

1 AN ACT concerning insurance.

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

4 Section 5. The State Employees Group Insurance Act of 1971
5 is amended by changing Section 6.11 as follows:

6 (5 ILCS 375/6.11)

7 Sec. 6.11. Required health benefits; Illinois Insurance
8 Code requirements. The program of health benefits shall provide
9 the post-mastectomy care benefits required to be covered by a
10 policy of accident and health insurance under Section 356t of
11 the Illinois Insurance Code. The program of health benefits
12 shall provide the coverage required under Sections 356g,
13 356g.5, 356g.5-1, 356m, 356u, 356w, 356x, 356z.2, 356z.4,
14 356z.6, 356z.8, 356z.9, 356z.10, 356z.11, 356z.12, 356z.13,
15 356z.14, 356z.15, ~~and 356z.17,~~ and 356z.19 of the Illinois
16 Insurance Code. The program of health benefits must comply with
17 Section 155.37 of the Illinois Insurance Code.

18 Rulemaking authority to implement Public Act 95-1045, if
19 any, is conditioned on the rules being adopted in accordance
20 with all provisions of the Illinois Administrative Procedure
21 Act and all rules and procedures of the Joint Committee on
22 Administrative Rules; any purported rule not so adopted, for
23 whatever reason, is unauthorized.

1 (Source: P.A. 95-189, eff. 8-16-07; 95-422, eff. 8-24-07;
2 95-520, eff. 8-28-07; 95-876, eff. 8-21-08; 95-958, eff.
3 6-1-09; 95-978, eff. 1-1-09; 95-1005, eff. 12-12-08; 95-1044,
4 eff. 3-26-09; 95-1045, eff. 3-27-09; 95-1049, eff. 1-1-10;
5 96-139, eff. 1-1-10; 96-328, eff. 8-11-09; 96-639, eff. 1-1-10;
6 96-1000, eff. 7-2-10.)

7 Section 10. The Counties Code is amended by changing
8 Section 5-1069.3 as follows:

9 (55 ILCS 5/5-1069.3)

10 Sec. 5-1069.3. Required health benefits. If a county,
11 including a home rule county, is a self-insurer for purposes of
12 providing health insurance coverage for its employees, the
13 coverage shall include coverage for the post-mastectomy care
14 benefits required to be covered by a policy of accident and
15 health insurance under Section 356t and the coverage required
16 under Sections 356g, 356g.5, 356g.5-1, 356u, 356w, 356x,
17 356z.6, 356z.8, 356z.9, 356z.10, 356z.11, 356z.12, 356z.13,
18 356z.14, ~~and~~ 356z.15, and 356z.19 of the Illinois Insurance
19 Code. The requirement that health benefits be covered as
20 provided in this Section is an exclusive power and function of
21 the State and is a denial and limitation under Article VII,
22 Section 6, subsection (h) of the Illinois Constitution. A home
23 rule county to which this Section applies must comply with
24 every provision of this Section.

1 Rulemaking authority to implement Public Act 95-1045, if
2 any, is conditioned on the rules being adopted in accordance
3 with all provisions of the Illinois Administrative Procedure
4 Act and all rules and procedures of the Joint Committee on
5 Administrative Rules; any purported rule not so adopted, for
6 whatever reason, is unauthorized.

7 (Source: P.A. 95-189, eff. 8-16-07; 95-422, eff. 8-24-07;
8 95-520, eff. 8-28-07; 95-876, eff. 8-21-08; 95-958, eff.
9 6-1-09; 95-978, eff. 1-1-09; 95-1005, eff. 12-12-08; 95-1045,
10 eff. 3-27-09; 95-1049, eff. 1-1-10; 96-139, eff. 1-1-10;
11 96-328, eff. 8-11-09; 96-1000, eff. 7-2-10.)

12 Section 15. The Illinois Municipal Code is amended by
13 changing Section 10-4-2.3 as follows:

14 (65 ILCS 5/10-4-2.3)

15 Sec. 10-4-2.3. Required health benefits. If a
16 municipality, including a home rule municipality, is a
17 self-insurer for purposes of providing health insurance
18 coverage for its employees, the coverage shall include coverage
19 for the post-mastectomy care benefits required to be covered by
20 a policy of accident and health insurance under Section 356t
21 and the coverage required under Sections 356g, 356g.5,
22 356g.5-1, 356u, 356w, 356x, 356z.6, 356z.8, 356z.9, 356z.10,
23 356z.11, 356z.12, 356z.13, 356z.14, ~~and~~ 356z.15, and 356z.19 of
24 the Illinois Insurance Code. The requirement that health

1 benefits be covered as provided in this is an exclusive power
2 and function of the State and is a denial and limitation under
3 Article VII, Section 6, subsection (h) of the Illinois
4 Constitution. A home rule municipality to which this Section
5 applies must comply with every provision of this Section.

