

1 AN ACT concerning patient billing.

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

4 Section 5. The Health Maintenance Organization Act is
5 amended by changing Section 2-8 as follows:

6 (215 ILCS 125/2-8) (from Ch. 111 1/2, par. 1407.01)

7 Sec. 2-8. Provider agreements and stipulations.

8 (a) All provider contracts currently in existence between
9 any organization and any provider hospital which are renewed
10 on or after 180 days following the effective date of this
11 amendatory Act of 1987, and all contracts between any
12 organization and any provider hospital executed on or after
13 180 days after such effective date, shall contain the
14 following "hold-harmless" clause: "The provider agrees that
15 in no event, including but not limited to nonpayment by the
16 organization of amounts due the hospital provider under this
17 contract, insolvency of the organization or any breach of
18 this contract by the organization, shall the hospital
19 provider or its assignees or subcontractors have a right to
20 seek any type of payment from, bill, charge, collect a
21 deposit from, or have any recourse against, the enrollee,
22 persons acting on the enrollee's behalf (other than the
23 organization), the employer or group contract holder for
24 services provided pursuant to this contract except for the
25 payment of applicable co-payments or deductibles for services
26 covered by the organization or fees for services not covered
27 by the organization. The requirements of this clause shall
28 survive any termination of this contract for services
29 rendered prior to such termination, regardless of the cause
30 of such termination. The organization's enrollees, the
31 persons acting on the enrollee's behalf (other than the

1 organization) and the employer or group contract holder shall
2 be third party beneficiaries of this clause. This clause
3 supersedes any oral or written agreement now existing or
4 hereafter entered into between the provider and the enrollee,
5 persons acting on the enrollee's behalf (other than the
6 organization) and the employer or group contract holder." To
7 the extent that any hospital provider contract, which is
8 renewed or entered into on or after 180 days following the
9 effective date of this amendatory Act of 1987, fails to
10 incorporate such provisions, such provisions shall be deemed
11 incorporated into such contracts by operation of law as of
12 the date of such renewal or execution.

13 (b) Providers and their assignees or subcontractors may
14 not seek any type of payment from, bill, charge, collect a
15 deposit from, or have any recourse against an enrollee,
16 persons acting on an enrollee's behalf (other than the
17 organization), the employer, or group contract holder for
18 services provided pursuant to a contract, except for the
19 payment of applicable copayments or deductibles for services
20 covered by the organization or fees for services not covered
21 by the organization.

22 When a provider sends the enrollee a statement for
23 services billed to the organization, such statement shall
24 contain the following language conspicuously displayed on the
25 front of such statement in at least fourteen-point boldface
26 capital letters: "NOTICE: THIS IS NOT A BILL. DO NOT PAY."

27 Nothing in this subsection shall prevent a provider from
28 seeking to bill, charge, or collect from an enrollee any
29 amount that is the legal liability of the enrollee.

30 (c) Any collection or attempt to collect moneys or
31 maintain action against any subscriber or enrollee as
32 prohibited in subsection (b) may be reported as a complaint
33 to the Director by any person. A person making such a
34 complaint shall be immune from liability for doing so.

1 (d) Within 14 days after of the Director's receipt of a
2 complaint under this subsection, the Director must provide a
3 written notice of the complaint to the reported provider's
4 licensing or disciplinary board or committee.

5 (e) The Director must maintain a record of all notices
6 of complaint provided to licensing or disciplinary boards or
7 committees under this Section. This record must be provided
8 to any person within 14 days after the Director's receipt of
9 a written request for the record.

10 (f) The Department shall investigate complaints received
11 by the Director regarding violations of subsection (b).

12 (g) The Department must utilize the most efficient and
13 effective methods to investigate each complaint. This may
14 include requirements of the production of documents or review
15 of records.

16 (h) When the Department determines through its
17 investigation that a violation of subsection (b) has
18 occurred, the Director shall require that the provider
19 reimburse, with interest at the rate of 9% per year, the
20 subscriber or enrollee for any prohibited collection of
21 moneys described in subsection (b).

22 (i) When the Department determines through its
23 investigation that a violation subsection (b) has occurred, a
24 notice of violation shall be served upon the provider.

25 (j) A notice of violation must be in writing and must
26 include all of the following:

27 (1) A description of the nature of the violation.

28 (2) A citation of the statutory provision alleged
29 to have been violated.

30 (3) A description of any action the Department may
31 take under this Section and any penalties that may be
32 assessed under the Medical Patient Rights Act.

33 (4) A description of the manner in which the
34 provider may contest the notice of violation and the

1 right to a hearing to contest the notice.

2 (k) The Director shall establish by rulemaking a formal
3 hearing process for subsection (b) of this Section.

4 (l) When the Department has determined a violation of
5 subsection (b) has occurred and (1) any appeal hearing has
6 taken place resulting in a decision upholding the
7 Department's determination or (2) the provider has waived the
8 appeal hearing, the Director shall carry out the sanctions
9 described in the notice of violation as outlined in item (3)
10 of subsection (j).

11 (m) The Director must provide a copy of the written
12 notice of violation imposed by the Department upon a provider
13 to the provider's licensing or disciplinary board or
14 committee.

15 (n) The Director must provide a copy of the written
16 notice of violation imposed by the Department upon a provider
17 to the State's Attorney's office in the county where the
18 violation occurred.

19 (o) The Director must maintain a record of all notices
20 of violation provided to licensing or disciplinary boards or
21 committees under this Section. This record must be provided
22 to any person within 14 days after the Director's receipt of
23 a written request for the record.

24 (p) The Department, an enrollee, or a health maintenance
25 organization may pursue injunctive relief to ensure
26 compliance with this Section.

27 (q) ~~(b)~~ All provider and subcontractor contracts must
28 contain provisions whereby the provider or subcontractor
29 shall provide, arrange for, or participate in the quality
30 assurance programs mandated by this Act, unless the Illinois
31 Department of Public Health certifies that such programs will
32 be fully implemented without any participation or actions
33 from such contracting provider.

