

1 AN ACT concerning regulation.

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

4 Section 5. The Hospital Report Card Act is amended by
5 changing Section 25 as follows:

6 (210 ILCS 86/25)

7 Sec. 25. Hospital reports.

8 (a) Individual hospitals shall prepare a quarterly report
9 including all of the following:

10 (1) Nursing hours per patient day, average daily
11 census, and average daily hours worked for each clinical
12 service area.

13 (2) Infection-related measures for the facility for
14 the specific clinical procedures and devices determined by
15 the Department by rule under 2 or more of the following
16 categories:

17 (A) Surgical procedure outcome measures.

18 (B) Surgical procedure infection control process
19 measures.

20 (C) Outcome or process measures related to
21 ventilator-associated pneumonia.

22 (D) Central vascular catheter-related bloodstream
23 infection rates in designated critical care units.

1 (3) Information required under paragraph (4) of
2 Section 2310-312 of the Department of Public Health Powers
3 and Duties Law of the Civil Administrative Code of
4 Illinois.

5 (4) Additional infection measures mandated by the
6 Centers for Medicare and Medicaid Services that are
7 reported by hospitals to the Centers for Disease Control
8 and Prevention's National Healthcare Safety Network
9 surveillance system, or its successor, and deemed relevant
10 to patient safety by the Department.

11 (5) Each instance of preterm birth and infant
12 mortality within the reporting period, including the
13 racial and ethnic information of the mothers of those
14 infants.

15 (6) Each instance of maternal mortality within the
16 reporting period, including the racial and ethnic
17 information of those mothers.

18 (7) The number of female patients who have died within
19 the reporting period.

20 (8) The number of female patients admitted to the
21 hospital with a diagnosis of COVID-19 and at least one
22 known underlying condition identified by the United States
23 Centers for Disease Control and Prevention as a condition
24 that increases the risk of mortality from COVID-19 who
25 subsequently died at the hospital within the reporting
26 period.

1 The infection-related measures developed by the Department
2 shall be based upon measures and methods developed by the
3 Centers for Disease Control and Prevention, the Centers for
4 Medicare and Medicaid Services, the Agency for Healthcare
5 Research and Quality, the Joint Commission on Accreditation of
6 Healthcare Organizations, or the National Quality Forum. The
7 Department may align the infection-related measures with the
8 measures and methods developed by the Centers for Disease
9 Control and Prevention, the Centers for Medicare and Medicaid
10 Services, the Agency for Healthcare Research and Quality, the
11 Joint Commission on Accreditation of Healthcare Organizations,
12 and the National Quality Forum by adding reporting measures
13 based on national health care strategies and measures deemed
14 scientifically reliable and valid for public reporting. The
15 Department shall receive approval from the State Board of
16 Health to retire measures deemed no longer scientifically
17 valid or valuable for informing quality improvement or
18 infection prevention efforts. The Department shall notify the
19 Chairs and Minority Spokespersons of the House Human Services
20 Committee and the Senate Public Health Committee of its intent
21 to have the State Board of Health take action to retire
22 measures no later than 7 business days before the meeting of
23 the State Board of Health.

24 The Department shall include interpretive guidelines for
25 infection-related indicators and, when available, shall
26 include relevant benchmark information published by national

1 organizations.

2 The Department shall collect the information reported
3 under paragraphs (5) and (6) and shall use it to illustrate the
4 disparity of those occurrences across different racial and
5 ethnic groups.

6 (b) Individual hospitals shall prepare annual reports
7 including vacancy and turnover rates for licensed nurses per
8 clinical service area.

9 (c) None of the information the Department discloses to
10 the public may be made available in any form or fashion unless
11 the information has been reviewed, adjusted, and validated
12 according to the following process:

13 (1) The Department shall organize an advisory
14 committee, including representatives from the Department,
15 public and private hospitals, direct care nursing staff,
16 physicians, academic researchers, consumers, health
17 insurance companies, organized labor, and organizations
18 representing hospitals and physicians. The advisory
19 committee must be meaningfully involved in the development
20 of all aspects of the Department's methodology for
21 collecting, analyzing, and disclosing the information
22 collected under this Act, including collection methods,
23 formatting, and methods and means for release and
24 dissemination.

25 (2) The entire methodology for collecting and
26 analyzing the data shall be disclosed to all relevant

1 organizations and to all hospitals that are the subject of
2 any information to be made available to the public before
3 any public disclosure of such information.

4 (3) Data collection and analytical methodologies shall
5 be used that meet accepted standards of validity and
6 reliability before any information is made available to
7 the public.

8 (4) The limitations of the data sources and analytic
9 methodologies used to develop comparative hospital
10 information shall be clearly identified and acknowledged,
11 including but not limited to the appropriate and
12 inappropriate uses of the data.

13 (5) To the greatest extent possible, comparative
14 hospital information initiatives shall use standard-based
15 norms derived from widely accepted provider-developed
16 practice guidelines.

17 (6) Comparative hospital information and other
18 information that the Department has compiled regarding
19 hospitals shall be shared with the hospitals under review
20 prior to public dissemination of such information and
21 these hospitals have 30 days to make corrections and to
22 add helpful explanatory comments about the information
23 before the publication.

24 (7) Comparisons among hospitals shall adjust for
25 patient case mix and other relevant risk factors and
26 control for provider peer groups, when appropriate.

1 (8) Effective safeguards to protect against the
2 unauthorized use or disclosure of hospital information
3 shall be developed and implemented.

4 (9) Effective safeguards to protect against the
5 dissemination of inconsistent, incomplete, invalid,
6 inaccurate, or subjective hospital data shall be developed
7 and implemented.

8 (10) The quality and accuracy of hospital information
9 reported under this Act and its data collection, analysis,
10 and dissemination methodologies shall be evaluated
11 regularly.

12 (11) Only the most basic identifying information from
13 mandatory reports shall be used, and information
14 identifying a patient, employee, or licensed professional
15 shall not be released. None of the information the
16 Department discloses to the public under this Act may be
17 used to establish a standard of care in a private civil
18 action.

19 (d) Quarterly reports shall be submitted, in a format set
20 forth in rules adopted by the Department, to the Department by
21 April 30, July 31, October 31, and January 31 each year for the
22 previous quarter. Data in quarterly reports must cover a
23 period ending not earlier than one month prior to submission
24 of the report. Annual reports shall be submitted by December
25 31 in a format set forth in rules adopted by the Department to
26 the Department. All reports shall be made available to the

1 public on-site and through the Department.

2 (e) If the hospital is a division or subsidiary of another
3 entity that owns or operates other hospitals or related
4 organizations, the annual public disclosure report shall be
5 for the specific division or subsidiary and not for the other
6 entity.

7 (f) The Department shall disclose information under this
8 Section in accordance with provisions for inspection and
9 copying of public records required by the Freedom of
10 Information Act provided that such information satisfies the
11 provisions of subsection (c) of this Section.

12 (g) Notwithstanding any other provision of law, under no
13 circumstances shall the Department disclose information
14 obtained from a hospital that is confidential under Part 21 of
15 Article VIII of the Code of Civil Procedure.

16 (h) No hospital report or Department disclosure may
17 contain information identifying a patient, employee, or
18 licensed professional.

19 (Source: P.A. 101-446, eff. 8-23-19.)