



## 1. Legislative Overview

- a. House Committee deadline is today. Hundreds of bills were heard in Committees this week. Many bills were passed out of committee and “held on second.” Meaning, the bill will not be heard for a floor vote until an amendment is heard either on the floor or in Committee. We expect another heavy negotiation week for next week. Many of our tracked bills have moved and are held for amendments, leaving much more work to finish before the third reading deadlines.

## 2. Bills in Committee

### a. House Insurance

#### i. HB5493- DOI Admin Bill

1. ILHIC had no opposition to the bill after HCA#1.
  - a. Passed on leave.

#### ii. HB4633 School Based Health Center

1. ILHIC is opposed to the underlying bill. However, we are working with the Sponsor to understand her intent. We met with the health facility in the Sponsor’s district and the health center was upset for the reimbursement rate. We are unsure how we solve for this and are working to express concerns regarding unintended consequences. The Sponsor did agree to hold the bill on Second for an amendment.
  - a. Roll Call vote of 11-3.

#### iii. HB5258- Dependent Coverage

1. ILHIC had a conflict of law question. However, the Department determined that the amendment alleviated the conflict.
  - a. Passed on leave.

#### iv. HB 4789 Dental Preauthorization

1. ILHIC is neutral with the HA#1.
  - a. Passed on leave.

**v. HB 5295 Menopause Hormone Therapy**

1. ILHIC has no position on the mandate bill.
  - a. Passed on leave.

**vi. HB4055 Emergency Prior Authorization (Hemophilia)**

1. ILHIC is neutral on the Amendment.
  - a. Passed on leave.

**b. House Healthcare Availability and Access**

**i. HB4548 PBM Bill**

1. ILHIC is opposed to the bill. Jones expressed that he has been working with the industry, as well as its support from JP Pritzker and The Department of Insurance. He requested a subject matter hearing on the subject. He stated in his testimony that this bill will assist in helping alleviate pharmacy desserts.
2. Representative Haas asked why Medicaid and ERISA plans were removed. Andi suggested that they wanted to clarify these pieces. She also requested a subject matter hearing.
3. Adam Flores mentioned that this is a consumer-focused bill. He said that spread pricing will lower drug costs. He also said the reimbursement level was implemented in West Virginia and Delaware and it lowered costs to patients. He also said the bill does not restrict mail order.
4. Jones mentioned that he was unsure whether there will be another amendment on the bill.
5. Representative Bunting asked about the 10-dollar dispensing fee for pharmacists and citizens. The Department said that there were savings in West Virginia, and there will be savings here.
6. David Root with Prime Therapeutics provided the committee with PBM 101 as well as how they were regulated. Manley asked how to respond to independent pharmacies on closing due to reimbursement rates.
7. Garth Reynolds from the Independent Pharmacists expressed that a PBM is a credit card processor. Garth mentioned that PBMs are a pay to play system. He mentioned that the PBM's does not want the public to know what they do. Garth is offended by the 10-dollar reimbursement.
8. Jordyn Ryan testified on behalf of the Illinois Chamber. We are concerned about costs for our businesses (large and small).
  - a. Roll Call Vote 8-2.

**ii. HB 5355 Non-Opioid Alternative Act**

1. ILHIC is opposed. We submitted our concerns but did not hear back from the Sponsor. The Sponsor mentioned that she will bring the amendment back to the Committee. She would like to pass the bill and hold it on second.

- a. Passed with leave.

**c. House Jud-Civ Committee**

**i. HB 4093 Protect Health Data Act**

1. Ann Williams presented the bill and stated that the bill comes from the Dobbs working group. She is committed to moving the bill out of committee and holding the bill on second and bringing back an amendment to the committee. She is committed to working on these issues with all the stakeholders.
2. Much of the conversation of witnesses centered around the private right of action. Representatives had questions around the private right of action and the AG's enforcement authority. The ACLU mentioned that they would like to see the private right of action remain because it gives the consumer another option and the AG does not have the staff resources to handle this.
3. Representatives mentioned that the stakeholders should look at Washington State and pull the private right of action. Other stakeholders, democratic and republican alike, mentioned that the definitions are too broad.
4. Tech Net testified that the definition of health data will have many unintended consequences and effects outside of health collections, for example, purchasing toilet paper or sneakers. This bill would burden disclosures for simple purchases such as deodorant and pain medication.
5. The Sponsor stated that they are going after apps like the Good Rx and Better Help, who collect data but data mine and share that data. However, she did mention that there are a lot of things to address within the bill so there is not unintended consequences.

