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AN ACT concerning State government.

2 Be it enacted by the People of the State of Illinois, 3 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).

(d) Uniform Provider Utilization and Charge Information.

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

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(2) (Blank).

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

1 <u>calendar quarter, each Each hospital licensed in the State</u> 2 shall electronically submit to the Department <u>inpatient</u> 3 <u>and outpatient claims and encounter</u> patient billing data 4 <u>related to surgical and invasive procedures collected</u> 5 <u>under paragraph (5)</u> for <u>each patient.</u>

By no later than 60 days after the end of each calendar 6 quarter, each ambulatory surgical treatment center 7 licensed in the State shall electronically submit to the 8 Department outpatient claims and encounter data collected 9 under paragraph (5) for each patient, provided however, 10 that, until July 1, 2006, ambulatory surgical treatment 11 centers who cannot electronically submit data may submit 12 13 data by computer diskette. conditions and procedures required for public disclosure pursuant to paragraph (6). 14 For hospitals, the <u>claims and encounter</u> billing data to be 15 16 reported shall include all inpatient surgical cases. 17 Claims and encounter Billing data submitted under this Act shall not include a patient's name, address, or Social 18 Security number. 19

20 (5) By no later than <u>January 1, 2006</u> January 1, 2005, Department must collect and compile claims and 21 the encounter billing data related to surgical and invasive 22 procedures required under paragraph (6) according to 23 24 uniform electronic submission formats as required under the Health Insurance Portability and Accountability Act. 25 By no later than January 1, 2006, the Department must 26 27 collect and compile from ambulatory surgical treatment 28 centers the claims and encounter data according to uniform electronic data element formats as required under the 29 Health Insurance Portability and Accountability Act of 30 31 1996 (HIPAA).

(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 <u>at least</u> 30 <u>inpatient</u> conditions and procedures
identified by the Department that demonstrate the highest

1 degree of variation in patient charges and quality of care. By no later than January 1, 2007, the "Consumer Guide to 2 Health Care" shall also include information on at least 30 3 outpatient conditions and procedures identified by the 4 5 Department that demonstrate the highest degree of variation in patient charges and quality care. As to each 6 condition or procedure, the "Consumer Guide to Health Care" 7 shall include up-to-date comparison information relating 8 to volume of cases, average charges, risk-adjusted 9 10 mortality rates, and nosocomial infection rates and, with 11 respect to outpatient surgical and invasive procedures, shall include information regarding surgical infections, 12 complications, and direct admissions of outpatient cases 13 to hospitals for selected procedures, as determined by the 14 Department, based on review by the Department of its own, 15 16 local, or national studies. Information disclosed pursuant to this paragraph on mortality and infection rates shall be 17 18 based upon information hospitals and ambulatory surgical treatment centers have either (i) previously submitted to 19 20 the Department pursuant to their obligations to report health care information under this Act or other public 21 health reporting laws and regulations outside of this Act 22 or (ii) submitted to the Department under the provisions of 23 the Hospital Report Card Act. 24

(7) Publicly disclosed information must be provided in 25 26 language that is easy to understand and accessible to 27 consumers using an interactive query system. The guide shall include such additional information as is necessary 28 to enhance decision making among consumer and health care 29 purchasers, which shall include, at a minimum, appropriate 30 31 guidance on how to interpret the data and an explanation of why the data may vary from provider to provider. The 32 "Consumer Guide to Health Care" shall also cite standards 33 that facilities meet under state and federal law and, if 34 35 applicable, to achieve voluntary accreditation.

