



## 102ND GENERAL ASSEMBLY

### State of Illinois

2021 and 2022

SB2978

Introduced 1/5/2022, by Sen. Karina Villa

#### SYNOPSIS AS INTRODUCED:

410 ILCS 50/2.01	from Ch. 111 1/2, par. 5402.01
410 ILCS 50/3	from Ch. 111 1/2, par. 5403
410 ILCS 50/3.1	from Ch. 111 1/2, par. 5403.1
410 ILCS 50/5	
410 ILCS 50/5.1	

Amends the Medical Patient Rights Act. Provides that each patient has the right to: (1) receive current health care facility policies, inspection findings of State and local health authorities, and further explanation of a written statement of rights to be available to the patient, his or her guardian, or his or her chosen representative; (2) be treated with courtesy and respect for his or her individuality by employees or persons providing medical services or care and to have his or her human and civil rights maintained in all aspects of medical care; (3) have his or her basic human needs accommodated in a timely manner; (4) continuity and coordination of care among and between all disciplines serving the patient's medical diagnoses and needs; (5) be told the identity of his or her health care provider upon request; (6) be provided, digitally or in writing, current information concerning the patient's diagnosis, treatment, alternatives, risks, and prognosis upon request; and (7) be informed, prior to or at the time of admission and during his or her stay, of services that are included in the health care facility's basic per diem or daily room rate and that other services are available at additional charge. Provides that hospitals' patient advocates or ombudsmen shall be notified of patient grievances. Provides that a health care facility shall make every effort to assist patients in obtaining information regarding whether the Medicare or Medical Assistance program will pay for any or all of the services provided by the health care facility. Provides that hospitals shall have a written internal grievance procedure that conforms with specified requirements. Makes other changes. Effective immediately.

LRB102 22997 CPF 32151 b

1 AN ACT concerning health.

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

4 Section 5. The Medical Patient Rights Act is amended by  
5 changing Sections 2.01, 3, 3.1, 5, and 5.1 as follows:

6 (410 ILCS 50/2.01) (from Ch. 111 1/2, par. 5402.01)

7 Sec. 2.01. "Patient" means any person who has received or  
8 is receiving medical care, treatment, or services from an  
9 individual or institution licensed to provide medical care or  
10 treatment in this State. The medical care or treatment  
11 includes, but is not limited to, medical care or treatment for  
12 the purpose of diagnosis or treatment bearing on the physical  
13 or mental health of the patient, whether as an inpatient or  
14 outpatient.

15 (Source: P.A. 81-1167.)

16 (410 ILCS 50/3) (from Ch. 111 1/2, par. 5403)

17 Sec. 3. The following rights are hereby established:

18 (a) The right of each patient to care consistent with  
19 sound nursing and medical practices, to be informed of the  
20 name, specialty, and contact information of the physician  
21 responsible for coordinating his or her care, to be  
22 informed of how to reach the health care facility's

1 administrator, outside advocate, interpreter, and legal  
2 services, to receive information concerning his or her  
3 condition and proposed treatment, to refuse any treatment  
4 to the extent permitted by law, and to privacy and  
5 confidentiality of records except as otherwise provided by  
6 law. Current health care facility policies, inspection  
7 findings of State and local health authorities, and  
8 further explanation of the written statement of rights  
9 under Section 5 shall be available to each patient, his or  
10 her guardian, or his or her chosen representative upon  
11 reasonable request to the administrator or other  
12 designated staff person consistent with Illinois law.

13 (a-5) The right of each patient to be treated with  
14 courtesy and respect for his or her individuality by  
15 employees or persons providing medical services or care  
16 and to have his or her human and civil rights maintained in  
17 all aspects of medical care. The employees and persons  
18 shall have up-to-date certification, licensure, and  
19 training pursuant to Illinois law. Each patient shall have  
20 his or her basic human needs, including, but not limited  
21 to, water, food, medication, toileting, and personal  
22 hygiene, accommodated in a timely manner.

23 (a-10) The right of each patient to continuity and  
24 coordination of care among and between all disciplines  
25 servicing the patient's medical diagnoses and needs.

26 (a-15) A patient who receives services from an outside

1 health care provider is entitled, upon request, to be told  
2 the identity of the health care provider. This information  
3 shall include the name and address of the outside health  
4 care provider and a description of any service that may be  
5 rendered. In cases where it is medically advisable, as  
6 documented by the attending physician in a patient's care  
7 record, the information shall be given to the patient's  
8 guardian or other person designated by the patient as his  
9 or her representative.

