

# THE FLINN REPORT

ILLINOIS GENERAL ASSEMBLY  
JOINT COMMITTEE ON ADMINISTRATIVE RULES

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The Flinn Report is a weekly summary of regulatory actions of State agencies published in the *Illinois Register* and action taken by the Illinois General Assembly's Joint Committee on Administrative Rules (JCAR). The Flinn Report honors founding JCAR member Representative Monroe Flinn, and is designed to inform and involve the public in changes taking place in agency administration.

## Proposed Rulemakings

### ▪ EMERGENCY MEDICAL SERVICES

The DEPARTMENT OF PUBLIC HEALTH proposed amendments to Emergency Medical Services, Trauma Center, Comprehensive Stroke Center, Primary Stroke Center and Acute Stroke Ready Hospital Code (77 IAC 515; 48 Ill Reg 95) that align the Part with current statute, national and state standards of emergency service, and current EMS system and provider practice. The rulemaking changes the name of the Part to Emergency Medical Services, Trauma Centers, Pediatric Emergency and Critical Care Centers, Stroke Centers and Hospital Code and updates incorporated statutes, rules and professional standards. The State-administered Emergency Medical Technician and Paramedic examinations, and their associated exam fees, are abolished and only the National Registry of Emergency Medical Technicians (NREMT) licensing exams are now required. Application for EMT or

Paramedic licensure must be made within 24 months after passing the NREMT exam. The late renewal fee is increased from \$50 to \$100. For honorably discharged military veterans, initial licensing fees are waived and future renewal fees are reduced by one-half. Specifications for the types of cases that should and

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should not be included in quarterly morbidity and mortality reviews of trauma cases have been removed. Each EMS region must establish a Pediatric Quality Improvement Subcommittee that will meet quarterly. Provisions for federally funded bioterrorism grants for which hospitals apply individually are being replaced by a general hospital disaster/all-hazards preparedness grant program for which DPH will distribute funding. Vehicle service providers (e.g., ambulance services)

must pay an annual licensing fee of \$35 (currently \$25) per vehicle for 99 or fewer vehicles; providers with 100 or more vehicles pay a flat annual fee of \$3,500 (currently \$2,500). A late fee of \$25 per vehicle, for up to 100 vehicles, will be charged if license renewal is 30 days or more late. Vehicle service providers must have a designated Pediatric Emergency Care Coordinator in charge of preparing personnel to care for sick and injured children. Requirements for vehicle equipment, including obstetrical kits and other devices, are updated. Stretcher van licenses will be valid for 4 years (currently, 1 year) and will remain valid as long as annual inspections are passed and current fees are paid. Other provisions update training and licensing requirements for Trauma Nurse Specialists; clarify that a critical care medical director must be an Illinois-licensed practicing

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**ADOPTED RULES:** Rules adopted by agencies this week. **EMERGENCY RULES:** Temporary rules adopted for no more than 150 days.

**PROPOSED RULEMAKINGS:** Rules proposed by agencies this week, commencing a First Notice public comment period of at least 45 days.

**PEREMPTORY RULES:** Rules adopted without prior public notice or JCAR review as authorized by 5 ILCS 100/5-50.

▪ - Designates rules of special interest to small businesses, small municipalities and/or non-profit organizations. Agencies must consider comments from these groups and attempt to minimize regulatory burdens on them.

**QUESTIONS/COMMENTS:** Submit mail, e-mail or phone calls to the agency personnel listed below each summary.

**RULE TEXT:** First Notice proposed text, emergency rule and peremptory rule text is available at the Secretary of State website (<https://www.ilsos.gov/departments/index/register/home.html>) or at the Illinois General Assembly website (<http://www.ilga.gov>) under "Illinois Register". Second Notice text for proposed rulemakings (original version with any changes made by the agency during First Notice included) is available at the JCAR website.

# Proposed Rulemakings

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physician with competency in critical care transport medicine; establish procedures for administering OSHA respirator medical evaluations to fire fighters; clarify how medical transport providers submit patient care run reports to receiving hospitals; recognize advance medical directives (Do Not Resuscitate or Physician/Practitioner Orders for Life Sustaining Treatment) issued in another state or created using a national template; and make technical updates to medical terminology, emergency medical personnel titles, and communications systems. Hospitals, ambulance and medical transportation services, EMTs, Paramedics, and other first responders are affected by this rulemaking.

