

1 AN ACT concerning emergency health powers.

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

4 ARTICLE 1. TITLE, FINDINGS, PURPOSES, AND DEFINITIONS

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

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

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

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

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

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

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

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

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

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

1 (9) The rights of people to liberty, bodily integrity,
2 and privacy must be respected to the fullest extent possible
3 consistent with the overriding importance of the public's
4 health and security.

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

7 Section 1-10. Purposes. The purposes of this Act are to
8 deal with public health emergencies and include the
9 following:

10 (1) To authorize the collection of data and records, the
11 control of property, the management of persons, and access to
12 communications.

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

17 (3) To grant State officials the authority to use and
18 appropriate property as necessary for the care, treatment,
19 and housing of patients and for the destruction of
20 contaminated materials.

21 (4) To grant State officials the authority to provide
22 care and treatment to persons who are ill or who have been
23 exposed to infection, and to separate affected individuals
24 from the population at large for the purpose of interrupting
25 the transmission of infectious disease.

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

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

32 (7) To require the development of a comprehensive plan
33 to provide for a coordinated, appropriate response in the

1 event of a public health emergency.

2 Section 1-15. Definitions.

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

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

18 (3) "Contagious disease" is an infectious disease that
19 can be transmitted from person to person, animal to person,
20 or insect to person.

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

1 centers. The term also includes, but is not limited to, the
2 following related property when used for or in connection
3 with the foregoing: laboratories; research facilities;
4 pharmacies; laundry facilities; health personnel training and
5 lodging facilities; patient, guest, and health personnel food
6 service facilities; and offices and office buildings for
7 persons engaged in health care professions or services.

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

16 (6) "Infectious disease" is a disease caused by a living
17 organism. An infectious disease may, or may not, be
18 transmissible from person to person, animal to person, or
19 insect to person.

20 (7) "Infectious waste" means:

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

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

31 (c) "pathological waste", which includes biopsy
32 materials and all human tissues, anatomical parts that
33 emanate from surgery, obstetrical procedures, autopsy and
34 laboratory procedures, and animal carcasses exposed to

1 pathogens in research and the bedding and other waste
2 from those animals, but does not include teeth or
3 formaldehyde or other preservative agents; and

4 (d) "sharps", which include needles, IV tubing with
5 needles attached, scalpel blades, lancets, glass tubes
6 that could be broken during handling, and syringes that
7 have been removed from their original sterile containers.

8 (8) "Isolation" and "quarantine" mean the compulsory
9 physical separation (including the restriction of movement or
10 confinement) of individuals or groups believed to have been
11 exposed to or known to have been infected with a contagious
12 disease from individuals who are believed not to have been
13 exposed or infected, in order to prevent or limit the
14 transmission of the disease to others.

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

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

30 (11) "Public health authority" means the Department of
31 Public Health and, to the extent specifically authorized by
32 the Department of Public Health, any State or local
33 governmental entity or any private entity or person.

34 (12) A "public health emergency" is an occurrence or

1 imminent threat of an illness or health condition, caused by
2 bioterrorism, epidemic or pandemic disease, or a novel and
3 highly fatal infectious agent or biological toxin, that poses
4 a substantial risk of a significant number of human
5 fatalities or incidents of permanent or long-term disability.
6 These illnesses or health conditions include, but are not
7 limited to, illnesses or health conditions resulting from a
8 natural disaster.

9 (13) "Public safety authority" means the Department of
10 State Police and, to the extent specifically authorized by
11 the Department of State Police, any State or local
12 governmental entity.

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

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

20 ARTICLE 5. MEASURES TO DETECT AND TRACK POTENTIAL AND
21 EXISTING PUBLIC HEALTH EMERGENCIES

22 Section 5-5. Reporting.

23 (1) Illness or health condition. A health care provider,
24 coroner, or medical examiner shall report all cases of
25 persons who harbor any illness or health condition that may
26 be caused by bioterrorism, epidemic or pandemic disease, or
27 novel and highly fatal infectious agents or biological toxins
28 and might pose a substantial risk of a significant number of
29 human fatalities or incidents of permanent or long-term
30 disability. Reportable illnesses and health conditions
31 include, but are not limited to, the diseases caused by the
32 biological agents listed in 42 C.F.R. Section 72, App. A

1 (2000) and any illnesses or health conditions identified by
2 the public health authority as potential causes of a public
3 health emergency.

4 (2) Pharmacists. In addition to the foregoing
5 requirements for health care providers, a pharmacist must
6 report any unusual or increased prescription rates, unusual
7 types of prescriptions, or unusual trends in pharmacy visits
8 that may be caused by bioterrorism, epidemic or pandemic
9 disease, or novel and highly fatal infectious agents or
10 biological toxins and might pose a substantial risk of a
11 significant number of human fatalities or incidents of
12 permanent or long-term disability. Prescription-related
13 events that require a report include, but are not limited to:

14 (a) an unusual increase in the number of
15 prescriptions to treat fever, respiratory, or
16 gastrointestinal complaints;

17 (b) an unusual increase in the number of
18 prescriptions for antibiotics;

19 (c) an unusual increase in the number of requests
20 for information on over-the-counter pharmaceuticals to
21 treat fever, respiratory, or gastrointestinal complaints;
22 and

23 (d) any prescription that treats a disease that is
24 relatively uncommon and has bioterrorism potential.

