



Weekly Legislative Report

ILLINOIS RADIOLOGICAL SOCIETY

By: Jessica Nardulli & Tom Ryder

Legislative Update and Report prepared for *Illinois Radiological Society* for the week beginning February 16, 2015.

This week the legislative schedule shifts from its usual Tuesday afternoon, Wednesday and Thursday morning schedule for committees. The Senate is taking the week off and the House meets one day later than usual to accommodate the Municipal Primary Election held on Tuesday, February 24. This week, and for the next four weeks, the House will consider bills filed by Representatives.

This Friday is the deadline for the introduction of bills in the House. Both the Senate and the House have set March 27 as the deadline for consideration of substantive bills in committees.

Legislation new to the report and changes in bill status are highlighted in yellow. If you should have any questions, or need additional information, please feel free to contact us.

ILLINOIS RADIOLOGICAL SOCIETY

HB 76

Committee Hearing:

Health Care Availability and Accessibility Committee Hearing Feb 25 2015
4:00PM Capitol Building Room 115 Springfield, IL

Short Description: INSURANCE-TELEHEALTH

House Sponsors

Rep. Lou Lang-Sara Feigenholtz

Synopsis As Introduced

Amends the Illinois Insurance Code. Provides that each insured residing in an area designated as a mental health professional shortage area may obtain services from professionals licensed under the Illinois Alcoholism and Other Drug Abuse and Dependency Act through the use of telehealth services.

Last Action

Date	Chamber	Action
2/3/2015	House	Assigned to Health Care Availability and Accessibility Committee

HB 316

Short Description: MEDICAID-DEMONSTRATION PROJECT

House Sponsors

Rep. Greg Harris

Synopsis As Introduced

Amends the Illinois Public Aid Code. Prohibits the State from accepting any special terms and conditions for federal approval of any Medicaid research and demonstration project waiver proposal submitted to the U.S. Department of Health and Human Services on June 4, 2014. Effective immediately.

Last Action

Date	Chamber	Action
2/13/2015	House	Assigned to Appropriations-Human Services Committee

HB 1344

Short Description: MEDICAID-DEMONSTRATION PROJECT

KEY LEGISLATION

- SB 54 (Mulroe) – Insurance-Mammograms

House Sponsors

Rep. Greg Harris

Synopsis As Introduced

Amends the Illinois Public Aid Code. Prohibits the State from accepting any special terms and conditions for federal approval of any Medicaid research and demonstration project waiver proposal submitted to the U.S. Department of Health and Human Services on June 4, 2014. Requires the State to immediately withdraw all pending Section 1115 research and demonstration project waiver proposals submitted on or after June 4, 2014. Provides that the State shall not submit to the U.S. Department of Health and Human Services any Section 1115 demonstration project waiver proposal without first receiving specific statutory authority detailing the parameters of the proposal prior to its submission for federal approval. Effective immediately.

Last Action

Date	Chamber	Action
2/17/2015	House	Assigned to Appropriations-Human Services Committee

HB 2562**Short Description:** INS CD-CLINICAL TRIALS**House Sponsors**

Rep. Robyn Gabel

Synopsis As Introduced

Amends the Illinois Insurance Code. Amends provisions that prohibit individual or group policies of accident and health insurance from canceling or non-renewing policies for any individual based on that individual's participation in a qualified cancer trial to include other qualified clinical trials. Provides that the cancer or other qualified clinical trial may be at Phase I of investigation. Requires research trials to be authorized by an institutional review board of an institution approved by the Office of Human Research Protections of the federal Department of Health and Human Services. Amends the Medical Assistance Article of the Illinois Public Aid Code. Provides that no person shall be denied medical assistance based upon that individual's participation in a cancer or other qualified clinical trial if such trial meets the conditions for clinical trials established in the Illinois Insurance Code. Effective January 1, 2016.

Last Action

Date	Chamber	Action
2/19/2015	House	Referred to Rules Committee

HB 2596**Short Description:** DHFS-MANAGED CARE ENTITIES**House Sponsors**

Rep. Greg Harris

Synopsis As Introduced

Amends the Medical Assistance Article of the Illinois Public Aid Code. Requires the Department of Healthcare and Family Services, in conjunction with the Department of Insurance, to by rule adopt standards for assessing the solvency and financial soundness of each managed care community network. Provides that any solvency and

financial standards adopted for managed care community networks shall be identical to (rather than no more restrictive than) the solvency and financial standards required under Article II of the Health Maintenance Organization Act (rather than the solvency and financial standards adopted under the Social Security Act for provider-sponsored organizations). In provisions concerning entities contracted with the Department of Healthcare and Family Services to coordinate healthcare for medical assistance recipients, provides that the Department shall treat all contracted entities identically in relation to care coordination ratios. Provides that Managed Care Entities are authorized to hire community healthcare workers to meet the mandated care coordination ratios; and that the Department shall define by policy the term "community healthcare workers" no later than January 1, 2016. Requires the Department to treat all contracted entities receiving risk-based capitation payments identically with regards to network adequacy and medical loss ratios. Provides that in conjunction with the Department of Insurance, the Department of Healthcare and Family Services shall ensure that all contracted entities receiving risk-based capitation payments are treated identically with regards to protections against financial insolvency.