10 (b) The right of each patient, regardless of source of  
11 payment, to examine and receive a reasonable explanation  
12 of his total bill for services rendered by his physician  
13 or health care provider, including the itemized charges  
14 for specific services received. Each physician or health  
15 care provider shall be responsible only for a reasonable  
16 explanation of those specific services provided by such  
17 physician or health care provider.

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

23 An insurance company or health services corporation  
24 that requires any insured patient or applicant for new or  
25 continued insurance or coverage to be tested for infection  
26 with human immunodeficiency virus (HIV) or any other

1 identified causative agent of acquired immunodeficiency  
2 syndrome (AIDS) shall (1) give the patient or applicant  
3 prior written notice of such requirement, (2) proceed with  
4 such testing only upon the written authorization of the  
5 applicant or patient, and (3) keep the results of such  
6 testing confidential. Notice of an adverse underwriting or  
7 coverage decision may be given to any appropriately  
8 interested party, but the insurer may only disclose the  
9 test result itself to a physician designated by the  
10 applicant or patient, and any such disclosure shall be in  
11 a manner that assures confidentiality.

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

14 (d) The right of each patient to privacy and  
15 confidentiality in health care. Each physician, health  
16 care provider, health services corporation, and insurance  
17 company shall provide a patient or his or her legal  
18 designee, digitally or in writing, current information  
19 concerning the patient's diagnosis, treatment,  
20 alternatives, risks, and prognosis upon request. Each  
21 physician, health care provider, health services  
22 corporation, and insurance company shall refrain from  
23 disclosing the nature or details of services provided to  
24 patients, except that such information may be disclosed:  
25 (1) to the patient, (2) to the party making treatment  
26 decisions if the patient is incapable of making decisions

1 regarding the health services provided, (3) for treatment  
2 in accordance with 45 CFR 164.501 and 164.506, (4) for  
3 payment in accordance with 45 CFR 164.501 and 164.506, (5)  
4 to those parties responsible for peer review, utilization  
5 review, and quality assurance, (6) for health care  
6 operations in accordance with 45 CFR 164.501 and 164.506,  
7 (7) to those parties required to be notified under the  
8 Abused and Neglected Child Reporting Act or the Illinois  
9 Sexually Transmissible Disease Control Act, or (8) as  
10 otherwise permitted, authorized, or required by State or  
11 federal law. This right may be waived in writing by the  
12 patient or the patient's guardian or legal representative,  
13 but a physician or other health care provider may not  
14 condition the provision of services on the patient's,  
15 guardian's, or legal representative's agreement to sign  
16 such a waiver. In the interest of public health, safety,  
17 and welfare, patient information, including, but not  
18 limited to, health information, demographic information,  
19 and information about the services provided to patients,  
20 may be transmitted to or through a health information  
21 exchange, as that term is defined in Section 2 of the  
22 Mental Health and Developmental Disabilities  
23 Confidentiality Act, in accordance with the disclosures  
24 permitted pursuant to this Section. Patients shall be  
25 provided the opportunity to opt out of their health  
26 information being transmitted either digitally or in

1        writing to or through a health information exchange in  
2        accordance with the regulations, standards, or contractual  
3        obligations adopted by the Illinois Health Information  
4        Exchange Office in accordance with Section 9.6 of the  
5        Mental Health and Developmental Disabilities  
6        Confidentiality Act, Section 9.6 of the AIDS  
7        Confidentiality Act, or Section 31.8 of the Genetic  
8        Information Privacy Act, as applicable. A patient shall  
9        not be denied access to care if he or she chooses to opt  
10       out of the sharing of such information. In the case of a  
11       patient choosing to opt out of having his or her  
12       information available on an HIE, nothing in this Act shall  
13       cause the physician or health care provider to be liable  
14       for the release of a patient's health information by other  
15       entities that may possess such information, including, but  
16       not limited to, other health professionals, providers,  
17       laboratories, pharmacies, hospitals, ambulatory surgical  
18       centers, and nursing homes.

19       (Source: P.A. 101-649, eff. 7-7-20.)