## • TB SCREENING

DPH also proposed amendments to Control of Tuberculosis Code (77 IAC 696; 48 Ill Reg 437) that incorporate recommendations from the federal Centers for Disease Control and Prevention, update testing and reporting requirements for suspected and confirmed cases of latent tuberculosis infection (LTBI) and include symptom evaluation in the screening process for newly hired health care workers and child care workers. Persons whom DPH states may be at greater risk for LTBI include foreign-born persons from countries outside of the U.S., Canada, Australia, New Zealand, or western and northern Europe; persons who reside in or have traveled to areas with high prevalence of active tuberculosis; close contacts of persons known to have active TB; local populations with a higher incidence of active TB, which

may include medically underserved populations or persons with substance use disorders; and infants, children, and adolescents who are exposed to higher risk adults. Health care and child care workers and local health departments may be affected by this rulemaking.

*Questions/requests for copies/comments on the 2 DPH rulemakings through 2/20/24: Tracey Trigillo, DPH, 524 S. Second St., 6<sup>th</sup> Floor, Springfield IL 62701, [dph.rules@illinois.gov](mailto:dph.rules@illinois.gov)*

## • SCALE INSPECTIONS

The DEPARTMENT OF AGRICULTURE proposed an amendment to the Part titled Weights and Measures Act (8 IAC 600; 48 Ill Reg 1) increasing the fees DOA charges for inspecting commercial scales, motor fuel pumps, and other weighing and measuring devices. For commercial scales, fees will range from \$30 (currently \$20) for scales with a capacity of up to 30 pounds to \$300 (currently \$200) for scales with a capacity of greater than 2,000 pounds. The fee for livestock scale inspections is being increased from \$300 to \$450. Other fee increases include: motor fuel dispensers up to 20 gallons per minute, \$34 (currently \$23.50); motor fuel dispensers of 20 or more gallons per minute, \$75 (currently \$50); grain moisture meters, \$150 (currently \$100); railroad track scales, \$187.50 (currently \$125) per hour; use of a scale truck, \$300 (currently \$200) per hour. Gas stations, grocery stores, meat lockers, grain elevators, and other businesses that use DOA-inspected scales or dispensers are affected.

*Questions/requests for copies/comments through 2/20/24: Clay Nordsiek, DOA, State Fairgrounds, P. O. Box 19281, Springfield IL 62794-9281, 217-782-*

*9013, fax 217-785-4505, [Clay.Nordsiek@illinois.gov](mailto:Clay.Nordsiek@illinois.gov)*

## STATE EMPLOYEES

The DEPARTMENT OF CENTRAL MANAGEMENT SERVICES proposed amendments to Classification and Pay (80 IAC 301; 48 Ill Reg 8), Merit and Fitness (80 IAC 302; 48 Ill Reg 12), Conditions of Employment (80 IAC 303; 48 Ill Reg 66), General Provisions (80 IAC 304; 48 Ill Reg 76), and Extensions of Jurisdiction (80 IAC 305; 48 Ill Reg 81).

## Competitive Selection

The Part 302 rulemaking replaces job candidate entrance examinations and eligible lists of persons who have passed examinations with “competitive selection” processes and broadens the potential means by which candidates may be evaluated and hired. It requires the Director of CMS to implement policies and practices designed to determine the relative fitness of employment candidates. Testing or an equivalent process must be job related and may be written, oral, demonstrative of skill or physical fitness, or consist of an evaluation of training and experience. Applicants shall not be questioned concerning non-merit matters except as necessary to meet the requirements of State law or policy. Preference for veterans in State hiring will be implemented by adding points “or the equivalent” to their applicable scores (currently, entrance examination grades) based on their status as a disabled, wounded, wartime or peacetime veteran. Category ratings no longer require veterans to be given preference over non-veterans in the same category. Emergency appointments, currently limited to 60 days, may be extended to 90 days if needed to address a threat

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# Proposed Rulemakings

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to the health, safety or welfare of State employees or residents. Voluntary reductions in classification or grade no longer require approval of the CMS Director. Other provisions clarify and update procedures for appointments, term appointments, alternative employment, promotions, transfers, layoff and recall, and probationary periods; update provisions regarding trainees and continuous service; and abolish the practice of applicants specifying their geographic preference for job openings. Finally, cause for discharge is limited to repeated or serious misconduct, willful insubordination or disobedience, gross and habitual neglect of duties, fraud or willful breach of trust, loss of confidence, commission of a crime or offense, or other similar conduct that creates a reasonable basis for termination. (Existing rule states that cause for discharge consists of “some substantial shortcoming” that renders continuance of the employee “in some way detrimental to the discipline and/or efficiency of the service” and that “the law or sound public opinion recognizes as good cause” for termination.)

