



SENATE JOURNAL

STATE OF ILLINOIS

ONE HUNDREDTH GENERAL ASSEMBLY

110TH LEGISLATIVE DAY

TUESDAY, APRIL 17, 2018

12:24 O'CLOCK P.M.

SENATE
Daily Journal Index
110th Legislative Day

Action	Page(s)
Appointment Message(s).....	8
Communication from the Minority Leader.....	6
Deadline Established.....	4, 5, 49
Legislative Measure(s) Filed.....	6, 46, 48
Message from the House.....	51
Message from the President.....	4, 5, 48
Presentation of Senate Joint Resolution No. 63.....	49
Presentation of Senate Resolutions No'd. 1601-1610.....	7
Presentation of Senate Resolutions No'd. 1611-1612.....	49
Report from Assignments Committee.....	46, 48
Report from Standing Committee(s).....	50

Bill Number	Legislative Action	Page(s)
SB 1901	Second Reading.....	9
SB 2269	Second Reading.....	9
SB 2285	Second Reading.....	9
SB 2314	Second Reading.....	52
SB 2327	Second Reading.....	9
SB 2350	Second Reading.....	10
SB 2381	Second Reading.....	10
SB 2429	Second Reading.....	10
SB 2441	Second Reading.....	24
SB 2442	Second Reading.....	24
SB 2445	Second Reading.....	24
SB 2450	Second Reading.....	25
SB 2459	Third Reading.....	27
SB 2467	Second Reading.....	25
SB 2469	Third Reading.....	28
SB 2471	Second Reading.....	25
SB 2479	Second Reading.....	25
SB 2480	Second Reading.....	25
SB 2482	Second Reading.....	25
SB 2483	Second Reading.....	26
SB 2486	Second Reading.....	27
SB 2511	Third Reading.....	28
SB 2514	Third Reading.....	29
SB 2520	Third Reading.....	29
SB 2524	Third Reading.....	30
SB 2528	Third Reading.....	30
SB 2543	Recalled - Amendment(s).....	31
SB 2557	Third Reading.....	31
SB 2577	Third Reading.....	32
SB 2578	Recalled - Amendment(s).....	32
SB 2579	Recalled - Amendment(s).....	33
SB 2587	Third Reading.....	33
SB 2604	Third Reading.....	34
SB 2606	Third Reading.....	34
SB 2608	Third Reading.....	35
SB 2609	Third Reading.....	35
SB 2615	Third Reading.....	36
SB 2618	Third Reading.....	36

SB 2620	Third Reading	37
SB 2629	Third Reading	37
SB 2637	Third Reading	38
SB 2640	Recalled - Amendment(s)	38
SB 2641	Third Reading	39
SB 2644	Third Reading	40
SB 2655	Third Reading	40
SB 2658	Third Reading	41
SB 2660	Third Reading	41
SB 2663	Third Reading	42
SB 2826	Third Reading	42
SB 2852	Third Reading	43
SB 2853	Third Reading	43
SB 2863	Third Reading	44
SB 2864	Recalled - Amendment(s)	44
SB 2870	Third Reading	45
SB 2884	Third Reading	45
SB 2927	Second Reading	52
SB 3029	Posting Notice Waived	24
SB 3128	Second Reading	52
SB 3242	Second Reading	52
SB 3514	Second Reading	52
SJR 0063	Committee on Assignments	49
SR 1606	Committee on Assignments	7

The Senate met pursuant to adjournment.

Senator Terry Link, Waukegan, Illinois, presiding.

Prayer by Pastor Scott Marsh, Texas Christian Church and Maroa Christian Church, Maroa, Illinois.

Senator Cunningham led the Senate in the Pledge of Allegiance.

Senator Hunter moved that reading and approval of the Journals of Thursday, April 12, 2018 and Friday, April 13, 2018, be postponed, pending arrival of the printed Journals.

The motion prevailed.

MESSAGES FROM THE PRESIDENT

**OFFICE OF THE SENATE PRESIDENT
STATE OF ILLINOIS**

JOHN J. CULLERTON
SENATE PRESIDENT

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

April 13, 2018

Mr. Tim Anderson
Secretary of the Senate
Room 403 State House
Springfield, IL 62706

Dear Mr. Secretary:

Pursuant to the provisions of Senate Rule 2-10, I hereby extend the committee deadline to April 27th 2018, for the following Senate bills:

56, 65, 630, 758, 761, 834, 956, 957, 958, 959, 960, 1265, 1275, 1300, 1301, 1302, 1303, 1324, 1435, 1471, 1494, 1665, 1711, 1778, 1779, 1791, 1792, 1793, 1794, 1997, 2017, 2036, 2210, 2211, 2229, 2244, 2245, 2247, 2249, 2250, 2255, 2256, 2259, 2263, 2266, 2268, 2270, 2272, 2276, 2284, 2286, 2287, 2294, 2301, 2302, 2305, 2307, 2314, 2315, 2316, 2333, 2334, 2420, 2438, 2440, 2443, 2444, 2457, 2458, 2470, 2475, 2476, 2477, 2478, 2481, 2484, 2494, 2499, 2500, 2501, 2502, 2517, 2522, 2523, 2525, 2530, 2531, 2532, 2533, 2537, 2540, 2555, 2562, 2563, 2568, 2572, 2573, 2583, 2594, 2598, 2600, 2603, 2605, 2613, 2623, 2631, 2632, 2633, 2634, 2635, 2636, 2643, 2645, 2647, 2653, 2656, 2657, 2820, 2821, 2825, 2831, 2832, 2833, 2842, 2843, 2845, 2846, 2847, 2848, 2862, 2867, 2869, 2871, 2872, 2873, 2878, 2880, 2893, 2901, 2907, 2909, 2910, 2912, 2920, 2924, 2925, 2926, 2936, 2944, 2946, 2953, 2965, 2971, 2972, 2974, 2997, 3002, 3003, 3006, 3007, 3008, 3015, 3018, 3053, 3058, 3063, 3067, 3069, 3073, 3075, 3085, 3090, 3094, 3098, 3100, 3104, 3111, 3116, 3118, 3125, 3129, 3132, 3133, 3153, 3154, 3155, 3157, 3158, 3159, 3161, 3162, 3163, 3164, 3177, 3181, 3184, 3187, 3194, 3196, 3198, 3202, 3203, 3204, 3210, 3213, 3216, 3227, 3243, 3257, 3284, 3292, 3296, 3297, 3298, 3300, 3389, 3390, 3396, 3403, 3417, 3418, 3422, 3423, 3424, 3425, 3426, 3428, 3429, 3432, 3444, 3450, 3451, 3453, 3487, 3498, 3505, 3523, 3526, 3527, 3529, 3533, 3534, 3537, 3539, 3550, 3574 and 3578.

Sincerely,
s/John J. Cullerton
John J. Cullerton
Senate President

cc: Senate Republican Leader Bill Brady

**OFFICE OF THE SENATE PRESIDENT
STATE OF ILLINOIS**

JOHN J. CULLERTON
SENATE PRESIDENT

327 STATE CAPITOL
SPRINGFIELD, IL 62706

[April 17, 2018]

April 13, 2018

Mr. Tim Anderson
Secretary of the Senate
Room 403 State House
Springfield, IL 62706

Dear Mr. Secretary:

Pursuant to the provisions of Senate Rule 2-10, I hereby extend the committee deadline to April 27th 2018, for the following Senate bills:

3116 and 3396.

Sincerely,
s/John J. Cullerton
John J. Cullerton
Senate President

cc: Senate Republican Leader Bill Brady

**OFFICE OF THE SENATE PRESIDENT
STATE OF ILLINOIS**

JOHN J. CULLERTON
SENATE PRESIDENT

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

April 13, 2018

Mr. Tim Anderson
Secretary of the Senate
Room 403 State House
Springfield, IL 62706

Dear Mr. Secretary:

Pursuant to the provisions of Senate Rule 2-10, I hereby extend the committee deadline to April 27th 2018, for the following Senate bills:

3029

Sincerely,
s/John J. Cullerton
John J. Cullerton
Senate President

COMMUNICATION FROM THE MINORITY LEADER

SPRINGFIELD OFFICE:
309G STATE HOUSE
SPRINGFIELD, ILLINOIS 62706
PHONE: 217/782-9407

DISTRICT OFFICE
2203 EASTLAND DRIVE, SUITE 3
BLOOMINGTON, ILLINOIS 61704
PHONE: 309/664-4440
FAX: 309/664-8597
BILLBRADY@SENATORBILLBRADY.COM

[April 17, 2018]

ILLINOIS STATE SENATE
BILL BRADY
 SENATE REPUBLICAN LEADER
 44th SENATE DISTRICT

April 16, 2018

Mr. Tim Anderson
 Secretary of the Senate
 401 State House
 Springfield, Illinois 62706

Dear Mr. Secretary:

Pursuant to Rule 3-2 (c), I hereby appoint **Senator Schimpf** to temporarily replace **Senator McCann** as a member of the **Senate Environment and Conservation Committee**. This appointment is effective immediately and will automatically expire upon adjournment of the **Senate Environment and Conservation Committee**.

Sincerely,
 s/Bill Brady
 Bill Brady
 Illinois Senate Republican Leader
 44th District

cc: Senate President John Cullerton
 Assistant Secretary of the Senate Scott Kaiser

LEGISLATIVE MEASURES FILED

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

Amendment No. 3 to Senate Bill 65
 Amendment No. 2 to Senate Bill 1997
 Amendment No. 2 to Senate Bill 2270
 Amendment No. 3 to Senate Bill 2657
 Amendment No. 1 to Senate Bill 3002
 Amendment No. 3 to Senate Bill 3015

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

Amendment No. 1 to Senate Bill 43
 Amendment No. 1 to Senate Bill 2347
 Amendment No. 1 to Senate Bill 2352
 Amendment No. 1 to Senate Bill 2432
 Amendment No. 1 to Senate Bill 2480
 Amendment No. 3 to Senate Bill 2560
 Amendment No. 1 to Senate Bill 2667
 Amendment No. 1 to Senate Bill 2668
 Amendment No. 1 to Senate Bill 2697
 Amendment No. 1 to Senate Bill 2721
 Amendment No. 2 to Senate Bill 2808
 Amendment No. 1 to Senate Bill 2915
 Amendment No. 2 to Senate Bill 2817
 Amendment No. 1 to Senate Bill 3052
 Amendment No. 1 to Senate Bill 3156

[April 17, 2018]

Amendment No. 1 to Senate Bill 3182
 Amendment No. 1 to Senate Bill 3215

PRESENTATION OF RESOLUTIONS

SENATE RESOLUTION NO. 1601

Offered by Senator Hastings and all Senators:
 Mourns the death of William J. Perepechko.

SENATE RESOLUTION NO. 1602

Offered by Senator Hastings and all Senators:
 Mourns the death of William Charles "Chuck" Reed.

SENATE RESOLUTION NO. 1603

Offered by Senator Brady and all Senators:
 Mourns the death of Donald James Bernardi.

SENATE RESOLUTION NO. 1604

Offered by Senator Brady and all Senators:
 Mourns the death of Paula M.E. Hafner of Normal.

SENATE RESOLUTION NO. 1605

Offered by Senator Harmon and all Senators:
 Mourns the death of Charles "John" Mahoney of Oak Park.

SENATE RESOLUTION NO. 1607

Offered by Senator Anderson and all Senators:
 Mourns the death of Russell L. Hartwick, formerly of Andalusia.

SENATE RESOLUTION NO. 1608

Offered by Senator Anderson and all Senators:
 Mourns the death of Fremont A. "Jr." Rudsell of Reynolds.

SENATE RESOLUTION NO. 1609

Offered by Senator Anderson and all Senators:
 Mourns the death of Robert L. Tobey of Milan.

SENATE RESOLUTION NO. 1610

Offered by Senator Anderson and all Senators:
 Mourns the death of Dennis C. Manary of Rock Island.

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

Senator Cunningham offered the following Senate Resolution, which was referred to the Committee on Assignments:

SENATE RESOLUTION NO. 1606

WHEREAS, Laudato Si', the groundbreaking encyclical by Pope Francis written in 2015, is devoted to the care of our common home and offers important teachings for all Illinoisans to read and reflect upon as policies are developed to address serious challenges in our environment; and

WHEREAS, The encyclical notes that with these challenges, we are faced with one crisis that is both social and environmental; solutions to this crisis require an integrated approach that focuses on both the person and nature; and

[April 17, 2018]

WHEREAS, Laudato Si' reminds all of us, including government leaders, of our moral responsibility to care for our common home; therefore, be it

RESOLVED, BY THE SENATE OF THE ONE HUNDREDTH GENERAL ASSEMBLY OF THE STATE OF ILLINOIS, that the members of the General Assembly come together in a bipartisan manner to discuss and develop just policies for the State of Illinois that consider both our environmental and social systems in addressing the various issues that affect our common home.

APPOINTMENT MESSAGES

Appointment Message No. 1000381

To the Honorable Members of the Senate, One Hundredth General Assembly:

I, Bruce Rauner, Governor, am nominating and, by and with the advice and consent of the Senate, appointing the following named individual to the office enumerated below. The advice and consent of this Honorable Body is respectfully requested.

Title of Office: Member

Agency or Other Body: Illinois State Medical Disciplinary Board

Start Date: April 13, 2018

End Date: January 1, 2022

Name: Darren Hancock

Residence: 5331 W. Pensacola Ave., Chicago, IL 60641

Annual Compensation: Expenses

Per diem: Not Applicable

Nominee's Senator: Senator John G. Mulroe

Most Recent Holder of Office: Richard Fay

Superseded Appointment Message: Not Applicable

Appointment Message No. 1000382

To the Honorable Members of the Senate, One Hundredth General Assembly:

I, Bruce Rauner, Governor, am nominating and, by and with the advice and consent of the Senate, appointing the following named individual to the office enumerated below. The advice and consent of this Honorable Body is respectfully requested.

Title of Office: Member

Agency or Other Body: Pollution Control Board

Start Date: April 16, 2018

End Date: July 1, 2018

Name: U-Jung Choe

[April 17, 2018]

Residence: 530 William St., River Forest, IL 60305

Annual Compensation: \$117,043

Per diem: Not Applicable

Nominee's Senator: Senator Kimberly A. Lightford

Most Recent Holder of Office: Gerald Keenan

Superseded Appointment Message: Not Applicable

Under the rules, the foregoing Appointment Messages were referred to the Committee on Executive Appointments.

At the hour of 12:32 o'clock p.m., Senator Bennett, presiding, for the introduction of special guests.

At the hour of 12:38 o'clock p.m., Senator Link, presiding, and the Senate resumed consideration of business.

READING BILLS OF THE SENATE A SECOND TIME

On motion of Senator Weaver, **Senate Bill No. 1901** having been printed, was taken up, read by title a second time and ordered to a third reading.

On motion of Senator Manar, **Senate Bill No. 2269** having been printed, was taken up, read by title a second time and ordered to a third reading.

