



102ND GENERAL ASSEMBLY

State of Illinois

2021 and 2022

HB4433

Introduced 1/21/2022, by Rep. Bob Morgan

SYNOPSIS AS INTRODUCED:

215 ILCS 134/30

Amends the Managed Care Reform and Patient Rights Act. In provisions concerning a requirement that a health care plan shall apply any third-party payments, financial assistance, discount, product vouchers, or any other reduction in out-of-pocket expenses made by or on behalf of an insured for prescription drugs toward a covered individual's deductible, copay, cost-sharing responsibility, or out-of-pocket maximum associated with the individual's health insurance, provides that if application of that requirement would result in ineligibility of a health savings account under federal law, the requirement applies to health savings account-qualified high deductible health plans with respect to the deductible of a plan after the enrollee has satisfied a specified minimum deductible, except with respect to specified items or services, in which case the requirement applies regardless of whether the minimum deductible has been satisfied. Effective immediately.

LRB102 23892 BMS 33089 b

1 AN ACT concerning regulation.

2 **Be it enacted by the People of the State of Illinois,**
3 **represented in the General Assembly:**

4 Section 5. The Managed Care Reform and Patient Rights Act
5 is amended by changing Section 30 as follows:

6 (215 ILCS 134/30)

7 Sec. 30. Prohibitions.

8 (a) No health care plan or its subcontractors may prohibit
9 or discourage health care providers by contract or policy from
10 discussing any health care services and health care providers,
11 utilization review and quality assurance policies, terms and
12 conditions of plans and plan policy with enrollees,
13 prospective enrollees, providers, or the public.

14 (b) No health care plan by contract, written policy, or
15 procedure may permit or allow an individual or entity to
16 dispense a different drug in place of the drug or brand of drug
17 ordered or prescribed without the express permission of the
18 person ordering or prescribing the drug, except as provided
19 under Section 3.14 of the Illinois Food, Drug and Cosmetic
20 Act.

21 (c) No health care plan or its subcontractors may by
22 contract, written policy, procedure, or otherwise mandate or
23 require an enrollee to substitute his or her participating

1 primary care physician under the plan during inpatient
2 hospitalization, such as with a hospitalist physician licensed
3 to practice medicine in all its branches, without the
4 agreement of that enrollee's participating primary care
5 physician. "Participating primary care physician" for health
6 care plans and subcontractors that do not require coordination
7 of care by a primary care physician means the participating
8 physician treating the patient. All health care plans shall
9 inform enrollees of any policies, recommendations, or
10 guidelines concerning the substitution of the enrollee's
11 primary care physician when hospitalization is necessary in
12 the manner set forth in subsections (d) and (e) of Section 15.

13 (d) A health care plan shall apply any third-party
14 payments, financial assistance, discount, product vouchers, or
15 any other reduction in out-of-pocket expenses made by or on
16 behalf of such insured for prescription drugs toward a covered
17 individual's deductible, copay, or cost-sharing
18 responsibility, or out-of-pocket maximum associated with the
19 individual's health insurance. If, under federal law,
20 application of this requirement would result in health savings
21 account ineligibility under Section 223 of the Internal
22 Revenue Code, this requirement applies to health savings
23 account-qualified high deductible health plans with respect to
24 the deductible of such a plan after the enrollee has satisfied
25 the minimum deductible under Section 223, except with respect
26 to items or services that are preventive care pursuant to

1 Section 223(c)(2)(C) of the Internal Revenue Code, in which
2 case the requirement of this subsection applies regardless of
3 whether the minimum deductible under Section 223 has been
4 satisfied.

5 (e) Any violation of this Section shall be subject to the
6 penalties under this Act.

7 (Source: P.A. 101-452, eff. 1-1-20.)

8 Section 99. Effective date. This Act takes effect upon
9 becoming law.