1 AN ACT concerning health.

Be it enacted by the People of the State of Illinois, represented in the General Assembly:

- Section 5. The Illinois Insurance Code is amended by adding Section 356z.71 as follows:
- 6 (215 ILCS 5/356z.71 new)

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- Sec. 356z.71. Coverage for home test kits for sexually transmitted infections (STIs).
- 9 (a) As used in this Section, "home test kit" means a product used for a test recommended by the federal Centers for 10 Disease Control and Prevention guidelines or the United States 11 12 Preventive Services Task Force that has received a certificate of waiver under the Clinical Laboratory Improvement Amendments 13 14 to the federal Public Health Services Act, has been cleared or approved by the United States Food and Drug Administration, or 15 has been developed by a laboratory in accordance with 16 established regulations and quality standards, to allow 17 individuals to self-collect specimens for STIs, including HIV, 18 19 remotely at a location outside of a clinical setting.
 - (b) An individual or group policy of accident and health insurance amended, delivered, issued, or renewed in this State after January 1, 2026 shall provide coverage for home test kits for sexually transmitted infections, including any

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- (1) A commercial health care plan is required to cover the services outlined in this subsection when ordered for an enrollee by an in-network provider.
- (2) Except as otherwise provided in this subsection, a policy subject to this subsection shall not impose a deductible, coinsurance, copayment, or any other cost-sharing requirement on the coverage provided. The provisions of this subsection do not apply to coverage of procedures to the extent such coverage would disqualify a high-deductible health plan from eligibility for a health savings account pursuant to the federal Internal Revenue Code, 26 U.S.C. 223.
- (3) Except as otherwise authorized under this Section, a policy shall not impose any restrictions or delays on the coverage required under this Section.
- (4) If a plan or issuer uses a network of providers, nothing in this Section shall be construed to require coverage or to prohibit the plan or issuer from imposing cost-sharing for items or services described in this Section that are provided or delivered by an out-of-network provider, unless the plan or issuer does not have in its network a provider who is able to or is

willing to provide the applicable items or services. 1

- Section 10. The Illinois Public Aid Code is amended by 2 3 changing Section 5-16.8 as follows:
- (305 ILCS 5/5-16.8) 4
- 5 5-16.8. Required health benefits. The medical assistance program shall (i) provide the post-mastectomy care 6 7 benefits required to be covered by a policy of accident and 8 health insurance under Section 356t and the coverage required 9 under Sections 356q.5, 356q, 356u, 356w, 356x, 356z.6, 10 356z.26, 356z.29, 356z.32, 356z.33, 356z.34, 356z.35, 356z.46, 11 356z.47, 356z.51, 356z.53, 356z.56, 356z.59, 356z.60, and 356z.61, 356z.64, 356z.67, and 356z.71 of the 12 Illinois 13 Insurance Code, (ii) be subject to the provisions of Sections 14 356z.19, 356z.44, 356z.49, 364.01, 370c, and 370c.1 of the 15 Illinois Insurance Code, and (iii) be subject to the provisions of subsection (d-5) of Section 10 of the Network 16 17 Adequacy and Transparency Act.
- The Department, by rule, shall adopt a model similar to 18 the requirements of Section 356z.39 of the Illinois Insurance 19 20 Code.
- 21 On and after July 1, 2012, the Department shall reduce any rate of reimbursement for services or other payments or alter 22 23 any methodologies authorized by this Code to reduce any rate 24 of reimbursement for services or other payments in accordance

- with Section 5-5e. 1
- 2 To ensure full access to the benefits set forth in this
- Section, on and after January 1, 2016, the Department shall 3
- ensure that provider and hospital reimbursement 4
- 5 post-mastectomy care benefits required under this Section are
- no lower than the Medicare reimbursement rate. 6
- (Source: P.A. 102-30, eff. 1-1-22; 102-144, eff. 1-1-22; 7
- 8 102-203, eff. 1-1-22; 102-306, eff. 1-1-22; 102-530, eff.
- 1-1-22; 102-642, eff. 1-1-22; 102-804, eff. 1-1-23; 102-813, 9
- eff. 5-13-22; 102-816, eff. 1-1-23; 102-1093, eff. 1-1-23; 10
- 11 102-1117, eff. 1-13-23; 103-84, eff. 1-1-24; 103-91, eff.
- 12 1-1-24; 103-420, eff. 1-1-24; revised 12-15-23.)
- Section 15. The AIDS Confidentiality Act is amended by 13
- 14 adding Section 5.6 as follows:
- 15 (410 ILCS 305/5.6 new)
- Sec. 5.6. Illinois AIDS Drug Assistance Program. 16
- 17 (a) The purpose of this Section is to expand and assist
- with implementation of the Rapid Start for HIV treatment 18
- model. The pilot sites will allow the development of a 19
- 20 coordinated system of health care services to provide timely
- 21 and quality HIV treatment. This will occur by increasing the
- 22 capacity of the Department of Public Health and build toward
- 23 establishing the Rapid Start model as the standard of care for
- HIV treatment. This program shall be known as the Illinois 24

