



Sen. Laura Fine

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1 AMENDMENT TO SENATE BILL 1480

2 AMENDMENT NO. _____. Amend Senate Bill 1480 by replacing
3 everything after the enacting clause with the following:

4 "Section 5. The State Employees Group Insurance Act of
5 1971 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)

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

6 Section 15. The School Code is amended by adding Section
7 10-22.3g as follows:

8 (105 ILCS 5/10-22.3g new)

9 Sec. 10-22.3g. Behavioral health services; no utilization
10 or prior approval mandates. Insurance protection and benefits
11 for employees shall be subject to the provisions of Section
12 370c.3 of the Illinois Insurance Code requiring coverage of
13 crisis services as defined in 89 Ill. Adm. Code 140.453(d)(3).

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

16 (215 ILCS 5/370c.3 new)

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

18 (a) As used in this Section, "crisis services" refers to
19 any and all services defined under 89 Ill. Adm. Code
20 140.453(d)(3), including, but not limited to, the following:

21 (1) Crisis Intervention.

22 (2) Mobile Crisis Response.

1 (3) Crisis Stabilization.

2 (b) All group and individual health insurance policies
3 issued, delivered, amended, or renewed in Illinois on or after
4 January 1, 2027 that provide coverage for medical or surgical
5 conditions shall also provide coverage for crisis services for
6 mental health and substance use disorders, or their symptoms,
7 that are an emergency medical condition as defined by 42 CFR
8 438.114. Coverage shall not be subject to deductible,
9 copayment, or other cost-sharing requirements.

10 (c) For the purposes of credentialing and reimbursement of
11 crisis services, the network status of the psychiatrist or
12 licensed clinical leader of the crisis team shall qualify all
13 members of the crisis team to be credentialed with the
14 insurer, including members who are mental health
15 professionals, as defined in 59 Ill. Adm. Code Part 132, and
16 other medical professionals who are providing crisis services.

17 (d) All group and individual health insurance policies
18 shall not require prior authorization for crisis required
19 pursuant to this Section. Additionally, the Department shall
20 identify billing codes in consultation with the Department of
21 Healthcare and Family Services, and all commercial insurers
22 providing the required coverage under this Section shall adopt
23 and utilize the same billing codes for crisis services.

24 (e) Coverage required under this Section shall include
25 crisis services to the extent that the services are covered in
26 other settings or modalities, and coverage shall be required

1 regardless of a provider's network participation status.

2 (f) The Department shall adopt rules to enforce the
3 provisions of this Section.

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

6 (215 ILCS 125/5-3) (from Ch. 111 1/2, par. 1411.2)

7 Sec. 5-3. Insurance Code provisions.

8 (a) Health Maintenance Organizations shall be subject to
9 the provisions of Sections 133, 134, 136, 137, 139, 140,
10 141.1, 141.2, 141.3, 143, 143.31, 143c, 147, 148, 149, 151,
11 152, 153, 154, 154.5, 154.6, 154.7, 154.8, 155.04, 155.22a,
12 155.49, 352c, 355.2, 355.3, 355.6, 355b, 355c, 356f, 356g,
13 356g.5-1, 356m, 356q, 356u.10, 356v, 356w, 356x, 356z.2,
14 356z.3a, 356z.4, 356z.4a, 356z.5, 356z.6, 356z.8, 356z.9,
15 356z.10, 356z.11, 356z.12, 356z.13, 356z.14, 356z.15, 356z.17,
16 356z.18, 356z.19, 356z.20, 356z.21, 356z.22, 356z.23, 356z.24,
17 356z.25, 356z.26, 356z.28, 356z.29, 356z.30, 356z.31, 356z.32,
18 356z.33, 356z.34, 356z.35, 356z.36, 356z.37, 356z.38, 356z.39,
19 356z.40, 356z.40a, 356z.41, 356z.44, 356z.45, 356z.46,
20 356z.47, 356z.48, 356z.49, 356z.50, 356z.51, 356z.53, 356z.54,
21 356z.55, 356z.56, 356z.57, 356z.58, 356z.59, 356z.60, 356z.61,
22 356z.62, 356z.63, 356z.64, 356z.65, 356z.66, 356z.67, 356z.68,
23 356z.69, 356z.70, 356z.71, 356z.72, 356z.73, 356z.74, 356z.75,
24 356z.77, 364, 364.01, 364.3, 367.2, 367.2-5, 367i, 368a, 368b,