- a. Passed on partisan leave.

**d. Public Health Committee**

**i. HB 4256 Health Care Funding Act**

1. ILHIC opposes this bill for various administrative and procurement reasons. At least 4 public health departments oppose this bill.

- a. The bill was not called.

**e. Mental Health and Addiction Committee**

**i. HB 4475 Behavioral Health**

1. ILHIC opposes the bill. There has been much discussion and work on this bill. However, we oppose placing reimbursement rates within the bill, which will create a ceiling rather than a floor.

2. LaPointe brought the bill, explaining that consumers can not use the insurance they have. This bill is intended to use parity between reimbursement rates between mental health providers and other providers.
3. We anticipate another amendment that has smaller changes.
4. Heather from Thresholds testified, saying that this bill strengthens network adequacy. The bill is based on Milliman Reports looking at claims for 5 years for mental health claims and physical health claims, where out of network claims were much higher than in network claims. This bill would increase the reimbursement (which is adjusted to inflation). It would streamline credentialing to become in-network.
5. A clinician who owned Mosaic Mental Health in Chicago. She advocates to ensure quality care for people who don't have to pay out of pocket when they are already paying for health insurance. Another clinician spoke about her troubles of being credentialed at the PPO level but not the HMO level.
6. Laura Minzer testified to express thanks for working with us on this bill. The Committee amendment is mostly at an agreement. One of the areas that we cannot get to an agreement on is the inclusion of reimbursement rates in the statute.
7. Howder stated that the strategy is for insurance companies to not contract to anyone. Laura explained that we are heavily regulated by the Department and there are exceptions if there are no providers available.
  - a. The bill passed on leave.

### **3. Important Items**

#### **a. Meeting with Speaker Welch on HB 5395**

##### **i. Laura**

#### **b. HB 5395 Governor's Health Care Initiative**

- i. We have not seen any amendment language to date. We do expect an amendment and the bill is held for an amendment to come back to committee. The deadline for house bills on third reading is April 19<sup>th</sup>. As mentioned before, there is a high likelihood that this will pass out of the House. However, we have more leverage in the Senate to compel more meaningful negotiations. We are preparing questions for Leader Keicher on the floor since he was unable to have the opportunity to ask them in the appropriate committee (insurance).

### **4. Next Week**

- a. The House cancelled session for today. The Senate and House are in session next week. Today is the deadline for amendments for the Senate and next Friday is the Senate's 3<sup>rd</sup> Reading Deadline. Next Friday is the Senate 3<sup>rd</sup> Reading Deadline.
- b. Senate Insurance is scheduled for 5:30pm on 4/9. The State Based Exchange DOI bill is posted in addition to a subject matter hearing on SB2858, which concerns the health benefit exchange

and direct enrollment technology. The bill does not affect the Council. House Insurance is scheduled for 3pm on April 10, and includes amendments that are agreed to by stakeholders.

## **5. Important Dates**

- i. House Committee Deadline- April 5<sup>th</sup>
- ii. Senate 3<sup>rd</sup> Reading Deadline- April 12<sup>th</sup>
- iii. House Bills 3<sup>rd</sup> Reading- April 19<sup>th</sup>
- iv. House and Senate Committee Deadline- May 3<sup>rd</sup>
- v. House 3<sup>rd</sup> Reading Senate Bills- May 17<sup>th</sup>
- vi. Adjournment- May 24<sup>th</sup>
- vii. Possible contingent session (May 25<sup>th</sup>- May 31<sup>st</sup>)