



Rep. Julie Hamos

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1 AMENDMENT TO SENATE BILL 1863

2 AMENDMENT NO. \_\_\_\_\_. Amend Senate Bill 1863 by replacing  
3 everything after the enacting clause with the following:

4 "Section 5. The Illinois Health Finance Reform Act is  
5 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).

11 (d) Uniform Provider Utilization and Charge Information.

12 (1) The Department of Public Health shall require that  
13 all hospitals and ambulatory surgical treatment centers  
14 licensed to operate in the State of Illinois adopt a  
15 uniform system for submitting patient claims and encounter  
16 data ~~charges~~ for payment from public and private payors.  
17 This system shall be based upon adoption of the uniform  
18 electronic ~~hospital~~ billing form pursuant to the Health  
19 Insurance Portability and Accountability Act.

20 (2) (Blank).

21 (3) The Department of Insurance shall require all  
22 third-party payors, including but not limited to, licensed  
23 insurers, medical and hospital service corporations,  
24 health maintenance organizations, and self-funded employee

1 health plans, to accept the uniform billing form, without  
2 attachment as submitted by hospitals pursuant to paragraph  
3 (1) of subsection (d) above, effective January 1, 1985;  
4 provided, however, nothing shall prevent all such third  
5 party payors from requesting additional information  
6 necessary to determine eligibility for benefits or  
7 liability for reimbursement for services provided.

8 (4) By no later than 60 days after the end of each  
9 calendar quarter, each ~~Each~~ hospital licensed in the State  
10 shall electronically submit to the Department inpatient  
11 and outpatient claims and encounter ~~patient billing~~ data  
12 related to surgical and invasive procedures collected  
13 under paragraph (5) for each patient.

14 By no later than 60 days after the end of each calendar  
15 quarter, each ambulatory surgical treatment center  
16 licensed in the State shall electronically submit to the  
17 Department outpatient claims and encounter data collected  
18 under paragraph (5) for each patient, provided however,  
19 that, until July 1, 2006, ambulatory surgical treatment  
20 centers who cannot electronically submit data may submit  
21 data by computer diskette. ~~conditions and procedures~~  
22 ~~required for public disclosure pursuant to paragraph (6).~~  
23 For hospitals, the claims and encounter ~~billing~~ data to be  
24 reported shall include all inpatient surgical cases.  
25 Claims and encounter ~~Billing~~ data submitted under this Act  
26 shall not include a patient's name, address, or Social  
27 Security number.

28 (5) By no later than January 1, 2006 ~~January 1, 2005,~~  
29 the Department must collect and compile claims and  
30 encounter ~~billing~~ data related to surgical and invasive  
31 procedures ~~required under paragraph (6)~~ according to  
32 uniform electronic submission formats as required under  
33 the Health Insurance Portability and Accountability Act.  
34 By no later than January 1, 2006, the Department must

1 collect and compile from ambulatory surgical treatment  
2 centers the claims and encounter data according to uniform  
3 electronic data element formats as required under the  
4 Health Insurance Portability and Accountability Act of  
5 1996 (HIPAA).

6 (6) The Department shall make available on its website  
7 the "Consumer Guide to Health Care" by January 1, 2006. The  
8 "Consumer Guide to Health Care" shall include information  
9 on at least 30 inpatient conditions and procedures  
10 identified by the Department that demonstrate the highest  
11 degree of variation in patient charges and quality of care.  
12 By no later than January 1, 2007, the "Consumer Guide to  
13 Health Care" shall also include information on at least 30  
14 outpatient conditions and procedures identified by the  
15 Department that demonstrate the highest degree of  
16 variation in patient charges and quality care. As to each  
17 condition or procedure, the "Consumer Guide to Health Care"  
18 shall include up-to-date comparison information relating  
19 to volume of cases, average charges, risk-adjusted  
20 mortality rates, and nosocomial infection rates and, with  
21 respect to outpatient surgical and invasive procedures,  
22 shall include information regarding surgical infections,  
23 complications, and direct admissions of outpatient cases  
24 to hospitals for selected procedures, as determined by the  
25 Department, based on review by the Department of its own,  
26 local, or national studies. Information disclosed pursuant  
27 to this paragraph on mortality and infection rates shall be  
28 based upon information hospitals and ambulatory surgical  
29 treatment centers have either (i) previously submitted to  
30 the Department pursuant to their obligations to report  
31 health care information under this Act or other public  
32 health reporting laws and regulations outside of this Act  
33 or (ii) submitted to the Department under the provisions of  
34 the Hospital Report Card Act.

1 (7) Publicly disclosed information must be provided in  
2 language that is easy to understand and accessible to  
3 consumers using an interactive query system. The guide  
4 shall include such additional information as is necessary  
5 to enhance decision making among consumer and health care  
6 purchasers, which shall include, at a minimum, appropriate  
7 guidance on how to interpret the data and an explanation of  
8 why the data may vary from provider to provider. The  
9 "Consumer Guide to Health Care" shall also cite standards  
10 that facilities meet under state and federal law and, if  
11 applicable, to achieve voluntary accreditation.

