

Rep. Yehiel M. Kalish

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	10100HB0122ham001 LRB101 02888 KTG 56505 a
1	AMENDMENT TO HOUSE BILL 122
2	AMENDMENT NO Amend House Bill 122 by replacing
3	everything after the enacting clause with the following:
4	"Section 5. The Substance Use Disorder Act is amended by
5	adding Article 7 as follows:
6	(20 ILCS 301/Art. 7 heading new)
7	ARTICLE 7. BEHAVIORAL HEALTH ACCESS TO CARE OMBUDSMAN
8	(20 ILCS 301/7-5 new)
9	Sec. 7-5. Definitions. As used in this Article:
10	(a) "Health care provider" or "provider" means:
11	(1) a physician licensed under the Medical Practice Act
12	of 1987 to practice medicine in all of its branches; a
13	clinical psychologist licensed under the Clinical
14	Psychologist Licensing Act;
15	(2) a mental health professional who is licensed or

1	registered to provide mental health services by the
2	Department of Financial and Professional Regulation;
3	(3) any other health care provider regulated by the
4	State when engaged in assisting consumers with behavioral
5	health care access and coverage issues; or
6	(4) a health care facility licensed or regulated by the
7	State, when the facility is engaged in assisting consumers
8	with behavioral health care access and coverage issues.
9	(b) "Office" means the Office of the Ombudsman for
10	Behavioral Health Access to Care created in Section 7-10.
11	(c) "Ombudsman" means the individual designated under
12	Section 7-10 as the Ombudsman for Behavioral Health Access to
13	<pre>Care.</pre>
14	(20 ILCS 301/7-10 new)
15	Sec. 7-10. Office of the Ombudsman for Behavioral Health
16	Access to Care; appointment; duties.
17	(a) There is created in the Department of Human Services
18	the Office of the Ombudsman for Behavioral Health Access to
19	Care for the purpose of assisting residents of Illinois in
20	accessing behavioral health care.
21	(b) The Office and the Department shall operate in
22	accordance with a memorandum of understanding between the 2
23	entities. The memorandum of understanding shall contain, at a
24	minimum:
25	(1) a requirement that the Office has its own personnel

1	rules;
2	(2) a requirement that the Ombudsman has independent
3	hiring and termination authority over Office employees;
4	(3) a requirement that the Office must follow State
5	<pre>fiscal rules;</pre>
6	(4) a requirement that the Department of Human
7	Services' Division of Mental Health shall offer the Office
8	limited support with respect to:
9	(A) personnel matters;
10	(B) recruitment;
11	(C) payroll;
12	(D) benefits;
13	(E) budget submission, as needed;
14	(F) accounting;
15	(G) office space, facilities, and technical
16	support; and
17	(H) other provisions regarding administrative
18	support that will help maintain the independence of the
19	Office.
20	(c) The Office shall operate with full independence and has
21	complete autonomy, control, and authority over operations,
22	budget, and personnel decisions related to the Office and the
23	Ombudsman.
24	(d) By November 1, 2019, the Governor shall designate an
25	Ombudsman for Behavioral Health Access to Care, who shall serve
26	as Director of the Office. The Ombudsman shall serve as a

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neutral party to help consumers, including consumers who are uninsured or have public or private health benefit coverage, including coverage that is not subject to State regulation, and health care providers, acting on their own behalf, on behalf of a consumer with the consumer's written permission, or on behalf of a group of health care providers, navigate and resolve issues related to consumer access to behavioral health care, including care for mental health conditions and substance use disorders.

(e) The Ombudsman shall:

- (1) interact with consumers and health care providers with concerns or complaints to help the consumers and providers resolve behavioral health care access and coverage issues;
- (2) identify, track, and report to the appropriate regulatory or oversight agency concerns, complaints, and potential violations of State or federal rules, regulations, or statutes concerning the availability of, and terms and conditions of, benefits for mental health conditions or substance use disorders, including potential violations related to quantitative and non-quantitative treatment limitations;
- (3) receive and assist consumers and providers in reporting concerns and filing complaints with appropriate regulatory or oversight agencies relating to inappropriate care or involuntary admissions or judicial admissions

