



## 100TH GENERAL ASSEMBLY

### State of Illinois

2017 and 2018

HB4933

by Rep. David A. Welter

#### SYNOPSIS AS INTRODUCED:

New Act  
215 ILCS 5/355a.5 new

Creates the Health Care Cost Estimate Act and amends the Illinois Insurance Code. Provides that prior to an admission, procedure, or service and upon request by a patient or prospective patient, a health care provider shall, within 2 working days, disclose the allowed amount or charge of the admission, procedure, or service. Provides that if the health care provider is unable to quote a specific amount in advance, the health care provider shall disclose the estimated maximum allowed amount or charge for the proposed admission, procedure, or service. Requires every company that issues, delivers, amends, or renews any individual or group policy of accident and health insurance to establish a toll-free telephone number and Internet website that enables consumers to request and obtain from the company, in real time, the estimated or maximum allowed amount or charge for a proposed admission, procedure, or service and the estimated amount the insured will be responsible to pay for a proposed admission, procedure, or service that is a covered benefit, based on the information available to the company at the time the request is made. Provides that if a patient or prospective patient is covered by a health insurance policy, a health care provider who participates as a network provider under the patient's or prospective patient's health insurance policy shall, upon request of the patient or prospective patient, provide, based on the information available to the health care provider at the time of the request, sufficient information regarding the proposed admission, procedure or service for the patient or prospective patient to use the applicable toll-free telephone number and Internet website of the provider of the health insurance policy.

LRB100 18945 SMS 34195 b

1 AN ACT concerning regulation.

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

4 Section 1. Short title. This Act may be cited as the Health  
5 Care Cost Estimate Act.

6 Section 5. Definitions. As used in this Act:

7 "Allowed amount" means the contractually agreed upon  
8 amount paid by a provider of a health insurance policy to a  
9 health care provider for health care services provided to an  
10 insured.

11 "Health care provider" means any licensed health care  
12 professional or public or private facility that provides, on an  
13 inpatient or outpatient basis, preventive, diagnostic,  
14 therapeutic, convalescent, rehabilitation, or mental health  
15 services.

16 Section 10. Advance disclosure of costs for an admission,  
17 service, or procedure.

18 (a) Prior to an admission, procedure, or service and upon  
19 request by a patient or prospective patient, a health care  
20 provider shall, within 2 working days, disclose the allowed  
21 amount or charge of the admission, procedure, or service,  
22 including the amount for any facility fees required. However,

1 if a health care provider is unable to quote a specific amount  
2 in advance due to the health care provider's inability to  
3 predict the specific treatment or diagnostic code, the health  
4 care provider shall disclose the estimated maximum allowed  
5 amount or charge for a proposed admission, procedure, or  
6 service, including the amount for any facility fees required.

7 (b) If a patient or prospective patient is covered by a  
8 health insurance policy, a health care provider who  
9 participates as a network provider under the patient's or  
10 prospective patient's health insurance policy shall, upon  
11 request of the patient or prospective patient, provide, based  
12 on the information available to the health care provider at the  
13 time of the request, sufficient information regarding the  
14 proposed admission, procedure, or service for the patient or  
15 prospective patient to use the applicable toll-free telephone  
16 number and Internet website of the provider of the health  
17 insurance policy, as required under Section 355a.5 of the  
18 Illinois Insurance Code. A health care provider may assist a  
19 patient or prospective patient in using the toll-free number or  
20 Internet website of the provider of the health insurance  
21 policy.

22 Section 15. The Illinois Insurance Code is amended by  
23 adding Section 355a.5 as follows:

24 (215 ILCS 5/355a.5 new)

1       Sec. 355a.5. Website and telephone number for disclosing  
2       estimated or maximum allowed amounts for an admission, service,  
3       or procedure. Every company that issues, delivers, amends, or  
4       renews any individual or group policy of accident and health  
5       insurance shall establish a toll-free telephone number and  
6       Internet website that enables consumers to request and obtain  
7       from the company, in real time, the estimated or maximum  
8       allowed amount or charge for a proposed admission, procedure,  
9       or service and the estimated amount the insured will be  
10       responsible to pay for a proposed admission, procedure, or  
11       service that is a covered benefit, based on the information  
12       available to the company at the time the request is made,  
13       including any facility fee, copayment, deductible,  
14       coinsurance, or other out-of-pocket amount for any covered  
15       benefit.