



## 104TH GENERAL ASSEMBLY

### State of Illinois

### 2025 and 2026

### SB3525

Introduced 2/5/2026, by Sen. Lakesia Collins

#### SYNOPSIS AS INTRODUCED:

5 ILCS 375/6.11	
55 ILCS 5/5-1069.3	
65 ILCS 5/10-4-2.3	
105 ILCS 5/10-22.3f	
215 ILCS 5/356z.88 new	
215 ILCS 125/5-3	from Ch. 111 1/2, par. 1411.2
215 ILCS 130/4003	from Ch. 73, par. 1504-3
215 ILCS 165/10	from Ch. 32, par. 604
225 ILCS 85/45 new	
305 ILCS 5/5-16.8	

Amends the Illinois Insurance Code. Sets forth provisions requiring an individual or group policy of accident and health insurance amended, delivered, issued, or renewed in this State on or after the effective date of the amendatory Act to provide coverage for up to a 12-month supply of prescription hormone therapy, and the necessary supplies for self-administration, that is prescribed by a network provider within the provider's scope of practice and dispensed at one time for an enrollee by a provider or pharmacist, or at a location licensed or otherwise authorized to dispense drugs or supplies. Amends the Pharmacy Practice Act. Provides that, notwithstanding any other provision of law, a dispensing provider or pharmacist shall dispense, at a patient's request, up to a 12-month supply of a prescription hormone therapy and the necessary supplies for self-administration pursuant to a valid prescription that specifies an initial quantity followed by periodic refills, except as specified. Amends the State Employees Group Insurance Act of 1971, the Counties Code, the Illinois Municipal Code, the School Code, the Health Maintenance Organization Act, the Limited Health Service Organization Act, the Voluntary Health Services Plans Act, and the Illinois Public Aid Code to require coverage under the provisions of those Acts.

LRB104 19064 BAB 32509 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 State Employees Group Insurance Act of 1971  
5 is amended by changing Section 6.11 as follows:

6 (5 ILCS 375/6.11)

7 (Text of Section before amendment by P.A. 104-1)

8 Sec. 6.11. Required health benefits; Illinois Insurance  
9 Code requirements. The program of health benefits shall  
10 provide the post-mastectomy care benefits required to be  
11 covered by a policy of accident and health insurance under  
12 Section 356t of the Illinois Insurance Code. The program of  
13 health benefits shall provide the coverage required under  
14 Sections 356g, 356g.5, 356g.5-1, 356m, 356q, 356u, 356u.10,  
15 356w, 356x, 356z.2, 356z.4, 356z.4a, 356z.5, 356z.6, 356z.8,  
16 356z.9, 356z.10, 356z.11, 356z.12, 356z.13, 356z.14, 356z.15,  
17 356z.17, 356z.22, 356z.25, 356z.26, 356z.29, 356z.30, 356z.32,  
18 356z.33, 356z.36, 356z.40, 356z.41, 356z.45, 356z.46, 356z.47,  
19 356z.51, 356z.53, 356z.54, 356z.55, 356z.56, 356z.57, 356z.59,  
20 356z.60, 356z.61, 356z.62, 356z.64, 356z.67, 356z.68, 356z.70,  
21 356z.71, 356z.74, 356z.76, ~~and~~ 356z.77, ~~and~~ 356z.80, 356z.81,  
22 356z.82, 356z.83, 356z.84, 356z.85, and 356z.88 of the  
23 Illinois Insurance Code. The program of health benefits must

1 comply with Sections 155.22a, 155.37, 355b, 356z.19, 370c, and  
2 370c.1 and Article XXXIIB of the Illinois Insurance Code. The  
3 program of health benefits shall provide the coverage required  
4 under Section 356m of the Illinois Insurance Code and, for the  
5 employees of the State Employee Group Insurance Program only,  
6 the coverage as also provided in Section 6.11B of this Act. The  
7 Department of Insurance shall enforce the requirements of this  
8 Section with respect to Sections 370c and 370c.1 and Article  
9 XXXIIB of the Illinois Insurance Code; all other requirements  
10 of this Section shall be enforced by the Department of Central  
11 Management Services.

12 Rulemaking authority to implement Public Act 95-1045, if  
13 any, is conditioned on the rules being adopted in accordance  
14 with all provisions of the Illinois Administrative Procedure  
15 Act and all rules and procedures of the Joint Committee on  
16 Administrative Rules; any purported rule not so adopted, for  
17 whatever reason, is unauthorized.

18 (Source: P.A. 103-8, eff. 1-1-24; 103-84, eff. 1-1-24; 103-91,  
19 eff. 1-1-24; 103-420, eff. 1-1-24; 103-445, eff. 1-1-24;  
20 103-535, eff. 8-11-23; 103-551, eff. 8-11-23; 103-605, eff.  
21 7-1-24; 103-718, eff. 7-19-24; 103-751, eff. 8-2-24; 103-870,  
22 eff. 1-1-25; 103-914, eff. 1-1-25; 103-918, eff. 1-1-25;  
23 103-951, eff. 1-1-25; 103-1024, eff. 1-1-25; 104-27, eff.  
24 1-1-26, 104-42, eff. 8-1-25; 104-68, eff. 1-1-26; 104-73, eff.  
25 1-1-26; 104-289, eff. 1-1-26; 104-324, eff. 1-1-26; 104-379,  
26 eff. 1-1-26; 104-417, eff. 8-15-25; revised 11-19-25.)

