



104TH GENERAL ASSEMBLY

State of Illinois

2025 and 2026

SB1579

Introduced 2/4/2025, 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

Amends the Medical Patient Rights Act. Changes the definition of "patient". Specifies that each patient has the right to be informed of additional information. Adds a right of each patient to be treated with courtesy and respect, to have the patient's human and civil rights maintained, and to have the patient's basic human needs accommodated in a timely manner. Adds a right of each patient to have the patient's medical directives reviewed with the health care provider before any procedures are scheduled or decisions are made. Adds a right of each patient to continuity and coordination of care among and between all disciplines serving the patient's needs. Adds a right of each patient who receives services from an outside provider to be told the identity of the provider. Updates the right of each patient to privacy and confidentiality, adding that (1) the patient shall be given current information in writing concerning certain aspects of the patient's care, (2) the patient may opt out, either digitally or in writing, from certain sharing of health information, and (3) the patient shall not be denied access to care if opting out. Makes changes to provisions regarding experimental procedures. Effective immediately.

LRB104 07665 BDA 17709 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 and 3.1 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. "Patient" includes any person whose
11 medical care, treatment, or services received include, but are
12 not limited to, medical care, treatment, or services for the
13 purpose of diagnosis or treatment bearing on the physical or
14 mental health of the person, whether as an inpatient or an
15 outpatient. "Patient" includes any person receiving medical
16 and related services provided in the person's residence to
17 support the person's health and well-being.

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

19 (410 ILCS 50/3) (from Ch. 111 1/2, par. 5403)

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

21 (a) The right of each patient to care consistent with
22 sound nursing and medical practices, to be informed of the

1 name, specialty, and contact information of the physician
2 responsible for coordinating his or her care, to be
3 informed of how to reach the facility administrator,
4 outside advocate, interpreter, and legal services, to
5 receive information concerning his or her condition and
6 proposed treatment, to refuse any treatment to the extent
7 permitted by law, and to privacy and confidentiality of
8 records except as otherwise provided by law. Current
9 facilities policies, inspection findings of State and
10 local health authorities, and further explanation of the
11 written statement of rights shall be available to
12 patients, their guardians, or their chosen representatives
13 in their preferred language upon reasonable request to the
14 administrator or other designated staff person consistent
15 with Illinois law.

16 (a-5) The right of each patient to be treated with
17 courtesy and respect for the patient's individuality by
18 employees or persons providing medical services or care
19 and to have the patient's human and civil rights
20 maintained in all aspects of medical care. Such employees
21 and persons shall have up-to-date certification,
22 licensure, and training under Illinois law. In accordance
23 with 42 CFR 483.10, patients shall have their basic human
24 needs, including, but not limited to, water, food,
25 medication, toileting, and personal hygiene, accommodated
26 in a timely manner.

1 (a-10) The right of each patient to have the patient's
2 medical directives reviewed with the health care provider
3 before any procedures are scheduled or decisions are made.

4 (a-15) The right of each patient to continuity and
5 coordination of care among and between all disciplines
6 servicing the patient's medical diagnoses and needs.

7 (a-20) The right of each patient who receives services
8 from an outside provider to, upon request, be told the
9 identity of the provider. Disclosed information shall
10 include the name of the outside provider, the address, and
11 a description of the service which may be rendered. In
12 cases where it is medically advisable, as documented by
13 the attending physician in a patient's care record, the
14 information shall be given to the patient's guardian or
15 other person designated by the patient as the patient's
16 representative.

17 (b) The right of each patient, regardless of source of
18 payment, to examine and receive a reasonable explanation
19 of his total bill for services rendered by his physician
20 or health care provider, including the itemized charges
21 for specific services received. Each physician or health
22 care provider shall be responsible only for a reasonable
23 explanation of those specific services provided by such
24 physician or health care provider.

25 (c) In the event an insurance company or health
26 services corporation cancels or refuses to renew an

1 individual policy or plan, the insured patient shall be
2 entitled to timely, prior notice of the termination of
3 such policy or plan.

