

1 AMENDMENT TO HOUSE BILL 1824

2 AMENDMENT NO. _____. Amend House Bill 1824 on page 1, in
3 line 6, by replacing "and 2-5" with "2-5, and 4-2"; and
4 on page 3, in line 5, by inserting after "record." the
5 following:

6 "In appointing members to represent providers, the Director
7 of Public Health shall give due consideration to
8 recommendations of statewide organizations representing such
9 providers."; and

10 on page 3, by inserting after line 14 the following:

11 "(20 ILCS 2215/4-2) (from Ch. 111 1/2, par. 6504-2)
12 Sec. 4-2. Powers and duties.

13 (a) The Illinois Health Care Cost Containment Council
14 may enter into any agreement with any corporation,
15 association or other entity it deems appropriate to undertake
16 the process described in this Article for the collection,
17 compilation, or and analysis of data collected by the Council
18 and to conduct or contract for studies on health-related
19 questions carried out in pursuance of the purposes of this
20 Article. The agreement may provide for the corporation,
21 association or entity to prepare and distribute or make
22 available data to health care providers, health care

1 subscribers, third-party payors, government and the general
2 public, in accordance with the rules of confidentiality and
3 review to be developed under this Act.

4 (a-5) On or before December 31, 2001, the Council must
5 complete an analysis of whether the functions of collecting,
6 compiling, analyzing, or reporting data as required by this
7 Article IV could be performed more economically under one or
8 more agreements as authorized by subsection (a) than they can
9 be performed internally by the Council. If the Council
10 determines that one or more of these functions could be
11 performed more economically by an agreement as authorized by
12 subsection (a), the Council must enter into one or more
13 agreements for the performance of such functions. The
14 Council must periodically review any agreement entered under
15 subsection (a) to ensure that they remain the most economical
16 method of performing the work that is the subject of the
17 agreement or agreements.

18 (b) The input data collected by and furnished to the
19 Council or designated corporation, association or entity
20 pursuant to this Section shall not be a public record under
21 the Illinois Freedom of Information Act. It is the intent of
22 this Act and of the regulations written pursuant to it to
23 protect the confidentiality of individual patient information
24 and the proprietary information of commercial insurance
25 carriers and health care providers. Data specified in
26 subsections (e) and (e-5) shall be released on a hospital
27 specific and licensed ambulatory surgical treatment center
28 specific basis to facilitate comparisons among hospitals and
29 licensed ambulatory surgical treatment centers by purchasers.

30 (c) The Council shall require the Departments of Public
31 Health and Public Aid and hospitals located in the State to
32 assist the Council in gathering and submitting the following
33 hospital-specific financial information, and the Council is
34 authorized to share this data with both Departments to reduce

1 the burden on hospitals by avoiding duplicate data
2 collection:

3 OPERATING REVENUES

- 4 (1) Net patient service revenue
- 5 (2) Other revenue
- 6 (3) Total operating revenue

7 OPERATING EXPENSES

- 8 (4) Bad debt expense
- 9 (5) Total operating expenses

10 NON-OPERATING GAINS/LOSSES

- 11 (6) Total non-operating gains
- 12 (7) Total non-operating losses

13 PATIENT CARE REVENUES

- 14 (8) Gross inpatient revenue
- 15 (9) Gross outpatient revenue
- 16 (10) Other Patient care revenue
- 17 (11) Total patient revenue
- 18 (12) Total gross patient care revenue
- 19 (13) Medicare gross revenue
- 20 (14) Medicaid gross revenue
- 21 (15) Total other gross revenue

22 DEDUCTIONS FROM REVENUE

- 23 (16) Charity care
- 24 (17) Medicare allowance
- 25 (18) Medicaid allowance
- 26 (19) Other contractual allowances
- 27 (20) Other allowances
- 28 (21) Total Deductions

29 ASSETS

- 30 (22) Operating cash and short-term investments
- 31 (23) Estimated patient accounts receivable

- 1 (24) Other current assets
- 2 (25) Total current assets
- 3 (26) Total other assets
- 4 (27) Total Assets

5 LIABILITIES AND FUND BALANCES

- 6 (28) Total current liabilities
- 7 (29) Long Term Debt
- 8 (30) Other liabilities
- 9 (31) Total liabilities
- 10 (32) Total liabilities and fund balances

11 All financial data collected by the Council from publicly
12 available sources such as the HCFA is releasable by the
13 Council on a hospital specific basis when appropriate.

