

DEPARTMENT OF PUBLIC HEALTH

JANUARY 2012 REGULATORY AGENDA

- a) Part(s) (Heading and Code Citation): Asbestos Abatement for Public and Private Schools and Commercial and Public Buildings in Illinois (77 Ill. Adm. Code 855)
- 1) Rulemaking:
- A) Description: This rulemaking will amend the existing rules to update and clarify the incorporated materials and referenced documents; add definitions for terms associated with asbestos consultants, professionals and designated persons; increase licensing fees for workers and professionals; license asbestos consultants; revise provisions concerning emergency stop work orders; clarify the Department's authority to protect the public from asbestos exposure; clarify notification requirements and procedures and clearance air sampling procedures for abatement of asbestos in commercial and public buildings; add removal procedures for whole floor tile specific to commercial and public buildings and schools; and include provisions regarding standards for floor tile supervisor and worker training.
- B) Statutory Authority: Section 6(b)(i)(2)(d) of the Asbestos Abatement Act [105 ILCS 105] and the Commercial and Public Building Asbestos Abatement Act [225 ILCS 207]
- C) Scheduled meeting/hearing dates: State Board of Health
- D) Date agency anticipates First Notice: Spring 2012
- E) Effect on small businesses, small municipalities, or not-for-profit corporations: It is anticipated that the proposed changes will have a minimum impact on the regulated industry.
- F) Agency contact person for information:
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- G) Related rulemakings and other pertinent information: None
- b) Part(s) (Heading and Code Citation): [Illinois Plumbing Code](#) (77 Ill. Adm. Code 890)
- 1) Rulemaking:
- A) Description: This rulemaking will mend the existing rules to update and clarify the incorporated materials and referenced documents; clarify fixture trap vent requirements; add installation of wet venting procedures; add and amend illustrations; amend plumbing materials, equipment, use restrictions, and applicable standards.
- B) Statutory Authority: Illinois Plumbing License Law [225 ILCS 320]; Public Utilities Act [220 ILCS 5/13-709]; State Finance Act (Plumbing Licensure and Program Fund) [30 ILCS 105/5.332]
- C) Scheduled meeting/hearing dates: State Board of Health
- D) Date agency anticipates First Notice: Spring 2012
- E) Effect on small businesses, small municipalities, or not-for-profit corporations: It is anticipated that the proposed changes will have a minimum impact on the regulated industry.
- F) Agency contact person for information:
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- G) Related rulemakings and other pertinent information: None
- c) Part(s) (Heading and Code Citation): Structural Pest Control Code (77 Ill. Adm. Code 830)
- 1) Rulemaking:

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- A) Description: These proposed amendments will clarify the application and renewal requirements for obtaining a license, registration or certification under the Act; clarify the recertification requirements regarding continuing education hours and recertification seminars; establish additional areas subject to administrative fines; establish the requirements for obtaining approval on seminars for integrated pest management in schools and licensed day care centers; and clarify the pesticide application record keeping requirements of the Code.
- B) Statutory Authority: Structural Pest Control Act [225 ILCS 235]
- C) Scheduled meeting/hearing dates: Advisory Council November 2011 and State Board of Health Spring 2012
- D) Date agency anticipates First Notice: Spring 2012
- E) Effect on small businesses, small municipalities, or not-for-profit corporations: This rulemaking will affect structural pest control businesses, their technicians and those desiring to sponsor recertification seminars for pest control technicians and seminars for schools or licensed day care centers on integrated pest management.
- F) Agency contact person for information:
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- G) Related rulemakings and other pertinent information: None
- d) Part(s) (Heading and Code Citation): Illinois Water Well and Pump Installation Contractor's License Code (77 Ill. Adm. Code 915)
- 1) Rulemaking:

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- A) Description: The proposed amendments will clarify requirements for applicants taking the water well and pump installation contractor license examinations; clarify requirements for approving continuing education sessions; and establish new Sections pertaining to definitions, incorporated and referenced materials, expiration renewal, reinstatement, and restoration of licenses, revocation or suspension of a license, administrative hearings, and listing for licensed contractors.
- B) Statutory Authority: Illinois Water Well Construction Code [225 ILCS 345]
- C) Scheduled meeting/hearing dates: State Board of Health
- D) Date agency anticipates First Notice: Winter 2012
- E) Effect on small businesses, small municipalities, or not-for-profit corporations: No effect
- F) Agency contact person for information:
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- G) Related rulemakings and other pertinent information: None
- e) Part(s) (Heading and Code Citation): Illinois Water Well Construction Code (77 Ill. Adm. Code 920)
- 1) Rulemaking:
- A) Description: This rulemaking will clarify and expand existing language pertaining to the construction, sealing and modification of water wells; implement the provisions of Public Act 97-0363 regarding the registration of closed loop well contractors and the permitting of closed loop well systems.