On motion of Senator Aquino, **Senate Bill No. 2285** having been printed, was taken up, read by title a second time.

Floor Amendment No. 1 was held in the Committee on Transportation.

There being no further amendments, the bill was ordered to a third reading.

On motion of Senator Syverson, **Senate Bill No. 2327** having been printed, was taken up, read by title a second time.

Senator Syverson offered the following amendment and moved its adoption:

AMENDMENT NO. 1 TO SENATE BILL 2327

AMENDMENT NO. 1. Amend Senate Bill 2327 by replacing everything after the enacting clause with the following:

"Section 5. The Video Gaming Act is amended by adding Sections 43 and 79.5 and by changing Section 58 as follows:

(230 ILCS 40/43 new)

Sec. 43. Notice of alleged violation of Section 40. In all instances of an alleged violation of Section 40, the Board or its agents or designees shall provide written notice of the alleged violation to the affected licensed establishment, licensed fraternal establishment, licensed veterans establishment, or licensed truck stop establishment within 15 days after the alleged occurrence of the violation.

(230 ILCS 40/58)

Sec. 58. Location of terminals. Video gaming terminals in a licensed establishment, licensed fraternal establishment, or licensed veterans establishment must be located in an area that is restricted to persons over 21 years of age and the entrance to the area must be which is within the view of at least one employee of the establishment , who is over 21 years of age, of the establishment in which they are located.

Video gaming terminals in a licensed truck stop establishment must be:

(1) located in an area that is restricted to persons over 21 years of age and the entrance to the area must be within the view of at least one employee of the establishment who is over 21 years of age; or

(2) monitored through a closed circuit television monitor that is located on the premises and is within the direct view of at least one employee of the establishment who is over 21 years of age.

The placement of video gaming terminals in licensed establishments, licensed truck stop establishments, licensed fraternal establishments, and licensed veterans establishments shall be subject to the rules promulgated by the Board pursuant to the Illinois Administrative Procedure Act.

(Source: P.A. 96-34, eff. 7-13-09; 96-37, eff. 7-13-09.)

(230 ILCS 40/79.5 new)

Sec. 79.5. Enforcement actions. The Board shall establish a policy and standards for compliance operations to investigate whether a licensed establishment, licensed fraternal establishment, licensed veterans establishment, or a licensed truck stop establishment is: (1) permitting any person under the age of 21 years to use or play a video gaming terminal in violation of this Act; or (2) furnishing alcoholic liquor to persons under 21 years of age in violation of the Liquor Control Act of 1934.

The policy and standards for compliance operations under this Section shall be similar to the model policy and guidelines for the operation of alcohol and tobacco compliance checks by local law enforcement officers adopted by the Illinois Law Enforcement Training Standards Board pursuant to subsection (c) of Section 6-16.1 of the Liquor Control Act of 1934. The Board shall adopt the policy and standards in the form of emergency rulemaking that shall be adopted no later than 90 days after the effective date of this amendatory Act of the 100th General Assembly and shall be immediately followed by permanent rulemaking on the same subject.

A licensed establishment, licensed fraternal establishment, licensed veterans establishment, or licensed truck stop establishment that is the subject of an enforcement action under this Section and is found, pursuant to the enforcement action, to be in compliance with this Act shall be notified by the Board that no violation was found within 30 days after the finding.

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

The motion prevailed.

And the amendment was adopted and ordered printed.

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

On motion of Senator Morrison, **Senate Bill No. 2350** having been printed, was taken up, read by title a second time.

Floor Amendment No. 1 was held in the Committee on Assignments.

There being no further amendments, the bill was ordered to a third reading.

On motion of Senator Murphy, **Senate Bill No. 2381** having been printed, was taken up, read by title a second time and ordered to a third reading.

On motion of Senator Aquino, **Senate Bill No. 2429** having been printed, was taken up, read by title a second time.

Committee Amendment No. 1 was held in the Committee on Assignments.

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

AMENDMENT NO. 2 TO SENATE BILL 2429

AMENDMENT NO. 2. Amend Senate Bill 2429 by replacing everything after the enacting clause with the following:

"Section 5. The Illinois Public Aid Code is amended by changing Sections 5-5, 5-30, and 5-30.1 as follows:

(305 ILCS 5/5-5) (from Ch. 23, par. 5-5)

Sec. 5-5. Medical services. The Illinois Department, by rule, shall determine the quantity and quality of and the rate of reimbursement for the medical assistance for which payment will be authorized, and the medical services to be provided, which may include all or part of the following: (1) inpatient hospital services; (2) outpatient hospital services; (3) other laboratory and X-ray services; (4) skilled nursing home services; (5) physicians' services whether furnished in the office, the patient's home, a hospital, a skilled nursing home, or elsewhere; (6) medical care, or any other type of remedial care furnished by licensed practitioners; (7) home health care services; (8) private duty nursing service; (9) clinic services; (10) dental

[April 17, 2018]

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

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

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

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

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

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

- (1) dental services provided by or under the supervision of a dentist; and
- (2) eyeglasses prescribed by a physician skilled in the diseases of the eye, or by an optometrist, whichever the person may select.

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

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

[April 17, 2018]

Exhibit D of the Consent Decree for targeted dental services that are provided to persons under the age of 18 under the medical assistance program.

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

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

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

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

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

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

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

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

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

All screenings shall include a physical breast exam, instruction on self-examination and information regarding the frequency of self-examination and its value as a preventative tool. For purposes of this Section, "low-dose mammography" means the x-ray examination of the breast using equipment dedicated specifically for mammography, including the x-ray tube, filter, compression device, and image receptor, with an average radiation exposure delivery of less than one rad per breast for 2 views of an average size breast. The term also includes digital mammography and includes breast tomosynthesis. As used in this Section, the term "breast tomosynthesis" means a radiologic procedure that involves the acquisition of projection images over the stationary breast to produce cross-sectional digital three-dimensional images of the breast. If, at any time, the Secretary of the United States Department of Health and Human Services, or its successor agency, promulgates rules or regulations to be published in the Federal Register or publishes a comment in the Federal Register or issues an opinion, guidance, or other action that would require the State, pursuant to any provision of the Patient Protection and Affordable Care Act (Public Law 111-148), including, but not limited to, 42 U.S.C. 18031(d)(3)(B) or any successor provision, to defray the cost of any coverage for breast tomosynthesis outlined in this paragraph, then the requirement that an insurer cover breast tomosynthesis is inoperative other than any such coverage authorized under Section 1902 of the Social Security Act, 42 U.S.C. 1396a, and the State shall not assume any obligation for the cost of coverage for breast tomosynthesis set forth in this paragraph.

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

On and after January 1, 2012, providers participating in a quality improvement program approved by the Department shall be reimbursed for screening and diagnostic mammography at the same rate as the Medicare program's rates, including the increased reimbursement for digital mammography.

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

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

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

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

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

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

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

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

Any medical or health care provider shall immediately recommend, to any pregnant woman who is being provided prenatal services and is suspected of drug abuse or is addicted as defined in the Alcoholism and Other Drug Abuse and Dependency Act, referral to a local substance abuse treatment provider licensed by the Department of Human Services or to a licensed hospital which provides substance abuse treatment services. The Department of Healthcare and Family Services shall assure coverage for the cost of treatment of the drug abuse or addiction for pregnant recipients in accordance with the Illinois Medicaid Program in conjunction with the Department of Human Services.

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

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

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

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

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

[April 17, 2018]

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

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

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

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

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

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

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

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

Notwithstanding any other law to the contrary, the Illinois Department shall, within 365 days after July 22, 2013 (the effective date of Public Act 98-104), establish procedures to permit skilled care facilities licensed under the Nursing Home Care Act to submit monthly billing claims for reimbursement purposes. Following development of these procedures, the Department shall, by July 1, 2016, test the viability of the new system and implement any necessary operational or structural changes to its information technology platforms in order to allow for the direct acceptance and payment of nursing home claims.

Notwithstanding any other law to the contrary, the Illinois Department shall, within 365 days after August 15, 2014 (the effective date of Public Act 98-963), establish procedures to permit ID/DD facilities licensed under the ID/DD Community Care Act and MC/DD facilities licensed under the MC/DD Act to submit monthly billing claims for reimbursement purposes. Following development of these procedures,

the Department shall have an additional 365 days to test the viability of the new system and to ensure that any necessary operational or structural changes to its information technology platforms are implemented.

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

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

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

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

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

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

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

- (1) In the case of a provider whose enrollment is in process by the Illinois Department, the 180-day period shall not begin until the date on the written notice from the Illinois Department that the provider enrollment is complete.
- (2) In the case of errors attributable to the Illinois Department or any of its claims processing intermediaries which result in an inability to receive, process, or adjudicate a claim, the 180-day period shall not begin until the provider has been notified of the error.
- (3) In the case of a provider for whom the Illinois Department initiates the monthly billing process.
- (4) In the case of a provider operated by a unit of local government with a population exceeding 3,000,000 when local government funds finance federal participation for claims payments.

For claims for services rendered during a period for which a recipient received retroactive eligibility, claims must be filed within 180 days after the Department determines the applicant is eligible. For claims for which the Illinois Department is not the primary payer, claims must be submitted to the Illinois Department within 180 days after the final adjudication by the primary payer.

In the case of long term care facilities, within 45 calendar days of receipt by the facility of required prescreening information, new admissions with associated admission documents shall be submitted through the Medical Electronic Data Interchange (MEDI) or the Recipient Eligibility Verification (REV) System or shall be submitted directly to the Department of Human Services using required admission forms. Effective September 1, 2014, admission documents, including all prescreening information, must be submitted through MEDI or REV. Confirmation numbers assigned to an accepted transaction shall be retained by a facility to verify timely submittal. Once an admission transaction has been completed, all resubmitted claims following prior rejection are subject to receipt no later than 180 days after the admission transaction has been completed.

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

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

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

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

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

The Department shall require, by rule, all providers of durable medical equipment to be accredited by an accreditation organization approved by the federal Centers for Medicare and Medicaid Services and recognized by the Department in order to bill the Department for providing durable medical equipment to recipients. No later than 15 months after the effective date of the rule adopted pursuant to this paragraph, all providers must meet the accreditation requirement.

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

the minimum level of care eligibility criteria, the Governor shall establish a workgroup that includes affected agency representatives and stakeholders representing the institutional and home and community-based long term care interests. This Section shall not restrict the Department from implementing lower level of care eligibility criteria for community-based services in circumstances where federal approval has been granted.

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

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

- (a) actual statistics and trends in utilization of medical services by public aid recipients;
- (b) actual statistics and trends in the provision of the various medical services by medical vendors;
- (c) current rate structures and proposed changes in those rate structures for the various medical vendors; and
- (d) efforts at utilization review and control by the Illinois Department.

The period covered by each report shall be the 3 years ending on the June 30 prior to the report. The report shall include suggested legislation for consideration by the General Assembly. The filing of one copy of the report with the Speaker, one copy with the Minority Leader and one copy with the Clerk of the House of Representatives, one copy with the President, one copy with the Minority Leader and one copy with the Secretary of the Senate, one copy with the Legislative Research Unit, and such additional copies with the State Government Report Distribution Center for the General Assembly as is required under paragraph (t) of Section 7 of the State Library Act shall be deemed sufficient to comply with this Section.

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

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

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

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

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

Upon federal approval, the Department shall provide coverage and reimbursement for all drugs that are approved for marketing by the federal Food and Drug Administration and that are recommended by the federal Public Health Service or the United States Centers for Disease Control and Prevention for pre-

[April 17, 2018]

exposure prophylaxis and related pre-exposure prophylaxis services, including, but not limited to, HIV and sexually transmitted infection screening, treatment for sexually transmitted infections, medical monitoring, assorted labs, and counseling to reduce the likelihood of HIV infection among individuals who are not infected with HIV but who are at high risk of HIV infection.

(Source: P.A. 99-78, eff. 7-20-15; 99-180, eff. 7-29-15; 99-236, eff. 8-3-15; 99-407 (see Section 20 of P.A. 99-588 for the effective date of P.A. 99-407); 99-433, eff. 8-21-15; 99-480, eff. 9-9-15; 99-588, eff. 7-20-16; 99-642, eff. 7-28-16; 99-772, eff. 1-1-17; 99-895, eff. 1-1-17; 100-201, eff. 8-18-17; 100-395, eff. 1-1-18; 100-449, eff. 1-1-18; 100-538, eff. 1-1-18; revised 10-26-17.)

(305 ILCS 5/5-30)

Sec. 5-30. Care coordination.

(a) At least 50% of recipients eligible for comprehensive medical benefits in all medical assistance programs or other health benefit programs administered by the Department, including the Children's Health Insurance Program Act and the Covering ALL KIDS Health Insurance Act, shall be enrolled in a care coordination program by no later than January 1, 2015. For purposes of this Section, "coordinated care" or "care coordination" means delivery systems where recipients will receive their care from providers who participate under contract in integrated delivery systems that are responsible for providing or arranging the majority of care, including primary care physician services, referrals from primary care physicians, diagnostic and treatment services, behavioral health services, in-patient and outpatient hospital services, dental services, and rehabilitation and long-term care services. The Department shall designate or contract for such integrated delivery systems (i) to ensure enrollees have a choice of systems and of primary care providers within such systems; (ii) to ensure that enrollees receive quality care in a culturally and linguistically appropriate manner; and (iii) to ensure that coordinated care programs meet the diverse needs of enrollees with developmental, mental health, physical, and age-related disabilities.

(b) Payment for such coordinated care shall be based on arrangements where the State pays for performance related to health care outcomes, the use of evidence-based practices, the use of primary care delivered through comprehensive medical homes, the use of electronic medical records, and the appropriate exchange of health information electronically made either on a capitated basis in which a fixed monthly premium per recipient is paid and full financial risk is assumed for the delivery of services, or through other risk-based payment arrangements.

(c) To qualify for compliance with this Section, the 50% goal shall be achieved by enrolling medical assistance enrollees from each medical assistance enrollment category, including parents, children, seniors, and people with disabilities to the extent that current State Medicaid payment laws would not limit federal matching funds for recipients in care coordination programs. In addition, services must be more comprehensively defined and more risk shall be assumed than in the Department's primary care case management program as of January 25, 2011 (the effective date of Public Act 96-1501).

(d) The Department shall report to the General Assembly in a separate part of its annual medical assistance program report, beginning April, 2012 until April, 2016, on the progress and implementation of the care coordination program initiatives established by the provisions of Public Act 96-1501. The Department shall include in its April 2011 report a full analysis of federal laws or regulations regarding upper payment limitations to providers and the necessary revisions or adjustments in rate methodologies and payments to providers under this Code that would be necessary to implement coordinated care with full financial risk by a party other than the Department.

(e) Integrated Care Program for individuals with chronic mental health conditions.

(1) The Integrated Care Program shall encompass services administered to recipients of medical assistance under this Article to prevent exacerbations and complications using cost-effective, evidence-based practice guidelines and mental health management strategies.

