL ASSISTANCE  
  
Senate Sponsors  
Sen. Mattie Hunter  
  
Synopsis As Introduced  
     Creates the Medicaid Technical Assistance Center Act. Requires the Department of Healthcare and Family Services to establish a Medicaid Technical Assistance Center (Center). Provides that the Center shall operate as a cross-system educational resource to strengthen the business infrastructure of health care provider organizations in Illinois to ultimately increase the capacity, access, health equity, and quality of Illinois' Medicaid managed care programs: HealthChoice Illinois and YouthCare. Requires the Center to be established within the Department's Office of Medicaid Innovation. Requires the Center to collaborate with public and private partners throughout the State to identify, establish, and maintain best practices necessary for health providers to ensure their capacity to participate in HealthChoice Illinois or YouthCare. Requires the Center to: (i) create and administer ongoing trainings for health care providers; (ii) maintain an independent, easy to navigate, and up-to-date website; and (iii) host regional learning collaboratives that will supplement the Center's training curriculum to bring together groups of stakeholders to share issues and best practices, and to escalate issues. Requires the Department to maximize federal financial participation for any moneys appropriated to the Department for the Medicaid Technical Assistance Center. Provides that any federal financial participation funds obtained shall be used for the further development and expansion of the Medicaid Technical Assistance Center. Amends the State Finance Act. Creates the Medicaid Technical Assistance Center Fund. Effective immediately.  
  
Last Action

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| **Date** | **Chamber** | **Action** |
| **4/16/2021** | **Senate** | **Rule 3-9(a) / Re-referred to Assignments** |

SB 517   
  
Short Description:  SCH CD-SPECIAL ED-THERAPEUTICS  
  
Senate Sponsors  
Sen. Meg Loughran Cappel, Sue Rezin, Scott M. Bennett, Rachelle Crowe-Terri Bryant, Dale Fowler, David Koehler and Robert F. Martwick  
  
House Sponsors  
(Rep. Natalie A. Manley and Michelle Mussman)  
  
Synopsis As Introduced  
     Amends the Children with Disabilities Article of the School Code. Includes public therapeutics programs in the definition of "special educational facilities and services". In a provision requiring a school district to pay the cost of tuition for special education and related services if a child attends a non-public school or special education facility, a public out-of-state school, or a special education facility owned and operated by a county government unit, provides that the special education and related services includes public therapeutics programs.  
  
Senate Committee Amendment No. 1  
     Replaces everything after the enacting clause. Amends the Children with Disabilities Article of the School Code. Includes separate public special education day schools in the definition of "special educational facilities and services", and defines "separate public special education day school". In a provision requiring a school district to pay the cost of tuition for special education and related services if a child attends a non-public school or special education facility, a public out-of-state school, or a special education facility owned and operated by a county government unit, provides that the special education and related services includes special education and related services provided by a separate public special education day school.  
  
Senate Floor Amendment No. 3  
     Replaces everything after the enacting clause. Amends the Children with Disabilities Article of the School Code to create the High-Cost Special Education Funding Commission for the purpose of making recommendations to the Governor and the General Assembly for an alternative funding structure in this State for high-cost special education students that is aligned to the principles of the evidence-based funding formula. Sets forth the membership of the Commission. Sets forth the topics the Commission must review. Contains provisions concerning administrative support, compensation, and reporting. Repeals the provisions on December 31, 2022. Effective immediately.  
  
Senate Floor Amendment No. 4  
     Makes changes to the membership of the Commission. Specifies that one member must be from a special education cooperative that is not a member district of a special education cooperative. Provides that the one member who represents a nonpublic special education school may be an educator or an administrator (rather than educator only). Adds one member who represents private special education schools in rural school districts; adds one member who represents a residential program. Removes the member who is a parent of a high-cost special education student.  
  
