



Rep. Greg Harris

**Filed: 3/19/2021**

10200HB1745ham001

LRB102 14220 BMS 24017 a

1 AMENDMENT TO HOUSE BILL 1745

2 AMENDMENT NO. \_\_\_\_\_. Amend House Bill 1745 by replacing  
3 everything after the enacting clause with the following:

4 "Section 5. The Managed Care Reform and Patient Rights Act  
5 is amended by adding Section 45.3 as follows:

6 (215 ILCS 134/45.3 new)

7 Sec. 45.3. Prescription drug benefits; plan choice.

8 (a) Notwithstanding any other provision of law, beginning  
9 January 1, 2023, every health insurance carrier that offers an  
10 individual health plan that provides coverage for prescription  
11 drugs shall ensure that at least 10% of individual health care  
12 plans offered in each applicable service area and at each  
13 level of coverage as defined in 42 U.S.C. 18022 apply a  
14 flat-dollar copayment structure to the entire drug benefit.  
15 Beginning January 1, 2024, every health insurance carrier that  
16 offers an individual health plan that provides coverage for

1 prescription drugs shall ensure that at least 25% of  
2 individual health care plans offered in each applicable  
3 service area and at each level of coverage as defined in 42  
4 U.S.C. 18022 apply a flat-dollar copayment structure to the  
5 entire drug benefit. If a health insurance carrier offers  
6 fewer than 4 plans in a service area, then the health insurance  
7 carrier shall ensure that one plan applies a flat-dollar  
8 copayment structure to the entire drug benefit.

9 (b) Beginning January 1, 2023, every health insurance  
10 carrier that offers a group health plan that provides coverage  
11 for prescription drugs shall offer at least one group health  
12 plan in each applicable service area and at each level of  
13 coverage as defined in 42 U.S.C. 18022 that applies a  
14 flat-dollar copayment structure to the entire drug benefit.  
15 Beginning January 1, 2024, every health insurance carrier that  
16 offers a group health plan that provides coverage for  
17 prescription drugs shall offer at least 2 group health plans  
18 in each applicable service area and at each level of coverage  
19 as defined in 42 U.S.C. 18022 that apply a flat-dollar  
20 copayment structure to the entire drug benefit.

21 (c) The flat-dollar copayment structure for prescription  
22 drugs under subsections (a) and (b) must be applied  
23 pre-deductible and be reasonably graduated and proportionately  
24 related in all tier levels such that the copayment structure  
25 as a whole does not discriminate against or discourage the  
26 enrollment of individuals with significant health care needs.

1       (d) A health insurance carrier that offers individual or  
2 group health care plans shall clearly and appropriately name  
3 the plans described in subsections (a) and (b) to aid in the  
4 individual or group plan selection process.

5       (e) A health insurance carrier shall market plans  
6 described in subsections (a) and (b) in the same manner as  
7 plans not described in subsections (a) and (b).

8       (f) The Department shall adopt rules necessary to  
9 implement and enforce the provisions of this Section.

10       Section 99. Effective date. This Act takes effect January  
11 1, 2023."