(2) The Department may utilize and expand upon existing contractual arrangements with integrated care plans under the Integrated Care Program for providing the coordinated care provisions of this Section.

(3) Payment for such coordinated care shall be based on arrangements where the State pays for performance related to mental health outcomes on a capitated basis in which a fixed monthly premium per recipient is paid and full financial risk is assumed for the delivery of services, or through other risk-based payment arrangements such as provider-based care coordination.

(4) The Department shall examine whether chronic mental health management programs and services for recipients with specific chronic mental health conditions do any or all of the following:

(A) Improve the patient's overall mental health in a more expeditious and cost-effective manner.

(B) Lower costs in other aspects of the medical assistance program, such as hospital admissions, emergency room visits, or more frequent and inappropriate psychotropic drug use.

(5) The Department shall work with the facilities and any integrated care plan participating in the program to identify and correct barriers to the successful implementation of this subsection (e) prior to and during the implementation to best facilitate the goals and objectives of this subsection (e).

(f) A hospital that is located in a county of the State in which the Department mandates some or all of the beneficiaries of the Medical Assistance Program residing in the county to enroll in a Care Coordination Program, as set forth in Section 5-30 of this Code, shall not be eligible for any non-claims based payments not mandated by Article V-A of this Code for which it would otherwise be qualified to receive, unless the hospital is a Coordinated Care Participating Hospital no later than 60 days after June 14, 2012 (the effective date of Public Act 97-689) or 60 days after the first mandatory enrollment of a beneficiary in a Coordinated Care program. For purposes of this subsection, "Coordinated Care Participating Hospital" means a hospital that meets one of the following criteria:

(1) The hospital has entered into a contract to provide hospital services with one or more MCOs to enrollees of the care coordination program.

(2) The hospital has not been offered a contract by a care coordination plan that the Department has determined to be a good faith offer and that pays at least as much as the Department would pay, on a fee-for-service basis, not including disproportionate share hospital adjustment payments or any other supplemental adjustment or add-on payment to the base fee-for-service rate, except to the extent such adjustments or add-on payments are incorporated into the development of the applicable MCO capitated rates.

As used in this subsection (f), "MCO" means any entity which contracts with the Department to provide services where payment for medical services is made on a capitated basis.

(g) No later than August 1, 2013, the Department shall issue a purchase of care solicitation for Accountable Care Entities (ACE) to serve any children and parents or caretaker relatives of children eligible for medical assistance under this Article. An ACE may be a single corporate structure or a network of providers organized through contractual relationships with a single corporate entity. The solicitation shall require that:

(1) An ACE operating in Cook County be capable of serving at least 40,000 eligible individuals in that county; an ACE operating in Lake, Kane, DuPage, or Will Counties be capable of serving at least 20,000 eligible individuals in those counties and an ACE operating in other regions of the State be capable of serving at least 10,000 eligible individuals in the region in which it operates. During initial periods of mandatory enrollment, the Department shall require its enrollment services contractor to use a default assignment algorithm that ensures if possible an ACE reaches the minimum enrollment levels set forth in this paragraph.

(2) An ACE must include at a minimum the following types of providers: primary care, specialty care, hospitals, and behavioral healthcare.

(3) An ACE shall have a governance structure that includes the major components of the health care delivery system, including one representative from each of the groups listed in paragraph (2).

(4) An ACE must be an integrated delivery system, including a network able to provide the full range of services needed by Medicaid beneficiaries and system capacity to securely pass clinical information across participating entities and to aggregate and analyze that data in order to coordinate care.

(5) An ACE must be capable of providing both care coordination and complex case management, as necessary, to beneficiaries. To be responsive to the solicitation, a potential ACE must outline its care coordination and complex case management model and plan to reduce the cost of care.

(6) In the first 18 months of operation, unless the ACE selects a shorter period, an ACE shall be paid care coordination fees on a per member per month basis that are projected to be cost neutral to the State during the term of their payment and, subject to federal approval, be eligible to share in additional savings generated by their care coordination.

(7) In months 19 through 36 of operation, unless the ACE selects a shorter period, an ACE shall be paid on a pre-paid capitation basis for all medical assistance covered services, under contract terms similar to Managed Care Organizations (MCO), with the Department sharing the risk through either stop-loss insurance for extremely high cost individuals or corridors of shared risk based on the overall cost of the total enrollment in the ACE. The ACE shall be responsible for claims processing, encounter data submission, utilization control, and quality assurance.

(8) In the fourth and subsequent years of operation, an ACE shall convert to a Managed Care Community Network (MCCN), as defined in this Article, or Health Maintenance Organization pursuant to the Illinois Insurance Code, accepting full-risk capitation payments.

[April 17, 2018]

The Department shall allow potential ACE entities 5 months from the date of the posting of the solicitation to submit proposals. After the solicitation is released, in addition to the MCO rate development data available on the Department's website, subject to federal and State confidentiality and privacy laws and regulations, the Department shall provide 2 years of de-identified summary service data on the targeted population, split between children and adults, showing the historical type and volume of services received and the cost of those services to those potential bidders that sign a data use agreement. The Department may add up to 2 non-state government employees with expertise in creating integrated delivery systems to its review team for the purchase of care solicitation described in this subsection. Any such individuals must sign a no-conflict disclosure and confidentiality agreement and agree to act in accordance with all applicable State laws.

During the first 2 years of an ACE's operation, the Department shall provide claims data to the ACE on its enrollees on a periodic basis no less frequently than monthly.

Nothing in this subsection shall be construed to limit the Department's mandate to enroll 50% of its beneficiaries into care coordination systems by January 1, 2015, using all available care coordination delivery systems, including Care Coordination Entities (CCE), MCCNs, or MCOs, nor be construed to affect the current CCEs, MCCNs, and MCOs selected to serve seniors and persons with disabilities prior to that date.

Nothing in this subsection precludes the Department from considering future proposals for new ACEs or expansion of existing ACEs at the discretion of the Department.

(h) Department contracts with MCOs and other entities reimbursed by risk based capitation shall have a minimum medical loss ratio of 85%, shall require the entity to establish an appeals and grievances process for consumers and providers, and shall require the entity to provide a quality assurance and utilization review program. Entities contracted with the Department to coordinate healthcare regardless of risk shall be measured utilizing the same quality metrics. The quality metrics may be population specific. Any contracted entity serving at least 5,000 seniors or people with disabilities or 15,000 individuals in other populations covered by the Medical Assistance Program that has been receiving full-risk capitation for a year shall be accredited by a national accreditation organization authorized by the Department within 2 years after the date it is eligible to become accredited. The requirements of this subsection shall apply to contracts with MCOs entered into or renewed or extended after June 1, 2013.

(h-5) The Department shall monitor and enforce compliance by MCOs with agreements they have entered into with providers on issues that include, but are not limited to, timeliness of payment, payment rates, and processes for obtaining prior approval. The Department may impose sanctions on MCOs for violating provisions of those agreements that include, but are not limited to, financial penalties, suspension of enrollment of new enrollees, and termination of the MCO's contract with the Department. As used in this subsection (h-5), "MCO" has the meaning ascribed to that term in Section 5-30.1 of this Code.

(i) Unless otherwise required by federal law, Medicaid Managed Care Entities and their respective business associates shall not disclose, directly or indirectly, including by sending a bill or explanation of benefits, information concerning the sensitive health services received by enrollees of the Medicaid Managed Care Entity to any person other than covered entities and business associates, which may receive, use, and further disclose such information solely for the purposes permitted under applicable federal and State laws and regulations if such use and further disclosure satisfies all applicable requirements of such laws and regulations. The Medicaid Managed Care Entity or its respective business associates may disclose information concerning the sensitive health services if the enrollee who received the sensitive health services requests the information from the Medicaid Managed Care Entity or its respective business associates and authorized the sending of a bill or explanation of benefits. Communications including, but not limited to, statements of care received or appointment reminders either directly or indirectly to the enrollee from the health care provider, health care professional, and care coordinators, remain permissible. Medicaid Managed Care Entities or their respective business associates may communicate directly with their enrollees regarding care coordination activities for those enrollees.

For the purposes of this subsection, the term "Medicaid Managed Care Entity" includes Care Coordination Entities, Accountable Care Entities, Managed Care Organizations, and Managed Care Community Networks.

For purposes of this subsection, the term "sensitive health services" means mental health services, substance abuse treatment services, reproductive health services, family planning services, services for sexually transmitted infections and sexually transmitted diseases, and services for sexual assault or domestic abuse. Services include prevention, screening, consultation, examination, treatment, or follow-up.

For purposes of this subsection, "business associate", "covered entity", "disclosure", and "use" have the meanings ascribed to those terms in 45 CFR 160.103.

[April 17, 2018]

Nothing in this subsection shall be construed to relieve a Medicaid Managed Care Entity or the Department of any duty to report incidents of sexually transmitted infections to the Department of Public Health or to the local board of health in accordance with regulations adopted under a statute or ordinance or to report incidents of sexually transmitted infections as necessary to comply with the requirements under Section 5 of the Abused and Neglected Child Reporting Act or as otherwise required by State or federal law.

The Department shall create policy in order to implement the requirements in this subsection.

(j) Managed Care Entities (MCEs), including MCOs and all other care coordination organizations, shall develop and maintain a written language access policy that sets forth the standards, guidelines, and operational plan to ensure language appropriate services and that is consistent with the standard of meaningful access for populations with limited English proficiency. The language access policy shall describe how the MCEs will provide all of the following required services:

(1) Translation (the written replacement of text from one language into another) of all vital documents and forms as identified by the Department.

(2) Qualified interpreter services (the oral communication of a message from one language into another by a qualified interpreter).

(3) Staff training on the language access policy, including how to identify language needs, access and provide language assistance services, work with interpreters, request translations, and track the use of language assistance services.

(4) Data tracking that identifies the language need.

(5) Notification to participants on the availability of language access services and on how to access such services.

(k) The Department shall actively monitor the contractual relationship between Managed Care Organizations (MCOs) and any dental administrator contracted by an MCO to provide dental services. The Department shall adopt appropriate dental Healthcare Effectiveness Data and Information Set measures or other dental quality performance measures as part of its monitoring and shall include additional specific dental performance measures in its Health Plan Comparison Tool and Illinois Medicaid Plan Report Card that is available on the Department's website for enrolled individuals.

The Department shall collect from each MCO specific information about the types of contracted, broad-based care coordination occurring between the MCO and any dental administrator, including, but not limited to, pregnant women and diabetic patients in need of oral care.

(Source: P.A. 98-104, eff. 7-22-13; 98-651, eff. 6-16-14; 99-106, eff. 1-1-16; 99-181, eff. 7-29-15; 99-566, eff. 1-1-17; 99-642, eff. 7-28-16.)

(305 ILCS 5/5-30.1)

Sec. 5-30.1. Managed care protections.

(a) As used in this Section:

"Managed care organization" or "MCO" means any entity which contracts with the Department to provide services where payment for medical services is made on a capitated basis.

"Emergency services" include:

(1) emergency services, as defined by Section 10 of the Managed Care Reform and Patient Rights Act;

(2) emergency medical screening examinations, as defined by Section 10 of the Managed Care Reform and Patient Rights Act;

(3) post-stabilization medical services, as defined by Section 10 of the Managed Care Reform and Patient Rights Act; and

(4) emergency medical conditions, as defined by Section 10 of the Managed Care Reform and Patient Rights Act.

(b) As provided by Section 5-16.12, managed care organizations are subject to the provisions of the Managed Care Reform and Patient Rights Act.

(c) An MCO shall pay any provider of emergency services that does not have in effect a contract with the contracted Medicaid MCO. The default rate of reimbursement shall be the rate paid under Illinois Medicaid fee-for-service program methodology, including all policy adjusters, including but not limited to Medicaid High Volume Adjustments, Medicaid Percentage Adjustments, Outpatient High Volume Adjustments, and all outlier add-on adjustments to the extent such adjustments are incorporated in the development of the applicable MCO capitated rates.

(d) An MCO shall pay for all post-stabilization services as a covered service in any of the following situations:

(1) the MCO authorized such services;

(2) such services were administered to maintain the enrollee's stabilized condition

within one hour after a request to the MCO for authorization of further post-stabilization services;

(3) the MCO did not respond to a request to authorize such services within one hour;

(4) the MCO could not be contacted; or

(5) the MCO and the treating provider, if the treating provider is a non-affiliated provider, could not reach an agreement concerning the enrollee's care and an affiliated provider was unavailable for a consultation, in which case the MCO must pay for such services rendered by the treating non-affiliated provider until an affiliated provider was reached and either concurred with the treating non-affiliated provider's plan of care or assumed responsibility for the enrollee's care. Such payment shall be made at the default rate of reimbursement paid under Illinois Medicaid fee-for-service program methodology, including all policy adjusters, including but not limited to Medicaid High Volume Adjustments, Medicaid Percentage Adjustments, Outpatient High Volume Adjustments and all outlier add-on adjustments to the extent that such adjustments are incorporated in the development of the applicable MCO capitated rates.

(e) The following requirements apply to MCOs in determining payment for all emergency services:

(1) MCOs shall not impose any requirements for prior approval of emergency services.

(2) The MCO shall cover emergency services provided to enrollees who are temporarily away from their residence and outside the contracting area to the extent that the enrollees would be entitled to the emergency services if they still were within the contracting area.

(3) The MCO shall have no obligation to cover medical services provided on an emergency basis that are not covered services under the contract.

(4) The MCO shall not condition coverage for emergency services on the treating provider notifying the MCO of the enrollee's screening and treatment within 10 days after presentation for emergency services.

(5) The determination of the attending emergency physician, or the provider actually treating the enrollee, of whether an enrollee is sufficiently stabilized for discharge or transfer to another facility, shall be binding on the MCO. The MCO shall cover emergency services for all enrollees whether the emergency services are provided by an affiliated or non-affiliated provider.

(6) The MCO's financial responsibility for post-stabilization care services it has not pre-approved ends when:

(A) a plan physician with privileges at the treating hospital assumes responsibility for the enrollee's care;

(B) a plan physician assumes responsibility for the enrollee's care through transfer;

(C) a contracting entity representative and the treating physician reach an agreement concerning the enrollee's care; or

(D) the enrollee is discharged.

(f) Network adequacy and transparency.

(1) The Department shall:

(A) ensure that an adequate provider network is in place, taking into consideration health professional shortage areas and medically underserved areas;

(B) publicly release an explanation of its process for analyzing network adequacy;

(C) periodically ensure that an MCO continues to have an adequate network in place; and

(D) require MCOs, including Medicaid Managed Care Entities as defined in Section 5-30.2, to meet provider directory requirements under Section 5-30.3.

(2) Each MCO shall confirm its receipt of information submitted specific to physician or dentist additions or physician or dentist deletions from the MCO's provider network within 3 days after receiving all required information from contracted physicians or dentists, and electronic physician and dental directories must be updated consistent with current rules as published by the Centers for Medicare and Medicaid Services or its successor agency.

