

1 AN ACT concerning health care.

2 **Be it enacted by the People of the State of Illinois,**  
3 **represented in the General Assembly:**

4 Section 5. The Illinois Administrative Procedure Act is  
5 amended by adding Sections 5-45.8 and 5-45.9 as follows:

6 (5 ILCS 100/5-45.8 new)

7 Sec. 5-45.8. Emergency rulemaking; Illinois Insurance  
8 Code. To provide for the expeditious and timely implementation  
9 of changes made to the Illinois Insurance Code by this  
10 amendatory Act of the 102nd General Assembly, emergency rules  
11 implementing the changes made to the Illinois Insurance Code  
12 by this amendatory Act of the 102nd General Assembly may be  
13 adopted in accordance with Section 5-45 by the Department of  
14 Insurance. The adoption of emergency rules authorized by  
15 Section 5-45 and this Section is deemed to be necessary for the  
16 public interest, safety, and welfare.

17 This Section is repealed on January 1, 2022.

18 (5 ILCS 100/5-45.9 new)

19 Sec. 5-45.9. Emergency rulemaking; Illinois Public Aid  
20 Code. To provide for the expeditious and timely implementation  
21 of changes made to the Illinois Public Aid Code by this  
22 amendatory Act of the 102nd General Assembly, emergency rules

1 implementing the changes made to the Illinois Public Aid Code  
2 by this amendatory Act of the 102nd General Assembly may be  
3 adopted in accordance with Section 5-45 by the Department of  
4 Healthcare and Family Services. The adoption of emergency  
5 rules authorized by Section 5-45 and this Section is deemed to  
6 be necessary for the public interest, safety, and welfare.

7 This Section is repealed on January 1, 2022.

8 Section 10. The Illinois Insurance Code is amended by  
9 changing Section 356z.22 as follows:

10 (215 ILCS 5/356z.22)

11 Sec. 356z.22. Coverage for telehealth services.

12 (a) For purposes of this Section:

13 "Asynchronous store and forward system" means the  
14 transmission of a patient's medical information through an  
15 electronic communications system at an originating site to a  
16 health care professional or facility at a distant site that  
17 does not require real-time or synchronous interaction between  
18 the health care professional and the patient.

19 "Distant site" means the location at which the health care  
20 professional ~~provider~~ rendering the telehealth service is  
21 located.

22 "Established patient" means a patient with a relationship  
23 with a health care professional in which there is an exchange  
24 of an individual's protected health information for the

1 purpose of providing patient care treatment or services.

2 "E-visit" means a patient-initiated non-face-to-face  
3 communication through an online patient portal with a health  
4 care professional. "E-visit" only includes communications  
5 where the initial inquiry is initiated by an established  
6 patient.

7 "Facility" includes a facility that is owned or operated  
8 by a hospital under the Hospital Licensing Act or University  
9 of Illinois Hospital Act, a facility under the Nursing Home  
10 Care Act, a rural health clinic, a federally qualified health  
11 center, a local health department, a community mental health  
12 center, a behavioral health clinic, an encounter rate clinic,  
13 a skilled nursing facility, a substance use treatment program  
14 licensed by the Department of Human Services' Division of  
15 Substance Use Prevention and Recovery, a school-based health  
16 center as defined in 77 Ill. Adm. Code 641.10, a physician's  
17 office, a podiatrist's office, a supportive living program  
18 provider, a hospice provider, a facility under the ID/DD  
19 Community Care Act, community-integrated living arrangements  
20 as defined in the Community-Integrated Living Arrangements  
21 Licensure and Certification Act, and a provider who receives  
22 reimbursement for a patient's room and board.

23 "Health care professional" has the meaning ascribed to  
24 that term in Section 5 of the Telehealth Act.

25 "Interactive telecommunications system" means an audio and  
26 video system, an audio-only telephone system (landline or

1 cellular), or any other telecommunications system permitting  
2 2-way, synchronous interactive communication between a patient  
3 at an originating site and a health care professional or  
4 facility at a distant site ~~permitting 2-way, live interactive~~  
5 ~~communication between the patient and the distant site health~~  
6 ~~care provider.~~ "Interactive telecommunications system" does  
7 not include a facsimile machine, electronic mail messaging, or  
8 text messaging.