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

1 insect, and the name and address of any known owner, must be
2 reported.

3 (4) Animal diseases. Every veterinarian, livestock
4 owner, veterinary diagnostic laboratory director, or other
5 person having the care of animals must report animals having
6 or suspected of having any disease that may be caused by
7 bioterrorism, epidemic or pandemic disease, or novel and
8 highly fatal infectious agents or biological toxins and might
9 pose a substantial risk of a significant number of human and
10 animal fatalities or incidents of permanent or long-term
11 disability. The report must be made in writing within 24
12 hours to the public health authority and must include as much
13 of the following information as is available: the suspected
14 locating information of the animal, the name and address of
15 any known owner, and the name and address of the reporting
16 individual.

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

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

27 Section 5-10. Tracking. The public health authority shall
28 ascertain the existence of cases of an illness or health
29 condition, caused by bioterrorism, epidemic or pandemic
30 disease, or a novel and highly fatal infectious agent or
31 biological toxin, that poses a substantial risk of a
32 significant number of human fatalities or incidents of
33 permanent or long-term disability; investigate all such cases

1 for sources of infection and to ensure that they are subject
2 to proper control measures; and define the distribution of
3 the illness or health condition. To fulfill these duties, the
4 public health authority shall identify exposed individuals as
5 follows:

6 (1) Identification of individuals. Acting on information
7 developed in accordance with Section 5-5, or other reliable
8 information, the public health authority shall identify all
9 individuals thought to have been exposed to an illness or
10 health condition, caused by bioterrorism, epidemic or
11 pandemic disease, or novel and highly fatal infectious agents
12 or biological toxins, that poses a substantial risk of a
13 significant number of human fatalities or incidents of
14 permanent or long-term disability.

15 (2) Interviewing of individuals. The public health
16 authority shall counsel and interview those individuals as
17 appropriate to assist in the positive identification of
18 exposed individuals and develop information relating to the
19 source and spread of the illness or health condition. That
20 information includes the name and address (including
21 municipality and county) of any person from whom the illness
22 or health condition may have been contracted and to whom the
23 illness or health condition may have spread.

24 (3) Examination of facilities or materials. The public
25 health authority shall, for examination purposes, close,
26 evacuate, or decontaminate any facility or decontaminate or
27 destroy any material when the authority reasonably suspects
28 that the facility or material may endanger the public health.

29 (4) Enforcement. An order of the public health authority
30 given to effectuate the purposes of this Section shall be
31 enforceable immediately by the public safety authority.

32 Section 5-15. Information sharing.

33 (1) Whenever the public safety authority learns of a

1 case of a reportable illness or health condition, an unusual
2 cluster, or a suspicious event, it shall immediately notify
3 the public health authority.

4 (2) Whenever the public health authority learns of a
5 case of a reportable illness or health condition, an unusual
6 cluster, or a suspicious event that it reasonably believes
7 has the potential to be caused by bioterrorism, it must
8 immediately notify the appropriate public safety authority,
9 tribal authorities, and federal health and public safety
10 authorities.

11 (3) Sharing of information on reportable illnesses,
12 health conditions, unusual clusters, or suspicious events
13 between authorized personnel shall be restricted to
14 information necessary for the treatment, control,
15 investigation, and prevention of a public health emergency.

16 ARTICLE 10. DECLARING STATE OF PUBLIC HEALTH EMERGENCY

17 Section 10-5. Standards for declaration. A state of
18 public health emergency shall be declared by the Governor if
19 the Governor finds an occurrence or imminent threat of an
20 illness or health condition, caused by bioterrorism, epidemic
21 or pandemic disease, or novel and highly fatal infectious
22 agents or biological toxins, that poses a substantial risk of
23 a significant number of human fatalities or incidents of
24 permanent or long-term disability. To make such a finding,
25 the Governor shall consult with the public health authority
26 and may consult with any public health and other experts as
27 needed. Nothing in the duty of the Governor to consult with
28 the public health authority or the discretion to consult with
29 public health or other experts shall be construed to limit
30 the Governor's authority to act without that consultation
31 when the situation calls for prompt and timely action.

1 Section 10-10. Procedures for declaration. The state of
2 public health emergency shall be declared by an executive
3 order that indicates the nature of the public health
4 emergency, the areas that are or may be threatened, and the
5 conditions that have brought about the public health
6 emergency.

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

16 (1) Emergency powers. During a state of public health
17 emergency, the Governor may:

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

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

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

33 (d) Mobilize all or any part of the Illinois

1 National Guard into service of the State. An order
2 directing the Illinois National Guard to report for
3 active duty shall state the purpose for which it is
4 mobilized and the objectives to be accomplished.

5 (e) Provide aid to and seek aid from other states
6 in accordance with any interstate emergency compact made
7 with this State.

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

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

15 (b) Coordinating public health emergency response
16 between State and local authorities.

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

20 (d) Coordinating recovery operations and mitigation
21 initiatives subsequent to public health emergencies.