1 368c, 368d, 368e, 370c, 370c.1, 370c.3, 401, 401.1, 402, 403,
2 403A, 408, 408.2, 409, 412, 444, and 444.1, paragraph (c) of
3 subsection (2) of Section 367, and Articles IIA, VIII 1/2,
4 XII, XII 1/2, XIII, XIII 1/2, XXV, XXVI, and XXXIIB of the
5 Illinois Insurance Code. Section 370c.3 of the Illinois
6 Insurance Code is not applicable to health care plans
7 providing health care services for persons who are enrolled
8 under Article V of the Illinois Public Aid Code.

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

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

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

17 (3) a corporation organized under the laws of another
18 state, 30% or more of the enrollees of which are residents
19 of this State, except a corporation subject to
20 substantially the same requirements in its state of
21 organization as is a "domestic company" under Article VIII
22 1/2 of the Illinois Insurance Code.

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

26 (1) the Director shall give primary consideration to

1 the continuation of benefits to enrollees and the
2 financial conditions of the acquired Health Maintenance
3 Organization after the merger, consolidation, or other
4 acquisition of control takes effect;

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

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

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

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

24 (C) a pro forma business plan detailing an
25 acquiring party's plans with respect to the operation
26 of the Health Maintenance Organization sought to be

1 acquired for a period of not less than 3 years; and

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

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

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

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

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

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

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

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

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

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

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

1 eff. 1-1-24; 103-551, eff. 8-11-23; 103-605, eff. 7-1-24;
2 103-618, eff. 1-1-25; 103-649, eff. 1-1-25; 103-656, eff.
3 1-1-25; 103-700, eff. 1-1-25; 103-718, eff. 7-19-24; 103-751,
4 eff. 8-2-24; 103-753, eff. 8-2-24; 103-758, eff. 1-1-25;
5 103-777, eff. 8-2-24; 103-808, eff. 1-1-26; 103-914, eff.
6 1-1-25; 103-918, eff. 1-1-25; 103-1024, eff. 1-1-25; revised
7 11-26-24.)

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

10 (225 ILCS 150/20 new)

11 Sec. 20. Behavioral health crisis services delivered via
12 telehealth. 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 through
16 telehealth when considered clinically appropriate and in line
17 with standards of care and only at the request of or with the
18 consent of the patient.

19 Section 35. The Strengthening and Transforming Behavioral
20 Health Crisis Care in Illinois Act is amended by changing
21 Section 1 and by adding Section 35 as follows:

22 (405 ILCS 160/1)

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

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

5 (405 ILCS 160/35 new)

6 Sec. 35. Statewide Crisis Continuum Strategic Plan. On or
7 before December 31, 2028, and every 5 years thereafter, the
8 Department shall, subject to available funding and in
9 collaboration with relevant stakeholders and State bodies,
10 develop and submit a Statewide Crisis Continuum Strategic Plan
11 to the Office of the Governor and the General Assembly, with
12 the goal of ensuring every Illinoisan has timely access to
13 appropriate and supportive behavioral health response during a
14 behavioral health crisis. The strategic plan shall:

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

18 (2) address gaps in service delivery, including
19 geographic disparities in crisis intervention and access
20 to services, and provide recommendations for addressing
21 these gaps;

22 (3) present strategies for improving data collection,
23 reporting, and analysis to better understand social and
24 demographic factors contributing to suicide and crisis
25 events in Illinois; and

1 (4) outline a sustainable funding framework to
2 maintain and expand the 9-8-8 hotline and Illinois's
3 crisis continuum infrastructure, including making
4 recommendations for legislative or regulatory changes to
5 streamline funding and reduce administrative burdens on
6 providers and residents in need of services."