9 "Originating site" means the location at which the patient  
10 is located at the time telehealth services are provided to the  
11 patient via telehealth.

12 "Remote patient monitoring" means the use of connected  
13 digital technologies or mobile medical devices to collect  
14 medical and other health data from a patient at one location  
15 and electronically transmit that data to a health care  
16 professional or facility at a different location for  
17 collection and interpretation.

18 "Telehealth services" has the meaning ascribed to that  
19 term in Section 5 of the Telehealth Act ~~means the delivery of~~  
20 ~~covered health care services by way of an interactive~~  
21 ~~telecommunications system.~~

22 "Virtual check-in" means a brief patient-initiated  
23 communication using a technology-based service, excluding  
24 facsimile, with a health care professional. "Virtual check-in"  
25 only includes communications where the initial inquiry is  
26 initiated by an established patient. "Virtual check-in" does

1 not include communications from a related office visit  
2 provided within the previous 7 days, nor communications that  
3 lead to an office visit or procedure within the next 24 hours  
4 or soonest available appointment.

5 (b) An ~~If an~~ individual or group policy of accident or  
6 health insurance or a managed care plan that is amended,  
7 delivered, issued, or renewed on or after the effective date  
8 of this amendatory Act of the 102nd General Assembly shall  
9 cover all telehealth services rendered by a health care  
10 professional to deliver any clinically appropriate, medically  
11 necessary covered services and treatments to insureds,  
12 enrollees, and members in the same manner as any other  
13 benefits covered under the policy. Reimbursement to a health  
14 care professional for telehealth services provided through an  
15 interactive telecommunications system, excluding virtual  
16 check-ins, shall be made on the same basis, in the same manner,  
17 and at the same rate as would be applied for the same services  
18 if they had been delivered in person. An individual or group  
19 policy of accident or health insurance or a managed care plan  
20 shall provide reasonable compensation to a facility that  
21 serves as the originating site at the time a telehealth  
22 service is rendered. Nothing in this Section shall be deemed  
23 as precluding a health insurer from providing a higher rate of  
24 reimbursement for telehealth services. ~~provides coverage for~~  
25 telehealth services, then it must comply with the following:

26 (1) To ensure telehealth service access is equitable

1 for all patients in receipt of health care services under  
2 this Section and health care professionals and facilities  
3 are able to deliver services within the scope of their  
4 licensure or certification, an ~~An~~ individual or group  
5 policy of accident or health insurance or a managed care  
6 plan that is amended, delivered, issued or renewed on or  
7 after the effective date of this amendatory Act of the  
8 102nd General Assembly shall ~~providing telehealth services~~  
9 ~~may~~ not:

10 (A) require that in-person contact occur between a  
11 health care professional ~~provider~~ and a patient;

12 (B) require patients, ~~the~~ health care  
13 professionals, or facilities ~~provider~~ to prove or  
14 document a hardship or access barrier to an in-person  
15 consultation for coverage and reimbursement of  
16 telehealth services ~~to be provided through telehealth;~~

17 (C) require the use of telehealth when the health  
18 care professional ~~provider~~ has determined that it is  
19 not appropriate; ~~or~~

20 (D) require the use of telehealth when a patient  
21 chooses an in-person consultation; ~~or~~

22 (E) require a physician or other health care  
23 professional to be physically present in the same room  
24 as the patient at the originating site, unless deemed  
25 medically necessary by the health care professional  
26 providing the telehealth service;

1           (F) create geographic or facility restrictions or  
2           requirements for telehealth services;

3           (G) negotiate different contract rates for  
4           telehealth services provided through an interactive  
5           telecommunications system and in-person services,  
6           excluding virtual check-ins;

7           (H) require health care professionals or  
8           facilities to offer or provide telehealth services;

9           (I) require patients to use telehealth services or  
10           require patients to use a separate panel of health  
11           care professionals or facilities to receive telehealth  
12           service coverage and reimbursement; or

13           (J) impose upon telehealth services utilization  
14           review requirements that are unnecessary, duplicative,  
15           or unwarranted, or impose any treatment limitations,  
16           prior authorization, documentation, or recordkeeping  
17           requirements that are more stringent than the  
18           requirements applicable to the same health care  
19           service when rendered in-person, except procedure code  
20           modifiers may be required to document telehealth; an  
21           individual or group policy of accident or health  
22           insurance or a managed care plan shall notify health  
23           care providers of any instructions necessary to  
24           facilitate billing for telehealth services.