34 (r) ~~(e)~~ The Director may promulgate rules requiring that

1 provider contracts contain provisions concerning reasonable
2 notices to be given between the parties and for the
3 organization to provide reasonable notice to its enrollees
4 and to the Director. Notice shall be given for such events
5 as, but not limited to, termination of insurance protection,
6 quality assurance or availability of medical care.

7 (Source: P.A. 86-620.)

8 Section 10. The Medical Patient Rights Act is amended by
9 changing Section 4 and adding Section 3.3 as follows:

10 (410 ILCS 50/3.3 new)

11 Sec. 3.3. Prohibited billing practices.

12 (a) Health care providers, physicians, and their
13 assignees or subcontractors may not seek any type of payment
14 from, bill, charge, collect a deposit from, or have any
15 recourse against an insured patient, persons acting on the
16 insured patient's behalf (other than the insurer), the
17 employer, or group contract holder for services provided
18 pursuant to a contract in which an insurance company or
19 health services corporation has contractually agreed with a
20 health care provider or physician that the health care
21 provider or physician does not have such a right or rights,
22 except for the payment of applicable copayments or
23 deductibles for services covered by the insurance company or
24 health services corporation or fees for services not covered
25 by the insurance company or health services corporation.

26 (b) The Department of Insurance shall enforce the
27 provisions of this Section:

28 (1) Any collection or attempt to collect moneys or
29 maintain action against any insured patient as prohibited
30 in subsection (a) may be reported as a complaint to the
31 Director of the Department of Insurance by any person.

32 (2) A person making such a complaint shall be

1 immune from liability for doing so. Within 14 days after
2 the Director's receipt of a complaint under this Section,
3 the Director must provide a written notice of the
4 complaint to the reported health care provider's or
5 physician's licensing or disciplinary board or committee.

6 (3) The Director must maintain a record of all
7 notices of complaint provided to licensing or
8 disciplinary boards or committees under this Section.
9 This record must be provided to any person within 14 days
10 after the Director's receipt of a written request for the
11 record.

12 (4) The Department shall investigate complaints
13 received by the Director regarding violations of
14 subsection (a).

15 (5) The Department must utilize the most efficient
16 and effective methods to investigate each complaint.
17 This may include requirements of the production of
18 documents or review of records.

19 (6) When the Department determines through its
20 investigation that a violation of subsection (a) has
21 occurred, the Director shall require that the provider
22 reimburse, with interest at the rate of 9% per year, the
23 subscriber or enrollee for any prohibited collection of
24 moneys described in subsection (a).

25 (7) When the Department determines through its
26 investigation that a violation subsection (a) has
27 occurred, a notice of violation shall be served upon the
28 provider.

29 (8) A notice of violation must be in writing and
30 must include all of the following:

31 (A) A description of the nature of the
32 violation.

33 (B) A citation of the statutory provision
34 alleged to have been violated.

1 (C) A description of any action the Department
2 may take under this Section and any additional
3 penalties that may be assessed under this Act.

4 (D) A description of the manner in which the
5 provider may contest the notice of violation and the
6 right to a hearing to contest the notice.

7 (9) The Director shall establish by rulemaking a
8 formal hearing process for subsection (a) of this
9 Section.

10 (10) When the Department has determined a violation
11 of subsection (a) has occurred and (i) any appeal hearing
12 has taken place resulting in a decision upholding the
13 Department's determination or (ii) the provider has
14 waived the appeal hearing, the Director shall carry out
15 the sanctions described in the notice of violation as
16 outlined in item (8)(C) of this subsection.

17 (11) The Director must provide a copy of the
18 written notice of violation imposed by the Department
19 upon a provider to the provider's licensing or
20 disciplinary board or committee.

21 (12) The Director shall provide a copy of the
22 written notice of violation imposed by the Department
23 upon a provider to the State's Attorney's office in the
24 county where the violation occurred.

25 (13) The Director must maintain a record of all
26 notices of violation provided to licensing or
27 disciplinary boards or committees under this Section.
28 This record must be provided to any person within 14 days
29 after the Director's receipt of a written request for the
30 record.

31 (14) The Department, an insured patient, an
32 insurance company, or a health services corporation may
33 pursue injunctive relief to ensure compliance with this
34 Section in addition to the penalties provided for under

1 this Act.

2 (410 ILCS 50/4) (from Ch. 111 1/2, par. 5404)

3 Sec. 4. Offenses; penalties. Any physician or health
4 care provider that violates a patient's rights as set forth
5 in subparagraph (a) of Section 3 or Section 3.3 is guilty of
6 a petty offense and shall be fined \$500 per incident. Any
7 insurance company or health service corporation that violates
8 a patient's rights as set forth in subparagraph (b) of
9 Section 3 is guilty of a petty offense and shall be fined
10 \$1,000. Any physician, health care provider, health services
11 corporation or insurance company that violates a patient's
12 rights as set forth in subsection (c) of Section 3 is guilty
13 of a petty offense and shall be fined \$1,000.

14 (Source: P.A. 86-902.)

15 Section 10. The Workers' Compensation Act is amended by
16 changing Section 8 as follows:

17 (820 ILCS 305/8) (from Ch. 48, par. 138.8)

18 Sec. 8. The amount of compensation which shall be paid
19 to the employee for an accidental injury not resulting in
20 death is:

21 (a) The employer shall provide and pay for all the
22 necessary first aid, medical and surgical services, and all
23 necessary medical, surgical and hospital services thereafter
24 incurred, limited, however, to that which is reasonably
25 required to cure or relieve from the effects of the
26 accidental injury. The employer shall also pay for treatment,
27 instruction and training necessary for the physical, mental
28 and vocational rehabilitation of the employee, including all
29 maintenance costs and expenses incidental thereto. If as a
30 result of the injury the employee is unable to be
31 self-sufficient the employer shall further pay for such

1 maintenance or institutional care as shall be required.