1 (Text of Section after amendment by P.A. 104-1)

2 Sec. 6.11. Required health benefits; Illinois Insurance  
3 Code requirements. The program of health benefits shall  
4 provide the post-mastectomy care benefits required to be  
5 covered by a policy of accident and health insurance under  
6 Section 356t of the Illinois Insurance Code. The program of  
7 health benefits shall provide the coverage required under  
8 Sections 356g, 356g.5, 356g.5-1, 356m, 356q, 356u, 356u.10,  
9 356w, 356x, 356z.2, 356z.4, 356z.4a, 356z.5, 356z.6, 356z.8,  
10 356z.9, 356z.10, 356z.11, 356z.12, 356z.13, 356z.14, 356z.15,  
11 356z.17, 356z.22, 356z.25, 356z.26, 356z.29, 356z.30, 356z.32,  
12 356z.33, 356z.36, 356z.40, 356z.41, 356z.45, 356z.46, 356z.47,  
13 356z.51, 356z.53, 356z.54, 356z.55, 356z.56, 356z.57, 356z.59,  
14 356z.60, 356z.61, 356z.62, 356z.64, 356z.67, 356z.68, 356z.70,  
15 356z.71, 356z.74, 356z.76, ~~and 356z.77, 356z.79, and 356z.80,~~  
16 356z.81, 356z.82, 356z.83, 356z.84, 356z.85, and 356z.88 of  
17 the Illinois Insurance Code. The program of health benefits  
18 must comply with Sections 155.22a, 155.37, 355b, 356z.19,  
19 370c, and 370c.1 and Article XXXIIB of the Illinois Insurance  
20 Code. The program of health benefits shall provide the  
21 coverage required under Section 356m of the Illinois Insurance  
22 Code and, for the employees of the State Employee Group  
23 Insurance Program only, the coverage as also provided in  
24 Section 6.11B of this Act. The Department of Insurance shall  
25 enforce the requirements of this Section with respect to

1 Sections 370c and 370c.1 and Article XXXIIB of the Illinois  
2 Insurance Code; all other requirements of this Section shall  
3 be enforced by the Department of Central Management Services.

4 Rulemaking authority to implement Public Act 95-1045, if  
5 any, is conditioned on the rules being adopted in accordance  
6 with all provisions of the Illinois Administrative Procedure  
7 Act and all rules and procedures of the Joint Committee on  
8 Administrative Rules; any purported rule not so adopted, for  
9 whatever reason, is unauthorized.

10 (Source: P.A. 103-8, eff. 1-1-24; 103-84, eff. 1-1-24; 103-91,  
11 eff. 1-1-24; 103-420, eff. 1-1-24; 103-445, eff. 1-1-24;  
12 103-535, eff. 8-11-23; 103-551, eff. 8-11-23; 103-605, eff.  
13 7-1-24; 103-718, eff. 7-19-24; 103-751, eff. 8-2-24; 103-870,  
14 eff. 1-1-25; 103-914, eff. 1-1-25; 103-918, eff. 1-1-25;  
15 103-951, eff. 1-1-25; 103-1024, eff. 1-1-25; 104-1, eff.  
16 7-1-27; 104-27, eff. 1-1-26, 104-42, eff. 8-1-25; 104-68, eff.  
17 1-1-26; 104-73, eff. 1-1-26; 104-289, eff. 1-1-26; 104-324,  
18 eff. 1-1-26; 104-379, eff. 1-1-26; 104-417, eff. 8-15-25;  
19 revised 11-19-25.)

20 Section 10. The Counties Code is amended by changing  
21 Section 5-1069.3 as follows:

22 (55 ILCS 5/5-1069.3)

23 (Text of Section before amendment by P.A. 104-446)

24 Sec. 5-1069.3. Required health benefits. If a county,

1 including a home rule county, is a self-insurer for purposes  
2 of providing health insurance coverage for its employees, the  
3 coverage shall include coverage for the post-mastectomy care  
4 benefits required to be covered by a policy of accident and  
5 health insurance under Section 356t and the coverage required  
6 under Sections 356g, 356g.5, 356g.5-1, 356m, 356q, 356u,  
7 356u.10, 356w, 356x, 356z.4, 356z.4a, 356z.6, 356z.8, 356z.9,  
8 356z.10, 356z.11, 356z.12, 356z.13, 356z.14, 356z.15, 356z.22,  
9 356z.25, 356z.26, 356z.29, 356z.30, 356z.32, 356z.33, 356z.36,  
10 356z.40, 356z.41, 356z.45, 356z.46, 356z.47, 356z.48, 356z.51,  
11 356z.53, 356z.54, 356z.56, 356z.57, 356z.59, 356z.60, 356z.61,  
12 356z.62, 356z.64, 356z.67, 356z.68, 356z.70, 356z.71, 356z.74,  
13 ~~and~~ 356z.77, 356z.79, and 356z.80, 356z.81, 356z.82, 356z.83,  
14 356z.84, 356z.85, and 356z.88 of the Illinois Insurance Code.  
15 The coverage shall comply with Sections 155.22a, 355b,  
16 356z.19, and 370c of the Illinois Insurance Code. The  
17 Department of Insurance shall enforce the requirements of this  
18 Section. The requirement that health benefits be covered as  
19 provided in this Section is an exclusive power and function of  
20 the State and is a denial and limitation under Article VII,  
21 Section 6, subsection (h) of the Illinois Constitution. A home  
22 rule county to which this Section applies must comply with  
23 every provision of this Section.

24 Rulemaking authority to implement Public Act 95-1045, if  
25 any, is conditioned on the rules being adopted in accordance  
26 with all provisions of the Illinois Administrative Procedure

1 Act and all rules and procedures of the Joint Committee on  
2 Administrative Rules; any purported rule not so adopted, for  
3 whatever reason, is unauthorized.

4 (Source: P.A. 103-84, eff. 1-1-24; 103-91, eff. 1-1-24;  
5 103-420, eff. 1-1-24; 103-445, eff. 1-1-24; 103-535, eff.  
6 8-11-23; 103-551, eff. 8-11-23; 103-605, eff. 7-1-24; 103-718,  
7 eff. 7-19-24; 103-751, eff. 8-2-24; 103-914, eff. 1-1-25;  
8 103-918, eff. 1-1-25; 103-1024, eff. 1-1-25; 104-1, eff.  
9 6-9-25; 104-42, eff. 8-1-25; 104-68, eff. 1-1-26; 104-73, eff.  
10 1-1-26; 104-289, eff. 1-1-26; 104-324, eff. 1-1-26; 104-379,  
11 eff. 1-1-26; 104-417, eff. 8-15-25; revised 1-7-26.)