25           (2) Deductibles, copayments, ~~or~~ coinsurance, or any  
26           other cost-sharing applicable to services provided through

1 telehealth shall not exceed the deductibles, copayments,  
2 ~~or~~ coinsurance, or any other cost-sharing required by the  
3 individual or group policy of accident or health insurance  
4 for the same services provided through in-person  
5 consultation.

6 (b-5) An If an individual or group policy of accident or  
7 health insurance or a managed care plan that is amended,  
8 delivered, issued, or renewed on or after the effective date  
9 of this amendatory Act of the 102nd General Assembly shall  
10 provide ~~provides~~ coverage for telehealth services, ~~it must~~  
11 ~~provide coverage~~ for licensed dietitian nutritionists and  
12 certified diabetes educators who counsel senior diabetes  
13 patients in the senior diabetes patients' homes to remove the  
14 hurdle of transportation for senior diabetes patients to  
15 receive treatment.

16 (c) Any policy, contract, or certificate of health  
17 insurance coverage that does not distinguish between  
18 in-network and out-of-network providers shall be subject to  
19 this Section as though all providers were in-network.

20 (d) Services provided by telehealth pursuant to this  
21 Section shall be consistent with all federal and State  
22 privacy, security, and confidentiality laws.

23 (e) Health care professionals and facilities shall  
24 determine the appropriateness of specific sites, technology  
25 platforms, and technology vendors for a telehealth service, as  
26 long as delivered services adhere to privacy laws, including,



1 but not limited to, the Health Insurance Portability and  
2 Accountability Act of 1996 and the Mental Health and  
3 Developmental Disabilities Confidentiality Act.

4 (f) ~~(e)~~ Nothing in this Section shall be deemed as  
5 precluding a health insurer from providing benefits for other  
6 telehealth services, including, but not limited to, remote  
7 monitoring services, other monitoring services, or oral  
8 communications otherwise covered under the policy.

9 (g) There shall be no restrictions on originating site  
10 requirements for telehealth coverage or reimbursement to the  
11 distant site under this Section.

12 (h) The Department may adopt rules to implement the  
13 provisions of this Section.

14 (Source: P.A. 100-1009, eff. 1-1-19.)

15 Section 15. The Telehealth Act is amended by changing  
16 Sections 5, 10, and 15 as follows:

17 (225 ILCS 150/5)

18 Sec. 5. Definitions. As used in this Act:

19 "Health care professional" includes, but is not limited  
20 to, physicians, physician assistants, optometrists, advanced  
21 practice registered nurses, clinical psychologists licensed in  
22 Illinois, prescribing psychologists licensed in Illinois,  
23 dentists, occupational therapists, pharmacists, physical  
24 therapists, clinical social workers, speech-language

1 pathologists, audiologists, hearing instrument dispensers,  
2 licensed certified substance use disorder treatment providers  
3 and clinicians, and mental health professionals and clinicians  
4 authorized by Illinois law to provide mental health services,  
5 qualified providers listed under paragraph (8) of subsection  
6 (e) of Section 3 of the Early Intervention Services System  
7 Act, dietitian nutritionists licensed in Illinois, and health  
8 care professionals associated with a facility.

9 "Telehealth services" means the evaluation, diagnosis, or  
10 interpretation of electronically transmitted patient-specific  
11 data between a remote location and a licensed health care  
12 professional that generates interaction or treatment  
13 recommendations. "Telehealth services" includes telemedicine  
14 and the delivery of health care services, mental health  
15 treatment and substance use disorder treatment and services to  
16 a patient, regardless of his or her location, provided by way  
17 of an interactive telecommunications system, as defined in  
18 subsection (a) of Section 356z.22 of the Illinois Insurance  
19 Code.

