

IFLOSS Coalition Meeting Minutes
Carterville
October 14, 2010
Chicago
November 5, 2010
Bloomington
November 9, 2010

Carterville

Welcome –

Judy Redick

Meeting Participants – Julie Janssen, IDPH, DOH

Judy Redick – IFLOSS Coalition Report

2011 Oral Health Conference

The Bi-Annual Oral Health Conference will be located in the Chicago suburbs in October of 2011. Probable location is Rosemont. This will be a 2 day conference offering approximately 12-13 CEUs for dental professionals. As the conference planning progresses more information will be available.

**HRSA Announcement: FY 2011 School-Based Health Center Capital Program
(HRSA-11-127) Funding Opportunity**

The Health Resources and Services Administration (HRSA) has issued a funding opportunity announcement for HRSA-11-127: Affordable Care Act – Grants for School-Based Health Center Capital (SBHCC). Under the SBHCC funding opportunity, approximately \$100 million is available to support 200 grants to address significant capital needs such as new construction, alteration and renovation, and equipment, at school-based health centers (SBHCs).

Applicants meeting the definition of a school-based health center or the sponsoring facility of a school-based health center as defined in 4101(a)(6) of the Affordable Care Act, as set forth in section 2110(c)(9) of the Social Security Act (42 USC 1397jj(c)(9)), are eligible to apply.

Please visit the Grants.gov website at: WWW.GRANTS.GOV to access the HRSA-11-127: Affordable Care Act – Grants for School-Based Health Center Capital (SBHCC) funding opportunity announcement detailing the eligibility requirements, review criteria, and awarding factors for organizations seeking a grant for support of capital projects in SBHCs in FY 2011.

The application submission process for HRSA-11-127: Affordable Care Act – Grants for School-Based Health Center Capital involves a two-step submission process via

Grants.gov and the HRSA Electronic Handbooks (EHB): Phase 1: must be completed and successfully submitted via Grants.gov by 8:00 PM ET on December 1, 2010; and Phase 2: must be completed and successfully submitted by 5:00 PM ET on January 12, 2011. No paper applications will be accepted without prior written approval from HRSA's Division of Grants Policy.

Illinois Third Graders

2008-2009 Oral Health and BMI Data Available

www.idph.state.il.us/HealthWellness/oralhlth/HealthySmiles09.pdf<<http://www.idph.state.il.us/HealthWellness/oralhlth/HealthySmiles09.pdf>>

The Illinois Primary Health Care Association Annual Leadership Conference is October 20 – 22. This year, it will be held in St. Louis, MO. The conference schedule includes three oral health related sessions:

1. GRINS Training – Building Healthy Smiles
2. Illinois Oral Health Surveillance System and Data Update
3. Essentials of Dental Clinic Planning and Implementation for Community

Health: How to Avoid Pitfalls, Mistakes and Other Costly Surprises, presented by Schein
Dental

All of the oral health sessions have been scheduled for Thursday, October 21. Go to this link for additional information about the agenda, registration and hotel accommodations: <http://www.iphca.org/Services/EducationProfessionalDevelopment/AnnualLeadershipConference.aspx>

Julie Janssen – Division of Oral Health, Illinois Department of Public Health

The sealant grant program has a new process. All grants were delayed this year because of a scrupulous process of giving grants. A workshop will be held on October 28 in Springfield. There are a couple of new grantees – Wabash Valley and another agency in the very southern part of Illinois, and Whiteside County is expanding their area of coverage. IDPH is working more closely with HFS in quality assurance. Oral health is integrating more – WIC is doing a lot but they do not have fluoride varnish. They are getting more education to families and moms. They get moms early and often to understand oral health.

The IDPH oral health cancer program is on the cutting edge. It is being highlighted at the national oral health conference. Because of the new grant process, they will have to go statewide and that will take some thought.

No calls on school exam process this year. There is a list of schools who did not comply.

Dental role in disaster preparedness. Dentists and dental hygienists can be certified as responders. The training process is being built with the University of Illinois Chicago

(Dr. Michael Colvard). The emphasis at dental and dental hygiene schools training is to make them aware of emergency preparedness. The practice act in Illinois changed several years ago. One can operate outside the scope of practice and take on additional duties. If you present to your local health department as a responder they will want to know what to do with you. The state of emergency has to be declared by the Governor.

Early Childhood – IDPH is working with the Illinois Chapter, American Academy of Pediatrics, to train doctors and nurses to provide anticipatory guidance and fluoride varnish for very young children. This is another duty without more money. Health and Family Services will eventually start reimbursing downstate.

Data collection statewide with Head Starts – chose that because they have to have an exam anyway (children 0-5 who are low income).

Fluoridation – We Care Chicago. Putting signs up all over saying there is poison in the water. We take it for granted but we do have a good system in this state for fluoridation.

Special Needs Work Group- They are going to do a lot more education and capacity growing for special needs people. They are looking at policies to promote preventive care for adults.

Another special population is the HIV patients. They are building capacity and safety nets to treat these patients. They are testing, linking, and providing capacity. The HIV section within the Department is very pleased and will work closely with them.

Division Chief – none for four years plus. Talking to US Public Health Service to get a dentist assigned to IDPH. Brand new chief dental officer – Dr. Bill Bailey - taking over from Dr. Halladay.

Check out IDPH web site for Healthy Smiles results.

They are entering data now on the workforce.

Healthy Smiles Healthy Growth – caries experience and untreated caries of third graders remained about the same. Mary Pat Burgess (Chicago Department of Public Health) used a set amount of schools and went back to the same ones.

The data analysis on Head Start children has been completed. Over half of the Head Start programs are collecting data this year. Of those surveyed, 26% of the children had early childhood caries. The data was broken down by age and they did not get a large enough rate based on urbanicity.

Judy Redick – IFLOSS Coalition – Policy and Legislative Committee

The following groups have held meetings and their reports are attached.

Dental Policy Review Committee

April 14, 2010

1:00-3:00 p.m.

Videoconference between Chicago, IL and Springfield, IL

Members Present: Mary Pat Burgess, Dionne Haney, Julie Janssen, Dr. Henry Lotsof, Dr. Richard Perry, Dr. Sheldon Rosenstein, Dr. James Thommes, Dr. James Wahl

Members Absent: Dr. William Goebel, Dr. Ronald Mizer

Others Attending:

DentaQuest: Sarah Tobias, Nick Barnette, Mary Murack, Kelly Pulliam, Krista Smothers
Healthcare and Family Services: Heidi Johnson, Patti Kimmel, Candace Meserole, Debby
Saunders, Gwen Smith, Jamie Tripp, Jaci Vaughn
Shriver Center on Poverty Law: Carrie Gilbert, Andrea Kovach
UIC – DSCC: Leslie Frederick
IFLOSS: Judy Redick
DCFS: Karen Moredock
IPCHA: Kelly Carter, Sharee Clough
IMCHC: Kathy Chan
Lake County Health Dept.: Dr. Gerald Dismer
Guest: Judy King

Meeting was called to order by Debby Saunders. Introductions were made.

Old Business

November 4, 2009 Dental Policy Review Committee Minutes: Minutes from the November 4, 2009 Dental Policy Review Committee meeting were read and approved with one minor correction. The minutes, as approved, will be posted to the Dental Program website at www.hfs.illinois.gov/dental/

New Business

Grant Application Workgroup: Debby Saunders asked for volunteers to participate in a workgroup to review the current dental grant application and review/revise criteria for competitive procurement. Julie Jenssen, Judy Redick, and Dr. Gerald Dismer volunteered to participate. It was also suggested that the workgroup include a current grantee, a FQHC representative from a clinic that has a dental clinic, and a FQHC representative from a clinic without a dental clinic. The grant application workgroup will be notified of a meeting date and other potential members will be contacted by the HFS Dental Program.

Dental Grant Program: Patti Kimmel reported on the status of the Dental Grant Program which allows HFS to grant funding for dental clinic development and expansion to local health departments, federally qualified health centers, and rural health centers. The HFS Dental Program currently funds four dental clinics with a 2-year grant. The clinics are located in Bond, Dewitt/Piatt, Douglas and Fulton Counties. There are five additional grant applications pending review and approval: Logan, Pike, Macoupin, Tazewell, and Edgar Counties (local health departments).

HFS and the Capital Development Board are collaborating to allocate \$2 million of the \$50 million in the Capital Development Fund to be spent on dental grants over a three-year period. These funds will be used to fund approximately nine dental capital projects across the state.

Local Health Department Administrative Claiming Status: Patti Kimmel reported that HFS has developed a process to allow local health departments to claim Federal Financial Participation for the unreimbursed cost of providing dental services to Title XIX (Medicaid) clients. The cost must have been paid from local dollars and those dollars

must not have been used to match any federal awards. The complete claiming process is still being developed. To participate in the program the local health department must have a signed Interagency Agreement with HFS. Retroactive claiming from October 1, 2009 forward will be allowed.

Fluoride Varnish Program: Gwen Smith reported on the HFS Fluoride Varnish Program, Bright Smiles From Birth (BSFB). The goal of the program is to improve access to dental care and reduce early childhood caries for children under age 3. HFS is using private foundation grants to fund the pilot and has many partners, including the Illinois Chapter of the American Academy of Pediatrics (ICAAP), the Illinois State Dental Society (ISDS), University of Illinois Chicago UIC Department of Pediatrics and School of Pediatric Dentistry, the Illinois Primary Health Care Association (IPHCA), DentaQuest, and private dentists. The program is currently operating in Cook County, the Collar Counties, Rockford, Peoria, and in some FQHCs. Provider recruitment has started in Champaign.