Last Action

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| **Date** | **Chamber** | **Action** |
| **7/23/2021** | **Senate** | **Public Act . . . . . . . . . 102-0150** |

SB 567   
  
Short Description:  OPTOMETRIC PRACTICE-TELEHEALTH  
  
Senate Sponsors  
Sen. Ram Villivalam, Laura Fine, Karina Villa, Bill Cunningham, Elgie R. Sims, Jr., Omar Aquino and Rachelle Crowe  
  
House Sponsors  
(Rep. Anna Moeller, Elizabeth Hernandez, Frances Ann Hurley and Kathleen Willis)  
  
Synopsis As Introduced  
     Amends the Illinois Optometric Practice Act of 1987. Provides that an optometrist licensed under the Act may practice optometry through telehealth as authorized by the Act and the Telehealth Act. Provides that an optometrist treating a patient located in Illinois through telehealth must be licensed under the Act. Provides that an optometrist practicing optometry through telehealth is subject to the same standard of care and practice standards that are applicable to optometric services provided in a clinic or office setting. Provides that an optometrist may not provide telehealth services unless the optometrist has established a provider-patient relationship with the patient. Provides that an optometrist treating a patient through telehealth must perform a minimum eye examination as required by the Illinois Administrative Code before prescribing eyeglasses or contact lenses to the patient. Provides that if the Department of Financial and Professional Regulation has reason to believe that a person has violated the provisions of the Act, it may issue a rule to show cause why an order to cease and desist should not be entered against that person. Provides that the rule shall clearly set forth the grounds relied upon by the Department and shall provide a period of 7 days from the date of the rule to file an answer to the satisfaction of the Department. Provides that failure to answer to the satisfaction of the Department shall cause an order to cease and desist to be issued immediately. Defines terms.  
  
Senate Floor Amendment No. 1  
     Provides that if there is any conflict between the provisions of the Illinois Optometric Practice Act of 1987 and the provisions of the Telehealth Act, the provisions of the Illinois Optometric Practice Act of 1987 control. Provides that an optometrist may treat a patient through telehealth in the absence of a provider-patient relationship when, in the professional judgment of the optometrist, emergency care is required. Provides that an optometrist treating a patient through telehealth must perform at least a minimum eye examination (rather than must perform a minimum eye examination) before prescribing eyeglasses or contact lenses to the patient.  
  
Last Action

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| **Date** | **Chamber** | **Action** |
| **7/23/2021** | **Senate** | **Public Act . . . . . . . . . 102-0153** |

SB 677   
  
Short Description:  PHYSICIANS-DEMENTIA TRAINING  
  
Senate Sponsors  
Sen. Ram Villivalam, Bill Cunningham, Rachelle Crowe, Robert Peters, Patrick J. Joyce-Jacqueline Y. Collins, Patricia Van Pelt-Christopher Belt, Karina Villa, Doris Turner, Kimberly A. Lightford, Laura M. Murphy-Emil Jones, III, Suzy Glowiak Hilton, Dale Fowler, Ann Gillespie, Mike Simmons, Laura Fine, John Connor, John F. Curran, Terri Bryant, Melinda Bush and Scott M. Bennett  
  
House Sponsors  
(Rep. Kathleen Willis-Stephanie A. Kifowit-Maurice A. West, II-Margaret Croke, Natalie A. Manley, Daniel Didech, Martin McLaughlin, Amy Grant, Kelly M. Cassidy, Barbara Hernandez, Katie Stuart, Jeff Keicher, Jonathan Carroll, Martin J. Moylan, Sam Yingling, Theresa Mah, Anna Moeller, Bob Morgan, Deanne M. Mazzochi, Michael T. Marron, Ryan Spain, Amy Elik, Maura Hirschauer, Debbie Meyers-Martin, Mark Batinick, Paul Jacobs, Patrick Windhorst, Frances Ann Hurley and Elizabeth Hernandez)  
  
Synopsis As Introduced  
     Amends the Medical Practice Act of 1987. Provides that not later than 12 months after the effective date of the amendatory Act, the Department of Financial and Professional Regulation shall adopt rules that require a person seeking licensure to practice medicine in all of its branches to have completed 3 hours of education on the diagnosis, treatment, and care of individuals with cognitive impairments, including, but not limited to, Alzheimer's disease and other dementias. Specifies that the education requirement shall only apply to applicants who serve or will serve adult populations and have or will have direct patient interactions in their capacity as physicians. Provides that not later than 12 months after the effective date of the amendatory Act, the Department shall adopt rules that require any continuing education for persons licensed to practice medicine under all of its branches to include an average of one hour of continuing education per license year on the diagnosis, treatment, and care of individuals with cognitive impairments, including, but not limited to, Alzheimer's disease and other dementias. Specifies that the continuing education requirement shall only apply to persons who serve adult populations and have direct patient interactions in their capacity as physicians. Provides that the curriculum used for the education and continuing education requirements shall cover the diagnosis of Alzheimer's disease and other dementias, including recognizing the signs and symptoms of dementia; person-centered care; assessment and care planning; and culturally competent health care.  
  
