1 AN ACT concerning regulation.

## Be it enacted by the People of the State of Illinois, represented in the General Assembly:

- Section 5. The Illinois Insurance Code is amended by adding Sections 155.47 and 155.48 as follows:
- 6 (215 ILCS 5/155.47 new)

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- Sec. 155.47. Prohibited practices relating to substance use disorder treatment.
- 9 (a) As used in this Section, "recovery support",

  10 "substance use disorder", and "treatment" have the meanings

  11 set forth in the Substance Use Disorder Act.
- 12 (b) A company authorized to transact life insurance in
  13 this State may not, based solely on whether an individual has
  14 participated in a substance use treatment or recovery support
  15 program no less than 5 years before application:
- 16 <u>(1) deny coverage to the individual;</u>
- 17 (2) limit the amount, extent, or kind of coverage 18 available to the individual; or
  - (3) charge the individual or a group to which the individual belongs a rate that is different from the rate charged to other individuals or groups, respectively, for the same coverage, unless the charge is based on sound underwriting or actuarial principles reasonably related to

risk.

1	actual	or	anticipated	loss	experience	for	а	particular

- 3 (215 ILCS 5/155.48 new)
- Sec. 155.48. Prohibited practices relating to prescription

  for or obtainment of opioid antagonist.
  - (a) As used in this Section, "opioid antagonist" means any drug that binds to opioid receptors and blocks or otherwise inhibits the effects of opioids acting on those receptors to reverse the effects of an opioid overdose.
  - (b) A company authorized to transact life insurance in this State may not, based solely on whether an individual has been prescribed or has obtained through a standing order an opioid antagonist:
  - (1) deny coverage to the individual;
  - (2) limit the amount, extent, or kind of coverage available to the individual; or
    - (3) charge the individual or a group to which the individual belongs a rate that is different from the rate charged to other individuals or groups, respectively, for the same coverage, unless the charge is based on sound underwriting or actuarial principles reasonably related to actual or anticipated loss experience for a particular risk.