



104TH GENERAL ASSEMBLY

State of Illinois

2025 and 2026

SB1480

Introduced 1/31/2025, by Sen. Laura Fine

SYNOPSIS AS INTRODUCED:

5 ILCS 375/6.17 new
65 ILCS 5/10-4-2.9 new
105 ILCS 5/10-22.3g new
215 ILCS 5/370c.3 new
215 ILCS 125/5-3
225 ILCS 150/20 new
305 ILCS 5/5-65 new
405 ILCS 160/1
405 ILCS 160/35 new

from Ch. 111 1/2, par. 1411.2

Amends the Illinois Insurance Code. Provides that all group and individual health insurance policies issued, delivered, amended, or renewed in Illinois that provide coverage for medical or surgical conditions shall also provide coverage for crisis services, regardless of any difference in billing codes used for such services. Provides that coverage for crisis services may not be denied or restricted based on the modality or setting of the services; and that crisis services shall be covered whether delivered in person, through telehealth, or in a residential or outpatient setting, to the extent that such services are covered in other settings or modalities under the policy. Makes conforming changes to the State Employees Group Insurance Act of 1971, the Illinois Municipal Code, the School Code, the Health Maintenance Organization Act, the Telehealth Act, and the Illinois Public Aid Code. Amends the Strengthening and Transforming Behavioral Health Crisis Care in Illinois Act. Renames the Act the Crisis Continuum Sustainability Act. Provides that on or before December 31, 2028, and every 5 years thereafter, the Department of Human Services shall, subject to available funding and in collaboration with relevant stakeholders and State bodies, develop and submit a Statewide Crisis Continuum Strategic Plan to the Office of the Governor and the General Assembly, with the goal of ensuring every Illinoisan has timely access to appropriate and supportive behavioral health response during a behavioral health crisis. Requires the strategic plan to identify statewide goals, key stakeholders, and performance metrics for expanding access to behavioral health crisis continuum services across Illinois; address gaps in service delivery; and other matters.

LRB104 06841 KTG 16877 b

1 AN ACT concerning insurance.

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 adding Section 6.17 as follows:

6 (5 ILCS 375/6.17 new)

7 Sec. 6.17. Behavioral health services; required crisis
8 coverage. The program of health benefits is subject to the
9 provisions of Section 370c.3 of the Illinois Insurance Code
10 requiring coverage of crisis services as defined in 89 Ill.
11 Adm. Code 140.453(d) (3).

12 Section 10. The Illinois Municipal Code is amended by
13 adding Section 10-4-2.9 as follows:

14 (65 ILCS 5/10-4-2.9 new)

15 Sec. 10-4-2.9. Behavioral health services; required crisis
16 coverage. The corporate authorities of all municipalities are
17 subject to the provisions of Section 370c.3 of the Illinois
18 Insurance Code requiring coverage of crisis services as
19 defined in 89 Ill. Adm. Code 140.453(d) (3).

20 Section 15. The School Code is amended by adding Section

1 10-22.3g as follows:

2 (105 ILCS 5/10-22.3g new)

3 Sec. 10-22.3g. Behavioral health services; no utilization
4 or prior approval mandates. Insurance protection and benefits
5 for employees shall be subject to the provisions of Section
6 370c.3 of the Illinois Insurance Code requiring coverage of
7 crisis services as defined in 89 Ill. Adm. Code 140.453(d) (3).

8 Section 20. The Illinois Insurance Code is amended by
9 adding Section 370c.3 as follows:

10 (215 ILCS 5/370c.3 new)

11 Sec. 370c.3. Mandatory coverage for crisis services.

12 (a) All group and individual health insurance policies
13 issued, delivered, amended, or renewed in Illinois that
14 provide coverage for medical or surgical conditions shall also
15 provide coverage for crisis services, regardless of any
16 difference in billing codes used for such services.

17 (b) Coverage for crisis services may not be denied or
18 restricted based on the modality or setting of the services.
19 Crisis services shall be covered whether delivered in person,
20 through telehealth, or in a residential or outpatient setting,
21 to the extent that such services are covered in other settings
22 or modalities under the policy.

23 (c) For the purposes of this Section, "crisis services"

1 refers to any and all services defined under 89 Ill. Adm. Code
2 140.453(d) (3), including, but not limited to, the following:

3 (i) Crisis Intervention.

4 (ii) Mobile Crisis Response.

5 (iii) Crisis Stabilization.

