

FEBRUARY 18, 2022

ILHIC LEGISLATIVE CALL NOTES



*THE ILLINOIS LIFE AND HEALTH INSURANCE COUNCIL
PROMOTES AND ADVOCATES FOR A HEALTHY AND
COMPETITIVE LIFE AND HEALTH INSURANCE INDUSTRY FOR
THE FINANCIAL WELL-BEING OF EMPLOYERS, INDIVIDUALS,
AND FAMILIES IN ILLINOIS.*



1. Antitrust Statement

- a. ILHIC committed to conducting all of our activities in compliance with federal and state antitrust laws. And then just add if at any time during the call the discussion should venture into matters that might conflict with antitrust laws, please feel free to speak up and we will stop the discussion and move forward in the agenda.

2. Session Update

- a. This week has been extremely with numerous committee hearings. Because everything is so condensed, it has been difficult to testify for some of our important bills. Some Sponsors are taking very little testimony and moving all the bills to 2nd reading in order to avoid deadline, but mandating the bills come back to committee with amendments. So, we expect many bills to come back to committee with the Amendment and we are now working to neutral on the bills being held. The House only has two weeks before their 3rd reading deadline in the House. Additionally, we are now tracking our Senate bills on the floor because next week is yet another deadline week of 3rd reading deadline for the senate.

3. House Insurance Committee

i. **HB 4263 No Discrimination Vaccine**

1. OPPOSE
2. ILHIC has concerns regarding federal preemption. Specifically, we are unsure that the State could supersede what is allowed under federal law (in that employers/insurers can vary premiums on the basis of certain wellness factors, including vaccination status and tobacco use as an example).
3. Was Not Called

ii. **HB 4335 Coverage Mandate Vaginal Estrogen**

1. NEUTRAL with Amendment
2. ILHIC is NEUTRAL with House Amendment #1, which moves the effective date of the bill to 1-1-2024 to simplify policy filings as well as establish that insurance companies shall cover at least one vaginal estrogen product (or therapeutic equivalents) with no cost sharing. This language is similar to the hormonal contraceptives mandate language passed in Illinois.
3. Passed out of Committee

iii. **HB 4337 Coverage Mandate Domestic Violence**

1. OPPOSE
2. Insurance companies do not factor in the source of the injury when determining medical necessity. Meaning, insurance companies do not look at how the patient received the injury.
3. Both Sponsors carrying domestic violence bills will resume discussions in the summer with ILHIC and ISMS.
4. Was Not Called

iv. **HB 4349 Coverage Mandate Congenital Anomaly**

1. NEUTRAL with Amendment
2. The amendment added medical necessity and prohibited cosmetic surgery from the mandate.
3. Passed on Leave

v. **HB 4408 Coverage Mandate Naloxone**

1. NEUTRAL with Amendment
2. ILHIC is NEUTRAL with House Amendment #1, which changes the effective date to 1-1-2024, and provides a carve out for HDHPs with HSAs.
3. Passed on Leave

vi. **HB 4413 Parent Dependent**

1. OPPOSE
2. Dependent coverage for Marketplace plans are defined in Federal law. To require a State expansion of that federal definition might conflict with said federal law. Dependents are used in Marketplace tax credit calculation, and dependent parents may be included only

if they are their tax dependents. The Sponsor is meeting with ILHIC on Feb 28th to go over these concerns.

3. Was Not Called

vii. HB 4483 Coverage Mandate 3 Visits

1. OPPOSED

2. Mandates 3 primary care and 3 behavioral health visits with no cost sharing. ILHIC discussed our concerns with the Sponsor and she is committed to continuing discussions.

3. Not being called

viii. HB 4493 Annuity Nonforfeiture Rate

1. SUPPORT

2. This language changes the Annuity Nonforfeiture Rate from 1% to .15%. The bill was not called because there was an amendment requested relating to the uninsured vehicle property damage. Additionally, the bill was merged into the DOI Fee bill as well, because the fee bill in the Senate did not meet the Committee Deadline.

