



103RD GENERAL ASSEMBLY

State of Illinois

2023 and 2024

HB5417

Introduced 2/9/2024, by Rep. Kelly M. Cassidy

SYNOPSIS AS INTRODUCED:

See Index

Amends the Department of Public Health Act. Establishes the role of HIV Treatment Innovation Coordinator to be housed within the Department. Provides that the Department shall create and fill the Coordinator role within 6 months after the effective date of the amendatory Act. Requires the Coordinator to develop and execute a comprehensive strategy to adopt a Rapid Start model for HIV treatment as the standard of care. Requires compensation and benefits for the Coordinator be at the Program Director level. Describes the specific job responsibilities of the Coordinator. Amends the Illinois Insurance Code. Provides that an individual or group policy of accident and health insurance amended, delivered, issued, or renewed in this State on or after January 1, 2025 shall provide coverage for home test kits for sexually transmitted infections, including any laboratory costs of processing the home test kit, that are deemed medically necessary or appropriate and ordered directly by a clinician or furnished through a standing order for patient use based on clinical guidelines and individual patient health needs. Makes a conforming change to the Illinois Public Aid Code regarding coverage for home test kits for sexually transmitted infections. Amends the AIDS Confidentiality Act. Creates the Illinois AIDS Drug Assistance Program. Provides that Illinois AIDS Drug Assistance Program applications shall be processed within 72 hours after the time of submission. Provides for conditional approval of Illinois AIDS Drug Assistance Program applications within 24 hours after time of submission. Requires Illinois AIDS Drug Assistance Program applicants to document residency within the State of Illinois. Provides for 8 Rapid Start for HIV Treatment pilot sites established by the Department of Public Health. Provides that the Department shall publish a report on the operation of the pilot program 15 months after the pilot sites have launched. Establishes requirements for the report, requires that the report be shared with the General Assembly, the Governor's Office, and requires that the report be made available on the Department's Internet website. Amends the County Jail Act. Creates new annual adult correctional facility public inspection report requirements on the topics of HIV and AIDS.

LRB103 39489 CES 69685 b

A BILL FOR

1 AN ACT concerning health.

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

4 Section 5. The Department of Public Health Act is amended
5 by adding Section 6.5 as follows:

6 (20 ILCS 2305/6.5 new)

7 Sec. 6.5. HIV Treatment Innovation Coordinator.

8 (a) Within 6 months after the effective date of this
9 amendatory Act of the 103rd General Assembly, the Department
10 of Public Health shall create and fill the position of "HIV
11 Treatment Innovation Coordinator" within the HIV Section and
12 shall employ a full-time person to serve in this position. The
13 HIV Treatment Innovation Coordinator shall develop and execute
14 a comprehensive strategy to adopt a Rapid Start model for HIV
15 treatment as the standard of care, aligning with industry
16 standards informed by the most current guidance of the Centers
17 for Disease Control and Prevention on HIV care and treatment.

18 (b) The HIV Treatment Innovation Coordinator employed by
19 the Department shall be compensated at a rate that is
20 comparable to the rate of compensation for a Program Director
21 and shall be provided benefits similar to those of a Program
22 Director. The HIV Treatment Innovation Coordinator shall also
23 be provided similar means and resources as those supplied to a

1 Program Director. The Department shall not modify any current
2 position to meet these requirements. The position of HIV
3 Treatment Innovation Coordinator shall be created and filled
4 anew, as set forth in this Section.

5 (c) The HIV Treatment Innovation Coordinator shall have
6 the following responsibilities:

7 (1) The Coordinator shall develop and execute a
8 comprehensive strategy for the adoption of the Rapid Start
9 model for HIV treatment, aligning with public health
10 objectives outlined in the Getting to Zero Illinois Plan,
11 including the process and qualifications for choosing the
12 8 rapid start pilots.

13 (2) The Coordinator shall support the launch of 8
14 rapid start pilots within 12 months after the effective
15 date of this amendatory Act of the 103rd General Assembly.

16 (3) The Coordinator shall establish coordination
17 efforts between pilot sites and health care providers,
18 community organizations, and stakeholders for the
19 successful implementation of the Rapid Start for HIV
20 treatment model.