2 The employee may at any time elect to secure his own
3 physician, surgeon and hospital services at the employer's
4 expense, or,

5 Upon agreement between the employer and the employees, or
6 the employees' exclusive representative, and subject to the
7 approval of the Industrial Commission, the employer shall
8 maintain a list of physicians, to be known as a Panel of
9 Physicians, who are accessible to the employees. The employer
10 shall post this list in a place or places easily accessible
11 to his employees. The employee shall have the right to make
12 an alternative choice of physician from such Panel if he is
13 not satisfied with the physician first selected. If, due to
14 the nature of the injury or its occurrence away from the
15 employer's place of business, the employee is unable to make
16 a selection from the Panel, the selection process from the
17 Panel shall not apply. The physician selected from the Panel
18 may arrange for any consultation, referral or other
19 specialized medical services outside the Panel at the
20 employer's expense. Provided that, in the event the
21 Commission shall find that a doctor selected by the employee
22 is rendering improper or inadequate care, the Commission may
23 order the employee to select another doctor certified or
24 qualified in the medical field for which treatment is
25 required. If the employee refuses to make such change the
26 Commission may relieve the employer of his obligation to pay
27 the doctor's charges from the date of refusal to the date of
28 compliance.

29 Every hospital, physician, surgeon or other person
30 rendering treatment or services in accordance with the
31 provisions of this Section shall upon written request furnish
32 full and complete reports thereof to, and permit their
33 records to be copied by, the employer, the employee or his
34 dependents, as the case may be, or any other party to any

1 proceeding for compensation before the Commission, or their
2 attorneys.

3 Notwithstanding the foregoing, the employer's liability
4 to pay for such medical services selected by the employee
5 shall be limited to:

6 (1) all first aid and emergency treatment; plus

7 (2) all medical, surgical and hospital services
8 provided by the physician, surgeon or hospital initially
9 chosen by the employee or by any other physician,
10 consultant, expert, institution or other provider of
11 services recommended by said initial service provider or
12 any subsequent provider of medical services in the chain
13 of referrals from said initial service provider; plus

14 (3) all medical, surgical and hospital services
15 provided by any second physician, surgeon or hospital
16 subsequently chosen by the employee or by any other
17 physician, consultant, expert, institution or other
18 provider of services recommended by said second service
19 provider or any subsequent provider of medical services
20 in the chain of referrals from said second service
21 provider. Thereafter the employer shall select and pay
22 for all necessary medical, surgical and hospital
23 treatment and the employee may not select a provider of
24 medical services at the employer's expense unless the
25 employer agrees to such selection. At any time the
26 employee may obtain any medical treatment he desires at
27 his own expense. This paragraph shall not affect the duty
28 to pay for rehabilitation referred to above.

29 When an employer and employee so agree in writing,
30 nothing in this Act prevents an employee whose injury or
31 disability has been established under this Act, from relying
32 in good faith, on treatment by prayer or spiritual means
33 alone, in accordance with the tenets and practice of a
34 recognized church or religious denomination, by a duly

1 accredited practitioner thereof, and having nursing services
2 appropriate therewith, without suffering loss or diminution
3 of the compensation benefits under this Act. However, the
4 employee shall submit to all physical examinations required
5 by this Act. The cost of such treatment and nursing care
6 shall be paid by the employee unless the employer agrees to
7 make such payment.

8 Where the accidental injury results in the amputation of
9 an arm, hand, leg or foot, or the enucleation of an eye, or
10 the loss of any of the natural teeth, the employer shall
11 furnish an artificial of any such members lost or damaged in
12 accidental injury arising out of and in the course of
13 employment, and shall also furnish the necessary braces in
14 all proper and necessary cases. In cases of the loss of a
15 member or members by amputation, the employer shall, whenever
16 necessary, maintain in good repair, refit or replace the
17 artificial limbs during the lifetime of the employee. Where
18 the accidental injury accompanied by physical injury results
19 in damage to a denture, eye glasses or contact eye lenses, or
20 where the accidental injury results in damage to an
21 artificial member, the employer shall replace or repair such
22 denture, glasses, lenses, or artificial member.

23 The furnishing by the employer of any such services or
24 appliances is not an admission of liability on the part of
25 the employer to pay compensation.

26 The furnishing of any such services or appliances or the
27 servicing thereof by the employer is not the payment of
28 compensation.

29 The provider of any services, treatment, care,
30 instruction, training, or appliances or other tangible things
31 for which an employer is responsible for payment under this
32 subsection (a) agrees to be bound by charges or payment
33 levels allowed by the Industrial Commission, and any dispute
34 regarding the reasonableness of a fee, charge, or payment

1 level shall be resolved in accordance with Section 16 of this
 2 Act or Section 16 of the Workers' Occupational Diseases Act.
 3 Neither the provider nor an employer or insurance carrier may
 4 seek payment from the employee if the employer is responsible
 5 for payment under this subsection (a).

6 (b) If the period of temporary total incapacity for work
 7 lasts more than 3 working days, weekly compensation as
 8 hereinafter provided shall be paid beginning on the 4th day
 9 of such temporary total incapacity and continuing as long as
 10 the total temporary incapacity lasts. In cases where the
 11 temporary total incapacity for work continues for a period of
 12 14 days or more from the day of the accident compensation
 13 shall commence on the day after the accident.

14 1. The compensation rate for temporary total
 15 incapacity under this paragraph (b) of this Section shall
 16 be equal to 66 2/3% of the employee's average weekly wage
 17 computed in accordance with Section 10, provided that it
 18 shall be not less than the following amounts in the
 19 following cases:

- 20 \$100.90 in case of a single person;
- 21 \$105.50 in case of a married person with no
 22 children;
- 23 \$108.30 in case of one child;
- 24 \$113.40 in case of 2 children;
- 25 \$117.40 in case of 3 children;
- 26 \$124.30 in case of 4 or more children;

27 nor exceed the employee's average weekly wage computed in
 28 accordance with the provisions of Section 10, whichever
 29 is less.

