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AN ACT concerning health facilities.

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

Section 5. The Emergency Medical Services (EMS) Systems Act
is amended by changing Section 3.190 as follows:

6 (210 ILCS 50/3.190)

Sec. 3.190. Emergency Department Classifications. The
Department shall have the authority and responsibility to:

9 Establish criteria for classifying the emergency (a) departments of all hospitals within the State as Comprehensive, 10 Basic, or Standby. In establishing such criteria, the 11 12 Department may consult with the Illinois Hospital Licensing Board and incorporate by reference all or part of existing 13 14 standards adopted as rules pursuant to the Hospital Licensing Act or Emergency Medical Treatment Act; 15

(b) Classify the emergency departments of all hospitalswithin the State in accordance with this Section;

18 (c) Annually publish, and distribute to all EMS Systems, a 19 list reflecting the classification of all emergency 20 departments.

(d) For the purposes of paragraphs (a) and (b) of this
 Section, long-term acute care hospitals, as defined under the
 Hospital Emergency Service Act, are not required to provide

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1 <u>hospital emergency services and shall be classified as not</u> 2 available.

3 (Source: P.A. 89-177, eff. 7-19-95.)

Section 10. The Hospital Emergency Service Act is amended
by changing Section 1 and adding Section 1.3 as follows:

6 (210 ILCS 80/1) (from Ch. 111 1/2, par. 86)

7 Sec. 1. Every hospital required to be licensed by the 8 Department of Public Health pursuant to the Hospital Licensing 9 Act which provides general medical and surgical hospital 10 services, except long-term acute care hospitals identified in 11 Section 1.3 of this Act, shall provide a hospital emergency 12 service in accordance with rules and regulations adopted by the 13 Department of Public Health and shall furnish such hospital 14 emergency services to any applicant who applies for the same in 15 case of injury or acute medical condition where the same is 16 liable to cause death or severe injury or serious illness. For purposes of this Act, "applicant" includes any person who is 17 18 brought to a hospital by ambulance or specialized emergency 19 medical services vehicle as defined in the Emergency Medical 20 Services (EMS) Systems Act.

21 (Source: P.A. 86-1461.)

22

(210 ILCS 80/1.3 new)

23 <u>Sec. 1.3. Long-term acute care hospitals. For the purpose</u>

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of this Act, general acute care hospitals designated by Medicare as long-term acute care hospitals are not required to provide hospital emergency services described in Section 1 of this Act. Hospitals defined in this Section may provide hospital emergency services at their option.

6 <u>Long-term acute care hospitals that operate standby</u> 7 <u>emergency services as of January 1, 2011 may discontinue</u> 8 <u>hospital emergency services by notifying the Department of</u> 9 <u>Public Health. Long-term acute care hospitals that operate</u> 10 <u>basic or comprehensive emergency services must notify the</u> 11 <u>Health Facilities and Services Review Board and follow the</u> 12 appropriate procedures.

Section 15. The Long Term Acute Care Hospital Quality IM Improvement Transfer Program Act is amended by changing Section 10 as follows:

16 (210 ILCS 155/10)

17 Sec. 10. Definitions. As used in this Act:

(a) "CARE tool" means the Continuity and Record Evaluation
(CARE) tool. It is a patient assessment instrument that has
been developed to document the medical, cognitive, functional,
and discharge status of persons receiving health care services
in acute and post-acute care settings. The data collected is
able to document provider-level quality of care (patient
outcomes) and characterize the clinical complexity of

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1 patients.

2 (b) "Department" means the Illinois Department of3 Healthcare and Family Services.

4 (c) "Discharge" means the release of a patient from 5 hospital care for any discharge disposition other than a leave 6 of absence, even if for Medicare payment purposes the discharge 7 fits the definition of an interrupted stay.

8 (d) "FTE" means "full-time equivalent" or a person or 9 persons employed in one full-time position.

10 (e) "Hospital" means an institution, place, building, or 11 agency located in this State that is licensed as a general 12 acute hospital by the Illinois Department of Public Health 13 under the Hospital Licensing Act, whether public or private and 14 whether organized for profit or not-for-profit.

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(f) "ICU" means intensive care unit.

16 (g) "LTAC hospital" means a hospital that is designated by 17 Medicare as a long term acute care hospital as described in Section 1886(d)(1)(B)(iv)(I) of the Social Security Act and has 18 19 an average length of Medicaid inpatient stay greater than 25 20 days as reported on the hospital's 2008 Medicaid cost report on file as of February 15, 2010, or a hospital that begins 21 22 operations after January 1, 2009 2010 and is designated by 23 Medicare as a long term acute care hospital.

(h) "LTAC hospital criteria" means nationally recognized
evidence-based evaluation criteria that have been publicly
tested and includes criteria specific to an LTAC hospital for

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admission, continuing stay, and discharge. The criteria cannot 1 2 include criteria derived or developed by or for a specific 3 hospital or group of hospitals. Criteria and tools developed by 4 hospitals or hospital associations or hospital-owned 5 organizations are not acceptable and do not meet the 6 requirements of this subsection.

7 (i) "Patient" means an individual who is admitted to a8 hospital for an inpatient stay.

9 (j) "Program" means the Long Term Acute Care Hospital 10 Quality Improvement Transfer Program established by this Act.

11 (k) "STAC hospital" means a hospital that is not an LTAC 12 hospital as defined in this Act or a psychiatric hospital or a 13 rehabilitation hospital.

14 (Source: P.A. 96-1130, eff. 7-20-10.)

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