The pilot trains certain pediatric health care providers to apply fluoride varnish in the pediatric medical office setting. ICAAP provides the training which includes instruction on oral health screening, assessment, fluoride varnish application, anticipatory guidance, and referral to a dental home for follow-up and ongoing dental care. Providers eligible to participate in the pilot include physicians, advanced practice nurses, FQHCs, and hospital outpatient clinics. Once trained, providers can be reimbursed for fluoride varnish application. Fluoride varnish can be applied up to 3 times per year for children under age 3.

To date, over 1,300 individuals have been trained, including office and support staff, to assure integration of BSFB into the program. There are currently 179 health care providers enrolled to apply fluoride varnish. In CY 2009, more than 4,000 children under age 3 had fluoride varnish applied by health care providers in the pediatric medical office setting. The pilot has been successful in improving access to dental care and studies confirm that fluoride varnish application is effective at reducing childhood caries. HFS would like to expand the program statewide, but ongoing funding is needed to do so.

School Based Dental Program: Heidi Johnson reported on the School Based Dental Program's five major components:

- Identifying members at risk via a thorough oral evaluation,
- Performing indicated diagnostic and preventive services,
- Referring members for further care, as needed,
- Tracking members to assure their dental needs are met,
- Contacting parents of at risk children who do not receive follow-up dental treatment.

Children seen by providers in the School Based Health Program are given an oral health examination and then assigned a score of 1, 2, or 3.

Scoring definitions:

- 1 - Preventive Care (no visual signs of problems with teeth or gums),
- 2 - Restorative Care (decayed teeth that need either fillings or crowns),
- 3- Urgent Treatment (advanced dental disease including signs or symptoms of pain, infection, exposed nerve or swollen/bleeding gums).

In 2009, 60% of the 130,000 children seen were scored as a 1, 32% were scored as a 2, and 8% were scored as a 3. Children receiving a score of 3 are monitored by HFS to verify that dental services are provided. After six months 46% of those scoring a 3 had been seen for follow-up care; after ten months, 55% had been seen.

HFS is currently reviewing/revising quality assurance measures for the program. Issues include: defining a meaningful visit (time spent, number of children seen per day, etc.) and accessibility of follow up care and referrals. A committee has begun regular meetings to review these issues.

Policy Review Committee members suggested additional data be collected by geographic regions throughout the state to better monitor accessibility of follow up care and referrals. It was also suggested that the regional distribution of scores of 3 be monitored.

DentaQuest Outreach: Sarah Tobias reported on the annual DentaQuest Provider Educational Meetings held in Collinsville, Mt. Vernon, Champaign, Peoria, Rockford, Batavia, and Oak Brook in November 2009. Additional provider training opportunities planned for 2010 includes a Webinar on the new web portal claims processing system to be offered five times in June and statewide Provider Educational Meetings to be offered again in November.

Krista Smothers reported on the recently completed Phase IV of the member outreach initiative. This initiative was developed and implemented to increase the number of children who are enrolled in the HFS Dental Program and receiving dental services.

- Phase I - brochure mailed in November 2008 to all children ages 2-18 who had not received dental services in the prior 12 months
- Phase II – brochure mailed in February 2009 to all children in Phase I who had not yet accessed care
- Phase III – telephone calls in October and December 2009 to all children in Phase I and Phase II who still had not accessed care, plus any other child who had not accessed care for 24 months
- Phase IV – postcard mailed in January 2010 to all children from Phase III who could not be reached by telephone.

One million annual brochures, outlining available services for both children and adults, were mailed to all active members in March 2010. In addition, a Dental Referral Notepad, Smoking Cessation Notepad, and Guide to Denture Care information sheet continue to be distributed through the DentaQuest website and by request.

DentaQuest is currently conducting its annual Member Survey. The random sample survey is conducted by phone and targets three groups in each of four regions throughout the state. The survey began April 6.

The annual Provider Survey was completed in March with a less than 20% return rate.

Sarah Tobias reported on the Regional Oral Health Advocates (ROHA) outreach efforts. ROHAs (formerly Dental Champions) are actively involved in each of seven geographic oral health regions throughout Illinois. ROHAs are working to improve recruitment efforts in enrolling nonparticipating providers and encouraging increased participation

among enrolled providers. They are also focusing on legislative issues including promoting the oral health agenda, specifically increasing state funding for oral health. The Rolling Trend Report will be posted to the HFS website at www.hfs.illinois.gov/dental/

Insure Kids Now Website: Andrea Kovach from the Shriver Poverty Law Center inquired about the Insure Kids Now website that lists contact information for all IL dentists enrolled in the Medicaid program. The list has been tweaked to include only contact information of dental providers who are actively participating in the Medicaid/AllKids program AND accepting new clients. The website remains open for discussion with the federal CMS. HFS staff regularly participate in meetings with CMS and representatives from other states to discuss options for this website listing.

Chicago Public Schools: Mary Pat Burgess reported that the school-based dental program at Chicago Public Schools had a late start, not beginning until January, but is now 35-40% complete, including referrals.

Lake Co. Health Department: Dr. Gerald Dismar reported that Lake County is operating a clinic that includes behavioral health, medical services, and dental services all at one site.

Maternal and Child Health Coalition: Kathy Chan encouraged committee members and others to check the MCHC website for details of the newly passed federal health insurance program at www.ilmaternal/healthcarereform.html

IFLOSS: Judy Redick reported the formation of a new workgroup to deal with the concerns of special needs dental patients.

IPHCA Oral Health Network: Sheree Clough reported a new website for the Oral Health Network at www.iphca.org/Services/OralHealth

Adjournment: Meeting adjourned at 3:15 pm.

Tracy Wright – Shawnee Health Center

They are a not for profit medical and dental center with three locations and a dental clinic in each location – Murphysboro, Marion (by Target), and Carbondale. Their services are restricted to residents of Jackson and Williamson Counties. There are 8 dentists, 4 hygienists, 2 assistants, and Tracy supervises all of them. They do not have an oral surgeon or orthodontist and refer clients to others in the area. None of the specialists see Medicaid clients. Most dentists in the area shy away from Medicaid.

Rachel Maze is the supervisor of medical and dental billing. She works with Sandy Maurizio at SIU Carbondale and Southern Illinois Hospitals to refer clients for care to avoid use of the emergency room. They probably have had no more than 10 clients scheduled and five show up. The hospital is tracking patients to determine why they don't go to the clinic and if they return to the emergency room. Pain treatment in the emergency room is only good for two days. Paula Clark from Jackson County Health

Department is working with her to see HIV patients from any county as long as they are from her group. There is an HIV consortium from Jackson County.

Hardy Ware – East Side Health District

East St. Louis has a cancer prevention grant. They are looking at all types of cancer but more so at ones that are critical – lung and bronchial, prostate, oral health, and breast. Incidents of cancer are greater in that area than any other part of the state. The health district is doing sealants in schools (some 300-400 in one school). Southern Illinois Health Care Foundation (SIHCF) has dental clinics now and they can refer children to them.

Sandy Maurizio – SIU Carbondale

Their CDC dental clinic grant is going strong. Work continues with the Jackson County Access to Care Committee. Oral health is primary focus this year. Sandy and Sherri are working with Marion Mulligan (Jackson County Health Department Administrator) on collecting information on kindergarten, second and sixth graders on the number of school exams they have done and several other things that can be gleaned from data (outside providers who come into schools, approximate numbers.) Telephone surveys have been done with school nurses

Toni Kay Wright – SIU Carbondale Head Start

They are looking at fluoride varnish Bright Smiles from Birth Program. Once funding becomes available they want to do it in their community. They are reviewing materials that everyone could use at health fairs. Within Head Start they are using the IDPH oral health form and BMI. They partner with the dental health clinic to apply varnish twice a year (November and spring), and have about 75% rate of attendance.

Sherri Lukes – SIU Carbondale

They have been sending their students to Shawnee (Murphysboro site) and are now rotating them thorough the other two sites, Marion in the fall and Carbondale now. They also work in community health centers, Rural Health, Inc., the county health department, nursing homes, the veterans' hospital, and some school based sealant programs. They plan oral health screening, do a budget. Julie Janssen is a wonderful resource.

Rita Demask – Miles of Smiles and Illinois Dental Hygiene Association

Illinois Dental Hygiene Association had a continuing education seminar in the Peoria area on oral cancer. The hygienist from Sangamon County Health Department did a presentation. She also said that she does her presentation for nursing students and they are like sponges since they had not gotten any oral health information.

IDHA is putting forth a bill for collaborative practice.

Reporting for Miles of Smiles, Rita stated that they lost three dentists and hired several new young ones. They struggle to get referral dentists. They do private schools with a list but it is tough. Private dental insurance was accepted in areas in the northern part of the state

Charla Lauter – SIU Carbondale – Professor/Director, School of Allied Health
APHA is working on a fluoride varnish policy paper to bring to the national meeting.

Sarah Boyer – St. Elizabeth Hospital

She is attending to gather information. Poor dental health leads to pre-term delivery. Looking for information to provide to expectant parents.

Chicago – November 5, 2010

IFLOSS Coalition/Chicago Community Oral Health Forum Meeting

Welcome

Kathy Chan

Meeting Participants – Julie Janssen (IDPH, DOH, Central Office); Judy Redick (IFLOSS Coalition).

Attendees were asked to introduce themselves and give an update on their program.

Kim Bartolomucci – Chicago Community Oral Health Forum

David R. Trost, DDS – Miles of Smiles, Happy Teeth, Happy Kids

Tina O’Connor, DDS – Lake County

Caswell Evans, DDS – University of Illinois Chicago Dental School

Anne Clancy – Chicago Community Oral Health Forum

They are in their third year of building leadership. They are looking at adding some other governing body to their organization.

Some of the projects are doing focus group assessments of Chicago school teachers, administrators, and parents of what they thought was working, what was not working, what could be done to improve. They would like to get all schools to participate.

Ten schools were chosen – five of the schools do not participate, five are very active schools. Project was funded in part by *Smiles Across America*.