AIDS Drug Assistance Program or Illinois ADAP.

- 2 (b) In this Section:
- "Conditional approval" means Illinois ADAP approval within 3
- 4 one business day after submission of documentation of Illinois
- 5 residency, a program agreement form, and an attestation of
- remaining eligibility requirements. 6
- 7 "Rapid Start for HIV Treatment" means initiating
- 8 antiretroviral therapy within 7 days after initial diagnosis
- 9 or within 7 days after referral to HIV medical care as defined
- 10 by the Centers for Disease Control and Prevention
- 11 recommendations for HIV treatment.
- 12 (c) Beginning January 1, 2026, Illinois ADAP shall
- establish a pathway for conditional approval of Illinois ADAP 13
- 14 enrollment for new applicants seeking to enter or reenter
- medical care. Applicants receiving conditional approval on or 15
- 16 after January 1, 2026 will have 30 days to submit a complete
- 17 Illinois ADAP application, addressing all remaining
- 18 eligibility requirements.
- 19 (d) The Department of Public Health shall establish one
- 20 Rapid Start for HIV Treatment pilot site per HIV Care Connect
- 21 Region. The Department may implement processes and adopt rules
- 22 to implement this pilot program in accordance with industry
- 23 standards informed by the most current Centers for Disease
- 24 Control and Prevention and Health Resources and Services
- 25 Administration guidance on HIV care and treatment.
- (e) The pilot sites shall abide by the following 26

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- (1) Nothing About Us Without Us: Pilot site programs and services shall be formulated with transparency, community involvement, and direct ongoing input by people living with and vulnerable to HIV.
- (2) Equity: Pilot site programs <u>and services shall</u> provide equitable support, services, and resources to all participants and ensure accessibility to the greatest extent possible.
- (3) Self-Determination: Pilot site programs and services shall prioritize individual dignity and autonomy in decision-making while encouraging people to connect with additional services that promote health and well-being.
- (4) Reduce Stigma: Pilot site programs and services shall affirm the humanity and dignity of people living with or vulnerable to HIV and shall operate in a way that is welcoming to reduce stigma and build trust.
- (5) Safe Spaces: Pilot site programs and services shall prioritize relationship-building and trust among partners, staff, and participants to create safe spaces.
- (f) The Department shall compile reports from each of the pilot sites on the operation of the pilot program upon completion of the pilot period. The Department shall share a comprehensive report summarizing the findings of the pilot period with the General Assembly and the Governor's Office and

1	shall make it publicly available on its Internet website. The
2	report may include:
3	(1) the number offers made for enrollment;
4	(2) the number of enrolled participants;
5	(3) the number and reasons of patients declined for
6	service, when available; and
7	(4) the length of time from initial diagnosis or
8	referral to the start of HIV treatment, and, when
9	available, the length of time participants were able to
10	achieve an undetectable viral load.
11	Data shall also include demographic data on the race,
12	ethnicity, age, sex, disability status, sexual orientation,
13	gender identity, and primary or preferred language of program
14	participants in accordance with the Data Governance and
15	Organization to Support Equity and Racial Justice Act. The
16	reports shall inform the Department's decisions concerning the
17	continued operation of the Rapid Start for HIV treatment pilot
18	program and its expansion, modification, discontinuation, or
19	progress towards becoming the standard of care for HIV
20	treatment. The contents of the report shall be in accordance
21	with the AIDS Confidentiality Act.
22	Implementation of this Section is subject to
23	appropriations made to the Illinois Department of Public
24	Health for that purpose.

Section 20. The County Jail Act is amended by changing

Section 17.10 as follows: 1

(730 ILCS 125/17.10) 2

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3 Sec. 17.10. Requirements in connection with HIV/AIDS.

