

**State Board of Health  
Thursday, June 05, 2025  
11:00 AM-1:30 PM  
Meeting Minutes**

Meeting Recording:

[State Board of Health Meeting-20250605 1600-1 - Webex](#)

Locations

**WebEx Video Conference Service**

Join by phone: +1-312-535-8110 United States Toll (Chicago) or +1-415-655-0002 US Toll

Meeting number (access code): 2630 331 1817

Meeting password: 6v73cBaSmpb

Join by video: <https://illinois.webex.com/illinois/j.php?MTID=m94b7e3f9f8063dfd88b3185c0e1cddeb>

**Illinois Department of Public Health Chicago**

69 West Washington Street, 35<sup>th</sup> Floor

Chicago, Illinois 60602

**Illinois Department of Public Health Springfield**

524 South Second Street, 6th Floor

Springfield, Illinois 62701

Minutes

1. Call to Order

- Members Present: Damon Arnold, Dawn Brown, Rashmi Chugh, David Chung, David Cross, John “Jack” Herrmann, Yvette Johnson-Walker, Abel Kho, Juleigh Nowinski Konchak, Angela Oberreiter, Karen Phelan, Esther Sciammarella, Claire Simon, Susan Swider
- Member Not Present: Rodney Alford
- IDPH Staff Present: Sameer Vohra, Janice Phillips, Allison Nickrent, Arti Barnes, Jessica Bounds, Alma Collins, Sean Dailey, Blanca Dominguez, Sara Ettinger, John Kniery, Eugenia Olison, Randal Ralph, Matthew Smith, Emily Spangler, Gregory Willis
- Guests: Carmen Chastain, Cealisa Johnson, Sanjana Pisal, Arya Sreedhar

2. Public Comment

- Not Applicable

3. New Business

- a. Director’s Remarks and Q&A (Sameer Vohra)
  - i. Illinois is celebrating its seventh consecutive balanced budget and that IDPH’s FY 2025 budget totals \$1.87 billion, with the majority (\$1.2 billion) coming from federal funds.
    - COVID-19 grant funding is still available because Illinois is part of a multi-state injunction that permits continued spending, but the Department is working toward the July 2026 expiration of most COVID-related appropriations.
    - General revenue funding decreased slightly for FY 2026 but increases in other state funds offsets potential impacts for this decrease.

- Some notable investments include a doubling of the birth-equity grant program from \$4 million to \$8 million, maintaining funding for free and charitable clinics, adding a \$100 million line for hospital safety-net grants, and a \$5 million allocation for tobacco-control programs.
- ii. Several legislative successes were made during this legislative session.
  - The emergency medical disaster plan was renamed as the Public Health and Emergency Medical Plan and opioid-overdose reporting was expanded to require all EMS transport providers to report overdose incidents to the Department's overdose-mapping system. Additionally, required timing for third-trimester syphilis screening was clarified to reduce the incidence of congenital syphilis in Illinois.
  - Our continued legislative priorities include preventing unfunded mandates and preserving IDPH's authority in emergency response, health-care facility oversight and disease control.
- iii. Overall, IDPH's FY 2026 priorities will include public health data modernization, the One Health Commission, and rural health.
- b. Assistant Director's Remarks and Q&A (Janice Phillips)
  - i. The Community Health Worker (CHW) Certification Program is currently housed within the Office of Health Promotion and overseen by the Community Health Worker Review Board, which is co-chaired by IDPH and the Illinois Community Health Workers Association.
    - The Review Board approved draft administrative rules and IDPH leadership will finalize them for submission to the SBOH Rules Committee in August.
    - Upon the Committee's review and the Joint Committee on Administrative Rules process, the Department will aim to launch the certification program in mid-2026.
  - ii. There are currently four pathways to certification:
    1. Endorsement of prior training programs that meet core competencies
    2. A standard CHW curriculum delivered by community colleges or community-based organizations
    3. Apprenticeship-style on-the-job training programs
    4. Reciprocity for individuals certified in another state whose training aligns with Illinois standards
  - iii. Core competencies include communication, interpersonal and relationship-building skills, service coordination and navigation, capacity building, advocacy, behavioral-health awareness and field experience.
  - iv. IDPH has also partnered with universities to develop curricula, instructor tool kits, and monitoring frameworks.
    - An IT platform will serve as a one-stop portal for applications, policy guidance, and resources in English and Spanish.

#### 4. Old Business

- a. Review of 3/6/25 State Board of Health Minutes (Karen Phelan)
  - i. Minor corrections were noted, and the Board approved the minutes with the agreed-upon adjustments.
  - ii. Karen Phelan moved to approve 3/6/25 SBOH meeting minutes, John "Jack" Herrmann seconded.
- b. Review of 5/8/25 State Board of Health Rules Committee Minutes (Karen Phelan)
  - i. 77 IAC 245 - Home Health, Home Services, and Home Nursing Agency Code (RM LHD)
  - ii. 77 IAC 245 - Home Health, Home Services, and Home Nursing Agency Code (RM Nurse Delegation)
  - iii. 77 IAC 661 - Newborn and Infant Screening and Treatment Code
  - iv. 77 IAC 692 - Appendix A, AIDS Drug Assistance Program Code
  - v. No changes were requested, and the Board approved the minutes as presented
    - Karen Phelan moved to approve 5/8/25 SBOH Rules Committee meeting minutes, Damon Arnold seconded.
- c. Review of 5/15/25 State Board of Health Policy Committee Minutes (Damon Arnold)
  - i. The Committee discussed federal policy updates involving potential Medicaid cuts that could affect rural hospitals, explored the Board's evolving policy-advice role, and heard a presentation on food safety and the cottage-food program.

