

ILHIC Key Bills  
1-20-23

Product Line Life/Health/All	Bill "Nickname"	Bill Number/Link	Bill Description/Action	ILHIC Position	Status
All	Cyber Security Insurance	<a href="#">HB47 Hoffman</a>	Provides that if the entry of an Order of Liquidation occurs on or after January 1, 2023, then the obligations shall not exceed \$500,000 or exceed without any deduction \$50,000 for any unearned premium claim or refund under any one policy. Provides that in no event shall the Fund be obligated to pay an amount in excess of \$500,000 in the aggregate for all first-party and third-party claims under a policy or endorsement providing cybersecurity insurance coverage and arising out of or related to a single insured event, regardless of the number of claims made or number of claimants. Provides that the Illinois Insurance Guaranty Fund shall have the right to appoint or approve and to direct legal counsel and other service providers under any other insurance policies subject to the provisions, regardless of any limitations in	Monitor	Filed

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			<p>the policy. Provides that the Fund may employ or retain such persons as are necessary to provide policy benefits and services. Provides that the Fund may, at its sole discretion and without assumption of any ongoing duty to do so, pay any cybersecurity insurance obligations covered by a policy of an insolvent company on behalf of a high net worth insured.</p>		
All	Paid Family Leave	<a href="#">HB 1006</a> Flowers	<p>Creates the Paid Family Leave Act. Requires private employers with 50 or more employees to provide 6 weeks of paid leave to an employee who takes leave: (1) because of the birth of a child of the employee and in order to care for the child; (2) to care for a newly adopted child under 18 years of age or a newly placed foster child under 18 years of age or a newly adopted or newly placed foster child older than 18 years of age if the child is incapable of self-care because of a mental or physical disability; or (3) to care for a family member with a serious health condition. Provides that paid</p>	Monitor	Filed

			<p>family leave shall be provided irrespective of the employer's leave policies; and shall be provided to an employee who has been employed by the employer for at least one year. Permits employees to voluntarily waive paid family leave. Provides that the Department of Labor may adopt any rules necessary to implement the Act.</p>		
Life	Wage Insurance Act	<a href="#">HB 1014</a> Flowers	<p>Requires the Department of Employment Security to establish a Wage Insurance Program. Provides that an individual is eligible for wage insurance benefits if the individual is a claimant under the Unemployment Insurance Act at the time the individual obtains reemployment and is not employed by the employer from which the individual was last separated. Provides that benefits shall be paid in an amount sufficient to pay the difference between the wage received by the individual at the time of separation and the wages received by the individual from reemployment. Imposes a 0.4% payroll</p>		Filed

			<p>tax on employees beginning January 1, 2024. Provides that claims for wage insurance benefits may be filed beginning June 1, 2024. Contains provisions concerning the recovery of erroneous payments; hearings; civil penalties; unpaid taxes; rules; and other matters. Creates the Wage Insurance Fund as a special fund in the State treasury. Amends the State Finance Act to include the Wage Insurance Fund. Amends the Freedom of Information Act. Exempts from inspection and copying information that is exempt from disclosure under the Wage Insurance Act.</p>		
Health	Wholesale Acquisition Cost	<a href="#">HB 1034</a> Flowers	<p>Provides that the amendatory provisions apply to any manufacturer of a prescription drug that is purchased or reimbursed by specified parties. Provides that a manufacturer of a prescription drug with a wholesale acquisition cost of more than \$40 for a course of therapy shall notify specified parties if the increase in the wholesale acquisition</p>		

			<p>cost of the prescription drug is more than 10%, including the proposed increase and cumulative increase. Provides that the notice of price increase shall be provided in writing at least 60 days prior to the planned date of the increase. Provides that no later than 30 days after notification of a price increase or new prescription drug the manufacturer shall report specified additional information to specified parties. Provides that a manufacturer of a prescription drug shall provide written notice if the manufacturer is introducing a new prescription drug to market at a wholesale acquisition cost that exceeds a specified threshold. Provides that failure to provide notice under the amendatory provisions shall result in a civil penalty of \$10,000 per day for every day after the notification period that the manufacturer fails to report the information. Requires the Department of Public Health to conduct an annual public hearing on the aggregate trends in</p>		
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			<p>prescription drug pricing. Requires the Department to publish on its website a report detailing findings from the public hearing and a summary of details from reports provided under the amendatory provisions, except for information identified as a trade secret or exempted under the Freedom of Information Act. Provides that the amendatory provisions shall not restrict the legal ability of a pharmaceutical manufacturer to change prices as permitted under federal law.</p>		
Health	Defined Cost Sharing Rx Drugs (Rebates)	<a href="#">HB 1054</a> Mayfield	<p>Provides that a group or individual policy of accident and health insurance amended, delivered, issued, or renewed on or after January 1, 2024 that provides coverage for prescription drugs shall require that a covered individual's defined cost sharing for each prescription drug shall be calculated at the point of sale based on a price that is reduced by an amount equal to at least 100% of all rebates received in connection with the dispensation or administration of the</p>	Oppose	Filed

