97TH GENERAL ASSEMBLY

State of Illinois

2011 and 2012

SB3490

Introduced 2/8/2012, by Sen. M. Maggie Crotty

SYNOPSIS AS INTRODUCED:

215 ILCS 134/30

Amends the Managed Care Reform and Patient Rights Act to provide that no health care plan or its subcontractors may, by contract, written policy, procedure, or any other means, mandate or require an optometrist or ophthalmologist to participate in and accept payment from a vision plan as a condition for participation in a health care plan. Effective immediately.

LRB097 17747 RPM 62962 b

SB3490

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AN ACT concerning insurance.

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

Section 5. The Managed Care Reform and Patient Rights Act
is amended by changing Section 30 as follows:

6 (215 ILCS 134/30)

7 Sec. 30. Prohibitions.

8 (a) No health care plan or its subcontractors may prohibit 9 or discourage health care providers by contract or policy from 10 discussing any health care services and health care providers, 11 utilization review and quality assurance policies, terms and 12 conditions of plans and plan policy with enrollees, prospective 13 enrollees, providers, or the public.

(b) No health care plan by contract, written policy, or procedure may permit or allow an individual or entity to dispense a different drug in place of the drug or brand of drug ordered or prescribed without the express permission of the person ordering or prescribing the drug, except as provided under Section 3.14 of the Illinois Food, Drug and Cosmetic Act.

20 (c) No health care plan or its subcontractors may by 21 contract, written policy, procedure, or otherwise mandate or 22 require an enrollee to substitute his or her participating 23 primary care physician under the plan during inpatient

hospitalization, such as with a hospitalist physician licensed 1 2 to practice medicine in all its branches, without the agreement 3 of that enrollee's participating primary care physician. "Participating primary care physician" for health care plans 4 5 and subcontractors that do not require coordination of care by a primary care physician means the participating physician 6 treating the patient. All health care plans shall inform 7 8 enrollees of any policies, recommendations, or quidelines 9 concerning the substitution of the enrollee's primary care 10 physician when hospitalization is necessary in the manner set 11 forth in subsections (d) and (e) of Section 15.

12 <u>(c-5) No health care plan or its subcontractors may, by</u> 13 <u>contract, written policy, procedure, or any other means,</u> 14 <u>mandate or require an optometrist or ophthalmologist to</u> 15 <u>participate in and accept payment from a vision plan as a</u> 16 <u>condition for participation in a health care plan.</u>

17 (d) Any violation of this Section shall be subject to the18 penalties under this Act.

19 (Source: P.A. 94-866, eff. 6-16-06.)

20 Section 99. Effective date. This Act takes effect upon 21 becoming law.