#### **100TH GENERAL ASSEMBLY**

#### State of Illinois

#### 2017 and 2018

#### нв5776

by Rep. Sam Yingling

#### SYNOPSIS AS INTRODUCED:

770 ILCS 23/5 770 ILCS 23/10 770 ILCS 23/45

Amends the Health Care Services Lien Act. Provides that "health care benefit plan" means an insurance plan provided by any public or private medical insurance provider. Adds procedures requiring a health care professional or health care provider to submit all charges to the patient's health care benefit plan prior to filing the notice of the lien. Provides that the patient's health care benefit plan shall not deny payment on the basis that a third party or other insurance carrier is responsible for the patient's injuries. Provides that the amount of the lien shall be limited to the amount the health care professional or the health care provider would have received if the charges were covered by the patient's health care benefit plan. Adds provisions concerning health care benefit plan subrogation claims. Provides that a health care professional or a health care provider that recovers under a judgment, verdict, or settlement is responsible for the pro rata share of the legal and administrative expenses incurred in obtaining the judgment, verdict, or settlement. Makes other changes.

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AN ACT concerning civil law.

# Be it enacted by the People of the State of Illinois, represented in the General Assembly:

4 Section 5. The Health Care Services Lien Act is amended by 5 changing Sections 5, 10, and 45 as follows:

6 (770 ILCS 23/5)

7 Sec. 5. Definitions. In this Act:

8 "Health care professional" means any individual in any of 9 the following license categories: licensed physician, licensed 10 dentist, licensed optometrist, licensed naprapath, licensed 11 clinical psychologist, or licensed physical therapist.

12 "Health care provider" means any entity in any of the 13 following license categories: licensed hospital, licensed home 14 health agency, licensed ambulatory surgical treatment center, 15 licensed long-term care facilities, or licensed emergency 16 medical services personnel.

17 <u>"Health care benefit plan" mean an insurance plan provided</u>
18 by any public or private medical insurance provider.

This amendatory Act of the 94th General Assembly applies to causes of action accruing on or after its effective date. (Source: P.A. 93-51, eff. 7-1-03; 94-403, eff. 1-1-06.)

22 (770 ILCS 23/10)

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Sec. 10. Lien created; limitation.

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(a) Every health care professional and health care provider

3 that renders any service in the treatment, care, or maintenance of an injured person, except services rendered under the 4 5 provisions of the Workers' Compensation Act or the Workers' Occupational Diseases Act, shall have a lien upon all claims 6 7 and causes of action of the injured person for the amount of 8 the health care professional's or health care provider's 9 reasonable charges up to the date of payment of damages to the 10 injured person. The total amount of all liens under this Act, 11 however, shall not exceed 40% of the verdict, judgment, award, 12 settlement, or compromise secured by or on behalf of the injured person on his or her claim or right of action. 13

(b) The lien shall include a written notice containing the 14 15 name and address of the injured person, the date of the injury, 16 the name and address of the health care professional or health 17 care provider, and the name of the party alleged to be liable to make compensation to the injured person for the injuries 18 received. The lien notice shall be served on both the injured 19 20 person and the party against whom the claim or right of action 21 exists, but shall not be served on the issuer of an automobile 22 or homeowner's insurance policy that provides for medical 23 payments. Notwithstanding any other provision of this Act, 24 payment in good faith to any person other than the healthcare 25 professional or healthcare provider claiming or asserting such 26 lien prior to the service of such notice of lien shall, to the

1 extent of the payment so made, bar or prevent the creation of 2 an enforceable lien. Service shall be made by registered or 3 certified mail or in person.

4 (b-5) If a patient provides proof of insurance coverage 5 under any health care benefit plan within 60 days of treatment from a health care professional or health care provider, the 6 7 health care professional or health care provider shall submit 8 all charges to the patient's health care benefit plan before 9 filing the notice of the lien; the patient's health care 10 benefit plan shall not deny payment for the services of either 11 the health care professional or health care provider on the 12 basis that a third party or another insurance carrier is responsible for the payment of the charges for treatment of the 13 14 patient's injuries. If the health care benefit plan denies payment for any other reason, the health care benefit plan 15 16 shall provide the health care provider or health care 17 professional and the patient with a statement detailing the amount the health care benefit plan would have paid for the 18 19 services provided and the amount the patient would have been 20 responsible for had the claim not been denied. In such a case, the amount of the lien shall be limited to the amount the 21 22 health care professional or the health care provider would have 23 received if the charges were covered by the patient's health 24 care benefit plan. The failure of a health care benefit plan to 25 provide a statement shall not affect the limitations on a lien 26 under this Section.

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1	(b-10) If at any time after to the filing of the notice of
2	the lien, a health care professional or a health care provider
3	receives health care benefit plan information regarding a
4	patient, the health care professional or health care provider
5	is not required to withdraw notice of the lien, but shall
6	submit the charges for service to the health care benefit plan.
7	In such a case, the amount of the lien shall be limited as
8	provided in subsection (b-5).

