

2020 Illinois 101st General Assembly Bill Summary 02172020

SB2340	Fine – Glenview, D	Amends the Illinois Controlled Substances Act. Provides that a prescriber who is licensed to prescribe controlled substances shall, prior to issuing a prescription for an opioid that is a Schedule II controlled substance, discuss with a patient who is under 18 years of age and is an emancipated minor, or with the patient's parent or guardian if the patient is under 18 years of age and is not an emancipated minor, the risks of developing a physical or psychological dependence on the opioid and, if the prescriber deems it appropriate, any alternative treatments as may be available. Provides that a prescriber who engages in a discussion required under this provision shall include a note in the patient's medical record indicating that the discussion took place. Provides that the discussion required under this provision shall not be required prior to issuing a prescription to any patient who is currently receiving hospice care from a comprehensive hospice licensed under the Hospice Program Licensing Act. Effective immediately.	Licensed Activities Committee	
SB2972	Bertino-Tarrant – Plainfield, D	Amends the Department of Public Health Powers and Duties Law of the Civil Administrative Code of Illinois. Provides that the Director of Public Health, if a physician licensed to practice medicine in all its branches in Illinois, shall establish a standing order complete with the issuance of a prescription for a hormonal contraceptive in accordance with the requirements of the provisions . Provides that if the Director is not a physician licensed to practice medicine in all its branches in Illinois, the Medical Director of the Department of Public Health shall establish the standing order. Amends the Illinois Insurance Code. Requires a group or individual policy of accident and health insurance or managed care plan to provide coverage for patient care services provided by a pharmacist. Makes conforming changes in the State Employees Group Insurance Act of 1971, the Counties Code, the Illinois Municipal Code, and the School Code. Amends the Pharmacy Practice Act. Provides that the definition of "practice of pharmacy" includes the dispensing of hormonal contraceptives pursuant to the standing order under provisions of the Department of Public Health Powers and Duties Law of the Civil Administrative Code of Illinois. Amends the Illinois Public Aid Code. Requires the medical assistance program to cover patient care services provided by a pharmacist for hormonal contraceptives assessment and consultation. Effective January 1, 2021.	Referred to Assignments	
SB3058	Manar – Bunker Hill, D	Amends the Illinois Insurance Code. Makes a technical change in a Section concerning licensure requirements for pharmacy benefit managers.	Referred to Assignments Committee	
SB3059	Manar – Bunker Hill, D	Amends the Illinois Insurance Code. Makes a technical change in a Section concerning licensure requirements for pharmacy benefit managers.	Referred to Assignments Committee	
SB3060	Manar – Bunker Hill, D	Amends the Pharmacy Practice Act. Removes a provision limiting consumers to 10 requests for disclosure of the current usual and customary retail price of prescription drugs or medical devices for which the person making the request has a prescription . Provides that a pharmacy must post a notice informing customers that they may request, in person or by telephone, the current usual and customary	Referred to Assignments Committee	

		retail price of any brand or generic prescription drug or medical device that the pharmacy offers for sale to the public.		
SB3117	Manar – Bunker Hill, D	Amends the Illinois Insurance Code. Provides that a pharmacy benefit manager has a fiduciary duty to a third party with which the pharmacy benefit manager has entered into a contract to manage the pharmacy benefit plan of the third party and shall notify the third party in writing of an activity, policy, or practice of the pharmacy benefit manager that presents a conflict of interest that interferes with the ability of the pharmacy benefit manager to discharge its fiduciary duty. Allows the Director of Insurance to refuse to issue, suspend, or revoke a license or impose a fine if it is found that a pharmacy benefit manager has failed to adequately discharge its fiduciary duty to a third party. Effective immediately.	Referred to Assignments Committee	
SB3147	Feigenholtz – Chicago, D	Amends the Department of Public Health Powers and Duties Law of the Civil Administrative Code of Illinois. Provides that the Director of Public Health shall establish a standing order complete with the issuance of a prescription for a smoking cessation product. Prescribes minimum requirements for the standing order. Amends the Illinois Insurance Code. Provides that a group or individual policy of accident and health insurance or a managed care plan that is amended, delivered, issued, or renewed after the effective date of the amendatory Act shall provide coverage for patient care services provided by a pharmacist for smoking cessation assessments and consultations. Amends the Pharmacy Practice Act. Provides that the "practice of pharmacy" includes the assessment and consultation of patients and dispensing of tobacco and nicotine cessation drugs and products. Amends the Illinois Public Aid Code. Provides that, subject to approval by the federal Centers for Medicare and Medicaid Services, the medical assistance program shall cover patient care services provided by a pharmacist for smoking cessation assessments and consultations. Defines terms. Effective January 1, 2020.	Referred to Assignments Committee	
SB3159	Manar – Bunker Hill, D	Amends the Pharmacy Practice Act. Provides that a pharmacist or his or her authorized employee must disclose to the consumer at the point of sale the current pharmacy retail price for each prescription medication the consumer intends to purchase. If the consumer's cost-sharing amount for a prescription exceeds the current pharmacy retail price, the pharmacist or his or her authorized employee must disclose to the consumer that the pharmacy retail price is less than the patient's cost-sharing amount. Defines terms. Effective immediately.	Referred to Assignments	
SB3266	Fine – Glenview, D	Amends the University of Illinois Hospital Act, the Ambulatory Surgical Treatment Center Act, the Hospital Licensing Act, and the Pharmacy Practice Act. Requires hospitals, facilities, and pharmacies to offer a patient any unused portion of a facility-provided medication upon discharge when it is administered to a patient at the hospital, facility, or pharmacy and is required for continuing treatment. Defines "facility-provided medication".	Referred to Assignments	
SB3411	Fine – Glenview, D	Amends the Managed Care Reform and Patient Rights Act. Requires health insurance carriers that provide coverage for prescription drugs to ensure that, within service areas and levels of coverage specified by federal law, at least half of individual and group plans meet one or more of the following criteria: apply a pre-	Referred to Assignments	