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- B) Statutory Authority: Illinois Water Well Construction Code [415 ILCS 30]
- C) Scheduled meeting/hearing dates: State Board of Health
- D) Date agency anticipates First Notice: Winter 2012
- E) Effect on small businesses, small municipalities, or not-for-profit corporations: Will affect manufacturers of buried slabs for bored wells, closed loop well contractors, and owners of closed loop well systems.
- F) Agency contact person for information:
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- G) Related rulemakings and other pertinent information: None
- f) Part(s) (Heading and Code Citation): Lead Poisoning Prevention Code (77 Ill. Adm. Code 845)
- 1) Rulemaking:
- A) Description: The amendments will revise the maximum allowable limit of lead in children's products as identified by the Consumer Products Safety Commission. Additionally, the amendments will clarify the warning statement required for items that exceed the 40 parts per million lead content as identified in Public Act 97-0612, effective January 1, 2012.
- B) Statutory Authority: Lead Poisoning Prevention Act [410 ILCS 45]
- C) Scheduled meeting/hearing dates: State Board of Health.
- D) Date agency anticipates First Notice: Spring 2012

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- E) Effect on small businesses, small municipalities, or not-for-profit corporations: It is anticipated that the proposed changes will have minimum impact on the regulated industry since the proposed revisions are currently found in the corresponding federal rules.
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- G) Related rulemakings and other pertinent information: None
- g) Part(s) (Heading and Code Citation): Private Sewage Disposal Code (77 Ill. Adm. Code 905)
- 1) Rulemaking:
- A) Description: The amendments reflect required prescriptive mandates recently modified in the Private Sewage Disposal Licensing Act, approval of new subsurface private sewage disposal systems, and requirements on the use of suitable soils for subsurface private sewage disposal systems when feasible. The rulemaking also defines maintenance requirements and frequency and Notice of Intent to maintain a private sewage disposal system; updates reference material, sizing data, contact information and dates; sets sizing requirements for subsurface chamber systems; provides clarifications and definitions; defines sample ports and locations and location and restriction of surface discharges from private sewage disposal systems; modifies fees, examination requirements and license requirements for contractors; approves baffle filters and disinfection devices and provides location of alarm and electrical connections for NSF Standard 40 systems, contractor requirements and minimum set back distances.
- B) Statutory Authority: Private Sewage Disposal Licensing Act (225 ILCS 225)

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- C) Scheduled meeting/hearing dates: State Board of Health
- D) Date agency anticipates First Notice: Spring 2012
- E) Effect on small businesses, small municipalities, or not-for-profit corporations: Licensed Private Sewage Disposal System Contractors fees will be increasing.
- F) Agency contact person for information:
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- G) Related rulemakings and other pertinent information: None
- h) Part(s) (Heading and Code Citation): Immunization Code (77 Ill. Adm. 695)
- 1) Rulemaking:
- A) Description: Existing rules specify required immunizations, physical examinations, and acceptable exemptions for children attending child care facilities and children entering school-operated programs below the kindergarten level and kindergarten through 12th grade. Proposed changes in this rulemaking will modify existing requirements to align with current accepted clinical practices as recommended by the Advisory Committee on Immunization Practices (ACIP), the American Academy of Pediatrics (AAP) and the Academy of Family Physicians (AFP).
Current requirements for mumps, rubella and varicella vaccines reflect receipt of only one dose of each. Originally, one dose of the measles-mumps-rubella (MMR) vaccine was recommended. In 1989, the American Academy of Family Physicians, the American Academy of Pediatrics, and the Centers for Disease Control and Prevention's Advisory Committee on Immunization Practices changed the recommendation to two doses, and, Illinois established the routine two-dose measles vaccine requirement in