(g) Timely payment of claims.

(1) The MCO shall pay a claim within 30 days of receiving a claim that contains all the essential information needed to adjudicate the claim.

(2) The MCO shall notify the billing party of its inability to adjudicate a claim within 30 days of receiving that claim.

(3) The MCO shall pay a penalty that is at least equal to the penalty imposed under the Illinois Insurance Code for any claims not timely paid.

(4) The Department may establish a process for MCOs to expedite payments to providers based on criteria established by the Department.

(g-5) Recognizing that the rapid transformation of the Illinois Medicaid program may have unintended operational challenges for both payers and providers:

(1) in no instance shall a medically necessary covered service rendered in good faith, based upon eligibility information documented by the provider, be denied coverage or diminished in payment amount if the eligibility or coverage information available at the time the service was rendered is later found to be inaccurate; and

(2) the Department shall, by December 31, 2016, adopt rules establishing policies that shall be included in the Medicaid managed care policy and procedures manual addressing payment resolutions in situations in which a provider renders services based upon information obtained after verifying a patient's eligibility and coverage plan through either the Department's current enrollment system or a system operated by the coverage plan identified by the patient presenting for services:

(A) such medically necessary covered services shall be considered rendered in good faith;

(B) such policies and procedures shall be developed in consultation with industry representatives of the Medicaid managed care health plans and representatives of provider associations representing the majority of providers within the identified provider industry; and

(C) such rules shall be published for a review and comment period of no less than 30 days on the Department's website with final rules remaining available on the Department's website.

(3) The rules on payment resolutions shall include, but not be limited to:

(A) the extension of the timely filing period;

(B) retroactive prior authorizations; and

(C) guaranteed minimum payment rate of no less than the current, as of the date of service, fee-for-service rate, plus all applicable add-ons, when the resulting service relationship is out of network.

(4) The rules shall be applicable for both MCO coverage and fee-for-service coverage.

(g-6) MCO Performance Metrics Report.

(1) The Department shall publish, on at least a quarterly basis, each MCO's operational performance, including, but not limited to, the following categories of metrics:

(A) claims payment, including timeliness and accuracy;

(B) prior authorizations;

(C) grievance and appeals;

(D) utilization statistics;

(E) provider disputes;

(F) provider credentialing; and

(G) member and provider customer service.

(2) The Department shall ensure that the metrics report is accessible to providers online by January 1, 2017.

(3) The metrics shall be developed in consultation with industry representatives of the Medicaid managed care health plans and representatives of associations representing the majority of providers within the identified industry.

(4) Metrics shall be defined and incorporated into the applicable Managed Care Policy Manual issued by the Department.

(g-7) MCO claims processing and performance analysis. In order to monitor MCO payments to hospital providers, pursuant to this amendatory Act of the 100th General Assembly, the Department shall post an analysis of MCO claims processing and payment performance on its website every 6 months. Such analysis shall include a review and evaluation of a representative sample of hospital claims that are rejected and denied for clean and unclear claims and the top 5 reasons for such actions and timeliness of claims adjudication, which identifies the percentage of claims adjudicated within 30, 60, 90, and over 90 days, and the dollar amounts associated with those claims. The Department shall post the contracted claims report required by HealthChoice Illinois on its website every 3 months.

(h) The Department shall not expand mandatory MCO enrollment into new counties beyond those counties already designated by the Department as of June 1, 2014 for the individuals whose eligibility for medical assistance is not the seniors or people with disabilities population until the Department provides an opportunity for accountable care entities and MCOs to participate in such newly designated counties.

(i) The requirements of this Section apply to contracts with accountable care entities and MCOs entered into, amended, or renewed after June 16, 2014 (the effective date of Public Act 98-651).

(Source: P.A. 99-725, eff. 8-5-16; 99-751, eff. 8-5-16; 100-201, eff. 8-18-17; 100-580, eff. 3-12-18.)

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

[April 17, 2018]

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

POSTING NOTICE WAIVED

Senator McConnaughay moved to waive the six-day posting requirement on **Senate Bill No. 3029** so that the measure may be heard in the Committee on Transportation that is scheduled to meet this afternoon.

The motion prevailed.

READING BILLS OF THE SENATE A SECOND TIME

On motion of Senator Hastings, **Senate Bill No. 2441** having been printed, was taken up, read by title a second time and ordered to a third reading.

On motion of Senator Mulroe, **Senate Bill No. 2442** having been printed, was taken up, read by title a second time.

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

AMENDMENT NO. 1 TO SENATE BILL 2442

AMENDMENT NO. 1. Amend Senate Bill 2442 by replacing everything after the enacting clause with the following:

"Section 5. The Department of Public Health Powers and Duties Law of the Civil Administrative Code of Illinois is amended by adding Section 2310-697 as follows:

(20 ILCS 2310/2310-697 new)

Sec. 2310-697. Breast cancer; duty of providers of mammography services to notify and inform.

(a) As used in this Section, "dense breast tissue" means heterogeneously dense or extremely dense tissue as defined in nationally recognized guidelines or systems for breast imaging reporting of mammography screening, including, but not limited to, the Breast Imaging Reporting and Data System established by the American College of Radiology, and any equivalent new terms, as such guidelines are updated.

(b) If a patient's mammogram demonstrates dense breast tissue, the Department shall require every provider of mammography services to include in a summary of the mammography report sent to the patient in accordance with the federal Mammography Quality Standards Act a notice substantially similar to the following:

"Your mammogram indicates you have dense breast tissue. Dense breast tissue is normal and identified on mammograms in about 50% of women. Dense breast tissue can make it more difficult to detect cancer on a mammogram and may be associated with an increased risk for breast cancer. Despite these limitations, screening mammograms have been proven to save lives. Continue to have routine screening mammography whether or not additional exams are suggested for you. This information is provided to raise your awareness of the impact of breast density on cancer detection. For further information about dense breast tissue, as well as other breast cancer risk factors, contact your breast imaging health care provider."

(c) A facility that performs mammography may update the language in the notice under subsection (b) to reflect advances in science and technology, as long as it continues to notify patients about dense breast tissue and its effect on the accuracy of mammograms and encourage patients to discuss the issue with their health care provider.

(d) This Section does not create a duty of care or other legal obligation beyond the duty to provide notice as set forth in this Section."

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

On motion of Senator Haine, **Senate Bill No. 2445** having been printed, was taken up, read by title a second time.

[April 17, 2018]

Senator Haine offered the following amendment and moved its adoption:

AMENDMENT NO. 1 TO SENATE BILL 2445

AMENDMENT NO. 1. Amend Senate Bill 2445 on page 16, immediately below line 22, by inserting the following:

"(147) If the ordinance was adopted on September 5, 1995 by the City of Granite City."

The motion prevailed.

And the amendment was adopted and ordered printed.

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

On motion of Senator Bennett, **Senate Bill No. 2450** having been printed, was taken up, read by title a second time and ordered to a third reading.

On motion of Senator Morrison, **Senate Bill No. 2467** having been printed, was taken up, read by title a second time and ordered to a third reading.

On motion of Senator Holmes, **Senate Bill No. 2471** having been printed, was taken up, read by title a second time and ordered to a third reading.

On motion of Senator Hastings, **Senate Bill No. 2479** having been printed, was taken up, read by title a second time and ordered to a third reading.

On motion of Senator Hastings, **Senate Bill No. 2480** having been printed, was taken up, read by title a second time.

Floor Amendment No. 1 was held in the Committee on Assignments.

There being no further amendments, the bill was ordered to a third reading.

On motion of Senator Morrison, **Senate Bill No. 2482** having been printed, was taken up, read by title a second time.

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

AMENDMENT NO. 1 TO SENATE BILL 2482

AMENDMENT NO. 1. Amend Senate Bill 2482 on page 1, by replacing line 5 with the following:

"Sections 12-806 and 12-806a as follows:

(625 ILCS 5/12-806) (from Ch. 95 1/2, par. 12-806)

Sec. 12-806. Identification, stop signal arms and special lighting when not used as a school bus.

(a) Except as provided in Section 12-806a, whenever a school bus is operated for the purpose of transporting passengers over 18 years of age other than persons in connection with an activity of the school or religious organization which owns the school bus or for which the school bus is operated, the "SCHOOL BUS" signs shall be covered or concealed and the stop signal arm and flashing signal system shall not be operable through normal controls.

(b) If a school district, religious organization, vendor of school ~~buses~~ busses, or school bus company whose main source of income is contracting with a school district or religious organization for the provision of transportation services in connection with the activities of a school district or religious organization, discards through either sale or donation, a school bus to an individual or entity that is not one of the aforementioned entities above, then the recipient of such school bus shall be responsible for immediately removing, covering, or concealing the "SCHOOL BUS" signs and any other insignia or words indicating the vehicle is a school bus, rendering inoperable or removing entirely the stop signal arm and flashing signal system, and painting the school bus a different color from those under Section 12-801 of this Code.

(Source: P.A. 100-277, eff. 1-1-18; revised 10-5-17.); and

on page 2, line 8, by changing "either (i)" to "~~either (i)~~"; and

on page 2, by replacing lines 10 through 12 with:

[April 17, 2018]

~~"and 12-805 or (ii) shall have "SCHOOL BUS" signs covered or concealed and the stop signal arm and flashing signal system rendered inoperable through normal means. A bus which meets all"; and~~

on page 2, by replacing lines 20 through 24 with:

~~"at least once per year. A bus which has had the "SCHOOL BUS" signs covered or concealed and the stop signal arm and flashing signal system rendered inoperable through normal means may be operated by a person who has a valid and properly classified driver's license issued by the Secretary of State."~~

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

On motion of Senator T. Cullerton, **Senate Bill No. 2483** having been printed, was taken up, read by title a second time.

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

AMENDMENT NO. 1 TO SENATE BILL 2483

AMENDMENT NO. 1. Amend Senate Bill 2483 by replacing everything after the enacting clause with the following:

"Section 5. The Illinois Municipal Code is amended by changing Sections 8-3-14 and 8-3-14a and by adding Sections 8-3-14b and 8-3-14c as follows:

(65 ILCS 5/8-3-14) (from Ch. 24, par. 8-3-14)

Sec. 8-3-14. Municipal hotel operators' occupation tax. The corporate authorities of any municipality may impose a tax upon all persons engaged in such municipality in the business of renting, leasing or letting rooms in a hotel, as defined in "The Hotel Operators' Occupation Tax Act," at a rate not to exceed 6% in the City of East Peoria and in the Village of Morton and 5% in all other municipalities of the gross rental receipts from such renting, leasing or letting, excluding, however, from gross rental receipts, the proceeds of such renting, leasing or letting to permanent residents of that hotel and proceeds from the tax imposed under subsection (c) of Section 13 of the Metropolitan Pier and Exposition Authority Act, and may provide for the administration and enforcement of the tax, and for the collection thereof from the persons subject to the tax, as the corporate authorities determine to be necessary or practicable for the effective administration of the tax. The municipality may not impose a tax under this Section if it imposes a tax under Section 8-3-14a.

Persons subject to any tax imposed pursuant to authority granted by this Section may reimburse themselves for their tax liability for such tax by separately stating such tax as an additional charge, which charge may be stated in combination, in a single amount, with State tax imposed under "The Hotel Operators' Occupation Tax Act".

Nothing in this Section shall be construed to authorize a municipality to impose a tax upon the privilege of engaging in any business which under the constitution of the United States may not be made the subject of taxation by this State.

~~Except as otherwise provided in this Division, the~~ The amounts collected by any municipality pursuant to this Section shall be expended by the municipality solely to promote tourism and conventions within that municipality or otherwise to attract nonresident overnight visitors to the municipality.

No funds received pursuant to this Section shall be used to advertise for or otherwise promote new competition in the hotel business.

(Source: P.A. 95-967, eff. 9-23-08; 96-238, eff. 8-11-09.)

(65 ILCS 5/8-3-14a)

Sec. 8-3-14a. Municipal hotel use tax.

(a) The corporate authorities of any municipality may impose a tax upon the privilege of renting or leasing rooms in a hotel within the municipality at a rate not to exceed 5% of the rental or lease payment. The corporate authorities may provide for the administration and enforcement of the tax and for the collection thereof from the persons subject to the tax, as the corporate authorities determine to be necessary or practical for the effective administration of the tax.

(b) Each hotel in the municipality shall collect the tax from the person making the rental or lease payment at the time that the payment is tendered to the hotel. The hotel shall, as trustee, remit the tax to the municipality.

(c) The tax authorized under this Section does not apply to any rental or lease payment by a permanent resident of that hotel or to any payment made to any hotel that is subject to the tax imposed under subsection (c) of Section 13 of the Metropolitan Pier and Exposition Authority Act. A municipality may

[April 17, 2018]

not impose a tax under this Section if it imposes a tax under Section 8-3-14. Nothing in this Section may be construed to authorize a municipality to impose a tax upon the privilege of engaging in any business that under the Constitution of the United States may not be made the subject of taxation by this State.

(d) Except as otherwise provided in this Division, the moneys collected by a municipality under this Section may be expended solely to promote tourism and conventions within that municipality or otherwise to attract nonresident overnight visitors to the municipality. No moneys received under this Section may be used to advertise for or otherwise promote new competition in the hotel business.

(e) As used in this Section, "hotel" has the meaning set forth in Section 2 of the Hotel Operators' Occupation Tax Act.

(Source: P.A. 96-238, eff. 8-11-09.)

(65 ILCS 5/8-3-14b new)

Sec. 8-3-14b. Municipal hotel operators' tax in DuPage County. For any municipality located within DuPage County that belongs to a not-for-profit organization headquartered in DuPage County that is recognized by the Department of Commerce and Economic Opportunity as a certified local tourism and convention bureau entitled to receive State tourism grant funds, not less than 75% of the amounts collected pursuant to Section 8-3-14 shall be expended by the municipality to promote tourism and conventions within that municipality or otherwise to attract nonresident overnight visitors to the municipality, and the remainder of the amounts collected by a municipality within DuPage County pursuant to Section 8-3-14 may be expended by the municipality for economic development or capital infrastructure.

This Section is repealed on December 31, 2019.

(65 ILCS 5/8-3-14c new)

Sec. 8-3-14c. Municipal hotel use tax in DuPage County. For any municipality located within DuPage County that belongs to a not-for-profit organization headquartered in DuPage County that is recognized by the Department of Commerce and Economic Opportunity as a certified local tourism and convention bureau entitled to receive State tourism grant funds, not less than 75% of the amounts collected pursuant to Section 8-3-14a shall be expended by the municipality to promote tourism and conventions within that municipality or otherwise to attract nonresident overnight visitors to the municipality, and the remainder of the amounts collected by a municipality within DuPage County pursuant to Section 8-3-14a may be expended by the municipality for economic development or capital infrastructure.

This Section is repealed on December 31, 2019."