Last Action

Date	Chamber	Action
2/19/2015	House	Referred to Rules Committee

HB 2684

Short Description: MEDICAID REFORM RESEARCH ACT

House Sponsors

Rep. Greg Harris

Synopsis As Introduced

Provides that the Act may be referred to as the Medicaid Reform Research Act. Provides that, given that Illinois' Medical Assistance Program is undergoing a transition to managed care for Medicaid populations subject to the Medicaid Reform Act of 2011, the Save Medicaid Access Together (SMART) Act of 2012, and other Acts affecting Medicaid populations and delivery systems, a lawful and well-regulated dissemination of Medicaid data to qualified researchers is the best way to create accurate and creative unbiased analysis and information about Illinois' Medical Assistance Program that will lead to better health outcomes at a lower cost. Amends the Commission on Government Forecasting and Accountability Act. Provides that the Commission on Government Forecasting and Accountability may, subject to appropriations, coordinate and enter into agreements with the Department of Healthcare and Family Services and certain institutions and entities for research on medical assistance managed care or other State medical assistance programs pursuant to the analysis purposes of the State-Funded Health Care Quality Assurance and Research Fund. Contains provisions concerning individual patient medical claims information provided by the Department to those institutions and entities and other matters. Amends the State Finance Act. Creates the State-Funded Health Care Quality Assurance and Research Fund to provide the General Assembly with an independent analysis on certain matters, including the efficacy of State managed care programs to improve continuity of care, ensure adequate provider participation, and maintain appropriate utilization of health services. Provides that the Fund shall consist of certain moneys, including transfers from the Healthcare Provider Relief Fund and other matters. Effective immediately.

Last Action

Date	Chamber	Action
2/19/2015	House	Referred to Rules Committee

HB 2812

Short Description: MEDICAID-SENSITIVE SERVICES

House Sponsors

Rep. Christian L. Mitchell

Synopsis As Introduced

Amends the Medical Assistance Article of the Illinois Public Aid Code. Provides that for all recipients of medical assistance who are enrolled in a Medicaid Managed Care Entity, information concerning sensitive health services, including information concerning consultations, examinations, and treatments, shall not be divulged directly or indirectly to any person, including by sending a bill for such services or by sending an explanation of benefits provided by the Medicaid Managed Care Entity, unless the recipient who received the sensitive health services requests the information from the Medicaid Managed Care Entity. Provides that the term "Medicaid Managed Care Entity" includes, but is not limited to, Care Coordination Entities, Accountable Care Entities, Managed Care Community Networks, and Managed Care Organizations. Defines "sensitive health services". Provides that nothing in this provision shall be construed to relieve a Medicaid Managed Care Entity or the Department of Healthcare and Family Services of its duty to report incidents of sexually transmitted infections to the Department of Public Health or to the local board of health in accordance with regulations adopted under a statute or ordinance, or to report incidents of sexually transmitted infections as necessary to comply with certain requirements under the Abused and Neglected Child Reporting Act or as otherwise required by State or federal law. Effective immediately.

Last Action

Date	Chamber	Action
2/20/2015	House	Referred to Rules Committee

SB 54

Position: Support

Short Description: INSURANCE-MAMMOGRAMS**Senate Sponsors**

Sen. John G. Mulroe-Patricia Van Pelt-Michael E. Hastings-Pamela J. Althoff-Julie A. Morrison, Heather A. Steans, Mattie Hunter, William R. Haine, Kimberly A. Lightford, Dan Kotowski, Linda Holmes, Kwame Raoul, Jacqueline Y. Collins, James F. Clayborne, Jr., Terry Link, Steven M. Landek, Don Harmon, Michael Noland, Jennifer Bertino-Tarrant and Napoleon Harris, III

Synopsis As Introduced

Amends the Illinois Insurance Code and the Health Maintenance Organization Act. Includes breast tomosynthesis in the definition of "low-dose mammography".