12 (Text of Section after amendment by P.A. 104-446)

13 Sec. 5-1069.3. Required health benefits. If a county,  
14 including a home rule county, is a self-insurer for purposes  
15 of providing health insurance coverage for its employees, the  
16 coverage shall include coverage for the post-mastectomy care  
17 benefits required to be covered by a policy of accident and  
18 health insurance under Section 356t and the coverage required  
19 under Sections 356g, 356g.5, 356g.5-1, 356m, 356q, 356u,  
20 356u.10, 356w, 356x, 356z.4, 356z.4a, 356z.6, 356z.8, 356z.9,  
21 356z.10, 356z.11, 356z.12, 356z.13, 356z.14, 356z.15, 356z.22,  
22 356z.25, 356z.26, 356z.29, 356z.30, 356z.32, 356z.33, 356z.36,  
23 356z.40, 356z.41, 356z.45, 356z.46, 356z.47, 356z.48, 356z.51,  
24 356z.53, 356z.54, 356z.56, 356z.57, 356z.59, 356z.60, 356z.61,  
25 356z.62, 356z.64, 356z.67, 356z.68, 356z.70, 356z.71, 356z.74,

1 ~~and~~ 356z.77, 356z.79, and 356z.80, 356z.81, 356z.82, 356z.83,  
2 356z.84, 356z.85, and 356z.88 of the Illinois Insurance Code.

3 The coverage shall comply with Sections 155.22a, 355b,  
4 356z.19, 370c, and 370c.4 of the Illinois Insurance Code. The  
5 Department of Insurance shall enforce the requirements of this  
6 Section. The requirement that health benefits be covered as  
7 provided in this Section is an exclusive power and function of  
8 the State and is a denial and limitation under Article VII,  
9 Section 6, subsection (h) of the Illinois Constitution. A home  
10 rule county to which this Section applies must comply with  
11 every provision of this Section.

12 Rulemaking authority to implement Public Act 95-1045, if  
13 any, is conditioned on the rules being adopted in accordance  
14 with all provisions of the Illinois Administrative Procedure  
15 Act and all rules and procedures of the Joint Committee on  
16 Administrative Rules; any purported rule not so adopted, for  
17 whatever reason, is unauthorized.

18 (Source: P.A. 103-84, eff. 1-1-24; 103-91, eff. 1-1-24;  
19 103-420, eff. 1-1-24; 103-445, eff. 1-1-24; 103-535, eff.  
20 8-11-23; 103-551, eff. 8-11-23; 103-605, eff. 7-1-24; 103-718,  
21 eff. 7-19-24; 103-751, eff. 8-2-24; 103-914, eff. 1-1-25;  
22 103-918, eff. 1-1-25; 103-1024, eff. 1-1-25; 104-1, eff.  
23 6-9-25; 104-42, eff. 8-1-25; 104-68, eff. 1-1-26; 104-73, eff.  
24 1-1-26; 104-289, eff. 1-1-26; 104-324, eff. 1-1-26; 104-379,  
25 eff. 1-1-26; 104-417, eff. 8-15-25; 104-446, eff. 6-1-26;  
26 revised 1-7-26.)

1 Section 15. The Illinois Municipal Code is amended by  
2 changing Section 10-4-2.3 as follows:

3 (65 ILCS 5/10-4-2.3)

4 (Text of Section before amendment by P.A. 104-446)

5 Sec. 10-4-2.3. Required health benefits. If a  
6 municipality, including a home rule municipality, is a  
7 self-insurer for purposes of providing health insurance  
8 coverage for its employees, the coverage shall include  
9 coverage for the post-mastectomy care benefits required to be  
10 covered by a policy of accident and health insurance under  
11 Section 356t and the coverage required under Sections 356g,  
12 356g.5, 356g.5-1, 356m, 356q, 356u, 356u.10, 356w, 356x,  
13 356z.4, 356z.4a, 356z.6, 356z.8, 356z.9, 356z.10, 356z.11,  
14 356z.12, 356z.13, 356z.14, 356z.15, 356z.22, 356z.25, 356z.26,  
15 356z.29, 356z.30, 356z.32, 356z.33, 356z.36, 356z.40, 356z.41,  
16 356z.45, 356z.46, 356z.47, 356z.48, 356z.51, 356z.53, 356z.54,  
17 356z.56, 356z.57, 356z.59, 356z.60, 356z.61, 356z.62, 356z.64,  
18 356z.67, 356z.68, 356z.70, 356z.71, 356z.74, ~~and~~ 356z.77,  
19 356z.79, ~~and~~ 356z.80, 356z.81, 356z.82, 356z.83, 356z.84,  
20 356z.85, and 356z.88 of the Illinois Insurance Code. The  
21 coverage shall comply with Sections 155.22a, 355b, 356z.19,  
22 and 370c of the Illinois Insurance Code. The Department of  
23 Insurance shall enforce the requirements of this Section. The  
24 requirement that health benefits be covered as provided in

1 this Section is an exclusive power and function of the State  
2 and is a denial and limitation under Article VII, Section 6,  
3 subsection (h) of the Illinois Constitution. A home rule  
4 municipality to which this Section applies must comply with  
5 every provision of this Section.

6 Rulemaking authority to implement Public Act 95-1045, if  
7 any, is conditioned on the rules being adopted in accordance  
8 with all provisions of the Illinois Administrative Procedure  
9 Act and all rules and procedures of the Joint Committee on  
10 Administrative Rules; any purported rule not so adopted, for  
11 whatever reason, is unauthorized.

12 (Source: P.A. 103-84, eff. 1-1-24; 103-91, eff. 1-1-24;  
13 103-420, eff. 1-1-24; 103-445, eff. 1-1-24; 103-535, eff.  
14 8-11-23; 103-551, eff. 8-11-23; 103-605, eff. 7-1-24; 103-718,  
15 eff. 7-19-24; 103-751, eff. 8-2-24; 103-914, eff. 1-1-25;  
16 103-918, eff. 1-1-25; 103-1024, eff. 1-1-25; 104-1, eff.  
17 6-9-25; 104-42, eff. 8-1-25; 104-68, eff. 1-1-26; 104-73, eff.  
18 1-1-26; 104-289, eff. 1-1-26; 104-324, eff. 1-1-26; 104-379,  
19 eff. 1-1-26; 104-417, eff. 8-15-25; revised 1-8-26.)

