



104TH GENERAL ASSEMBLY

State of Illinois

2025 and 2026

HB5492

Introduced 2/13/2026, by Rep. Katie Stuart - Yolonda Morris -
Dagmara Avelar

SYNOPSIS AS INTRODUCED:

5 ILCS 375/6.11
215 ILCS 5/356z.88 new
225 ILCS 85/45 new
305 ILCS 5/5-16.8

Amends the Illinois Insurance Code. Sets forth provisions requiring an individual or group policy of accident and health insurance amended, delivered, issued, or renewed in this State on or after January 1, 2028 to provide coverage for up to a 12-month supply of prescription hormone therapy, and the necessary supplies for self-administration, that is prescribed by a network provider within the provider's scope of practice and dispensed at one time for an enrollee by a provider or pharmacist, or at a location licensed or otherwise authorized to dispense drugs or supplies. Amends the Pharmacy Practice Act. Provides that, notwithstanding any other provision of law, a dispensing provider or pharmacist shall dispense, at a patient's request, up to a 12-month supply of a prescription hormone therapy and the necessary supplies for self-administration pursuant to a valid prescription that specifies an initial quantity followed by periodic refills, except as specified. Amends the State Employees Group Insurance Act of 1971 and the Illinois Public Aid Code to require coverage under the provisions of those Acts.

LRB104 18985 BAB 32430 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 State Employees Group Insurance Act of 1971
5 is amended by changing Section 6.11 as follows:

6 (5 ILCS 375/6.11)

7 (Text of Section before amendment by P.A. 104-1)

8 Sec. 6.11. Required health benefits; Illinois Insurance
9 Code requirements. The program of health benefits shall
10 provide the post-mastectomy care benefits required to be
11 covered by a policy of accident and health insurance under
12 Section 356t of the Illinois Insurance Code. The program of
13 health benefits shall provide the coverage required under
14 Sections 356g, 356g.5, 356g.5-1, 356m, 356q, 356u, 356u.10,
15 356w, 356x, 356z.2, 356z.4, 356z.4a, 356z.5, 356z.6, 356z.8,
16 356z.9, 356z.10, 356z.11, 356z.12, 356z.13, 356z.14, 356z.15,
17 356z.17, 356z.22, 356z.25, 356z.26, 356z.29, 356z.30, 356z.32,
18 356z.33, 356z.36, 356z.40, 356z.41, 356z.45, 356z.46, 356z.47,
19 356z.51, 356z.53, 356z.54, 356z.55, 356z.56, 356z.57, 356z.59,
20 356z.60, 356z.61, 356z.62, 356z.64, 356z.67, 356z.68, 356z.70,
21 356z.71, 356z.74, 356z.76, ~~and~~ 356z.77, ~~and~~ 356z.80, 356z.81,
22 356z.82, 356z.83, 356z.84, 356z.85, and 356z.88 of the
23 Illinois Insurance Code. The program of health benefits must

1 comply with Sections 155.22a, 155.37, 355b, 356z.19, 370c, and
2 370c.1 and Article XXXIIB of the Illinois Insurance Code. The
3 program of health benefits shall provide the coverage required
4 under Section 356m of the Illinois Insurance Code and, for the
5 employees of the State Employee Group Insurance Program only,
6 the coverage as also provided in Section 6.11B of this Act. The
7 Department of Insurance shall enforce the requirements of this
8 Section with respect to Sections 370c and 370c.1 and Article
9 XXXIIB of the Illinois Insurance Code; all other requirements
10 of this Section shall be enforced by the Department of Central
11 Management Services.

12 Rulemaking authority to implement Public Act 95-1045, if
13 any, is conditioned on the rules being adopted in accordance
14 with all provisions of the Illinois Administrative Procedure
15 Act and all rules and procedures of the Joint Committee on
16 Administrative Rules; any purported rule not so adopted, for
17 whatever reason, is unauthorized.

18 (Source: P.A. 103-8, eff. 1-1-24; 103-84, eff. 1-1-24; 103-91,
19 eff. 1-1-24; 103-420, eff. 1-1-24; 103-445, eff. 1-1-24;
20 103-535, eff. 8-11-23; 103-551, eff. 8-11-23; 103-605, eff.
21 7-1-24; 103-718, eff. 7-19-24; 103-751, eff. 8-2-24; 103-870,
22 eff. 1-1-25; 103-914, eff. 1-1-25; 103-918, eff. 1-1-25;
23 103-951, eff. 1-1-25; 103-1024, eff. 1-1-25; 104-27, eff.
24 1-1-26, 104-42, eff. 8-1-25; 104-68, eff. 1-1-26; 104-73, eff.
25 1-1-26; 104-289, eff. 1-1-26; 104-324, eff. 1-1-26; 104-379,
26 eff. 1-1-26; 104-417, eff. 8-15-25; revised 11-19-25.)