20       (410 ILCS 50/3.1) (from Ch. 111 1/2, par. 5403.1)

21       Sec. 3.1. (a) Any patient who is the subject of a research  
22       program or an experimental procedure, as defined under the  
23       rules and regulations of the Hospital Licensing Act, shall  
24       have, at a minimum, the right to receive an explanation of the  
25       nature and possible consequences of such research or

1 experiment before the research or experiment is conducted, and  
2 to consent to or reject it.

3 (b) No physician or health care provider may conduct any  
4 research program or experimental procedure on a patient  
5 without the prior informed consent of the patient in writing  
6 or digitally or, if the patient is unable to consent, the  
7 patient's guardian, spouse, parent, or authorized agent. Both  
8 the consent and the refusal shall be documented in the  
9 patient's care record.

10 (c) This Section shall not apply to any research program  
11 or medical experimental procedure for patients subject to a  
12 life-threatening emergency that is conducted in accordance  
13 with Part 50 of Title 21 of, and Part 46 of Title 45 of, the  
14 Code of Federal Regulations.

15 (Source: P.A. 90-36, eff. 6-27-97.)

16 (410 ILCS 50/5)

17 Sec. 5. Statement of hospital patient's rights.

18 (a) Each patient admitted to a hospital, and the guardian  
19 or authorized representative or parent of a minor patient,  
20 shall be given a written statement of all the rights  
21 enumerated in this Act, including the rights listed under  
22 Section 3, or a similar statement of patients' rights required  
23 of the hospital by the Joint Commission on Accreditation of  
24 Healthcare Organizations or a similar accrediting  
25 organization. The statement shall be given at the time of



1 admission or as soon thereafter as the condition of the  
2 patient permits. If a patient is provided with a digital copy  
3 of the statement, the patient may request and shall be  
4 provided with a readily available paper copy.

5 (b) If a patient is unable to read the written statement, a  
6 hospital shall make a reasonable effort to provide it to the  
7 guardian or authorized representative of the patient.

8 (c) The statement shall also include the right not to be  
9 discriminated against by the hospital due to the patient's  
10 race, ethnicity, gender identity, gender expression, sexual  
11 orientation, color, or national origin where such  
12 characteristics are not relevant to the patient's medical  
13 diagnosis and treatment. The statement shall further provide  
14 each admitted patient or the patient's representative or  
15 guardian with notice of how to initiate a grievance regarding  
16 improper discrimination and how to recommend changes in  
17 policies and services to hospital or health care facility  
18 staff and others of the patient's choice, free from restraint,  
19 interference, coercion, discrimination, or reprisal, with the  
20 hospital and how the patient may lodge a grievance with the  
21 Illinois Department of Public Health and the Illinois  
22 Department of Human Rights regardless of whether the patient  
23 has first used the hospital's grievance process.

24 (d) Each patient shall be informed, prior to or at the time  
25 of admission and during his or her stay, of services that are  
26 included in the health care facility's basic per diem or daily

1 room rate and that other services are available at an  
2 additional charge, if applicable. A health care facility shall  
3 make every effort to assist patients in obtaining information  
4 regarding whether the Medicare or Medical Assistance program  
5 will pay for any or all of the services provided.

6 (Source: P.A. 97-485, eff. 8-22-11.)

7 (410 ILCS 50/5.1)

8 Sec. 5.1. Discrimination grievance procedures. Upon  
9 receipt of a grievance alleging unlawful discrimination on the  
10 basis of race, color, ~~or~~ national origin, ethnicity, gender  
11 identity, gender expression, or sexual orientation the  
12 hospital must investigate the claim and work with the patient  
13 to address valid or proven concerns in accordance with the  
14 hospital's grievance process. The hospital's patient advocate  
15 or ombudsman shall be notified of the grievance. The hospital  
16 shall have a written internal grievance procedure that, at a  
17 minimum, sets forth the process to be followed, specifies time  
18 limits, including time limits for health care facility  
19 response, provides for the patient to have the assistance of  
20 an advocate, requires a written response to written  
21 grievances, and provides for a timely decision by an impartial  
22 decision maker if the grievance is not otherwise resolved. At  
23 the conclusion of the hospital's grievance process, the  
24 hospital shall inform the patient that such grievances may be  
25 reported to the Illinois Department of Public Health if not

1 resolved to the patient's satisfaction at the hospital level.

2 (Source: P.A. 97-485, eff. 8-22-11.)

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