Anne and Mona went to the five closed Chicago Public Health Department dental sites. They looked at the possibility of using/not using those clinics. Draft reports are being tweaked. The clinics did not all close at once but instead were staggered. All were closed by the end of June 2009. Funding and staffing issues closed them. There was no budget for capital issues. The patient load at each site was 50% uninsured.

Dr. Jacob suggested that continuing education credits be given to dentists who do volunteer work. It might be a way to attract dentists to those areas.

Dr. Caswell Evans felt that was a great idea but it would have to be managed, supplies provided, patients recruited, and equipment identified. Volunteerism is not a program, it is not sustainable, and it needs a massive amount of infrastructure.

Kennedy King Dental Hygiene School will not function after 2012. City Colleges has assured them that they are committed to keeping the school alive.

Martine Caverl – Communities in Schools of Chicago

Megan Brown – Communities in Schools of Chicago

Jason Grinter – Dental Quest

Kathy Olson – Milestone Dental Clinic in Rockford

Bob Egan – Illinois Children’s Healthcare Foundation

Sharee Clough – Illinois Primary Health Care Association

Jennie Pinkwater – Illinois Chapter, American Academy of Pediatrics

They have a new educational video that shows how to apply varnish in a primary care setting.

Ann Roppel – Illinois Department of Public Health, Oral Health Division

Mary Pat Burgess – Chicago Department of Public Health

They are getting ready to start the next school year. They have found some certifications from certified dental assistants that are not authorized by the Department of Professional Regulation. Very official looking but say certified by the Illinois State Board of Education. Now they are reviewing all forms to make sure the certifications are valid.

Ann Roppel explained what qualifications are necessary for dental assisting. She talked to the Department of Professional Regulation. She made Illinois State Dental Society aware of the issue. The dental hygiene and dental assistant schools should be told of the fraud.

This would be a good topic for the IFLOSS Policy Committee.

Mary Pat is working with Anne Clancy and Kim Bartolomucci on focus groups. Her program saw over 90,000 children last year.

Linda M. Kaste, DDS – University of Illinois Chicago Dental School

The vacant Division Chief position is of concern. If the Department is looking at attempting to get a public health service appointment, Dr. Kaste feels that is a demonstration of a bandaid approach. The position would be a three year commitment that could be renewed for three years. It helps the public health service get experience at that level. It has worked in the past. South Carolina has had a very successful run with this program. Public health service officers have all levels of experience.

Does the law need to be changed to allow the most appropriate person to be the dental director or bring someone in from out of state. In South Carolina the public health service person continued to be paid by the Federal Government. Concern is you do not know what type of person you will get.

Dr. Caswell Evans feels the state is certainly disadvantaged. A public health officer sent to a state is fairly common. Measure the strengths (someone is in the seat) and weaknesses (not from the area).

Patrick J. McMahon – Chicago Community Oral Health Forum

He is working with Kim and Anne.

Mona VanKanegan – Chicago Community Oral Health Forum

The next meeting of the providers group will be held on December 8 from 8:30 to 10:30. Topic of discussion will be how current health centers can expand services to those who have orthodontic needs. There will be a series of seminars and hands on training. They are cosponsoring with Illinois Primary Health Care Association and will video conference it also. Focus groups will wrap up the end of this month.

Overall themes so far – parents and staff – week before let them know what is going to happen. They want to be more involved, want health education available.

Mona asked if it was possible to link the workforce survey with licensure. She would like to get a handle on the number of volunteer hours in their state. It would be nice to link data to parts of the state. What type of units are being reported? The epidemiology people could craft the questions specific to meet their needs. Relicensure is in 2012.

Trisha Roth – Well Child Center in Elgin

They have a West Town location, just opened a site in Englewood, and have four operatories in Uptown.

Amanda Ciatti – Oral Health America

Mila Tsagalis – DuPage County Health Department, Oral Health Program

She discussed the NACO program. They are piloting it at DuPage County Health Department. There is no residency requirement. It serves seniors and those who are 200% above poverty. No maximum with the program, will have web button, clients can enroll by phone. They are one of twenty counties piloted throughout the country. The provider base in DuPage is about 200 right now. The specialty base is weak; the program may be a customer service nightmare.

Greg Jacobs, DDS – private practice dentist

J. N. Alexander – Sprague Memorial Institute

He is hearing lots of problems, no solutions

Joanna Brown – Chicago Dental Society

D. Grazman – Heartland Health Alliance

Megan Tupper – Community Health Partnership of Illinois

Brenda Delgado – Lake County Health Department, Dental Program

Kathy Chan – IFLOSS Coalition Board Member, Illinois Maternal and Child Health Coalition

There are health monies available through the capital projects for health departments and FQHCs for up to \$100,000.

Michelle Arnold – Bridges to Healthy Smiles - Morreale

There was a resolution introduced to the Cook County Board which highlighted the oral health crisis. The resolution was tabled for further research. They are looking at implementing an oral health community outreach program. The January 2012 summit is helping guide oral health in Chicago. They will make recommendations with stakeholders in Chicago.

Bob Egan – Illinois Children’s Health Care Foundation (ICHCF)

In 2007 \$20 million was identified to improve oral health in children. So far \$17 million has been committed to programs. Over the next months they will look at what they have funded, what the results are. Health and Family Services Medicaid data will be reviewed. One of the things they are looking at is holding five regional meetings throughout the state to discuss what role the ICHCF will have in children’s oral health in the future. The meetings are scheduled as follows: February 22 at Crusaders Clinic in Rockford; March 7 at Carl Sandberg College in Knox County; March 9 at University of Illinois Chicago Dental School; March 16 at Southern Illinois University Dental School in Alton; and April 5 at the Champaign Public Library. The meetings will go from 11:00 a.m. to 2:00 p.m. They would like to have 20 to 30 people at each meeting.

Bloomington - November 9, 2010

Welcome

Lisa Bilbrey

Meeting Participants – Bloomington

Lisa Bilbrey (IFLOSS Coalition) and Judy Redick (IFLOSS Coalition).

Vanessa Lentz – Smile Illinois; Lewis and Clark Community College

Jerrod Welch – Adams County Health Department

Oral health moved into a new clinic with 11 operatories. They have three full time dentists and one part time plus several hygienists.

Alicia Ekhoﬀ – Champaign Urbana Public Health District

They are providing sealants in all of the Champaign Urbana schools. A class has been started, in partnership with Maternal and Child Health staff and the University of Illinois (nutrition educator), entitled *Snacking Styles for Healthy Smiles*. The class is for parents of children age 15 to 35 months. They will be tracking families who have been through the program versus those who have not been in the program.

Krista Smothers – Dental Quest

They went live with their new system several weeks ago. It is a company wide conversion. By next week they will be in a smooth place. Claims are being edited very closely to make sure they are done correctly. Clean claims are being processed within twenty-four hours.

Their school program is different than any other program.

Jill Myers – Smile Healthy

She is with a rural program in Champaign County. They are working with Frances Nelson Center to start a dental clinic. Currently have a mobile unit and education. Their grant was transferred to Frances Nelson in June. Clients must be Frances Nelson medical patients first before they can receive oral health services. She is working on policy and staffing, laying out ground work. Space conversions/transfers will need to be done. Head Start program has been recognized by a national evaluator.

Rita Demask – Miles of Smiles

They provide services around the state, not outside of the state. Finding referrals is always an issue. There is a big movement toward mobile restorative care. The concern is quality control. The organization is looking at electronic record keeping.

Susan Alber – McLean County Health Department

They received a \$50,000 grant from the Illinois Children's Health Care Foundation to do equipment upgrades for their clinic. Two chairs have been replaced and they are writing for the HFS \$10,000 grant. If successful they will get a fourth operator. They are the only agency in McLean County that serves Medicaid children. Children are seen four days a week. Another part time dentist and full time hygienist will be working at the clinic. The no show rate in October was 38% so they are trying to brainstorm on how to correct that. They are looking into texting.

Julie Clark – Ford Iroquois Public Health Department

Sealants are provided though Miles of Smiles. They received an oral health needs assessment grant so they are working on that.

Jerry Marshall, DDS – Tazewell County Health Department

His clinic has eleven full time employees, six operatories, and they see 50 plus patients per day. They have eleven staff at Fulton County Health Department and see the same number of patients per day (50). There has been no turn over in staff at either place. They take both walk-ins and appointments. The health department received a HFS grant for \$10,000 for the Pekin clinic for digital x-ray equipment.

Clifford Brown, DDS – Dental Sealants & More

He is the director of the school-based program in three county local health departments. They see urgent care children within thirty days. The percent of children needing urgent care stays around 4%. Only one dentist does hospital cases but he cannot take any new

clients. There are four general practice dental residents in Peoria now. They are taking Medicaid patients at St. Francis Hospital.

Heartland takes everyone. They are using six chairs now and have the capacity for twenty. Another clinic is ready to open in Aspen.

In Decatur a periodontist saw 80 clients on Give Kids A Smile Day.

The greater percent of students in the Peoria area are Medicaid eligible.

Maureen Sollars – McLean County Health Department

The state of Oregon passed legislation that requires a dentist to take a certain number of Medicaid eligible children in order to get and keep his/her license.

Deb O’Connell – Head Start – IFLOSS Board Member

They found twenty plus dentists to take Head Start children.

Lisa Bilbrey stated that IFLOSS will try the Chicago area this year for the conference. They are also discussing the possibility of having a conference annually on a smaller scale.

Dental Policy Review Committee

August 4, 2010

1:00-3:00 p.m.