1 (Text of Section after amendment by P.A. 104-1)

2 Sec. 6.11. Required health benefits; Illinois Insurance
3 Code requirements. The program of health benefits shall
4 provide the post-mastectomy care benefits required to be
5 covered by a policy of accident and health insurance under
6 Section 356t of the Illinois Insurance Code. The program of
7 health benefits shall provide the coverage required under
8 Sections 356g, 356g.5, 356g.5-1, 356m, 356q, 356u, 356u.10,
9 356w, 356x, 356z.2, 356z.4, 356z.4a, 356z.5, 356z.6, 356z.8,
10 356z.9, 356z.10, 356z.11, 356z.12, 356z.13, 356z.14, 356z.15,
11 356z.17, 356z.22, 356z.25, 356z.26, 356z.29, 356z.30, 356z.32,
12 356z.33, 356z.36, 356z.40, 356z.41, 356z.45, 356z.46, 356z.47,
13 356z.51, 356z.53, 356z.54, 356z.55, 356z.56, 356z.57, 356z.59,
14 356z.60, 356z.61, 356z.62, 356z.64, 356z.67, 356z.68, 356z.70,
15 356z.71, 356z.74, 356z.76, ~~and~~ 356z.77, 356z.79, and 356z.80,
16 356z.81, 356z.82, 356z.83, 356z.84, 356z.85, and 356z.88 of
17 the Illinois Insurance Code. The program of health benefits
18 must comply with Sections 155.22a, 155.37, 355b, 356z.19,
19 370c, and 370c.1 and Article XXXIIB of the Illinois Insurance
20 Code. The program of health benefits shall provide the
21 coverage required under Section 356m of the Illinois Insurance
22 Code and, for the employees of the State Employee Group
23 Insurance Program only, the coverage as also provided in
24 Section 6.11B of this Act. The Department of Insurance shall
25 enforce the requirements of this Section with respect to

1 Sections 370c and 370c.1 and Article XXXIIB of the Illinois
2 Insurance Code; all other requirements of this Section shall
3 be enforced by the Department of Central Management Services.

4 Rulemaking authority to implement Public Act 95-1045, if
5 any, is conditioned on the rules being adopted in accordance
6 with all provisions of the Illinois Administrative Procedure
7 Act and all rules and procedures of the Joint Committee on
8 Administrative Rules; any purported rule not so adopted, for
9 whatever reason, is unauthorized.

10 (Source: P.A. 103-8, eff. 1-1-24; 103-84, eff. 1-1-24; 103-91,
11 eff. 1-1-24; 103-420, eff. 1-1-24; 103-445, eff. 1-1-24;
12 103-535, eff. 8-11-23; 103-551, eff. 8-11-23; 103-605, eff.
13 7-1-24; 103-718, eff. 7-19-24; 103-751, eff. 8-2-24; 103-870,
14 eff. 1-1-25; 103-914, eff. 1-1-25; 103-918, eff. 1-1-25;
15 103-951, eff. 1-1-25; 103-1024, eff. 1-1-25; 104-1, eff.
16 7-1-27; 104-27, eff. 1-1-26, 104-42, eff. 8-1-25; 104-68, eff.
17 1-1-26; 104-73, eff. 1-1-26; 104-289, eff. 1-1-26; 104-324,
18 eff. 1-1-26; 104-379, eff. 1-1-26; 104-417, eff. 8-15-25;
19 revised 11-19-25.)

20 Section 10. The Illinois Insurance Code is amended by
21 adding Section 356z.88 as follows:

22 (215 ILCS 5/356z.88 new)

23 Sec. 356z.88. Coverage for prescription hormone therapy.

24 (a) For purposes of this Section, "prescription hormone

1 therapy" means all drugs approved by the United States Food
2 and Drug Administration that are used to medically suppress,
3 increase, or replace hormones that the body is not producing
4 at intended levels and the necessary supplies for
5 self-administration. "Prescription hormone therapy" does not
6 include glucagon-like peptide-1 and glucagon-like peptide-1
7 receptor agonists.

8 (b)(1) An individual or group policy of accident and
9 health insurance amended, delivered, issued, or renewed in
10 this State on or after January 1, 2028 shall provide coverage
11 for up to a 12-month supply of prescription hormone therapy,
12 and the necessary supplies for self-administration, that is
13 prescribed by a network provider within the provider's scope
14 of practice and dispensed at one time for an enrollee by a
15 provider or pharmacist, or at a location licensed or otherwise
16 authorized to dispense drugs or supplies.

17 (2) This Section does not require an individual or group
18 policy of accident and health insurance amended, delivered,
19 issued, or renewed in this State on or after January 1, 2028 to
20 cover prescription hormone therapy provided by an
21 out-of-network provider, pharmacy, or location licensed or
22 otherwise authorized to dispense drugs or supplies, except as
23 may otherwise be authorized by State or federal law or by the
24 plan's policies governing out-of-network coverage. If
25 prescriptions for medically necessary prescription hormone
26 therapy are unavailable to a plan enrollee within the plan's

1 network, the plan shall arrange for the prescription hormone
2 therapy to be provided by an out-of-network provider.