30 2. The compensation rate in all cases other than
 31 for temporary total disability under this paragraph (b),
 32 and other than for serious and permanent disfigurement
 33 under paragraph (c) and other than for permanent partial
 34 disability under subparagraph (2) of paragraph (d) or

1 under paragraph (e), of this Section shall be equal to 66
 2 2/3% of the employee's average weekly wage computed in
 3 accordance with the provisions of Section 10, provided
 4 that it shall be not less than the following amounts in
 5 the following cases:

6 \$80.90 in case of a single person;

7 \$83.20 in case of a married person with no
 8 children;

9 \$86.10 in case of one child;

10 \$88.90 in case of 2 children;

11 \$91.80 in case of 3 children;

12 \$96.90 in case of 4 or more children;

13 nor exceed the employee's average weekly wage computed in
 14 accordance with the provisions of Section 10, whichever
 15 is less.

16 2.1. The compensation rate in all cases of serious
 17 and permanent disfigurement under paragraph (c) and of
 18 permanent partial disability under subparagraph (2) of
 19 paragraph (d) or under paragraph (e) of this Section
 20 shall be equal to 60% of the employee's average weekly
 21 wage computed in accordance with the provisions of
 22 Section 10, provided that it shall be not less than the
 23 following amounts in the following cases:

24 \$80.90 in case of a single person;

25 \$83.20 in case of a married person with no
 26 children;

27 \$86.10 in case of one child;

28 \$88.90 in case of 2 children;

29 \$91.80 in case of 3 children;

30 \$96.90 in case of 4 or more children;

31 nor exceed the employee's average weekly wage computed in
 32 accordance with the provisions of Section 10, whichever
 33 is less.

34 3. As used in this Section the term "child" means a

1 child of the employee including any child legally adopted
2 before the accident or whom at the time of the accident
3 the employee was under legal obligation to support or to
4 whom the employee stood in loco parentis, and who at the
5 time of the accident was under 18 years of age and not
6 emancipated. The term "children" means the plural of
7 "child".

8 4. All weekly compensation rates provided under
9 subparagraphs 1, 2 and 2.1 of this paragraph (b) of this
10 Section shall be subject to the following limitations:

11 The maximum weekly compensation rate from July 1,
12 1975, except as hereinafter provided, shall be 100% of
13 the State's average weekly wage in covered industries
14 under the Unemployment Insurance Act, that being the wage
15 that most closely approximates the State's average weekly
16 wage.

17 The maximum weekly compensation rate, for the period
18 July 1, 1984, through June 30, 1987, except as
19 hereinafter provided, shall be \$293.61. Effective July 1,
20 1987 and on July 1 of each year thereafter the maximum
21 weekly compensation rate, except as hereinafter provided,
22 shall be determined as follows: if during the preceding
23 12 month period there shall have been an increase in the
24 State's average weekly wage in covered industries under
25 the Unemployment Insurance Act, the weekly compensation
26 rate shall be proportionately increased by the same
27 percentage as the percentage of increase in the State's
28 average weekly wage in covered industries under the
29 Unemployment Insurance Act during such period.

30 The maximum weekly compensation rate, for the period
31 January 1, 1981 through December 31, 1983, except as
32 hereinafter provided, shall be 100% of the State's
33 average weekly wage in covered industries under the
34 Unemployment Insurance Act in effect on January 1, 1981.

1 Effective January 1, 1984 and on January 1, of each year
2 thereafter the maximum weekly compensation rate, except
3 as hereinafter provided, shall be determined as follows:
4 if during the preceding 12 month period there shall have
5 been an increase in the State's average weekly wage in
6 covered industries under the Unemployment Insurance Act,
7 the weekly compensation rate shall be proportionately
8 increased by the same percentage as the percentage of
9 increase in the State's average weekly wage in covered
10 industries under the Unemployment Insurance Act during
11 such period.

12 From July 1, 1977 and thereafter such maximum weekly
13 compensation rate in death cases under Section 7, and
14 permanent total disability cases under paragraph (f) or
15 subparagraph 18 of paragraph (3) of this Section and for
16 temporary total disability under paragraph (b) of this
17 Section and for amputation of a member or enucleation of
18 an eye under paragraph (e) of this Section shall be
19 increased to 133-1/3% of the State's average weekly wage
20 in covered industries under the Unemployment Insurance
21 Act.

22 4.1. Any provision herein to the contrary
23 notwithstanding, the weekly compensation rate for
24 compensation payments under subparagraph 18 of paragraph
25 (e) of this Section and under paragraph (f) of this
26 Section and under paragraph (a) of Section 7, shall in no
27 event be less than 50% of the State's average weekly wage
28 in covered industries under the Unemployment Insurance
29 Act.

30 4.2. Any provision to the contrary notwithstanding,
31 the total compensation payable under Section 7 shall not
32 exceed the greater of \$250,000 or 20 years.

33 5. For the purpose of this Section this State's
34 average weekly wage in covered industries under the

1 Unemployment Insurance Act on July 1, 1975 is hereby
2 fixed at \$228.16 per week and the computation of
3 compensation rates shall be based on the aforesaid
4 average weekly wage until modified as hereinafter
5 provided.

