



102ND GENERAL ASSEMBLY

State of Illinois

2021 and 2022

HB5399

Introduced 1/31/2022, by Rep. Norine K. Hammond

SYNOPSIS AS INTRODUCED:

215 ILCS 5/356z.53 new

Amends the Illinois Insurance Code. Provides that an individual or group policy of accident and health insurance that is amended, delivered, issued, or renewed on or after January 1, 2024 shall cover a medically necessary hypofractionated proton therapy protocol to deliver a biological effective dose by paying the same aggregate amount as would be paid for the delivery of the same biological effective dose with a standard radiation therapy protocol delivered with intensity modulated radiation therapy for the same indication if specified conditions are satisfied. Provides standards concerning the aggregate amount chargeable to or payable by an eligible patient for a covered course of hypofractionated proton therapy. Provides that proton therapy coverage may not impose an annual deductible, coinsurance, or other cost-sharing limitation that is greater than that required for radiation therapy and other similar benefits within the insurance policy or contract. Defines terms. Effective January 1, 2023.

LRB102 25959 BMS 35349 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
5 adding Section 356z.53 as follows:

6 (215 ILCS 5/356z.53 new)

7 Sec. 356z.53. Proton therapy access.

8 (a) As used in this Section:

9 "Aggregate amount" means the total amount paid under an
10 individual or group policy of accident and health insurance
11 for the applicable radiation treatment delivery current
12 procedural terminology codes to deliver a biological effective
13 dose.

14 "Biological effective dose" means the total prescribed
15 radiation dose delivered in a course of radiation therapy
16 treatments to induce tumor cell death.

17 "Current procedural terminology code" means the unique
18 numerical designations established by the American Medical
19 Association for various medical, surgical, and diagnostic
20 services used in billing health care services.

21 "Eligible patient" means a cancer patient who is approved
22 for a standard radiation therapy protocol delivered with IMRT
23 and prescribed a hypofractionated proton therapy protocol for

1 the treatment of the same cancer.

2 "Hypofractionated proton therapy protocol" means a cancer
3 treatment protocol that involves the delivery of fewer, larger
4 radiation therapy treatment doses than a standard radiation
5 therapy protocol to deliver a biological effective dose.

6 "Intensity modulated radiation therapy" or "IMRT" means a
7 type of conformal radiation therapy that delivers x-ray
8 radiation beams of different intensities from many angles for
9 the treatment of tumors.

10 "Proton therapy" means the advanced form of radiation
11 therapy that utilizes protons as the radiation delivery method
12 for the treatment of tumors.

13 "Radiation therapy" means the delivery of a biological
14 effective dose with proton therapy, IMRT, brachytherapy,
15 stereotactic body radiation therapy, three-dimensional
16 conformal radiation therapy, or other forms of therapy using
17 radiation.

18 "Registry" means an organized system that uses
19 observational study methods to collect uniform clinical data
20 to evaluate specified outcomes for a population defined by a
21 particular disease and is compliant with the principles
22 established by the Registries for Evaluating Patient Outcomes:
23 A User's Guide - Third Edition published by the Agency for
24 Healthcare Research and Quality of the U.S. Department of
25 Health and Human Services.

26 "Standard radiation therapy protocol" means a cancer

1 treatment protocol that involves the delivery of radiation
2 therapy treatment doses over an extended period of time to
3 deliver a biological effective dose.

4 "Treatment dose" means the amount of radiation delivered
5 in a single treatment or fraction of radiation therapy.

6 (b) An individual or group policy of accident and health
7 insurance that is amended, delivered, issued, or renewed on or
8 after January 1, 2024 shall cover a medically necessary
9 hypofractionated proton therapy protocol to deliver a
10 biological effective dose by paying the same aggregate amount
11 as would be paid for the delivery of the same biological
12 effective dose with a standard radiation therapy protocol
13 delivered with IMRT for the same indication if the following
14 conditions are satisfied:

15 (1) coverage is provided to an eligible patient who is
16 being treated as part of a clinical trial or registry;

17 (2) the eligible patient is diagnosed with a cancer
18 type or indication that can be treated with a
19 hypofractionated proton therapy protocol; and

20 (3) the radiation oncologist prescribing the
21 hypofractionated proton therapy protocol is board
22 certified or board eligible in the specialty of radiation
23 oncology.

24 (c) If coverage of a hypofractionated proton therapy
25 protocol is required pursuant to subsection (b), then:

26 (1) the aggregate amount must be equal to the average

1 cost actually paid by an individual or group policy of
2 accident and health insurance for a standard radiation
3 therapy protocol delivered with IMRT required to deliver
4 the prescribed biological effective dose for the
5 particular indication. For the purposes of this paragraph
6 (1), aggregate amounts must be established by reference to
7 the amount paid for a course of IMRT treatment under a
8 standard radiation therapy protocol delivered with IMRT
9 for the indication under the applicable policy; and

10 (2) coverage may not impose an annual deductible,
11 coinsurance, or other cost-sharing limitation that is
12 greater than that required for radiation therapy and other
13 similar benefits within the insurance policy or contract.

14 (d) Notwithstanding any other provision of this Section to
15 the contrary, the aggregate amount:

16 (1) reimbursed for the hypofractionated proton therapy
17 protocol must not exceed the average aggregate amount paid
18 by an individual or group policy of accident and health
19 insurance for a course of IMRT treatment under a standard
20 radiation therapy protocol delivered with IMRT to deliver
21 the prescribed biological effective dose for the same
22 indication;

23 (2) chargeable to or payable by an eligible patient
24 for a covered course of hypofractionated proton therapy by
25 an in-network provider must not exceed the aggregate
26 amount that would otherwise be chargeable to or payable by

1 the eligible patient for a course of IMRT treatment under
2 a standard radiation therapy protocol delivered with IMRT
3 that is covered by the applicable policy for the delivery
4 of the same biological effective dose by an in-network
5 provider; and

6 (3) chargeable to or payable by an eligible patient
7 for a covered course of hypofractionated proton therapy by
8 an out-of-network provider must not exceed the aggregate
9 amount that would otherwise be chargeable to or payable by
10 the eligible patient for a course of treatment under a
11 standard radiation therapy protocol delivered with IMRT
12 that is covered by the applicable policy for the delivery
13 of the same biological effective dose by an out-of-network
14 provider. However, the patient is not responsible for
15 amounts greater than the allowable maximum charge.

16 Section 99. Effective date. This Act takes effect January
17 1, 2023.