

## 99TH GENERAL ASSEMBLY State of Illinois 2015 and 2016 SB0159

Introduced 1/28/2015, by Sen. John J. Cullerton

## SYNOPSIS AS INTRODUCED:

735 ILCS 5/8-2001

from Ch. 110, par. 8-2001

Amends the Code of Civil Procedure. Makes a technical change in a Section concerning the examination of health care records.

LRB099 03385 HEP 23393 b

1 AN ACT concerning civil law.

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

- Section 5. The Code of Civil Procedure is amended by changing Section 8-2001 as follows:
- 6 (735 ILCS 5/8-2001) (from Ch. 110, par. 8-2001)
- 7 Sec. 8-2001. Examination of health care records.
- 8 (a) In this Section:
- 9 "Health care facility" or "facility" means a public or
  10 private hospital, ambulatory surgical treatment center,
  11 nursing home, independent practice association, or physician
  12 hospital organization, or any other entity where health care
  13 services are provided to any person. The The term does not
- 14 include a health care practitioner.
- care practitioner" 15 means any health 16 practitioner, including a physician, dentist, podiatric 17 physician, advanced practice nurse, physician assistant, clinical psychologist, or clinical social worker. The term 18 19 includes a medical office, health care clinic, health department, group practice, and any other organizational 20 21 structure for a licensed professional to provide health care 22 services. The term does not include a health care facility.
- 23 (b) Every private and public health care facility shall,

upon the request of any patient who has been treated in such health care facility, or any person, entity, or organization presenting a valid authorization for the release of records signed by the patient or the patient's legally authorized representative, or as authorized by Section 8-2001.5, permit the patient, his or her health care practitioner, authorized attorney, or any person, entity, or organization presenting a valid authorization for the release of records signed by the patient or the patient's legally authorized representative to examine the health care facility patient care records, including but not limited to the history, bedside notes, charts, pictures and plates, kept in connection with the treatment of such patient, and permit copies of such records to be made by him or her or his or her health care practitioner or authorized attorney.

(c) Every health care practitioner shall, upon the request of any patient who has been treated by the health care practitioner, or any person, entity, or organization presenting a valid authorization for the release of records signed by the patient or the patient's legally authorized representative, permit the patient and the patient's health care practitioner or authorized attorney, or any person, entity, or organization presenting a valid authorization for the release of records signed by the patient or the patient's legally authorized representative, to examine and copy the patient's records, including but not limited to those relating

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to the diagnosis, treatment, prognosis, history, charts, pictures and plates, kept in connection with the treatment of such patient.

(d) A request for copies of the records shall be in writing and shall be delivered to the administrator or manager of such health care facility or to the health care practitioner. The person (including patients, health care practitioners attorneys) requesting copies of records shall reimburse the facility or the health care practitioner at the time of such copying for all reasonable expenses, including the costs of independent copy service companies, incurred in connection with such copying not to exceed a \$20 handling charge for processing the request and the actual postage or shipping charge, if any, plus: (1) for paper copies 75 cents per page for the first through 25th pages, 50 cents per page for the 26th through 50th pages, and 25 cents per page for all pages in excess of 50 (except that the charge shall not exceed \$1.25 per page for any copies made from microfiche or microfilm; records retrieved from scanning, digital imaging, electronic information or other digital format do not qualify as microfiche or microfilm retrieval for purposes of calculating charges); and (2) for electronic records, retrieved from a scanning, digital imaging, electronic information or other digital format in an electronic document, a charge of 50% of the per page charge for paper copies under subdivision (d) (1). This per page charge includes the cost of each CD Rom, DVD, or

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storage media. Records already maintained electronic or digital format shall be provided in an electronic format when so requested. If the records system does not allow for the creation or transmission of an electronic or digital record, then the facility or practitioner shall inform the requester in writing of the reason the records can not be provided electronically. The written explanation may be included with the production of paper copies, if the requester to order paper copies. These rates shall chooses automatically adjusted as set forth in Section 8-2006. The facility or health care practitioner may, however, charge for the reasonable cost of all duplication of record material or information that cannot routinely be copied or duplicated on a standard commercial photocopy machine such as x-ray films or pictures.

- (d-5) The handling fee shall not be collected from the patient or the patient's personal representative who obtains copies of records under Section 8-2001.5.
- (e) The requirements of this Section shall be satisfied within 30 days of the receipt of a written request by a patient or by his or her legally authorized representative, health care practitioner, authorized attorney, or any person, entity, or organization presenting a valid authorization for the release of records signed by the patient or the patient's legally authorized representative. If the facility or health care practitioner needs more time to comply with the request, then

- within 30 days after receiving the request, the facility or
  health care practitioner must provide the requesting party with
  a written statement of the reasons for the delay and the date
  by which the requested information will be provided. In any
  event, the facility or health care practitioner must provide
  the requested information no later than 60 days after receiving
  the request.
  - (f) A health care facility or health care practitioner must provide the public with at least 30 days prior notice of the closure of the facility or the health care practitioner's practice. The notice must include an explanation of how copies of the facility's records may be accessed by patients. The notice may be given by publication in a newspaper of general circulation in the area in which the health care facility or health care practitioner is located.
    - (g) Failure to comply with the time limit requirement of this Section shall subject the denying party to expenses and reasonable attorneys' fees incurred in connection with any court ordered enforcement of the provisions of this Section.
- 20 (Source: P.A. 97-623, eff. 11-23-11; 97-867, eff. 7-30-12;
- 21 98-214, eff. 8-9-13; 98-756, eff. 7-16-14.)