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1990. Single antigen products for mumps and rubella vaccines are no longer available in the United States, making the MMR vaccine the only recommended product of use. Therefore, a two-dose schedule for mumps and rubella vaccines is consistent with all nationally recognized medical practices. Varicella vaccine has been required for school entry since July 2002. In June 2006, ACIP approved a routine two-dose recommendation for children. The first dose should be administered at age 12 to 15 months and the second dose at age four to six years. The rationale for the second dose of varicella vaccine for children is to further decrease varicella disease and its complications in the United States. Despite the successes of the one-dose vaccination program in children, vaccine effectiveness has not been sufficient to prevent varicella outbreaks, which, although less than in the pre-vaccine era, have continued to occur in highly vaccinated school populations. Breakthrough varicella is contagious. The recommended ages for routine first (at age 12 to 15 months) and second (at age four to six years) doses of varicella vaccine are harmonized with the recommendations for MMR vaccine use. In addition, pneumococcal conjugate vaccine is required for children attending pre-school and/or day care facilities operated by school districts. Public Act 95-0159 requires that children under age two attending a day care facility receive the age-appropriate series of pneumococcal conjugate vaccine, known as Prevnar, as recommended by the Advisory Committee on Immunization Practices. A final change will align the Immunization Code with the Child Health Examination Code (77 Ill. Adm. Code 665) regarding use of Tdap vaccine in adolescents. The Child Health Examination Code requires Tdap vaccine for students entering sixth grade and allows for a catch-up vaccination in older students. Despite high vaccination coverage for primary series of DTaP vaccination, pertussis disease incidence has continued with transmission in the adolescent and young adult populations.

- B) Statutory Authority: Section 27-8.1 of the School Code [105 ILCS 5/27-8.1], the Communicable Disease Prevention Act [410 ILCS 315], and Section 7 of the Child Care Act of 1969 [225 ILCS 10/7]
- C) Scheduled meeting/hearing dates: This rulemaking will be reviewed by the State Board of Health. Proposed amendments have been reviewed and approved by the statewide Immunization Advisory Committee at their

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regularly scheduled meeting in July 2011. The State Board of Health will schedule and conduct public hearings, if indicated.

- D) Date agency anticipates First Notice: Spring 2012
- E) Effect on small businesses, small municipalities, or not-for-profit corporations: It is anticipated that the proposed changes will have minimum impact on schools, students, day care center children or their families.
- F) Agency contact person for information:
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- G) Related rulemakings and other pertinent information: These changes also affect the Child Health Examination Code (77 Ill. Adm. Code 665)
- i) Part(s) (Heading and Code Citation): Child Health Examination Code (77 Ill. Adm. Code 665)
- 1) Rulemaking:
- A) Description: Existing rules specify required immunizations, physical examinations, and acceptable exemptions for children attending child care facilities and children entering school-operated programs below the kindergarten level and kindergarten through 12th grade. Proposed changes in this rulemaking will modify existing requirements to align with current accepted clinical practices as recommended by the Advisory Committee on Immunization Practices (ACIP), the American Academy of Pediatrics (AAP) and the Academy of Family Physicians (AFP). Current requirements for mumps, rubella and varicella vaccines reflect receipt of only one dose of each. Originally, one dose of the measles-mumps-rubella (MMR) vaccine was recommended. In 1989, the American Academy of Family Physicians, the American Academy of Pediatrics, and the Centers for Disease Control and Prevention's Advisory Committee on

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Immunization Practices, changed the recommendation to two doses, and Illinois established the routine two-dose measles vaccine requirement in 1990. Single antigen products for mumps and rubella vaccines are no longer available in the United States, making the MMR vaccine the only recommended product of use. Therefore, a two-dose schedule for mumps and rubella vaccines is consistent with all nationally recognized medical practices. Varicella vaccine has been required for school entry since July 2002. In June 2006, ACIP approved a routine two-dose recommendation for children. The first dose should be administered at age 12 to 15 months and the second dose at age four to six years. The rationale for the second dose of varicella vaccine for children is to further decrease varicella disease and its complications in the United States. Despite the successes of the one-dose vaccination program in children, vaccine effectiveness has not been sufficient to prevent varicella outbreaks, which, although less than in the pre-vaccine era, have continued to occur in highly vaccinated school populations. Breakthrough varicella is contagious. The recommended ages for routine first (at age 12 to 15 months) and second (at age four to six years) doses of varicella vaccine are harmonized with the recommendations for MMR vaccine use. In addition, pneumococcal conjugate vaccine is required for children attending pre-school and/or day care facilities operated by school districts. Public Act 95-0159 requires that children under age two attending a day care facility receive the age-appropriate series of pneumococcal conjugate vaccine, known as Prevnar, as recommended by the Advisory Committee on Immunization Practices.

