Illinois Health and Hospital Association

September 16, 2025

The Spring 2025 legislative session resulted in several hospital regulatory bills being passed by the Illinois General Assembly and signed into law by Gov. JB Pritzker. This memo provides a summary of those laws.

P.A. 104-0046 – Emergency Contact Person – This legislation, effective Jan. 1, 2026, makes changes to the Caregiver Advise, Record, and Enable (CARE) Act. Under this legislation, hospitals must ask any patient being admitted if they would like to designate an emergency contact, and whether the hospital is authorized to share protected health information with the emergency contact. If authorized, and should the patient die while in the hospital, the hospital must contact the patient's emergency contact if they are not the patient's legal representative and the patient's legal representative does not object. An attempt to contact the emergency contact, even if they do not answer, fulfills the hospital's requirement under these changes. If a patient fails to authorize the hospital to share the patient's protected health information or revokes such authorization as it pertains to the emergency contact, the hospital may only contact the emergency contact as otherwise allowed by law. Through IHA's advocacy efforts language in the underlying bill was removed that would have been challenging for hospitals to operationalize and would have put them at risk of violating federal and state privacy laws.

Note: Nothing regarding the changes under this legislation relieves a hospital of its obligations under existing law.

P.A. 104-0191 – Strengthening of Inappropriate Nursing Home Transfers – This legislation, effective Jan. 1, 2026, makes meaningful changes to the Assisted Living and Shared Housing Act and the Nursing Home Care Act. As it pertains to hospitals, the changes in this legislation prohibit a facility licensed under these Acts from initiating a termination of residency due to an emergency situation, such as hospitalization, if the resident's physician, the facility manager, and the facility director of nursing state that returning to the facility will not present a danger to the resident. The Illinois Dept. of Public Health (IDPH) makes final determination of whether a termination of residency is involuntary and is provided the authority to order the immediate readmission of the resident. IHA supported this important legislation as a way to reduce occurrences of "hospital dumping."

P.A. 104-0365 – CON Changes to "Non-Clinical Service Area" – This legislation, effective Jan. 1, 2026, makes changes to the Health Facilities Planning Act related to the definition of "non-clinical service area." Per the changes, a non-clinical service area specifically includes components in a patient care area used as education space, consultation and touchdown rooms, and on-call rooms. Conversely, what is not considered a non-clinical service area has been expanded to specifically include areas in a patient care unit, or areas that are required by IDPH licensing standards, such as hallways and other interdependent components of a clinical area. Finally, definitions of a "patient care unit" and "provider" were added to the Act. Through IHA's advocacy efforts, many of the originally proposed changes in the bill were removed which would have resulted in several unintended consequences to hospital infrastructure planning. Discussions with staff of the Health Facilities and Services Review Board on those issues remain ongoing.

Contact Us with questions.