12 (8) None of the information the Department discloses to  
13 the public under this subsection may be made available  
14 unless the information has been reviewed, adjusted, and  
15 validated according to the following process:

16 (i) Hospitals, ambulatory surgical treatment  
17 centers, and organizations representing hospitals,   
18 ambulatory surgical treatment centers, purchasers,  
19 consumer groups, and health plans are meaningfully  
20 involved in providing advice and consultation to the  
21 Department in the development of all aspects of the  
22 Department's methodology for collecting, analyzing,  
23 and disclosing the information collected under this  
24 Act, including collection methods, formatting, and  
25 methods and means for release and dissemination;

26 (ii) The entire methodology for collecting  
27 ~~collection~~ and analyzing the data is disclosed to all  
28 relevant organizations and to all providers that are  
29 the subject of any information to be made available to  
30 the public before any public disclosure of such  
31 information;

32 (iii) Data collection and analytical methodologies  
33 are used that meet accepted standards of validity and  
34 reliability before any information is made available

1 to the public;

2 (iv) The limitations of the data sources and  
3 analytic methodologies used to develop comparative  
4 provider information are clearly identified and  
5 acknowledged, including, but not limited to,  
6 appropriate and inappropriate uses of the data;

7 (v) To the greatest extent possible, comparative  
8 hospital and ambulatory surgical treatment center  
9 information initiatives use standard-based norms  
10 derived from widely accepted provider-developed  
11 practice guidelines;

12 (vi) Comparative hospital and ambulatory surgical  
13 treatment center information and other information  
14 that the Department has compiled regarding hospitals  
15 and ambulatory surgical treatment centers is shared  
16 with the hospitals and ambulatory surgical treatment  
17 centers under review prior to public dissemination of  
18 the information and these providers have an  
19 opportunity to make corrections and additions of  
20 helpful explanatory comments about the information  
21 before the publication;

22 (vii) Comparisons among hospitals and ambulatory  
23 surgical treatment centers adjust for patient case mix  
24 and other relevant risk factors and control for  
25 provider peer groups, if applicable;

26 (viii) Effective safeguards to protect against the  
27 unauthorized use or disclosure of hospital and  
28 ambulatory surgical treatment center information are  
29 developed and implemented;

30 (ix) Effective safeguards to protect against the  
31 dissemination of inconsistent, incomplete, invalid,  
32 inaccurate, or subjective provider data are developed  
33 and implemented;

34 (x) The quality and accuracy of hospital and

1           ambulatory surgical treatment center information  
2 reported under this Act and its data collection,  
3 analysis, and dissemination methodologies are  
4 evaluated regularly; and

5           (xi) Only the most basic hospital or ambulatory  
6 surgical treatment center identifying information from  
7 mandatory reports is used. Information regarding a  
8 hospital or ambulatory surgical center may be released  
9 regardless of the number of employees or health care  
10 professionals whose data are reflected in the data for  
11 the hospital or ambulatory surgical treatment center  
12 as long as no specific information identifying an  
13 employee or a health care professional is released.  
14 ~~identifying information from mandatory reports is~~  
15 ~~used, and~~ Further, patient identifiable information is  
16 not released. The input data collected by the  
17 Department shall not be a public record under the  
18 Illinois Freedom of Information Act.

19           None of the information the Department discloses to the  
20 public under this Act may be used to establish a standard  
21 of care in a private civil action.

22           (9) The Department must develop and implement an  
23 outreach campaign to educate the public regarding the  
24 availability of the "Consumer Guide to Health Care".

25           (10) By January 1, 2006, ~~Within 12 months after the~~  
26 ~~effective date of this amendatory Act of the 93rd General~~  
27 ~~Assembly,~~ the Department must study the most effective  
28 methods for public disclosure of patient claims and  
29 encounter charge data and health care quality information  
30 that will be useful to consumers in making health care  
31 decisions and report its recommendations to the Governor  
32 and to the General Assembly.

33           (11) The Department must undertake all steps necessary  
34 under State and Federal law to protect patient

1 confidentiality in order to prevent the identification of  
2 individual patient records.

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

6 (13) In addition to the data products indicated above,  
7 the Department shall respond to requests by government  
8 agencies, academic research organizations, and private  
9 sector organizations for purposes of clinical performance  
10 measurements and analyses of data collected pursuant to  
11 this Section.

12 (14) The Department, with the advice of and in  
13 consultation with hospitals, ambulatory surgical treatment  
14 centers, organizations representing hospitals,  
15 organizations representing ambulatory treatment centers,  
16 purchasers, consumer groups, and health plans, must  
17 evaluate additional methods for comparing the performance  
18 of hospitals and ambulatory surgical treatment centers,  
19 including the value of disclosing additional measures that  
20 are adopted by the National Quality Forum, The Joint  
21 Commission on Accreditation of Healthcare Organizations,  
22 the Accreditation Association for Ambulatory Health Care,  
23 the Centers for Medicare and Medicaid Services, or similar  
24 national entities that establish standards to measure the  
25 performance of health care providers. The Department shall  
26 report its findings and recommendations on its Internet  
27 website and to the Governor and General Assembly no later  
28 than July 1, 2006.

29 (e) (Blank).

30 (Source: P.A. 92-597, eff. 7-1-02; 93-144, eff. 7-10-03.)

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