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			<p>prescription drug. Provides that an insurer shall apply any rebate amount in excess of the defined cost sharing amount to the health plan to reduce premiums. Provides that the provisions shall not preclude an insurer from decreasing a covered individual's defined cost sharing by an amount greater than the stated amount at the point of sale.</p>		
Life	Credit information Prohibition	<a href="#">HB 1059</a> Mayfield	<p>Amends the Use of Credit Information in Personal Insurance Act. Provides that, notwithstanding any other law, an insurer authorized to do business in the State may not use the credit information of an applicant or a policyholder as a factor to determine insurance rates for any private passenger automobile insurance policy that is amended, delivered, issued, or renewed on or after the effective date of the amendatory Act. Directs the Department of Insurance to adopt rules to enforce and administer this requirement.</p>	Oppose	Filed

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Life	Felony Underwriting	<a href="#">HB 1068</a> Mayfield	Provides that an insurer or producer authorized to issue policies of insurance in the State may not make a distinction or otherwise discriminate between persons, reject an applicant, cancel a policy, or demand or require a higher rate of premium for reasons based solely upon the basis that an applicant or insured has been convicted of a felony.	Oppose	Filed
Health	Health Care For All	<a href="#">HB 1094</a> Flowers	Creates the Health Care for All Illinois Act. Provides that all individuals residing in this State are covered under the Illinois Health Services Program for health insurance. Sets forth requirements and qualifications of participating health care providers. Sets forth the specific standards for provider reimbursement. Provides that it is unlawful for private health insurers to sell health insurance coverage that duplicates the coverage of the program. Requires the State to establish the Illinois Health Services Trust to provide financing for the program. Sets forth the specific	Oppose	Filed



			<p>requirements for claims billed under the program. Provides that the program shall include funding for long-term care services and mental health services.</p> <p>Creates the Pharmaceutical and Durable Medical Goods Committee to negotiate the prices of pharmaceuticals and durable medical goods with suppliers or manufacturers on an open bid competitive basis. Provides that patients in the program shall have the same rights and privacy as they are entitled to under current State and federal law. Provides that the Commissioner, the Chief Medical Officer, the public State board members, and employees of the program shall be compensated in accordance with the current pay scale for State employees and as deemed professionally appropriate by the General Assembly. Effective July 1, 2023.</p>		
Life	Family Leave Insurance Act	<a href="#">HB 1102</a> Flowers	Creates the Family Leave Insurance Act. Requires the Department of Employment Security	Monitor (opportunity for insurance product NCOIL language)	Filed

			<p>to establish and administer a family leave insurance program. Provides family leave insurance benefits to eligible employees who take unpaid family leave to care for a newborn child, a newly adopted or newly placed foster child, or a family member with a serious health condition. Authorizes family leave of up to 12 weeks during any 24-month period. Authorizes compensation for leave in the amount of 85% of the employee's average weekly wage subject to a maximum of \$881 per week. Contains provisions concerning disqualification from benefits; premium payments; the amount and duration of benefits; the recovery of erroneous payments; hearings; defaulted premium payments; elective coverage; employment protection; coordination of family leave; defined terms; and other matters.</p>		
Health	HMO Referral	<a href="#">HB 1186</a> Croke	Amends the Health Maintenance Organization Act. Provides that the powers of a health maintenance	Support	Filed

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			<p>organization include the voluntary use of a referral system for enrollees to access providers under contract with or employed by the health maintenance organization. Provides that the provisions shall not be construed as requiring the use of a referral system to obtain a certificate of authority. Changes the definition of "health care plan". Defines "referral system". Effective January 1, 2024</p>		
Health	State Based Exchange	<a href="#">HB 1229</a> Jones	<p>Amends the Illinois Health Benefits Exchange Law. Provides that the Department of Insurance has the authority to operate the Illinois Health Benefits Exchange. Provides that the Director of Insurance may require plans in the individual market to be made available for comparison on the exchange, but may not require all plans be purchased exclusively on the exchange. Provides that the Director may require that plans offered on the exchange conform with standardized plan designs. Provides that the Director may apply a monthly assessment</p>	Oppose (Monitor) This is not the Administration's State Based Exchange Bill	Filed

			<p>to each health benefits plan sold in the Illinois Health Benefits Exchange according to specified rates. Provides that the Director shall establish an advisory committee to provide advice to the Director concerning the operation of the exchange and that the advisory committee shall include specified members. Provides that the Department shall also have the authority to coordinate the operations of the exchange with the operations of the State Medicaid program and the FamilyCare Program to determine eligibility for those programs as soon as practicable. Provides that the Department shall adopt rules. Removes provisions concerning small employer health insurance coverage and markets. Makes other changes. Effective January 1, 2024</p>		
All	Plan of Operation Life/Health Insurance Guaranty Fund	<a href="#">HB 1233</a> Jones	Amends the Illinois Life and Health Insurance Guaranty Association Law of the Illinois Insurance Code. Provides that the Illinois Life and Health Insurance Guaranty	Monitor	Filed

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			Association must submit a plan of operation to the Director of Insurance within 200 days.		
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