

1 AN ACT concerning health care.

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

4 Section 5. The Department of Public Health Powers and
5 Duties Law of the Civil Administrative Code of Illinois is
6 amended by adding Section 2310-543 as follows:

7 (20 ILCS 2310/2310-543 new)

8 Sec. 2310-543. Information regarding health care
9 services. With funds made available for this purpose, the
10 Department may, in conjunction with other programs or
11 activities related to accessing medical care, develop and
12 provide to the public and health care patients information
13 regarding the categories or types of health care services
14 available and their appropriate use, paying particular
15 attention to seeking care in hospital emergency departments.

16 Section 10. The Emergency Medical Treatment Act is
17 amended by changing Section 2 as follows:

18 (210 ILCS 70/2 new)

19 Sec. 2. Findings; prohibited terms.

20 (a) The Illinois General Assembly makes all of the
21 following findings:

22 (1) Hospital emergency services are not always the
23 most appropriate level of care for patients seeking
24 unscheduled medical care or for patients who do not have
25 a regular physician who can treat a significant or acute
26 medical condition not considered critical, debilitating,
27 or life-threatening.

28 (2) Hospital emergency rooms are over-utilized and
29 too often over-burdened with many injuries or illnesses

1 that could be managed in a less intensive clinical
2 setting or physician's office.

3 (3) Over-utilization of hospital emergency
4 departments contributes to excess medical and health
5 insurance costs.

6 (4) The use of the term "urgent" or "emerg-
7 similar term in a facility's posted or advertised name
8 may confuse the public and prospective patients regarding
9 the type of services offered relative to those provided
10 by a hospital emergency department. There is significant
11 risk to the public health and safety if persons requiring
12 treatment for a critical or life-threatening condition
13 inappropriately use such facilities.

14 (5) Many times patients are not clearly aware of
15 the policies and procedures of their insurer or health
16 plan that must be followed in the use of emergency rooms
17 versus non-emergent clinics and what rights they have
18 under the law in regard to appropriately sought emergency
19 care.

20 (6) There is a need to more effectively educate
21 health care payers and consumers about the most
22 appropriate use of the various available levels of
23 medical care and particularly the use of hospital
24 emergency rooms and walk-in medical clinics that do not
25 require appointments.

26 (b) After the effective date of this amendatory Act of
27 the 93rd General Assembly, no person, facility, or entity
28 shall hold itself out to the public as an "urgent", "urgi-",
29 "emerg-", or "emergent" care center or use any similar term,
30 as defined by rule, that would give the impression that
31 emergency medical treatment is provided by the person or
32 entity or at the facility unless the facility is the
33 emergency room of a facility licensed as a hospital under the
34 Hospital Licensing Act or a facility licensed as a

1 freestanding emergency center under the Emergency Medical
2 Services (EMS) Systems Act.

3 (c) Violation of this Section constitutes a business
4 offense with a minimum fine of \$5,000 plus \$1,000 per day for
5 a continuing violation, with a maximum of \$25,000.

6 (d) The Director of Public Health in the name of the
7 people of the State, through the Attorney General, may bring
8 an action for an injunction or to restrain a violation of
9 this Section or the rules adopted pursuant to this Section or
10 to enjoin the future operation or maintenance of any facility
11 in violation of this Section or the rules adopted pursuant to
12 this Section.

13 (e) The Department of Public Health shall adopt rules
14 necessary for the implementation of this Section.

15 Section 15. The Managed Care Reform and Patient Rights
16 Act is amended by adding Section 43 as follows:

17 (215 ILCS 134/43 new)

18 Sec. 43. Utilization of health care facilities.

19 (a) A health care plan must provide its enrollees with a
20 description of their rights and responsibilities in obtaining
21 referrals to and making appropriate use of health care
22 facilities when access to their primary care physician is not
23 readily available.

24 (b) Nothing in this Section is intended to affect the
25 rights of enrollees or relieve a health care plan of its
26 responsibilities with respect to the provision of and
27 coverage of emergency services or treatment of an emergency
28 medical condition, as those terms are defined by this Act,
29 and as those responsibilities and rights are otherwise
30 provided under this Act, especially Section 65 of this Act.

31 Section 99. Effective date. This Act takes effect upon

1 becoming law.