- B) Statutory Authority: Section 27-8.1 of the School Code [105 ILCS 5/27-8.1], the Communicable Disease Prevention Act [410 ILCS 315], and Section 7 of the Child Care Act of 1969 [225 ILCS 10/7]
- C) Scheduled meeting/hearing dates: This rulemaking will be reviewed by the State Board of Health. Proposed amendments have been reviewed and approved by the statewide Immunization Advisory Committee at their regularly scheduled meeting in July 2011. The State Board of Health will then review proposed amendments. The State Board of Health will schedule and conduct public hearings, if indicated.
- D) Date agency anticipates First Notice: Spring 2012

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- E) Effect on small businesses, small municipalities, or not-for-profit corporations: It is anticipated that the proposed changes will have minimum impact on schools, students, day care center children or their families.
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- G) Related rulemakings and other pertinent information: These changes also affect the Immunization Code (77 Ill. Adm. Code 695)
- j) Part(s) (Heading and Code Citation): Emergency Medical Services and Trauma Center Code (77 Ill. Adm. Code 515)
- 1) Rulemaking:
- A) Description: This rulemaking will amend Sections: 515.100, 515.125, 515.500, 515.510, 515.520, 515.530, 515.540, 515.550, 515.560, 515.570, 515.580, 515.590, 515.600, 515.610, 515.620, 515.630, 515.640, 515.700, 515.710, 515.720, 515.725. Updates will reflect changes in education standards from the U.S. Department of Transportation National Standard Curriculum to the New Education Standards that the federal government has identified.
- B) Statutory Authority: Emergency Medical Services (EMS) Systems Act [210 ILCS 50]
- C) Scheduled meeting/hearing dates: State EMS Council Spring 2012
- D) Date agency anticipates First Notice: Spring 2012
- E) Effect on small businesses, small municipalities, or not-for-profit corporations: Small Businesses, small municipalities or volunteer agencies that have emergency medical services will be affected.

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- G) Related rulemakings and other pertinent information: None
- 2) Rulemaking:
- A) Description: Public Act 96-1469 amended the Emergency Medical Services (EMS) Systems Act to authorize the Department to use licensing, testing and certification fees in the EMS Assistance Fund for Department administration, oversight and enforcement of activities authorized by the Act. Section 515.3000 is being amended to implement this statutory change.
- B) Statutory Authority: Emergency Medical Services (EMS) Systems Act [210 ILCS 50]
- C) Scheduled meeting/hearing dates: Spring 2012
- D) Date agency anticipates First Notice: Spring 2012
- E) Effect on small businesses, small municipalities, or not-for-profit corporations: None
- F) Agency contact person for information:
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- G) Related rulemakings and other pertinent information: None
- 3) Rulemaking:
- A) Description: Public Act 97-209 amended the Emergency Medical Services (EMS) Systems Act to require Trauma Fund money collected in an EMS Region to be distributed back to that Region. Section 515.2090 is being amended to implement this statutory change.
- B) Statutory Authority: Emergency Medical Services (EMS) Systems Act [210 ILCS 50]
- C) Scheduled meeting/hearing dates: Spring 2012
- D) Date agency anticipates First Notice: Spring 2012
- E) Effect on small businesses, small municipalities, or not-for-profit corporations: None
- F) Agency contact person for information:
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- G) Related rulemakings and other pertinent information: None
- k) Part(s) (Heading and Code Citation): Laboratory Service Fees (77 Ill. Adm. Code 475)
- 1) Rulemaking:
- A) Description: The proposed amendments to Section 475.24 and 475.50 will include updated references to current "Standard Methods for the Examination of Water and Wastewater"; updated test methods; removal of test methods that are no longer used; new test methods and corresponding

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fees; updated cost per test based on current and customary fees; updated fee for returned checks or insufficient payment.

- B) Statutory Authority: Section 2310-90 of the Civil Administrative Code of Illinois [20 ILCS 2310/2310-90]
 - C) Scheduled meeting/hearing dates: State Board of Health
 - D) Date agency anticipates First Notice: Spring 2012
 - E) Effect on small businesses, small municipalities, or not-for-profit corporations: Incremental increase in fees for tests performed by Department of Public Health laboratories.
 - F) Agency contact person for information:
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 - G) Related rulemakings and other pertinent information: None
- l) Part(s) (Heading and Code Citation): Skilled Nursing and Intermediate Care Facilities Code (77 Ill. Adm. Code 300); Sheltered Care Facilities Code (77 Ill. Adm. Code 330); Illinois Veterans' Homes Code (77 Ill. Adm. 340).
- 1) Rulemaking:
 - A) Description: These proposed amendments will implement provisions from Public Act 96-0389, which mandates that facilities draft "a policy to identify, assess, and develop strategies to control risk of injury to residents and nurses" in the transferring and moving of residents.
 - B) Statutory Authority: Nursing Home Care Act [210 ILCS 45]
 - C) Scheduled meeting/hearing dates: February 2011

