



Sen. William R. Haine

Filed: 3/25/2014

09800SB1630sam004

LRB098 08625 RPM 57067 a

1 AMENDMENT TO SENATE BILL 1630

2 AMENDMENT NO. _____. Amend Senate Bill 1630 by replacing
3 everything after the enacting clause with the following:

4 "Section 5. The Medical Patient Rights Act is amended by
5 adding Section 3.3 as follows:

6 (410 ILCS 50/3.3 new)

7 Sec. 3.3. Prohibition on the markup of anatomic pathology
8 services.

9 (a) A physician who orders, but who does not supervise or
10 perform, an anatomic pathology service shall disclose in a bill
11 for such service presented to the patient:

12 (1) the name and address of the physician or laboratory
13 that provided the anatomic pathology service; and

14 (2) the actual amount paid or to be paid for each
15 anatomic pathology service provided to the patient by the
16 physician or laboratory that performed the service.

1 (b) A physician subject to the requirement of subsection
2 (a) of this Section when billing a patient, insurer, or
3 third-party payer shall not markup, or directly or indirectly
4 increase, the amount subject to disclosure under paragraph (2)
5 of subsection (a) of this Section in any bill presented to a
6 patient, insurer, or third-party payer.

7 (c) This Section does not prohibit a referring physician
8 from charging a specimen acquisition or processing charge if:

9 (1) the charge is limited to actual costs incurred for
10 specimen collection and transportation; and

11 (2) the charge is separately coded or denoted as a
12 service distinct from the performance of the anatomic
13 pathology service, in conformance with the coding policies
14 of the American Medical Association.

15 (d) The requirements of this Section do not apply to an
16 anatomic pathology service ordered or provided by:

17 (1) facilities licensed under the Hospital Licensing
18 Act or the University of Illinois Hospital Act or clinical
19 laboratories owned, operated by, or operated within
20 facilities licensed under the Hospital Licensing Act or the
21 University of Illinois Hospital Act;

22 (2) any public health clinic or nonprofit health
23 clinic; or

24 (3) any government agency, or their specified public or
25 private agents.

26 (e) No patient, insurer, or other third-party payer, shall

1 be required to reimburse any licensed health care professional
2 for charges or claims submitted in violation of this Section.

3 (f) A person who receives a bill for an anatomic pathology
4 service made in knowing and willful violation of this Section
5 may maintain an action to recover the actual amount paid for
6 the bill.

7 (g) The Department of Insurance shall enforce the
8 provisions of this Section for any bill submitted to a payer in
9 violation of this Section.

10 (h) For the purposes of this Section, "anatomic pathology
11 services" means:

12 (1) histopathology or surgical pathology, meaning the
13 gross and microscopic examination performed by a physician
14 or under the supervision of a physician, including
15 histologic processing;

16 (2) cytopathology, meaning the microscopic examination
17 of cells from (A) fluids, (B) aspirates, (C) washings, (D)
18 brushings, or (E) smears, including the Pap smear test
19 examination performed by a physician or under the
20 supervision of a physician;

21 (3) hematology, meaning the microscopic evaluation of
22 bone marrow aspirates and biopsies performed by a
23 physician, or under the supervision of a physician, and
24 peripheral blood smears when the attending or treating
25 physician or technologist requests that a blood smear be
26 reviewed by a pathologist;

1 (4) sub-cellular pathology or molecular pathology,
2 meaning the assessment of a patient specimen for the
3 detection, localization, measurement, or analysis of one
4 or more protein or nucleic acid targets; and

5 (5) blood-banking services performed by
6 pathologists."