- (a) In each county other than Cook, during the medical admissions exam, the warden of the jail, a correctional officer at the jail, or a member of the jail medical staff must provide the prisoner with appropriate written information concerning human immunodeficiency virus (HIV) and acquired immunodeficiency syndrome (AIDS). The Department of Public Health and community-based organizations certified to provide HIV/AIDS testing must provide these informational materials to the warden at no cost to the county. The warden, a correctional officer, or a member of the jail medical staff must inform the prisoner of the option of being tested for infection with HIV by a certified local community-based agency or other available medical provider at no charge to the prisoner.
- (b) In Cook County, during the medical admissions exam, an employee of the Cook County Health & Hospitals System must provide the prisoner with appropriate information in writing, verbally or by video or other electronic means concerning human immunodeficiency virus acquired (HIV) and immunodeficiency syndrome (AIDS) and must also provide the prisoner with option of testing for infection with HIV or any other identified causative agent of AIDS, as well counseling in connection with such testing. The Cook County

Health & Hospitals System may provide the inmate with opt-out 1 2 human immunodeficiency virus (HIV) testing, as defined in 3 Section 4 of the AIDS Confidentiality Act, unless the inmate refuses. If opt-out HIV testing is conducted, the Cook County 5 Health & Hospitals System shall place signs in English, Spanish, and other languages as needed in multiple, highly 6 visible locations in the area where HIV testing is conducted 7 8 informing inmates that they will be tested for HIV unless they 9 refuse, and refusal or acceptance of testing shall be 10 documented in the inmate's medical record. Pre-test 11 information shall be provided to the inmate and informed 12 consent obtained from the inmate as required in subsection (q) 13 of Section 3 and Section 5 of the AIDS Confidentiality Act. The 14 Cook County Health & Hospitals System shall follow procedures 15 established by the Department of Public Health to conduct HIV 16 testing and testing to confirm positive HIV test results. All 17 aspects of HIV testing shall comply with the requirements of the AIDS Confidentiality Act, including delivery of test 18 results, as determined by the Cook County Health & Hospitals 19 System in consultation with the Illinois Department of Public 20 Health. Nothing in this Section shall require the Cook County 21 22 Health & Hospitals System to offer HIV testing to inmates who 23 are known to be infected with HIV. The Department of Public Health and community-based organizations certified to provide 24 25 HIV/AIDS testing may provide these informational materials to 26 the Bureau at no cost to the county. The testing provided under

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- (b-5) The Department of Corrections shall include the following information in the annual adult correctional facility public inspection report for each county:
 - (1) whether the warden of the jail, a correctional officer at the jail, or a member of the jail medical staff provide the prisoner with appropriate written information concerning HIV and AIDS during the medical admissions exam;
 - (2) whether the warden, a correctional officer, or a member of the jail medical staff informs the prisoner of the option of being tested for infection with HIV by a certified local community-based agency or other available medical provider at no charge to the prisoner;
 - (3) whether the warden of the jail makes appropriate written information or visual aids concerning HIV/AIDS available to every visitor to the jail;
 - (4) for Cook County, whether an employee of the Cook County Health and Hospitals System provides the prisoner with appropriate information in writing, verbally, or by

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1	<u>video</u>	or	other	el	ectronic	me	ans c	concerning	HIV	and	AIDS
2	during	the	medic	al	admissio	ns	exam;	and			

- (5) for Cook County, whether an employee of the Cook County Health and Hospitals System provides the prisoner with the option of testing for infection with HIV or any other identified causative agent of AIDS, as well as counseling in connection with such testing.
- The Department of Public Health and community-based organizations certified to provide HIV/AIDS testing shall provide these informational materials to the warden at no cost to the office of the county sheriff.
- (c) In each county, the warden of the jail must make appropriate written information concerning HIV/AIDS available to every visitor to the jail. This information must include information concerning persons or entities to contact for local counseling and testing. The Department of Public Health and community-based organizations certified to provide HIV/AIDS testing must provide these informational materials to the warden at no cost to the office of the county sheriff.
- 20 (d) Implementation of this Section is subject to 21 appropriation.
- 22 (Source: P.A. 97-244, eff. 8-4-11; 97-323, eff. 8-12-11;
- 23 97-813, eff. 7-13-12; 98-1046, eff. 1-1-15.)