6 6. The Department of Employment Security of the
7 State shall on or before the first day of December, 1977,
8 and on or before the first day of June, 1978, and on the
9 first day of each December and June of each year
10 thereafter, publish the State's average weekly wage in
11 covered industries under the Unemployment Insurance Act
12 and the Industrial Commission shall on the 15th day of
13 January, 1978 and on the 15th day of July, 1978 and on
14 the 15th day of each January and July of each year
15 thereafter, post and publish the State's average weekly
16 wage in covered industries under the Unemployment
17 Insurance Act as last determined and published by the
18 Department of Employment Security. The amount when so
19 posted and published shall be conclusive and shall be
20 applicable as the basis of computation of compensation
21 rates until the next posting and publication as
22 aforesaid.

23 7. The payment of compensation by an employer or
24 his insurance carrier to an injured employee shall not
25 constitute an admission of the employer's liability to
26 pay compensation.

27 (c) For any serious and permanent disfigurement to the
28 hand, head, face, neck, arm, leg below the knee or the chest
29 above the axillary line, the employee is entitled to
30 compensation for such disfigurement, the amount determined by
31 agreement at any time or by arbitration under this Act, at a
32 hearing not less than 6 months after the date of the
33 accidental injury, which amount shall not exceed 150 weeks at
34 the applicable rate provided in subparagraph 2.1 of paragraph

1 (b) of this Section.

2 No compensation is payable under this paragraph where
3 compensation is payable under paragraphs (d), (e) or (f) of
4 this Section.

5 A duly appointed member of a fire department in a city,
6 the population of which exceeds 200,000 according to the last
7 federal or State census, is eligible for compensation under
8 this paragraph only where such serious and permanent
9 disfigurement results from burns.

10 (d) 1. If, after the accidental injury has been
11 sustained, the employee as a result thereof becomes partially
12 incapacitated from pursuing his usual and customary line of
13 employment, he shall, except in cases compensated under the
14 specific schedule set forth in paragraph (e) of this Section,
15 receive compensation for the duration of his disability,
16 subject to the limitations as to maximum amounts fixed in
17 paragraph (b) of this Section, equal to $66\frac{2}{3}\%$ of the
18 difference between the average amount which he would be able
19 to earn in the full performance of his duties in the
20 occupation in which he was engaged at the time of the
21 accident and the average amount which he is earning or is
22 able to earn in some suitable employment or business after
23 the accident.

24 2. If, as a result of the accident, the employee
25 sustains serious and permanent injuries not covered by
26 paragraphs (c) and (e) of this Section or having sustained
27 injuries covered by the aforesaid paragraphs (c) and (e), he
28 shall have sustained in addition thereto other injuries which
29 injuries do not incapacitate him from pursuing the duties of
30 his employment but which would disable him from pursuing
31 other suitable occupations, or which have otherwise resulted
32 in physical impairment; or if such injuries partially
33 incapacitate him from pursuing the duties of his usual and
34 customary line of employment but do not result in an

1 impairment of earning capacity, or having resulted in an
2 impairment of earning capacity, the employee elects to waive
3 his right to recover under the foregoing subparagraph 1 of
4 paragraph (d) of this Section then in any of the foregoing
5 events, he shall receive in addition to compensation for
6 temporary total disability under paragraph (b) of this
7 Section, compensation at the rate provided in subparagraph
8 2.1 of paragraph (b) of this Section for that percentage of
9 500 weeks that the partial disability resulting from the
10 injuries covered by this paragraph bears to total disability.
11 If the employee shall have sustained a fracture of one or
12 more vertebra or fracture of the skull, the amount of
13 compensation allowed under this Section shall be not less
14 than 6 weeks for a fractured skull and 6 weeks for each
15 fractured vertebra, and in the event the employee shall have
16 sustained a fracture of any of the following facial bones:
17 nasal, lachrymal, vomer, zygoma, maxilla, palatine or
18 mandible, the amount of compensation allowed under this
19 Section shall be not less than 2 weeks for each such
20 fractured bone, and for a fracture of each transverse process
21 not less than 3 weeks. In the event such injuries shall
22 result in the loss of a kidney, spleen or lung, the amount of
23 compensation allowed under this Section shall be not less
24 than 10 weeks for each such organ. Compensation awarded
25 under this subparagraph 2 shall not take into consideration
26 injuries covered under paragraphs (c) and (e) of this Section
27 and the compensation provided in this paragraph shall not
28 affect the employee's right to compensation payable under
29 paragraphs (b), (c) and (e) of this Section for the
30 disabilities therein covered.

31 (e) For accidental injuries in the following schedule,
32 the employee shall receive compensation for the period of
33 temporary total incapacity for work resulting from such
34 accidental injury, under subparagraph 1 of paragraph (b) of

1 this Section, and shall receive in addition thereto
2 compensation for a further period for the specific loss
3 herein mentioned, but shall not receive any compensation
4 under any other provisions of this Act. The following
5 listed amounts apply to either the loss of or the permanent
6 and complete loss of use of the member specified, such
7 compensation for the length of time as follows:

- 8 1. Thumb-70 weeks.
- 9 2. First, or index finger-40 weeks.
- 10 3. Second, or middle finger-35 weeks.
- 11 4. Third, or ring finger-25 weeks.
- 12 5. Fourth, or little finger-20 weeks.
- 13 6. Great toe-35 weeks.
- 14 7. Each toe other than great toe-12 weeks.
- 15 8. The loss of the first or distal phalanx of the
16 thumb or of any finger or toe shall be considered to be
17 equal to the loss of one-half of such thumb, finger or
18 toe and the compensation payable shall be one-half of the
19 amount above specified. The loss of more than one
20 phalanx shall be considered as the loss of the entire
21 thumb, finger or toe. In no case shall the amount
22 received for more than one finger exceed the amount
23 provided in this schedule for the loss of a hand.
- 24 9. Hand-190 weeks. The loss of 2 or more digits,
25 or one or more phalanges of 2 or more digits, of a hand
26 may be compensated on the basis of partial loss of use of
27 a hand, provided, further, that the loss of 4 digits, or
28 the loss of use of 4 digits, in the same hand shall
29 constitute the complete loss of a hand.
- 30 10. Arm-235 weeks. Where an accidental injury
31 results in the amputation of an arm below the elbow, such
32 injury shall be compensated as a loss of an arm. Where
33 an accidental injury results in the amputation of an arm
34 above the elbow, compensation for an additional 15 weeks

1 shall be paid, except where the accidental injury results
2 in the amputation of an arm at the shoulder joint, or so
3 close to shoulder joint that an artificial arm cannot be
4 used, or results in the disarticulation of an arm at the
5 shoulder joint, in which case compensation for an
6 additional 65 weeks shall be paid.

