



Rep. Lou Lang

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LRB094 02888 LJB 44271 a

1 AMENDMENT TO HOUSE BILL 2190

2 AMENDMENT NO. \_\_\_\_\_. Amend House Bill 2190 by replacing  
3 everything after the enacting clause with the following:

4 "Section 5. The Illinois Insurance Code is amended by  
5 changing Section 370c as follows:

6 (215 ILCS 5/370c) (from Ch. 73, par. 982c)

7 Sec. 370c. Mental and emotional disorders.

8 (a) (1) On and after the effective date of this Section,  
9 every insurer which delivers, issues for delivery or renews or  
10 modifies group A&H policies providing coverage for hospital or  
11 medical treatment or services for illness on an  
12 expense-incurred basis shall offer to the applicant or group  
13 policyholder subject to the insurers standards of  
14 insurability, coverage for reasonable and necessary treatment  
15 and services for mental, emotional or nervous disorders or  
16 conditions, other than serious mental illnesses as defined in  
17 item (2) of subsection (b), up to the limits provided in the  
18 policy for other disorders or conditions, except (i) the  
19 insured may be required to pay up to 50% of expenses incurred  
20 as a result of the treatment or services, and (ii) the annual  
21 benefit limit may be limited to the lesser of \$10,000 or 25% of  
22 the lifetime policy limit.

23 (2) Each insured that is covered for mental, emotional or  
24 nervous disorders or conditions shall be free to select the

1 physician licensed to practice medicine in all its branches,  
2 licensed clinical psychologist, licensed clinical social  
3 worker, or licensed clinical professional counselor of his  
4 choice to treat such disorders, and the insurer shall pay the  
5 covered charges of such physician licensed to practice medicine  
6 in all its branches, licensed clinical psychologist, licensed  
7 clinical social worker, or licensed clinical professional  
8 counselor up to the limits of coverage, provided (i) the  
9 disorder or condition treated is covered by the policy, and  
10 (ii) the physician, licensed psychologist, licensed clinical  
11 social worker, or licensed clinical professional counselor is  
12 authorized to provide said services under the statutes of this  
13 State and in accordance with accepted principles of his  
14 profession.

15 (3) Insofar as this Section applies solely to licensed  
16 clinical social workers and licensed clinical professional  
17 counselors, those persons who may provide services to  
18 individuals shall do so after the licensed clinical social  
19 worker or licensed clinical professional counselor has  
20 informed the patient of the desirability of the patient  
21 conferring with the patient's primary care physician and the  
22 licensed clinical social worker or licensed clinical  
23 professional counselor has provided written notification to  
24 the patient's primary care physician, if any, that services are  
25 being provided to the patient. That notification may, however,  
26 be waived by the patient on a written form. Those forms shall  
27 be retained by the licensed clinical social worker or licensed  
28 clinical professional counselor for a period of not less than 5  
29 years.

30 (b) (1) An insurer that provides coverage for hospital or  
31 medical expenses under a group policy of accident and health  
32 insurance or health care plan amended, delivered, issued, or  
33 renewed after the effective date of this amendatory Act of the  
34 92nd General Assembly shall provide coverage under the policy

1 for treatment of serious mental illness under the same terms  
2 and conditions as coverage for hospital or medical expenses  
3 related to other illnesses and diseases. The coverage required  
4 under this Section must provide for same durational limits,  
5 amount limits, deductibles, and co-insurance requirements for  
6 serious mental illness as are provided for other illnesses and  
7 diseases. This subsection does not apply to coverage provided  
8 to employees by employers who have 50 or fewer employees.

9 (2) "Serious mental illness" means the following  
10 psychiatric illnesses as defined in the most current edition of  
11 the Diagnostic and Statistical Manual (DSM) published by the  
12 American Psychiatric Association:

13 (A) schizophrenia;

14 (B) paranoid and other psychotic disorders;

15 (C) bipolar disorders (hypomanic, manic, depressive,  
16 and mixed);

17 (D) major depressive disorders (single episode or  
18 recurrent);

19 (E) schizoaffective disorders (bipolar or depressive);

20 (F) pervasive developmental disorders;

21 (G) obsessive-compulsive disorders;

22 (H) depression in childhood and adolescence; ~~and~~

23 (I) panic disorder; and

24 (J) post-traumatic stress disorders (acute, chronic,  
25 or with delayed onset).

26 (3) Upon request of the reimbursing insurer, a provider of  
27 treatment of serious mental illness shall furnish medical  
28 records or other necessary data that substantiate that initial  
29 or continued treatment is at all times medically necessary. An  
30 insurer shall provide a mechanism for the timely review by a  
31 provider holding the same license and practicing in the same  
32 specialty as the patient's provider, who is unaffiliated with  
33 the insurer, jointly selected by the patient (or the patient's  
34 next of kin or legal representative if the patient is unable to

1 act for himself or herself), the patient's provider, and the  
2 insurer in the event of a dispute between the insurer and  
3 patient's provider regarding the medical necessity of a  
4 treatment proposed by a patient's provider. If the reviewing  
5 provider determines the treatment to be medically necessary,  
6 the insurer shall provide reimbursement for the treatment.  
7 Future contractual or employment actions by the insurer  
8 regarding the patient's provider may not be based on the  
9 provider's participation in this procedure. Nothing prevents  
10 the insured from agreeing in writing to continue treatment at  
11 his or her expense. When making a determination of the medical  
12 necessity for a treatment modality for serious mental illness,  
13 an insurer must make the determination in a manner that is  
14 consistent with the manner used to make that determination with  
15 respect to other diseases or illnesses covered under the  
16 policy, including an appeals process.

17 (4) A group health benefit plan:

18 (A) shall provide coverage based upon medical  
19 necessity for the following treatment of mental illness in  
20 each calendar year;

21 (i) 45 days of inpatient treatment; and

22 (ii) 35 visits for outpatient treatment including  
23 group and individual outpatient treatment;

24 (B) may not include a lifetime limit on the number of  
25 days of inpatient treatment or the number of outpatient  
26 visits covered under the plan; and

27 (C) shall include the same amount limits, deductibles,  
28 copayments, and coinsurance factors for serious mental  
29 illness as for physical illness.

30 (5) An issuer of a group health benefit plan may not count  
31 toward the number of outpatient visits required to be covered  
32 under this Section an outpatient visit for the purpose of  
33 medication management and shall cover the outpatient visits  
34 under the same terms and conditions as it covers outpatient

1 visits for the treatment of physical illness.

2 (6) An issuer of a group health benefit plan may provide or  
3 offer coverage required under this Section through a managed  
4 care plan.

5 (7) This Section shall not be interpreted to require a  
6 group health benefit plan to provide coverage for treatment of:

7 (A) an addiction to a controlled substance or cannabis  
8 that is used in violation of law; or

9 (B) mental illness resulting from the use of a  
10 controlled substance or cannabis in violation of law.

11 (8) This subsection (b) is inoperative after December 31,  
12 2005.

13 (Source: P.A. 92-182, eff. 7-27-01; 92-185, eff. 1-1-02;  
14 92-651, eff. 7-11-02.)

15 Section 99. Effective date. This Act takes effect upon  
16 becoming law."