20 (Text of Section after amendment by P.A. 104-446)

21 Sec. 10-4-2.3. Required health benefits. If a  
22 municipality, including a home rule municipality, is a  
23 self-insurer for purposes of providing health insurance  
24 coverage for its employees, the coverage shall include  
25 coverage for the post-mastectomy care benefits required to be

1 covered by a policy of accident and health insurance under  
2 Section 356t and the coverage required under Sections 356g,  
3 356g.5, 356g.5-1, 356m, 356q, 356u, 356u.10, 356w, 356x,  
4 356z.4, 356z.4a, 356z.6, 356z.8, 356z.9, 356z.10, 356z.11,  
5 356z.12, 356z.13, 356z.14, 356z.15, 356z.22, 356z.25, 356z.26,  
6 356z.29, 356z.30, 356z.32, 356z.33, 356z.36, 356z.40, 356z.41,  
7 356z.45, 356z.46, 356z.47, 356z.48, 356z.51, 356z.53, 356z.54,  
8 356z.56, 356z.57, 356z.59, 356z.60, 356z.61, 356z.62, 356z.64,  
9 356z.67, 356z.68, 356z.70, 356z.71, 356z.74, ~~and~~ 356z.77,  
10 356z.79, and 356z.80, 356z.81, 356z.82, 356z.83, 356z.84,  
11 356z.85, and 356z.88 of the Illinois Insurance Code. The  
12 coverage shall comply with Sections 155.22a, 355b, 356z.19,  
13 370c, and 370c.4 of the Illinois Insurance Code. The  
14 Department of Insurance shall enforce the requirements of this  
15 Section. The requirement that health benefits be covered as  
16 provided in this Section is an exclusive power and function of  
17 the State and is a denial and limitation under Article VII,  
18 Section 6, subsection (h) of the Illinois Constitution. A home  
19 rule municipality to which this Section applies must comply  
20 with every provision of this Section.

21 Rulemaking authority to implement Public Act 95-1045, if  
22 any, is conditioned on the rules being adopted in accordance  
23 with all provisions of the Illinois Administrative Procedure  
24 Act and all rules and procedures of the Joint Committee on  
25 Administrative Rules; any purported rule not so adopted, for  
26 whatever reason, is unauthorized.

1 (Source: P.A. 103-84, eff. 1-1-24; 103-91, eff. 1-1-24;  
2 103-420, eff. 1-1-24; 103-445, eff. 1-1-24; 103-535, eff.  
3 8-11-23; 103-551, eff. 8-11-23; 103-605, eff. 7-1-24; 103-718,  
4 eff. 7-19-24; 103-751, eff. 8-2-24; 103-914, eff. 1-1-25;  
5 103-918, eff. 1-1-25; 103-1024, eff. 1-1-25; 104-1, eff.  
6 6-9-25; 104-42, eff. 8-1-25; 104-68, eff. 1-1-26; 104-73, eff.  
7 1-1-26; 104-289, eff. 1-1-26; 104-324, eff. 1-1-26; 104-379,  
8 eff. 1-1-26; 104-417, eff. 8-15-25; 104-446, eff. 6-1-26;  
9 revised 1-8-26.)

10 Section 20. The School Code is amended by changing Section  
11 10-22.3f as follows:

12 (105 ILCS 5/10-22.3f)

13 (Text of Section before amendment by P.A. 104-446)

14 Sec. 10-22.3f. Required health benefits. Insurance  
15 protection and benefits for employees shall provide the  
16 post-mastectomy care benefits required to be covered by a  
17 policy of accident and health insurance under Section 356t and  
18 the coverage required under Sections 356g, 356g.5, 356g.5-1,  
19 356m, 356q, 356u, 356u.10, 356w, 356x, 356z.4, 356z.4a,  
20 356z.6, 356z.8, 356z.9, 356z.11, 356z.12, 356z.13, 356z.14,  
21 356z.15, 356z.22, 356z.25, 356z.26, 356z.29, 356z.30, 356z.32,  
22 356z.33, 356z.36, 356z.40, 356z.41, 356z.45, 356z.46, 356z.47,  
23 356z.51, 356z.53, 356z.54, 356z.56, 356z.57, 356z.59, 356z.60,  
24 356z.61, 356z.62, 356z.64, 356z.67, 356z.68, 356z.70, 356z.71,

1 356z.74, ~~and~~ 356z.77, 356z.79, and 356z.80, 356z.81, 356z.82,  
2 356z.83, 356z.84, 356z.85, and 356z.88 of the Illinois  
3 Insurance Code. Insurance policies shall comply with Section  
4 356z.19 of the Illinois Insurance Code. The coverage shall  
5 comply with Sections 155.22a, 355b, and 370c and Article  
6 XXXIIB of the Illinois Insurance Code. The Department of  
7 Insurance shall enforce the requirements of this Section.

8 Rulemaking authority to implement Public Act 95-1045, if  
9 any, is conditioned on the rules being adopted in accordance  
10 with all provisions of the Illinois Administrative Procedure  
11 Act and all rules and procedures of the Joint Committee on  
12 Administrative Rules; any purported rule not so adopted, for  
13 whatever reason, is unauthorized.

14 (Source: P.A. 103-84, eff. 1-1-24; 103-91, eff. 1-1-24;  
15 103-420, eff. 1-1-24; 103-445, eff. 1-1-24; 103-535, eff.  
16 8-11-23; 103-551, eff. 8-11-23; 103-605, eff. 7-1-24; 103-718,  
17 eff. 7-19-24; 103-751, eff. 8-2-24; 103-914, eff. 1-1-25;  
18 103-918, eff. 1-1-25; 103-1024, eff. 1-1-25; 104-1, eff.  
19 6-9-25; 104-27, eff. 1-1-26; 104-42, eff. 8-1-25; 104-68, eff.  
20 1-1-26; 104-73, eff. 1-1-26; 104-289, eff. 1-1-26; 104-324,  
21 eff. 1-1-26; 104-379, eff. 1-1-26; 104-417, eff. 8-15-25;  
22 revised 1-8-26.)

23 (Text of Section after amendment by P.A. 104-446)

24 Sec. 10-22.3f. Required health benefits. Insurance  
25 protection and benefits for employees shall provide the

1 post-mastectomy care benefits required to be covered by a  
2 policy of accident and health insurance under Section 356t and  
3 the coverage required under Sections 356g, 356g.5, 356g.5-1,  
4 356m, 356q, 356u, 356u.10, 356w, 356x, 356z.4, 356z.4a,  
5 356z.6, 356z.8, 356z.9, 356z.11, 356z.12, 356z.13, 356z.14,  
6 356z.15, 356z.22, 356z.25, 356z.26, 356z.29, 356z.30, 356z.32,  
7 356z.33, 356z.36, 356z.40, 356z.41, 356z.45, 356z.46, 356z.47,  
8 356z.51, 356z.53, 356z.54, 356z.56, 356z.57, 356z.59, 356z.60,  
9 356z.61, 356z.62, 356z.64, 356z.67, 356z.68, 356z.70, 356z.71,  
10 356z.74, ~~and~~ 356z.77, 356z.79, and 356z.80, 356z.81, 356z.82,  
11 356z.83, 356z.84, 356z.85, and 356z.88 of the Illinois  
12 Insurance Code. Insurance policies shall comply with Section  
13 356z.19 of the Illinois Insurance Code. The coverage shall  
14 comply with Sections 155.22a, 355b, 370c, and 370c.4 and  
15 Article XXXIIB of the Illinois Insurance Code. The Department  
16 of Insurance shall enforce the requirements of this Section.