3 (3) This Section does not prohibit an individual or group
4 policy of accident and health insurance amended, delivered,
5 issued, or renewed on or after January 1, 2028 from limiting
6 refills that may be obtained in the last quarter of the plan
7 year if a 12-month supply of the prescription hormone therapy
8 has already been dispensed during the plan year.

9 (4) This Section does not require a provider to prescribe,
10 furnish, or dispense 12 months of prescription hormone therapy
11 at one time.

12 (5) To the extent not otherwise prohibited under this
13 Section or State or federal law, health plans may apply drug
14 utilization management strategies to prescription drugs
15 covered under paragraph (1) of this subsection.

16 (6) If an individual or group policy of accident and
17 health insurance amended, delivered, issued, or renewed in
18 this State on or after January 1, 2028 delegates
19 responsibilities under this Section to a contracted entity,
20 including a medical group or independent practice association,
21 the delegated entity shall comply with this Section.

22 (c) This Section does not deny or restrict the
23 Department's authority to ensure plan compliance when an
24 individual or group policy of accident and health insurance
25 provides coverage for prescription hormone therapy.

1 Section 15. The Pharmacy Practice Act is amended by adding
2 Section 45 as follows:

3 (225 ILCS 85/45 new)

4 Sec. 45. Prescription hormone therapy.

5 (a) For purposes of this Section, "prescription hormone
6 therapy" means all drugs approved by the United States Food
7 and Drug Administration that are used to medically suppress,
8 increase, or replace hormones that the body is not producing
9 at intended levels and the necessary supplies for
10 self-administration. "Prescription hormone therapy" does not
11 include glucagon-like peptide-1 and glucagon-like peptide-1
12 receptor agonists.

13 (b) Notwithstanding any other provision of law, a
14 dispensing provider or pharmacist shall dispense, at a
15 patient's request, up to a 12-month supply of a prescription
16 hormone therapy and the necessary supplies for
17 self-administration pursuant to a valid prescription that
18 specifies an initial quantity followed by periodic refills,
19 unless any of the following is true:

20 (1) The patient requests a smaller supply.

21 (2) The prescribing provider instructs that the
22 patient must have a smaller supply.

23 (3) The prescribing provider temporarily limits
24 refills to a 90-day supply due to an acute dispensing
25 shortage, so long as those limits are rescinded at the

1 first opportunity of a regularly reinstated, sustainable
2 supply.

3 (4) The prescription hormone therapy is a controlled
4 substance. If the prescription hormone therapy is a
5 controlled substance, the pharmacist shall dispense the
6 maximum supply allowed under State and federal law to be
7 obtained at one time by the patient.

8 Section 45. The Illinois Public Aid Code is amended by
9 changing Section 5-16.8 as follows:

10 (305 ILCS 5/5-16.8)

11 Sec. 5-16.8. Required health benefits. The medical
12 assistance program shall (i) provide the post-mastectomy care
13 benefits required to be covered by a policy of accident and
14 health insurance under Section 356t and the coverage required
15 under Sections 356g.5, 356q, 356u, 356w, 356x, 356z.6,
16 356z.26, 356z.29, 356z.32, 356z.33, 356z.34, 356z.35, 356z.46,
17 356z.47, 356z.51, 356z.53, 356z.59, 356z.60, 356z.61, 356z.64,
18 356z.67, 356z.71, ~~and~~ 356z.75, ~~and~~ 356z.80, 356z.84, 356z.85,
19 and 356z.88 of the Illinois Insurance Code, (ii) be subject to
20 the provisions of Sections 356z.19, 356z.44, 356z.49, 364.01,
21 370c, and 370c.1 of the Illinois Insurance Code, and (iii) be
22 subject to the provisions of subsection (d-5) of Section 10 of
23 the Network Adequacy and Transparency Act.

24 The Department, by rule, shall adopt a model similar to

1 the requirements of Section 356z.39 of the Illinois Insurance
2 Code.

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

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

13 (Source: P.A. 103-84, eff. 1-1-24; 103-91, eff. 1-1-24;
14 103-420, eff. 1-1-24; 103-605, eff. 7-1-24; 103-703, eff.
15 1-1-25; 103-758, eff. 1-1-25; 103-1024, eff. 1-1-25; 104-73,
16 eff. 1-1-26; 104-324, eff. 1-1-26; 104-379, eff. 1-1-26;
17 104-417, eff. 8-15-25; revised 11-21-25.)

18 Section 95. No acceleration or delay. Where this Act makes
19 changes in a statute that is represented in this Act by text
20 that is not yet or no longer in effect (for example, a Section
21 represented by multiple versions), the use of that text does
22 not accelerate or delay the taking effect of (i) the changes
23 made by this Act or (ii) provisions derived from any other
24 Public Act.