Last Action

Date	Chamber	Action
1/28/2015	Senate	Assigned to Insurance

SB 1229**Short Description:** INTERSTATE MEDICAL LICENSURE**Senate Sponsors**

Sen. David Koehler

Synopsis As Introduced

Creates the Interstate Medical Licensure Compact Act. Provides that Illinois ratifies and approves the Interstate Medical Licensure Compact. The Compact provides that it will develop a comprehensive process that complements the existing licensing and regulatory authority of state medical boards and provides a streamlined process that allows physicians to become licensed in multiple states. The Compact provides for eligibility requirements, application requirements, fees, renewal requirements, information concerning investigation and discipline, and other procedures to implement the Compact.

Last Action

Date	Chamber	Action
2/11/2015	Senate	Referred to Assignments

SB 1253

Short Description: MEDICAID-MANAGED CARE ENTITIES

Senate Sponsors

Sen. Iris Y. Martinez

Synopsis As Introduced

Amends the Medical Assistance Article of the Illinois Public Aid Code. In provisions concerning care coordination, provides that Managed Care Entities (MCEs), including MCOs and all other care coordination organizations, shall develop and maintain a written language access policy that sets forth the standards, guidelines, and operational plan to ensure language appropriate services and that is consistent with the standard of meaningful access for populations with limited English proficiency. Provides that the language access policy shall describe how the MCEs will provide all of the following required services: (1) translation (the written replacement of text from one language into another) of all vital documents and forms as identified by the Department of Healthcare and Family Services; (2) qualified interpreter services (the oral communication of a message from one language into another by a qualified interpreter); (3) staff training on the language access policy, including how to identify language needs, access and provide language assistance services, work with interpreters, request translations, and track the use of language assistance services; (4) data tracking that identifies the language need; and (5) notification to participants on the availability of language access services and on how to access such services.

Last Action

Date	Chamber	Action
2/17/2015	Senate	Referred to Assignments

SB 1331

Short Description: INS CD-COPAYMENTS

Senate Sponsors

Sen. Martin A. Sandoval

Synopsis As Introduced

Amends the Illinois Insurance Code. Provides that a health benefit plan or health carrier, including, but not limited to, a preferred provider organization, an independent physician association, a third-party administrator, or any entity that contracts with licensed health care providers shall not impose any fixed co-payment that exceeds 50% of the total billed charges for health care services provided to an insured or enrolled during a visit to a health care provider.

Last Action

Date	Chamber	Action
2/18/2015	Senate	Referred to Assignments

SB 1367**Short Description:** DHFS-MEDICAID-WAIVER PROPOSAL**Senate Sponsors**

Sen. Heather A. Steans

Synopsis As Introduced

Amends the Illinois Public Aid Code. Provides that the State shall not accept any special terms and conditions for federal approval of any research and demonstration project waiver proposal submitted to the U.S. Department of Health and Human Services on June 4, 2014 under Section 1115 of the Social Security Act without prior approval from the General Assembly. Provides that the State shall not make any changes or amendments to any research and demonstration project waiver proposal submitted to the U.S. Department of Health and Human Services on June 4, 2014 under Section 1115 of the Social Security Act without prior approval from the General Assembly. Effective immediately.

Last Action

Date	Chamber	Action
2/18/2015	Senate	Referred to Assignments

SB 1754**Short Description:** MEDICAID-SENSITIVE SERVICES**Senate Sponsors**

Sen. Daniel Biss

Synopsis As Introduced

Amends the Medical Assistance Article of the Illinois Public Aid Code. Provides that for all recipients of medical assistance who are enrolled in a Medicaid Managed Care Entity, information concerning sensitive health services, including information concerning consultations, examinations, and treatments, shall not be divulged directly or indirectly to any person, including by sending a bill for such services or by sending an explanation of benefits provided by the Medicaid Managed Care Entity, unless the recipient who received the sensitive health services requests the information from the Medicaid Managed Care Entity. Provides that the term "Medicaid Managed Care Entity" includes, but is not limited to, Care Coordination Entities, Accountable Care Entities, Managed Care Community Networks, and Managed Care Organizations. Defines "sensitive health services". Provides that nothing in this provision shall be construed to relieve a Medicaid Managed Care Entity or the Department of Healthcare and Family Services of its duty to report incidents of sexually transmitted infections to the Department of Public Health or to the local board of health in accordance with regulations adopted under a statute or ordinance, or to report incidents of sexually transmitted infections as necessary to comply with certain requirements under the Abused and Neglected Child Reporting Act or as otherwise required by State or federal law. Effective immediately.

Last Action

Date	Chamber	Action
2/20/2015	Senate	Referred to Assignments