17 Rulemaking authority to implement Public Act 95-1045, if  
18 any, is conditioned on the rules being adopted in accordance  
19 with all provisions of the Illinois Administrative Procedure  
20 Act and all rules and procedures of the Joint Committee on  
21 Administrative Rules; any purported rule not so adopted, for  
22 whatever reason, is unauthorized.

23 (Source: P.A. 103-84, eff. 1-1-24; 103-91, eff. 1-1-24;  
24 103-420, eff. 1-1-24; 103-445, eff. 1-1-24; 103-535, eff.  
25 8-11-23; 103-551, eff. 8-11-23; 103-605, eff. 7-1-24; 103-718,  
26 eff. 7-19-24; 103-751, eff. 8-2-24; 103-914, eff. 1-1-25;

1 103-918, eff. 1-1-25; 103-1024, eff. 1-1-25; 104-1, eff.  
2 6-9-25; 104-27, eff. 1-1-26; 104-42, eff. 8-1-25; 104-68, eff.  
3 1-1-26; 104-73, eff. 1-1-26; 104-289, eff. 1-1-26; 104-324,  
4 eff. 1-1-26; 104-379, eff. 1-1-26; 104-417, eff. 8-15-25;  
5 104-446, eff. 6-1-26; revised 1-8-26.)

6 Section 25. The Illinois Insurance Code is amended by  
7 adding Section 356z.88 as follows:

8 (215 ILCS 5/356z.88 new)

9 Sec. 356z.88. Coverage for prescription hormone therapy.

10 (a) For purposes of this Section, "prescription hormone  
11 therapy" means all drugs approved by the United States Food  
12 and Drug Administration that are used to medically suppress,  
13 increase, or replace hormones that the body is not producing  
14 at intended levels and the necessary supplies for  
15 self-administration. "Prescription hormone therapy" does not  
16 include glucagon-like peptide-1 and glucagon-like peptide-1  
17 receptor agonists.

18 (b)(1) An individual or group policy of accident and  
19 health insurance amended, delivered, issued, or renewed in  
20 this State on or after the effective date of this amendatory  
21 Act of the 104th General Assembly shall provide coverage for  
22 up to a 12-month supply of prescription hormone therapy, and  
23 the necessary supplies for self-administration, that is  
24 prescribed by a network provider within the provider's scope

1 of practice and dispensed at one time for an enrollee by a  
2 provider or pharmacist, or at a location licensed or otherwise  
3 authorized to dispense drugs or supplies.

4 (2) This Section does not require an individual or group  
5 policy of accident and health insurance amended, delivered,  
6 issued, or renewed in this State on or after the effective date  
7 of this amendatory Act of the 104th General Assembly to cover  
8 prescription hormone therapy provided by an out-of-network  
9 provider, pharmacy, or location licensed or otherwise  
10 authorized to dispense drugs or supplies, except as may  
11 otherwise be authorized by State or federal law or by the  
12 plan's policies governing out-of-network coverage. If  
13 prescriptions for medically necessary prescription hormone  
14 therapy are unavailable to a plan enrollee within the plan's  
15 network, the plan shall arrange for the prescription hormone  
16 therapy to be provided by an out-of-network provider.

17 (3) This Section does not prohibit an individual or group  
18 policy of accident and health insurance amended, delivered,  
19 issued, or renewed in this State on or after the effective date  
20 of this amendatory Act of the 104th General Assembly from  
21 limiting refills that may be obtained in the last quarter of  
22 the plan year if a 12-month supply of the prescription hormone  
23 therapy has already been dispensed during the plan year.

24 (4) This Section does not require a provider to prescribe,  
25 furnish, or dispense 12 months of prescription hormone therapy  
26 at one time.

1       (5) To the extent not otherwise prohibited under this  
2       Section or State or federal law, health plans may apply drug  
3       utilization management strategies to prescription drugs  
4       covered under paragraph (1) of this subsection.

5       (6) If an individual or group policy of accident and  
6       health insurance amended, delivered, issued, or renewed in  
7       this State on or after the effective date of this amendatory  
8       Act of the 104th General Assembly delegates responsibilities  
9       under this Section to a contracted entity, including a medical  
10       group or independent practice association, the delegated  
11       entity shall comply with this Section.

12       (c) This Section does not deny or restrict the  
13       Department's authority to ensure plan compliance when an  
14       individual or group policy of accident and health insurance  
15       amended, delivered, issued, or renewed in this State on or  
16       after the effective date of this amendatory Act of the 104th  
17       General Assembly provides coverage for prescription hormone  
18       therapy.

19       Section 30. The Health Maintenance Organization Act is  
20       amended by changing Section 5-3 as follows:

21       (215 ILCS 125/5-3) (from Ch. 111 1/2, par. 1411.2)

22       Sec. 5-3. Illinois Insurance Code provisions.

23       (a) Health Maintenance Organizations shall be subject to  
24       the provisions of Sections 133, 134, 136, 137, 139, 140,

