



Sen. Susan Garrett

Filed: 5/13/2005

09400HB2343sam001

LRB094 05025 BDD 46589 a

1 AMENDMENT TO HOUSE BILL 2343

2 AMENDMENT NO. _____. Amend House Bill 2343 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 the development of all aspects of the
21 Department's methodology for collecting, analyzing,
22 and disclosing the information collected under this
23 Act, including collection methods, formatting, and
24 methods and means for release and dissemination;

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

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

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

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

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

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

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

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

33 (x) The quality and accuracy of hospital and
34 ambulatory surgical treatment center information

1 reported under this Act and its data collection,
2 analysis, and dissemination methodologies are
3 evaluated regularly; and

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

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

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

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

32 (11) The Department must undertake all steps necessary
33 under State and Federal law, including the
34 Gramm-Leach-Bliley Act and the HIPAA privacy regulations,

1 to protect patient confidentiality in order to prevent the
2 identification of 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."