



Sen. Cristina Castro

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10100SB1909sam001

LRB101 09278 KTG 56901 a

1 AMENDMENT TO SENATE BILL 1909

2 AMENDMENT NO. _____. Amend Senate Bill 1909 on page 3, by
3 replacing line 16 with the following:

4 "by adding Sections 10-23 and 10-24 as follows:

5 (20 ILCS 1305/10-23 new)

6 Sec. 10-23. High Risk Infant Follow-Up program. The
7 Department's High Risk Infant Follow-Up program shall be
8 expanded to serve any pregnant or postpartum woman identified
9 as high-risk by a Level I, Level II, or Level III hospital. The
10 services shall be provided by registered nurses.

11 The Department, in conjunction with the Department of
12 Public Health, a statewide organization representing
13 registered nurses, and a statewide organization representing
14 obstetricians and gynecologists, shall develop rules and
15 appropriate revisions to the High Risk Infant Follow-Up program
16 to expand existing services provided by registered nurses to

1 pregnant and postpartum women. Such rules shall be adopted no
2 later than January 1, 2021."; and

3 on page 77, immediately below line 22, by inserting the
4 following:

5 "Section 57. The Medical Patient Rights Act is amended by
6 changing Section 3 as follows:

7 (410 ILCS 50/3) (from Ch. 111 1/2, par. 5403)

8 Sec. 3. The following rights are hereby established:

9 (a) The right of each patient to care consistent with sound
10 nursing and medical practices, to be informed of the name of
11 the physician responsible for coordinating his or her care, to
12 receive information concerning his or her condition and
13 proposed treatment, to refuse any treatment to the extent
14 permitted by law, and to privacy and confidentiality of records
15 except as otherwise provided by law.

16 (b) The right of each patient, regardless of source of
17 payment, to examine and receive a reasonable explanation of his
18 total bill for services rendered by his physician or health
19 care provider, including the itemized charges for specific
20 services received. Each physician or health care provider shall
21 be responsible only for a reasonable explanation of those
22 specific services provided by such physician or health care
23 provider.

1 (c) In the event an insurance company or health services
2 corporation cancels or refuses to renew an individual policy or
3 plan, the insured patient shall be entitled to timely, prior
4 notice of the termination of such policy or plan.

5 An insurance company or health services corporation that
6 requires any insured patient or applicant for new or continued
7 insurance or coverage to be tested for infection with human
8 immunodeficiency virus (HIV) or any other identified causative
9 agent of acquired immunodeficiency syndrome (AIDS) shall (1)
10 give the patient or applicant prior written notice of such
11 requirement, (2) proceed with such testing only upon the
12 written authorization of the applicant or patient, and (3) keep
13 the results of such testing confidential. Notice of an adverse
14 underwriting or coverage decision may be given to any
15 appropriately interested party, but the insurer may only
16 disclose the test result itself to a physician designated by
17 the applicant or patient, and any such disclosure shall be in a
18 manner that assures confidentiality.

19 The Department of Insurance shall enforce the provisions of
20 this subsection.

21 (d) The right of each patient to privacy and
22 confidentiality in health care. Each physician, health care
23 provider, health services corporation and insurance company
24 shall refrain from disclosing the nature or details of services
25 provided to patients, except that such information may be
26 disclosed: (1) to the patient, (2) to the party making

1 treatment decisions if the patient is incapable of making
2 decisions regarding the health services provided, (3) for
3 treatment in accordance with 45 CFR 164.501 and 164.506, (4)
4 for payment in accordance with 45 CFR 164.501 and 164.506, (5)
5 to those parties responsible for peer review, utilization
6 review, and quality assurance, (6) for health care operations
7 in accordance with 45 CFR 164.501 and 164.506, (7) to those
8 parties required to be notified under the Abused and Neglected
9 Child Reporting Act or the Illinois Sexually Transmissible
10 Disease Control Act, or (8) as otherwise permitted, authorized,
11 or required by State or federal law. This right may be waived
12 in writing by the patient or the patient's guardian or legal
13 representative, but a physician or other health care provider
14 may not condition the provision of services on the patient's,
15 guardian's, or legal representative's agreement to sign such a
16 waiver. In the interest of public health, safety, and welfare,
17 patient information, including, but not limited to, health
18 information, demographic information, and information about
19 the services provided to patients, may be transmitted to or
20 through a health information exchange, as that term is defined
21 in Section 2 of the Mental Health and Developmental
22 Disabilities Confidentiality Act, in accordance with the
23 disclosures permitted pursuant to this Section. Patients shall
24 be provided the opportunity to opt out of their health
25 information being transmitted to or through a health
26 information exchange in accordance with the regulations,

1 standards, or contractual obligations adopted by the Illinois
2 Health Information Exchange Authority in accordance with
3 Section 9.6 of the Mental Health and Developmental Disabilities
4 Confidentiality Act, Section 9.6 of the AIDS Confidentiality
5 Act, or Section 31.8 of the Genetic Information Privacy Act, as
6 applicable. In the case of a patient choosing to opt out of
7 having his or her information available on an HIE, nothing in
8 this Act shall cause the physician or health care provider to
9 be liable for the release of a patient's health information by
10 other entities that may possess such information, including,
11 but not limited to, other health professionals, providers,
12 laboratories, pharmacies, hospitals, ambulatory surgical
13 centers, and nursing homes.

14 (e) With the exception of medical emergencies with
15 inadequate time to obtain consent, the right of each patient,
16 or patient's representative, to specific informed consent, or
17 informed permission in the case of an infant, including
18 information regarding the health and legal benefits and risks
19 regarding biochemical testing for controlled substances.
20 Health care providers shall provide to patients, or patients'
21 representatives, in writing, the following:

22 (1) foreseeable health and legal risks and benefits of
23 biochemical testing for controlled substances;

24 (2) reasonable alternatives to biochemical testing for
25 controlled substances;

26 (3) information on how to obtain answers to questions

1 about substance abuse treatment;

2 (4) information on the applicability of federal safe
3 harbor protections; and

4 (5) an explanation of the extent of confidentiality and
5 the voluntariness of agreement to biochemical testing for
6 controlled substances.

7 (Source: P.A. 98-1046, eff. 1-1-15.)".