



Rep. Jay Hoffman

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10400HB4845ham001

LRB104 17026 JRC 34489 a

1 AMENDMENT TO HOUSE BILL 4845

2 AMENDMENT NO. _____. Amend House Bill 4845 by replacing
3 everything after the enacting clause with the following:

4 "Section 5. The Code of Civil Procedure is amended by
5 adding Section 8-2001.10 as follows:

6 (735 ILCS 5/8-2001.10 new)

7 Sec. 8-2001.10. Authorization for release of an
8 incapacitated person's records.

9 (a) In addition to disclosure allowed under Section 8-802,
10 an incapacitated person's health care records must be released
11 upon written request of the guardian of the incapacitated
12 person or by an agent appointed by the incapacitated person
13 under a power of attorney for health care. If no guardian or
14 agent exists, and the incapacitated person did not
15 specifically object to disclosure of the incapacitated
16 person's records in writing, then an incapacitated person's

1 health care records must be released upon the written request
2 of a person, who is considered to be a personal representative
3 of the patient for the purpose of the release of an
4 incapacitated patient's health care records, in one of these
5 categories:

6 (1) the incapacitated person's spouse; or

7 (2) if there is no spouse, any one or more of the
8 following:

9 (A) an adult child of the incapacitated person;

10 (B) a parent of the incapacitated person; or

11 (C) an adult sibling of the incapacitated person.

12 (b) Health care facilities and practitioners are
13 authorized to provide a copy of an incapacitated patient's
14 records based upon a person's payment of the statutory fee and
15 signed Authorized Relative Certification, attesting to the
16 fact that the person is authorized to receive such records
17 under this Section.

18 (c) Any person who, in good faith, relies on a copy of an
19 Authorized Relative Certification has the same immunities from
20 criminal and civil liability as those who rely on a power of
21 attorney for health care as provided in Section 30 of the
22 Health Care Surrogate Act or any other State law.

23 (d) Upon request for records of an incapacitated person,
24 the named authorized relative shall provide the facility or
25 practitioner with a statement of a treating health care
26 provider that the person is incapacitated as defined in the

1 Illinois Power of Attorney Act and a certification in
2 substantially the following form:

3 AUTHORIZED RELATIVE CERTIFICATION

4 I, (insert name of authorized relative), certify that I am
5 an authorized relative of (insert name of incapacitated
6 person). (A statement of the treating health care provider
7 must be attached.)

8 I certify to the best of my knowledge and belief that no
9 guardian has been appointed for the incapacitated person, that
10 no agent was authorized to act for the incapacitated person
11 under a power of attorney for health care, and the
12 incapacitated person has not specifically objected to
13 disclosure in writing.

14 (CHECK ONE)

15 I certify that I am the spouse of the incapacitated
16 person.

17 I certify that there is no spouse and my
18 relationship to the incapacitated person is (circle one):

19 (1) An adult child of the incapacitated person.

20 (2) A parent of the incapacitated person.

21 (3) An adult sibling of the incapacitated person.

22 I certify that I am seeking the records as a personal
23 representative who is acting in a representative capacity and
24 who is authorized to seek these records under Section
25 8-2001.10 of the Code of Civil Procedure.

26 This certification is made under penalty of perjury.

1 Dated: (insert date)

2

3 (Print Authorized Relative's Name)

4

5 (Authorized Relative's Signature)

6

7 (Authorized Relative's Address)

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