1 141.1, 141.2, 141.3, 143, 143.31, 143c, 147, 148, 149, 151,  
2 152, 153, 154, 154.5, 154.6, 154.7, 154.8, 155.04, 155.22a,  
3 155.49, 352c, 355.2, 355.3, 355.6, 355.7, 355b, 355c, 356f,  
4 356g, 356g.5-1, 356m, 356q, 356u.10, 356v, 356w, 356x, 356z.2,  
5 356z.3a, 356z.4, 356z.4a, 356z.5, 356z.6, 356z.8, 356z.9,  
6 356z.10, 356z.11, 356z.12, 356z.13, 356z.14, 356z.15, 356z.17,  
7 356z.18, 356z.19, 356z.20, 356z.21, 356z.22, 356z.23, 356z.24,  
8 356z.25, 356z.26, 356z.28, 356z.29, 356z.30, 356z.31, 356z.32,  
9 356z.33, 356z.34, 356z.35, 356z.36, 356z.37, 356z.38, 356z.39,  
10 356z.40, 356z.40a, 356z.41, 356z.44, 356z.45, 356z.46,  
11 356z.47, 356z.48, 356z.49, 356z.50, 356z.51, 356z.53, 356z.54,  
12 356z.55, 356z.56, 356z.57, 356z.58, 356z.59, 356z.60, 356z.61,  
13 356z.62, 356z.63, 356z.64, 356z.65, 356z.66, 356z.67, 356z.68,  
14 356z.69, 356z.70, 356z.71, 356z.72, 356z.73, 356z.74, 356z.75,  
15 356z.76, 356z.77, 356z.78, 356z.79, 356z.80, 356z.81, 356z.82,  
16 356z.83, 356z.84, 356z.85, 356z.88, 364, 364.01, 364.3, 367.2,  
17 367.2-5, 367i, 368a, 368b, 368c, 368d, 368e, 370a, 370c,  
18 370c.1, 401, 401.1, 402, 403, 403A, 408, 408.2, 409, 412, 444,  
19 and 444.1, paragraph (c) of subsection (2) of Section 367, and  
20 Articles IIA, VIII 1/2, XII, XII 1/2, XIII, XIII 1/2, XXV,  
21 XXVI, and XXXIIB of the Illinois Insurance Code.

22 (b) For purposes of the Illinois Insurance Code, except  
23 for Sections 444 and 444.1 and Articles XIII and XIII 1/2,  
24 Health Maintenance Organizations in the following categories  
25 are deemed to be "domestic companies":

26 (1) a corporation authorized under the Dental Service

1 Plan Act or the Voluntary Health Services Plans Act;

2 (2) a corporation organized under the laws of this  
3 State; or

4 (3) a corporation organized under the laws of another  
5 state, 30% or more of the enrollees of which are residents  
6 of this State, except a corporation subject to  
7 substantially the same requirements in its state of  
8 organization as is a "domestic company" under Article VIII  
9 1/2 of the Illinois Insurance Code.

10 (c) In considering the merger, consolidation, or other  
11 acquisition of control of a Health Maintenance Organization  
12 pursuant to Article VIII 1/2 of the Illinois Insurance Code,

13 (1) the Director shall give primary consideration to  
14 the continuation of benefits to enrollees and the  
15 financial conditions of the acquired Health Maintenance  
16 Organization after the merger, consolidation, or other  
17 acquisition of control takes effect;

18 (2) (i) the criteria specified in subsection (1) (b) of  
19 Section 131.8 of the Illinois Insurance Code shall not  
20 apply and (ii) the Director, in making his determination  
21 with respect to the merger, consolidation, or other  
22 acquisition of control, need not take into account the  
23 effect on competition of the merger, consolidation, or  
24 other acquisition of control;

25 (3) the Director shall have the power to require the  
26 following information:

1           (A) certification by an independent actuary of the  
2           adequacy of the reserves of the Health Maintenance  
3           Organization sought to be acquired;

4           (B) pro forma financial statements reflecting the  
5           combined balance sheets of the acquiring company and  
6           the Health Maintenance Organization sought to be  
7           acquired as of the end of the preceding year and as of  
8           a date 90 days prior to the acquisition, as well as pro  
9           forma financial statements reflecting projected  
10          combined operation for a period of 2 years;

11          (C) a pro forma business plan detailing an  
12          acquiring party's plans with respect to the operation  
13          of the Health Maintenance Organization sought to be  
14          acquired for a period of not less than 3 years; and

15          (D) such other information as the Director shall  
16          require.

17          (d) The provisions of Article VIII 1/2 of the Illinois  
18          Insurance Code and this Section 5-3 shall apply to the sale by  
19          any health maintenance organization of greater than 10% of its  
20          enrollee population (including, without limitation, the health  
21          maintenance organization's right, title, and interest in and  
22          to its health care certificates).

23          (e) In considering any management contract or service  
24          agreement subject to Section 141.1 of the Illinois Insurance  
25          Code, the Director (i) shall, in addition to the criteria  
26          specified in Section 141.2 of the Illinois Insurance Code,

1 take into account the effect of the management contract or  
2 service agreement on the continuation of benefits to enrollees  
3 and the financial condition of the health maintenance  
4 organization to be managed or serviced, and (ii) need not take  
5 into account the effect of the management contract or service  
6 agreement on competition.

7 (f) Except for small employer groups as defined in the  
8 Small Employer Rating, Renewability and Portability Health  
9 Insurance Act and except for medicare supplement policies as  
10 defined in Section 363 of the Illinois Insurance Code, a  
11 Health Maintenance Organization may by contract agree with a  
12 group or other enrollment unit to effect refunds or charge  
13 additional premiums under the following terms and conditions:

14 (i) the amount of, and other terms and conditions with  
15 respect to, the refund or additional premium are set forth  
16 in the group or enrollment unit contract agreed in advance  
17 of the period for which a refund is to be paid or  
18 additional premium is to be charged (which period shall  
19 not be less than one year); and

20 (ii) the amount of the refund or additional premium  
21 shall not exceed 20% of the Health Maintenance  
22 Organization's profitable or unprofitable experience with  
23 respect to the group or other enrollment unit for the  
24 period (and, for purposes of a refund or additional  
25 premium, the profitable or unprofitable experience shall  
26 be calculated taking into account a pro rata share of the

1 Health Maintenance Organization's administrative and  
2 marketing expenses, but shall not include any refund to be  
3 made or additional premium to be paid pursuant to this  
4 subsection (f)). The Health Maintenance Organization and  
5 the group or enrollment unit may agree that the profitable  
6 or unprofitable experience may be calculated taking into  
7 account the refund period and the immediately preceding 2  
8 plan years.

9 The Health Maintenance Organization shall include a  
10 statement in the evidence of coverage issued to each enrollee  
11 describing the possibility of a refund or additional premium,  
12 and upon request of any group or enrollment unit, provide to  
13 the group or enrollment unit a description of the method used  
14 to calculate (1) the Health Maintenance Organization's  
15 profitable experience with respect to the group or enrollment  
16 unit and the resulting refund to the group or enrollment unit  
17 or (2) the Health Maintenance Organization's unprofitable  
18 experience with respect to the group or enrollment unit and  
19 the resulting additional premium to be paid by the group or  
20 enrollment unit.

