

1 AN ACT concerning health facilities.

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

4 Section 5. The Fair Patient Billing Act is amended by
5 adding Section 27 as follows:

6 (210 ILCS 88/27 new)

7 Sec. 27. Application Procedures for Financial Assistance.

8 (a) Applications. The Attorney General shall, by rule,
9 adopt standard provisions to be included in all applications
10 for financial assistance no later than June 30, 2013. On or
11 before January 1, 2013, a statewide association representing a
12 majority of hospitals may submit to the Attorney General
13 recommendations concerning standard provisions to be used in an
14 application for financial assistance, and the Attorney General
15 shall take those recommendations into account when adopting
16 rules under this subsection.

17 (b) Presumptive Eligibility. The Attorney General shall,
18 by rule, adopt appropriate methodologies for the determination
19 of presumptive eligibility no later than June 30, 2013. On or
20 before January 1, 2013, a statewide association representing a
21 majority of hospitals may submit to the Attorney General
22 recommendations concerning those methodologies, and the
23 Attorney General shall take those recommendations into account

1 when adopting rules under this subsection.

2 Section 10. The Hospital Uninsured Patient Discount Act is
3 amended by changing Section 10 as follows:

4 (210 ILCS 89/10)

5 Sec. 10. Uninsured patient discounts.

6 (a) Eligibility.

7 (1) A hospital, other than a rural hospital or Critical
8 Access Hospital, shall provide a discount from its charges
9 to any uninsured patient who applies for a discount and has
10 family income of not more than 600% of the federal poverty
11 income guidelines for all medically necessary health care
12 services exceeding \$300 in any one inpatient admission or
13 outpatient encounter.

14 (2) A hospital, other than a rural hospital or Critical
15 Access Hospital, shall provide a charitable discount of
16 100% of its charges for all medically necessary health care
17 services exceeding \$300 in any one inpatient admission or
18 outpatient encounter to any uninsured patient who applies
19 for a discount and has family income of not more than 200%
20 of the federal poverty income guidelines.

21 (3) ~~(2)~~ A rural hospital or Critical Access Hospital
22 shall provide a discount from its charges to any uninsured
23 patient who applies for a discount and has annual family
24 income of not more than 300% of the federal poverty income

1 guidelines for all medically necessary health care
2 services exceeding \$300 in any one inpatient admission or
3 outpatient encounter.

4 (4) A rural hospital or Critical Access Hospital shall
5 provide a charitable discount of 100% of its charges for
6 all medically necessary health care services exceeding
7 \$300 in any one inpatient admission or outpatient encounter
8 to any uninsured patient who applies for a discount and has
9 family income of not more than 125% of the federal poverty
10 income guidelines.

11 (b) Discount. For all health care services exceeding \$300
12 in any one inpatient admission or outpatient encounter, a
13 hospital shall not collect from an uninsured patient, deemed
14 eligible under subsection (a), more than its charges less the
15 amount of the uninsured discount.

16 (c) Maximum Collectible Amount.

17 (1) The maximum amount that may be collected in a 12
18 month period for health care services provided by the
19 hospital from a patient determined by that hospital to be
20 eligible under subsection (a) is 25% of the patient's
21 family income, and is subject to the patient's continued
22 eligibility under this Act.

23 (2) The 12 month period to which the maximum amount
24 applies shall begin on the first date, after the effective
25 date of this Act, an uninsured patient receives health care
26 services that are determined to be eligible for the

1 uninsured discount at that hospital.

2 (3) To be eligible to have this maximum amount applied
3 to subsequent charges, the uninsured patient shall inform
4 the hospital in subsequent inpatient admissions or
5 outpatient encounters that the patient has previously
6 received health care services from that hospital and was
7 determined to be entitled to the uninsured discount.

8 (4) Hospitals may adopt policies to exclude an
9 uninsured patient from the application of subdivision
10 (c)(1) when the patient owns assets having a value in
11 excess of 600% of the federal poverty level for hospitals
12 in a metropolitan statistical area or owns assets having a
13 value in excess of 300% of the federal poverty level for
14 Critical Access Hospitals or hospitals outside a
15 metropolitan statistical area, not counting the following
16 assets: the uninsured patient's primary residence;
17 personal property exempt from judgment under Section
18 12-1001 of the Code of Civil Procedure; or any amounts held
19 in a pension or retirement plan, provided, however, that
20 distributions and payments from pension or retirement
21 plans may be included as income for the purposes of this
22 Act.

23 (d) Each hospital bill, invoice, or other summary of
24 charges to an uninsured patient shall include with it, or on
25 it, a prominent statement that an uninsured patient who meets
26 certain income requirements may qualify for an uninsured

1 discount and information regarding how an uninsured patient may
2 apply for consideration under the hospital's financial
3 assistance policy.

4 (Source: P.A. 95-965, eff. 12-22-08.)

5 Section 99. Effective date. This Act takes effect upon
6 becoming law.