Videoconference between Chicago, IL and Springfield, IL

Members Present: Mary Pat Burgess, Dionne Haney, Julie Janssen, Dr. Mary Hayes, Dr. Indru Punwani, Dr. Gerald Dismer

Members Absent: Dr. William Goebel, Dr. Ronald Mizer, Dr. Richard Perry, Dr. Sheldon Rosenstein, Dr. James Thommes, Dr. James Wahl, Dr. Henry Lotsof

Others Attending:

DentaQuest: Sarah Tobias, Nick Barnette, Mary Murack, Kelly Pulliam

Healthcare and Family Services: Gina Swehla, Debby Saunders, Heidi Johnson, Jamie Tripp, Jim Monk

Shriver Center on Poverty Law: Andrea Kovach

UIC – DSCC: Leslie Frederick

IFLOSS: Judy Redick

DCFS: Karen Moredock

Meeting was called to order by Gina Swehla. Introductions were made. Gina Swehla introduced two new members of the committee who represent pediatric dentistry and academia, Dr. Mary Hayes and Dr. Indru Punwani.

Old Business

April 14, 2010 Dental Policy Review Committee Minutes: After the Dental Policy Review Committee reviewed the minutes from the April 14, 2010 meeting, Dr. Dismer made a motion to approve the minutes, and Mary Pat Burgess seconded the motion.

Minutes from the April 14, 2010 meeting were approved with minor corrections to names and titles. The minutes, as approved, will be posted to the Dental Program website at www.hfs.illinois.gov/dental/ Dental Policy Review Committee Minutes from November 14, 2009 will also be posted on the Dental Program website.

New Business

Revision to Policy Review Committee By-Laws

The Committee reviewed two changes which were made to the by-laws, one to reflect the inclusion of hygienists in the Committee, the other to clarify frequency of meetings. . Dionne Haney made a motion to approve these changes. Dr. Gerald Dismer seconded the motion. The revisions were approved.

Illinois Rural Health Association

News Update

November 2010

IRHA Board of Directors Strategic Planning Session

The Illinois Rural Health Association Board of Directors met on Wednesday, November 17 to develop its strategic plan for 2011. With the assistance of Dave Sniff who facilitated the planning session, the Board outlined its direction for 2011-12. The primary goals of the organization will be to develop its membership, provide education and information sharing opportunities for members, and provide advocacy on rural health issues in Illinois.

The board would like to improve timely communication with members through new information tools and a regional approach to membership, issue identification, and advocacy efforts. The board felt strongly that information on health care reform and its impact on the health care industry will be a priority in the future, along with the development of an advocacy agenda for members to communicate with state and federal leaders.

The board will be finalizing its plans over the next two months and will share the 2011 plan with members after its meeting in January.

Members asked to provide input on health care issues

The State of Illinois has created a Health Care Reform Implementation Council to address the components of health care reform in Illinois. The Council has developed the attached *Affordable Care Act: Key Issues for Public Comment* to gain input from Illinois residents on the development of "Health Insurance Reform and the Option of Establishing an Insurance Exchange in Illinois". To review the issue paper and learn how to provide public comment, please click on: <http://www2.illinois.gov/healthcarereform/Pages/default.aspx>.

IRHA Searching for new Executive Director

The IRHA Board of Directors has released the attached Request for Proposals for a new Executive Director. The RFP is flexible to allow an individual, a management association or

any other staffing arrangement to be considered. The scope of work focuses on membership development, event planning, association management, and advocacy work. Proposals are due back by December 17, 2010 with a decision to be made by the end of January. The Executive Committee is serving as the Search Committee and expects to present recommendations to the full board at its January meeting. Please feel free to share the attached RFP to anyone that may be a good candidate for the position. They are welcome to contact Mary Jane Clark or Harvey Pettry if they have any questions regarding the RFP.

USDA Funding Available to Rural Health Care Providers

The availability of quality healthcare is crucial to the future of rural communities! USDA Rural Development's Community Facility loans, grants and loan guarantees (with local lenders) help public bodies and non-profit organizations provide essential healthcare facilities and services.

USDA Rural Development is proud to have been a partner in 2010 with **Hardin County General Hospital** to assist in the *purchase of a new CT Scanner*; **DeWitt/Piatt Bi-County Health Department** to build a *larger, new facility to provide preventive-level services and offer dental services*; **Fairfield Hospital** in the *construction of Horizon Healthcare, a state-of-the-art medical arts complex*. These three healthcare projects, alone, provided improved healthcare options for 58,342 people!

USDA Rural Development can help make possibilities, possible and is indeed committed to the future of our rural communities. To learn more about low-interest loans and grant funds available for rural Illinois, please follow this link. **www.rurdev.usda.gov/il**

IRHA Legislative Committee Request

The IRHA Legislative Committee is in the process of creating the 2011 IRHA State Advocacy Plan and would like your input into the plan. Greg Chance, Chair of the IRHA Legislative Committee will be working with committee members to develop and disseminate the advocacy plan for 2011. If you or your organization has a legislative initiative that will be introduced this Spring and would like it to be included in the IRHA advocacy agenda, please contact Greg Chance at (309) 679-6101 or at gchance@peoriacounty.org.

You are invited to the second webinar in the IL-HITREC Webinar Series!

EHRs: The Good, The Bad, and the Need to be Prepared

Physicians and practices are inundated with information about EHRs on a regular basis. While a lot of it is accurate, you need to have a clear understanding of all your options - and the potential pitfalls! - before making an informed decision. In this webinar, you will hear about things to consider before selecting and implementing an EHR within your practice. This one-hour webinar will be offered on Thursday, December 9, 2010 beginning at noon. Please see the attached flyer or visit www.ilhitrec.org for more information. To register, select <https://student.gototraining.com/617g8/catalog/109085931>. To view IL-HITREC webinar archives, please visit <http://www.ilhitrec-ed.org>.

HHS Announces \$290M Loan Program for Docs in Underserved Areas

* John Commins, for HealthLeaders Media , November 23, 2010

The federal government on Monday unveiled a \$290 million loan repayment program that could reimburse primary care physicians and dentists up to \$60,000 if they agree to practice for two years in medically underserved areas. Health and Human Services Secretary Kathleen Sebelius announced the launch of the application cycle for the National Health Service Corps Loan Repayment Program, during a visit to Total Health Care, a community health center in Baltimore.

"As we continue to seek ways to impact both the primary care workforce shortage and the increasing debt burden on new providers, NHSC serves as a model for addressing both challenges simultaneously," Sebelius said. "Increasing access to primary care physicians who can support the physical and mental well-being of individuals can help prevent disease and illness, and ensure everyone has access to comprehensive, high quality care."

"By the end of FY2011, we expect that over 10,800 clinicians will be caring for more than 11 million people, more than tripling the National Health Service Corps since 2008," says NHSC Director Rebecca Spitzgo. "By 2015, with the historic funding opportunities offered by ARRA and the Affordable Care Act, the Corps will support more than 15,000 new primary care professionals." Providers can apply to the NHSC loan repayment program online.

President's Message

During this week of Thanksgiving, please take time to reflect on the many blessings we enjoy here in Illinois. This Fall's bountiful harvest, the warmth of friends and family, and the gift to provide care and comfort to the many Illinois residents who are suffering this holiday season. Remember to enjoy simple activities with friends and family like playing cards, eating pumpkin pie and playing music. These are the sights and sounds we will always remember. The IRHA Board of Directors wishes you, your friends and families a happy and safe holiday season.

Save the Dates

IRHA Annual Conference

Mark your calendars to attend the 22nd Annual IRHA Conference to be held at the Keller Convention Center, Hilton Garden Inn in Effingham, Illinois from **April 12-14, 2011**. The conference planning committee has done an outstanding job of including a variety of speakers and topics to include: the impact of health care reform on rural providers, health information technology, electronic medical records, and updates on state and national regulatory and legislative initiatives. Please plan to attend one of two pre-conference sessions that will provide additional information to EMS systems and mental health providers in Illinois on April 12th along with a reception at the Firefly Grill & Restaurant.

NRHA Annual Policy Institute

The NRHA Policy Institute, "Taking Charge of Change" will be held in Washington D.C. on **January 24-26, 2011**. The Institute provides an opportunity for state and national leaders to discuss the impact of health care reform and the legislative and regulatory environment in Washington D.C. The Institute also provides an opportunity for state leaders to visit with their congressional members. If you plan to attend the Institute, please let Mary Jane Clark know so that she can coordinate the Illinois delegation prior to the event. For more information or to register for the Institute, click here. www.ruralhealthweb.org/pi

NRHA Annual Conference

The NRHA Annual Conference will be held at the Hilton Hotel in Austin, Texas from **May 3-6, 2011**. The 34th Annual Conference for NRHA will be the perfect opportunity to discuss health care reform from a national perspective and share with colleagues in other states best practices for our rural providers. NRHA's Annual Rural Health Conference is the nation's largest rural health conference, created for all of those with an interest in rural health care, including rural health practitioners, hospital administrators, clinic directors and lay health workers, social workers, state and federal health employees, academics, community members and more

Dental Policy Review Committee

November 3, 2010

1:00-3:00 p.m.

Videoconference between Chicago, IL and Springfield, IL

Members Present: Mary Pat Burgess, Dionne Haney, Julie Janssen, Dr. Mary Hayes, Dr. Indru Punwani, Dr. Sheldon Rosenstein, Dr. Richard Perry, Dr. James Thommes, Dr. Gerald Dismer

Members Absent: Dr. William Goebel, Dr. Ronald Mizer, Dr. James Wahl

Others Attending:

DentaQuest: Sarah Tobias, Nick Barnette, Kelly Pulliam, Krista Smothers
Healthcare and Family Services: Gina Swehla, Debby Saunders, Heidi Johnson, Jim Monk, Shelly DeFrates, Jaci Vaughn, Shannon Stokes

IPHCA: Sharee Clough

UIC – DSCC: Leslie Frederick

IFLOSS: Judy Redick

DCFS: Karen Moredock

Guest: Dr. David Trost, Miles of Smiles

Meeting was called to order by Gina Swehla. Introductions were made.