21 (4) The Coordinator shall provide educational
22 resources, technical assistance, and training to
23 healthcare professionals at pilot sites to ensure a
24 thorough understanding and effective implementation of
25 Rapid Start for HIV treatment protocols.

26 (5) The Coordinator shall facilitate regular data

1 collection from Rapid Start for HIV treatment pilot sites
2 to optimize service delivery and monitor equitable access
3 to communities disproportionately impacted by HIV/AIDS.

4 (6) The Coordinator shall be responsible for the
5 management and allocation of resources dedicated to the
6 implementation of the Rapid Start for HIV treatment model,
7 including technical assistance, capacity building, and
8 grant management.

9 (7) The Coordinator shall be responsible for creating
10 and disseminating the report on the operation of the pilot
11 program 15 months after the pilot sites have launched as
12 required under the AIDS Confidentiality Act. The report
13 shall include:

14 (i) the number of enrolled participants; and

15 (ii) the length of time from initial diagnosis or
16 referral to the start of HIV treatment, and, when
17 available, the length of time during which
18 participants were able to achieve an undetectable
19 viral load.

20 Data shall also include demographic data on the racial,
21 ethnic, age, sex, disability status, sexual orientation,
22 gender identity, and primary or preferred language of program
23 participants in accordance with the Data Governance and
24 Organization to Support Equity and Racial Justice Act. The
25 report shall include the Department's recommendations
26 concerning the continued operation of the Rapid Start for HIV

1 treatment pilot program and its expansion or progress towards
2 becoming the standard of care for HIV treatment. The contents
3 of the report shall be in accordance with the AIDS
4 Confidentiality Act. The Coordinator shall share the report
5 with the Illinois General Assembly, the Governor's Office and
6 shall make it publicly available on the Department of Public
7 Health's Internet website.

8 Implementation of this Section is subject to
9 appropriations made to the Illinois Department of Public
10 Health for this purpose.

11 Section 10. The Illinois Insurance Code is amended by
12 adding Section 356z.71 as follows:

13 (215 ILCS 5/356z.71 new)

14 Sec. 356z.71. Coverage for home test kits for sexually
15 transmitted infections (STIs).

16 (a) As used in this Section, "home test kit" means a
17 product used for a test recommended by the federal Centers for
18 Disease Control and Prevention guidelines or the United States
19 Preventive Services Task Force that has received a certificate
20 of waiver under the Clinical Laboratory Improvement Amendments
21 to the federal Public Health Services Act, has been cleared or
22 approved by the United States Food and Drug Administration, or
23 has been developed by a laboratory in accordance with
24 established regulations and quality standards, to allow

1 individuals to self-collect specimens for STIs, including HIV,
2 remotely at a location outside of a clinical setting.

3 (b) An individual or group policy of accident and health
4 insurance amended, delivered, issued, or renewed in this State
5 after January 1, 2025 shall provide coverage for home test
6 kits for sexually transmitted infections, including any
7 laboratory costs of processing the kit, that are deemed
8 medically necessary or appropriate and ordered directly by a
9 clinician or furnished through a standing order for patient
10 use based on clinical guidelines and individual patient health
11 needs.

12 (1) A commercial health care plan is required to cover
13 the services outlined in this subsection when ordered for
14 an enrollee by an in-network provider.

15 (2) Except as otherwise provided in this subsection, a
16 policy subject to this subsection shall not impose a
17 deductible, coinsurance, copayment, or any other
18 cost-sharing requirement on the coverage provided. The
19 provisions of this subsection do not apply to coverage of
20 procedures to the extent such coverage would disqualify a
21 high-deductible health plan from eligibility for a health
22 savings account pursuant to the federal Internal Revenue
23 Code, 26 U.S.C. 223.

24 (3) Except as otherwise authorized under this Section,
25 a policy shall not impose any restrictions or delays on
26 the coverage required under this Section.

1 (4) If a plan or issuer uses a network of providers,
2 nothing in this Section shall be construed to require
3 coverage or to prohibit the plan or issuer from imposing
4 cost-sharing for items or services described in this
5 Section that are provided or delivered by an
6 out-of-network provider, unless the plan or issuer does
7 not have in its network a provider who is able to or is
8 willing to provide the applicable items or services.

