

SB1300



103RD GENERAL ASSEMBLY

State of Illinois

2023 and 2024

SB1300

Introduced 2/3/2023, by Sen. Patrick J. Joyce

SYNOPSIS AS INTRODUCED:

410 ILCS 50/3

from Ch. 111 1/2, par. 5403

Amends the Medical Patient Rights Act. Establishes the right of each patient to receive from his or her health care provider an estimated cost of nonemergency medical treatment prior to undergoing the nonemergency medical treatment.

LRB103 27643 CPF 54019 b

A BILL FOR

1 AN ACT concerning health.

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

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

6 (410 ILCS 50/3) (from Ch. 111 1/2, par. 5403)

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

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

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

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

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

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

23 (d) The right of each patient to privacy and
24 confidentiality in health care. Each physician, health
25 care provider, health services corporation and insurance
26 company shall refrain from disclosing the nature or

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

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

19 (e) The right of each patient to receive from his or
20 her health care provider an estimated cost of nonemergency
21 medical treatment prior to undergoing the nonemergency
22 medical treatment.

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