4 An insurance company or health services corporation
5 that requires any insured patient or applicant for new or
6 continued insurance or coverage to be tested for infection
7 with human immunodeficiency virus (HIV) or any other
8 identified causative agent of acquired immunodeficiency
9 syndrome (AIDS) shall (1) give the patient or applicant
10 prior written notice of such requirement, (2) proceed with
11 such testing only upon the written authorization of the
12 applicant or patient, and (3) keep the results of such
13 testing confidential. Notice of an adverse underwriting or
14 coverage decision may be given to any appropriately
15 interested party, but the insurer may only disclose the
16 test result itself to a physician designated by the
17 applicant or patient, and any such disclosure shall be in
18 a manner that assures confidentiality.

19 The Department of Insurance shall enforce the
20 provisions of this subsection.

21 (d) The right of each patient to privacy and
22 confidentiality in health care. Each physician, health
23 care provider, health services corporation and insurance
24 company shall provide current information concerning the
25 patient's diagnosis, treatment, alternatives, risks, and
26 prognosis in writing to the patient or the patient's legal

1 designee upon request and shall refrain from disclosing
2 the nature or details of services provided to patients,
3 except that such information may be disclosed: (1) to the
4 patient, (2) to the party making treatment decisions if
5 the patient is incapable of making decisions regarding the
6 health services provided, (3) for treatment in accordance
7 with 45 CFR 164.501 and 164.506, (4) for payment in
8 accordance with 45 CFR 164.501 and 164.506, (5) to those
9 parties responsible for peer review, utilization review,
10 and quality assurance, (6) for health care operations in
11 accordance with 45 CFR 164.501 and 164.506, (7) to those
12 parties required to be notified under the Abused and
13 Neglected Child Reporting Act or the Illinois Sexually
14 Transmitted Infection Control Act, or (8) as otherwise
15 permitted, authorized, or required by State or federal
16 law. This right may be waived in writing by the patient or
17 the patient's guardian or legal representative, but a
18 physician or other health care provider may not condition
19 the provision of services on the patient's, guardian's, or
20 legal representative's agreement to sign such a waiver. In
21 the interest of public health, safety, and welfare,
22 patient information, including, but not limited to, health
23 information, demographic information, and information
24 about the services provided to patients, may be
25 transmitted to or through a health information exchange,
26 as that term is defined in Section 2 of the Mental Health

1 and Developmental Disabilities Confidentiality Act, in
2 accordance with the disclosures permitted pursuant to this
3 Section. Patients shall be provided the opportunity to opt
4 out, either digitally or in writing, of their health
5 information being transmitted to or through a health
6 information exchange in accordance with Section 9.6 of the
7 Mental Health and Developmental Disabilities
8 Confidentiality Act, Section 9.6 of the AIDS
9 Confidentiality Act, or Section 31.8 of the Genetic
10 Information Privacy Act, as applicable. Patients shall not
11 be denied access to care if they choose to opt out of the
12 sharing of such information. In the case of a patient
13 choosing to opt out of having his or her information
14 available on an HIE, nothing in this Act shall cause the
15 physician or health care provider to be liable for the
16 release of a patient's health information by other
17 entities that may possess such information, including, but
18 not limited to, other health professionals, providers,
19 laboratories, pharmacies, hospitals, ambulatory surgical
20 centers, and nursing homes.

21 (Source: P.A. 103-508, eff. 8-4-23; 103-1049, eff. 8-9-24.)

22 (410 ILCS 50/3.1) (from Ch. 111 1/2, par. 5403.1)

23 Sec. 3.1. (a) Any patient who is the subject of a research
24 program or an experimental procedure, as defined under the
25 rules and regulations of the Hospital Licensing Act, shall

1 have, at a minimum, the right to receive an explanation both in
2 spoken and written words of the nature and possible
3 consequences of such research or experiment before the
4 research or experiment is scheduled or conducted, and to
5 consent to or reject it.

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

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

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

19 Section 99. Effective date. This Act takes effect upon
20 becoming law.