



Rep. Angelo Saviano

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09600HB5527ham001

LRB096 20211 RPM 37218 a

1 AMENDMENT TO HOUSE BILL 5527

2 AMENDMENT NO. _____. Amend House Bill 5527 by replacing
3 everything after the enacting clause with the following:

4 "Section 5. The Uniform Prescription Drug Information Card
5 Act is amended by changing Section 15 as follows:

6 (215 ILCS 138/15)

7 Sec. 15. Uniform prescription drug information cards
8 required.

9 (a) A health benefit plan that issues a card or other
10 technology and provides coverage for prescription drugs or
11 devices and an administrator of such a plan including, but not
12 limited to, third-party administrators for self-insured plans
13 and state-administered plans shall issue to its insureds a card
14 or other technology containing uniform prescription drug
15 information. The uniform prescription drug information card or
16 other technology shall specifically identify and display the

1 following mandatory data elements on the front of the card:

2 (1) BIN number;

3 (2) Processor control number if required for claims
4 adjudication;

5 (3) Group number;

6 (4) Card issuer identifier;

7 (5) Cardholder ID number; and

8 (6) Cardholder name.

9 The uniform prescription drug information card or other
10 technology shall specifically identify and display the
11 following mandatory data elements on the back of the card:

12 (1) Claims submission names and addresses; and

13 (2) Help desk telephone numbers and names.

14 (b) A new uniform prescription drug information card or
15 other technology shall be issued by a health benefit plan upon
16 enrollment and reissued upon any change in the insured's
17 coverage that affects mandatory data elements contained on the
18 card.

19 (c) Notwithstanding subsections (a) and (b) of this
20 Section, a discounted health care services plan providing
21 discounts on prescription drugs or devices shall issue to its
22 beneficiaries a card containing the following mandatory data
23 elements:

24 (1) an Internet website for beneficiaries to access
25 up-to-date lists of preferred providers;

26 (2) a toll-free number for beneficiaries to access

1 up-to-date lists of preferred providers and additional
2 information about the discounted health care services
3 plan;

4 (3) the names or logos of all available provider
5 networks;

6 (4) a BIN number;

7 (5) a processor control number if required for claims
8 adjudication;

9 (6) a group number; and

10 (7) a cardholder ID number.

11 (d) As used in this Section, "discounted health care
12 services plan" means a preferred provider program whereby
13 beneficiaries, in exchange for fees, dues, charges, or other
14 consideration, are provided an incentive, in the form of
15 discounted health care services, to use the services of the
16 provider.

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

18 Section 10. The Uniform Health Care Service Benefits
19 Information Card Act is amended by changing Section 15 as
20 follows:

21 (215 ILCS 139/15)

22 Sec. 15. Uniform health care benefit information cards
23 required.

24 (a) A health benefit plan that issues a card or other

1 technology and provides coverage for health care services
2 including prescription drugs or devices also referred to as
3 health care benefits and an administrator of such a plan
4 including, but not limited to, third-party administrators for
5 self-insured plans and state-administered plans shall issue to
6 its insureds a card or other technology containing uniform
7 health care benefit information. The health care benefit
8 information card or other technology shall specifically
9 identify and display the following mandatory data elements on
10 the card:

11 (1) processor control number, if required for claims
12 adjudication;

13 (2) group number;

14 (3) card issuer identifier;

15 (4) cardholder ID number; and

16 (5) cardholder name.

17 (b) The uniform health care benefit information card or
18 other technology shall specifically identify and display the
19 following mandatory data elements on the back of the card:

20 (1) claims submission names and addresses; and

21 (2) help desk telephone numbers and names.

22 (c) A new uniform health care benefit information card or
23 other technology shall be issued by a health benefit plan upon
24 enrollment and reissued upon any change in the insured's
25 coverage that affects mandatory data elements contained on the
26 card.

1 (d) Notwithstanding subsections (a), (b), and (c) of this
2 Section, a discounted health care services plan shall issue to
3 its beneficiaries a card containing the following mandatory
4 data elements:

5 (1) an Internet website for beneficiaries to access
6 up-to-date lists of preferred providers;

7 (2) a toll-free number for beneficiaries to access
8 up-to-date lists of preferred providers and additional
9 information about the discounted health care services
10 plan;

11 (3) the names or logos of all available provider
12 networks; and

13 (4) a cardholder ID number.

14 (e) As used in this Section, "discounted health care
15 services plan" means a preferred provider program whereby
16 beneficiaries, in exchange for fees, dues, charges, or other
17 consideration, are provided an incentive, in the form of
18 discounted health care services, to use the services of the
19 provider.

20 (Source: P.A. 92-106, eff. 1-1-02.)"