22 (e) Organizing public information activities
23 regarding State public health emergency response
24 operations.

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

33 Section 10-20. Enforcement. During a state of public

1 health emergency, the public health authority may request
2 assistance in enforcing orders under this Act from the public
3 safety authority. The public safety authority may request
4 assistance from the Illinois National Guard in enforcing the
5 orders of the public health authority.

6 Section 10-25. Termination of declaration.

7 (1) Executive order. The Governor shall terminate the
8 state of public health emergency by executive order upon
9 finding that the occurrence of an illness or health condition
10 caused by bioterrorism, epidemic or pandemic disease, or
11 novel and highly fatal infectious agents or biological toxins
12 no longer poses a substantial risk of a significant number of
13 human fatalities or incidents of permanent or long-term
14 disability or that the imminent threat of such an occurrence
15 has passed.

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

26 (3) State legislature. By a two-thirds vote of both
27 chambers, the General Assembly may terminate a state of
28 public health emergency after 60 days from the date of
29 original declaration upon finding that the occurrence of an
30 illness or health condition caused by bioterrorism, epidemic
31 or pandemic disease, or novel and highly fatal infectious
32 agents or biological toxins no longer poses a substantial
33 risk of a significant number of human fatalities or incidents

1 of permanent or long-term disability or that the imminent
2 threat of such an occurrence has passed. Termination by the
3 General Assembly overrides any renewal by the Governor.

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

9 ARTICLE 15. SPECIAL POWERS DURING STATE OF PUBLIC
10 HEALTH EMERGENCY; CONTROL OF PROPERTY

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

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

20 (2) Materials. To decontaminate or cause to be
21 decontaminated, or destroy any material of which there is
22 reasonable cause to believe that it may endanger the public
23 health.

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

29 (1) Use of facilities and materials. To procure, by
30 condemnation (including quick-take under Article VII of the
31 Code of Civil Procedure) or otherwise, construct, lease,

1 transport, store, maintain, renovate, or distribute materials
2 and facilities as may be reasonable and necessary for
3 emergency response, with the right to take immediate
4 possession. These materials and facilities include, but are
5 not limited to, communication devices, carriers, real estate,
6 fuels, food, clothing, and health care facilities.

7 (2) Use of health care facilities. To compel a health
8 care facility to provide services or the use of its facility
9 if those services or use are reasonable and necessary for
10 emergency response. The use of the health care facility may
11 include transferring the management and supervision of the
12 health care facility to the public health authority for a
13 limited or unlimited period of time, but shall not exceed the
14 termination of the state of public health emergency.

15 (3) Control of materials. To control, restrict, and
16 regulate by rationing and using quotas, prohibitions on
17 shipments, price fixing, allocation, or other means, the use,
18 sale, dispensing, distribution, or transportation of food,
19 fuel, clothing and other commodities, alcoholic beverages,
20 firearms, explosives, and combustibles, as may be reasonable
21 and necessary for emergency response.

22 (4) Control of roads and public areas.

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

26 (b) To control ingress and egress to and from any
27 stricken or threatened public area, the movement of
28 persons within the area, and the occupancy of premises in
29 that area, if that action is reasonable and necessary for
30 emergency response.

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

1 regarding the safe disposal of infectious waste:

2 (1) Adopt measures. To adopt and enforce measures to
3 provide for the safe disposal of infectious waste as may be
4 reasonable and necessary for emergency response. These
5 measures may include, but are not limited to, the collection,
6 storage, handling, destruction, treatment, transportation,
7 and disposal of infectious waste.

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

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

28 (4) Identification. All bags, boxes, or other containers
29 for infectious waste shall be clearly identified as
30 containing infectious waste.

31 Section 15-20. Safe disposal of corpses. The public
32 health authority may exercise, for such period as the state
33 of public health emergency exists, the following powers

1 regarding the safe disposal of corpses:

2 (1) Adopt measures. To adopt and enforce measures to
3 provide for the safe disposal of corpses as may be reasonable
4 and necessary for emergency response. These measures may
5 include, but are not limited to, the embalming, burial,
6 cremation, interment, disinterment, transportation, and
7 disposal of corpses.

8 (2) Possession. To take possession or control of any
9 corpse.

10 (3) Disposal. To order the disposal of any corpse of a
11 person who has died of an infectious disease through burial
12 or cremation within 24 hours after death.

13 (4) Control of facilities. To compel any business or
14 facility authorized to embalm, bury, cremate, inter,
15 disinter, transport, and dispose of corpses under the laws of
16 this State to accept any corpse or provide the use of its
17 business or facility if those actions are reasonable and
18 necessary for emergency response. The use of the business or
19 facility may include transferring the management and
20 supervision of the business or facility to the public health
21 authority for a limited or unlimited period of time, but
22 shall not exceed the termination of the state of public
23 health emergency.

24 (5) Use of facilities. To procure, by condemnation
25 (including quick-take under Article VII of the Code of Civil
26 Procedure) or otherwise, any business or facility authorized
27 to embalm, bury, cremate, inter, disinter, transport, and
28 dispose of corpses under the laws of this State as may be
29 reasonable and necessary for emergency response, with the
30 right to take immediate possession.