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- D) Date agency anticipates First Notice: Winter 2011
- E) Effect on small businesses, small municipalities, or not-for-profit corporations: This rulemaking will affect long-term care facilities.
- F) Agency contact person for information:
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- G) Related rulemakings and other pertinent information: None
- 2) Rulemaking:
- A) Description: These proposed amendments will implement PA 97-0107, which requires that a facility designate a person or persons as Infection Prevention and Control Professionals to develop and implement policies governing control of infections and communicable diseases.
- B) Statutory Authority: Nursing Home Care Act [210 ILCS 45]
- C) Scheduled meeting/hearing dates: Long-Term Care Facility Advisory Board
- D) Date agency anticipates First Notice: 2012
- E) Effect on small businesses, small municipalities, or not-for-profit corporations: This rulemaking will affect skilled nursing facilities.
- F) Agency contact person for information:
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G) Related rulemakings and other pertinent information: None

3) Rulemaking:

A) Description: This rulemaking affects facilities licensed under Part 300 only. The amendments implement PA 97-0038 to provide that all long-term care facilities for the mentally ill shall be licensed by the Department of Public Health under the Specialized Mental Health Rehabilitation Act instead of under the Nursing Home Care Act. The legislation will require the drafting of a new Part.

B) Statutory Authority: Nursing Home Care Act [210 ILCS 45] and Specialized Mental Health Rehabilitation Act [210 ILCS 48]

C) Scheduled meeting/hearing dates: 2012

D) Date agency anticipates First Notice: 2012

E) Effect on small businesses, small municipalities, or not-for-profit corporations: This rulemaking will affect facilities licensed under Subpart S and Subpart T of the Skilled Nursing and Intermediate Care Facilities Code.

F) Agency contact person for information:
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m) Part(s) (Heading and Code Citation): Pregnancy Termination Report Code (77 Ill Adm. Code 505)

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- 1) Rulemaking:
 - A) Description: A report of each abortion performed in Illinois and of complications resulting from abortions is required to be made to the Department. The anonymity of the identity of each woman undergoing an abortion should be secured. Existing requirements will be clarified.
 - B) Statutory Authority: Illinois Abortion Law of 1975 [720 ILCS 510]
 - C) Scheduled meeting/hearing dates: State Board of Health
 - D) Date agency anticipates First Notice: Spring 2012
 - E) Effect on small businesses, small municipalities, or not-for-profit corporations: This rulemaking will affect ambulatory surgical treatment centers and other facilities that perform pregnancy terminations.
 - F) Agency contact person for information:
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 - G) Related rulemakings and other pertinent information: None
- n) Part(s) (Heading and Code Citation): Illinois Department of Public Health Grants Code (77 Ill. Adm. Code 110)
 - 1) Rulemaking:
 - A) Description: This rulemaking will set forth policies and procedures for the Department's grant process, including eligibility requirements; application procedures; suspension or termination of grant agreements or funding; recovery of grant funds, and monitoring and compliance.

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- B) Statutory Authority: Section 2310-195 of the Department of Public Health Powers and Duties Law of the Civil Administrative Code of Illinois [20 ILCS 2310/2310-195]
- C) Scheduled meetings/hearing dates: State Board of Health
- D) Date agency anticipates First Notice: Spring 2012
- E) Effect on small businesses, small municipalities, or not-for-profit corporations: This rulemaking will affect any entity that applies for or receives a grant from the Department.
- F) Agency contact person for information:
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- G) Related rulemakings and other pertinent information: None
- o) Part(s) (Heading and Code Citation): Control of Communicable Diseases Code (77 Ill. Adm. Code 690)
- 1) Rulemaking:
- A) Description: The proposed amendments to the existing rules update specific Subparts based on the most current disease and procedure information to improve the control of communicable disease in Illinois. Information on diseases and conditions and appropriate measures to control and report communicable diseases have been updated. To improve communicable disease reporting, additional reporting entities have been added. To monitor the severity and burden of disease secondary to influenza in Illinois, the rule has been updated to add the reporting of hospitalized residents who received a diagnosis of influenza into intensive care units. The rule has been updated to reflect improved data sharing

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between the Department, local boards of health, and local public health authorities.

- B) Statutory Authority: Communicable Disease Report Act [745 ILCS 45 and the Department of Public Health Act [20 ILCS 2305]
- C) Scheduled meetings/hearing dates: State Board of Health
- D) Date agency anticipates First Notice: Spring 2012
- E) Effect on small businesses, small municipalities, or not-for-profit corporations: This rulemaking will affect local health departments, businesses such as food establishments, nursing homes, and long-term care facilities.
- F) Agency contact person for information:
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- G) Related rulemakings and other pertinent information: None