21 In no event shall the Illinois Health Maintenance  
22 Organization Guaranty Association be liable to pay any  
23 contractual obligation of an insolvent organization to pay any  
24 refund authorized under this Section.

25 (g) Rulemaking authority to implement Public Act 95-1045,  
26 if any, is conditioned on the rules being adopted in

1 accordance with all provisions of the Illinois Administrative  
2 Procedure Act and all rules and procedures of the Joint  
3 Committee on Administrative Rules; any purported rule not so  
4 adopted, for whatever reason, is unauthorized.

5 (Source: P.A. 103-84, eff. 1-1-24; 103-91, eff. 1-1-24;  
6 103-123, eff. 1-1-24; 103-154, eff. 6-30-23; 103-420, eff.  
7 1-1-24; 103-426, eff. 8-4-23; 103-445, eff. 1-1-24; 103-551,  
8 eff. 8-11-23; 103-605, eff. 7-1-24; 103-618, eff. 1-1-25;  
9 103-649, eff. 1-1-25; 103-656, eff. 1-1-25; 103-700, eff.  
10 1-1-25; 103-718, eff. 7-19-24; 103-751, eff. 8-2-24; 103-753,  
11 eff. 8-2-24; 103-758, eff. 1-1-25; 103-777, eff. 8-2-24;  
12 103-808, eff. 1-1-26; 103-914, eff. 1-1-25; 103-918, eff.  
13 1-1-25; 103-1024, eff. 1-1-25; 104-1, eff. 6-9-25; 104-28,  
14 eff. 1-1-26; 104-42, eff. 8-1-25; 104-68, eff. 1-1-26; 104-73,  
15 eff. 1-1-26; 104-98, eff. 1-1-26; 104-289, eff. 1-1-26;  
16 104-324, eff. 1-1-26; 104-334, eff. 8-15-25; 104-379, eff.  
17 1-1-26; 104-417, eff. 8-15-25; revised 11-21-25.)

18 Section 35. The Limited Health Service Organization Act is  
19 amended by changing Section 4003 as follows:

20 (215 ILCS 130/4003) (from Ch. 73, par. 1504-3)

21 Sec. 4003. Illinois Insurance Code provisions. Limited  
22 health service organizations shall be subject to the  
23 provisions of Sections 133, 134, 136, 137, 139, 140, 141.1,  
24 141.2, 141.3, 143, 143.31, 143c, 147, 148, 149, 151, 152, 153,

1 154, 154.5, 154.6, 154.7, 154.8, 155.04, 155.37, 155.49, 352c,  
2 355.2, 355.3, 355b, 355d, 356m, 356q, 356v, 356z.4, 356z.4a,  
3 356z.10, 356z.21, 356z.22, 356z.25, 356z.26, 356z.29, 356z.32,  
4 356z.33, 356z.41, 356z.46, 356z.47, 356z.51, 356z.53, 356z.54,  
5 356z.57, 356z.59, 356z.61, 356z.64, 356z.67, 356z.68, 356z.71,  
6 356z.73, 356z.74, 356z.75, 356z.79, 356z.80, 356z.81, 356z.83,  
7 356z.84, 356z.85, 356z.88, 364.3, 368a, 370a, 401, 401.1, 402,  
8 403, 403A, 408, 408.2, 409, 412, 444, and 444.1 and Articles  
9 IIA, VIII 1/2, XII, XII 1/2, XIII, XIII 1/2, XXV, XXVI, and  
10 XXXIIB of the Illinois Insurance Code. Nothing in this Section  
11 shall require a limited health care plan to cover any service  
12 that is not a limited health service. For purposes of the  
13 Illinois Insurance Code, except for Sections 444 and 444.1 and  
14 Articles XIII and XIII 1/2, limited health service  
15 organizations in the following categories are deemed to be  
16 domestic companies:

17 (1) a corporation under the laws of this State; or

18 (2) a corporation organized under the laws of another  
19 state, 30% or more of the enrollees of which are residents  
20 of this State, except a corporation subject to  
21 substantially the same requirements in its state of  
22 organization as is a domestic company under Article VIII  
23 1/2 of the Illinois Insurance Code.

24 (Source: P.A. 103-84, eff. 1-1-24; 103-91, eff. 1-1-24;  
25 103-420, eff. 1-1-24; 103-426, eff. 8-4-23; 103-445, eff.  
26 1-1-24; 103-605, eff. 7-1-24; 103-649, eff. 1-1-25; 103-656,

1 eff. 1-1-25; 103-700, eff. 1-1-25; 103-718, eff. 7-19-24;  
2 103-751, eff. 8-2-24; 103-758, eff. 1-1-25; 103-832, eff.  
3 1-1-25; 103-1024, eff. 1-1-25; 104-1, eff. 6-9-25; 104-42,  
4 eff. 8-1-25; 104-73, eff. 1-1-26; 104-98, eff. 1-1-26;  
5 104-289, eff. 1-1-26; 104-324, eff. 1-1-26; 104-334, eff.  
6 8-15-25; 104-379, eff. 1-1-26; 104-417, eff. 8-15-25; revised  
7 11-21-25.)

8 Section 40. The Voluntary Health Services Plans Act is  
9 amended by changing Section 10 as follows:

10 (215 ILCS 165/10) (from Ch. 32, par. 604)

11 Sec. 10. Application of Illinois Insurance Code  
12 provisions. Health services plan corporations and all persons  
13 interested therein or dealing therewith shall be subject to  
14 the provisions of Articles IIA and XII 1/2 and Sections 3.1,  
15 133, 136, 139, 140, 143, 143.31, 143c, 149, 155.22a, 155.37,  
16 354, 355.2, 355.3, 355.7, 355b, 355d, 356g, 356g.5, 356g.5-1,  
17 356m, 356q, 356r, 356t, 356u, 356u.10, 356v, 356w, 356x, 356y,  
18 356z.1, 356z.2, 356z.3a, 356z.4, 356z.4a, 356z.5, 356z.6,  
19 356z.8, 356z.9, 356z.10, 356z.11, 356z.12, 356z.13, 356z.14,  
20 356z.15, 356z.18, 356z.19, 356z.21, 356z.22, 356z.25, 356z.26,  
21 356z.29, 356z.30, 356z.32, 356z.32a, 356z.33, 356z.40,  
22 356z.41, 356z.46, 356z.47, 356z.51, 356z.53, 356z.54, 356z.56,  
23 356z.57, 356z.59, 356z.60, 356z.61, 356z.62, 356z.64, 356z.67,  
24 356z.68, 356z.71, 356z.72, 356z.74, 356z.75, 356z.77, 356z.79,

1 356z.80, 356z.81, 356z.83, 356z.84, 356z.85, 356z.88, 364.01,  
2 364.3, 367.2, 368a, 370a, 401, 401.1, 402, 403, 403A, 408,  
3 408.2, and 412, and paragraphs (7) and (15) of Section 367 of  
4 the Illinois Insurance Code.