31 (6) Labeling. Every corpse prior to disposal shall be
32 clearly labeled with all available information to identify
33 the decedent and the circumstances of death. Any corpse of a
34 deceased person with an infectious disease shall have an

1 external, clearly visible tag indicating that the corpse is
2 infected and, if known, the infectious disease.

3 (7) Identification. Every person in charge of disposing
4 of any corpse shall maintain a written record of each corpse
5 and all available information to identify the decedent and
6 the circumstances of death and disposal. If a corpse cannot
7 be identified, before disposal a qualified person shall, to
8 the extent possible, take fingerprints and one or more
9 photographs of the corpse, and collect a DNA specimen. All
10 information gathered under this paragraph shall be promptly
11 forwarded to the public health authority.

12 Section 15-25. Control of health care supplies.

13 (1) Procurement. The public health authority may
14 purchase and distribute anti-toxins, serums, vaccines,
15 immunizing agents, antibiotics, and other pharmaceutical
16 agents or medical supplies that it deems advisable in the
17 interest of preparing for or controlling a public health
18 emergency, without any additional legislative authorization.

19 (2) Rationing. If a state of public health emergency
20 results in a statewide or regional shortage or threatened
21 shortage of any product covered by item (1) whether or not
22 that product has been purchased by the public health
23 authority, the public health authority may control, restrict,
24 and regulate by rationing and using quotas, prohibitions on
25 shipments, price fixing, allocation or other means, the use,
26 sale, dispensing, distribution, or transportation of the
27 relevant product necessary to protect the health, safety, and
28 welfare of the people of the State. In making rationing or
29 other supply and distribution decisions, the public health
30 authority may give preference to health care providers,
31 disaster response personnel, and mortuary staff.

32 (3) Distribution. During a state of public health
33 emergency, the public health authority may procure, store, or

1 distribute any anti-toxins, serums, vaccines, immunizing
2 agents, antibiotics, and other pharmaceutical agents or
3 medical supplies located within the State as may be
4 reasonable and necessary for emergency response, with the
5 right to take immediate possession. If a public health
6 emergency simultaneously affects more than one state, nothing
7 in this Section shall be construed to allow the public health
8 authority to obtain anti-toxins, serums, vaccines, immunizing
9 agents, antibiotics, and other pharmaceutical agents or
10 medical supplies for the primary purpose of hoarding those
11 items or preventing their fair and equitable distribution
12 among affected states.

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

23 Section 15-35. Destruction of property. To the extent
24 practical and consistent with the protection of public
25 health, before the destruction of any property under this
26 Article, the public health authority shall institute
27 appropriate civil proceedings against the property to be
28 destroyed in accordance with the existing laws and rules of
29 the courts of this State or any such rules that may be
30 developed by the courts for use during a state of public
31 health emergency. Any property acquired by the public health
32 authority through those proceedings shall, after entry of the

1 decree, be disposed of by destruction as the court may
2 direct.

3 ARTICLE 20. SPECIAL POWERS DURING STATE OF PUBLIC
4 HEALTH EMERGENCY; CONTROL OF PERSONS

5 Section 20-5. Control of individuals. During a state of
6 public health emergency, the public health authority shall
7 use every available means to prevent the transmission of
8 infectious disease and to ensure that all cases of infectious
9 disease are subject to proper control and treatment.

10 Section 20-10. Mandatory medical examinations. The public
11 health authority may exercise, for such period as the state
12 of public health emergency exists, the following emergency
13 powers over persons:

14 (1) Individual examination or testing. To compel a
15 person to submit to a physical examination, testing, or both
16 as necessary to diagnose or treat the person.

17 (a) The medical examination and testing may be
18 performed by any qualified person authorized by the
19 public health authority.

20 (b) The medical examination and testing must not be
21 reasonably likely to result in serious harm to the
22 affected individual.

23 (c) The medical examination and testing shall be
24 performed immediately upon the order of the public health
25 authority without resort to judicial or quasi-judicial
26 authority.

27 (d) Any person who knowingly refuses to submit to
28 the medical examination or testing commits a Class A
29 misdemeanor. If the public health authority is uncertain
30 whether a person who refuses to undergo medical
31 examination or testing may have been exposed to an

1 infectious disease or otherwise poses a danger to public
2 health, the public health authority may subject the
3 individual to isolation or quarantine as provided in this
4 Article.

5 (2) Health care provider assistance. To require any
6 physician or other health care provider to perform the
7 medical examination, testing, or both. Any person who
8 knowingly refuses to perform the medical examination or test
9 commits a Class A misdemeanor.

10 (3) Enforcement. An order of the public health authority
11 given to effectuate the purposes of this Section is
12 immediately enforceable by any peace officer.

13 Section 20-15. Isolation and quarantine.

14 (1) State policy and powers. It is the policy of the
15 State that the individual dignity of any person isolated or
16 quarantined during a state of public health emergency shall
17 be respected at all times and upon all occasions. The needs
18 of persons isolated or quarantined shall be addressed in a
19 systematic and competent fashion. To the extent possible, the
20 premises in which persons are isolated or quarantined shall
21 be maintained in safe and hygienic manners and designed to
22 minimize the likelihood of further transmission of infection
23 or other harm to persons subject to isolation or quarantine.
24 Adequate food, clothing, medication, and other necessities
25 and competent medical care shall be provided. Consistent with
26 this policy, the public health authority may exercise, for
27 such period as the state of public health emergency exists,
28 the following emergency powers over persons:

29 (a) To establish and maintain places of isolation
30 and quarantine.

