1 AN ACT concerning State government.

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

- Section 5. The Illinois Health Finance Reform Act is amended by changing Section 4-2 as follows:
- 6 (20 ILCS 2215/4-2) (from Ch. 111 1/2, par. 6504-2)
- 7 Sec. 4-2. Powers and duties.
- 8 (a) (Blank).
- 9 (b) (Blank).
- 10 (c) (Blank).

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- 11 (d) Uniform Provider Utilization and Charge Information.
 - (1) The Department of Public Health shall require that all hospitals and ambulatory surgical treatment centers licensed to operate in the State of Illinois adopt a uniform system for submitting patient claims and encounter data charges for payment from public and private payors. This system shall be based upon adoption of the uniform electronic hospital billing form pursuant to the Health
- 19 Insurance Portability and Accountability Act.
 - (2) (Blank).
- The Department of Insurance shall require all 21 third-party payors, including but not limited to, licensed 22 insurers, medical and hospital service corporations, 2.3 health maintenance organizations, and self-funded employee 24 25 health plans, to accept the uniform billing form, without 26 attachment as submitted by hospitals pursuant to paragraph (1) of subsection (d) above, effective January 1, 1985; 27 provided, however, nothing shall prevent all such third 28 29 party payors from requesting additional information 30 necessary to determine eligibility for benefits or liability for reimbursement for services provided. 31
 - (4) By no later than 60 days after the end of each

calendar quarter, each Each hospital licensed in the State shall electronically submit to the Department inpatient and outpatient claims and encounter patient billing data related to surgical and invasive procedures collected under paragraph (5) for each patient.

By no later than 60 days after the end of each calendar quarter, each ambulatory surgical treatment center licensed in the State shall electronically submit to the Department outpatient claims and encounter data collected under paragraph (5) for each patient. conditions and procedures required for public disclosure pursuant to paragraph (6). For hospitals, the billing data to be reported shall include all inpatient surgical cases. Billing data submitted under this Act shall not include a patient's name, address, or Social Security number.

- (5) By no later than <u>January 1, 2006</u> <u>January 1, 2005</u>, the Department must collect and compile <u>claims and encounter billing</u> data <u>related to surgical and invasive procedures required under paragraph (6)</u> according to uniform electronic submission formats as required under the Health Insurance Portability and Accountability Act. By no later than <u>January 1, 2006</u>, the <u>Department must collect and compile from ambulatory surgical treatment centers the claims and encounter data according to uniform electronic data element formats as required under the Health Insurance Portability and Accountability Act of 1996 (HIPAA).</u>
- (6) The Department shall make available on its website the "Consumer Guide to Health Care" by January 1, 2006. The "Consumer Guide to Health Care" shall include information on at least 30 inpatient conditions and procedures identified by the Department that demonstrate the highest degree of variation in patient charges and quality of care.

 By no later than January 1, 2007, the "Consumer Guide to Health Care" shall include information for both inpatient and outpatient conditions and procedures. As to each

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condition or procedure, the "Consumer Guide to Health Care" 1 2 shall include up-to-date comparison information relating 3 to volume of cases, average charges, risk-adjusted mortality rates, and nosocomial infection rates. 4 Information disclosed pursuant to this paragraph on 5 6 mortality and infection rates shall be based upon information hospitals and ambulatory surgical treatment 7 centers have either (i) previously submitted to the 9 Department pursuant to their obligations to report health 10 care information under this Act or other public health 11 reporting laws and regulations outside of this Act or (ii) 12 submitted to the Department under the provisions of the Hospital Report Card Act. 13

- (7) Publicly disclosed information must be provided in language that is easy to understand and accessible to consumers using an interactive query system.
- (8) None of the information the Department discloses to the public under this subsection may be made available unless the information has been reviewed, adjusted, and validated according to the following process:
 - (i) Hospitals, ambulatory surgical treatment centers, and organizations representing hospitals, ambulatory surgical treatment centers, purchasers, consumer groups, and health plans are meaningfully involved in the development of all aspects of the Department's methodology for collecting, analyzing, and disclosing the information collected under this Act, including collection methods, formatting, and methods and means for release and dissemination;
 - (ii) The entire methodology for <u>collecting</u> collection and analyzing the data is disclosed to all relevant organizations and to all providers that are the subject of any information to be made available to the public before any public disclosure of such information;
 - (iii) Data collection and analytical methodologies

are used that meet accepted standards of validity and reliability before any information is made available to the public;

