

AN ACT concerning health.

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

Section 5. The Health Care Professional Credentials Data Collection Act is amended by changing Section 5 as follows:

(410 ILCS 517/5)

Sec. 5. Definitions. As used in this Act:

"Council" means the Health Care Credentials Council.

"Credentials data" means those data, information, or answers to questions required by a health care entity, health care plan, or hospital to complete the credentialing or recredentialing of a health care professional.

"Credentialing" means the process of assessing and validating the qualifications of a health care professional.

"Department" means the Department of Public Health.

"Director" means the Director of the Department of Public Health.

"Health care entity" means any of the following which require the submission of credentials data: (i) a health care facility or other health care organization licensed or certified to provide medical or health services in Illinois, other than a hospital; (ii) a health care professional partnership, corporation, limited liability company,

professional services corporation or group practice; or (iii) an independent practice association or physician hospital organization. Nothing in this definition shall be construed to mean that a hospital is a health care entity.

"Health care plan" means any entity licensed by the Department of Insurance as a prepaid health care plan or health maintenance organization or as an insurer which requires the submission of credentials data.

"Health care professional" means any person licensed under the Medical Practice Act of 1987 or any person licensed under any other Act subsequently made subject to this Act by the Department.

"Hospital" means a hospital licensed under the Hospital Licensing Act or any hospital organized under the University of Illinois Hospital Act.

"Recredentialing" means a ~~the~~ process undertaken for a period not to exceed 3 years by which a health care entity, health care plan or hospital ensures that a health care professional who is currently credentialed by the health care entity, health care plan or hospital continues to meet the credentialing criteria used by the health care entity, health care plan, or hospital ~~no more than once every 2 years~~.

"Single credentialing cycle" means a process undertaken for a period not to exceed 3 years whereby for purposes of recredentialing each health care professional's credentials data are collected by all health care entities and health care

plans that credential the health care professional during the same time period ~~and only once every 2 years.~~

"Site survey" means a process by which a health care entity or health care plan assesses the office locations and medical record keeping practices of a health care professional.

"Single site survey" means a process by which, for purposes of recredentialing, each health care professional receives a site visit only once every two years.

"Uniform health care credentials form" means the form developed by the Department under Section 15 to collect the credentials data commonly requested by health care entities and health care plans for purposes of credentialing.

"Uniform health care recredentials form" means the form developed by the Department under Section 15 to collect the credentials data commonly requested by health care entities and health care plans for purposes of recredentialing.

"Uniform hospital credentials form" means the form developed by the Department under Section 15 to collect the credentials data commonly requested by hospitals for purposes of credentialing.

"Uniform hospital recredentials form" means the form developed by the Department under Section 15 to collect the credentials data commonly requested by hospitals for purposes of recredentialing.

"Uniform site survey instrument" means the instrument

developed by the Department under Section 25 to complete a single site survey as part of a credentialing or recredentialing process.

"Uniform updating form" means a standardized form for reporting of corrections, updates, and modifications to credentials data to health care entities, health care plans, and hospitals when those data change following credentialing or recredentialing of a health care professional.

(Source: P.A. 91-602, eff. 8-16-99.)