Senate Committee Amendment No. 2  
     Replaces everything after the enacting clause. Amends the Department of Professional Regulation Law of the Civil Administrative Code of Illinois. Provides that for license or registration renewals occurring on or after January 1, 2023, a health care professional who has continuing education requirements must complete at least a one-hour course in training on the diagnosis, treatment, and care of individuals with Alzheimer's disease and other dementias per renewal period. Provides that the training shall include, but not be limited to, assessment and diagnosis, effective communication strategies, and management and care planning. Provides that the requirement shall only apply to health care professionals who provide health care services to adult populations age 26 or older in the practice of their profession. Provides that a health care professional may count that one hour for completion of the course toward meeting the minimum credit hours required for continuing education. Provides that any training on Alzheimer's disease and other dementias applied to meet any other State licensure requirement, professional accreditation or certification requirement, or health care institutional practice agreement may count toward the continuing education requirement. Provides that the Department of Financial and Professional Regulation may adopt rules for the implementation of the continuing education requirement. Effective immediately.  
  
Senate Floor Amendment No. 4  
     Provides that the continuing education requirements shall only apply to health care professionals who provide health care services to, and have direct patient interactions with (rather than who provide health care services to), adult populations age 26 or older in the practice of their profession.  
  
Last Action

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| **Date** | **Chamber** | **Action** |
| **6/24/2021** | **Senate** | **Sent to the Governor** |

SB 925   
  
Short Description:  GOVERNMENT-TECH  
  
Senate Sponsors  
Sen. Ram Villivalam and Laura Fine-Julie A. Morrison-Cristina H. Pacione-Zayas  
  
Synopsis As Introduced  
     Amends the Thomson United States Penitentiary Cession Act. Makes a technical change in a Section concerning the short title.  
  
Last Action

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| **Date** | **Chamber** | **Action** |
| **4/30/2021** | **Senate** | **Rule 3-9(a) / Re-referred to Assignments** |

SB 1077   
  
Short Description:  REGULATION-TECH  
  
Senate Sponsors  
Sen. Cristina H. Pacione-Zayas  
  
Synopsis As Introduced  
     Amends the Savings Bank Act. Makes a technical change in a Section concerning registration of savings bank holding companies.  
  
Last Action

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| **Date** | **Chamber** | **Action** |
| **4/30/2021** | **Senate** | **Rule 3-9(a) / Re-referred to Assignments** |

SB 1078   
  
Short Description:  ATHLETIC TRAINERS/THERAPISTS  
  
Senate Sponsors  
Sen. Emil Jones, III-Neil Anderson  
  
House Sponsors  
(Rep. Theresa Mah and Norine K. Hammond)  
  
Synopsis As Introduced  
     Amends the Savings and Loan Share and Account Act. Makes a technical change to a Section relating to joint ownership of accounts.  
  
Senate Floor Amendment No. 2  
     Replaces everything after the enacting clause. Amends the Illinois Athletic Trainers Practice Act. Provides that an athletic trainer licensed under the Act may only perform dry needling after completion of requirements, as determined by the Department of Financial and Professional Regulation by rule, that meet or exceed specified requirements. Provides that dry needling shall only be performed by a licensed athletic trainer upon referral. Amends the Illinois Occupational Therapy Practice Act. In the definition of "occupational therapy services", provides that applying physical agent modalities as an adjunct to or in preparation for engagement in occupation may include dry needling. Provides that an occupational therapist licensed under the Act may only perform dry needling after completion of requirements, as determined by the Department by rule, that meet or exceed specified requirements. Provides that dry needling shall only be performed by a licensed occupational therapist upon referral. Amends the Illinois Physical Therapy Act. Provides that the definition of "physical therapy" includes the treatment of a person through dry needling. Provides that the definition of "physical therapy" does not include acupuncture. Provides that a physical therapist licensed under the Act may only perform dry needling after completion of requirements, as determined by the Department by rule, that meet or exceed specified requirements. Provides that dry needling shall only be performed by a licensed physical therapist. Removes language that prohibits newly-licensed physical therapists from practicing dry needling for at least one year from the date of initial licensure unless the practitioner can demonstrate compliance with certain education requirements; prohibits the delegation of dry needling to a physical therapist assistant or support personnel; and prohibits advertising, describing to patients or the public, or otherwise representing that dry needling is acupuncture.  
  