- (iv) The limitations of the data sources and analytic methodologies used to develop comparative provider information are clearly identified and acknowledged, including, but not limited to, appropriate and inappropriate uses of the data;
- (v) To the greatest extent possible, comparative hospital and ambulatory surgical treatment center information initiatives use standard-based norms derived from widely accepted provider-developed practice guidelines;
- (v-5) For ambulatory services, information is provided on surgical infections and mortality for selected procedures, as determined by the Department, based on review by the Department of its own, local, or national studies.
- treatment center information and other information that the Department has compiled regarding hospitals and ambulatory surgical treatment centers is shared with the hospitals and ambulatory surgical treatment centers is shared with the hospitals and ambulatory surgical treatment centers under review prior to public dissemination of the information and these providers have an opportunity to make corrections and additions of helpful explanatory comments about the information before the publication;
- (vii) Comparisons among hospitals <u>and ambulatory</u> <u>surgical treatment centers</u> adjust for patient case mix and other relevant risk factors and control for provider peer groups, <u>if applicable</u>;
- (viii) Effective safeguards to protect against the unauthorized use or disclosure of hospital and ambulatory surgical treatment center information are developed and implemented;

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1	(ix) Effective safeguards to protect against the
2	dissemination of inconsistent, incomplete, invalid,
3	inaccurate, or subjective provider data are developed
4	and implemented;
5	(x) The quality and accuracy of hospital and
6	ambulatory surgical treatment center information
7	reported under this Act and its data collection,
8	analysis, and dissemination methodologies are
9	evaluated regularly; and
10	(xi) Only the most basic identifying information
11	from mandatory reports is used, and patient
12	identifiable information is not released. The input
13	data collected by the Department shall not be a public
14	record under the Illinois Freedom of Information Act.
15	None of the information the Department discloses to the
16	public under this Act may be used to establish a standard
17	of care in a private civil action.
18	(9) The Department must develop and implement an
19	outreach campaign to educate the public regarding the
20	availability of the "Consumer Guide to Health Care".
21	(10) By January 1, 2006, Within 12 months after the
22	effective date of this amendatory Act of the 93rd General
23	Assembly, the Department must study the most effective
24	methods for public disclosure of patient claims and
25	encounter charge data and health care quality information
26	that will be useful to consumers in making health care
27	decisions and report its recommendations to the Governor
28	and to the General Assembly.
29	(11) The Department must undertake all steps necessary
30	under State and Federal law, including the
31	Gramm-Leach-Bliley Act and the HIPAA privacy regulations,

(12) The Department must adopt rules for inpatient and outpatient data collection and reporting this no later than January 1, 2006.

to protect patient confidentiality in order to prevent the

identification of individual patient records.

1	(13) In addition to the data products indicated above,
2	the Department shall respond to requests by government
3	agencies, academic research organizations, and private
4	sector organizations for purposes of clinical performance
5	measurements and analyses of data collected pursuant to
6	this Section.
7	(14) The Department must evaluate additional methods
8	for comparing the performance of hospitals and ambulatory
9	surgical treatment centers, including the value of
10	disclosing additional measures that are adopted by the
11	National Quality Forum, The Joint Commission on
12	Accreditation of Healthcare Organizations, the Centers for
13	Medicare and Medicaid Services, or a similar national
14	entity that establishes standards to measure the
15	performance of health care providers. The Department shall
16	report its findings and recommendations on its Internet
17	website and to the Governor and General Assembly no later
18	than January 1, 2006.
19	(e) (Blank).
20	(Source: P.A. 92-597, eff. 7-1-02; 93-144, eff. 7-10-03.)

21 Section 99. Effective date. This Act takes effect upon 22 becoming law.