7 11. Foot-155 weeks.

8 12. Leg-200 weeks. Where an accidental injury
9 results in the amputation of a leg below the knee, such
10 injury shall be compensated as loss of a leg. Where an
11 accidental injury results in the amputation of a leg
12 above the knee, compensation for an additional 25 weeks
13 shall be paid, except where the accidental injury results
14 in the amputation of a leg at the hip joint, or so close
15 to the hip joint that an artificial leg cannot be used,
16 or results in the disarticulation of a leg at the hip
17 joint, in which case compensation for an additional 75
18 weeks shall be paid.

19 13. Eye-150 weeks. Where an accidental injury
20 results in the enucleation of an eye, compensation for an
21 additional 10 weeks shall be paid.

22 14. Loss of hearing of one ear-50 weeks; total and
23 permanent loss of hearing of both ears-200 weeks.

24 15. Testicle-50 weeks; both testicles-150 weeks.

25 16. For the permanent partial loss of use of a
26 member or sight of an eye, or hearing of an ear,
27 compensation during that proportion of the number of
28 weeks in the foregoing schedule provided for the loss of
29 such member or sight of an eye, or hearing of an ear,
30 which the partial loss of use thereof bears to the total
31 loss of use of such member, or sight of eye, or hearing
32 of an ear.

33 (a) Loss of hearing for compensation purposes
34 shall be confined to the frequencies of 1,000, 2,000

1 and 3,000 cycles per second. Loss of hearing ability
2 for frequency tones above 3,000 cycles per second
3 are not to be considered as constituting disability
4 for hearing.

5 (b) The percent of hearing loss, for purposes
6 of the determination of compensation claims for
7 occupational deafness, shall be calculated as the
8 average in decibels for the thresholds of hearing
9 for the frequencies of 1,000, 2,000 and 3,000 cycles
10 per second. Pure tone air conduction audiometric
11 instruments, approved by nationally recognized
12 authorities in this field, shall be used for
13 measuring hearing loss. If the losses of hearing
14 average 30 decibels or less in the 3 frequencies,
15 such losses of hearing shall not then constitute any
16 compensable hearing disability. If the losses of
17 hearing average 85 decibels or more in the 3
18 frequencies, then the same shall constitute and be
19 total or 100% compensable hearing loss.

20 (c) In measuring hearing impairment, the
21 lowest measured losses in each of the 3 frequencies
22 shall be added together and divided by 3 to
23 determine the average decibel loss. For every
24 decibel of loss exceeding 30 decibels an allowance
25 of 1.82% shall be made up to the maximum of 100%
26 which is reached at 85 decibels.

27 (d) If a hearing loss is established to have
28 existed on July 1, 1975 by audiometric testing the
29 employer shall not be liable for the previous loss
30 so established nor shall he be liable for any loss
31 for which compensation has been paid or awarded.

32 (e) No consideration shall be given to the
33 question of whether or not the ability of an
34 employee to understand speech is improved by the use

1 of a hearing aid.

2 (f) No claim for loss of hearing due to
3 industrial noise shall be brought against an
4 employer or allowed unless the employee has been
5 exposed for a period of time sufficient to cause
6 permanent impairment to noise levels in excess of
7 the following:

8	Sound Level DBA	
9	Slow Response	Hours Per Day
10	90	8
11	92	6
12	95	4
13	97	3
14	100	2
15	102	1-1/2
16	105	1
17	110	1/2
18	115	1/4

19 This subparagraph (f) shall not be applied in cases
20 of hearing loss resulting from trauma or explosion.

21 17. In computing the compensation to be paid to any
22 employee who, before the accident for which he claims
23 compensation, had before that time sustained an injury
24 resulting in the loss by amputation or partial loss by
25 amputation of any member, including hand, arm, thumb or
26 fingers, leg, foot or any toes, such loss or partial loss
27 of any such member shall be deducted from any award made
28 for the subsequent injury. For the permanent loss of use
29 or the permanent partial loss of use of any such member
30 or the partial loss of sight of an eye, for which
31 compensation has been paid, then such loss shall be taken
32 into consideration and deducted from any award for the
33 subsequent injury.

34 18. The specific case of loss of both hands, both

1 arms, or both feet, or both legs, or both eyes, or of any
2 two thereof, or the permanent and complete loss of the
3 use thereof, constitutes total and permanent disability,
4 to be compensated according to the compensation fixed by
5 paragraph (f) of this Section. These specific cases of
6 total and permanent disability do not exclude other
7 cases.

8 Any employee who has previously suffered the loss or
9 permanent and complete loss of the use of any of such
10 members, and in a subsequent independent accident loses
11 another or suffers the permanent and complete loss of the
12 use of any one of such members the employer for whom the
13 injured employee is working at the time of the last
14 independent accident is liable to pay compensation only
15 for the loss or permanent and complete loss of the use of
16 the member occasioned by the last independent accident.

17 19. In a case of specific loss and the subsequent
18 death of such injured employee from other causes than
19 such injury leaving a widow, widower, or dependents
20 surviving before payment or payment in full for such
21 injury, then the amount due for such injury is payable to
22 the widow or widower and, if there be no widow or
23 widower, then to such dependents, in the proportion which
24 such dependency bears to total dependency.

