VOTE YES ON THE HEALTHCARE PROTECTION ACT (HPA)
HB 5395 (Moeller) / SB 3739 (Peters)

For too long, insurance companies have used predatory practices to restrict healthcare consumers’ access to care and boost profits. The Healthcare Protection Act (HPA) puts the power back into the hands of patients and their doctors.

Insurance companies use gaps in our insurance regulations to increase their profits by denying and delaying access to necessary medical treatment. They call it utilization management. The HPA will:

- Prohibit insurance companies from making up their own clinical criteria and require them to use generally accepted standards of care when deciding whether to cover a treatment recommended by a doctor.
- Ban prior authorization— the requirement that consumers get permission from the insurance company to get treatment their own doctor has prescribed—for in-patient hospital-setting mental health treatment.
- Ban step therapy so healthcare consumers can get the care they need without requiring them to try less-effective treatments and fail before they can get the care their doctors prescribed.
- Require insurers to publicly post any treatments that require prior authorization .
- Ban junk insurance plans called short term limited duration plans that don’t cover basic ACA required treatments, including maternal health and pre-existing conditions.

Insurers are already required to ensure that their networks are adequate to serve the healthcare needs of consumers. Bad actors skirt those requirements by maintaining “ghost networks,”— provider directories that include doctors who don’t exist, aren’t in network, or aren’t accepting new patients. The HPA will:

- Require insurance companies to conduct 90-day internal audits to ensure their provider directories reflect the reality of healthcare that’s available to consumers in that network.
- Require providers to inform insurance companies in a timely manner when they’re no longer accepting patients.

Gaps in Illinois law let insurance companies inflate what they charge consumers to pad profits. Premiums are not aligned with market standards, and large group plans in Illinois can raise rates on consumers without having to justify the rate increase as necessary to continue providing access to care—a practice Illinois banned for small group plans in 2023. The HPA will:

- Require prior approval from the Department of Insurance before large group plans hike rates on consumers.
- Require premiums to align with the actual cost of providing healthcare insurance.

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