6 Section 25. The Health Maintenance Organization Act is
7 amended by changing Section 5-3 as follows:

8 (215 ILCS 125/5-3) (from Ch. 111 1/2, par. 1411.2)

9 Sec. 5-3. Insurance Code provisions.

10 (a) Health Maintenance Organizations shall be subject to
11 the provisions of Sections 133, 134, 136, 137, 139, 140,
12 141.1, 141.2, 141.3, 143, 143.31, 143c, 147, 148, 149, 151,
13 152, 153, 154, 154.5, 154.6, 154.7, 154.8, 155.04, 155.22a,
14 155.49, 352c, 355.2, 355.3, 355.6, 355b, 355c, 356f, 356g,
15 356g.5-1, 356m, 356q, 356u.10, 356v, 356w, 356x, 356z.2,
16 356z.3a, 356z.4, 356z.4a, 356z.5, 356z.6, 356z.8, 356z.9,
17 356z.10, 356z.11, 356z.12, 356z.13, 356z.14, 356z.15, 356z.17,
18 356z.18, 356z.19, 356z.20, 356z.21, 356z.22, 356z.23, 356z.24,
19 356z.25, 356z.26, 356z.28, 356z.29, 356z.30, 356z.31, 356z.32,
20 356z.33, 356z.34, 356z.35, 356z.36, 356z.37, 356z.38, 356z.39,
21 356z.40, 356z.40a, 356z.41, 356z.44, 356z.45, 356z.46,
22 356z.47, 356z.48, 356z.49, 356z.50, 356z.51, 356z.53, 356z.54,
23 356z.55, 356z.56, 356z.57, 356z.58, 356z.59, 356z.60, 356z.61,
24 356z.62, 356z.63, 356z.64, 356z.65, 356z.66, 356z.67, 356z.68,

1 356z.69, 356z.70, 356z.71, 356z.72, 356z.73, 356z.74, 356z.75,
2 356z.77, 364, 364.01, 364.3, 367.2, 367.2-5, 367i, 368a, 368b,
3 368c, 368d, 368e, 370c, 370c.1, 370c.3, 401, 401.1, 402, 403,
4 403A, 408, 408.2, 409, 412, 444, and 444.1, paragraph (c) of
5 subsection (2) of Section 367, and Articles IIA, VIII 1/2,
6 XII, XII 1/2, XIII, XIII 1/2, XXV, XXVI, and XXXIIB of the
7 Illinois Insurance Code.

8 (b) For purposes of the Illinois Insurance Code, except
9 for Sections 444 and 444.1 and Articles XIII and XIII 1/2,
10 Health Maintenance Organizations in the following categories
11 are deemed to be "domestic companies":

12 (1) a corporation authorized under the Dental Service
13 Plan Act or the Voluntary Health Services Plans Act;

14 (2) a corporation organized under the laws of this
15 State; or

16 (3) a corporation organized under the laws of another
17 state, 30% or more of the enrollees of which are residents
18 of this State, except a corporation subject to
19 substantially the same requirements in its state of
20 organization as is a "domestic company" under Article VIII
21 1/2 of the Illinois Insurance Code.

22 (c) In considering the merger, consolidation, or other
23 acquisition of control of a Health Maintenance Organization
24 pursuant to Article VIII 1/2 of the Illinois Insurance Code,

25 (1) the Director shall give primary consideration to
26 the continuation of benefits to enrollees and the

1 financial conditions of the acquired Health Maintenance
2 Organization after the merger, consolidation, or other
3 acquisition of control takes effect;

4 (2) (i) the criteria specified in subsection (1) (b) of
5 Section 131.8 of the Illinois Insurance Code shall not
6 apply and (ii) the Director, in making his determination
7 with respect to the merger, consolidation, or other
8 acquisition of control, need not take into account the
9 effect on competition of the merger, consolidation, or
10 other acquisition of control;

11 (3) the Director shall have the power to require the
12 following information:

13 (A) certification by an independent actuary of the
14 adequacy of the reserves of the Health Maintenance
15 Organization sought to be acquired;

16 (B) pro forma financial statements reflecting the
17 combined balance sheets of the acquiring company and
18 the Health Maintenance Organization sought to be
19 acquired as of the end of the preceding year and as of
20 a date 90 days prior to the acquisition, as well as pro
21 forma financial statements reflecting projected
22 combined operation for a period of 2 years;

23 (C) a pro forma business plan detailing an
24 acquiring party's plans with respect to the operation
25 of the Health Maintenance Organization sought to be
26 acquired for a period of not less than 3 years; and

1 (D) such other information as the Director shall
2 require.

