



100TH GENERAL ASSEMBLY

State of Illinois

2017 and 2018

HB2693

by Rep. Gregory Harris

SYNOPSIS AS INTRODUCED:

30 ILCS 105/5.878 new
110 ILCS 330/8.5 new

Amends the University of Illinois Hospital Act. Creates the Cardiac Arrest Data Collection Fund and makes a corresponding change in the State Finance Act. Provides that all moneys in the Fund shall be used by the University of Illinois Hospital to support statewide quality improvement efforts to address disparities in cardiac arrest care. Provides that all eligible hospitals in the State shall pay an annual fee of \$3,500 that shall be deposited into the Fund. Defines "eligible hospital" to mean a hospital operated under the University of Illinois Hospital Act or licensed under the Hospital Licensing Act that receives reimbursement from the federal Centers for Medicare and Medicaid Services. Provides that the University of Illinois Hospital shall use the moneys in the Fund for specified purposes.

LRB100 10341 MJP 20532 b

FISCAL NOTE ACT
MAY APPLY

A BILL FOR

1 AN ACT concerning education.

2 **Be it enacted by the People of the State of Illinois,**
3 **represented in the General Assembly:**

4 Section 5. The State Finance Act is amended by adding
5 Section 5.878 as follows:

6 (30 ILCS 105/5.878 new)

7 Sec. 5.878. The Cardiac Arrest Data Collection Fund.

8 Section 10. The University of Illinois Hospital Act is
9 amended by adding Section 8.5 as follows:

10 (110 ILCS 330/8.5 new)

11 Sec. 8.5. Cardiac Arrest Data Collection Fund.

12 (a) As used in this Section, "eligible hospital" means a
13 hospital operated under the University of Illinois Hospital Act
14 or licensed under the Hospital Licensing Act that receives
15 reimbursement from the federal Centers for Medicare and
16 Medicaid Services.

17 (b) The Cardiac Arrest Data Collection Fund is created as a
18 special fund in the State treasury. All moneys in the Fund
19 shall be used by the University of Illinois Hospital to support
20 statewide quality improvement efforts to address disparities
21 in cardiac arrest care, including for the following purposes:

1 (1) to support the analysis and distribution of data
2 from eligible hospitals as reported to the Cardiac Arrest
3 Registry to Enhance Survival (CARES) or another equivalent
4 registry;

5 (2) to provide eligible hospitals and emergency
6 management systems (EMS) with annual de-identified data to
7 use for ongoing quality assurance; and

8 (3) to provide hospitals, emergency management systems
9 (EMS), and community organizations with technical
10 assistance for the purpose of identifying how to improve
11 cardiac arrest survival rates.

12 (c) All eligible hospitals in the State shall pay an annual
13 fee of \$3,500 that shall be deposited into the Fund.