31 (b) To require isolation or quarantine of any
32 person by the least restrictive means necessary to
33 protect the public health. All reasonable means shall be

1 taken to prevent the transmission of infection among the
2 isolated or quarantined individuals.

3 (2) Individual cooperation. A person subject to
4 isolation or quarantine shall obey the public health
5 authority's rules and orders, shall not go beyond the
6 isolation or quarantine premises, and shall not put himself
7 or herself in contact with any person not subject to
8 isolation or quarantine other than a physician or other
9 health care provider, public health authority, or person
10 authorized to enter an isolation or quarantine premises by
11 the public health authority. A person who knowingly fails to
12 obey these provisions commits a Class A misdemeanor.

13 (3) Unauthorized entry. No person, other than a person
14 authorized by the public health authority, shall enter an
15 isolation or quarantine premises. If any person knowingly
16 enters an isolation or quarantine premises without permission
17 of the public health authority, that person commits a Class A
18 misdemeanor. If, by reason of an unauthorized entry into an
19 isolation or quarantine premises, the person poses a danger
20 to public health, he or she may be subject to isolation or
21 quarantine pursuant to the provisions of this Article.

22 (4) Termination. Isolation or quarantine of any person
23 shall be terminated when the public health authority
24 determines that the isolation or quarantine of that person is
25 no longer necessary to protect the public health.

26 (5) Due process.

27 (a) Before isolating or quarantining a person, the
28 public health authority shall obtain a written, ex parte
29 order from a court of this state authorizing that action.
30 The court shall grant the order upon finding that
31 probable cause exists to believe isolation or quarantine
32 is warranted under the provisions of this Act. A copy of
33 the authorizing order shall be given to the person
34 isolated or quarantined, along with notification that the

1 person has a right to a hearing under this Section.

2 (b) Notwithstanding the preceding subparagraph (a),
3 the public health authority may isolate or quarantine a
4 person without first obtaining a written, ex parte order
5 from the court if any delay in the isolation or
6 quarantine of the person would pose an immediate threat
7 to the public health. Following the isolation or
8 quarantine, the public health authority shall promptly
9 obtain a written, ex parte order from the court
10 authorizing the isolation or quarantine.

11 (c) A person isolated or quarantined under the
12 provisions of subparagraphs (a) or (b) has the right to a
13 court hearing to contest the ex parte order. If the
14 person or his or her representative requests a hearing,
15 the hearing shall be held within 72 hours after receipt
16 of the request, excluding Saturdays, Sundays, and legal
17 holidays. The request must be in writing. A request for a
18 hearing shall not stay the order of isolation or
19 quarantine. At the hearing, the public health authority
20 must show that the isolation or quarantine is warranted
21 under this Section.

22 (d) On or after 30 days following a hearing on the
23 ex parte order or such hearing as is provided for in this
24 subparagraph, a person isolated or quarantined pursuant
25 to this Section may request in writing a court hearing to
26 contest his or her continued isolation or quarantine. The
27 hearing shall be held within 72 hours after receipt of
28 the request, excluding Saturdays, Sundays, and legal
29 holidays. A request for a hearing shall not alter the
30 order of isolation or quarantine. At the hearing, the
31 public health authority must show that continuation of
32 the isolation or quarantine is warranted under this
33 Section.

34 (e) A person isolated or quarantined under this

1 Section may request a hearing in the courts of this State
2 for remedies regarding his or her treatment and the terms
3 and conditions of the quarantine or isolation. Upon
4 receiving a request for either type of hearing described
5 in this subparagraph, the court shall fix a date for a
6 hearing. The hearing shall take place within 10 days
7 after the receipt of the request by the court. The
8 request for a hearing shall not alter the order of
9 isolation or quarantine.

10 (f) If, upon a hearing, the court finds that the
11 isolation or quarantine of the individual is not
12 warranted under the provisions of this Section, then the
13 person shall be released from isolation or quarantine. If
14 the court finds that the isolation or quarantine of the
15 individual is not in compliance with this Act, the court
16 may then fashion remedies appropriate to the
17 circumstances of the state of public health emergency and
18 in keeping with the provisions of this Act.

19 (g) Judicial decisions shall be based upon clear
20 and convincing evidence, and a written record of the
21 disposition of the case shall be made and retained. The
22 petitioner has the right to be represented by counsel or
23 other lawful representative. The manner in which the
24 request for a hearing is filed and acted upon shall be in
25 accordance with the existing laws and rules of the courts
26 of this State or any such rules that are developed by the
27 courts for use during a state of public health emergency.

28 Section 20-20. Vaccination and treatment. The public
29 health authority may exercise, for such period as the state
30 of public health emergency exists, the following emergency
31 powers over persons:

32 (1) In general. To compel a person to be vaccinated or
33 treated for an infectious disease.