## Other

Amendments to Part 301 allow the Director of CMS, after reconsidering a position classification decision at the incumbent employee’s request, to

notify the employee of the final decision by e-mail, U.S. Mail, or “any other appropriate method” (currently, notification must be in person or by certified U.S. Mail with return receipt). Amendments to Part 303 add Juneteenth as a paid holiday for all State employees; permit up to 5 weeks paid bereavement leave for parents of any stillborn child (currently, a full-term stillborn child); require that an employee’s failure to give written notice of resignation be noted on the document that effects the resignation; allow the CMS Director to determine vacation time for new employees not covered by a collective bargaining agreement; and remove a provision excluding travel time from overtime calculations. The Part 304 rulemaking makes technical changes and removes an obsolete statutory provision. Finally, changes to Part 305 implement an amendment to the Personnel Code stating that extensions of Personnel Code jurisdiction on or after 6/28/23 must be maintained in CMS records but no longer have to be adopted in rule.

*Questions/requests for copies/comments on the 5 CMS rulemakings through 2/20/24: Administrative Rules Coordinator, CMS, 313 S. Sixth St., 3<sup>rd</sup> Floor, Springfield IL 62702, 217-782-9669, CMS.Rule@illinois.gov*

## FOSTER CARE

The DEPARTMENT OF CHILDREN AND FAMILY SERVICES proposed amendments to Permanency Planning (89 IAC 315; 48 Ill Reg 85) that align

the Part with federal requirements under Title IV-E of the Social Security Act (which provides federal funds for foster care programs). The rulemaking describes the requirements for assessment driven, trauma-informed permanency planning that is focused on the child and family’s identified strengths and needs. Service/case plans for a child’s placement must ensure educational stability by taking into account appropriateness and proximity to the child’s school, and if the child cannot remain enrolled in the same school, must include a plan for enrolling in a new school. Child and family teams must comply with recordkeeping and procedural requirements established in federal law, including preference for keeping a child in the same household with siblings unless a court finds such placement to not be in the child’s best interest.

*Questions/requests for copies/comments through 2/20/24: Jeff Osowski, DCFS, 406 E. Monroe St., Station #65, Springfield IL 62701-1498, 217-524-1983, fax 217-557-0692, [DCFS.Policy@illinois.gov](mailto:DCFS.Policy@illinois.gov)*

# Adopted Rule

## HOSPITALS

The DEPARTMENT OF PUBLIC HEALTH adopted amendments to Hospital Licensing Requirements (77 IAC 250; proposed at 47 Ill Reg 11724) effective 12/20/23 at 48 Ill Reg 450, clarifying that general acute care and critical access hospitals that provide limited inpatient or observation services to pediatric patients must have consultation agreements with a children's hospital or another hospital's pediatric unit unless the hospital has a board-certified or board

-eligible pediatrician either in the hospital or on call 24/7. If a consultation agreement is needed, the hospital must have provider-to-patient or provider-to-provider electronic communication that meets telemedicine requirements. (Since 1<sup>st</sup> Notice, DPH has extended the deadline for hospitals to comply with the consultation agreement requirements from 9/1/23 to 6/1/24.) The rulemaking also clarifies that pediatric patients include newborns less than 28 days old and infants or children through age 14. Other provis-

ions clarify that placental tissues do not need to be examined by a pathologist upon removal unless specifically requested by the delivering physician or practitioner; update references to the federal Clinical Laboratory Improvement Amendments of 1988 (CLIA regulations); and correct an erroneous cross-reference.

*Questions/requests for copies: Tracey Trigillo, DPH, 524 S. Second St., 6<sup>th</sup> Floor, Springfield IL 62701, [dph.rules@illinois.gov](mailto:dph.rules@illinois.gov)*

# Second Notices

The following rulemakings were moved to Second Notice this week by the agencies listed below, commencing the JCAR review period. The HFS rulemaking will be considered at the January 16 meeting, while the DHS rulemaking will be considered at the February 6 meeting. Other items not published in the *Illinois Register* or The Flinn Report may also be considered. Further comments concerning these rulemakings should be addressed to JCAR at [jcar@ilga.gov](mailto:jcar@ilga.gov).

**DEPT OF HEALTHCARE AND FAMILY SERVICES**  
Medical Payment (89 IAC 148; 47 Ill Reg 1145) proposed 1/27/23

**DEPT OF HUMAN SERVICES**  
Eligibility (89 IAC 682; 47 Ill Reg 14099) proposed 10/13/23

### Next JCAR Meeting: Tuesday, Jan. 16, 10:30 a.m.

Room D-1, Stratton Bldg., 401 S. Spring St., Springfield  
Meeting will be live streamed on the JCAR website

### Joint Committee on Administrative Rules

Senator Bill Cunningham, Co-Chair  
Senator Cristina Castro  
Senator Donald DeWitte  
Senator Dale Fowler  
Senator Napoleon Harris, III  
Senator Sue Rezin

Representative Ryan Spain, Co-Chair  
Representative Eva-Dina Delgado  
Representative Jackie Haas  
Representative Steven Reick  
Representative Curtis Tarver, II  
Representative Dave Vella

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