5 Rulemaking authority to implement Public Act 95-1045, if  
6 any, is conditioned on the rules being adopted in accordance  
7 with all provisions of the Illinois Administrative Procedure  
8 Act and all rules and procedures of the Joint Committee on  
9 Administrative Rules; any purported rule not so adopted, for  
10 whatever reason, is unauthorized.

11 (Source: P.A. 103-84, eff. 1-1-24; 103-91, eff. 1-1-24;  
12 103-420, eff. 1-1-24; 103-445, eff. 1-1-24; 103-551, eff.  
13 8-11-23; 103-605, eff. 7-1-24; 103-656, eff. 1-1-25; 103-718,  
14 eff. 7-19-24; 103-751, eff. 8-2-24; 103-753, eff. 8-2-24;  
15 103-758, eff. 1-1-25; 103-832, eff. 1-1-25; 103-914, eff.  
16 1-1-25; 103-918, eff. 1-1-25; 103-1024, eff. 1-1-25; 104-1,  
17 eff. 6-9-25; 104-28, eff. 1-1-26; 104-42, eff. 8-1-25; 104-73,  
18 eff. 1-1-26; 104-98, eff. 1-1-26; 104-289, eff. 1-1-26;  
19 104-324, eff. 1-1-26; 104-379, eff. 1-1-26; 104-417, eff.  
20 8-15-25; revised 11-21-25.)

21 Section 45. The Pharmacy Practice Act is amended by adding  
22 Section 45 as follows:

23 (225 ILCS 85/45 new)

24 Sec. 45. Prescription hormone therapy.

1       (a) For purposes of this Section, "prescription hormone  
2 therapy" means all drugs approved by the United States Food  
3 and Drug Administration that are used to medically suppress,  
4 increase, or replace hormones that the body is not producing  
5 at intended levels and the necessary supplies for  
6 self-administration. "Prescription hormone therapy" does not  
7 include glucagon-like peptide-1 and glucagon-like peptide-1  
8 receptor agonists.

9       (b) Notwithstanding any other provision of law, a  
10 dispensing provider or pharmacist shall dispense, at a  
11 patient's request, up to a 12-month supply of a prescription  
12 hormone therapy and the necessary supplies for  
13 self-administration pursuant to a valid prescription that  
14 specifies an initial quantity followed by periodic refills,  
15 unless any of the following is true:

16           (1) The patient requests a smaller supply.

17           (2) The prescribing provider instructs that the  
18 patient must have a smaller supply.

19           (3) The prescribing provider temporarily limits  
20 refills to a 90-day supply due to an acute dispensing  
21 shortage, so long as those limits are rescinded at the  
22 first opportunity of a regularly reinstated, sustainable  
23 supply.

24           (4) The prescription hormone therapy is a controlled  
25 substance. If the prescription hormone therapy is a  
26 controlled substance, the pharmacist shall dispense the

1       maximum supply allowed under State and federal law to be  
2       obtained at one time by the patient.

3       Section 50. The Illinois Public Aid Code is amended by  
4       changing Section 5-16.8 as follows:

5             (305 ILCS 5/5-16.8)

6       Sec. 5-16.8. Required health benefits. The medical  
7       assistance program shall (i) provide the post-mastectomy care  
8       benefits required to be covered by a policy of accident and  
9       health insurance under Section 356t and the coverage required  
10      under Sections 356g.5, 356q, 356u, 356w, 356x, 356z.6,  
11      356z.26, 356z.29, 356z.32, 356z.33, 356z.34, 356z.35, 356z.46,  
12      356z.47, 356z.51, 356z.53, 356z.59, 356z.60, 356z.61, 356z.64,  
13      356z.67, 356z.71, ~~and 356z.75, and 356z.80,~~ 356z.84, 356z.85,  
14      and 356z.88 of the Illinois Insurance Code, (ii) be subject to  
15      the provisions of Sections 356z.19, 356z.44, 356z.49, 364.01,  
16      370c, and 370c.1 of the Illinois Insurance Code, and (iii) be  
17      subject to the provisions of subsection (d-5) of Section 10 of  
18      the Network Adequacy and Transparency Act.

19       The Department, by rule, shall adopt a model similar to  
20      the requirements of Section 356z.39 of the Illinois Insurance  
21      Code.

22       On and after July 1, 2012, the Department shall reduce any  
23      rate of reimbursement for services or other payments or alter  
24      any methodologies authorized by this Code to reduce any rate

1 of reimbursement for services or other payments in accordance  
2 with Section 5-5e.

3 To ensure full access to the benefits set forth in this  
4 Section, on and after January 1, 2016, the Department shall  
5 ensure that provider and hospital reimbursement for  
6 post-mastectomy care benefits required under this Section are  
7 no lower than the Medicare reimbursement rate.

8 (Source: P.A. 103-84, eff. 1-1-24; 103-91, eff. 1-1-24;  
9 103-420, eff. 1-1-24; 103-605, eff. 7-1-24; 103-703, eff.  
10 1-1-25; 103-758, eff. 1-1-25; 103-1024, eff. 1-1-25; 104-73,  
11 eff. 1-1-26; 104-324, eff. 1-1-26; 104-379, eff. 1-1-26;  
12 104-417, eff. 8-15-25; revised 11-21-25.)

13 Section 95. No acceleration or delay. Where this Act makes  
14 changes in a statute that is represented in this Act by text  
15 that is not yet or no longer in effect (for example, a Section  
16 represented by multiple versions), the use of that text does  
17 not accelerate or delay the taking effect of (i) the changes  
18 made by this Act or (ii) provisions derived from any other  
19 Public Act.