1 (a) Vaccination may be performed by any qualified
2 person authorized by the public health authority.

3 (b) The vaccine shall not be given if the public
4 health authority has reason to know that a particular
5 individual is likely to suffer from serious harm from the
6 vaccination.

7 (c) Treatment may be performed by any qualified
8 person authorized by the public health authority.

9 (d) Treatment must not be such as is reasonably
10 likely to lead to serious harm to the affected
11 individual.

12 (2) Refusal. A person who knowingly refuses to be
13 vaccinated or treated commits a Class A misdemeanor. If, by
14 reason of refusal of vaccination or treatment, the person
15 poses a danger to the public health, he or she may be subject
16 to isolation or quarantine pursuant to the provisions of this
17 Article.

18 (3) Enforcement. An order of the public health authority
19 given to effectuate the purposes of this Section is
20 immediately enforceable by any peace officer.

21 Section 20-25. Collection of laboratory specimens;
22 performance of tests. The public health authority may, for
23 such period as the state of public health emergency exists,
24 collect specimens and perform tests on any person or animal,
25 living or deceased, and acquire any previously collected
26 specimens or test results that are reasonable and necessary
27 for emergency response.

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

29 (2) Contamination. Specimen collection, handling,
30 storage, and transport to the testing site shall be performed
31 in a manner that will reasonably preclude specimen
32 contamination or adulteration and provide for the safe
33 collection, storage, handling, and transport of the specimen.

1 (3) Chain of custody. Any person authorized to collect
2 specimens or perform tests shall use chain of custody
3 procedures to ensure proper record keeping, handling,
4 labeling, and identification of specimens to be tested. This
5 requirement applies to all specimens, including specimens
6 collected using on-site testing kits.

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

14 Section 20-30. Access and disclosure of patient records.

15 (1) Access to patient records. Access to protected
16 health information of patients under the isolation,
17 quarantine, or care of the public health authority shall be
18 limited to those persons having a legitimate need to acquire
19 or use the information for purposes of providing treatment or
20 care to the individual who is the subject of the health
21 information, conducting epidemiologic research, or
22 investigating the causes of transmission.

23 (2) Disclosure of patient records. Protected health
24 information held by the public health authority shall not be
25 disclosed to others without individual specific informed
26 consent, except for disclosures made:

27 (a) directly to the individual;

28 (b) to the individual's immediate family members or
29 life partners;

30 (c) to appropriate federal agencies or authorities;

31 (d) to health care personnel where needed to
32 protect the health or life of the individual who is the
33 subject of the information;

1 (e) pursuant to a court order or executive order of
2 the Governor to avert a clear danger to an individual or
3 the public health; or

4 (f) to identify a deceased individual or determine
5 the manner or cause of death.

6 Section 20-35. Licensing and appointment of health
7 personnel. The public health authority may exercise, for such
8 period as the state of public health emergency exists, the
9 following emergency powers regarding licensing of health
10 personnel:

11 (1) Health care providers from other jurisdictions. To
12 appoint and prescribe the duties of such out-of-state
13 emergency health care providers as may be reasonable and
14 necessary for emergency response.

15 (a) The appointment of out-of-state emergency
16 health care providers under this Section may be for a
17 limited or unlimited time, but shall not exceed the
18 termination of the state of public health emergency. The
19 public health authority may terminate the out-of-state
20 appointments at any time or for any reason if the
21 termination will not jeopardize the health, safety, and
22 welfare of the people of this State.

23 (b) The public health authority may waive any or
24 all licensing requirements, permits, or fees required by
25 State statutes and applicable orders, rules, or
26 regulations for health care providers from other
27 jurisdictions to practice in this State.

28 (c) Any out-of-state emergency health care provider
29 appointed under this Section shall not be held liable for
30 any civil damages as a result of medical care or
31 treatment related to the emergency response unless the
32 damages result from providing, or failing to provide,
33 medical care or treatment under circumstances

1 demonstrating a reckless disregard for the consequences
2 so as to affect the life or health of the patient.

3 (2) Personnel to perform duties of medical examiner or
4 coroner. To authorize the medical examiner or coroner to
5 appoint and prescribe the duties of emergency assistant
6 medical examiners or coroners as may be required for the
7 proper performance of the duties of the office.

8 (a) The appointment of emergency assistant medical
9 examiners or coroners under this Section may be for a
10 limited or unlimited time, but shall not exceed the
11 termination of the state of public health emergency. The
12 medical examiner or coroner may terminate emergency
13 appointments at any time or for any reason if the
14 termination will not impede the performance of the duties
15 of the office.

16 (b) The medical examiner or coroner may waive any
17 or all licensing requirements, permits, or fees required
18 by the State statutes and applicable orders, rules, or
19 regulations for the performance of these duties.

20 (c) Any emergency assistant medical examiner or
21 coroner appointed under this Section and acting without
22 malice and within the scope of the prescribed duties is
23 immune from civil liability in the performance of those
24 duties.