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

On motion of Senator E. Jones III, **Senate Bill No. 2486** having been printed, was taken up, read by title a second time and ordered to a third reading.

READING BILLS OF THE SENATE A THIRD TIME

On motion of Senator McConchie, **Senate Bill No. 2459** having been transcribed and typed and all amendments adopted thereto having been printed, was taken up and read by title a third time.

And the question being, "Shall this bill pass?" it was decided in the affirmative by the following vote:

YEAS 50; NAY 1.

The following voted in the affirmative:

Althoff	Curran	McCann	Rose
Anderson	Fowler	McConchie	Sandoval
Aquino	Haine	McConnaughay	Schimpf
Bertino-Tarrant	Harmon	McGuire	Sims
Biss	Hastings	Morrison	Stadelman
Bivins	Holmes	Mulroe	Stears
Brady	Hunter	Muñoz	Syverson
Bush	Hutchinson	Murphy	Tracy
Castro	Jones, E.	Nybo	Van Pelt
Clayborne	Koehler	Oberweis	Weaver

[April 17, 2018]

Connelly	Lightford	Raoul	Mr. President
Cullerton, T.	Link	Rezin	
Cunningham	Martinez	Righter	

The following voted in the negative:

Rooney

This bill, having received the vote of a constitutional majority of the members elected, was declared passed, and all amendments not adopted were tabled pursuant to Senate Rule No. 5-4(a).

Ordered that the Secretary inform the House of Representatives thereof and ask their concurrence therein.

On motion of Senator Castro, **Senate Bill No. 2469** having been transcribed and typed and all amendments adopted thereto having been printed, was taken up and read by title a third time.

And the question being, "Shall this bill pass?" it was decided in the affirmative by the following vote:

YEAS 53; NAYS None.

The following voted in the affirmative:

Althoff	Cunningham	Martinez	Rose
Anderson	Fowler	McConchie	Sandoval
Aquino	Haine	McConnaughay	Schimpf
Barickman	Harmon	McGuire	Sims
Bennett	Harris	Morrison	Stadelman
Bertino-Tarrant	Hastings	Mulroe	Steans
Biss	Holmes	Muñoz	Syverson
Bivins	Hunter	Murphy	Tracy
Brady	Hutchinson	Nybo	Van Pelt
Bush	Jones, E.	Oberweis	Weaver
Castro	Koehler	Raoul	Mr. President
Clayborne	Lightford	Rezin	
Connelly	Link	Righter	
Cullerton, T.	Manar	Rooney	

This bill, having received the vote of a constitutional majority of the members elected, was declared passed, and all amendments not adopted were tabled pursuant to Senate Rule No. 5-4(a).

Ordered that the Secretary inform the House of Representatives thereof and ask their concurrence therein.

On motion of Senator McConnaughay, **Senate Bill No. 2511** having been transcribed and typed and all amendments adopted thereto having been printed, was taken up and read by title a third time.

And the question being, "Shall this bill pass?" it was decided in the affirmative by the following vote:

YEAS 54; NAYS None.

The following voted in the affirmative:

Althoff	Cunningham	Manar	Rooney
Anderson	Curran	Martinez	Rose
Aquino	Fowler	McConchie	Sandoval
Barickman	Haine	McConnaughay	Schimpf
Bennett	Harmon	McGuire	Sims
Bertino-Tarrant	Harris	Morrison	Stadelman

[April 17, 2018]

Biss	Hastings	Mulroe	Stears
Bivins	Holmes	Muñoz	Syverson
Brady	Hunter	Murphy	Tracy
Bush	Hutchinson	Nybo	Van Pelt
Castro	Jones, E.	Oberweis	Weaver
Clayborne	Koehler	Raoul	Mr. President
Connelly	Lightford	Rezin	
Cullerton, T.	Link	Righter	

This bill, having received the vote of a constitutional majority of the members elected, was declared passed, and all amendments not adopted were tabled pursuant to Senate Rule No. 5-4(a).

Ordered that the Secretary inform the House of Representatives thereof and ask their concurrence therein.

On motion of Senator Mulroe, **Senate Bill No. 2514** having been transcribed and typed and all amendments adopted thereto having been printed, was taken up and read by title a third time.

And the question being, "Shall this bill pass?" it was decided in the affirmative by the following vote:

YEAS 54; NAYS None.

The following voted in the affirmative:

Althoff	Cunningham	Manar	Rooney
Anderson	Curran	Martinez	Rose
Aquino	Fowler	McConchie	Sandoval
Barickman	Haine	McConnaughay	Schimpf
Bennett	Harmon	McGuire	Sims
Bertino-Tarrant	Harris	Morrison	Stadelman
Biss	Hastings	Mulroe	Stears
Bivins	Holmes	Muñoz	Syverson
Brady	Hunter	Murphy	Tracy
Bush	Hutchinson	Nybo	Van Pelt
Castro	Jones, E.	Oberweis	Weaver
Clayborne	Koehler	Raoul	Mr. President
Connelly	Lightford	Rezin	
Cullerton, T.	Link	Righter	

This bill, having received the vote of a constitutional majority of the members elected, was declared passed, and all amendments not adopted were tabled pursuant to Senate Rule No. 5-4(a).

Ordered that the Secretary inform the House of Representatives thereof and ask their concurrence therein.

On motion of Senator Rose, **Senate Bill No. 2520** having been transcribed and typed and all amendments adopted thereto having been printed, was taken up and read by title a third time.

And the question being, "Shall this bill pass?" it was decided in the affirmative by the following vote:

YEAS 53; NAYS None.

The following voted in the affirmative:

Althoff	Cunningham	Manar	Rooney
Anderson	Curran	Martinez	Rose
Aquino	Fowler	McConchie	Sandoval
Barickman	Haine	McConnaughay	Schimpf
Bennett	Harmon	McGuire	Sims

[April 17, 2018]

Bertino-Tarrant	Harris	Morrison	Stadelman
Biss	Hastings	Mulroe	Steans
Bivins	Holmes	Muñoz	Syverson
Brady	Hunter	Murphy	Van Pelt
Bush	Hutchinson	Nybo	Weaver
Castro	Jones, E.	Oberweis	Mr. President
Clayborne	Koehler	Raoul	
Connelly	Lightford	Rezin	
Cullerton, T.	Link	Righter	

This bill, having received the vote of a constitutional majority of the members elected, was declared passed, and all amendments not adopted were tabled pursuant to Senate Rule No. 5-4(a).

Ordered that the Secretary inform the House of Representatives thereof and ask their concurrence therein.

On motion of Senator Rose, **Senate Bill No. 2524** having been transcribed and typed and all amendments adopted thereto having been printed, was taken up and read by title a third time.

And the question being, "Shall this bill pass?" it was decided in the affirmative by the following vote:

YEAS 53; NAYS None.

The following voted in the affirmative:

Althoff	Cunningham	Manar	Rose
Anderson	Curran	Martinez	Sandoval
Aquino	Fowler	McConchie	Schimpf
Barickman	Haine	McConnaughay	Sims
Bennett	Harmon	McGuire	Stadelman
Bertino-Tarrant	Harris	Morrison	Steans
Biss	Hastings	Mulroe	Syverson
Bivins	Holmes	Muñoz	Tracy
Brady	Hunter	Murphy	Van Pelt
Bush	Hutchinson	Nybo	Weaver
Castro	Jones, E.	Oberweis	Mr. President
Clayborne	Koehler	Raoul	
Connelly	Lightford	Rezin	
Cullerton, T.	Link	Righter	

This bill, having received the vote of a constitutional majority of the members elected, was declared passed, and all amendments not adopted were tabled pursuant to Senate Rule No. 5-4(a).

Ordered that the Secretary inform the House of Representatives thereof and ask their concurrence therein.

On motion of Senator Murphy, **Senate Bill No. 2528** having been transcribed and typed and all amendments adopted thereto having been printed, was taken up and read by title a third time.

And the question being, "Shall this bill pass?" it was decided in the affirmative by the following vote:

YEAS 54; NAYS None.

The following voted in the affirmative:

Althoff	Cunningham	Manar	Rooney
Anderson	Curran	Martinez	Rose
Aquino	Fowler	McConchie	Sandoval
Barickman	Haine	McConnaughay	Schimpf

[April 17, 2018]

Bennett	Harmon	McGuire	Sims
Bertino-Tarrant	Harris	Morrison	Stadelman
Biss	Hastings	Mulroe	Steans
Bivins	Holmes	Muñoz	Syverson
Brady	Hunter	Murphy	Tracy
Bush	Hutchinson	Nybo	Van Pelt
Castro	Jones, E.	Oberweis	Weaver
Clayborne	Koehler	Raoul	Mr. President
Connelly	Lightford	Rezin	
Cullerton, T.	Link	Righter	

This bill, having received the vote of a constitutional majority of the members elected, was declared passed, and all amendments not adopted were tabled pursuant to Senate Rule No. 5-4(a).

Ordered that the Secretary inform the House of Representatives thereof and ask their concurrence therein.

SENATE BILL RECALLED

On motion of Senator T. Cullerton, **Senate Bill No. 2543** was recalled from the order of third reading to the order of second reading.

Senator T. Cullerton offered the following amendment and moved its adoption:

AMENDMENT NO. 1 TO SENATE BILL 2543

AMENDMENT NO. 1. Amend Senate Bill 2543 on page 1, by replacing lines 12 and 13 with "consolidate the district into a municipality whose boundaries are coterminous or substantially coterminous with the district, consolidate the district into the township in which the district sits, or consolidate".

The motion prevailed.

And the amendment was adopted and ordered printed.

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

READING BILLS OF THE SENATE A THIRD TIME

On motion of Senator Murphy, **Senate Bill No. 2557** having been transcribed and typed and all amendments adopted thereto having been printed, was taken up and read by title a third time.

And the question being, "Shall this bill pass?" it was decided in the affirmative by the following vote:

YEAS 52; NAYS None; Present 1.

The following voted in the affirmative:

Althoff	Curran	Martinez	Rose
Anderson	Fowler	McConchie	Sandoval
Aquino	Haine	McConnaughay	Schimpf
Barickman	Harmon	McGuire	Sims
Bertino-Tarrant	Harris	Morrison	Stadelman
Biss	Hastings	Mulroe	Steans
Bivins	Holmes	Muñoz	Syverson
Brady	Hunter	Murphy	Tracy
Bush	Hutchinson	Nybo	Weaver
Castro	Jones, E.	Oberweis	Mr. President
Clayborne	Koehler	Raoul	
Connelly	Lightford	Rezin	
Cullerton, T.	Link	Righter	

[April 17, 2018]

Cunningham Manar Rooney

The following voted present:

Van Pelt

This bill, having received the vote of a constitutional majority of the members elected, was declared passed, and all amendments not adopted were tabled pursuant to Senate Rule No. 5-4(a).

Ordered that the Secretary inform the House of Representatives thereof and ask their concurrence therein.

On motion of Senator Castro, **Senate Bill No. 2577** having been transcribed and typed and all amendments adopted thereto having been printed, was taken up and read by title a third time.

And the question being, "Shall this bill pass?" it was decided in the affirmative by the following vote:

YEAS 39; NAYS 10; Present 1.

The following voted in the affirmative:

Althoff	Haine	Link	Oberweis
Aquino	Harmon	Manar	Raoul
Bennett	Harris	Martinez	Sandoval
Bertino-Tarrant	Hastings	McConchie	Sims
Biss	Holmes	McConnaughay	Stadelman
Bush	Hunter	McGuire	Steans
Castro	Hutchinson	Morrison	Syverson
Clayborne	Jones, E.	Mulroe	Van Pelt
Cullerton, T.	Koehler	Muñoz	Mr. President
Cunningham	Lightford	Murphy	

The following voted in the negative:

Barickman	Connelly	Rose	Weaver
Bivins	Nybo	Schimpf	
Brady	Righter	Tracy	

The following voted present:

Rooney

This bill, having received the vote of a constitutional majority of the members elected, was declared passed, and all amendments not adopted were tabled pursuant to Senate Rule No. 5-4(a).

Ordered that the Secretary inform the House of Representatives thereof and ask their concurrence therein.

SENATE BILLS RECALLED

On motion of Senator Mulroe, **Senate Bill No. 2578** was recalled from the order of third reading to the order of second reading.

Senator Mulroe offered the following amendment and moved its adoption:

AMENDMENT NO. 1 TO SENATE BILL 2578

AMENDMENT NO. 1. Amend Senate Bill 2578 by replacing line 5 on page 3 with "Medicare-certified, State-licensed nursing home or to a".

The motion prevailed.

[April 17, 2018]

And the amendment was adopted and ordered printed.

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

On motion of Senator Mulroe, **Senate Bill No. 2579** was recalled from the order of third reading to the order of second reading.

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

Senator Mulroe offered the following amendment and moved its adoption:

AMENDMENT NO. 2 TO SENATE BILL 2579

AMENDMENT NO. 2. Amend Senate Bill 2579 by replacing everything after the enacting clause with the following:

"Section 5. The Juvenile Court Act of 1987 is amended by changing Section 1-18 as follows:
(705 ILCS 405/1-18)

Sec. 1-18. ~~Illinois Criminal Justice Information Authority Administrative Office of the Illinois Courts;~~ report. The ~~Illinois Criminal Justice Information Authority Administrative Office of the Illinois Courts~~ shall study the fiscal impact of the implementation of Public Act 100-285 upon probation departments. ~~The Illinois Criminal Justice Information Authority may 90-590 (the Juvenile Justice Reform Provisions of 1998) which is under its authority and~~ submit a report of that study to the General Assembly within 12 months after the enactment of this amendatory that Act of the 100th General Assembly. The ~~Illinois Criminal Justice Information Authority Administrative Office may,~~ in addition to other requests, make a request for funding of the implementation of that Act.
(Source: Incorporates P.A. 90-590, eff. 1-1-99; 91-357, eff. 7-29-99.)".

The motion prevailed.

And the amendment was adopted and ordered printed.

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

READING BILLS OF THE SENATE A THIRD TIME

On motion of Senator Syverson, **Senate Bill No. 2587** having been transcribed and typed and all amendments adopted thereto having been printed, was taken up and read by title a third time.

And the question being, "Shall this bill pass?" it was decided in the affirmative by the following vote:

YEAS 52; NAYS None.

The following voted in the affirmative:

Althoff	Curran	McConchie	Sandoval
Anderson	Fowler	McConnaughay	Schimpf
Aquino	Haine	McGuire	Sims
Barickman	Harmon	Morrison	Stadelman
Bertino-Tarrant	Harris	Mulroe	Steans
Biss	Hastings	Muñoz	Syverson
Bivins	Holmes	Murphy	Tracy
Brady	Hunter	Nybo	Van Pelt
Bush	Hutchinson	Oberweis	Weaver
Castro	Jones, E.	Raoul	Mr. President
Clayborne	Koehler	Rezin	
Connelly	Lightford	Righter	
Cullerton, T.	Link	Rooney	
Cunningham	Manar	Rose	

This bill, having received the vote of a constitutional majority of the members elected, was declared passed, and all amendments not adopted were tabled pursuant to Senate Rule No. 5-4(a).