Senate Floor Amendment No. 3  
     Further amends the Illinois Physical Therapy Act. Provides that a physical therapist providing services to a patient who has been diagnosed by a health care professional as having a chronic disease that may benefit from physical therapy must communicate at least monthly with the patient's treating health care professional to provide updates on the patient's course of therapy. Provides that a physical therapist shall refer a patient to the patient's treating health care professional of record or, in the case where there is no health care professional of record, to a health care professional of the patient's choice, if the patient was under the care of a physical therapist without a diagnosis established by a health care professional of a chronic disease that may benefit from physical therapy and returns for services for the same or similar condition after 30 calendar days of being discharged by the physical therapist (rather than the patient returns for services for the same or similar condition after 30 calendar days of being discharged by the physical therapist). Provides that dry needling shall only be performed by a licensed physical therapist or licensed physical therapist assistant (rather than a licensed physical therapist) after specified training requirements are satisfied. Further amends the Occupational Therapy Practice Act. Provides that dry needling shall only be performed by a licensed occupational therapist or licensed occupational therapy assistant (rather than a licensed occupational therapist) after specified training requirements are satisfied.  
  
Last Action

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| **Date** | **Chamber** | **Action** |
| **8/6/2021** | **Senate** | **Public Act . . . . . . . . . 102-0307** |

SB 1079   
  
Short Description:  DFPR-HARASSMENT PREVENTION  
  
Senate Sponsors  
Sen. Melinda Bush  
  
House Sponsors  
(Rep. Kelly M. Cassidy and Katie Stuart)  
  
Synopsis As Introduced  
     Amends the Illinois Banking Act. Makes a technical change in a Section concerning the primary powers of banks.  
  
Senate Floor Amendment No. 2  
     Replaces everything after the enacting clause. Amends the Department of Professional Regulation Law of the Civil Administrative Code of Illinois. Provides that the Department of Financial and Professional Regulation shall require each licensee to complete sexual harassment prevention training provided by the licensee's employer, the Department of Human Rights, or any continuing education provider authorized to provide continuing education under an Act administered by the Department in accordance of the Illinois Human Rights Act. Provides that the training shall be completed, at a minimum, prior to a licensee's renewal of his or her license. Effective immediately.  
  
Last Action

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| **Date** | **Chamber** | **Action** |
| **8/6/2021** | **Senate** | **Public Act . . . . . . . . . 102-0308** |

SB 1090   
  
Short Description:  REGULATION-TECH  
  
Senate Sponsors  
Sen. Emil Jones, III  
  
Synopsis As Introduced  
     Amends the Illinois Clinical Laboratory and Blood Bank Act. Makes a technical change in a Section concerning the short title.  
  
Last Action

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| **Date** | **Chamber** | **Action** |
| **5/21/2021** | **Senate** | **Rule 3-9(a) / Re-referred to Assignments** |

SB 1592   
  
Short Description:  INS-DENIAL/SITE OF TREATMENT  
  
Senate Sponsors  
Sen. Laura Fine  
  
House Sponsors  
(Rep. David A. Welter-Carol Ammons)  
  
Synopsis As Introduced  
     Amends the Illinois Insurance Code. Provides that a group or individual policy of accident and health insurance or managed care plan that provides individuals under 21 years of age coverage for the diagnosis of autism spectrum disorders and for the treatment of autism spectrum disorders may not deny or refuse to provide otherwise covered services solely because of the location where services are provided. Provides that a group or individual policy of accident and health insurance or managed care plan that provides coverage for habilitative services for children under 19 years of age with a congenital, genetic, or early acquired disorder under specified conditions may not deny or refuse to provide otherwise covered services solely because of the location where services are provided.  
  
Senate Committee Amendment No. 1  
     In provisions concerning autism spectrum disorders and provisions concerning habilitative services for children, provides that an insurer may not deny or refuse to provide otherwise covered services under a group or individual policy of accident and health insurance or a managed care plan solely because of the location wherein the clinically appropriate services are provided by a health care professional with appropriate certification (rather than solely because of the location wherein the services are provided).  
  