- ii. The Board approved the minutes as presented.
  - Susan Swider moved to approve 5/15/25 SBOH Policy Committee meeting minutes, Esther Sciammarella seconded.

## 5. Updates/Review

- a. Home Illinois: The Office to Prevent and End Homelessness Overview (Eugenia Olison)
  - i. Home Illinois is a statewide plan to prevent and end homelessness, created by a 2021 executive order that established an interagency task force, a community advisory council, and a chief homelessness officer.
    - The plan's vision is for all Illinois residents to have stable housing, employment, and access to services because housing instability is associated with higher morbidity and mortality from chronic diseases, mental-health conditions and exposure to extreme weather.
  - ii. Continuums of care (regional planning bodies) coordinate housing funding, manage Homeless Management Information Systems, and operate coordinated-entry systems across the state.
  - iii. The Home Illinois plan's four pillars are: (1) building affordable and permanent supportive housing; (2) bolstering safety-net services; (3) securing financial stability for individuals and families; and (4) closing the mortality and morbidity gap.
  - iv. IDPH is committed to contributing to the annual Homelessness Mortality and Morbidity Report, releasing a Food Access Report, and supporting a Black Homelessness Report.
  - v. The Illinois Medical Respite Capacity Building Initiative funds recuperative-care sites for people exiting hospitals.
  - vi. Board members asked about homelessness in downstate Illinois and data-sharing limitations; partnerships with local health departments, hospitals and housing providers are essential for statewide impact.
- b. Data Modernization Report (Abel Kho)
  - i. A central component of IDPH's data modernization efforts is the development of a master patient index (MPI) that uniquely identifies individuals across disparate data sources (claims databases and electronic health records) and allows records to be linked and aggregated.
    - IDPH has migrated most public-health data platforms to cloud infrastructure and created a data sandbox environment where emerging standards like Fast Healthcare Interoperability Resources can be tested. These steps are intended to move Illinois towards a modern technology footprint and effective interoperability.
  - ii. Dashboards should push relevant information to the right people at the right time, rather than requiring users to pull data.
    - For example, a measles-immunization dashboard that models potential cases based on school immunization rates serves as a role model.
  - iii. The data modernization program is collaborating with universities and other states to share best practices and is seeking sustainable funding. The program is exploring common data standards and partnerships with philanthropic organizations.
- c. Legislative Updates (Allison Nickrent)
  - i. Recent legislative achievements include those mentioned previously by Dr. Vohra, such as renaming the Public Health and Emergency Medical Plan, expanding opioid-overdose reporting, and enhancing efforts to reduce congenital syphilis.
    - 500 legislative bills were tracked, 102 of those were passed.
- d. State Board of Health Bylaws (Karen Phelan)
  - i. Training requirements exist for all Board members, and three trainings must be completed each year; failure to do so may result in fines.
  - ii. Section 10.1 of the Board's bylaws require occasional review by the Board. Discussion points included:
    - The Open Meetings Act clarifies that members may participate remotely as allowed by state law, though the Board must comply with notice and quorum requirements.
    - Board members served staggered three-year terms, though provisions for term lengths that

- reference public-health emergencies need updating.
- The Annual Report on the health of Illinois residents is required to be transmitted to the Governor and the General Assembly.
- e. Chairman's Comments (Karen Phelan)
  - i. State Board of Health Training
    - Members completed required ethics, sexual-harassment and Open Meetings Act trainings; everyone encouraged to stay current on future requirements.
  - ii. Reduced Vaccine Preventable Disease Exploratory Committee
    - A Committee to examine vaccine-preventable diseases and related policies will be formed, and it will include Damon Arnold, Rashmi Chugh, David Chung, Esther Sciammarella, Claire Simon and Susan Swider. This Committee may convene during SBOH Policy Committee meetings.
  - iii. Six Board members are up for reappointment in 2025. Allison Nickrent will provide instructions once the Governor's office initiates the process.
- 6. 2025 Meetings
  - a. **STATE BOARD OF HEALTH 11:00 AM – 1:30 PM**
    - iii. September 4
    - iv. December 11
  - b. **STATE BOARD OF HEALTH RULES COMMITTEE 1:00 – 3:00 PM**
    - iii. August 14
    - iv. November 6
  - c. **STATE BOARD OF HEALTH POLICY COMMITTEE 1:00 – 3:00 PM**
    - iii. August 21
    - iv. November 13
- 7. Adjournment
  - a. Karen Phelan requested a motion to adjourn. Damon Arnold moved to adjourn the State Board of Health Committee meeting. Esther Sciammarella seconded.

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