



101ST GENERAL ASSEMBLY

State of Illinois

2019 and 2020

HB3188

by Rep. Deanne M. Mazzochi

SYNOPSIS AS INTRODUCED:

215 ILCS 5/370b.2 new
215 ILCS 125/4-21 new
305 ILCS 5/5-16.8

Amends the Illinois Insurance Code. Provides that if an insured is required to pay a deductible or copayment under a policy, an accident and health insurer must disclose to the insured the total actual payments made by the accident and health insurer to a health care provider and the basis for the deductible or copayment the insured is required to pay. Provides that if an accident and health insurer pays a claim to a healthcare provider at an agreed-upon or discounted rate, then the accident and health insurer must base the insured's deductible or copayment upon the agreed-upon or discounted rate rather than any other advertised or listed rate. Amends the Health Maintenance Organization Act and the Illinois Public Aid Code. Provides the basis for calculation of a deductible or copayment.

LRB101 10901 SMS 56048 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 Illinois Insurance Code is amended by adding
5 Section 370b.2 as follows:

6 (215 ILCS 5/370b.2 new)

7 Sec. 370b.2. Deductibles and copayments.

8 (a) If an insured is required to pay a deductible or
9 copayment under a policy, an accident and health insurer must
10 disclose to the insured the total actual payments made by the
11 accident and health insurer to a health care provider and the
12 basis for the deductible or copayment the insured is required
13 to pay.

14 (b) If an accident and health insurer pays a claim to a
15 health care provider at an agreed-upon or discounted rate, then
16 the accident and health insurer must base the insured's
17 deductible or copayment upon the agreed-upon or discounted rate
18 rather than any other advertised or listed rate.

19 Section 10. The Health Maintenance Organization Act is
20 amended by adding Section 4-21 as follows:

21 (215 ILCS 125/4-21 new)

1 Sec. 4-21. Calculation of deductible and copayments. If an
2 enrollee is required to pay a deductible or a copayment for a
3 health care service that is determined based upon the cost for
4 a health care service, then the deductible or copayment for
5 that health care service shall be based off the agreed-upon or
6 discounted rate paid to the provider. If the provider is not
7 paid per individual health care service, then the deductible or
8 copayment must be based upon the average net payment to a
9 specific provider for that health care service.

10 Section 15. The Illinois Public Aid Code is amended by
11 changing Section 5-16.8 as follows:

12 (305 ILCS 5/5-16.8)

13 Sec. 5-16.8. Required health benefits. The medical
14 assistance program shall (i) provide the post-mastectomy care
15 benefits required to be covered by a policy of accident and
16 health insurance under Section 356t and the coverage required
17 under Sections 356g.5, 356u, 356w, 356x, 356z.6, 356z.26, ~~and~~
18 356z.29, and 356z.32 of the Illinois Insurance Code and (ii) be
19 subject to the provisions of Sections 356z.19, 364.01, 370b.2,
20 370c, and 370c.1 of the Illinois Insurance Code.

21 On and after July 1, 2012, the Department shall reduce any
22 rate of reimbursement for services or other payments or alter
23 any methodologies authorized by this Code to reduce any rate of
24 reimbursement for services or other payments in accordance with

1 Section 5-5e.

2 To ensure full access to the benefits set forth in this
3 Section, on and after January 1, 2016, the Department shall
4 ensure that provider and hospital reimbursement for
5 post-mastectomy care benefits required under this Section are
6 no lower than the Medicare reimbursement rate.

7 (Source: P.A. 99-433, eff. 8-21-15; 99-480, eff. 9-9-15;
8 99-642, eff. 7-28-16; 100-138, eff. 8-18-17; 100-863, eff.
9 8-14-18; 100-1057, eff. 1-1-19; 100-1102, eff. 1-1-19; revised
10 10-4-18.)