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(8) None of the information the Department discloses to

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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 4 5 centers, and organizations representing hospitals, ambulatory surgical treatment centers, purchasers, 6 consumer groups, and health plans are meaningfully 7 involved in providing advice and consultation to the 8 Department in the development of all aspects of the 9 Department's methodology for collecting, analyzing, 10 11 and disclosing the information collected under this 12 Act, including collection methods, formatting, and methods and means for release and dissemination; 13

14 (ii) The entire methodology for <u>collecting</u> 15 collection and analyzing the data is disclosed to all 16 relevant organizations and to all providers that are 17 the subject of any information to be made available to 18 the public before any public disclosure of such 19 information;

20 (iii) Data collection and analytical methodologies 21 are used that meet accepted standards of validity and 22 reliability before any information is made available 23 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 <u>and ambulatory surgical treatment center</u>
information initiatives use standard-based norms
derived from widely accepted provider-developed
practice guidelines;

34(vi) Comparative hospital and ambulatory surgical35treatment center information and other information36that the Department has compiled regarding hospitals

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and ambulatory surgical treatment centers is shared with the hospitals and ambulatory surgical treatment centers under review prior to public dissemination of information and these providers the have an opportunity to make corrections and additions of helpful explanatory comments about the information before the publication;

(vii) Comparisons among hospitals and ambulatory surgical treatment centers adjust for patient case mix and other relevant risk factors and control for 10 provider peer groups, if applicable;

12 (viii) Effective safeguards to protect against the unauthorized use or disclosure of hospital and 13 ambulatory surgical treatment center information are 14 15 developed and implemented;

16 (ix) Effective safeguards to protect against the 17 dissemination of inconsistent, incomplete, invalid, inaccurate, or subjective provider data are developed 18 and implemented; 19

20 (x) The quality and accuracy of hospital and ambulatory surgical treatment center information 21 reported under this Act and its data collection, 22 23 analysis, and dissemination methodologies are evaluated regularly; and 24

25 (xi) Only the most basic hospital or ambulatory surgical treatment center identifying information from 26 27 mandatory reports is used. Information regarding a 28 hospital or ambulatory surgical center may be released regardless of the number of employees or health care 29 30 professionals whose data are reflected in the data for 31 the hospital or ambulatory surgical treatment center as long as no specific information identifying an 32 employee or a health care professional is released. 33 identifying information from mandatory reports is 34 used, and <u>Further</u>, patient identifiable information is 35 not released. The input data collected by the 36

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Department shall not be a public record under the Illinois Freedom of Information Act.

3 None of the information the Department discloses to the 4 public under this Act may be used to establish a standard 5 of care in a private civil action.

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

(10) By January 1, 2006, Within 12 months after the 9 effective date of this amendatory Act of the 93rd General 10 11 Assembly, the Department must study the most effective methods for public disclosure of patient claims and 12 encounter charge data and health care quality information 13 that will be useful to consumers in making health care 14 decisions and report its recommendations to the Governor 15 16 and to the General Assembly.

17 (11) The Department must undertake all steps necessary 18 under State and Federal law to protect patient 19 confidentiality in order to prevent the identification of 20 individual patient records.

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

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

30 <u>(14) The Department, with the advice of and in</u> 31 <u>consultation with hospitals, ambulatory surgical treatment</u> 32 <u>centers, organizations representing hospitals,</u> 33 <u>organizations representing ambulatory treatment centers,</u> 34 <u>purchasers, consumer groups, and health plans, must</u> 35 <u>evaluate additional methods for comparing the performance</u> 36 <u>of hospitals and ambulatory surgical treatment centers,</u>

1	including the value of disclosing additional measures that
2	are adopted by the National Quality Forum, The Joint
3	Commission on Accreditation of Healthcare Organizations,
4	the Accreditation Association for Ambulatory Health Care,
5	the Centers for Medicare and Medicaid Services, or similar
6	national entities that establish standards to measure the
7	performance of health care providers. The Department shall
8	report its findings and recommendations on its Internet
9	website and to the Governor and General Assembly no later
10	<u>than July 1, 2006.</u>
11	(e) (Blank).
12	(Source: P.A. 92-597, eff. 7-1-02; 93-144, eff. 7-10-03.)
13	Section 99. Effective date. This Act takes effect upon

14 becoming law.