25 ARTICLE 25. PUBLIC INFORMATION REGARDING PUBLIC
26 HEALTH EMERGENCY

27 Section 25-5. Dissemination of information. The public
28 health authority shall inform the people of the State when a
29 state of public health emergency has been declared or
30 terminated, how to protect themselves, and what actions are
31 being taken to control the emergency.

32 (1) Means of dissemination. The public health authority

1 shall provide information by all available and reasonable
2 means calculated to bring the information promptly to the
3 attention of the general public.

4 (2) Languages. If the public health authority has reason
5 to believe there are people of the State who lack sufficient
6 skills in English to understand the information, the public
7 health authority shall make reasonable efforts to provide the
8 information in the primary languages of those people as well
9 as in English.

10 (3) Accessibility. The provision of information shall be
11 made in a manner accessible to individuals with disabilities.

12 Section 25-10. Provision of access to mental health
13 support personnel. During and after a state of public health
14 emergency, the public health authority shall provide
15 information about and referrals to mental health support
16 personnel to address psychological responses to the public
17 health emergency.

18 ARTICLE 30. PLANNING FOR PUBLIC HEALTH EMERGENCY

19 Section 30-5. Public Health Emergency Planning
20 Commission. The Governor shall appoint a Public Health
21 Emergency Planning Commission, consisting of the State
22 directors, or their designees, of agencies the Governor deems
23 relevant to public health emergency preparedness, and any
24 other persons chosen by the Governor. The Governor shall
25 designate the chair of the Commission.

26 Section 30-10. Public Health Emergency Plan.

27 (1) Content. The Commission shall, within 6 months after
28 its appointment, deliver to the Governor a plan for
29 responding to a public health emergency, that includes
30 provisions for the following:

1 (a) A means of notifying and communicating with the
2 population during a state of public health emergency in
3 compliance with this Act.

4 (b) Centralized coordination of resources,
5 manpower, and services, including coordination of
6 responses by State, local, and federal agencies.

7 (c) The location, procurement, storage,
8 transportation, maintenance, and distribution of
9 essential materials, including medical supplies, drugs,
10 vaccines, food, shelter, and beds.

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

16 (e) The method of evacuating populations, and
17 housing and feeding the evacuated populations.

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

21 (g) Guidelines for the vaccination of persons, in
22 compliance with this Act.

23 (h) Guidelines for the treatment of persons who
24 have been exposed to or who are infected with diseases or
25 health conditions caused by bioterrorism, epidemic or
26 pandemic disease, or novel and highly fatal infectious
27 agents or biological toxins, that pose a substantial risk
28 of a significant number of fatalities or incidents of
29 permanent or long-term disability. The guidelines should
30 cover, but not be limited to, the following diseases:
31 anthrax, botulism, smallpox, plague, tularemia, and viral
32 hemorrhagic fevers.

33 (i) Guidelines for the safe disposal of corpses, in
34 compliance with this Act.

1 (j) Guidelines for the safe disposal of infectious
2 waste, in compliance with this Act.

3 (k) Guidelines for the safe and effective
4 management of persons isolated, quarantined, vaccinated,
5 or treated during a state of public health emergency.

6 (l) Tracking the source and outcomes of infected
7 persons.

8 (m) Ensuring that each municipality and county
9 within the State identifies the following:

10 (A) sites where persons can be isolated or
11 quarantined that comply with this Act regarding the
12 least restrictive means for isolation and
13 quarantine, and the requirements for the safety,
14 health, and maintenance of personal dignity of those
15 isolated or quarantined;

16 (B) sites where medical supplies, food, and
17 other essentials can be distributed to the
18 population;

19 (C) sites where emergency workers can be
20 housed and fed; and

21 (D) routes and means of transportation of
22 people and materials.

23 (n) Coordination with other states and the federal
24 government.

25 (o) Taking into account cultural norms, values, and
26 traditions that may be relevant.

27 (p) Distribution of this plan and guidelines to
28 those who will be responsible for implementing the plan.

29 (q) Other measures necessary to carry out the
30 purposes of this Act.

31 (2) Review. The Commission shall review its plan for
32 responding to a public health emergency every 2 years.

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

4 Section 35-10. Rules. The public health authority must
5 adopt rules that are reasonable and necessary to implement
6 and effectuate this Act. The public health authority may
7 enforce the provisions of this Act through the imposition of
8 fines and penalties, the issuance of orders, and such other
9 remedies as are provided by law, but nothing in this Section
10 shall be construed to limit specific enforcement powers
11 enumerated in this Act.

12 Section 35-15. Financing and expenses.

13 (1) Transfer of funds. The Governor may transfer from
14 any fund available to the Governor in the State treasury such
15 sums as may be necessary to meet the public health emergency.

16 (2) Repayment. Moneys so transferred shall be repaid to
17 the fund from which they were transferred when moneys become
18 available for that purpose, by legislative appropriation or
19 otherwise.

20 (3) Conditions. A transfer of funds by the Governor
21 under the provisions of this Section may be made only when
22 one or more of the following conditions exist:

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

25 (b) An appropriation is insufficient to meet the
26 public health emergency.

27 (c) Federal moneys available for such a public
28 health emergency require the use of State or other public
29 moneys.

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

1 (a) No expense shall be incurred against the moneys
2 authorized under this Section, without the approval of
3 the Governor.