[April 17, 2018]

Ordered that the Secretary inform the House of Representatives thereof and ask their concurrence therein.

On motion of Senator Althoff, **Senate Bill No. 2604** having been transcribed and typed and all amendments adopted thereto having been printed, was taken up and read by title a third time.

And the question being, "Shall this bill pass?" it was decided in the affirmative by the following vote:

YEAS 53; NAYS None.

The following voted in the affirmative:

Althoff	Cunningham	Manar	Rose
Anderson	Curran	Martinez	Sandoval
Aquino	Fowler	McConchie	Schimpf
Barickman	Haine	McConnaughay	Sims
Bennett	Harmon	McGuire	Stadelman
Bertino-Tarrant	Harris	Morrison	Steans
Biss	Hastings	Mulroe	Syverson
Bivins	Holmes	Muñoz	Tracy
Brady	Hunter	Murphy	Van Pelt
Bush	Hutchinson	Oberweis	Weaver
Castro	Jones, E.	Raoul	Mr. President
Clayborne	Koehler	Rezin	
Connelly	Lightford	Righter	
Cullerton, T.	Link	Rooney	

This bill, having received the vote of a constitutional majority of the members elected, was declared passed, and all amendments not adopted were tabled pursuant to Senate Rule No. 5-4(a).

Ordered that the Secretary inform the House of Representatives thereof and ask their concurrence therein.

On motion of Senator Curran, **Senate Bill No. 2606** having been transcribed and typed and all amendments adopted thereto having been printed, was taken up and read by title a third time.

And the question being, "Shall this bill pass?" it was decided in the affirmative by the following vote:

YEAS 53; NAYS None.

The following voted in the affirmative:

Althoff	Cunningham	Manar	Righter
Anderson	Curran	Martinez	Rose
Aquino	Fowler	McCann	Sandoval
Barickman	Haine	McConchie	Schimpf
Bennett	Harmon	McConnaughay	Sims
Bertino-Tarrant	Harris	McGuire	Stadelman
Biss	Hastings	Morrison	Steans
Bivins	Holmes	Mulroe	Tracy
Brady	Hunter	Muñoz	Van Pelt
Bush	Hutchinson	Murphy	Weaver
Castro	Jones, E.	Nybo	Mr. President
Clayborne	Koehler	Oberweis	
Connelly	Lightford	Raoul	
Cullerton, T.	Link	Rezin	

This bill, having received the vote of a constitutional majority of the members elected, was declared passed, and all amendments not adopted were tabled pursuant to Senate Rule No. 5-4(a).

Ordered that the Secretary inform the House of Representatives thereof and ask their concurrence therein.

On motion of Senator Mulroe, **Senate Bill No. 2608** having been transcribed and typed and all amendments adopted thereto having been printed, was taken up and read by title a third time.

And the question being, “Shall this bill pass?” it was decided in the affirmative by the following vote:

YEAS 49; NAY 1.

The following voted in the affirmative:

Althoff	Fowler	Martinez	Rose
Anderson	Haine	McCann	Sandoval
Aquino	Harmon	McConnaughay	Schimpf
Bennett	Harris	McGuire	Sims
Bertino-Tarrant	Hastings	Morrison	Stadelman
Biss	Holmes	Mulroe	Stears
Bivins	Hunter	Muñoz	Syverson
Brady	Hutchinson	Murphy	Van Pelt
Castro	Jones, E.	Nybo	Weaver
Clayborne	Koehler	Raoul	Mr. President
Connelly	Lightford	Rezin	
Cunningham	Link	Righter	
Curran	Manar	Rooney	

The following voted in the negative:

McConchie

This bill, having received the vote of a constitutional majority of the members elected, was declared passed, and all amendments not adopted were tabled pursuant to Senate Rule No. 5-4(a).

Ordered that the Secretary inform the House of Representatives thereof and ask their concurrence therein.

Senator Bush asked and obtained unanimous consent for the Journal to reflect her intention to have voted in the affirmative on **Senate Bill No. 2608**.

On motion of Senator Aquino, **Senate Bill No. 2609** having been transcribed and typed and all amendments adopted thereto having been printed, was taken up and read by title a third time.

And the question being, “Shall this bill pass?” it was decided in the affirmative by the following vote:

YEAS 54; NAYS None; Present 1.

The following voted in the affirmative:

Althoff	Cunningham	Manar	Rooney
Anderson	Curran	Martinez	Rose
Aquino	Fowler	McCann	Sandoval
Barickman	Haine	McConchie	Schimpf
Bennett	Harmon	McConnaughay	Sims
Bertino-Tarrant	Harris	McGuire	Stadelman
Biss	Hastings	Morrison	Stears
Bivins	Holmes	Mulroe	Syverson
Brady	Hunter	Muñoz	Tracy

[April 17, 2018]

Bush	Hutchinson	Murphy	Van Pelt
Castro	Jones, E.	Nybo	Weaver
Clayborne	Koehler	Raoul	Mr. President
Connelly	Lightford	Rezin	
Cullerton, T.	Link	Righter	

The following voted present:

Oberweis

This bill, having received the vote of a constitutional majority of the members elected, was declared passed, and all amendments not adopted were tabled pursuant to Senate Rule No. 5-4(a).

Ordered that the Secretary inform the House of Representatives thereof and ask their concurrence therein.

On motion of Senator Althoff, **Senate Bill No. 2615** having been transcribed and typed and all amendments adopted thereto having been printed, was taken up and read by title a third time.

And the question being, "Shall this bill pass?" it was decided in the affirmative by the following vote:

YEAS 52; NAYS None.

The following voted in the affirmative:

Althoff	Curran	Martinez	Sandoval
Anderson	Fowler	McCann	Schimpf
Aquino	Haine	McConchie	Sims
Barickman	Harmon	McConnaughay	Stadelman
Bennett	Harris	Morrison	Stears
Bertino-Tarrant	Hastings	Mulroe	Syverson
Biss	Holmes	Muñoz	Tracy
Bivins	Hunter	Murphy	Van Pelt
Brady	Hutchinson	Oberweis	Weaver
Bush	Jones, E.	Raoul	Mr. President
Clayborne	Koehler	Rezin	
Connelly	Lightford	Righter	
Cullerton, T.	Link	Rooney	
Cunningham	Manar	Rose	

This bill, having received the vote of a constitutional majority of the members elected, was declared passed, and all amendments not adopted were tabled pursuant to Senate Rule No. 5-4(a).

Ordered that the Secretary inform the House of Representatives thereof and ask their concurrence therein.

On motion of Senator Althoff, **Senate Bill No. 2618** having been transcribed and typed and all amendments adopted thereto having been printed, was taken up and read by title a third time.

And the question being, "Shall this bill pass?" it was decided in the affirmative by the following vote:

YEAS 55; NAYS None.

The following voted in the affirmative:

Althoff	Cunningham	Manar	Righter
Anderson	Curran	Martinez	Rooney
Aquino	Fowler	McCann	Rose
Barickman	Haine	McConchie	Sandoval

[April 17, 2018]

Bennett	Harmon	McConnaughay	Schimpf
Bertino-Tarrant	Harris	McGuire	Sims
Biss	Hastings	Morrison	Stadelman
Bivins	Holmes	Mulroe	Steans
Brady	Hunter	Muñoz	Syverson
Bush	Hutchinson	Murphy	Tracy
Castro	Jones, E.	Nybo	Van Pelt
Clayborne	Koehler	Oberweis	Weaver
Connelly	Lightford	Raoul	Mr. President
Cullerton, T.	Link	Rezin	

This bill, having received the vote of a constitutional majority of the members elected, was declared passed, and all amendments not adopted were tabled pursuant to Senate Rule No. 5-4(a).

Ordered that the Secretary inform the House of Representatives thereof and ask their concurrence therein.

On motion of Senator Castro, **Senate Bill No. 2620** having been transcribed and typed and all amendments adopted thereto having been printed, was taken up and read by title a third time.

And the question being, “Shall this bill pass?” it was decided in the affirmative by the following vote:

YEAS 55; NAYS None.

The following voted in the affirmative:

Althoff	Cunningham	Manar	Righter
Anderson	Curran	Martinez	Rooney
Aquino	Fowler	McCann	Rose
Barickman	Haine	McConchie	Sandoval
Bennett	Harmon	McConnaughay	Schimpf
Bertino-Tarrant	Harris	McGuire	Sims
Biss	Hastings	Morrison	Stadelman
Bivins	Holmes	Mulroe	Steans
Brady	Hunter	Muñoz	Syverson
Bush	Hutchinson	Murphy	Tracy
Castro	Jones, E.	Nybo	Van Pelt
Clayborne	Koehler	Oberweis	Weaver
Connelly	Lightford	Raoul	Mr. President
Cullerton, T.	Link	Rezin	

This bill, having received the vote of a constitutional majority of the members elected, was declared passed, and all amendments not adopted were tabled pursuant to Senate Rule No. 5-4(a).

Ordered that the Secretary inform the House of Representatives thereof and ask their concurrence therein.

On motion of Senator T. Cullerton, **Senate Bill No. 2629** having been transcribed and typed and all amendments adopted thereto having been printed, was taken up and read by title a third time.

And the question being, “Shall this bill pass?” it was decided in the affirmative by the following vote:

YEAS 55; NAYS None.

The following voted in the affirmative:

Althoff	Cunningham	Manar	Righter
Anderson	Curran	Martinez	Rooney
Aquino	Fowler	McCann	Rose

[April 17, 2018]

Barickman	Haine	McConchie	Sandoval
Bennett	Harmon	McConnaughay	Schimpf
Bertino-Tarrant	Harris	McGuire	Sims
Biss	Hastings	Morrison	Stadelman
Bivins	Holmes	Mulroe	Steans
Brady	Hunter	Muñoz	Syverson
Bush	Hutchinson	Murphy	Tracy
Castro	Jones, E.	Nybo	Van Pelt
Clayborne	Koehler	Oberweis	Weaver
Connelly	Lightford	Raoul	Mr. President
Cullerton, T.	Link	Rezin	

This bill, having received the vote of a constitutional majority of the members elected, was declared passed, and all amendments not adopted were tabled pursuant to Senate Rule No. 5-4(a).

Ordered that the Secretary inform the House of Representatives thereof and ask their concurrence therein.

On motion of Senator Althoff, **Senate Bill No. 2637** having been transcribed and typed and all amendments adopted thereto having been printed, was taken up and read by title a third time.

And the question being, "Shall this bill pass?" it was decided in the affirmative by the following vote:

YEAS 54; NAYS None.

The following voted in the affirmative:

Althoff	Curran	Martinez	Rooney
Anderson	Fowler	McCann	Rose
Aquino	Haine	McConchie	Sandoval
Barickman	Harmon	McConnaughay	Schimpf
Bennett	Harris	McGuire	Sims
Bertino-Tarrant	Hastings	Morrison	Stadelman
Biss	Holmes	Mulroe	Steans
Bivins	Hunter	Muñoz	Syverson
Brady	Hutchinson	Murphy	Tracy
Bush	Jones, E.	Nybo	Van Pelt
Clayborne	Koehler	Oberweis	Weaver
Connelly	Lightford	Raoul	Mr. President
Cullerton, T.	Link	Rezin	
Cunningham	Manar	Righter	

This bill, having received the vote of a constitutional majority of the members elected, was declared passed, and all amendments not adopted were tabled pursuant to Senate Rule No. 5-4(a).

Ordered that the Secretary inform the House of Representatives thereof and ask their concurrence therein.

SENATE BILL RECALLED

On motion of Senator Muñoz, **Senate Bill No. 2640** was recalled from the order of third reading to the order of second reading.

Floor Amendment No. 1 was held in the Committee on State Government.

Senator Muñoz offered the following amendment and moved its adoption:

AMENDMENT NO. 2 TO SENATE BILL 2640

AMENDMENT NO. 2. Amend Senate Bill 2640, AS AMENDED, with reference to page and line numbers of Senate Amendment No. 1, on page 1, immediately below line 3, by inserting the following:

[April 17, 2018]

""Section 3. The Department of Natural Resources (Conservation) Law of the Civil Administrative Code of Illinois is amended by adding Section 805-538 as follows:

(20 ILCS 805/805-538 new)

Sec. 805-538. Retiring officer: purchase of service firearm and police badge. The Director of Natural Resources shall establish a program to allow a Conservation Police Officer who is honorably retiring in good standing to purchase either one or both of the following: (1) any Department of Natural Resources police badge previously issued to that officer; or (2) if the officer has a currently valid Firearm Owner's Identification Card, the service firearm issued or previously issued to the officer by the Department of Natural Resources. The cost of the firearm shall be the replacement value of the firearm and not the firearm's fair market value."; and

on page 1, line 4, by replacing ""Section" with "Section"; and

on page 6, line 11, after the period, by inserting "The Director of Natural Resources may dispose of a service firearm or police badge issued previously to a retiring Conservation Police Officer as provided in Section 805-538 of the Department of Natural Resources (Conservation) Law of the Civil Administrative Code of Illinois.".

The motion prevailed.

And the amendment was adopted and ordered printed.

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

READING BILLS OF THE SENATE A THIRD TIME

On motion of Senator Muñoz, **Senate Bill No. 2641** having been transcribed and typed and all amendments adopted thereto having been printed, was taken up and read by title a third time.

And the question being, "Shall this bill pass?" it was decided in the affirmative by the following vote:

YEAS 52; NAYS None; Present 1.

The following voted in the affirmative:

Althoff	Cunningham	Manar	Rose
Anderson	Curran	Martinez	Sandoval
Aquino	Fowler	McCann	Schimpf
Barickman	Haine	McConchie	Sims
Bennett	Harmon	McConnaughay	Stadelman
Bertino-Tarrant	Harris	McGuire	Steans
Biss	Hastings	Morrison	Syverson
Bivins	Holmes	Mulroe	Tracy
Brady	Hunter	Muñoz	Van Pelt
Bush	Hutchinson	Murphy	Weaver
Castro	Jones, E.	Oberweis	
Clayborne	Koehler	Raoul	
Connelly	Lightford	Rezin	
Cullerton, T.	Link	Rooney	

The following voted present:

Mr. President

This bill, having received the vote of a constitutional majority of the members elected, was declared passed, and all amendments not adopted were tabled pursuant to Senate Rule No. 5-4(a).

Ordered that the Secretary inform the House of Representatives thereof and ask their concurrence therein.

[April 17, 2018]

On motion of Senator Tracy, **Senate Bill No. 2644** having been transcribed and typed and all amendments adopted thereto having been printed, was taken up and read by title a third time.

And the question being, "Shall this bill pass?" it was decided in the affirmative by the following vote:

YEAS 53; NAYS None.