3. This bill was combined with the DOI Fee bill because it didn't move out of the Senate.

4. Bill passed out of Committee

ix. HB 4941 Fee Timeline Change

1. OPPOSE

2. The moved to 2nd to try and continue working on the advance notification and method of communication for any fee schedule changes.

3. Passed out of Committee (Will be held on 2nd and brought back for an amendment. ILHIC will continue discussions with the Sponsor and the Audiologists/Pathologists.)

x. HB 4979 Funeral Burial

1. NEUTRAL

2. Passed out of Committee (Will be held on 2nd and brought back for an amendment)

xi. HB 5142 Easy Enrollment

1. SUPPORT

2. Passed out of Committee (Will be held on 2nd and brought back for an amendment. The Amendment is changing a technical error for the Department of Revenue and moves the program from the Department of Insurance to the Department of Healthcare and Family Services.)

xii. HB 5254 Coverage Mandate Hormone Therapy

1. NEUTRAL with forthcoming amendment

2. The amendment will add medical necessity as well as an effective date push back.

3. Passed out of Committee

xiii. HB 5305 Coverage Mandate Colonoscopy

1. OPPOSE
2. Mandates medically necessary colonoscopies for persons aged 39 to 75. The Sponsor has committed to working with stakeholders. ILHIC has reached out with alternative language and will continue to work with the Sponsor to achieve neutrality.
3. Passed out of Committee (Will be held on 2nd and brought back for an amendment)

xiv. HB 5318 Coverage Mandate Cancer Screening

1. OPPOSE
2. Mandates screening and follow up care for prostate cancer. ILHIC provided suggestions to the sponsor suggesting medically necessary follow up care, an effective date push back, as well as an HDHP carve out for HSA's. However, we received no response from the Sponsor before the Committee was held. We will continue to work with the Sponsor and his advocate coalition in order to provide alternative language.
3. Passed on Partisan Leave (Will not be held on 2nd Reading. ILHIC is working with the bill to amend the bill in the Senate.)

xv. HB 5332 Coverage Mandate Glucose Monitors

1. OPPOSE
2. Mandated coverage for continuous glucose monitors.
3. Was Not Called

xvi. HB 5334 Coverage Mandate Genetic Testing Cancer

1. NEUTRAL
2. Mandates coverage genetic testing of the BRCA1 and BRCA2 genes to detect an increased risk for breast and ovarian cancer if recommended by a health care provider in accordance with the United States Preventive Services Task Force's recommendations for testing.
3. Passed out of Committee

xvii. HB 5383 Coverage Mandate Hippotherapy

1. OPPOSE
2. Mandates coverage for therapeutic riding/ hippotherapy.
3. Was Not Called

xviii. HB 5399 Coverage Mandate Proton Therapy

1. OPPOSE
2. cover a medically necessary hypo fractionated proton therapy protocol to deliver a biological effective dose by paying the same aggregate amount as would be paid for the delivery of the same biological effective dose with a standard radiation therapy protocol delivered with intensity modulated radiation therapy for the same indication if specified conditions are satisfied.

3. The Sponsor wishes to continue conversations, but does not wish to call the bill.
4. Was Not Called

xix. HB 5454 Coverage Mandate Covid Testing

1. OPPOSE
2. Mandates coverage of testing and requires testing sites (no clarification between free testing sites or not) to provide insurance information. ILHIC testified that we do not wish to codify federal law in our state law in addition to concerns that there may be an unintended effect of consumers getting billed due to surveillance workplace testing at free sites.
3. Passed out of Committee (Will be held on 2nd and brought back for an amendment. ILHIC and the Sponsor both committed to continuing conversation regarding the bill.)

xx. HB 5514 Coverage Mandate Hearing Aids

1. OPPOSE
2. Expands the current coverage mandate for hearing aids by removing the age of 18, allowing any age to receive coverage for hearing instruments.
3. Was Not Called

xxi. HB 5534 Business Transfer Act

1. OPPOSE
2. Passed out of Committee (Will be held on 2nd. The Sponsor indicated that he will be holding the bill and will start discussions this summer.)