6 Rulemaking authority to implement Public Act 95-1045, if
7 any, is conditioned on the rules being adopted in accordance
8 with all provisions of the Illinois Administrative Procedure
9 Act and all rules and procedures of the Joint Committee on
10 Administrative Rules; any purported rule not so adopted, for
11 whatever reason, is unauthorized.

12 (Source: P.A. 95-189, eff. 8-16-07; 95-422, eff. 8-24-07;
13 95-520, eff. 8-28-07; 95-876, eff. 8-21-08; 95-958, eff.
14 6-1-09; 95-978, eff. 1-1-09; 95-1005, eff. 12-12-08; 95-1045,
15 eff. 3-27-09; 95-1049, eff. 1-1-10; 96-139, eff. 1-1-10;
16 96-328, eff. 8-11-09; 96-1000, eff. 7-2-10.)

17 Section 20. The Illinois Insurance Code is amended by
18 adding Section 356z.19 as follows:

19 (215 ILCS 5/356z.19 new)

20 Sec. 356z.19. Hospital patient assessments. A group or
21 individual major medical policy of accident and health
22 insurance or managed care plan amended, delivered, issued, or
23 renewed after the effective date of this amendatory Act of the
24 97th General Assembly that provides coverage for hospital care

1 shall include coverage for observation care services
2 considered to be medically necessary as covered by Medicare.
3 The services are subject to relevant notification on and
4 reasonable review and utilization standards required by the
5 policy or plan for hospital services.

6 Section 25. The Illinois Public Aid Code is amended by
7 changing Section 5-16.8 as follows:

8 (305 ILCS 5/5-16.8)

9 Sec. 5-16.8. Required health benefits. The medical
10 assistance program shall (i) provide the post-mastectomy care
11 benefits required to be covered by a policy of accident and
12 health insurance under Section 356t and the coverage required
13 under Sections 356g.5, 356u, 356w, 356x, ~~and~~ 356z.6, and
14 356z.19 of the Illinois Insurance Code and (ii) be subject to
15 the provisions of Section 364.01 of the Illinois Insurance
16 Code.

17 (Source: P.A. 95-189, eff. 8-16-07; 95-331, eff. 8-21-07.)

18 Section 30. The Medical Patient Rights Act is amended by
19 changing Sections 2.04 and 5 and adding Sections 5.1 and 5.2 as
20 follows:

21 (410 ILCS 50/2.04) (from Ch. 111 1/2, par. 5402.04)

22 Sec. 2.04. "Insurance company" means (1) an insurance

1 company, fraternal benefit society, and any other insurer
2 subject to regulation under the Illinois Insurance Code; or (2)
3 a health maintenance organization, a limited health service
4 organization under the Limited Health Service Organization
5 Act, or a voluntary health services plan under the Voluntary
6 Health Services Plans Act.

7 (Source: P.A. 85-677; 85-679.)

8 (410 ILCS 50/5)

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

10 (a) Each patient admitted to a hospital, and the guardian
11 or authorized representative or parent of a minor patient,
12 shall be given a written statement of all the rights enumerated
13 in this Act, or a similar statement of patients' rights
14 required of the hospital by the Joint Commission on
15 Accreditation of Healthcare Organizations or a similar
16 accrediting organization. The statement shall be given at the
17 time of admission or as soon thereafter as the condition of the
18 patient permits.

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

22 (c) The statement shall also include the right not to be
23 discriminated against by the hospital due to the patient's
24 race, color, or national origin where such characteristics are
25 not relevant to the patient's medical diagnosis and treatment.

1 The statement shall further provide each admitted patient or
2 the patient's representative or guardian with notice of how to
3 initiate a grievance regarding improper discrimination with
4 the hospital and how the patient may lodge a grievance with the
5 Department of Public Health regardless of whether the patient
6 has first used the hospital's grievance process.

7 (Source: P.A. 88-56; 88-670, eff. 12-2-94.)

8 (410 ILCS 50/5.1 new)

9 Sec. 5.1. Discrimination grievance procedures. Upon
10 receipt of a grievance alleging unlawful discrimination on the
11 basis of race, color, or national origin, the hospital must
12 investigate the claim and work with the patient to address
13 valid or proven concerns in accordance with the hospital's
14 grievance process. At the conclusion of the hospital's
15 grievance process, the hospital shall inform the patient that
16 such grievances may be reported to the Department of Public
17 Health if not resolved to the patient's satisfaction at the
18 hospital level.

19 (410 ILCS 50/5.2 new)

20 Sec. 5.2. Emergency room antidiscrimination notice. Every
21 hospital shall post a sign next to or in close proximity of its
22 sign required by Section 489.20 (q) (1) of Title 42 of the Code
23 of Federal Regulations stating the following:

24 "You have the right not to be discriminated against by

1 the hospital due to your race, color, or national origin if
2 these characteristics are unrelated to your diagnosis or
3 treatment. If you believe this right has been violated,
4 please call (insert number for hospital grievance
5 officer).".

6 Section 99. Effective date. This Act takes effect upon
7 becoming law.