Senate Committee Amendment No. 2  
     In provisions concerning autism spectrum disorders and provisions concerning habilitative services for children, provides that an insurer may not deny or refuse to provide otherwise covered services under a group or individual policy of accident and health insurance or a managed care plan solely because of the location wherein the clinically appropriate services are provided (rather than solely because of the location wherein the services are provided).  
  
Last Action

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| **Date** | **Chamber** | **Action** |
| **8/6/2021** | **Senate** | **Public Act . . . . . . . . . 102-0322** |

SB 1735   
  
Short Description:  TELEHEALTH-RULES-ACUPUNCTURE  
  
Senate Sponsors  
Sen. Emil Jones, III  
  
Synopsis As Introduced  
     Amends the Telehealth Act. Provides that the Department of Financial and Professional Regulation, in consultation with the appropriate advisory board, may adopt rules to clarify applicable services and administer the Act. Changes the definition of "health care professional" to include acupuncturists.  
  
Last Action

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| **Date** | **Chamber** | **Action** |
| **2/26/2021** | **Senate** | **Referred to Assignments** |

SB 1804   
  
Short Description:  DFPR-LICENSE EXTENSION  
  
Senate Sponsors  
Sen. Dale Fowler  
  
Synopsis As Introduced  
     Amends the Department of Professional Regulation Law of the Civil Administrative Code of Illinois. Provides that for any license of a health care professional that expires during a public health emergency declared by the Governor, the Department shall extend the expiration date of that license by 3 months. Provides that the fees for renewal of that license and the expiration date of the renewed license shall be the same fees and expiration date as though the license was renewed on the original expiration date. Defines "health care professional". Effective immediately.  
  
Last Action

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| **Date** | **Chamber** | **Action** |
| **4/16/2021** | **Senate** | **Rule 3-9(a) / Re-referred to Assignments** |

SB 1832   
  
Short Description:  COM COL-BACHELOR'S DEGREE  
  
Senate Sponsors  
Sen. Cristina H. Pacione-Zayas, Ann Gillespie, Robert Peters, Laura M. Murphy-Omar Aquino, Mike Simmons, Cristina Castro, Celina Villanueva, Jacqueline Y. Collins, Robert F. Martwick-Michael E. Hastings, Karina Villa, Laura Fine, Ram Villivalam, Christopher Belt, Antonio Muñoz, Rachelle Crowe, David Koehler, Sara Feigenholtz-Melinda Bush, Adriane Johnson, Sue Rezin, Mattie Hunter and Doris Turner  
  
Synopsis As Introduced  
     Amends the Public Community College Act. Allows the board of trustees of a community college district to establish and offer a baccalaureate-level early childhood education program and confer a bachelor of applied science degree in early childhood education and a Professional Educator License with endorsements in early childhood education and early childhood special education under certain conditions. Provides for an application for approval from the Illinois Community College Board. Sets forth college requirements and prohibitions. Provides that a candidate for educator licensure must successfully complete applicable testing requirements prior to the issuance of an educator license and any endorsements. Provides for a statewide evaluation of such programs.  
  
Last Action

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| **Date** | **Chamber** | **Action** |
| **5/21/2021** | **Senate** | **Rule 3-9(a) / Re-referred to Assignments** |

SB 1862   
  
Short Description:  OCCUPATIONAL THERAPY COMPACT  
  
Senate Sponsors  
Sen. Terri Bryant  
  
Synopsis As Introduced  
     Amends the Illinois Occupational Therapy Practice Act. Provides that the State of Illinois ratifies and approves the Occupational Therapy Licensure Compact. Provides that the purpose of the Compact is to facilitate interstate practice of Occupational Therapy with the goal of improving public access to Occupational Therapy services, and states that the Compact preserves the regulatory authority of states to protect public health and safety through the current system of state licensure. The Compact contains provisions concerning definitions; state participation in the Compact; Compact privilege; obtaining a new home state license by virtue of Compact privileges; active duty military personnel and their spouses; adverse actions; establishment of the Occupational Therapy Compact Commission; a data system; rulemaking; oversight, dispute resolution, and enforcement; date of implementation of the Interstate Commission for Occupational Therapy Practice and associated rules, withdrawal, and amendment; construction and severability; and the binding effect of the Compact and other laws.  
  