14 (d) Uniform Provider Utilization and Charge
15 Information. The Council shall require that:

16 (1) Hospitals licensed to operate in the State of
17 Illinois adopt a uniform system for submitting patient
18 charges for payment from public and private payors
19 effective January 1, 1985. This system shall be based
20 upon adoption of the uniform hospital billing form
21 (UB-92) or its successor form developed by the National
22 Uniform Billing Committee.

23 (2) (Blank).

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

1 for services provided.

2 (e) The Council, in cooperation with the State
3 Departments of Public Aid, Insurance, and Public Health,
4 shall establish a system for the collection of the following
5 information from hospitals utilizing the raw data available
6 on the uniform billing forms. Such data shall include the
7 following elements and other elements contained on the
8 uniform billing form or its successor form determined as
9 necessary by the Council:

- 10 (1) Patient date of birth
- 11 (2) Patient sex
- 12 (3) Patient zip code
- 13 (4) Third-party coverage
- 14 (5) Date of admission
- 15 (6) Source of admission
- 16 (7) Type of admission
- 17 (8) Discharge date
- 18 (9) Principal and up to 8 other diagnoses
- 19 (10) Principal procedure and date
- 20 (11) Patient status
- 21 (12) Other procedures and dates
- 22 (13) Total charges and components of those charges
- 23 (14) Attending and consulting physician identification
24 numbers
- 25 (15) Hospital identification number
- 26 (16) An alphanumeric number based on the information to
27 identify the payor
- 28 (17) Principal source of payment.

29 (e-5) The Council, in cooperation with the Department of
30 Public Aid, the Department of Insurance, and the Department
31 of Public Health, shall establish a system for the collection
32 of the following information for each outpatient surgery
33 performed at hospitals and licensed ambulatory surgical
34 treatment centers using the raw data available on outpatient

1 billing forms submitted by hospitals and licensed ambulatory
2 surgical treatment centers to payors. The data must include
3 the following elements, if available on the billing forms,
4 and other elements contained on the billing forms that the
5 Council determines are necessary:

- 6 (1) patient date of birth;
- 7 (2) patient sex;
- 8 (3) patient zip code;
- 9 (4) third-party coverage;
- 10 (5) date of admission;
- 11 (6) source of admission;
- 12 (7) type of admission;
- 13 (8) discharge date;
- 14 (9) principal diagnosis and up to 8 other
15 diagnoses;
- 16 (10) principal procedure and the date of the
17 procedure;
- 18 (11) patient status;
- 19 (12) other procedures and the dates of those
20 procedures;
- 21 (13) attending and consulting physician
22 identification numbers;
- 23 (14) hospital or licensed ambulatory surgical
24 treatment center identification number;
- 25 (15) an alphanumeric number based on the
26 information needed to identify the payor; and
- 27 (16) principal source of payment.

28 (f) Extracts of the UB-92 transactions shall be prepared
29 by hospitals according to regulations promulgated by the
30 Council and submitted in electronic format to the Council or
31 the corporation, association or entity designated by the
32 Council.

33 For hospitals unable to submit extracts in electronic
34 format, the Council shall determine an alternate method for

1 submission of data. Such extract reporting systems shall be
2 in operation before January 1, 1987; however, the Council may
3 grant time extensions to individual hospital.

4 (f-5) Extracts of the billing forms shall be prepared by
5 licensed ambulatory surgical treatment centers according to
6 rules adopted by the Council and submitted to the Council or
7 a corporation, association, or entity designated by the
8 Council. Electronic submissions shall be encouraged. For
9 licensed ambulatory surgical treatment centers unable to
10 submit extracts in an electronic format the Council must
11 determine an alternate method for submission of data.

12 (g) Under no circumstances shall patient name and social
13 security number appear on the extracts.

14 (h) Hospitals and licensed ambulatory surgical treatment
15 centers shall be assigned a standard identification number by
16 the Council to be used in the submission of all data.

17 (i) The Council shall collect a 100% inpatient sample
18 from hospitals annually. The Council shall require each
19 hospital in the State to submit the UB-92 data extracts
20 required in subsection (e) to the Council, except that
21 hospitals with fewer than 50 beds may be exempted by the
22 Council from the filing requirements if they prove to the
23 Council's satisfaction that the requirements would impose
24 undue economic hardship and if the Council determines that
25 the data submitted from these hospitals are not essential to
26 its data base and its concomitant health care cost comparison
27 efforts.

