

Sen. Mattie Hunter

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Filed: 5/6/2014

09800HB5925sam001 LRB098 AMENDMENT TO HOUSE BILL 5925

LRB098 20292 RPM 58824 a

- 3 on page 1, immediately below line 3, by inserting the

AMENDMENT NO. . Amend House Bill 5925 as follows:

- 4 following:
- 5 "Section 1. The Illinois Health Information Exchange and
- 6 Technology Act is amended by changing Section 40 as follows:
- 7 (20 ILCS 3860/40)
- 8 (Section scheduled to be repealed on January 1, 2021)
- 9 Sec. 40. Reliance on data. Any health care provider who
- 10 relies in good faith upon any information provided through the
- 11 ILHIE in his, her, or its treatment of a patient shall be
- 12 immune from criminal or civil liability or professional
- 13 <u>discipline</u> arising from any damages caused by such good faith
- 14 reliance. This immunity does not apply to acts or omissions
- 15 constituting gross negligence or reckless, wanton, or

- 1 intentional misconduct. Notwithstanding this provision, the
- 2 Authority does not waive any immunities provided under State or
- 3 federal law.
- 4 (Source: P.A. 96-1331, eff. 7-27-10.)"; and
- 5 on page 3, immediately below line 1, by inserting the
- 6 following:
- 7 "Section 7. The Medical Patient Rights Act is amended by
- 8 changing Section 3 as follows:
- 9 (410 ILCS 50/3) (from Ch. 111 1/2, par. 5403)
- 10 Sec. 3. The following rights are hereby established:
- 11 (a) The right of each patient to care consistent with sound
- nursing and medical practices, to be informed of the name of
- the physician responsible for coordinating his or her care, to
- 14 receive information concerning his or her condition and
- 15 proposed treatment, to refuse any treatment to the extent
- 16 permitted by law, and to privacy and confidentiality of records
- 17 except as otherwise provided by law.
- 18 (b) The right of each patient, regardless of source of
- 19 payment, to examine and receive a reasonable explanation of his
- 20 total bill for services rendered by his physician or health
- 21 care provider, including the itemized charges for specific
- 22 services received. Each physician or health care provider shall
- 23 be responsible only for a reasonable explanation of those

specific services provided by such physician or health care provider.

(c) In the event an insurance company or health services corporation cancels or refuses to renew an individual policy or plan, the insured patient shall be entitled to timely, prior notice of the termination of such policy or plan.

An insurance company or health services corporation that requires any insured patient or applicant for new or continued insurance or coverage to be tested for infection with human immunodeficiency virus (HIV) or any other identified causative agent of acquired immunodeficiency syndrome (AIDS) shall (1) give the patient or applicant prior written notice of such requirement, (2) proceed with such testing only upon the written authorization of the applicant or patient, and (3) keep the results of such testing confidential. Notice of an adverse underwriting or coverage decision may be given to any appropriately interested party, but the insurer may only disclose the test result itself to a physician designated by the applicant or patient, and any such disclosure shall be in a manner that assures confidentiality.

The Department of Insurance shall enforce the provisions of this subsection.

(d) The right of each patient to privacy and confidentiality in health care. Each physician, health care provider, health services corporation and insurance company shall refrain from disclosing the nature or details of services

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provided to patients, except that such information may be disclosed: (1) to the patient, (2) to the party making treatment decisions if the patient is incapable of making decisions regarding the health services provided, (3) for those parties directly involved with providing treatment in accordance with 45 CFR 164.501 and 164.506, (4) for to the patient or processing the payment in accordance with 45 CFR 164.501 and 164.506, (5) to for that treatment, those parties responsible for peer review, utilization $review_{\underline{\prime}}$ and quality assurance, (6) for health care operations in accordance with 45 CFR 164.501 and 164.506, (7) to and those parties required to be notified under the Abused and Neglected Child Reporting Act or, the Illinois Sexually Transmissible Disease Control Act, or (8) as where otherwise permitted, authorized, or required by State or federal law. This right may be waived in writing by the patient or the patient's guardian or legal representative, but a physician or other health care provider may not condition the provision of services on the patient's, or guardian's, or legal representative's agreement to sign such a waiver. In the interest of public health, safety, and welfare, patient information, including, but not limited to, health information, demographic information, and information about the services provided to patients, may be transmitted to or through a health information exchange, as that term is defined in Section 2 of the Mental Health and Developmental Disabilities Confidentiality Act, in accordance with the