25 Beginning July 1, 1980, and every 6 months thereafter,
26 the Commission shall examine the Second Injury Fund and when,
27 after deducting all advances or loans made to such Fund, the
28 amount therein is \$500,000 then the amount required to be
29 paid by employers pursuant to paragraph (f) of Section 7
30 shall be reduced by one-half. When the Second Injury Fund
31 reaches the sum of \$600,000 then the payments shall cease
32 entirely. However, when the Second Injury Fund has been
33 reduced to \$400,000, payment of one-half of the amounts
34 required by paragraph (f) of Section 7 shall be resumed, in

1 the manner herein provided, and when the Second Injury Fund
2 has been reduced to \$300,000, payment of the full amounts
3 required by paragraph (f) of Section 7 shall be resumed, in
4 the manner herein provided. The Commission shall make the
5 changes in payment effective by general order, and the
6 changes in payment become immediately effective for all cases
7 coming before the Commission thereafter either by settlement
8 agreement or final order, irrespective of the date of the
9 accidental injury.

10 On August 1, 1996 and on February 1 and August 1 of each
11 subsequent year, the Commission shall examine the special
12 fund designated as the "Rate Adjustment Fund" and when, after
13 deducting all advances or loans made to said fund, the amount
14 therein is \$4,000,000, the amount required to be paid by
15 employers pursuant to paragraph (f) of Section 7 shall be
16 reduced by one-half. When the Rate Adjustment Fund reaches
17 the sum of \$5,000,000 the payment therein shall cease
18 entirely. However, when said Rate Adjustment Fund has been
19 reduced to \$3,000,000 the amounts required by paragraph (f)
20 of Section 7 shall be resumed in the manner herein provided.

21 (f) In case of complete disability, which renders the
22 employee wholly and permanently incapable of work, or in the
23 specific case of total and permanent disability as provided
24 in subparagraph 18 of paragraph (e) of this Section,
25 compensation shall be payable at the rate provided in
26 subparagraph 2 of paragraph (b) of this Section for life.

27 An employee entitled to benefits under paragraph (f) of
28 this Section shall also be entitled to receive from the Rate
29 Adjustment Fund provided in paragraph (f) of Section 7 of the
30 supplementary benefits provided in paragraph (g) of this
31 Section 8.

32 If any employee who receives an award under this
33 paragraph afterwards returns to work or is able to do so, and
34 earns or is able to earn as much as before the accident,

1 payments under such award shall cease. If such employee
2 returns to work, or is able to do so, and earns or is able to
3 earn part but not as much as before the accident, such award
4 shall be modified so as to conform to an award under
5 paragraph (d) of this Section. If such award is terminated
6 or reduced under the provisions of this paragraph, such
7 employees have the right at any time within 30 months after
8 the date of such termination or reduction to file petition
9 with the Commission for the purpose of determining whether
10 any disability exists as a result of the original accidental
11 injury and the extent thereof.

12 Disability as enumerated in subdivision 18, paragraph (e)
13 of this Section is considered complete disability.

14 If an employee who had previously incurred loss or the
15 permanent and complete loss of use of one member, through the
16 loss or the permanent and complete loss of the use of one
17 hand, one arm, one foot, one leg, or one eye, incurs
18 permanent and complete disability through the loss or the
19 permanent and complete loss of the use of another member, he
20 shall receive, in addition to the compensation payable by the
21 employer and after such payments have ceased, an amount from
22 the Second Injury Fund provided for in paragraph (f) of
23 Section 7, which, together with the compensation payable from
24 the employer in whose employ he was when the last accidental
25 injury was incurred, will equal the amount payable for
26 permanent and complete disability as provided in this
27 paragraph of this Section.

28 The custodian of the Second Injury Fund provided for in
29 paragraph (f) of Section 7 shall be joined with the employer
30 as a party respondent in the application for adjustment of
31 claim. The application for adjustment of claim shall state
32 briefly and in general terms the approximate time and place
33 and manner of the loss of the first member.

34 In its award the Commission or the Arbitrator shall

1 specifically find the amount the injured employee shall be
2 weekly paid, the number of weeks compensation which shall be
3 paid by the employer, the date upon which payments begin out
4 of the Second Injury Fund provided for in paragraph (f) of
5 Section 7 of this Act, the length of time the weekly payments
6 continue, the date upon which the pension payments commence
7 and the monthly amount of the payments. The Commission shall
8 30 days after the date upon which payments out of the Second
9 Injury Fund have begun as provided in the award, and every
10 month thereafter, prepare and submit to the State Comptroller
11 a voucher for payment for all compensation accrued to that
12 date at the rate fixed by the Commission. The State
13 Comptroller shall draw a warrant to the injured employee
14 along with a receipt to be executed by the injured employee
15 and returned to the Commission. The endorsed warrant and
16 receipt is a full and complete acquittance to the Commission
17 for the payment out of the Second Injury Fund. No other
18 appropriation or warrant is necessary for payment out of the
19 Second Injury Fund. The Second Injury Fund is appropriated
20 for the purpose of making payments according to the terms of
21 the awards.

22 As of July 1, 1980 to July 1, 1982, all claims against
23 and obligations of the Second Injury Fund shall become claims
24 against and obligations of the Rate Adjustment Fund to the
25 extent there is insufficient money in the Second Injury Fund
26 to pay such claims and obligations. In that case, all
27 references to "Second Injury Fund" in this Section shall also
28 include the Rate Adjustment Fund.

