



Rep. Deb Conroy

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10000HB5769ham002

LRB100 18687 SMS 40913 a

1 AMENDMENT TO HOUSE BILL 5769

2 AMENDMENT NO. _____. Amend House Bill 5769 by replacing
3 everything after the enacting clause with the following:

4 "Section 5. The Illinois Insurance Code is amended by
5 adding Section 364.3 as follows:

6 (215 ILCS 5/364.3 new)

7 Sec. 364.3. Insurer uniform electronic prior authorization
8 form; prescription benefits.

9 (a) As used in this Section, "prescribing provider"
10 includes a provider authorized to write a prescription, as
11 described in subsection (e) of Section 3 of the Pharmacy
12 Practice Act, to treat a medical condition of an insured.

13 (b) Notwithstanding any other provision of law to the
14 contrary, on and after July 1, 2020, an insurer that provides
15 prescription drug benefits shall utilize and accept the uniform
16 electronic prior authorization form developed pursuant to

1 subsection (c) when requiring prior authorization for
2 prescription drug benefits.

3 (c) On or before July 1, 2019, the Department shall develop
4 a uniform electronic prior authorization form that shall be
5 used by commercial insurers. Notwithstanding any other
6 provision of law to the contrary, on and after July 1, 2020,
7 every prescribing provider must use the uniform electronic
8 prior authorization form to request prior authorization for
9 coverage of prescription drug benefits and every insurer shall
10 accept the uniform electronic prior authorization form as
11 sufficient to request prior authorization for prescription
12 drug benefits.

13 (d) The Department shall develop the uniform electronic
14 prior authorization form with input from interested parties,
15 including, but not limited to, the following individuals
16 appointed by the Director: 2 psychiatrists recommended by a
17 State organization that represents psychiatrists, 2 physicians
18 recommended by a State organization that represents
19 physicians, 2 family physicians recommended by a State
20 organization that represents family physicians, 2
21 pediatricians recommended by a State organization that
22 represents pediatricians, and 2 representatives of the
23 association that represents commercial insurers, from at least
24 one public meeting.

25 (e) The Department, in development of the uniform
26 electronic prior authorization form, shall take into

1 consideration the following:

2 (1) existing prior authorization forms established by
3 the federal Centers for Medicare and Medicaid Services and
4 the Department; and

5 (2) national standards pertaining to electronic prior
6 authorization.

7 (f) If, upon receipt of a completed and accurate electronic
8 prior authorization request from a prescribing provider
9 pursuant to the submission of a uniform electronic prior
10 authorization form, an insurer fails to use or accept the
11 uniform electronic prior authorization form or fails to respond
12 within 24 hours (if the patient has urgent medication needs) or
13 within 72 hours (if the patient has regular medication needs),
14 then the prior authorization request shall be deemed to have
15 been granted.

16 Section 10. The Illinois Public Aid Code is amended by
17 adding Section 5-5.12b as follows:

18 (305 ILCS 5/5-5.12b new)

19 Sec. 5-5.12b. Managed care organization uniform electronic
20 prior authorization form; prescription benefits.

21 (a) As used in this Section, "prescribing provider"
22 includes a provider authorized to write a prescription, as
23 described in subsection (e) of Section 3 of the Pharmacy
24 Practice Act, to treat a medical condition of an insured.

1 (b) Notwithstanding any other provision of law to the
2 contrary, on and after July 1, 2020, a managed care
3 organization that provides prescription drug benefits shall
4 utilize and accept the uniform electronic prior authorization
5 form developed pursuant to subsection (c) when requiring prior
6 authorization for prescription drug benefits.

7 (c) On or before July 1, 2019, the Department of Healthcare
8 and Family Services shall develop a uniform electronic prior
9 authorization form that shall be used by managed care
10 organizations. Notwithstanding any other provision of law to
11 the contrary, on and after July 1, 2020, every prescribing
12 provider must use the uniform electronic prior authorization
13 form to request prior authorization for coverage of
14 prescription drug benefits, and every managed care
15 organization shall accept the uniform electronic prior
16 authorization form as sufficient to request prior
17 authorization for prescription drug benefits.

18 (d) The Department of Healthcare and Family Services shall
19 develop the uniform electronic prior authorization form with
20 input from interested parties, including, but not limited to,
21 the following individuals appointed by the Director of
22 Healthcare and Family Services: 2 psychiatrists recommended by
23 a State organization that represents psychiatrists, 2
24 physicians recommended by a State organization that represents
25 physicians, 2 family physicians recommended by a State
26 organization that represents family physicians, 2

1 pediatricians recommended by a State organization that
2 represents pediatricians, and 2 representatives of the
3 association that represents managed care organizations, from
4 at least one public meeting.

5 (e) The Department of Healthcare and Family Services, in
6 development of the uniform electronic prior authorization
7 form, shall take into consideration the following:

8 (1) existing prior authorization forms established by
9 the federal Centers for Medicare and Medicaid Services and
10 the Department of Healthcare and Family Services; and

11 (2) national standards pertaining to electronic prior
12 authorization.

13 (f) If, upon receipt of a completed and accurate electronic
14 prior authorization request from a prescribing provider
15 pursuant to the submission of a uniform electronic prior
16 authorization form, a managed care organization fails to use or
17 accept the uniform electronic prior authorization form or fails
18 to respond within 24 hours, then the prior authorization
19 request shall be deemed to have been granted."