- 1 disclosures permitted pursuant to this Section. Patients shall be provided the opportunity to opt out of their health 2 information being transmitted to or through a health 3 4 information exchange in accordance with the regulations, 5 standards, or contractual obligations adopted by the Illinois Health Information Exchange Authority in accordance with 6 Section 9.6 of the Mental Health and Developmental Disabilities 7 Confidentiality Act, Section 9.6 of the AIDS Confidentiality 8 9 Act, or Section 31.8 of the Genetic Information Privacy Act, as 10 applicable. In the case of a patient choosing to opt out of 11 having his or her information available on an HIE, nothing in this Act shall cause the physician or health care provider to 12 13 be liable for the release of a patient's health information by 14 other entities that may possess such information, including, 15 but not limited to, other health professionals, providers, 16 laboratories, pharmacies, hospitals, ambulatory surgical
- 18 (Source: P.A. 86-895; 86-902; 86-1028; 87-334.)"; and
- on page 9, by replacing line 4 with the following:

centers, and nursing homes.

- "(3) where the person providing informed consent is a";
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- on page 9, line 13, after "provider", by inserting "or health
- care professional"; and

- on page 13, line 25, after "provider", by inserting ", health 1
- 2 care professional,"; and
- 3 on page 16, line 14, by replacing "provider;" with "provider or
- 4 health care professional;"; and
- on page 16, line 16, after "provider", by inserting "or health 5
- 6 care professional"; and
- 7 on page 17, line 11, by replacing "professionals," with
- "professionals or health care providers,"; and 8
- on page 44, line 4, by replacing "professionals," with 9
- "professionals or health care providers,"; and 10
- on page 60, immediately below line 18, by inserting the 11
- following: 12
- 13 "Section 30. The Code of Civil Procedure is amended by
- 14 changing Section 8-802 as follows:
- (735 ILCS 5/8-802) (from Ch. 110, par. 8-802) 15
- 16 Sec. 8-802. Physician and patient. No physician or surgeon
- 17 shall be permitted to disclose any information he or she may
- 18 have acquired in attending any patient in a professional
- character, necessary to enable him or her professionally to 19

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serve the patient, except only (1) in trials for homicide when the disclosure relates directly to the fact or immediate circumstances of the homicide, (2) in actions, civil or criminal, against the physician for malpractice, (3) with the expressed consent of the patient, or in case of his or her death or disability, of his or her personal representative or other person authorized to sue for personal injury or of the beneficiary of an insurance policy on his or her life, health, or physical condition, or as authorized by Section 8-2001.5, (4) in all actions brought by or against the patient, his or her personal representative, a beneficiary under a policy of insurance, or the executor or administrator of his or her estate wherein the patient's physical or mental condition is an issue, (5) upon an issue as to the validity of a document as a will of the patient, (6) in any criminal action where the charge is either first degree murder by abortion, attempted abortion or abortion, (7) in actions, civil or criminal, arising from the filing of a report in compliance with the Neglected Child Reporting Act, (8) Abused and to department, agency, institution or facility which has custody of the patient pursuant to State statute or any court order of commitment, (9) in prosecutions where written results of blood alcohol tests are admissible pursuant to Section 11-501.4 of the Illinois Vehicle Code, (10) in prosecutions where written results of blood alcohol tests are admissible under Section 5-11a of the Boat Registration and Safety Act, (11) in criminal

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1 actions arising from the filing of a report of suspected 2 terrorist offense in compliance with Section 29D-10(p)(7) of the Criminal Code of 2012, or (12) upon the issuance of a 3 4 subpoena pursuant to Section 38 of the Medical Practice Act of 5 1987; the issuance of a subpoena pursuant to Section 25.1 of 6 the Illinois Dental Practice Act; the issuance of a subpoena pursuant to Section 22 of the Nursing Home Administrators 7 8 Licensing and Disciplinary Act; or the issuance of a subpoena pursuant to Section 25.5 of the Workers' Compensation Act, or 9 10 (13) to or through a health information exchange, as that term 11 is defined in Section 2 of the Mental Health and Developmental Disabilities Confidentiality Act, in accordance with State or 12 13 federal law.

In the event of a conflict between the application of this Section and the Mental Health and Developmental Disabilities Confidentiality Act to a specific situation, the provisions of the Mental Health and Developmental Disabilities Confidentiality Act shall control.

19 (Source: P.A. 97-18, eff. 6-28-11; 97-623, eff. 11-23-11;

20 97-813, eff. 7-13-12; 97-1150, eff. 1-25-13.)".