29 (g) Every award for permanent total disability entered
30 by the Commission on and after July 1, 1965 under which
31 compensation payments shall become due and payable after the
32 effective date of this amendatory Act, and every award for
33 death benefits or permanent total disability entered by the
34 Commission on and after the effective date of this amendatory

1 Act shall be subject to annual adjustments as to the amount
2 of the compensation rate therein provided. Such adjustments
3 shall first be made on July 15, 1977, and all awards made and
4 entered prior to July 1, 1975 and on July 15 of each year
5 thereafter. In all other cases such adjustment shall be made
6 on July 15 of the second year next following the date of the
7 entry of the award and shall further be made on July 15
8 annually thereafter. If during the intervening period from
9 the date of the entry of the award, or the last periodic
10 adjustment, there shall have been an increase in the State's
11 average weekly wage in covered industries under the
12 Unemployment Insurance Act, the weekly compensation rate
13 shall be proportionately increased by the same percentage as
14 the percentage of increase in the State's average weekly wage
15 in covered industries under the Unemployment Insurance Act.
16 The increase in the compensation rate under this paragraph
17 shall in no event bring the total compensation rate to an
18 amount greater than the prevailing maximum rate. Such
19 increase shall be paid in the same manner as herein provided
20 for payments under the Second Injury Fund to the injured
21 employee, or his dependents, as the case may be, out of the
22 Rate Adjustment Fund provided in paragraph (f) of Section 7
23 of this Act. Payments shall be made at the same intervals as
24 provided in the award or, at the option of the Commission,
25 may be made in quarterly payment on the 15th day of January,
26 April, July and October of each year. In the event of a
27 decrease in such average weekly wage there shall be no change
28 in the then existing compensation rate. The within paragraph
29 shall not apply to cases where there is disputed liability
30 and in which a compromise lump sum settlement between the
31 employer and the injured employee, or his dependents, as the
32 case may be, has been duly approved by the Industrial
33 Commission.

34 Provided, that in cases of awards entered by the

1 Commission for injuries occurring before July 1, 1975, the
2 increases in the compensation rate adjusted under the
3 foregoing provision of this paragraph (g) shall be limited to
4 increases in the State's average weekly wage in covered
5 industries under the Unemployment Insurance Act occurring
6 after July 1, 1975.

7 (h) In case death occurs from any cause before the total
8 compensation to which the employee would have been entitled
9 has been paid, then in case the employee leaves any widow,
10 widower, child, parent (or any grandchild, grandparent or
11 other lineal heir or any collateral heir dependent at the
12 time of the accident upon the earnings of the employee to the
13 extent of 50% or more of total dependency) such compensation
14 shall be paid to the beneficiaries of the deceased employee
15 and distributed as provided in paragraph (g) of Section 7.

16 (h-1) In case an injured employee is under legal
17 disability at the time when any right or privilege accrues to
18 him or her under this Act, a guardian may be appointed
19 pursuant to law, and may, on behalf of such person under
20 legal disability, claim and exercise any such right or
21 privilege with the same effect as if the employee himself or
22 herself had claimed or exercised the right or privilege. No
23 limitations of time provided by this Act run so long as the
24 employee who is under legal disability is without a
25 conservator or guardian.

26 (i) In case the injured employee is under 16 years of
27 age at the time of the accident and is illegally employed,
28 the amount of compensation payable under paragraphs (b), (c),
29 (d), (e) and (f) of this Section is increased 50%.

30 However, where an employer has on file an employment
31 certificate issued pursuant to the Child Labor Law or work
32 permit issued pursuant to the Federal Fair Labor Standards
33 Act, as amended, or a birth certificate properly and duly
34 issued, such certificate, permit or birth certificate is

1 conclusive evidence as to the age of the injured minor
2 employee for the purposes of this Section.

3 Nothing herein contained repeals or amends the provisions
4 of the Child Labor Law relating to the employment of minors
5 under the age of 16 years.

6 (j) 1. In the event the injured employee receives
7 benefits, including medical, surgical or hospital benefits
8 under any group plan covering non-occupational disabilities
9 contributed to wholly or partially by the employer, which
10 benefits should not have been payable if any rights of
11 recovery existed under this Act, then such amounts so paid to
12 the employee from any such group plan as shall be consistent
13 with, and limited to, the provisions of paragraph 2 hereof,
14 shall be credited to or against any compensation payment for
15 temporary total incapacity for work or any medical, surgical
16 or hospital benefits made or to be made under this Act. In
17 such event, the period of time for giving notice of
18 accidental injury and filing application for adjustment of
19 claim does not commence to run until the termination of such
20 payments. This paragraph does not apply to payments made
21 under any group plan which would have been payable
22 irrespective of an accidental injury under this Act. Any
23 employer receiving such credit shall keep such employee safe
24 and harmless from any and all claims or liabilities that may
25 be made against him by reason of having received such
26 payments only to the extent of such credit.

27 Any excess benefits paid to or on behalf of a State
28 employee by the State Employees' Retirement System under
29 Article 14 of the Illinois Pension Code on a death claim or
30 disputed disability claim shall be credited against any
31 payments made or to be made by the State of Illinois to or on
32 behalf of such employee under this Act, except for payments
33 for medical expenses which have already been incurred at the
34 time of the award. The State of Illinois shall directly

1 reimburse the State Employees' Retirement System to the
2 extent of such credit.

3 2. Nothing contained in this Act shall be construed to
4 give the employer or the insurance carrier the right to
5 credit for any benefits or payments received by the employee
6 other than compensation payments provided by this Act, and
7 where the employee receives payments other than compensation
8 payments, whether as full or partial salary, group insurance
9 benefits, bonuses, annuities or any other payments, the
10 employer or insurance carrier shall receive credit for each
11 such payment only to the extent of the compensation that
12 would have been payable during the period covered by such
13 payment.

14 3. The extension of time for the filing of an
15 Application for Adjustment of Claim as provided in paragraph
16 1 above shall not apply to those cases where the time for
17 such filing had expired prior to the date on which payments
18 or benefits enumerated herein have been initiated or resumed.
19 Provided however that this paragraph 3 shall apply only to
20 cases wherein the payments or benefits hereinabove enumerated
21 shall be received after July 1, 1969.

22 (Source: P.A. 89-470, eff. 6-13-96.)

23 Section 99. Effective date. This Act takes effect upon
24 becoming law.