xxii. HB 5539 Health Care Cost Info

1. OPPOSE
2. This bill is a rewrite of a right to shop bill in Illinois in 2018, and requires various duplicative cost information as well as a extensive interactive cost website, similar to right to shop legislation.
3. Was Not Called

xxiii. HB 5585 Coverage Mandate Home Health Care

1. NEUTRAL
2. Mandates coverage of medically necessary home health care services.
3. Passed out of Committee

4. House Income Tax

i. HB 4214 Income Tax Employers

- ii. Creates an income tax credit for hospitality employers, for taxable years that begin on or after January 1, 2022 and begin prior to January 1, 2023, in an amount equal to 100% of the amount paid by the taxpayer to provide vision and dental benefits, life insurance, and short term disability coverage for its employees during the taxable year.
 1. Monitor

2. Bill did not move

5. House Human Services

i. **HB 5172 Contraceptive Repeal**

1. NO POSITION
2. Removes the assessment and consultation of patients and dispensing of hormonal contraceptives from the “practice of pharmacy.” Removes the mandate covering hormonal birth control 356z.43

6. House Healthcare Licenses

i. **HB 3268 Patient Billing**

1. Monitor
2. Amends the Fair Patient Billing Act to prohibit a hospital from aggressively pursue debt collection for non-payment of a hospital bill against a patient with an annual household income of \$51,000 or less and further provides that a hospital whenever possible and after reviewing the patient eligibility, shall charge as much as possible of the patient's hospital bill to insurers. ** ONLY EFFECTS THE PUBLIC AID CODE
3. This bill was not called

ii. **HB 4844 Vision Care Regulation Act**

1. OPPOSE
2. Creates the Vision Care Plan Regulation Act to set forth certain contractual requirements with eye care providers and disclosures and coverage requirements for enrollees.
3. This bill was not called

iii. **HB 5327 All Payer Database Act**

1. OPPOSE
2. Provides that the Department of Insurance shall establish an All-Payer Claims database for sharing limited use health care data. DOI shall determine criteria for plans to submit. The database will serve as a resource for insurers, providers, consumers, and state agencies to continuously review utilization, expenditures, and performance. DOI shall make information regarding healthcare costs public on its Website. Requires plans to submit health insurance price information annually.
3. This bill was not called

iv. **HB 4430 HIV Pharmacists**

1. Monitor
2. Allows Pharmacists to provide PrEP services and be reimbursed at 85%
3. An amendment will be forthcoming address concerns from both agencies and stakeholders. ILHIC will monitor the amendment.
4. Passed out of committee. Amendment is forthcoming.

7. House Cybersecurity, Data Analytics Committee

i. HB 3453 Geolocation Privacy Act

1. Monitor
2. Creates the Geolocation Privacy Protection Act to require a private entity that owns, operates, or controls a location-based application on a user's device from disclosing geolocation information from a location-based application to a third party unless the private entity first receives the user's affirmative express consent after providing a specified notice to the user.

8. House Prescription Drug Affordability and Accessibility

i. HB 3630 PBMs

1. OPPOSE
2. Requires insurers to replace a brand name drug with a new generic equivalent on the formulary once it becomes available in the market or move the brand name drug to the lowest cost tier. In provisions concerning a contract between a health insurer and a pharmacy benefit manager, provides that a pharmacy benefit manager must update and publish maximum allowable cost pricing information according to specified requirements, must provide a reasonable administrative appeal procedure to allow pharmacies to challenge maximum allowable costs, and must comply with specified requirements if an appeal is denied. The legislation also sets forth contracting requirements for PBMs, including fiduciary responsibilities. Identical to [SB 2008 \(Koehler\)](#).
3. Leader Harris does not intend to move the bill this session. Instead, he is focusing on 340B.

ii. HB 4595 340B

1. OPPOSE
2. Prohibits PBMs from various contract language regarding 340b drug pricing entities. Prohibitions include: cannot reimburse at a lower rate than non-340B entities; impose fee, chargeback, or rate adjustments that are not imposed by the pharmacy for non-340B covered entities; the interference of individual choice to receive a prescription drug from a 340B entity; excluding a 340b entity from a pharmacy network; requires a billing modifier to indicate a drug claim is for drugs purchased under 340B drug discount program; prohibits discrimination against 340b covered entities.
3. Stakeholders are still working on agreed to language. The crux of the issue is still the use of modifiers. The argument is that modifiers are used with Medicaid, why is it such an administrative burden to utilize modifiers in the commercial space? There are continued conversations in order to come to an agreement. The leader did call the bill to avoid deadlines. However, he does intend to hold the bill on second in order to come to an agreement.
4. Bill passed out of Committee

