

SB 1559

Creates the Access to Affordable Insulin Act. Sets forth provisions concerning an insulin urgent-need program. Provides that the Department of Public Health shall establish procedures and applications for the insulin urgent-need program. Sets forth provisions concerning insulin urgent-need program exceptions, eligibility, forms, applications, claims and reimbursement, copayments, information sheets, and navigators. Defines terms. Amends the Illinois Insurance Code. In provisions concerning cost sharing in prescription insulin drugs, provides that an insurer that provides coverage for prescription insulin drugs under the terms of a health coverage plan the insurer offers shall limit the total amount that an insured is required to pay for a 30-day supply of covered prescription insulin drugs at an amount not to exceed \$35 (rather than \$100). Effective immediately.

SB 1585

Amends the Telehealth Act. Provides that the definition of “health care professional” includes athletic trainers.

SB 1618 (see companion bill HB 1348)

Amends the Illinois Insurance Code. Provides that no later than July 1, 2024, each health plan and pharmacy benefit

manager operating in this State shall, upon request of a covered individual, his or her health care provider, or an authorized third party on his or her behalf, furnish specified cost, benefit, and coverage data to the covered individual, his or her health care provider, or the third party of his or her choosing and shall ensure that the data is: (1) current no later than one business day after any change is made; (2) provided in real time; and (3) in a format that is easily accessible to the covered individual or, in the case of his or her health care provider, through an electronic health records system. Provides that the format of the request shall use specified industry content and transport standards. Provides that a facsimile is not an acceptable electronic format. Provides that upon request, specified data shall be provided for any drug covered under the covered individual's health plan. Makes other changes. Defines terms.

SB 1636

Amends the Medical Assistance Article of the Illinois Public Aid Code. Provides that for the purpose of removing barriers to the timely treatment of serious mental illnesses, prior authorization mandates and utilization management controls shall not be imposed under the fee-for-service and managed care medical assistance programs on any FDA-approved prescription drug that is recognized by a generally accepted standard medical reference as effective in the treatment of conditions specified in the most recent Diagnostic and Statistical Manual of Mental Disorders published by the American Psychiatric Association. Provides that the following shall be permitted for prescription drugs covered under the amendatory Act: (i) clinically appropriate drug utilization review (DUR) edits, including, but not limited to, drug-to-

drug, drug-age, and drug-dose; (ii) generic drug substitution if a generic drug is available for the prescribed medication in the same dosage and formulation; and (iii) any utilization management control that is necessary for the Department of Healthcare and Family Services to comply with any current consent decrees or federal waivers. Defines “serious mental illness”.

SB 1756

Amends the Accident and Health Article of the Illinois Insurance Code. Provides that an insurer that provides coverage for prescription insulin drugs pursuant to the terms of a health coverage plan the insurer offers shall limit the total amount that an insured is required to pay for a 30-day supply of covered prescription insulin drugs at an amount not to exceed \$35 (rather than \$100). Provides that on January 1 of each year, the limit on the amount that an insured is required to pay for a 30-day supply of a covered prescription insulin drug may increase to an amount that shall not exceed the maximum cost-sharing amount for covered insulin products of a plan subject to regulation under the Medicare prescription drug benefit program (rather than shall increase by a percentage equal to the percentage change from the preceding year in the medical care component of the Consumer Price Index of the Bureau of Labor Statistics of the United States Department of Labor). Effective immediately.

SB 1913

Amends the Medical Assistance Article of the Illinois Public Aid Code. Provides that the Department of Healthcare and Family Services and any managed care plans under contract with the Department for the medical assistance program shall provide for coverage of mental health and substance use disorder treatment or services delivered as behavioral telehealth services; and that the Department and any managed care plans under contract with the Department for the medical assistance program may also provide reimbursement to a behavioral health facility that serves as the originating site at the time a behavioral telehealth service is rendered. Sets forth provisions concerning coverage of mental health and substance use disorder telehealth services. Provides that the Department may adopt rules to implement the provisions.

SB 209 (see companion bill HB 1349)

Provides background information. Appropriates specified amounts to the Department of Public Health for grants, expenses, and administrative costs of programs relating to acquired immunodeficiency syndrome and human immunodeficiency virus; the Getting to Zero-Illinois plan to end the HIV epidemic by 2030; the prevention, screening, and treatment services to address sexually transmitted infection cases; and the PrEP4Illinois Program to provide client navigation for pre-exposure prophylaxis services and medication access. Contains other provisions. Effective July 1, 2023.

SB 2328 (see companion bill HB 2388)

Amends the Medical Assistance Article of the Illinois Public Aid Code. Provides that, on and after July 1, 2023, all non-controlled FDA-approved prescription medications for the treatment of a serious mental illness shall be covered under the medical assistance program for persons otherwise eligible for medical assistance who are diagnosed with a mental disorder that meets criteria established in the Diagnostic and Statistical Manual of Mental Disorders, Fifth Edition (DSM-5) and which is the focus of the treatment provided, including, but not limited to, schizophrenia, schizo-affective disorders, bipolar disorders, or major depression. Exempts medications covered under the amendatory Act from any prior authorization or lifetime restriction limit mandate. Provides that, for any covered medication that contains an opioid antagonist, the prescriber shall check the Illinois Prescription Monitoring Program to determine if the patient is being actively prescribed an opioid. Requires a prescriber of any medication covered under the amendatory Act to be a board-certified psychiatrist or a medical professional with prescribing authority that routinely treats patients with a serious mental illness. Effective July 1, 2023.

SB 2362

Amends the Illinois Insurance Code. Provides that every insurer that amends, delivers, issues, or renews a group or

individual policy of accident and health insurance or a qualified health plan offered through the health insurance marketplace in the State and Medicaid managed care organizations providing coverage for hospital or medical treatment on or after January 1, 2024 shall provide coverage for medically necessary treatment of vision, hearing, and dental disorders or conditions. Sets forth provisions concerning availability of plan information, notification, external review, limitations on benefits for medically necessary services, and medical necessity determinations. Provides that if the Director of Insurance determines that an insurer has violated the provisions, the Director may assess a civil penalty between \$1,000 and \$5,000 for each violation. Sets forth provisions concerning vision, hearing, and dental disorder or condition parity. Makes other changes. Makes conforming changes in the State Employees Group Insurance Act of 1971 and the Medical Assistance Article of the Illinois Public Aid Code. Amends the Criminal Code of 2012. Establishes the offense of criminal violation of health benefit parity.

SB 2584

Amends the Illinois Health Facilities Planning Act. Provides that the State Board shall require each health care facility to submit an annual report of all capital expenditures (previously in excess of 200,000). Provides that if a hospital reports zero capital expenditures, a section detailing the hospital's total purchasing budget that encompasses all goods and services purchased by the hospital in the preceding fiscal year must still be included in the report.