4 (b) The aggregate amount of all expenses incurred
5 under the provisions of this Section shall not exceed
6 \$50,000,000 for any fiscal year.

7 (c) Moneys authorized for a state of public health
8 emergency in prior fiscal years may be used in subsequent
9 fiscal years only for the public health emergency for
10 which they were authorized. Moneys authorized for a
11 public health emergency in prior fiscal years, and
12 expended in subsequent fiscal years for the public health
13 emergency for which they were authorized, apply toward
14 the \$50,000,000 expense limit for the fiscal year in
15 which they were authorized.

16 Section 35-20. Liability.

17 (1) State immunity. Neither the State, its political
18 subdivisions, nor, except in cases of gross negligence or
19 willful misconduct, the Governor, the public health
20 authority, or any other State official referenced in this
21 Act, is liable for the death of or any injury to persons, or
22 damage to property, as a result of complying with or
23 attempting to comply with this Act or any rule adopted under
24 this Act.

25 (2) Private liability.

26 (a) During a state of public health emergency, any
27 person owning or controlling real estate or other
28 premises who voluntarily and without compensation grants
29 a license or privilege, or otherwise permits the
30 designation or use of the whole or any part or parts of
31 that real estate or premises for the purpose of
32 sheltering persons, together with that person's
33 successors in interest, if any, is not civilly liable for

1 negligently causing the death of, or injury to, any
2 person on or about the real estate or premises under the
3 license, privilege, or other permission, or for
4 negligently causing loss of, or damage to, the property
5 of that person.

6 (b) During a state of public health emergency, any
7 private person, firm, or corporation and employees and
8 agents of that person, firm, or corporation in the
9 performance of a contract with, and under the direction
10 of, the State or its political subdivisions under this
11 Act is not civilly liable for causing the death of, or
12 injury to, any person or damage to any property except in
13 the event of gross negligence or willful misconduct.

14 (c) During a state of public health emergency, any
15 private person, firm, or corporation and employees and
16 agents of that person, firm, or corporation, who renders
17 assistance or advice at the request of the State or its
18 political subdivisions under this Act is not civilly
19 liable for causing the death of, or injury to, any person
20 or damage to any property except in the event of gross
21 negligence or willful misconduct.

22 (d) The immunities provided in this Section do not
23 apply to any private person, firm, or corporation or
24 employees and agents of that person, firm, or corporation
25 whose act or omission caused in whole or in part the
26 public health emergency and who would otherwise be liable
27 for that act or omission.

28 Section 35-25. Compensation.

29 (1) Taking. Compensation for property shall be made only
30 if private property is lawfully taken or appropriated by a
31 public health authority for its temporary or permanent use
32 during a state of public health emergency declared by the
33 Governor under this Act.

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

6 (3) Amount. The amount of compensation shall be
7 calculated in the same manner as compensation due for taking
8 of property pursuant to non-emergency eminent domain
9 procedures, as provided in Article VII of the Code of Civil
10 Procedure, except that the amount of compensation calculated
11 for items obtained under Section 15-25 shall be limited to
12 the costs incurred to produce the item.

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

15 Section 35-35. Saving clause. This Act does not
16 explicitly preempt other laws or regulations that preserve to
17 a greater degree the powers of the Governor or public health
18 authority, provided such laws or regulations are consistent,
19 and do not otherwise restrict or interfere, with the
20 operation or enforcement of the provisions of this Act.

21 Section 35-40. Conflicting laws.

22 (1) Federal supremacy. This Act does not restrict any
23 person from complying with federal law or regulations.

24 (2) Prior conflicting acts. To the extent of any
25 conflict between this Act and other State or local laws,
26 rules, or regulations concerning public health powers, the
27 provisions of this Act apply, but only to the extent of the
28 conflict and only to the extent necessary to carry out the
29 underlying purposes of this Act.

30 Section 35-45. Reports. Not later than 90 days after the

1 effective date of this Act, and every 12 months thereafter,
2 the Governor shall transmit to the General Assembly a report
3 that includes:

4 (1) A description of the detection and tracking efforts
5 made under this Act.

6 (2) A description of any state of public health
7 emergency declared under this Act.

8 (3) A description of the emergency powers used under
9 this Act.

10 (4) A description of the moneys transferred and
11 liabilities and expenses incurred under this Act.

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

20 ARTICLE 90. AMENDATORY PROVISIONS

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

23 (30 ILCS 805/8.26 new)

24 Sec. 8.26. Exempt mandate. Notwithstanding Sections 6
25 and 8 of this Act, no reimbursement by the State is required
26 for the implementation of any mandate created by the Illinois
27 Emergency Health Powers Act.

28 Section 90-10. The Code of Civil Procedure is amended by
29 adding Section 7-103.139 as follows:

1 (735 ILCS 5/7-103.139 new)
2 Sec. 7-103.139. Quick-take; public health emergencies.
3 Quick-take proceedings under Section 7-103 may be used as
4 provided in the Illinois Emergency Health Powers Act.

5 ARTICLE 99. EFFECTIVE DATE

6 Section 99-1. Effective date. This Act takes effect upon
7 becoming law.