9. 7. Labor and Commerce

i. **HB 3898 Healthy Workplace Act**

1. Monitor
2. Creates the Healthy Workplace Act to require employers to provide a minimum of 40 hours of paid sick leave during a 12-month period for certain purposes. Employees cannot waive their right to paid leave except in cases where the benefits are collectively bargained.
3. Bill passed out of Committee

ii. **HB 5029 Family Medical Leave Act**

1. Monitor
2. Creates the Family and Medical Leave Insurance Program Act. Requires the Department of Employment Security to establish and administer a Family Leave Insurance Program that provides family leave insurance benefits to eligible employees. Sets forth eligibility requirements for benefits under the Act. 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. Amends the State Finance Act. Creates the Family Leave Insurance Account Fund. Provides phase-in periods for the collection of money and making of claims for benefits under the Act. Effective January 1, 2023.
3. Bill did not move from Committee

iii. **HB 5594 Family Leave Insurance Act**

1. Monitor
2. Requires the Department of Employment Security 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. Amends the State Finance Act
3. Bill did not move from Committee

10. House Healthcare Licensing

i. **HB 4430 Pharmacy HIV**

1. Monitor
2. Amends the Pharmacy Practice Act. Expands the pharmacist's scope of practice to include the initiation, dispensing, administration of drugs, laboratory testing, assessments, referrals, and consultations for PrEP treatment. Language states that pharmacists shall be covered and reimbursed for these services ordered and administered by a pharmacist at least 85% of the rate that physicians are reimbursed for Medicaid and other payers.
3. Passed out of Committee. An amendment is forthcoming to address some stakeholder concerns. ILHIC will watch this bill closely to ensure the "other payer language" listed in the public aid code does not get reference in the Insurance Code as well.

11. House Police and Fire

i. HB 4480 Coverage Mandate Police Officers

1. NEUTRAL with forthcoming amendment
2. Mandates coverage with no cost sharing for mental health wellness checks for probationary and permanent police officers.
3. This bill stayed in Subcommittee. The Sponsor didn't seem interested in moving the bill at this time. If she does, she must address the working groups within the Police and Fire Committee in order for them to vote to move it. Since this election year has crime at the forefront of issues, there is a couple extra steps to get a bill moving in this committee.

12. House Executive

i. HB 5300 Insulin Program

1. OPPOSE
2. Allows pharmacists to dispense insulin if a patient can attest that they are in dire need of the drug. After dispensing the drug, the pharmacist notifies the provider. Mandates that drug distributors can reimburse pharmacies with refills of insulin or the amount that covers the pharmacies acquisition cost. Allows a drug manufacturer to send insulin directly to the patient. Mandates 30-day coverage of insulin not to exceed 35 dollars (changed from 100 dollars).
3. There is a rumor that this language will be filed on a shell. We are keeping a close eye on where this legislation goes. However, this legislation was not called in committee.

13. Senate Insurance

i. SB 3819 Coverage Mandate Palliative Care

1. NEUTRAL with Amendment
2. SA #1 moves the effective date to 1-1-24 as well as linked palliative care and serious illness to the Pediatric Palliative Care Act.
3. Bill passed out of Committee

14. Looking Toward Next Week

- a. With the majority of bills being held on 2nd in order to come back to Committee, we are looking at another extremely busy week in order to work bills to neutrality. We expect heavy floor action from the Senate and a moderate to heavy Committee schedule in the House. We will keep members informed of issues that come up. As always, please reach out to us if there are any questions.
- b. Also, I do want to note that I make a Bills in Committee Document that I post to the member portion of the Website every Monday.

15. Remaining Questions/Issues

16. Important Deadlines Approaching

- a. **February 25th:** **3rd Reading Deadline Senate**
- b. **March 4th:** **3rd Reading Deadline House**