3 (d) The provisions of Article VIII 1/2 of the Illinois
4 Insurance Code and this Section 5-3 shall apply to the sale by
5 any health maintenance organization of greater than 10% of its
6 enrollee population (including, without limitation, the health
7 maintenance organization's right, title, and interest in and
8 to its health care certificates).

9 (e) In considering any management contract or service
10 agreement subject to Section 141.1 of the Illinois Insurance
11 Code, the Director (i) shall, in addition to the criteria
12 specified in Section 141.2 of the Illinois Insurance Code,
13 take into account the effect of the management contract or
14 service agreement on the continuation of benefits to enrollees
15 and the financial condition of the health maintenance
16 organization to be managed or serviced, and (ii) need not take
17 into account the effect of the management contract or service
18 agreement on competition.

19 (f) Except for small employer groups as defined in the
20 Small Employer Rating, Renewability and Portability Health
21 Insurance Act and except for medicare supplement policies as
22 defined in Section 363 of the Illinois Insurance Code, a
23 Health Maintenance Organization may by contract agree with a
24 group or other enrollment unit to effect refunds or charge
25 additional premiums under the following terms and conditions:

26 (i) the amount of, and other terms and conditions with

1 respect to, the refund or additional premium are set forth
2 in the group or enrollment unit contract agreed in advance
3 of the period for which a refund is to be paid or
4 additional premium is to be charged (which period shall
5 not be less than one year); and

6 (ii) the amount of the refund or additional premium
7 shall not exceed 20% of the Health Maintenance
8 Organization's profitable or unprofitable experience with
9 respect to the group or other enrollment unit for the
10 period (and, for purposes of a refund or additional
11 premium, the profitable or unprofitable experience shall
12 be calculated taking into account a pro rata share of the
13 Health Maintenance Organization's administrative and
14 marketing expenses, but shall not include any refund to be
15 made or additional premium to be paid pursuant to this
16 subsection (f)). The Health Maintenance Organization and
17 the group or enrollment unit may agree that the profitable
18 or unprofitable experience may be calculated taking into
19 account the refund period and the immediately preceding 2
20 plan years.

21 The Health Maintenance Organization shall include a
22 statement in the evidence of coverage issued to each enrollee
23 describing the possibility of a refund or additional premium,
24 and upon request of any group or enrollment unit, provide to
25 the group or enrollment unit a description of the method used
26 to calculate (1) the Health Maintenance Organization's

1 profitable experience with respect to the group or enrollment
2 unit and the resulting refund to the group or enrollment unit
3 or (2) the Health Maintenance Organization's unprofitable
4 experience with respect to the group or enrollment unit and
5 the resulting additional premium to be paid by the group or
6 enrollment unit.

7 In no event shall the Illinois Health Maintenance
8 Organization Guaranty Association be liable to pay any
9 contractual obligation of an insolvent organization to pay any
10 refund authorized under this Section.

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

17 (Source: P.A. 102-30, eff. 1-1-22; 102-34, eff. 6-25-21;
18 102-203, eff. 1-1-22; 102-306, eff. 1-1-22; 102-443, eff.
19 1-1-22; 102-589, eff. 1-1-22; 102-642, eff. 1-1-22; 102-665,
20 eff. 10-8-21; 102-731, eff. 1-1-23; 102-775, eff. 5-13-22;
21 102-804, eff. 1-1-23; 102-813, eff. 5-13-22; 102-816, eff.
22 1-1-23; 102-860, eff. 1-1-23; 102-901, eff. 7-1-22; 102-1093,
23 eff. 1-1-23; 102-1117, eff. 1-13-23; 103-84, eff. 1-1-24;
24 103-91, eff. 1-1-24; 103-123, eff. 1-1-24; 103-154, eff.
25 6-30-23; 103-420, eff. 1-1-24; 103-426, eff. 8-4-23; 103-445,
26 eff. 1-1-24; 103-551, eff. 8-11-23; 103-605, eff. 7-1-24;

1 103-618, eff. 1-1-25; 103-649, eff. 1-1-25; 103-656, eff.
2 1-1-25; 103-700, eff. 1-1-25; 103-718, eff. 7-19-24; 103-751,
3 eff. 8-2-24; 103-753, eff. 8-2-24; 103-758, eff. 1-1-25;
4 103-777, eff. 8-2-24; 103-808, eff. 1-1-26; 103-914, eff.
5 1-1-25; 103-918, eff. 1-1-25; 103-1024, eff. 1-1-25; revised
6 11-26-24.)