The following voted in the affirmative:

Althoff	Cunningham	Manar	Rose
Anderson	Curran	Martinez	Sandoval
Aquino	Fowler	McCann	Schimpf
Barickman	Haine	McConchie	Sims
Bennett	Harmon	McConnaughay	Stadelman
Bertino-Tarrant	Harris	McGuire	Stears
Biss	Hastings	Morrison	Syverson
Bivins	Holmes	Mulroe	Tracy
Brady	Hunter	Muñoz	Van Pelt
Bush	Hutchinson	Murphy	Weaver
Castro	Jones, E.	Oberweis	Mr. President
Clayborne	Koehler	Raoul	
Connelly	Lightford	Rezin	
Cullerton, T.	Link	Rooney	

This bill, having received the vote of a constitutional majority of the members elected, was declared passed, and all amendments not adopted were tabled pursuant to Senate Rule No. 5-4(a).

Ordered that the Secretary inform the House of Representatives thereof and ask their concurrence therein.

On motion of Senator Hunter, **Senate Bill No. 2655** having been transcribed and typed and all amendments adopted thereto having been printed, was taken up and read by title a third time.

And the question being, "Shall this bill pass?" it was decided in the affirmative by the following vote:

YEAS 53; NAYS None.

The following voted in the affirmative:

Althoff	Cunningham	Manar	Rooney
Anderson	Curran	Martinez	Rose
Aquino	Fowler	McCann	Sandoval
Barickman	Haine	McConchie	Schimpf
Bennett	Harmon	McConnaughay	Sims
Bertino-Tarrant	Harris	McGuire	Stadelman
Biss	Hastings	Morrison	Stears
Bivins	Holmes	Mulroe	Tracy
Brady	Hunter	Muñoz	Van Pelt
Bush	Hutchinson	Murphy	Weaver
Castro	Jones, E.	Nybo	Mr. President
Clayborne	Koehler	Oberweis	
Connelly	Lightford	Raoul	
Cullerton, T.	Link	Rezin	

This bill, having received the vote of a constitutional majority of the members elected, was declared passed, and all amendments not adopted were tabled pursuant to Senate Rule No. 5-4(a).

Ordered that the Secretary inform the House of Representatives thereof and ask their concurrence therein.

[April 17, 2018]

On motion of Senator Schimpf, **Senate Bill No. 2658** having been transcribed and typed and all amendments adopted thereto having been printed, was taken up and read by title a third time.

And the question being, "Shall this bill pass?" it was decided in the affirmative by the following vote:

YEAS 54; NAYS None.

The following voted in the affirmative:

Althoff	Cunningham	Manar	Rooney
Anderson	Curran	Martinez	Rose
Aquino	Fowler	McCann	Sandoval
Barickman	Haine	McConchie	Schimpf
Bennett	Harmon	McConnaughay	Sims
Bertino-Tarrant	Harris	McGuire	Stadelman
Biss	Hastings	Morrison	Steans
Bivins	Holmes	Mulroe	Syverson
Brady	Hunter	Muñoz	Tracy
Bush	Hutchinson	Murphy	Van Pelt
Castro	Jones, E.	Nybo	Weaver
Clayborne	Koehler	Oberweis	Mr. President
Connelly	Lightford	Raoul	
Cullerton, T.	Link	Rezin	

This bill, having received the vote of a constitutional majority of the members elected, was declared passed, and all amendments not adopted were tabled pursuant to Senate Rule No. 5-4(a).

Ordered that the Secretary inform the House of Representatives thereof and ask their concurrence therein.

On motion of Senator Bennett, **Senate Bill No. 2660** having been transcribed and typed and all amendments adopted thereto having been printed, was taken up and read by title a third time.

And the question being, "Shall this bill pass?" it was decided in the affirmative by the following vote:

YEAS 54; NAYS None.

The following voted in the affirmative:

Althoff	Cunningham	Manar	Rooney
Anderson	Curran	Martinez	Rose
Aquino	Fowler	McCann	Sandoval
Barickman	Haine	McConchie	Schimpf
Bennett	Harmon	McConnaughay	Sims
Bertino-Tarrant	Harris	McGuire	Stadelman
Biss	Hastings	Morrison	Steans
Bivins	Holmes	Mulroe	Syverson
Brady	Hunter	Muñoz	Tracy
Bush	Hutchinson	Murphy	Van Pelt
Castro	Jones, E.	Nybo	Weaver
Clayborne	Koehler	Raoul	Mr. President
Connelly	Lightford	Rezin	
Cullerton, T.	Link	Righter	

This bill, having received the vote of a constitutional majority of the members elected, was declared passed, and all amendments not adopted were tabled pursuant to Senate Rule No. 5-4(a).

[April 17, 2018]

Ordered that the Secretary inform the House of Representatives thereof and ask their concurrence therein.

On motion of Senator Weaver, **Senate Bill No. 2663** having been transcribed and typed and all amendments adopted thereto having been printed, was taken up and read by title a third time.

And the question being, "Shall this bill pass?" it was decided in the affirmative by the following vote:

YEAS 54; NAYS None.

The following voted in the affirmative:

Althoff	Cunningham	Martinez	Rooney
Anderson	Fowler	McCann	Rose
Aquino	Haine	McConchie	Sandoval
Barickman	Harmon	McConnaughay	Schimpf
Bennett	Harris	McGuire	Sims
Bertino-Tarrant	Hastings	Morrison	Stadelman
Biss	Holmes	Mulroe	Steans
Bivins	Hunter	Muñoz	Syverson
Brady	Hutchinson	Murphy	Tracy
Bush	Jones, E.	Nybo	Van Pelt
Castro	Koehler	Oberweis	Weaver
Clayborne	Lightford	Raoul	Mr. President
Connelly	Link	Rezin	
Cullerton, T.	Manar	Righter	

This bill, having received the vote of a constitutional majority of the members elected, was declared passed, and all amendments not adopted were tabled pursuant to Senate Rule No. 5-4(a).

Ordered that the Secretary inform the House of Representatives thereof and ask their concurrence therein.

On motion of Senator Morrison, **Senate Bill No. 2826** having been transcribed and typed and all amendments adopted thereto having been printed, was taken up and read by title a third time.

And the question being, "Shall this bill pass?" it was decided in the affirmative by the following vote:

YEAS 52; NAYS None.

The following voted in the affirmative:

Althoff	Cunningham	McCann	Sandoval
Anderson	Fowler	McConchie	Schimpf
Aquino	Haine	McConnaughay	Sims
Barickman	Harmon	McGuire	Stadelman
Bennett	Harris	Morrison	Steans
Bertino-Tarrant	Hastings	Mulroe	Syverson
Biss	Holmes	Muñoz	Tracy
Bivins	Hunter	Murphy	Van Pelt
Brady	Hutchinson	Nybo	Weaver
Bush	Jones, E.	Oberweis	Mr. President
Castro	Koehler	Raoul	
Clayborne	Lightford	Rezin	
Connelly	Link	Rooney	
Cullerton, T.	Martinez	Rose	

This bill, having received the vote of a constitutional majority of the members elected, was declared passed, and all amendments not adopted were tabled pursuant to Senate Rule No. 5-4(a).

Ordered that the Secretary inform the House of Representatives thereof and ask their concurrence therein.

On motion of Senator Althoff, **Senate Bill No. 2852** having been transcribed and typed and all amendments adopted thereto having been printed, was taken up and read by title a third time.

And the question being, "Shall this bill pass?" it was decided in the affirmative by the following vote:

YEAS 53; NAYS None.

The following voted in the affirmative:

Althoff	Cunningham	Martinez	Rooney
Anderson	Curran	McCann	Rose
Aquino	Fowler	McConchie	Sandoval
Barickman	Harmon	McConnaughay	Schimpf
Bennett	Harris	McGuire	Stadelman
Bertino-Tarrant	Hastings	Morrison	Stears
Biss	Holmes	Mulroe	Syverson
Bivins	Hunter	Muñoz	Tracy
Brady	Hutchinson	Murphy	Van Pelt
Bush	Jones, E.	Nybo	Weaver
Castro	Koehler	Oberweis	Mr. President
Clayborne	Lightford	Raoul	
Connelly	Link	Rezin	
Cullerton, T.	Manar	Righter	

This bill, having received the vote of a constitutional majority of the members elected, was declared passed, and all amendments not adopted were tabled pursuant to Senate Rule No. 5-4(a).

Ordered that the Secretary inform the House of Representatives thereof and ask their concurrence therein.

Senator Sims asked and obtained unanimous consent for the Journal to reflect his intention to have voted in the affirmative on **Senate Bill No. 2852**.

On motion of Senator Althoff, **Senate Bill No. 2853** having been transcribed and typed and all amendments adopted thereto having been printed, was taken up and read by title a third time.

And the question being, "Shall this bill pass?" it was decided in the affirmative by the following vote:

YEAS 55; NAYS None.

The following voted in the affirmative:

Althoff	Cunningham	Manar	Righter
Anderson	Curran	Martinez	Rooney
Aquino	Fowler	McCann	Rose
Barickman	Haine	McConchie	Sandoval
Bennett	Harmon	McConnaughay	Schimpf
Bertino-Tarrant	Harris	McGuire	Sims
Biss	Hastings	Morrison	Stadelman
Bivins	Holmes	Mulroe	Stears
Brady	Hunter	Muñoz	Syverson
Bush	Hutchinson	Murphy	Tracy
Castro	Jones, E.	Nybo	Van Pelt
Clayborne	Koehler	Oberweis	Weaver

[April 17, 2018]

Connelly	Lightford	Raoul	Mr. President
Cullerton, T.	Link	Rezin	

This bill, having received the vote of a constitutional majority of the members elected, was declared passed, and all amendments not adopted were tabled pursuant to Senate Rule No. 5-4(a).

Ordered that the Secretary inform the House of Representatives thereof and ask their concurrence therein.

On motion of Senator Raoul, **Senate Bill No. 2863** having been transcribed and typed and all amendments adopted thereto having been printed, was taken up and read by title a third time.

And the question being, "Shall this bill pass?" it was decided in the affirmative by the following vote:

YEAS 34; NAYS 21.

The following voted in the affirmative:

Aquino	Harmon	Link	Raoul
Bennett	Harris	Manar	Sandoval
Bertino-Tarrant	Hastings	Martinez	Sims
Biss	Holmes	McCann	Stadelman
Bush	Hunter	McGuire	Steans
Castro	Hutchinson	Morrison	Van Pelt
Clayborne	Jones, E.	Mulroe	Mr. President
Cullerton, T.	Koehler	Muñoz	
Cunningham	Lightford	Murphy	

The following voted in the negative:

Althoff	Curran	Oberweis	Syverson
Anderson	Fowler	Rezin	Tracy
Barickman	Haine	Righter	Weaver
Bivins	McConchie	Rooney	
Brady	McConnaughay	Rose	
Connelly	Nybo	Schimpf	

This bill, having received the vote of a constitutional majority of the members elected, was declared passed, and all amendments not adopted were tabled pursuant to Senate Rule No. 5-4(a).

Ordered that the Secretary inform the House of Representatives thereof and ask their concurrence therein.

SENATE BILL RECALLED

On motion of Senator Althoff, **Senate Bill No. 2864** was recalled from the order of third reading to the order of second reading.

Senator Althoff offered the following amendment and moved its adoption:

AMENDMENT NO. 1 TO SENATE BILL 2864

AMENDMENT NO. 1. Amend Senate Bill 2864 on page 2, line 12, by deleting "12,"; and on page 7, line 23, by replacing "designate" with "designee"; and on page 8, by deleting lines 4 through 15.

The motion prevailed.

And the amendment was adopted and ordered printed.

[April 17, 2018]

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

READING BILLS OF THE SENATE A THIRD TIME

On motion of Senator Anderson, **Senate Bill No. 2870** having been transcribed and typed and all amendments adopted thereto having been printed, was taken up and read by title a third time.

And the question being, "Shall this bill pass?" it was decided in the affirmative by the following vote:

YEAS 53; NAYS None.

The following voted in the affirmative:

Althoff	Cunningham	Manar	Rose
Anderson	Curran	Martinez	Sandoval
Aquino	Fowler	McCann	Schimpf
Barickman	Haine	McConchie	Sims
Bennett	Harmon	McGuire	Stadelman
Bertino-Tarrant	Harris	Morrison	Steans
Biss	Hastings	Mulroe	Syverson
Bivins	Holmes	Muñoz	Tracy
Brady	Hunter	Murphy	Van Pelt
Bush	Hutchinson	Oberweis	Weaver
Castro	Jones, E.	Raoul	Mr. President
Clayborne	Koehler	Rezin	
Connelly	Lightford	Righter	
Cullerton, T.	Link	Rooney	

This bill, having received the vote of a constitutional majority of the members elected, was declared passed, and all amendments not adopted were tabled pursuant to Senate Rule No. 5-4(a).

Ordered that the Secretary inform the House of Representatives thereof and ask their concurrence therein.

On motion of Senator Martinez, **Senate Bill No. 2884** having been transcribed and typed and all amendments adopted thereto having been printed, was taken up and read by title a third time.

And the question being, "Shall this bill pass?" it was decided in the affirmative by the following vote:

YEAS 54; NAYS None.

The following voted in the affirmative:

Althoff	Cunningham	Manar	Righter
Anderson	Curran	Martinez	Rooney
Aquino	Fowler	McCann	Rose
Barickman	Haine	McConchie	Sandoval
Bennett	Harmon	McConnaughay	Schimpf
Bertino-Tarrant	Harris	McGuire	Sims
Biss	Hastings	Morrison	Stadelman
Bivins	Holmes	Mulroe	Steans
Brady	Hunter	Muñoz	Syverson
Bush	Hutchinson	Murphy	Tracy
Castro	Jones, E.	Nybo	Van Pelt
Clayborne	Koehler	Oberweis	Mr. President
Connelly	Lightford	Raoul	
Cullerton, T.	Link	Rezin	

[April 17, 2018]

This bill, having received the vote of a constitutional majority of the members elected, was declared passed, and all amendments not adopted were tabled pursuant to Senate Rule No. 5-4(a).

Ordered that the Secretary inform the House of Representatives thereof and ask their concurrence therein.

