

1 AN ACT in relation to health care.

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

4 Section 5. The Illinois Health Finance Reform Act is
5 amended by changing Section 4-2 as follows:

6 (20 ILCS 2215/4-2) (from Ch. 111 1/2, par. 6504-2)

7 Sec. 4-2. Powers and duties.

8 (a) (Blank).

9 (b) (Blank).

10 (c) (Blank).

11 (d) Uniform Provider Utilization and Charge Information.

12 (1) The Department of Public Health shall require
13 that all hospitals and ambulatory surgical treatment
14 centers licensed to operate in the State of Illinois
15 adopt a uniform system for submitting patient charges for
16 payment from public and private payors effective-January
17 ~~17-1985~~. This system shall be based upon adoption of the
18 uniform electronic hospital billing form pursuant to the
19 Health Insurance Portability and Accountability Act
20 ~~(UB-92)-or-its-successor-form-developed-by--the--National~~
21 ~~Uniform-Billing-Committee.~~

22 (2) (Blank).

23 (3) The Department of Insurance shall require all
24 third-party payors, including but not limited to,
25 licensed insurers, medical and hospital service
26 corporations, health maintenance organizations, and
27 self-funded employee health plans, to accept the uniform
28 billing form, without attachment as submitted by
29 hospitals pursuant to paragraph (1) of subsection (d)
30 above, effective January 1, 1985; provided, however,
31 nothing shall prevent all such third party payors from

1 requesting additional information necessary to determine
2 eligibility for benefits or liability for reimbursement
3 for services provided.

4 (4) The Department shall require that all
5 physicians licensed to practice medicine in the State
6 adopt a uniform system for submitting patient charges for
7 payment from public and private payors. This system
8 shall be based upon adoption of the uniform electronic
9 billing form pursuant to the Health Insurance Portability
10 and Accountability Act.

11 (5) Each hospital, ambulatory surgical treatment
12 center, and physician licensed in the State shall
13 electronically submit to the Department patient billing
14 data for conditions and procedures required for public
15 disclosure pursuant to subsection (7).

16 (6) The Department must collect and compile all
17 data required under subsection (7) according to uniform
18 electronic submission formats, coding systems, and other
19 technical specifications necessary to make the incoming
20 data substantially valid, consistent, compatible, and
21 manageable using electronic data processing. All data
22 under this subsection must be submitted on a quarterly
23 basis, except that data submission requirements shall be
24 phased in by June 1, 2004 for: (a) ambulatory surgical
25 treatment centers with fewer than 25 full-time employees;
26 or (b) physicians with fewer than 10 full-time employees.

27 (7) The Department shall identify a minimum of 30
28 conditions and procedures that demonstrate the highest
29 degree of variation in patient charges and quality of
30 care. As to each condition or procedure, the Department
31 shall make available on its website by January 1, 2005
32 up-to-date comparison information that includes, but is
33 not limited to, the following: volume of cases, average
34 charges, length of stay for infections, complications,

1 mortality, readmissions, and any other quality measures
2 derived from available data collected from hospitals,
3 ambulatory surgical treatment centers, and physicians and
4 that the Department determines to be relevant and useful
5 to consumers in making health care decisions.

6 (8) Publicly disclosed information must be provided
7 in language that is easy to understand and accessible to
8 consumers using an interactive query system.

9 (9) The Department may permit hospitals, ambulatory
10 surgical treatment centers, and physicians the
11 opportunity to verify the accuracy of any information
12 pertaining to them and to submit any corrections with
13 supporting evidence and documentation.

14 (10) The Department must develop and implement an
15 outreach campaign to educate the public regarding the
16 availability of comparison health care charge data and
17 quality of care information.

18 (11) Within 12 months after the effective date of
19 this amendatory Act of the 93rd General Assembly, the
20 Department must study the most effective methods for
21 public disclosure of patient charge data and health care
22 quality information that will be useful to consumers in
23 making health care decisions and report its
24 recommendations to the Governor and to the General
25 Assembly.

26 (12) The Department must undertake all steps
27 necessary under State and Federal law to protect patient
28 confidentiality in order to prevent the identification of
29 individual patient records.

30 (13) Any hospital, ambulatory surgical treatment
31 center, or physician that fails to file a timely report,
32 files a false report, or files an incomplete report, is
33 liable for a civil penalty of not less than \$1,000 per
34 day for each day in violation.

1 (e) (Blank).

2 (Source: P.A. 91-756, eff. 6-2-00; 92-597, eff. 7-1-02.)

3 Section 99. Effective date. This Act takes effect upon
4 becoming law.