Last Action

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| **Date** | **Chamber** | **Action** |
| **4/16/2021** | **Senate** | **Rule 3-9(a) / Re-referred to Assignments** |

SB 2241   
  
Short Description:  INS CODE-RIDING THERAPY  
  
Senate Sponsors  
Sen. Laura M. Murphy  
  
Synopsis As Introduced  
     Amends the Illinois Insurance Code. Provides that a group or individual policy of accident and health insurance or managed care plan that is amended, delivered, issued, or renewed after the effective date of the amendatory Act shall provide coverage for hippotherapy and other forms of therapeutic riding. Makes conforming changes in the State Employees Group Insurance Act of 1971, the Counties Code, the Illinois Municipal Code, the School Code, and the Health Maintenance Organization Act.  
  
Last Action

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| **Date** | **Chamber** | **Action** |
| **4/16/2021** | **Senate** | **Rule 3-9(a) / Re-referred to Assignments** |

SB 2243   
  
Short Description:  MUSIC THERAPY LICENSING  
  
Senate Sponsors  
Sen. Laura M. Murphy  
  
Synopsis As Introduced  
     Creates the Music Therapy Licensing and Practice Act. Provides for licensure of professional music therapists and clinical music therapists by the Department of Financial and Professional Regulation. Establishes the Music Therapy Advisory Committee. Establishes the powers and duties of the advisory committee, including advising the Department on all matters pertaining to licensure, education, and continuing education requirements for licensees. Establishes the powers and duties of the Department, including prescribing rules defining what constitutes an appropriate curriculum for music therapy, reviewing the qualifications of applicants for licenses, investigating alleged violations of the Act, conducting hearings on disciplinary and other matters, and establishing a schedule of fees for the administration and enforcement of the Act. Establishes qualifications for licensure as a professional music therapist and clinical music therapist. Establishes grounds for discipline of a license. Provides for civil and criminal penalties for violations of the Act. Creates provisions concerning formal hearings, including transcripts of proceedings, appointment of hearing officers, subpoenas and depositions, and rehearings. Provides for judicial review of all final administrative decisions of the Department. Preempts home rule. Effective immediately.  
  
Last Action

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| **Date** | **Chamber** | **Action** |
| **5/7/2021** | **Senate** | **Rule 3-9(a) / Re-referred to Assignments** |

SB 2310   
  
Short Description:  DFPR-LICENSEE SURVEY  
  
Senate Sponsors  
Sen. Brian W. Stewart  
  
Synopsis As Introduced  
     Amends the Department of Professional Regulation Law of the Civil Administrative Code of Illinois. Requires the Department of Financial and Professional Regulation to conduct a survey, through an official mailing from the Department, of persons licensed or registered, or both, under a regulatory Act subject to be repealed under the Regulatory Sunset Act and to compile the results of that survey in a report that the Department must submit to the Governor and the General Assembly at least 12 months before the scheduled repeal of the regulatory Act. Provides that the survey must include questions concerning the licensees' or registrants' views on: how the requirements of the Act help to protect the health and safety of Illinois citizens; how the Act protects the profession from bad actors; what suggested changes to the regulatory Act would improve the profession; and how effective the continuing education requirements are.  
  
Last Action

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| **Date** | **Chamber** | **Action** |
| **4/16/2021** | **Senate** | **Rule 3-9(a) / Re-referred to Assignments** |

SB 2517   
  
Short Description:  ATHLETIC TRAINERS-VARIOUS  
  
Senate Sponsors  
Sen. Chapin Rose  
  
Synopsis As Introduced  
     Amends the Illinois Athletic Trainers Practice Act. Makes changes in provisions concerning definitions, including changing the definition of "athletic trainer" and adding a definition of "athletic training". Provides that the Department of Financial and Professional Regulation may take disciplinary action against a licensee for failing to maintain complete and accurate records of all treatments rendered or failing to provide copies of medical records as required by law. Makes changes in provisions concerning titles that may be used only by licensees; exempt activities; and grounds for discipline.  
  
Last Action

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| **Date** | **Chamber** | **Action** |
| **2/26/2021** | **Senate** | **Referred to Assignments** |

SB 2518   
  
Short Description:  TELEHEALTH-ATHLETIC TRAINERS  
  
Senate Sponsors  
Sen. Chapin Rose  
  
Synopsis As Introduced  
     Amends the Telehealth Act. Provides that the definition of "health care professional" includes athletic trainers.  
  
