



Rep. Laura Fine

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LRB098 12067 RPM 55224 a

1 AMENDMENT TO HOUSE BILL 3638

2 AMENDMENT NO. \_\_\_\_\_. Amend House Bill 3638 by replacing  
3 everything after the enacting clause with the following:

4 "Section 5. The Illinois Insurance Code is amended by  
5 adding Section 364.3 as follows:

6 (215 ILCS 5/364.3 new)

7 Sec. 364.3. Uniform prior authorization form; prescription  
8 benefits.

9 (a) Notwithstanding any other provision of law, on and  
10 after January 1, 2016, a health insurer that provides  
11 prescription drug benefits shall utilize and accept the prior  
12 authorization form developed pursuant to subsection (c) when  
13 requiring prior authorization for prescription drug benefits.  
14 This subsection (a) does not apply to plans for beneficiaries  
15 of Medicare or Medicaid.

16 (b) If a health insurer fails to utilize or accept the

1 prior authorization form, or fails to respond within 2 business  
2 days upon receipt of a completed prior authorization request  
3 from a prescribing provider, pursuant to the submission of the  
4 prior authorization form developed as described in subsection  
5 (c), the prior authorization request shall be deemed to have  
6 been granted.

7 (c) On or before July 1, 2015, the Department shall develop  
8 a uniform prior authorization form. Notwithstanding any other  
9 provision of law, on and after January 1, 2016, or 6 months  
10 after the form is developed, whichever is later, every  
11 prescribing provider may use that uniform prior authorization  
12 form to request prior authorization for coverage of  
13 prescription drug benefits and every health insurer shall  
14 accept that form as sufficient to request prior authorization  
15 for prescription drug benefits.

16 (d) The prior authorization form developed pursuant to  
17 subsection (c) shall meet the following criteria:

18 (1) The form shall not exceed 2 pages.

19 (2) The form shall be made electronically available by  
20 the Department and the health insurer.

21 (3) The completed form may also be electronically  
22 submitted from the prescribing provider to the health  
23 insurer.

24 (4) The Department shall develop the form with input  
25 from interested parties from at least one public meeting.

26 (5) The Department, in development of the standardized

1 form, shall take into consideration the following:

2 (A) Existing prior authorization forms established  
3 by the federal Centers for Medicare and Medicaid  
4 Services and the Department of Healthcare and Family  
5 Services.

6 (B) National standards pertaining to electronic  
7 prior authorization.

8 (e) For purposes of this Section, "prescribing provider"  
9 includes a provider authorized to write a prescription, as  
10 described in subsection (e) of Section 3 of the Pharmacy  
11 Practice Act, to treat a medical condition of an insured.

12 Section 99. Effective date. This Act takes effect January  
13 1, 2015.".