



Rep. Yehiel M. Kalish

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1 AMENDMENT TO HOUSE BILL 122

2 AMENDMENT NO. \_\_\_\_\_. Amend House Bill 122 by replacing  
3 everything after the enacting clause with the following:

4 "Section 5. The Substance Use Disorder Act is amended by  
5 adding Article 7 as follows:

6 (20 ILCS 301/Art. 7 heading new)

7 ARTICLE 7. BEHAVIORAL HEALTH ACCESS TO CARE OMBUDSMAN

8 (20 ILCS 301/7-5 new)

9 Sec. 7-5. Definitions. As used in this Article:

10 (a) "Health care provider" or "provider" means:

11 (1) a physician licensed under the Medical Practice Act  
12 of 1987 to practice medicine in all of its branches; a  
13 clinical psychologist licensed under the Clinical  
14 Psychologist Licensing Act;

15 (2) a mental health professional who is licensed or

1 registered to provide mental health services by the  
2 Department of Financial and Professional Regulation;

3 (3) any other health care provider regulated by the  
4 State when engaged in assisting consumers with behavioral  
5 health care access and coverage issues; or

6 (4) a health care facility licensed or regulated by the  
7 State, when the facility is engaged in assisting consumers  
8 with behavioral health care access and coverage issues,  
9 excluding any facility that is listed under subsection (b)  
10 of Section 4.04 of the Illinois Act on the Aging.

11 (b) "Office" means the Office of the Ombudsman for  
12 Behavioral Health Access to Care created in Section 7-10.

13 (c) "Ombudsman" means the individual designated under  
14 Section 7-10 as the Ombudsman for Behavioral Health Access to  
15 Care.

16 (20 ILCS 301/7-10 new)

17 Sec. 7-10. Office of the Ombudsman for Behavioral Health  
18 Access to Care; appointment; duties.

19 (a) There is created in the Department of Human Services  
20 the Office of the Ombudsman for Behavioral Health Access to  
21 Care for the purpose of assisting residents of Illinois in  
22 accessing behavioral health care.

23 (b) The Office and the Department shall operate in  
24 accordance with a memorandum of understanding between the 2  
25 entities. The memorandum of understanding shall contain, at a

1 minimum:

2 (1) a requirement that the Office has its own personnel  
3 rules;

4 (2) a requirement that the Ombudsman has independent  
5 hiring and termination authority over Office employees;

6 (3) a requirement that the Office must follow State  
7 fiscal rules;

8 (4) a requirement that the Department of Human  
9 Services' Division of Mental Health shall offer the Office  
10 limited support with respect to:

11 (A) personnel matters;

12 (B) recruitment;

13 (C) payroll;

14 (D) benefits;

15 (E) budget submission, as needed;

16 (F) accounting;

17 (G) office space, facilities, and technical  
18 support; and

19 (H) other provisions regarding administrative  
20 support that will help maintain the independence of the  
21 Office.

22 (c) The Office shall operate with full independence and has  
23 complete autonomy, control, and authority over operations,  
24 budget, and personnel decisions related to the Office and the  
25 Ombudsman.

26 (d) By November 1, 2019, the Governor shall designate an

1 Ombudsman for Behavioral Health Access to Care, who shall serve  
2 as Director of the Office. The Ombudsman shall serve as a  
3 neutral party to help consumers, including consumers who are  
4 uninsured or have public or private health benefit coverage,  
5 including coverage that is not subject to State regulation, and  
6 health care providers, acting on their own behalf, on behalf of  
7 a consumer with the consumer's written permission, or on behalf  
8 of a group of health care providers, navigate and resolve  
9 issues related to consumer access to behavioral health care,  
10 including care for mental health conditions and substance use  
11 disorders.

12 (e) The Ombudsman shall:

13 (1) interact with consumers and health care providers  
14 with concerns or complaints to help the consumers and  
15 providers resolve behavioral health care access and  
16 coverage issues;

17 (2) identify, track, and report to the appropriate  
18 regulatory or oversight agency concerns, complaints, and  
19 potential violations of State or federal rules,  
20 regulations, or statutes concerning the availability of,  
21 and terms and conditions of, benefits for mental health  
22 conditions or substance use disorders, including potential  
23 violations related to quantitative and non-quantitative  
24 treatment limitations;

25 (3) receive and assist consumers and providers in  
26 reporting concerns and filing complaints with appropriate

1 regulatory or oversight agencies relating to inappropriate  
2 care or involuntary admissions or judicial admissions  
3 under the Mental Health and Developmental Disabilities  
4 Code;

5 (4) provide appropriate information to help consumers  
6 obtain behavioral health care;

7 (5) develop appropriate points of contact for  
8 referrals to other State and federal agencies; and

9 (6) provide appropriate information to help consumers  
10 or health care providers file appeals or complaints with  
11 the appropriate entities, including insurers and other  
12 State and federal agencies.