Old Business

August 4, 2010 Dental Policy Review Committee Minutes:

Minutes from the August 4, 2010 meeting were reviewed. A motion to approve the minutes was made and seconded. Minutes were approved with minor

corrections to names and titles. The minutes, as approved, will be posted to the Dental Program Web site at www.hfs.illinois.gov/dental/

New Business

Ethics Training

Shannon Stokes of the Office of the General Council informed committee members that they must complete mandated Ethics Training for Boards and Commissions by December 22, 2010 and fax the signed the agreement certificate to HFS.

HFS Report

ADA Code D2934 (Esthetic coated stainless steel crown) will be added as a reimbursable code, effective July 1, 2010. The reimbursement rate will be \$73.40 and the code will be added in the DORM. DentaQuest will add the code to their system in the next 24 hours.

It was suggested that a notice to the providers regarding the new code be mailed and posted to the DentaQuest Web Portal.

Shelly DeFrates reported on the Dental Clinic Grant Program. On October 15, 2010, the dental grant application was posted on the HFS Web site. The grant money is for local health departments, Federally Qualified Health Centers, and rural health centers. To qualify applicants must be creating a new dental clinic or expanding an existing dental clinic. Applicants will receive a total of \$100,000 for 2 years (\$70,000 the first year and \$30,000 the second year). The total funding is \$3 million, of which \$180,000 is committed to funding of the second year awards to six previously awarded grantees. \$2,000,000 in funding came from the Capital Development Capital bill. \$1,000,000 in funding is HFS grant money which may be used for supplies, software, renovations, etc. Inquiries from twenty potential grantees have currently been received. Deadline for submission is November 15, 2010.

Gina Swehla reported on the Local Government Claiming process. The State Plan has been amended to allow local entities to claim federal Medicaid match. Local health departments must have a signed interagency agreement before they can be eligible for the federal match. Claiming process is retroactive to October through December 2009.

Heidi Johnson reported on the Fluoride Varnish Initiative, Bright Smiles from Birth, a program that trains medical providers and advanced practice nurses to apply fluoride varnish to children ages 0 to 3 years. Fluoride varnish may be applied up to three times a year for children under 36 months of age. Originally, a pilot program in Cook County, it is moving to statewide expansion.

Gina Swehla reported on Public Act 096-0926 that allows licensed dentists to volunteer their services to not-for-profit health clinics without personally enrolling as a Medicaid provider. The clinics must be enrolled to receive reimbursement. HFS is currently developing the required Administrative Rule for this legislation.

Debby Saunders reported Illinois has been selected to partner with Florida on the CHIPRA project to look at indicators for quality in dental services. She emphasized the need for quality assurance measures in the school and discussed the school program in relation to the “dental home” initiative.

DentaQuest Updates

The Rolling Trend Report was presented.

Sarah Tobias reported on the DentaQuest conversion to the new Windward claims processing system. The new Provider Web Portal is working. Most claims are processing in 1 day. DentaQuest has been testing a portion of the claims to make sure that edits are working correctly in the Windward system.

Illinois State Dental Society

Dionne Haney reported that ISDS meeting next week is on Bridge to Health Smiles education. This is a new component. The focus is on Chicago/Cook County to figure out what clinics are opened, how they are staffed and where did the old equipment for the closed Chicago/Cook County clinics go.

The House of Delegates met the end of September. Covered topics included: availability of four continuing education credit hours to dentists who provide volunteer services and the registration of dental mobile vans through the Illinois Department of Financial and Professional Regulation. Next Mission of Mercy will June 8 and 9, 2012, at Lake County Fairgrounds.

IFLOSS

Judy Redick reported that the next meeting is scheduled in Chicago.

Illinois Department of Public Health—Division of Oral Health

Julie Jansen reported on the Early Childhood Program. FQHC's can now expand oral health in pediatric practices. IDPH held a dental sealant grantee workshop that focused on oral health education and social media. IFLOSS is working to build oral health access and education for special needs/ HIV population.

Lake County Health Department

Preauthorization code D5899 was discussed. Access and ease of use of the DentaQuest IVR system was also discussed.

Illinois Primary Health Care Association

Sharee Clough reported that IPHCA held August workshops. October was the annual conference that hosted 4 dental sessions.

Chicago Public Schools

Mary Pat Burgess reported that there are 93,000 children and 532 schools in the pre-K through grade 8. In August and September CPS worked with Chicago Head Start for exams and dental home follow up. The School-based Dental

Program was delayed until October 15, 2010, because of immunizations. CPS is working with HFS to establish the scheduling of school-based dental exams using the Google calendar. CPS currently has 4 dental teams.

Dr. Mary Hayes reported that despite a successful three years launching and managing the Office of Head Start's (OHS) Dental Home Initiative in nearly 30 U.S. states, the American Academy of Pediatric Dentistry (AAPD) will no longer be responsible for overseeing the program as of December 31, 2010. More information about this can be found at:

<http://www.drbitcuspid.com/index.asp?qu=office+of+head+start&Sec=sea&Sub=res&searchSec=article>

Dr. Punwani discussed the standard of care issue, including the possibility of mandatory dental exams before a child's first birthday.

School-based Program Dental Issues

The school-based program discussed quality assurance issues, what constitutes an exam in the school setting, how should referral be established by the school-based provider, how many children should be seen in a day, how do the school-based providers make sure the 2's and 3's get follow up.

Questions were raised regarding monitoring of dental sealants when provided in a mobile dental van rather than a classroom, and the expansion of the types of dental services provided by a school-based provider using a mobile dental van.

Adjournment: Meeting adjourned at 3:15 pm.

Bills that the Illinois Department of Health and Family Services are monitoring in the current General Assembly Session

SB 1602 – Amends the Illinois Dental Practice Act. Provides a definition for “mobile dental van or portable dental unit”. Creates a provision that requires the Department of Financial and Professional Regulation and Department of Healthcare and Family Services to establish rules for the regulation and registration of all entities or individuals who own or operate a mobile dental van or portable dental unit that provides restorative, screening, or preventative care to patients in schools and other Illinois settings. Provides that the State Board may approve other state or regional board exams if other state or regional board exams are deemed to meet the minimal requirements for licensure in Illinois.

Permits the Department to accept up to 4 hours of continuing education credit hours per license renewal period for volunteers who provide clinical services at or sponsored by, a nonprofit community clinic, local or state health departments, or at a charity event sponsored by an approved dental organization. Makes other changes. Effective January 1, 2012. Sponsor – Sen. Frerichs **Supports**

SB 1919 – Amends the Illinois Dental Practice Act. Provides that a dental hygienist may be employed or engaged by a licensed physician. Provides that a dental hygienist may be

employed or retained by a health care facility, program, or nonprofit organization to perform dental hygiene services without the patient first being examined by a licensed dentist if the dental hygienist (i) has engaged in active practice of clinical dental hygiene for a minimum of 2,400 hours in the past 18 months or a career total of 3,000 hours, (ii) has entered into a collaborative agreement with a licensed dentist, (iii) had documented participation in course in infection control and medical emergencies, and (iv) maintains current CPR certification. Authorizes the dental hygienist to perform limited specified services. Provides that a licensed dentist may not have a collaborative agreement with more than 4 dental hygienist unless otherwise authorized by the Board. Provides that the collaborative agreement must (i) include certain provisions and it must be signed and maintained by the dentist, the dental hygienist, and the facility, program, or organization, (ii) be reviewed yearly, and (iii) be made available to the Board upon request. Effective immediately. Sponsor: Senator Trotter. **No position as of 2/23/2011**

ST 1946 – In addition to amounts already appropriated, the amount of \$150,000 is appropriated from the General Revenue Fund to the Department of Healthcare and Family Services for the purpose of administering and coordinating the Donated Orthodontic Services and the Dental Lifeline Network programs. Effective July 1, 2011. Sponsor: Senator Delgado. **Support**

SB 1948 – Amends the Children’s Health Insurance Program Act, the Covering ALL KIDS Health Insurance Act, and the Medical Assistance Article of the Illinois Public Aid Code. Provides that beginning on July 1, 2011, the Department of Healthcare and Family Services shall develop incentive programs for dentists who perform dental services on children covered under the Children’s Health Insurance Program, the Covering ALL KIDS Health Insurance Program, and the Medicaid program. Requires the incentive programs to include a pilot program in a rural and urban designated shortage area that increases rates up to 64% of the reimbursement level that the dentists charge for those services covered. Provides that the Department shall increase the rate level of dental specialty services that are provided to eligible children to equal 64% of the dentist’s usual and customary charges. Required the Department to develop and implement an incentive program that rewards dentists who are enrolled as a “dental home”. Effective immediately. Sponsor: Senator Delgado. **Oppose (\$\$)**

HB 1191 – Amends the State Employees Group Insurance Act of 1971, Counties Code, Illinois Municipal Code, School Code, Illinois Insurance Code, Health Maintenance Organization Act, and Voluntary Health Services Plans Act. Sets forth definitions for Qualified individual” and “life threatening condition”. Sets forth provisions concerning coverage for routine patient care with regard to denial, limits, additional conditions, and discrimination concerning approved clinical trials according to the trial protocol with respect to the treatment of cancer or other life-threatening diseases or conditions. Amends the Illinois Public Aid Code in the provision concerning medical services to provide that the Department of Healthcare and Family Services shall ensure that cancer patients in need of dental treatment prior to the administration of chemotherapy have access to such dental services and shall develop a mechanism whereby mammography providers may download a standing order via the Internet for screening mammography

for certain women eligible for mammography coverage. Amends the Radiation Protection Act of 1990 in the provision concerning limitations on application of radiation to human beings and requirements for radiation installation operators providing mammography services. Provides that each facility that performs mammograms shall upon request by or on behalf of the patient transfer the original mammograms and copies of the reports without charge to the patient. Makes other changes. Sponsors: Representative Harris and Representative Flowers. **Oppose**
Other legislation of interest:

SB 1363 – Amends the Covering ALL KIDS Health Insurance Act. Provides that to be eligible for benefits under the Act, an individual who is otherwise eligible must be either a United States citizen or included in one of certain specified categories of non-citizens. Provides that the Department of Healthcare and Family Services may, by rule, cover prenatal care or emergency medical care for on-citizens who are not otherwise eligible under these provisions. Provides that nothing in these provisions affects the eligibility status of a child enrolled in the program on the effective date of the amendatory Act. Effective immediately. Sponsor: Senator McCann. **No Position at this time**

Legislative Tracking List 2011

Bills IMCHC supports

HB106 – Rep. Jakobsson - Amends the Abandoned Newborn Infant Protection Act. Changes the definition of "police station" to mean a municipal police station, a county sheriff's office, a campus police department located on any college or university owned or controlled by the State or any private college or private university that is not owned or controlled by the State when employees of the campus police department are present, or any of the district headquarters of the Illinois State Police (rather than a municipal police station, a county sheriff's office, or a campus police department located on any college or university owned or controlled by the State or any private college or private university that is not owned or controlled by the State). Adds an immediate effective date.
Passed the House. Awaits action in the Senate

HB 224 – Rep. Flowers - Amends the Health Carrier External Review Act in the provision concerning standard external review. Provides that whenever a request is eligible for external review (1) the health carrier shall, within 2 (instead of 5) business days, request the Director of Insurance to assign an independent review organization (now, from the list of approved independent review organizations compiled and maintained by the Director) and (2) within 3 business days after receiving the health carrier's request, the Director shall assign, on a rotating basis, an independent review organization from the list of approved independent review organizations compiled and maintained by the Director. Includes the health carrier among those to be notified in writing by the Director of the request's eligibility and acceptance for external review. Effective immediately.

Assigned to Health Care Availability and Access.

Note: This is part of the IL Dept of Insurance's agenda to ensure health insurance fairness

HB 280 – Rep. Flowers - Creates the Premium and Loss Data Reporting Act. Provides that all insurers subject to the Act shall report to the Director of the Division of Insurance accurate and complete information for each accident and health coverage type requested. Sets forth the specific types of accident and health coverage requested for reporting. Imposes conditions on any rulemaking authority.

Assigned to Insurance

Note: This is part of the IL Dept of Insurance's agenda to ensure health insurance fairness

HB 1269 – Rep. Nekritz - Creates the BPA-Free Kids Act. Beginning June 1, 2012, prohibits the sale or distribution of reusable children's food or beverage containers that contain bisphenol-A. Beginning June 1, 2016, prohibits the sale or distribution of infant formula or baby food that is stored in a can, jar, or plastic container that contains bisphenol-A.

Authorizes the Illinois Environmental Protection Agency and the Illinois Department of Public Health to participate in an interstate chemical safety clearinghouse. Requires certain notifications and imposes penalties. Provides for enforcement by the Attorney General.

Assigned to Environmental Health

HB 1270 – Rep. Nekritz - Creates the Toxic Chemical Safety Act. Requires the Director of the Illinois Environmental Protection Agency to publish a list of chemicals of high concern. Authorizes the Director to designate chemicals of high concern and other chemicals as priority chemicals. Requires the Director to report certain information about the designation process to the General Assembly. Requires each manufacturer and distributor of children's products that contain designated chemicals to provide certain information to the Director. Authorizes the Director, under certain circumstances, to prohibit, by rule, the sale and distribution of children's products containing a priority chemical. Requires manufacturers and distributors whose products are subject to one of these rules to file a compliance plan. Authorizes manufacturers and distributors to apply for, and the Director to grant, waivers from these rules. Exempts certain classes of chemicals, persons, and containers. Authorizes the Director to participate in an interstate clearinghouse to promote chemical safety. Authorizes the Director to request certificates of compliance from manufacturers and distributors. Requires the Director to develop certain educational materials. Creates the Advisory Council on Toxic Substances to provide expert and scientific advice to the Director. Authorizes the Director to adopt rules necessary to implement these provisions.

Assigned to Environmental Health

HB 1327 – Rep. Jakobsson - Amends the Liquor Control Act of 1934. Provides that no alcoholic liquor that combines alcohol with caffeine, guarana, or other similar substances that are commonly referred to as "caffeinated alcohol beverages" may be imported into the State or produced, manufactured, distributed, sold, or offered for sale in this State by a licensee under the Act. Makes other changes.

Assigned to Consumer Protection

*****HB 1338 – Rep. Gabel - Creates the Immunization Data Registry Act.** Provides that the Department of Public Health may develop and maintain an immunization data registry to collect, store, analyze, release, and report immunization data. Sets forth purposes for which the registry may be used. Sets forth provisions concerning the provision of immunization data to the registry, confidentiality, and the release of information. Establishes immunity for certain entities from civil and criminal liability for certain actions. Provides that a person who knowingly, intentionally, or recklessly discloses confidential information contained in the

immunization data registry in violation of the Act commits a Class A misdemeanor. Makes other changes. Effective on July 1, 2011.

Assigned to Human Services
IMCHC's bill

HB 1707 – Rep. Gabel - Amends the Child Care Act of 1969. Provides that the benefits of immunization against influenza for children 6 months and older and information on pertussis shall be published on the Department's website. Provides that information on the Department's website for influenza and pertussis shall include the incidence and severity of the diseases, the availability of vaccines, and the importance of immunizing persons against pertussis who frequently have close contact with children. Makes other changes. Effective immediately.

Rules

HB 1958 – Rep. Gabel - Amends the Counties Code, the Unified Code of Corrections, and the County Jail Act. Provides that a county department of corrections and the Illinois Department of Corrections shall not apply security restraints to a prisoner that has been determined by a qualified medical professional to be pregnant and is known by the county department of corrections or the Illinois Department of Corrections to be pregnant or in postpartum recovery, unless the corrections official makes an individualized determination that the prisoner presents a substantial flight risk or some other extraordinary circumstance that dictates security restraints be used to ensure the safety and security of the prisoner, her child or unborn child, the staff of the Illinois Department of Corrections, a county department of corrections, or the medical facility, other prisoners, or the public. Provides that leg irons, shackles, or waist shackles shall not be used on any pregnant or postpartum prisoner regardless of security classification. Amends the Local Governmental and Governmental Employees Tort Immunity Act. Provides that the county department of corrections official is immune from civil liability when applying security restraints to pregnant prisoners or those in postpartum recovery, except for willful and wanton conduct.

Referred to Rules

HB 1961 – Rep. Dan Burke - Creates the School Influenza Vaccination Act. Sets forth legislative findings. Provides that the Department of Public Health shall apply for federal grants and appropriations under the federal Patient Protection and Affordable Care Act (PPACA) to fund, build infrastructure, promote, and expand school-located vaccination programs to provide seasonal influenza vaccinations for school-age children. Sets forth sources from which the Department shall seek grant and appropriations. Provides that the Department shall make information regarding federal grants and appropriations opportunities under PPACA available to certain agencies. Effective on July 1, 2011.

Rules

HB 1094 – Rep. Feigenholtz - Amends the Illinois Insurance Code to provide that, notwithstanding any healthcare provider agreement with any insurer or administrator, no accident and health insurance policy or managed care plan shall charge a copayment that is more than 50% of the total billed charges for services provided to an insured or enrollee during a visit to a healthcare provider.

Assigned to Insurance

HB 1238 – Rep. May - Amends the Illinois Insurance Code. Provides that beginning January 1, 2012, no group or individual policy of accident and health insurance issued in this State that covers hospital or medical expenses, for an insured or the insured's immediate family or children, shall exclude coverage for any condition defined under the Department of Insurance rules as a pre-existing condition.

Assigned to Insurance

HB 1424 – Rep. Feigenholtz - Amends the Illinois Insurance Code. Provides that no company may determine the premium rate or underwriting through a method that is in any way based upon the gender of any person. Amends the Health Maintenance Organization Act to provide that health maintenance organizations shall be subject to the provisions of the Illinois Insurance Code prohibiting gender rating. Effective immediately

Assigned to Insurance

*****HB 1501 – Rep. Greg Harris – Creates the Health Insurance Rate Fairness and Affordability Act.** Sets forth provisions concerning the filing of premium rates with respect to health insurance coverage offered by a health insurance issuer and premium rate changes. Provides that in addition to filing premium rates, a company shall notify the Director of Insurance whenever a policy form has been closed for sale. Sets forth provisions concerning health insurance premium rates and prior approval of the Director. Contains provisions concerning appeal and requests for actuarial reasoning and data. Makes changes to the provision concerning group accident and health insurance. Amends the Health Maintenance Organization Act. Sets forth provisions concerning premium rates and filing and prior approval. Requires that the schedule of base rates for a group or individual contract or evidence of coverage to be used in conjunction with the contract or evidence of coverage be filed with the Director. Further amends the Act to comport with the provisions of the Illinois Insurance Code concerning health insurance premium rates and prior approval. Effective on January 1, 2012.

Referred to Rules

This is part of the IL Dept of Insurance's agenda to ensure health insurance fairness

HB 1530 – Rep. Lang - Amends the Illinois Insurance Code in the provisions concerning autism spectrum disorders, habilitative services for children, and mental and emotional disorders to provide that certain coverage provided under those respective provisions through a group or individual policy of accident and health insurance or managed care plan shall be subject to the parity requirements of the provision concerning mental health parity. Sets forth a provision concerning mental health parity. Provides that every insurer that amends, delivers, issues, or renews a group policy of accident and health insurance in the State providing coverage for hospital or medical treatment and for the treatment of mental, emotional, nervous, or substance use disorders or conditions shall ensure adherence to the provisions concerning financial requirements and treatment limitations. Sets forth provisions concerning aggregate lifetime and annual limits. Amends the Health Maintenance Organization Act to comport with the provision of the Illinois Insurance Code concerning mental health parity. Makes other changes. Effective immediately.

