

A Message from
Illinois Attorney General
LISA MADIGAN



As Attorney General, I am working to ensure that every Illinoisan is treated fairly in the health care marketplace. My office's Health Care Bureau helps consumers resolve disputes with insurance companies and treatment providers and assists patients in understanding their rights under the law.

Recently, I worked with the Illinois General Assembly to craft a new law to make sure hospital patients have needed information about their bill.

The Fair Patient Billing Act gives health care consumers the right to obtain billing information to determine the accuracy of their bill, the right to discuss their bill with a hospital representative, and the right to obtain financial assistance or a reasonable payment plan to deal with medical expenses.

If you need help to deal with a billing or other health care dispute, our Health Care Bureau operates a toll-free hotline that allows consumers to ask questions, file complaints, or request assistance. Each year, we mediate thousands of complaints, save consumers millions of dollars, and, most importantly, help consumers obtain needed medical care. If you need help, I urge you to call.

A handwritten signature in cursive script that reads "Lisa Madigan".

Lisa Madigan
Attorney General



LISA MADIGAN
ILLINOIS ATTORNEY GENERAL

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**Your
Patient Rights
Under The
Fair Patient
Billing Act**



LISA MADIGAN
ILLINOIS ATTORNEY GENERAL

Consumer Rights Under the Fair Patient Billing Act

Right to receive sufficient billing information from hospitals to determine the accuracy of your bills.

Your hospital bill must include: the dates of services, a brief description of the services, the amount owed, hospital contact information, information on how to apply for financial assistance (for uninsured patients only), and a notice of your right to request an itemized bill.

Right to receive an opportunity to discuss and assess the accuracy of your bill.

The hospital must maintain a procedure for you to inquire about or dispute your bill, including a telephone number for consumers to use to contact the hospital. Hospitals also may provide other ways for consumers to contact them, including a toll-free number, a mailing address, a department or identified person that you may call or write, a Web site, or an e-mail address. Under the law, the hospital must respond to your call within two business days. A written request must be responded to no later than 10 business days after receipt. Additionally, all collection notices must provide a telephone number that consumers may call for assistance.

Right to receive information about the opportunity to enter into a reasonable payment plan or to qualify for financial assistance.

Uninsured Patients: Under the law, a hospital cannot refer your account to a collection agency until it has given you the opportunity to: (a) assess the accuracy of your bill; (b) apply for financial assistance (the hospital must give you 60 days from the date of discharge or receipt of outpatient care to submit an application for financial assistance); and (c) request a reasonable payment plan. The hospital may require that you provide reasonable verification of your inability to pay the full amount in one payment.

Insured Patients: Under the law, a hospital cannot refer your account to a collection agency until it has given you the opportunity to request a reasonable payment plan. You must request this payment plan within 30 days following the date of the original hospital bill. If you fail to agree to a reasonable payment plan within 30 days of the request, the hospital may proceed with collection efforts.

Right to receive information about the hospital's policies regarding financial assistance for qualified patients.

Hospitals must make financial assistance information available on signs and brochures in the admission and registration areas of the hospital. If the hospital has a Web site, it must also post this information on the site.

Right to receive notice of out-of-network providers.

During admission or as soon as is practicable, the hospital must provide you with a written notice that: (a) You may receive separate bills for services provided by health care professionals affiliated with the hospital; (b) Some hospital staff members may not be participating providers in the same insurance plan as the hospital; (c) You may have a greater financial responsibility for services provided at the hospital by providers who are not under contract with your insurance plan; and (d) If you have a question about coverage or benefit levels, you should contact your insurance plan.