LEGISLATIVE MEASURES FILED

The following Committee amendment to the Senate Bill listed below has been filed with the Secretary and referred to the Committee on Assignments:

Amendment No. 3 to Senate Bill 2305

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

Amendment No. 1 to Senate Bill 427
 Amendment No. 2 to Senate Bill 489
 Amendment No. 1 to Senate Bill 2342
 Amendment No. 2 to Senate Bill 2342
 Amendment No. 1 to Senate Bill 2343
 Amendment No. 1 to Senate Bill 2362
 Amendment No. 1 to Senate Bill 2364
 Amendment No. 2 to Senate Bill 3033
 Amendment No. 3 to Senate Bill 3048
 Amendment No. 2 to Senate Bill 3136
 Amendment No. 1 to Senate Bill 3214
 Amendment No. 2 to Senate Bill 3387

REPORT FROM COMMITTEE ON ASSIGNMENTS

Senator Clayborne, Chairperson of the Committee on Assignments, during its April 17, 2018 meeting, reported the following Legislative Measures have been assigned to the indicated Standing Committees of the Senate:

Agriculture: **Committee Amendment No. 2 to Senate Bill 2270; Floor Amendment No. 1 to Senate Bill 2772.**

Commerce and Economic Development: **Floor Amendment No. 1 to Senate Bill 43; Floor Amendment No. 1 to Senate Bill 2667.**

Criminal Law: **Floor Amendment No. 2 to Senate Bill 563; Committee Amendment No. 2 to Senate Bill 1997; Floor Amendment No. 2 to Senate Bill 2288; Floor Amendment No. 1 to Senate Bill 2342; Floor Amendment No. 1 to Senate Bill 2787; Floor Amendment No. 1 to Senate Bill 2818; Floor Amendment No. 1 to Senate Bill 2915.**

Education: **Floor Amendment No. 1 to Senate Bill 2344; Floor Amendment No. 1 to Senate Bill 2347; Floor Amendment No. 1 to Senate Bill 2350; Floor Amendment No. 1 to Senate Bill 2352; Floor Amendment No. 1 to Senate Bill 2939; Committee Amendment No. 3 to Senate Bill 3015; Floor Amendment No. 2 to Senate Bill 3226; Floor Amendment No. 2 to Senate Bill 3466.**

Environment and Conservation: **Floor Amendment No. 1 to Senate Bill 2806; Floor Amendment No. 1 to Senate Bill 3156.**

Financial Institutions: **Floor Amendment No. 1 to Senate Bill 3182.**

Government Reform: **Floor Amendment No. 1 to Senate Bill 2854.**

[April 17, 2018]

Higher Education: **Floor Amendment No. 5 to Senate Bill 888.**

Human Services: **Floor Amendment No. 2 to Senate Bill 2808; Floor Amendment No. 3 to Senate Bill 3048.**

Insurance: **Floor Amendment No. 1 to Senate Bill 2807.**

Judiciary: **Committee Amendment No. 3 to Senate Bill 65; Floor Amendment No. 1 to Senate Bill 574; Floor Amendment No. 1 to Senate Bill 2343; Floor Amendment No. 1 to Senate Bill 2432; Floor Amendment No. 3 to Senate Bill 2560; Committee Amendment No. 2 to Senate Bill 2573; Committee Amendment No. 3 to Senate Bill 2657; Floor Amendment No. 1 to Senate Bill 2703; Committee Amendment No. 1 to Senate Bill 2953; Floor Amendment No. 1 to Senate Bill 3052.**

Labor: **SENATE BILL 3509; Floor Amendment No. 1 to Senate Bill 2480; Floor Amendment No. 1 to Senate Bill 2707; Floor Amendment No. 2 to Senate Bill 3096.**

Licensed Activities and Pensions: **Floor Amendment No. 1 to Senate Bill 2721; Floor Amendment No. 1 to Senate Bill 2776; Floor Amendment No. 1 to Senate Bill 2954.**

Local Government: **Floor Amendment No. 2 to Senate Bill 2817.**

Public Health: **Floor Amendment No. 1 to Senate Bill 2777; Floor Amendment No. 2 to Senate Bill 2889.**

Revenue: **Floor Amendment No. 1 to Senate Bill 2668; Floor Amendment No. 1 to Senate Bill 2670; Floor Amendment No. 1 to Senate Bill 3215.**

State Government: **Committee Amendment No. 2 to Senate Bill 2533.**

Transportation: **Floor Amendment No. 1 to Senate Bill 3001; Committee Amendment No. 1 to Senate Bill 3002.**

Senator Clayborne, Chairperson of the Committee on Assignments, during its April 17, 2018 meeting, reported that the Committee recommends that **Senate Bill No. 880** be re-referred from the Committee on Assignments to the Committee on Executive.

Senator Clayborne, Chairperson of the Committee on Assignments, during its April 17, 2018 meeting, to which was referred **Senate Bill No. 353** on August 4, 2017, pursuant to Rule 3-9(b), reported that the Committee recommends that the bill be approved for consideration and returned to the calendar in its former position.

The report of the Committee was concurred in.

And **Senate Bill No. 353** was returned to the order of third reading.

Senator Clayborne, Chairperson of the Committee on Assignments, during its April 17, 2018 meeting, reported that the following Legislative Measure has been approved for consideration:

Floor Amendment No. 2 to Senate Bill 3136

The foregoing floor amendment was placed on the Secretary's Desk.

Pursuant to Senate Rule 3-8 (b-1), the following amendments will remain in the Committee on Assignments: **Floor Amendment No. 1 to Senate Bill 563, Committee Amendment No. 2 to Senate Bill 2560, Floor Amendment No. 1 to Senate Bill 2697, Floor Amendment No. 1 to Senate Bill 2742, Floor Amendment No. 1 to Senate Bill 2767, Committee Amendment No. 1 to Senate Bill 3466**

[April 17, 2018]

LEGISLATIVE MEASURE FILED

The following Floor amendment to the Senate Bill listed below has been filed with the Secretary and referred to the Committee on Assignments:

Amendment No. 1 to Senate Bill 353

REPORT FROM COMMITTEE ON ASSIGNMENTS

Senator Clayborne, Chairperson of the Committee on Assignments, during its April 17, 2018 meeting, reported the following Legislative Measure has been assigned to the indicated Standing Committee of the Senate:

Human Services: **Floor Amendment No. 1 to Senate Bill 353.**

COMMITTEE MEETING ANNOUNCEMENT

The Chair announced the following committee to meet at 3:30 o'clock p.m.:

Public Health in Room 409

COMMITTEE MEETING ANNOUNCEMENTS FOR APRIL 18, 2018

The Chair announced the following committees to meet at 10:00 o'clock a.m.:

Labor in Room 212
Financial Institutions in Room 409

ANNOUNCEMENT

The Chair announced that the deadline for filing Floor amendments is Friday, April 20, 2018, at 4:00 o'clock p.m.

MESSAGE FROM THE PRESIDENT

**OFFICE OF THE SENATE PRESIDENT
STATE OF ILLINOIS**

JOHN J. CULLERTON
SENATE PRESIDENT

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

April 17, 2018

Mr. Tim Anderson
Secretary of the Senate
Room 403 State House
Springfield, IL 62706

Dear Mr. Secretary:

[April 17, 2018]

Pursuant to the provisions of Senate Rule 2-10, I hereby extend the committee deadline to April 27th 2018, for the following Senate bills:

880, 3509

Sincerely,
s/John J. Cullerton
John J. Cullerton
Senate President

cc: Senate Republican Leader Bill Brady

At the hour of 2:41 o'clock p.m., the Chair announced that the Senate stand at recess subject to the call of the Chair.

AFTER RECESS

At the hour of 6:32 o'clock p.m., the Senate resumed consideration of business.
Senator Martinez, presiding.

PRESENTATION OF RESOLUTIONS

SENATE RESOLUTION NO. 1611

Offered by Senator McConnaughay and all Senators:
Mourns the death of James P. Kennedy of Lake in the Hills.

SENATE RESOLUTION NO. 1612

Offered by Senator McConnaughay and all Senators:
Mourns the death of Doris June Hunt of St. Charles.

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

Senator T. Cullerton offered the following Senate Joint Resolution, which was referred to the Committee on Assignments:

SENATE JOINT RESOLUTION NO. 63

WHEREAS, The Jain Society of Metropolitan Chicago (JSMC) was founded in 1970 and has a membership of approximately 1,900 families, the largest membership representation of Jain Centers in North America; and

WHEREAS, In 1992, JSMC built the first significant Jain Temple in North America in Bartlett in order to provide a temple for religious services and a community center for the social, cultural, and educational needs of the Jain community; and

WHEREAS, The mission of JSMC is to offer a trustworthy and structured ground for projecting a common voice of all Jains, to promote principles of the Jain religion, to provide Jain education to the community, and to celebrate Jain social and cultural events in a manner that is compassionate, vibrant, and dynamic to all; and

WHEREAS, JSMC is celebrating the 25th anniversary of its temple, and the idol of Bhagawan Mahavir Swami is the principal deity in the sanctum of the temple; and

[April 17, 2018]

WHEREAS, After renunciation at the age of 30, Bhagawan Mahavir Swami undertook many severe austerities and reinforced them by living and teaching the Jain values of non-violence, compassion, non-possessiveness, pluralism, and supreme truth; and

WHEREAS, JSMC honors Bhagawan Mahavir Swami and his Jain teachings, which have been passed down from generation to generation; therefore, be it

RESOLVED, BY THE SENATE OF THE ONE HUNDRETH GENERAL ASSEMBLY OF THE STATE OF ILLINOIS, THE HOUSE OF REPRESENTATIVES CONCURRING HEREIN, that we designate Illinois Route 59 as it travels between Lake Street (US 20) and Baytree Drive as "Mahavir Swami Road"; and be it further

RESOLVED, That the Illinois Department of Transportation is requested to erect at suitable locations, consistent with State and federal regulations, appropriate plaques or signs giving notice of the name "Mahavir Swami Road"; and be it further

RESOLVED, That suitable copies of this resolution be presented to the Jain Society of Metropolitan Chicago and the Secretary of Transportation.

REPORTS FROM STANDING COMMITTEES

Senator Bertino-Tarrant, Chairperson of the Committee on Education, to which was referred **Senate Bills Numbered 2925, 3015 and 3418**, reported the same back with amendments having been adopted thereto, with the recommendation that the bills, as amended, do pass.

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

Senator Bertino-Tarrant, Chairperson of the Committee on Education, to which was referred the following Senate floor amendments, reported that the Committee recommends do adopt:

Senate Amendment No. 3 to Senate Bill 1829
 Senate Amendment No. 1 to Senate Bill 2350
 Senate Amendment No. 2 to Senate Bill 2654
 Senate Amendment No. 1 to Senate Bill 2844
 Senate Amendment No. 2 to Senate Bill 3226

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

Senator Raoul, Chairperson of the Committee on Judiciary, to which was referred **Senate Bills Numbered 2314 and 2481**, reported the same back with the recommendation that the bills do pass.

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

Senator Raoul, Chairperson of the Committee on Judiciary, to which was referred **Senate Bills Numbered 65, 2573 and 2647**, reported the same back with amendments having been adopted thereto, with the recommendation that the bills, as amended, do pass.

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

Senator Raoul, Chairperson of the Committee on Judiciary, to which was referred the following Senate floor amendments, reported that the Committee recommends do adopt:

Senate Amendment No. 1 to Senate Bill 574
 Senate Amendment No. 1 to Senate Bill 2343
 Senate Amendment No. 1 to Senate Bill 2432

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

Senator Morrison, Chairperson of the Committee on Human Services, to which was referred **Senate Bill No. 3075**, reported the same back with amendments having been adopted thereto, with the recommendation that the bill, as amended, do pass.

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

Senator Morrison, Chairperson of the Committee on Human Services, to which was referred the following Senate floor amendments, reported that the Committee recommends do adopt:

Senate Amendment No. 1 to Senate Bill 2808
Senate Amendment No. 2 to Senate Bill 2808
Senate Amendment No. 3 to Senate Bill 3048

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

Senator Sandoval, Chairperson of the Committee on Transportation, to which was referred **Senate Bill No. 2210**, reported the same back with the recommendation that the bill do pass.

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

Senator Sandoval, Chairperson of the Committee on Transportation, to which was referred the following Senate floor amendments, reported that the Committee recommends do adopt:

Senate Amendment No. 1 to Senate Bill 2285
Senate Amendment No. 1 to Senate Bill 2585
Senate Amendment No. 1 to Senate Bill 3001

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

MESSAGES FROM THE HOUSE

A message from the House by

Mr. Mapes, Clerk:

Mr. President -- I am directed to inform the Senate that the House of Representatives has passed bills of the following titles, in the passage of which I am instructed to ask the concurrence of the Senate, to-wit:

HOUSE BILL NO. 2222

A bill for AN ACT concerning local government.

HOUSE BILL NO. 4231

A bill for AN ACT concerning wildlife.

HOUSE BILL NO. 4310

A bill for AN ACT concerning State government.

HOUSE BILL NO. 4733

A bill for AN ACT concerning regulation.

Passed the House, April 17, 2018.

TIMOTHY D. MAPES, Clerk of the House

The foregoing **House Bills Numbered 2222, 4231, 4310 and 4733** were taken up, ordered printed and placed on first reading.

A message from the House by

Mr. Mapes, Clerk:

Mr. President -- I am directed to inform the Senate that the House of Representatives has passed bills of the following titles, in the passage of which I am instructed to ask the concurrence of the Senate, to-wit:

HOUSE BILL NO. 4104

A bill for AN ACT concerning local government.

HOUSE BILL NO. 4589

[April 17, 2018]

A bill for AN ACT concerning regulation.

HOUSE BILL NO. 5027

A bill for AN ACT concerning State government.

HOUSE BILL NO. 5242

A bill for AN ACT concerning State government.

HOUSE BILL NO. 5317

A bill for AN ACT concerning wildlife.

Passed the House, April 17, 2018.

TIMOTHY D. MAPES, Clerk of the House

The foregoing **House Bills Numbered 4104, 4589, 5027, 5242 and 5317** were taken up, ordered printed and placed on first reading.

A message from the House by

Mr. Mapes, Clerk:

Mr. President -- I am directed to inform the Senate that the House of Representatives has passed a bill of the following title, in the passage of which I am instructed to ask the concurrence of the Senate, to-wit:

HOUSE BILL NO. 4637

A bill for AN ACT concerning local government.

Passed the House, April 17, 2018.

TIMOTHY D. MAPES, Clerk of the House

The foregoing **House Bill No. 4637** was taken up, ordered printed and placed on first reading.

READING BILLS OF THE SENATE A SECOND TIME

On motion of Senator McGuire, **Senate Bill No. 2927** having been printed, was taken up, read by title a second time and ordered to a third reading.

On motion of Senator McGuire, **Senate Bill No. 3128** having been printed, was taken up, read by title a second time and ordered to a third reading.

On motion of Senator McGuire, **Senate Bill No. 3242** having been printed, was taken up, read by title a second time and ordered to a third reading.

On motion of Senator Hunter, **Senate Bill No. 3514** having been printed, was taken up, read by title a second time.

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

AMENDMENT NO. 1 TO SENATE BILL 3514

AMENDMENT NO. 1. Amend Senate Bill 3514 as follows:

on page 2, by replacing lines 19 and 20 with the following:

"(c) A school district subject to this Section may not use any measure that would prevent or delay an";
and

on page 2, line 22, by replacing "creating" with "create".

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

On motion of Senator Morrison, **Senate Bill No. 2314** having been printed, was taken up, read by title a second time and ordered to a third reading.

[April 17, 2018]

At the hour of 6:39 o'clock p.m., the Chair announced that the Senate stands adjourned until Wednesday, April 18, 2018, at 12:00 o'clock noon.