**Section 697.160 HIV Testing for Insurance Purposes**

a) Health maintenance organizations, insurance companies, fraternal benefit societies, health services corporations and other insurers subject to regulation under the Illinois Insurance Code are not required to comply with Sections 697.110, 697.120, 697.130 and 697.140 in establishing eligibility and coverage requirements that include mandatory HIV tests. This exemption also extends to the physician or other health care professional that performs the tests.

b) Health maintenance organizations, insurance companies, fraternal benefit societies, health services corporations and other insurers subject to the Illinois Insurance Code that require *any insured patient or applicant for new or continued insurance or coverage to be tested for* HIV *shall*:

1) *Give the patient or applicant prior written notice of such requirement;*

2) *Proceed with such testing only upon the written authorization of the applicant or patient; and*

3) *Keep the results of such testing confidential*.

c) *Notice of an adverse underwriting or coverage decision may be given to any appropriately interested party, but the insurer may only disclose the test result itself to a physician designated by the applicant or patient, and any such disclosure shall be in a manner that assures confidentiality*. (Section 3(c) of the Medical Patient Rights Act)

(Source: Amended at 36 Ill. Reg. 7613, effective May 4, 2012)