9 Section 15. The Illinois Public Aid Code is amended by
10 changing Section 5-16.8 as follows:

11 (305 ILCS 5/5-16.8)

12 Sec. 5-16.8. Required health benefits. The medical
13 assistance program shall (i) provide the post-mastectomy care
14 benefits required to be covered by a policy of accident and
15 health insurance under Section 356t and the coverage required
16 under Sections 356g.5, 356q, 356u, 356w, 356x, 356z.6,
17 356z.26, 356z.29, 356z.32, 356z.33, 356z.34, 356z.35, 356z.46,
18 356z.47, 356z.51, 356z.53, 356z.56, 356z.59, 356z.60, ~~and~~
19 356z.61, 356z.64, 356z.67, and 356z.71 of the Illinois
20 Insurance Code, (ii) be subject to the provisions of Sections
21 356z.19, 356z.44, 356z.49, 364.01, 370c, and 370c.1 of the
22 Illinois Insurance Code, and (iii) be subject to the
23 provisions of subsection (d-5) of Section 10 of the Network
24 Adequacy and Transparency Act.

1 The Department, by rule, shall adopt a model similar to
2 the requirements of Section 356z.39 of the Illinois Insurance
3 Code.

4 On and after July 1, 2012, the Department shall reduce any
5 rate of reimbursement for services or other payments or alter
6 any methodologies authorized by this Code to reduce any rate
7 of reimbursement for services or other payments in accordance
8 with Section 5-5e.

9 To ensure full access to the benefits set forth in this
10 Section, on and after January 1, 2016, the Department shall
11 ensure that provider and hospital reimbursement for
12 post-mastectomy care benefits required under this Section are
13 no lower than the Medicare reimbursement rate.

14 (Source: P.A. 102-30, eff. 1-1-22; 102-144, eff. 1-1-22;
15 102-203, eff. 1-1-22; 102-306, eff. 1-1-22; 102-530, eff.
16 1-1-22; 102-642, eff. 1-1-22; 102-804, eff. 1-1-23; 102-813,
17 eff. 5-13-22; 102-816, eff. 1-1-23; 102-1093, eff. 1-1-23;
18 102-1117, eff. 1-13-23; 103-84, eff. 1-1-24; 103-91, eff.
19 1-1-24; 103-420, eff. 1-1-24; revised 12-15-23.)

20 Section 20. The AIDS Confidentiality Act is amended by
21 adding Section 5.6 as follows:

22 (410 ILCS 305/5.6 new)

23 Sec. 5.6. Illinois AIDS Drug Assistance Program.

24 (a) The purpose of this Section is to expand and assist

1 with implementation of the Rapid Start for HIV treatment
2 model. The pilot sites will allow the development of a
3 coordinated system of health care services to provide timely
4 and quality HIV treatment. This will occur by increasing the
5 capacity of the Department of Public Health and build toward
6 establishing the Rapid Start model as the standard of care for
7 HIV treatment. This program shall be known as the Illinois
8 AIDS Drug Assistance Program or Illinois ADAP.

9 (b) In this Section:

10 "Conditional approval" means Illinois ADAP approval within
11 24 hours and allows for attestation of eligibility
12 requirements. An applicant seeking conditional approval must
13 document residency in the State of Illinois.

14 "Rapid Start for HIV Treatment" means initiating
15 antiretroviral therapy within 7 days after initial diagnosis
16 or within 7 days after referral to HIV medical care as defined
17 by the Centers for Disease Control and Prevention
18 recommendations for HIV treatment.

19 (c) Once a complete Illinois AIDS Drug Assistance Program
20 application is submitted with all necessary supporting
21 documents, processing of the application shall occur within 72
22 hours after the time of submission.

23 (d) Illinois ADAP shall establish a pathway for
24 conditional approval of Illinois ADAP enrollment, with the
25 requirement that applicants then submit a full Illinois ADAP
26 application within 30 days after receiving conditional

1 approval.

