

## 102ND GENERAL ASSEMBLY State of Illinois 2021 and 2022 SB1634

Introduced 2/26/2021, by Sen. Karina Villa

## SYNOPSIS AS INTRODUCED:

410 ILCS 50/2.01 from Ch. 111 1/2, par. 5402.01 410 ILCS 50/3 from Ch. 111 1/2, par. 5403 410 ILCS 50/3.1 from Ch. 111 1/2, par. 5403.1 410 ILCS 50/5 410 ILCS 50/5.1

Amends the Medical Patient Rights Act. Provides that each patient has the right to: (1) receive current health care facility policies, inspection findings of State and local health authorities, and further explanation of a written statement of rights to be available to the patient, his or her quardian, or his or her chosen representative; (2) be treated with courtesy and respect for his or her individuality by employees or persons providing medical services or care and to have his or her human and civil rights maintained in all aspects of medical care; (3) have his or her basic human needs accommodated in a timely manner; (4) continuity and coordination of care among and between all disciplines serving the patient's medical diagnoses and needs; (5) be told the identity of his or her health care provider upon request; (6) be provided digitally or in writing current information concerning the patient's diagnosis, treatment, alternatives, risks, and prognosis upon request; and (7) be informed, prior to or at the time of admission and during his or her stay, of services that are included in the health care facility's basic per diem or daily room rate and that other services are available at additional charge. Provides that hospitals' patient advocates or ombudsmen shall be notified of patient grievances. Provides that a health care facility shall make every effort to assist patients in obtaining information regarding whether the Medicare or Medical Assistance program will pay for any or all of the services provided by the health care facility. Provides that hospitals shall have a written internal grievance procedure that conforms with specified requirements. Makes other changes. Effective immediately.

LRB102 15473 CPF 20836 b

1 AN ACT concerning health.

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

- Section 5. The Medical Patient Rights Act is amended by changing Sections 2.01, 3, 3.1, 5, and 5.1 as follows:
- 6 (410 ILCS 50/2.01) (from Ch. 111 1/2, par. 5402.01)
- 7 Sec. 2.01. "Patient" means any person who has received or
- 8 is receiving medical care, treatment, or services from an
- 9 individual or institution licensed to provide medical care or
- 10 treatment in this State. <u>The medical care or treatment</u>
- includes, but is not limited to, medical care or treatment for
- 12 <u>the purpose of diagnosis or treatment bearing on the physical</u>
- or mental health of the patient, whether as an inpatient or
- 14 outpatient.
- 15 (Source: P.A. 81-1167.)
- 16 (410 ILCS 50/3) (from Ch. 111 1/2, par. 5403)
- 17 Sec. 3. The following rights are hereby established:
- 18 (a) The right of each patient to care consistent with
  19 sound nursing and medical practices, to be informed of the
  20 name, specialty, and contact information of the physician
  21 responsible for coordinating his or her care, to be
- 22 <u>informed of how to reach the health care facility's</u>

administrator, outside advocate, interpreter, and legal services, to receive information concerning his or her condition and proposed treatment, to refuse any treatment to the extent permitted by law, and to privacy and confidentiality of records except as otherwise provided by law. Current health care facility policies, inspection findings of State and local health authorities, and further explanation of the written statement of rights under Section 5 shall be available to each patient, his or her quardian, or his or her chosen representative upon reasonable request to the administrator or other designated staff person consistent with Illinois law.

(a-5) The right of each patient to be treated with courtesy and respect for his or her individuality by employees or persons providing medical services or care and to have his or her human and civil rights maintained in all aspects of medical care. The employees and persons shall have up-to-date certification, licensure, and training pursuant to Illinois law. Each patient shall have his or her basic human needs, including, but not limited to, water, food, medication, toileting, and personal hygiene, accommodated in a timely manner.

(a-10) The right of each patient to continuity and coordination of care among and between all disciplines serving the patient's medical diagnoses and needs.

(a-15) A patient who receives services from an outside

health care provider is entitled, upon request, to be told the identity of the health care provider. This information shall include the name and address of the outside health care provider and a description of any service that may be rendered. In cases where it is medically advisable, as documented by the attending physician in a patient's care record, the information shall be given to the patient's quardian or other person designated by the patient as his or her representative.

- (b) The right of each patient, regardless of source of payment, to examine and receive a reasonable explanation of his total bill for services rendered by his physician or health care provider, including the itemized charges for specific services received. Each physician or health care provider shall be responsible only for a reasonable explanation of those specific services provided by such physician or health care provider.
- (c) In the event an insurance company or health services corporation cancels or refuses to renew an individual policy or plan, the insured patient shall be entitled to timely, prior notice of the termination of such policy or plan.

An insurance company or health services corporation that requires any insured patient or applicant for new or continued insurance or coverage to be tested for infection with human immunodeficiency virus (HIV) or any other

identified causative agent of acquired immunodeficiency syndrome (AIDS) shall (1) give the patient or applicant prior written notice of such requirement, (2) proceed with such testing only upon the written authorization of the applicant or patient, and (3) keep the results of such testing confidential. Notice of an adverse underwriting or coverage decision may be given to any appropriately interested party, but the insurer may only disclose the test result itself to a physician designated by the applicant or patient, and any such disclosure shall be in a manner that assures confidentiality.