9 (c) All health care professionals and health care providers 10 holding liens under this Act with respect to a particular 11 injured person shall share proportionate amounts within the 12 statutory limitation set forth in subsection (a). The statutory 13 limitations under this Section may be waived or otherwise 14 reduced only by the lienholder. No individual licensed category 15 of health care professional (such as physicians) or health care 16 provider (such as hospitals) as set forth in Section 5, 17 however, may receive more than one-third of the verdict, judgment, award, settlement, or compromise secured by or on 18 behalf of the injured person on his or her claim or right of 19 action. If the total amount of all liens under this Act meets 20 or exceeds 40% of the verdict, judgment, award, settlement, or 21 22 compromise, then:

(1) all the liens of health care professionals shall
 not exceed 20% of the verdict, judgment, award, settlement,
 or compromise; and

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(2) all the liens of health care providers shall not

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1 2 exceed 20% of the verdict, judgment, award, settlement, or compromise;

3 provided, however, that health care services liens shall be
4 satisfied to the extent possible for all health care
5 professionals and health care providers by reallocating the
6 amount unused within the aggregate total limitation of 40% for
7 all health care services liens under this Act; and provided
8 further that the amounts of liens under paragraphs (1) and (2)
9 are subject to the one-third limitation under this subsection.

If the total amount of all liens under this Act meets or 10 exceeds 40% of the verdict, judgment, award, settlement, or 11 12 compromise, the total amount of all the liens of attorneys 13 under the Attorneys Lien Act shall not exceed 30% of the 14 verdict, judgment, award, settlement, or compromise. If an 15 appeal is taken by any party to a suit based on the claim or 16 cause of action, however, the attorney's lien shall not be 17 affected or limited by the provisions of this Act.

(c-5) If in addition to health care professional liens and 18 19 health care provider liens, there also exist health care 20 benefit plan subrogation claims, including those under the 21 Medicare Secondary Payer Act and the Illinois Public Aid Code, 22 and the existence and inclusion of these subrogation claims in 23 addition to the health care services liens exceed 40% of the verdict, judgment, award, settlement, or compromise, after 24 25 calculations pursuant to Section 50, then:

26 (1) the liens of the health care professionals shall

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1	not exceed 10% of the verdict, judgment, award, settlement,
2	or compromise; and
3	(2) the liens of the health care providers shall not
4	exceed 10% of the verdict, judgment, award, settlement, or
5	compromise.
6	Notwithstanding any other provision of this subsection,
7	health care services liens shall be satisfied to the extent
8	possible for all health care professionals and health care
9	providers by reallocating the amount unused within the
10	aggregate total limitation of 40% for all health care services
11	liens under this Act after satisfaction of health care plan
12	subrogation claims, and the amounts of liens under paragraphs
13	(1) and (2) are subject to the one-third limitation under this
14	subsection.
15	(d) If services furnished by health care professionals and
16	health care providers are billed at one all-inclusive rate, the

health care providers are billed at one all-inclusive rate, the total reasonable charges for those services shall be reasonably allocated among the health care professionals and health care providers and treated as separate liens for purposes of this Act, including the filing of separate lien notices. For services provided under an all-inclusive rate, the liens of health care professionals and health care providers may be asserted by the entity that bills the all-inclusive rate.

24 <u>(d-5) A health care professional or a health care provider</u>
25 that recovers under a judgment, verdict, or settlement is
26 responsible for the pro rata share of the legal and

## 1 administrative expenses incurred in obtaining the judgment,

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### verdict, or settlement.

3 (e) Payments under the liens shall be made directly to the 4 health care professionals and health care providers. For 5 services provided under an all-inclusive rate, payments under 6 liens shall be made directly to the entity that bills the 7 all-inclusive rate.

8 (Source: P.A. 93-51, eff. 7-1-03.)

9 (770 ILCS 23/45)

10 Sec. 45. Amounts not recovered under lien. Nothing in this 11 Act shall be construed as limiting the right of a health care 12 professional or health care provider, or attorney, to pursue 13 collection, through all available means, of its reasonable 14 charges for the services it furnishes to an injured person. 15 Notwithstanding any other provision of law, a lien holder may 16 seek payment of the amount of its reasonable charges that remain not paid after the satisfaction of its lien under this 17 18 Act, except that any bill from a health care professional or health care provider must first be reduced by the amount of 19 20 benefits to which the patient is entitled under any contract or 21 health care benefit plan and shall reflect all credits, adjustments, and write-offs, and the health care provider or 22 23 health care professional may not bill the patient the balance 24 of the bill unless it is the responsibility of the patient 25 under the health care plan.

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1 (Source: P.A. 93-51, eff. 7-1-03.)