13 (f) The Ombudsman, employees of the Office, and any persons  
14 acting on behalf of the Office shall comply with all State and  
15 federal confidentiality laws that govern the Department of  
16 Human Services with respect to the treatment of confidential  
17 information or records and the disclosure of such information  
18 and records.

19 (g) In the performance of his or her duties, the Ombudsman  
20 shall act independently of the Department of Human Services'  
21 Division of Mental Health. Any recommendations made or  
22 positions taken by the Ombudsman do not reflect those of the  
23 Department of Human Services or the Division of Mental Health.

24 (20 ILCS 301/7-15 new)

25 Sec. 7-15. Liaisons. The Director of Insurance and the

1 Secretary of Human Services shall each appoint a liaison to the  
2 Ombudsman to receive reports of concerns, complaints, and  
3 potential violations described in paragraph (2) of subsection  
4 (e) of Section 7-10 from the Ombudsman, consumers, or health  
5 care providers.

6 (20 ILCS 301/7-20 new)

7 Sec. 7-20. Qualified immunity. The Ombudsman and employees  
8 or persons acting on behalf of the Office are immune from suit  
9 and liability, either personally or in their official  
10 capacities, for any claim for damage to or loss of property, or  
11 for personal injury or other civil liability caused by or  
12 arising out of any actual or alleged act, error, or omission  
13 that occurred within the scope of employment, duties, or  
14 responsibilities pertaining to the Office, including issuing  
15 reports or recommendations; except that nothing in this Section  
16 protects those persons from suit or liability for damage, loss,  
17 injury, or liability caused by the intentional or willful and  
18 wanton misconduct of the person.

19 (20 ILCS 301/7-25 new)

20 Sec. 7-25. Annual report.

21 (a) On or before September 1, 2021, and on or before  
22 September 1 of each year thereafter, the Ombudsman shall  
23 prepare and submit, in accordance with subsection (b), a  
24 written report that includes information from the preceding

1 fiscal year concerning actions taken by the Ombudsman relating  
2 to the duties of the Office set forth in Section 7-10.

3 (b) The Ombudsman shall submit the report required by this  
4 Section to the Governor, the Secretary of Human Services, the  
5 Director of Insurance, the Senate Human Services Committee or  
6 any successor committee, and the House Committees on Human  
7 Services, Insurance, Energy & Environment, and Mental Health or  
8 any successor committees.

9 (c) The Ombudsman shall post the annual report on the  
10 Department of Human Services' website.

11 (d) The Ombudsman shall not include in the report required  
12 by this Section any personally identifying information about an  
13 individual consumer or health care provider or identifying  
14 information about a health care facility licensed by the State  
15 or an emergency medical services system as defined in Section  
16 3.20 of the Emergency Medical Services (EMS) Systems Act.

17 Section 10. The Illinois Insurance Code is amended by  
18 adding Section 370c.2 as follows:

19 (215 ILCS 5/370c.2 new)

20 Sec. 370c.2. Parity reporting.

21 (a) By March 1, 2020, and every other March 1 thereafter,  
22 the Director shall submit a written report and provide a  
23 presentation of the report to the General Assembly that:

24 (1) specifies the methodology the Director uses to

1 verify that insurance carriers are complying with Section  
2 370c and rules adopted under that Section and with the  
3 federal Paul Wellstone and Pete Domenici Mental Health  
4 Parity and Addiction Equity Act of 2008, Public Law  
5 110-343, as amended, any regulations adopted in accordance  
6 with that Act, or guidance related to compliance with and  
7 oversight of that Act;

8 (2) identifies market conduct examinations initiated,  
9 conducted, or completed during the preceding 12 months  
10 regarding compliance with Section 370c and rules adopted  
11 under that Section and with the Paul Wellstone and Pete  
12 Domenici Mental Health Parity and Addiction Equity Act of  
13 2008 and regulations adopted under that Act and summarizes  
14 the outcomes of those market conduct examinations; and

15 (3) details any educational or corrective actions the  
16 Director has taken to ensure insurance carrier compliance  
17 with Section 370c and rules adopted under that Section and  
18 with the Paul Wellstone and Pete Domenici Mental Health  
19 Parity and Addiction Equity Act of 2008 and regulations  
20 adopted under that Act.

21 (b) The Director shall ensure that the report is written in  
22 plain language and is made available to the public by, at a  
23 minimum, posting the report on the Department's website.

24 Section 99. Effective date. This Act takes effect upon  
25 becoming law."