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

(d) The right of each patient to privacy and confidentiality in health care. Each physician, health care provider, health services corporation, and insurance company shall provide a patient or his or her legal designee, digitally or in writing, current information concerning the patient's diagnosis, treatment, alternatives, risks, and prognosis upon request. Each physician, health care provider, health services corporation, and insurance company shall refrain from disclosing the nature or details of services provided to patients, except that such information may be disclosed:

(1) to the patient, (2) to the party making treatment decisions if the patient is incapable of making decisions

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

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writing to or through a health information exchange in accordance with the regulations, standards, or contractual obligations adopted by the Illinois Health Information Exchange Office in accordance with Section 9.6 of the Health and Developmental Disabilities 9.6 Confidentiality Act, Section of the Confidentiality Act, or Section 31.8 of the Genetic Information Privacy Act, as applicable. A patient shall not be denied access to care if he or she chooses to opt out of the sharing of such information. In the case of a patient choosing to opt out of having his or her information available on an HIE, nothing in this Act shall cause the physician or health care provider to be liable for the release of a patient's health information by other entities that may possess such information, including, but not limited to, other health professionals, providers, laboratories, pharmacies, hospitals, ambulatory surgical centers, and nursing homes.

19 (Source: P.A. 101-649, eff. 7-7-20.)

20 (410 ILCS 50/3.1) (from Ch. 111 1/2, par. 5403.1)

Sec. 3.1. (a) Any patient who is the subject of a research program or an experimental procedure, as defined under the rules and regulations of the Hospital Licensing Act, shall have, at a minimum, the right to receive an explanation of the nature and possible consequences of such research or

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- experiment before the research or experiment is conducted, and to consent to or reject it.
  - (b) No physician or health care provider may conduct any research program or experimental procedure on a patient without the prior informed consent of the patient in writing or digitally or, if the patient is unable to consent, the patient's guardian, spouse, parent, or authorized agent. Both the consent and the refusal shall be documented in the patient's care record.
- 10 (c) This Section shall not apply to any research program
  11 or medical experimental procedure for patients subject to a
  12 life-threatening emergency that is conducted in accordance
  13 with Part 50 of Title 21 of, and Part 46 of Title 45 of, the
  14 Code of Federal Regulations.
- 15 (Source: P.A. 90-36, eff. 6-27-97.)
- 16 (410 ILCS 50/5)
- 17 Sec. 5. Statement of hospital patient's rights.
- 18 (a) Each patient admitted to a hospital, and the guardian 19 or authorized representative or parent of a minor patient, 20 shall be given a written statement of all the rights 21 enumerated in this Act, including the rights listed under 22 Section 3, or a similar statement of patients' rights required of the hospital by the Joint Commission on Accreditation of 23 24 Organizations similar Healthcare or а 25 organization. The statement shall be given at the time of

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- admission or as soon thereafter as the condition of the patient permits. If a patient is provided with a digital copy of the statement, the patient may request and shall be provided with a readily available paper copy.
  - (b) If a patient is unable to read the written statement, a hospital shall make a reasonable effort to provide it to the quardian or authorized representative of the patient.
  - (c) The statement shall also include the right not to be discriminated against by the hospital due to the patient's race, ethnicity, gender identity, gender expression, sexual orientation, color, or national origin where such characteristics are not relevant to the patient's medical diagnosis and treatment. The statement shall further provide each admitted patient or the patient's representative or quardian with notice of how to initiate a grievance regarding improper discrimination and how to recommend changes in policies and services to hospital or health care facility staff and others of the patient's choice, free from restraint, interference, coercion, discrimination, or reprisal, with the hospital and how the patient may lodge a grievance with the Illinois Department of Public Health and the Illinois Department of Human Rights regardless of whether the patient has first used the hospital's grievance process.
    - (d) Each patient shall be informed, prior to or at the time of admission and during his or her stay, of services that are included in the health care facility's basic per diem or daily

- 1 room rate and that other services are available at an
- 2 additional charge, if applicable. A health care facility shall
- 3 make every effort to assist patients in obtaining information
- 4 regarding whether the Medicare or Medical Assistance program
- 5 will pay for any or all of the services provided.
- 6 (Source: P.A. 97-485, eff. 8-22-11.)
- 7 (410 ILCS 50/5.1)
- 8 Sec. 5.1. Discrimination grievance procedures. Upon
- 9 receipt of a grievance alleging unlawful discrimination on the
- 10 basis of race, color, <del>or</del> national origin, <u>ethnicity</u>, <u>gender</u>
- 11 <u>identity</u>, <u>gender expression</u>, <u>or sexual orientation</u> the
- 12 hospital must investigate the claim and work with the patient
- 13 to address valid or proven concerns in accordance with the
- 14 hospital's grievance process. The hospital's patient advocate
- or ombudsman shall be notified of the grievance. The hospital
- shall have a written internal grievance procedure that, at a
- minimum, sets forth the process to be followed, specifies time
- 18 limits, including time limits for health care facility
- 19 response, provides for the patient to have the assistance of
- 20 an advocate, requires a written response to written
- 21 grievances, and provides for a timely decision by an impartial
- decision maker if the grievance is not otherwise resolved. At
- 23 the conclusion of the hospital's grievance process, the
- 24 hospital shall inform the patient that such grievances may be
- 25 reported to the Illinois Department of Public Health if not

- 1 resolved to the patient's satisfaction at the hospital level.
- 2 (Source: P.A. 97-485, eff. 8-22-11.)
- 3 Section 99. Effective date. This Act takes effect upon
- 4 becoming law.