28 (i-5) The Council shall collect up to a 100% outpatient
29 sample annually from hospitals and licensed ambulatory
30 surgical treatment centers. The Council shall require each
31 hospital and licensed ambulatory surgical treatment center in
32 the State to submit the data extracts required under
33 subsection (e-5) to the Council, except that hospitals and
34 licensed ambulatory surgical treatment centers may be

1 exempted by the Council from the filing requirements if the
2 hospitals or licensed ambulatory surgical treatment centers
3 prove to the Council's satisfaction that the requirements
4 would impose undue economic hardship and if the Council
5 determines that the data submitted from those hospitals and
6 licensed ambulatory surgical treatment centers are not
7 essential to the Council's database and its concomitant
8 health care comparison efforts.

9 (i-10) The outpatient data shall be collected by the
10 Council on a phase-in and trial basis for a one-year period
11 beginning on January 1, 2001. The Council shall implement
12 outpatient data collection for reporting purposes beginning
13 on January 1, 2002.

14 (j) The information submitted to the Council pursuant to
15 subsections (e) and (e-5) shall be reported for each primary
16 payor category, including Medicare, Medicaid, other
17 government programs, private insurance, health maintenance
18 organizations, self-insured, private pay patients, and
19 others. Preferred provider organization reimbursement shall
20 also be reported for each primary third party payor category.

21 (k) The Council shall require and the designated
22 corporation, association or entity, if applicable, shall
23 prepare quarterly basic reports in the aggregate on health
24 care cost and utilization trends in Illinois. The Council
25 shall provide these reports to the public, if requested.
26 These shall include, but not be limited to, comparative
27 information on average charges, total and ancillary charge
28 components, length of stay on diagnosis-specific and
29 procedure specific cases, and number of discharges, compiled
30 in aggregate by hospital and licensed ambulatory surgical
31 treatment center, by diagnosis, and by primary payor
32 category.

33 (l) The Council shall, from information submitted
34 pursuant to subsection (e), prepare an annual report in the

1 aggregate by hospital containing the following:

2 (1) the ratio of caesarean section deliveries to
3 total deliveries;

4 (2) the average length of stay for patients who
5 undergo caesarean sections;

6 (3) the average total charges for patients who have
7 normal deliveries without any significant complications;

8 (4) the average total charges for patients who
9 deliver by caesarean section.

10 The Council shall provide this report to the public, if
11 requested.

12 (1-5) (Blank).

13 (m) Prior to the release or dissemination of any
14 provider-specific data for any purpose permitted by this Act
15 these-reports, the Council or the designated corporation
16 shall notify each provider of the release or dissemination
17 and permit each provider a reasonable providers---the
18 opportunity to verify the accuracy of any information
19 pertaining to the provider. The Council shall give any
20 requesting provider, or its designated agent, a copy of the
21 data to be released or disseminated pertaining to that
22 provider. The providers, or their designated agents, may
23 submit to the Council any corrections or errors in the
24 compilation of the data with any supporting evidence and
25 documents the providers or agents may submit. The Council or
26 corporation shall correct data found to be in error and
27 include additional commentary as requested by the provider or
28 agent for major deviations in the charges from the average
29 charges. For purposes of this subsection (m), "providers"
30 includes hospitals, ambulatory surgical treatment centers,
31 and physicians licensed to practice medicine in all of its
32 branches.

33 (n) In addition to the reports indicated above, the
34 Council shall respond to requests by agencies of government

1 and organizations in the private sector for data products,
2 special studies and analysis of data collected pursuant to
3 this Section. Such reports shall be undertaken only by the
4 agreement of a majority of the members of the Council who
5 shall designate the form in which the information shall be
6 made available. The Council or the corporation, association
7 or entity in consultation with the Council shall also
8 determine a fee to be charged to the requesting agency or
9 private sector organization to cover the direct and indirect
10 costs for producing such a report, and shall permit affected
11 providers the rights to review the accuracy of the report
12 before it is released. Such reports shall not be subject to
13 The Freedom of Information Act.

14 (Source: P.A. 91-756, eff. 6-2-00.)".