7 Section 30. The Telehealth Act is amended by adding
8 Section 20 as follows:

9 (225 ILCS 150/20 new)

10 Sec. 20. Behavioral health crisis services delivered via
11 telehealth.

12 (a) Notwithstanding any existing regulation, to the
13 fullest extent permitted by federal law, all crisis services
14 listed under 89 Ill. Adm. Code 140.453(d)(3) of the Illinois
15 Administrative Code shall be permitted to be delivered via
16 telehealth where practical. This authorization shall apply to,
17 at minimum, Crisis Intervention, Mobile Crisis Response (both
18 Individual and Team), Crisis Stabilization, and Community
19 Stabilization. The Department may elect to establish
20 differential rates for telehealth services. The Department
21 shall have rulemaking authority to implement this Section.

22 (b) To ensure services may be provided without
23 administrative delay, no prior authorization or utilization
24 management control requirement shall be placed on any crisis

1 service delivered via telehealth under this Section.

2 Section 35. The Illinois Public Aid Code is amended by
3 adding Section 5-65 as follows:

4 (305 ILCS 5/5-65 new)

5 Sec. 5-65. Reimbursement for crisis services.

6 (a) For the purposes of this Section, "crisis services"
7 refers to any and all services defined under 89 Ill. Admin Code
8 140.453(d) (3), including, but not limited to, the following:

9 (1) Behavioral Health Hotline Services.

10 (2) Crisis Intervention.

11 (3) Mobile Crisis Response.

12 (4) Crisis Stabilization.

13 (5) 23-Hour Crisis Observation.

14 (6) Community Stabilization.

15 (7) Crisis Residential.

16 (8) Crisis Respite.

17 (b) Subject to federal approval and notwithstanding any
18 other provision of this Code, for dates of service beginning
19 on and after July 1, 2026, crisis services shall be covered and
20 reimbursed under the medical assistance program for persons
21 who are otherwise eligible for medical assistance under this
22 Article.

23 (c) All crisis services listed under 89 Ill. Adm. Code
24 140.453(d) (3) of the Illinois Administrative Code shall be

1 considered emergency services and shall not be subject to
2 prior authorization or other utilization management controls.

3 (d) The Department shall, no later than July 1, 2026,
4 ensure that all State-funded crisis services, including mobile
5 crisis and crisis stabilization services, include
6 reimbursement for services provided by Certified Recovery
7 Support Specialists and other similar behavioral health
8 professionals.

9 (e) The Department shall apply for any federal waiver or
10 Title XIX State Plan amendment, if required, to implement this
11 Section. The Department may adopt any rules, including
12 standards and criteria, necessary to implement this Section.

13 Section 40. The Strengthening and Transforming Behavioral
14 Health Crisis Care in Illinois Act is amended by changing
15 Section 1 and by adding Section 35 as follows:

16 (405 ILCS 160/1)

17 Sec. 1. Short title. This Act may be cited as the Crisis
18 Continuum Sustainability ~~Strengthening and Transforming~~
19 Behavioral Health Crisis Care in Illinois Act.

20 (Source: P.A. 103-337, eff. 7-28-23.)

21 (405 ILCS 160/35 new)

22 Sec. 35. Statewide Crisis Continuum Strategic Plan. On or
23 before December 31, 2028, and every 5 years thereafter, the

1 Department shall, subject to available funding and in
2 collaboration with relevant stakeholders and state bodies,
3 develop and submit a Statewide Crisis Continuum Strategic Plan
4 to the Office of the Governor and the General Assembly, with
5 the goal of ensuring every Illinoisan has timely access to
6 appropriate and supportive behavioral health response during a
7 behavioral health crisis. The strategic plan shall:

8 (1) identify statewide goals, key stakeholders, and
9 performance metrics for expanding access to behavioral
10 health crisis continuum services across Illinois;

11 (2) address gaps in service delivery, including
12 geographic disparities in crisis intervention and access
13 to services, and provide recommendations for addressing
14 these gaps;

15 (3) present strategies for improving data collection,
16 reporting, and analysis to better understand social and
17 demographic factors contributing to suicide and crisis
18 events in Illinois; and

19 (4) outline a sustainable funding framework to
20 maintain and expand the 9-8-8 hotline and Illinois's
21 crisis intervention infrastructure, including making
22 recommendations for legislative or regulatory changes to
23 streamline funding and reduce administrative burdens on
24 providers and residents in need of services.