20 (Source: P.A. 100-317, eff. 1-1-18; 100-644, eff. 1-1-19;  
21 100-930, eff. 1-1-19; 101-81, eff. 7-12-19; 101-84, eff.  
22 7-19-19.)

23 (225 ILCS 150/10)

24 Sec. 10. Practice authority. A health care professional  
25 treating a patient located in this State through telehealth

1 services must be licensed or authorized to practice in  
2 Illinois.

3 (Source: P.A. 100-317, eff. 1-1-18.)

4 (225 ILCS 150/15)

5 Sec. 15. Use of telehealth services. A health care  
6 professional may engage in the practice of telehealth services  
7 in Illinois to the extent of his or her scope of practice as  
8 established in his or her respective licensing Act consistent  
9 with the standards of care for in-person services. This Act  
10 shall not be construed to alter the scope of practice of any  
11 health care professional or authorize the delivery of health  
12 care services in a setting or in a manner not otherwise  
13 authorized by the laws of this State.

14 (Source: P.A. 100-317, eff. 1-1-18.)

15 Section 20. The Illinois Public Aid Code is amended by  
16 changing Section 5-5.25 as follows:

17 (305 ILCS 5/5-5.25)

18 Sec. 5-5.25. Access to behavioral health and medical  
19 services.

20 (a) The Department and Medicaid managed care organizations  
21 shall comply with the requirements under Section 356z.22 of  
22 the Illinois Insurance Code regardless of whether a recipient  
23 of medical assistance under this Article is enrolled in the

1 fee for service or managed care medical assistance program.

2 (b) The Department may adopt rules to implement the  
3 provisions of this Section.

4 ~~(a) The General Assembly finds that providing access to~~  
5 ~~behavioral health and medical services in a timely manner will~~  
6 ~~improve the quality of life for persons suffering from illness~~  
7 ~~and will contain health care costs by avoiding the need for~~  
8 ~~more costly inpatient hospitalization.~~

9 ~~(b) The Department of Healthcare and Family Services shall~~  
10 ~~reimburse psychiatrists, federally qualified health centers as~~  
11 ~~defined in Section 1905(1)(2)(B) of the federal Social~~  
12 ~~Security Act, clinical psychologists, clinical social workers,~~  
13 ~~advanced practice registered nurses certified in psychiatric~~  
14 ~~and mental health nursing, and mental health professionals and~~  
15 ~~elinicians authorized by Illinois law to provide behavioral~~  
16 ~~health services to recipients via telehealth. The Department,~~  
17 ~~by rule, shall establish: (i) criteria for such services to be~~  
18 ~~reimbursed, including appropriate facilities and equipment to~~  
19 ~~be used at both sites and requirements for a physician or other~~  
20 ~~licensed health care professional to be present at the site~~  
21 ~~where the patient is located; however, the Department shall~~  
22 ~~not require that a physician or other licensed health care~~  
23 ~~professional be physically present in the same room as the~~  
24 ~~patient for the entire time during which the patient is~~  
25 ~~receiving telehealth services; and (ii) a method to reimburse~~  
26 ~~providers for mental health services provided by telehealth.~~

1       ~~(e) The Department shall reimburse any Medicaid certified~~  
2       ~~eligible facility or provider organization that acts as the~~  
3       ~~location of the patient at the time a telehealth service is~~  
4       ~~rendered, including substance abuse centers licensed by the~~  
5       ~~Department of Human Services' Division of Alcoholism and~~  
6       ~~Substance Abuse.~~

7       ~~(d) On and after July 1, 2012, the Department shall reduce~~  
8       ~~any rate of reimbursement for services or other payments or~~  
9       ~~alter any methodologies authorized by this Code to reduce any~~  
10       ~~rate of reimbursement for services or other payments in~~  
11       ~~accordance with Section 5-5e.~~

12       (Source: P.A. 100-385, eff. 1-1-18; 100-790, eff. 8-10-18;  
13       100-1019, eff. 1-1-19; 101-81, eff. 7-12-19.)

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