Last Action

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| **Date** | **Chamber** | **Action** |
| **2/26/2021** | **Senate** | **Referred to Assignments** |

SB 2661   
  
Short Description:  HLTH CARE PROF-LICENSE-EXTEND  
  
Senate Sponsors  
Sen. Don Harmon  
  
House Sponsors  
(Rep. Elizabeth Hernandez)  
  
Synopsis As Introduced  
     Amends the Statute on Statutes. Makes a technical change in a Section regarding the application of the Act.  
  
Senate Floor Amendment No. 2  
     Replaces everything after the enacting clause. Amends the Department of Professional Regulation Law of the Civil Administrative Code of Illinois. Provides that for any license of a health care professional that expires during a public health emergency declared by the Governor, the Department of Financial and Professional Regulation shall extend the expiration date of that license by 6 months. Provides that the fees for renewal of that license and the expiration date of the renewed license shall be the same fees and expiration date as though the license was renewed on the original expiration date. Defines "health care professional". Effective immediately.  
  
House Floor Amendment No. 1  
     Replaces everything after the enacting clause. Creates the Cook County Board of Review Redistricting Act of 2021. Provides legislative findings. Redistricts Cook County for election of Cook County Board of Review Commissioners. Repeals the Cook County Board of Review Districts Act and the Cook County Board of Review Districts Act of 2001. Amends the Property Tax Code. Provides that in 2021 and any year following the federal decennial census in which the results of the census are not available by March 31, the General Assembly may use other population data, including, but not limited to, the most recent American Community Survey 5-year data, to reapportion board of review districts. Effective immediately.  
  
Last Action

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| **Date** | **Chamber** | **Action** |
| **6/4/2021** | **Senate** | **Public Act . . . . . . . . . 102-0012** |

SB 2782   
  
Short Description:  SCH CD-SPECIAL ED PROVIDER  
  
Senate Sponsors  
Sen. Sara Feigenholtz  
  
Synopsis As Introduced  
     Amends the Children with Disabilities Article of the School Code. Allows a provider of special education services to enter into a contract with a school district to create a small, customized program. Provide that the provider may choose to not enroll students from any surrounding school district regardless of whether the program is located within a public school building. Allows the school district to negotiate on price with the provider and shall receive full funding from the State Board of Education for students participating in the program. Provides that the school district shall assume control of the process relating to costs and rates instead of the Illinois Purchased Care Review Board and the licensure requirements of the Code do not apply to staff members of the program. Effective immediately.  
  
Last Action

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| **Date** | **Chamber** | **Action** |
| **3/3/2021** | **Senate** | **Referred to Assignments** |

SB 2800   
  
Comment:  
HA 3 - Budget & Capital Bill.  
  
Short Description:  $STATE APPELLATE DEFENDER  
  
Senate Sponsors  
Sen. Don Harmon-Elgie R. Sims, Jr.-Mattie Hunter  
  
House Sponsors  
(Rep. Emanuel Chris Welch-Greg Harris)  
  
Synopsis As Introduced  
     Appropriates $2 from the General Revenue Fund to the Office of the State Appellate Defender for its FY 22 ordinary and contingent expenses.  
  
House Floor Amendment No. 2  
     Replaces everything after the enacting clause. Makes various appropriations and reappropriations for specified purposes. Amends Public Act 101-637 by changing and adding various appropriations. Some provisions are effective immediately; some provisions are effective July 1, 2021.  
  
House Floor Amendment No. 3  
     Replaces everything after the enacting clause. Makes various appropriations and reappropriations for specified purposes. Amends Public Act 101-637 by changing and adding various appropriations. Some provisions are effective immediately; some provisions are effective July 1, 2021.  
  
Governor Amendatory Veto Message  
     Recommends replacing the effective date provisions of the bill, which did not specify effective dates for certain appropriations, with provisions giving supplemental appropriations an immediate effective date and FY22 appropriations a July 1, 2021 effective date.  
  
Last Action

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| **Date** | **Chamber** | **Action** |
| **6/17/2021** | **Senate** | **Public Act . . . . . . . . . 102-0017** |

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| Totals: 48 - (House Bills: 24) (Senate Bills: 24) (Other Bills: 0) |

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