

Spotlight on State: Illinois

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Illinois was one of the first states to protect patients from surprise bills for services they receive unintentionally from out-of-network providers with the [Fair Patient Billing Act](#). More recently, the legislature considered a proposal to create the [Right to Shop Act](#), which would require health insurance carriers to develop a benefit plan with financial incentives for patients who receive services voluntarily from providers that charge below the average in-network rates. The state also enacted laws promoting price transparency in drug pricing, requiring that a pharmacy benefit manager may not prohibit a pharmacy or pharmacist from providing a consumer a more affordable alternative when one is available.

The state explored the creation of an all-payer claims database (APCD) as a result of Executive Order 14-01, signed by former Governor Pat Quinn in 2014. The order established the Governor's Office of Health Innovation and Transformation to direct the state's participation in the Center for Medicare and Medicaid Innovation's State Innovation Model Program. Illinois was awarded up to \$2,088,530 to develop its plan, dubbed the Illinois Alliance for Health Innovation Plan. The plan calls for building the APCD to ultimately collect data on commercial plans, Medicare, Medicaid, and the uninsured. However, the state does not yet have an operational APCD.

Illinois has a strong certificate of need program, which requires a health care facility to obtain a certificate of need in several circumstances, including any transfer of

ownership, sale, consolidation, construction, modification, creation, or conversion of facilities. The state does not otherwise require notice or approval of hospital or provider mergers. Nonetheless, Illinois was the site of two antitrust cases involving hospital mergers: one private antitrust action and one case brought by the FTC. In [FTC v. Advocate Health Care Network](#), the district court granted an injunction in March 2017, and the parties abandoned their merger plans.

In telehealth, Illinois statute provides cost-sharing parity, which prohibits deductibles, co-payments, and coinsurance for telehealth services from exceeding those required for in-person services. The state does not require coverage or reimbursement parity for telehealth services.