2 (e) The Department of Public Health shall establish 8
3 Rapid Start for HIV Treatment pilot sites. Upon referral from
4 an HIV testing site, the program shall provide funding for and
5 coordination of health care services to support treatment
6 goals. The program shall provide ancillary services,
7 pharmaceutical drug assistance, and case management services
8 to participants while the appropriate transition is made for
9 continuity of care within the Rapid Start for HIV treatment
10 model timeline. The Department may adopt rules to implement
11 this pilot program in accordance with industry standards
12 informed by the most current Centers for Disease Control and
13 Prevention guidance on HIV care and treatment.

14 (f) The Pilot sites shall abide by the following
15 principles:

16 (1) Nothing About Us Without Us: Pilot site programs
17 and services shall be formulated with transparency,
18 community involvement, and direct ongoing input by people
19 living with and vulnerable to HIV.

20 (2) Equity: Pilot site programs and services shall
21 provide equitable support, services, and resources to all
22 participants and ensure accessibility to the greatest
23 extent possible. They shall also be established in
24 underserved communities.

25 (3) Self-Determination: Pilot site programs and
26 services shall prioritize individual dignity and autonomy

1 in decision-making while encouraging people to connect
2 with additional services that promote health and
3 well-being.

4 (4) Reduce Stigma: Pilot site programs and services
5 shall affirm the humanity and dignity of people living
6 with or vulnerable to HIV and shall operate in a way that
7 is welcoming to reduce stigma and build trust.

8 (5) Safe Spaces: Pilot site programs and services
9 shall prioritize relationship-building and trust among
10 partners, staff, and participants to create safe spaces.

11 (g) The Department, in cooperation with the lead agency
12 designated under subsection (c), shall publish a report on the
13 operation of the pilot program 15 months after the pilot sites
14 have launched. The Department shall share the report with the
15 General Assembly and the Governor's Office and shall make it
16 publicly available on its Internet website. The report shall
17 include:

18 (1) the number offers made for enrollment;

19 (2) the number of enrolled participants;

20 (3) the number and reasons of patients declined for
21 service; and

22 (4) the length of time from initial diagnosis or
23 referral to the start of HIV treatment, and, when
24 available, the length of time participants were able to
25 achieve an undetectable viral load.

26 Data shall also include demographic data on the racial,

1 ethnic, age, sex, disability status, sexual orientation,
2 gender identity, and primary or preferred language of program
3 participants in accordance with the Data Governance and
4 Organization to Support Equity and Racial Justice Act. The
5 report shall include the Department's recommendations
6 concerning the continued operation of the Rapid Start for HIV
7 treatment pilot program and its expansion or progress towards
8 becoming the standard of care for HIV treatment. The contents
9 of the report shall be in accordance with the AIDS
10 Confidentiality Act.

11 Implementation of this Section is subject to
12 appropriations made to the Illinois Department of Public
13 Health for this purpose.

14 Section 25. The County Jail Act is amended by changing
15 Section 17.10 as follows:

16 (730 ILCS 125/17.10)

17 Sec. 17.10. Requirements in connection with HIV/AIDS.

18 (a) In each county other than Cook, during the medical
19 admissions exam, the warden of the jail, a correctional
20 officer at the jail, or a member of the jail medical staff must
21 provide the prisoner with appropriate written information
22 concerning human immunodeficiency virus (HIV) and acquired
23 immunodeficiency syndrome (AIDS). The Department of Public
24 Health and community-based organizations certified to provide

1 HIV/AIDS testing must provide these informational materials to
2 the warden at no cost to the county. The warden, a correctional
3 officer, or a member of the jail medical staff must inform the
4 prisoner of the option of being tested for infection with HIV
5 by a certified local community-based agency or other available
6 medical provider at no charge to the prisoner.