Τ	under the Mental Health and Developmental Disabilities
2	<pre>Code;</pre>
3	(4) provide appropriate information to help consumers
4	obtain behavioral health care;
5	(5) develop appropriate points of contact for
6	referrals to other State and federal agencies; and
7	(6) provide appropriate information to help consumers
8	or health care providers file appeals or complaints with
9	the appropriate entities, including insurers and other
10	State and federal agencies.
11	(f) The Ombudsman, employees of the Office, and any persons
12	acting on behalf of the Office shall comply with all State and
13	federal confidentiality laws that govern the Department of
14	Human Services with respect to the treatment of confidential
15	information or records and the disclosure of such information
16	and records.
17	(q) In the performance of his or her duties, the Ombudsman
18	shall act independently of the Department of Human Services'
19	Division of Mental Health. Any recommendations made or
20	positions taken by the Ombudsman do not reflect those of the
21	Department of Human Services or the Division of Mental Health.
22	(20 ILCS 301/7-15 new)
23	Sec. 7-15. Liaisons. The Director of Insurance and the
24	Secretary of Human Services shall each appoint a liaison to the
25	Ombudsman to receive reports of concerns, complaints, and

- potential violations described in paragraph (2) of subsection 1
- (e) of Section 7-10 from the Ombudsman, consumers, or health 2
- care providers. 3
- 4 (20 ILCS 301/7-20 new)
- 5 Sec. 7-20. Qualified immunity. The Ombudsman and employees
- or persons acting on behalf of the Office are immune from suit 6
- and liability, either personally or in their official 7
- 8 capacities, for any claim for damage to or loss of property, or
- 9 for personal injury or other civil liability caused by or
- 10 arising out of any actual or alleged act, error, or omission
- that occurred within the scope of employment, duties, or 11
- 12 responsibilities pertaining to the Office, including issuing
- 13 reports or recommendations; except that nothing in this Section
- 14 protects those persons from suit or liability for damage, loss,
- injury, or liability caused by the intentional or willful and 15
- 16 wanton misconduct of the person.
- (20 ILCS 301/7-25 new) 17
- 18 Sec. 7-25. Annual report.
- (a) On or before September 1, 2021, and on or before 19
- 20 September 1 of each year thereafter, the Ombudsman shall
- prepare and submit, in accordance with subsection (b), a 21
- 22 written report that includes information from the preceding
- 23 fiscal year concerning actions taken by the Ombudsman relating
- 24 to the duties of the Office set forth in Section 7-10.

1	(b) The Ombudsman shall submit the report required by this
2	Section to the Governor, the Secretary of Human Services, the
3	Director of Insurance, the Senate Human Services Committee or
4	any successor committee, and the House Committees on Human
5	Services, Insurance, Energy & Environment, and Mental Health or
6	any successor committees.
7	(c) The Ombudsman shall post the annual report on the

- 7 (c) The Ombudsman shall post the annual report on the 8 Department of Human Services' website.
- 9 (d) The Ombudsman shall not include in the report required
 10 by this Section any personally identifying information about an
 11 individual consumer or health care provider or identifying
 12 information about a health care facility licensed by the State
 13 or an emergency medical services system as defined in Section
 14 3.20 of the Emergency Medical Services (EMS) Systems Act.
- Section 10. The Illinois Insurance Code is amended by adding Section 370c.2 as follows:
- 17 (215 ILCS 5/370c.2 new)
- 18 <u>Sec. 370c.2. Parity reporting.</u>
- (a) By March 1, 2020, and every other March 1 thereafter,
 the Director shall submit a written report and provide a
 presentation of the report to the General Assembly that:
- 22 <u>(1) specifies the methodology the Director uses to</u>
 23 <u>verify that insurance carriers are complying with Section</u>
 24 370c and rules adopted under that Section and with the

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1	federal Paul Wellstone and Pete Domenici Mental Health
2	Parity and Addiction Equity Act of 2008, Public Law
3	110-343, as amended, any regulations adopted in accordance
4	with that Act, or guidance related to compliance with and
5	oversight of that Act;
6	(2) identifies market conduct examinations initiated,
7	conducted, or completed during the preceding 12 months
8	regarding compliance with Section 370c and rules adopted
9	under that Section and with the Paul Wellstone and Pete
10	Domenici Mental Health Parity and Addiction Equity Act of
11	2008 and regulations adopted under that Act and summarizes
12	the outcomes of those market conduct examinations; and
13	(3) details any educational or corrective actions the
14	Director has taken to ensure insurance carrier compliance
15	with Section 370c and rules adopted under that Section and
16	with the Paul Wellstone and Pete Domenici Mental Health
17	Parity and Addiction Equity Act of 2008 and regulations
18	adopted under that Act.
19	(b) The Director shall ensure that the report is written in
20	plain language and is made available to the public by, at a

Section 99. Effective date. This Act takes effect upon 22 becoming law.". 23

minimum, posting the report on the Department's website.