

## 96TH GENERAL ASSEMBLY State of Illinois 2009 and 2010 HB5527

Introduced 2/9/2010, by Rep. Angelo Saviano - Michael J. Zalewski

## SYNOPSIS AS INTRODUCED:

215 ILCS 138/15

Amends the Uniform Prescription Drug Information Card Act. Provides that a discounted health care services plan administrator shall issue to its beneficiaries and insureds a card or other technology containing uniform prescription drug information. Sets forth the mandatory data elements that the card or other technology issued by a discounted health care services plan administrator shall display. Sets forth a definition for "discounted health care services plan administrator".

LRB096 20211 RPM 35782 b

1 AN ACT concerning insurance.

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

- Section 5. The Uniform Prescription Drug Information Card

  Act is amended by changing Section 15 as follows:
- 6 (215 ILCS 138/15)
- Sec. 15. Uniform prescription drug information cards required.
- 9 (a) A health benefit plan that issues a card or other technology and provides coverage for prescription drugs or 10 devices and an administrator of such a plan including, but not 11 limited to, third-party administrators for self-insured plans 12 13 and state-administered plans shall issue to its insureds a card 14 or other technology containing uniform prescription drug information. The uniform prescription drug information card or 15 other technology shall specifically identify and display the 16 17 following mandatory data elements on the front of the card:
  - (1) BIN number;

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- 19 (2) Processor control number if required for claims 20 adjudication;
- 21 (3) Group number;
- 22 (4) Card issuer identifier;
- 23 (5) Cardholder ID number; and

1	(6) Cardholder name.
2	The uniform prescription drug information card or other
3	technology shall specifically identify and display the
4	following mandatory data elements on the back of the card:
5	(1) Claims submission names and addresses; and
6	(2) Help desk telephone numbers and names.
7	(b) A discounted health care services plan administrator
8	shall issue to its beneficiaries and insureds a card or other
9	technology containing uniform prescription drug information.
10	The uniform prescription drug information card or other
11	technology issued by a discounted health care services plan
12	administrator shall specifically identify and display the
13	following mandatory data elements:
14	(1) BIN number;
15	(2) processor control number, if required for claims
16	adjudication;
17	(3) group number;
18	(4) card issuer identifier;
19	(5) cardholder ID number;
20	(6) cardholder name;
21	(7) claims submission names and addresses; and
22	(8) help desk telephone numbers and names.
23	(c) (b) A new uniform prescription drug information card or
24	other technology shall be issued by a health benefit plan upon
25	enrollment and reissued upon any change in the insured's
26	coverage that affects mandatory data elements contained on the

1 card.

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(d) As used in this Section, "discounted health care services plan administrator" means any person, partnership, or corporation, other than an insurer, health service corporation, limited health service organization holding a certificate of authority under the Limited Health Service Organization Act, or health maintenance organization holding a certificate of authority under the Health Maintenance Organization Act, that arranges, contracts with, or administers contracts with a provider whereby insureds or beneficiaries are provided an incentive to use health care services provided by health care service providers under a discounted health care service plan in which there are no other incentives, such as copayment, coinsurance, or any other reimbursement differential, for beneficiaries to utilize the provider. "Discounted health care services plan administrator" also includes any person, partnership, or corporation, other than an insurer, health service corporation, limited health service organization holding a certificate of authority under the Limited Health Service Organization Act, or health maintenance organization holding a certificate of authority under the Health Maintenance Organization Act, that enters into a contract with another administrator to enroll beneficiaries or insureds in a preferred provider program marketed as an independently identifiable program based on marketing materials or member benefit identification cards.

1 (Source: P.A. 91-777, eff. 1-1-01.)