Referred to Rules

This is part of the IL Dept of Insurance's agenda to ensure health insurance fairness

HB 1559 – Rep. Gabel - Amends the Comprehensive Health Insurance Plan Act. Deletes language that provides that State general revenue funds subsidize CHIP

Referred to Rules

HB 1665 – Rep. Gabel - Creates the Home Birth Integration Act. Provides that beginning January 1 2013, Illinois hospitals shall implement emergency transfer protocols for home birth patients developed in collaboration with community midwives or their agent. Sets forth the requirements for the protocols. Provides that the Department of Public Health and the Illinois Council of Certified Professional Midwives or their agent shall jointly develop guidelines for the implementation of the Act. Provides that the guidelines shall be communicated to the trauma center medical directors committees and the medical directors committees of each EMS region in this State within 6 months after the effective date of the Act. Sets forth a provision concerning the powers and duties of the Department and rules and vicarious liability. Amends the Medical Practice Act of 1987 and the Nurse Practice Act to exempt community midwives engaged in the transport and transfer of care of home birth mothers or infants in a case of emergency. Makes other changes.

Referred to Rules

Recommend IMCHC's support

HB 1920 – Rep. Phelps - Amends the Illinois Dental Practice Act. Provides that a dental hygienist may be employed or engaged by a licensed physician. Provides that a dental hygienist may be employed or retained by a health care facility, program, or nonprofit organization to perform dental hygiene services without the patient first being examined by a licensed dentist if the dental hygienist (i) has engaged in active practice of clinical dental hygiene for a minimum of 2,400 hours in the past 18 months or a career total of 3,000 hours, (ii) has entered into a collaborative agreement with a licensed dentist, (iii) had documented participation in course in infection control and medical emergencies, and (iv) maintains current CPR certification. Authorizes the dental hygienist to perform limited specified services. Provides that a licensed dentist may not have a collaborative agreement with more than 4 dental hygienist unless otherwise authorized by the Board. Provides that the collaborative agreement must (i) include certain provisions and it must be signed and maintained by the dentist, the dental hygienist, and the facility, program, or organization, (ii) be reviewed yearly, and (iii) be made available to the Board upon request. Effective immediately.

Referred to Rules

Recommend IMCHC's support – Note that the IL State Dental Society strongly opposes

SB 2 – Sen. Cullerton - Provides that an additional tax of 38 mills per cigarette is imposed beginning March 1, 2011. Provides that an additional tax of 12.5 mills per cigarette is imposed beginning March 1, 2012.

In assignments

SB 50 – Sen. Silverstein - Amends the Liquor Control Act of 1934. Provides that no product that combines beer or any other alcoholic liquor with caffeine, guarana, taurine, or other similar substances that are commonly referred to as "alcohol energy drinks" may be imported into the State or produced, manufactured, distributed, sold, or offered for sale in this State by a licensee under the Act.

Calendar of 3rd reading

SB 55 – Sen. Silverstein - Amends the Illinois Vehicle Code. Makes it unlawful: for a person under the age of 16 to operate or be a passenger on a bicycle unless he or she wears a protective bicycle helmet; for a person who weighs less than 40 pounds or is less than 40 inches in height to be a passenger on a bicycle unless the person can be and is properly seated in and adequately secured to a bicycle safety seat; and for a parent or legal guardian of a person below the age of 12 to permit the person to operate or be a passenger on a bicycle in violation of the foregoing provisions. Provides for a civil penalty, and that moneys collected under this Act shall be deposited into the Share the Road Fund. Provides that, in the case of a first offense in a 12 month period, the court shall waive the civil penalty upon receipt of satisfactory proof that the violator has, since the date of the violation, purchased or otherwise obtained an appropriate protective bicycle helmet or bicycle safety seat. Provides that failure to wear a protective bicycle helmet or to secure a passenger to a restraining seat is not admissible as evidence in a trial of any civil action. Provides that except in cases involving a parent or legal guardian of a person below the age of 12, a law enforcement officer observing a violation of the new provisions shall issue a warning to the person and shall not arrest or take into custody any person solely for a violation. Contains definitions and a statement of purpose. Effective immediately.

Assigned to Public Health

Recommend IMCHC support

SB 119 – Sen. Sandoval - Amends the Illinois Insurance Code. Provides that individual and group policies of accident and health insurance or managed care plans amended, delivered, issued, or renewed after the effective date of the amendatory Act must provide coverage for maternity care.

Assigned to Insurance

IMCHC SUPPORTS

SB 127 – Sen. Sandoval - Creates the Illinois Family and Medical Leave Act. Contains provisions similar to those in the federal Family and Medical Leave Act of 1993, except that it applies to a son-in-law, daughter-in-law, father-in-law, mother-in-law, domestic partner, or sibling who has a serious health condition, increases the leave allowed to 16 workweeks, and some of the provisions of the federal law pertaining to federal employees, federal matters, and the 2008 amendments have been omitted or changed. Contains provisions concerning applicability and coordination. Effective 6 months after becoming law.

Assigned to Labor

SB 128 - Sen. Sandoval - Creates the Healthy Workplace Act. Requires an employer to provide an employee up to 7 sick days with pay during each 12-month period. Provides that an employee may use the sick days care for physical or mental illness, injury, medical condition, professional medical diagnosis or care, or a medical appointment of the employee or a family member. Contains provisions regarding: accrual; certification; notice; responsibilities of employers; unlawful practices; powers and duties of the Department of Labor; violations; penalties; civil liability; severability; and other matters.

Assigned to Labor

SB 150 – Sen. Raoul - Creates the Protecting Our Student Athletes Act. Provides that the Act applies to all schools and park districts within this State that operate or sponsor athletic programs or extracurricular activities. Requires the State Board of Education and park districts to develop and disseminate guidelines on policies to inform and educate coaches and

athletes and their parents or guardians of the nature and risk of concussions, criteria for removal from and return to play, and the risks of not reporting the injury and continuing to play. Requires each school and park district to develop and implement policies and procedures to ensure compliance with the guidelines, as well as the identification and handling of suspected concussions in athletes. Sets forth what the policies must require. Contains provisions concerning liability and records of compliance. Effective July 1, 2011. Assigned to Public Health

SB 1379 – Sen. Syverson - Amends the Public Water Supply Regulation Act. Provides that the rules of the Illinois Department of Public Health concerning the addition of fluoride to public water supplies shall incorporate the recommendations on optimal fluoridation for community water levels as proposed and adopted by the U.S. Department of Health and Human Services. Effective immediately.

In Assignments

Recommend IMCHC's support

SB 1329 – Sen. Schoenberg - Amends the Tanning Facility Permit Act. Provides that a tanning facility may not permit any person less than 18 years of age to use the facility, regardless of whether such a person has the permission of a parent or guardian to use the facility.

In Assignments

Recommend IMCHC's support

SB 1313 – Sen. Schoenberg - Amends the Comprehensive Health Insurance Plan Act. Makes changes in the provisions concerning findings and definitions. Provides that assessments (instead of appropriated funds) and other revenues collected or received by the Comprehensive Health Insurance Board shall be included in the Comprehensive Health Insurance Plan Fund. Deletes a provision concerning eligibility. Makes changes to the provision concerning deficit or surplus. Effective immediately.

In Assignments (Also see HB 1559)

SB 1565 – Sen. Lightford - Amends the Minimum Wage Law. Provides for fewer limitations on the definition of "employee." Provides a procedure for increasing the minimum wage annually to restore the minimum wage to its historic level and thereafter increasing the minimum wage by the increase in the cost of living during the preceding year. Deletes language pertaining to temporary or irregular employees and employees under the age of 18. Provides for an increased amount of damages recoverable by an employee that is paid less than the wage to which he is entitled to under the Minimum Wage Law. Effective immediately.

In Assignments

SB 1618 – Sen. Steans - Amends the Illinois Insurance Code. Provides that a health insurance issuer offering group or individual health insurance coverage shall, with respect to each plan year, provide an annual rebate to each enrollee under such coverage, on a pro rata basis, if the medical loss ratio for the plan year meets specified criteria. Sets forth guidelines for calculating the medical loss ratio. Effective immediately.

In Assignments

Note: This is part of the IL Dept of Insurance's agenda to ensure health insurance fairness

*****SB 1619 – Sen. Steans - Creates the Personal Responsibility Education Program Act.**

Provides that if an elementary or secondary public school offers sex education or sexual health education, the education must be medically accurate and developmentally and age appropriate and must include instruction regarding the benefits of delaying or abstaining from sexual activity. Requires school districts to make curriculum and course materials available for viewing upon request. Provides that a pupil must be excused for any part of the instruction at the written request of his or her parent or guardian. Provides that a pupil must not be subject to disciplinary action, an academic penalty, or any other sanction if the pupil's parent or guardian requests in writing that the pupil not receive the instruction. Requires the Department of Human Services to adopt rules; specifies requirements for the rules. With respect to teen pregnancy prevention and sexual health education, requires this State, through the appropriate State agency or department, to seek available funds from the federal government allocated to evidenced-based teen pregnancy prevention programs. Amends the School Code to make changes concerning sex education course material and instruction requirements. Amends the Critical Health Problems and Comprehensive Health Education Act to replace references from "abstinence until marriage" to "abstinence" in a Section setting forth what areas the comprehensive health education program must include.

In Assignments

*****SB 1729 – Sen. Koehler - Establishes an Illinois Health Benefits Exchange** to facilitate the purchase of affordable health insurance coverage by Illinois families and small employers beginning January 1, 2014.