7 (b) In Cook County, during the medical admissions exam, an
8 employee of the Cook County Health & Hospitals System must
9 provide the prisoner with appropriate information in writing,
10 verbally or by video or other electronic means concerning
11 human immunodeficiency virus (HIV) and acquired
12 immunodeficiency syndrome (AIDS) and must also provide the
13 prisoner with option of testing for infection with HIV or any
14 other identified causative agent of AIDS, as well as
15 counseling in connection with such testing. The Cook County
16 Health & Hospitals System may provide the inmate with opt-out
17 human immunodeficiency virus (HIV) testing, as defined in
18 Section 4 of the AIDS Confidentiality Act, unless the inmate
19 refuses. If opt-out HIV testing is conducted, the Cook County
20 Health & Hospitals System shall place signs in English,
21 Spanish, and other languages as needed in multiple, highly
22 visible locations in the area where HIV testing is conducted
23 informing inmates that they will be tested for HIV unless they
24 refuse, and refusal or acceptance of testing shall be
25 documented in the inmate's medical record. Pre-test
26 information shall be provided to the inmate and informed

1 consent obtained from the inmate as required in subsection (q)
2 of Section 3 and Section 5 of the AIDS Confidentiality Act. The
3 Cook County Health & Hospitals System shall follow procedures
4 established by the Department of Public Health to conduct HIV
5 testing and testing to confirm positive HIV test results. All
6 aspects of HIV testing shall comply with the requirements of
7 the AIDS Confidentiality Act, including delivery of test
8 results, as determined by the Cook County Health & Hospitals
9 System in consultation with the Illinois Department of Public
10 Health. Nothing in this Section shall require the Cook County
11 Health & Hospitals System to offer HIV testing to inmates who
12 are known to be infected with HIV. The Department of Public
13 Health and community-based organizations certified to provide
14 HIV/AIDS testing may provide these informational materials to
15 the Bureau at no cost to the county. The testing provided under
16 this subsection (b) shall consist of a test approved by the
17 Illinois Department of Public Health to determine the presence
18 of HIV infection, based upon recommendations of the United
19 States Centers for Disease Control and Prevention. If the test
20 result is positive, a reliable supplemental test based upon
21 recommendations of the United States Centers for Disease
22 Control and Prevention shall be administered.

23 (b-5) The Department of Corrections shall include the
24 following information in the annual adult correctional
25 facility public inspection report for each county:

26 (1) whether the warden of the jail, a correctional

1 officer at the jail, or a member of the jail medical staff
2 provide the prisoner with appropriate written information
3 concerning HIV and AIDS during the medical admissions
4 exam;

5 (2) whether the warden, a correctional officer, or a
6 member of the jail medical staff informs the prisoner of
7 the option of being tested for infection with HIV by a
8 certified local community-based agency or other available
9 medical provider at no charge to the prisoner;

10 (3) whether the warden of the jail makes appropriate
11 written information or visual aids concerning HIV/AIDS
12 available to every visitor to the jail;

13 (4) whether the warden of the jail has contacted the
14 Department of Public Health or community-based
15 organizations certified to provide HIV/AIDS testing to
16 obtain informational materials within the past year;

17 (5) for Cook County, whether an employee of the Cook
18 County Health and Hospitals System provides the prisoner
19 with appropriate information in writing, verbally, or by
20 video or other electronic means concerning HIV and AIDS
21 during the medical admissions exam; and

22 (6) for Cook County, whether an employee of the Cook
23 County Health and Hospitals System provides the prisoner
24 with the option of testing for infection with HIV or any
25 other identified causative agent of AIDS, as well as
26 counseling in connection with such testing;

1 The Department of Public Health and community-based
2 organizations certified to provide HIV/AIDS testing shall
3 provide these informational materials to the warden at no cost
4 to the office of the county sheriff.

5 (c) In each county, the warden of the jail must make
6 appropriate written information concerning HIV/AIDS available
7 to every visitor to the jail. This information must include
8 information concerning persons or entities to contact for
9 local counseling and testing. The Department of Public Health
10 and community-based organizations certified to provide
11 HIV/AIDS testing must provide these informational materials to
12 the warden at no cost to the office of the county sheriff.

13 (d) Implementation of this Section is subject to
14 appropriation.

15 (Source: P.A. 97-244, eff. 8-4-11; 97-323, eff. 8-12-11;
16 97-813, eff. 7-13-12; 98-1046, eff. 1-1-15.)

1 INDEX

2 Statutes amended in order of appearance

3 20 ILCS 2305/6.5 new

4 215 ILCS 5/356z.71 new

5 305 ILCS 5/5-16.8

6 410 ILCS 305/5.6 new

7 730 ILCS 125/17.10