In Assignments

Note: This is part of the IL Dept of Insurance's agenda to ensure health insurance fairness

SB 1761 – Sen. Righter - Amends the Newborn Metabolic Screening Act. Provides that the Department of Public Health shall provide newborns with expanded screening tests for the presence of Mucopolysaccharidosis I (Hurler disease), Mucopolysaccharidosis II (Hunters disease), and Severe Combined Immunodeficiency Syndrome (SCIDS). Provides that if the Department is unable to provide expanded screening for SCIDS using the State Laboratory within 180 days after the effective date of the amendatory Act, then the Department shall temporarily provide the screening through an accredited laboratory selected by the Department until the Department has the capacity to provide screening through the State Laboratory. Permits the Department to substitute the fee charged by the accredited laboratory, plus a 5% surcharge for documentation and handling for the fee authorized if expanded screening is provided on a temporary basis through an accredited laboratory.

Effective immediately.

In Assignments

Recommend IMCHC's support

SB 1812 – Sen. Link - Amends the Illinois Insurance Code. Adds definitions. Makes changes in the provisions concerning woman's principal health care provider and dependent coverage. Sets forth provisions concerning woman's health care providers; coverage of preventative services; annual and lifetime limits; reinstatement of coverage; patient protections; choice of health care professional; access to pediatric care; patient protections; coverage of emergency services; coverage for children with preexisting conditions; and health insurance rescissions and notice and hearing. Makes changes to the provision concerning accident and health reporting (now, accident and health expense reporting). Amends the Health Maintenance Organization Act to comport with the Illinois Insurance Code. Effective immediately

In Assignments

Note: This is part of the IL Dept of Insurance's agenda to ensure health insurance fairness

SB 1919 – Sen. Trotter - Amends the Illinois Dental Practice Act. Provides that a dental hygienist may be employed or engaged by a licensed physician... see HB 1903.

In Assignments

Recommend IMCHC's support

SB 1945 – Sen. Delgado - Creates the Comprehensive Healthcare Workforce Planning Act. Establishes the State Healthcare Workforce Council to provide an ongoing assessment of health care workforce trends, training issues, and financing policies and to recommend appropriate State government and private sector efforts to address identified needs. Provides that the Council's work shall focus on health care workforce supply and distribution; cultural competence and minority participation in health professions education; primary care training and practice; and data evaluation and analysis. Contains provisions concerning members; the preparation of a comprehensive healthcare workforce plan by the Department of Public Health and the Council; and reimbursement of Council members.

In Assignments

Recommend IMCHC's support

SB 1948 – Sen. Delgado - Amends the Children's Health Insurance Program Act, the Covering ALL KIDS Health Insurance Act, and the Medical Assistance Article of the Illinois Public Aid Code. Provides that beginning on July 1, 2011, the Department of Healthcare and Family Services shall develop incentive programs for dentists who perform dental services on children covered under the Children's Health Insurance Program, the Covering ALL KIDS Health Insurance Program, and the Medicaid program. Requires the incentive programs to include a pilot program in a rural and urban designated shortage area that increases rates up to 64% of the reimbursement level that the dentists charge for those services covered. Provides that the Department shall increase the rate level of dental specialty services that are provided to eligible children to equal 64% of the dentist's usual and customary charges. Requires the Department to develop and implement an incentive program that rewards dentists who are enrolled as a "dental home". Effective immediately.

In Assignments

Recommend IMCHC's support

Bills IMCHC opposes

HB 18 – Rep. Tracy – In the provision concerning eligibility, adds the requirement that a person must be a child who has a household income equal to or less than 300% of the federal poverty guidelines. Provides that a child who is determined to be eligible shall remain eligible for 12 months, provided that the child has not gained access to affordable employer-sponsored dependent health insurance. Provides that the parent, guardian, or legal custodian of an enrolled child shall report promptly those changes in income and other circumstances that affect eligibility within 30 days after the occurrence of the change. Provides that the eligibility of a child may be redetermined based on the information reported or may be terminated based on the failure to report or failure to report accurately.

Assigned to Executive

IMCHC also believes that these provisions have already been taken care of with Medicaid reform.

HB 1569 – Bellock - Creates the availability of health savings accounts (HSAs) as a health insurance option for state employees, but would bar the use of state-contributed HSA funds to pay for abortion-related expenses, unless the abortion was necessary to save the pregnant woman's life.

Assigned to Insurance

Note: Other reproductive health advocates also oppose.

HB1919 – Phelps - Creates the Ultrasound Opportunity Act. Sets forth legislative findings and definitions. Provides that at any facility where abortions are performed the physician who is to perform the abortion, the referring physician, or another qualified person working in conjunction with either physician shall offer any woman seeking an abortion after 6 weeks of gestation an opportunity to receive and view an active ultrasound of her unborn child by someone qualified to perform ultrasounds at the facility, or at a facility listed in a listing of local ultrasound providers provided by the facility, at least one hour prior to the woman having any part of an abortion performed or induced, and prior to the administration of any anesthesia or medication in preparation for the abortion. Provides that the Department of Public Health shall prepare and make available a reporting form, to be submitted by each abortion facility to the Department annually.

Note: Other reproductive health advocates also oppose.

SB 1363 – Sen. McCann - Amends the Covering ALL KIDS Health Insurance Act. Provides that to be eligible for benefits under the Act, an individual who is otherwise eligible must be either a United States citizen or included in one of certain specified categories of non-citizens. Provides that the Department of Healthcare and Family Services may, by rule, cover prenatal care or emergency medical care for non-citizens who are not otherwise eligible under these provisions. Provides that nothing in these provisions affects the eligibility status of a child enrolled in the program on the effective date of the amendatory Act. Effective immediately.

In Assignments

SB 2047 – Sen. Pankau – Puts \$10,000 asset limit for All Kids and Medicaid.

In Assignments

SB 2051 – Sen. Pankau – Makes undocumented children ineligible for All Kids.

In Assignments

SB 2173 – Sen. Brady - Provides that a department or agency of the State shall not implement any part of any federal health care reform passed by the U.S. Congress on or after March 1, 2010, unless certain conditions are present.

In Assignments

SJR 18 – Sen. Brady – Calls for repeal of Affordable Care Act by Congress.

In Assignments

Bills IMCHC is monitoring

HB 200 – Rep. Cross - Amends the School Code. Requires a school board to work in concert with the Illinois High School Association to develop guidelines and other pertinent information and forms to inform and educate coaches, student athletes, and these athletes' parents and guardians of the nature and risk of concussions and head injuries, including continuing to play after a concussion or head injury. Requires the concussion and head injury information sheet to be signed and returned by a student athlete and the athlete's parent or guardian prior to the student athlete's initiating practice or competition. Provides that a school board shall adopt a policy requiring a student athlete who is suspected of sustaining a concussion or head injury in a practice or game to be removed from competition at that time. Requires the policy to provide that a student athlete who has been removed from play may not return to play until the student athlete is evaluated by a licensed health care provider trained in the evaluation and management of concussions and head injuries and the student athlete receives written clearance to return to play from that health care provider.
Assigned to Elementary and Secondary Ed

HB 291 – Rep. Flowers - Requires the Department of Public Health to establish a 3-year pilot program for the Chicago school district in which the Department shall require an electrocardiogram (EKG) test as part of the health examination that student athletes are required to undergo.
Assigned to Elementary and Secondary Ed
Note that IPHA opposes

HB 1350 – Rep. May - Amends the State Employees Group Insurance Act of 1971. Provides that small businesses may be provided group health coverage under the Act. Limits small businesses to those with 50 or fewer employees. Specifically allows for payment for coverage by the employees. Provides that employees that have other coverage do not have to enroll in the coverage. Authorizes the use of State funds, pursuant to appropriation, in operating the plan. Provides for the utilization of insurance producers in the marketing of the plans. Makes other changes concerning domestic violence shelters and services. Amends the State Finance Act to provide for payments made on behalf of the small business employees to be deposited into the Small Employers Health Insurance Reserve Fund.
Assigned to State Government Administration

HB 1478 – Rep. Flowers - Amends the Chicago School District Article of the School Code. Provides that under the Chicago Board of Education's policies and rules concerning infectious disease, the Board shall require that all students wash their hands with a soap or detergent before consuming any meal at school and shall identify nationally accepted standards from the Centers for Disease Control and Prevention and provide the facilities, materials, and supervision necessary to implement the handwashing requirement. Amends the State Mandates Act to require implementation without reimbursement.
Assigned to Elementary and Secondary Education

HB 1568 – Rep. Mayfield - Amends the School Code. Provides that mandate waivers may not be requested from laws and rules pertaining to physical education. Effective immediately.
Rules

HB 1903 – Rep. Leitch - Amends the Medical Assistance Article of the Illinois Public Aid Code. Provides that for the purpose of measuring and publicly reporting the quality, efficiency, and effectiveness of healthcare services received by medical assistance recipients,

the Department of Healthcare and Family Services shall make available to certain not-for-profit corporations standardized extracts of data on the claims paid by the Department to healthcare providers for services rendered to medical assistance recipients in specific geographic areas. Sets forth the criteria a not-for-profit corporation must meet in order to qualify for such disclosure. Contains provisions concerning costs and funding; and the disclosure of certain data by managed care organizations, healthcare providers, or other companies under contract with the Department for the delivery of care to medical assistance recipients.

Referred to Rules

SB 1602 – Sen. Frerichs - Amends the Illinois Dental Practice Act. Provides a definition for "mobile dental van or portable dental unit". Creates a provision that requires the Department of Financial and Professional Regulation and Department of Healthcare and Family Services to establish rules for the regulation and registration of all entities or individuals who own or operate a mobile dental van or portable dental unit that provides restorative, screening, or preventative care to patients in schools and other Illinois settings. Provides that the State Board may approve other state or regional board exams if other state or regional board exams are deemed to meet the minimal requirements for licensure in Illinois. Permits the Department to accept up to 4 hours of continuing education credit hours per license renewal period for volunteers who provide clinical services at or sponsored by, a nonprofit community clinic, local or state health departments, or at a charity event sponsored by an approved dental organization. Makes other changes. Effective January 1, 2012.

In Assignments

Last updated 2-28-11