		deductible and flat-dollar copayment structure to the entire drug benefit, limit a beneficiary's monthly out-of-pocket financial responsibility for prescription drugs to a specified amount, or limit a beneficiary's annual out-of-pocket financial responsibility for prescription drugs to a specified amount. Provides that all plans for prescription drugs offered under the amendatory Act must be clearly and appropriately named, marketed in the same manner as other plans offered by the health insurance carrier, and offered for purchase to any individual and group plan sponsor. Effective January 1, 2021.		
SB3543	Manar – Bunker Hill, D	Amends the Medical Assistance Article of the Illinois Public Aid Code. Requires all Medicaid managed care organizations to reimburse pharmacy provider dispensing fees and acquisition costs at no less than the amounts established under the fee-for-service program whether the Medicaid managed care organization directly reimburses pharmacy providers or contracts with a pharmacy benefit manager to reimburse pharmacy providers. Provides that the reimbursement requirement applies to all pharmacy services for persons receiving benefits under the Code including pharmacy services. Effective immediately.	Referred to Assignments	
SB3734	Manar – Bunker Hill, D	Amends the Illinois Insurance Code. Provides that a pharmacy benefit manager may not reimburse a pharmacist or pharmacy for a prescription drug or pharmacy service in an amount less than the amount the pharmacy benefit manager reimburses itself or an affiliate for the same prescription drug or pharmacy service. Provides that the Section applies to insurers that provide coverage for prescription drugs and pharmacy services, including through a pharmacy benefit manager. Defines terms. Effective immediately.	Referred to Assignments	
SB3740	Manar – Bunker Hill, D	Amends the Illinois Insurance Code. Provides that a pharmacy benefit manager shall pay the full amount paid by a health insurer or health benefit plan for prescription drug coverage to a pharmacy for such prescription drugs, less the amount of the pharmacy benefit manager's administrative costs. Effective immediately.	Referred to Assignments	
SB3741	Manar – Bunker Hill, D	Amends the Illinois Insurance Code. Prohibits a pharmacy benefit manager from requiring that a covered prescription drug be filled by a mail-order pharmacy as a condition for reimbursement of the cost of the prescription drug. Effective immediately.	Referred to Assignments	
HB0197	Flowers – Chicago, D	Amends the Pharmacy Practice Act. Requires that at least one registered pharmacy technician be on duty whenever the practice of pharmacy is conducted. Requires that pharmacies fill no more than 10 prescriptions per hour. Requires 10 pharmacy technician hours per 100 prescriptions filled. Prohibits pharmacies from requiring pharmacists to participate in advertising or soliciting activities that may jeopardize patient health, safety, or welfare and any activities or external factors that interfere with the pharmacist's ability to provide appropriate professional services. Provides that a pharmacist shall receive specified break periods. Provides that a pharmacy may not require a pharmacist to work during a break period, shall make available a break room meeting specified requirements, shall keep a complete and accurate record of the break periods, and may not require a pharmacist to work more than 8 hours a workday. Provides for enforcement and	Health Care Licenses Committee	Oppose

		penalties. Provides whistleblower protections for an employee of a pharmacy if the pharmacy retaliates against the employee for certain actions. Requires pharmacies to maintain a record of any errors in the receiving, filling, or dispensing of prescriptions.		
HB3493	Guzzardi – Chicago, D	Creates the Prescription Drug Affordability Act. Defines terms. Creates the Prescription Drug Affordability Board and includes provisions regarding: purpose; members; alternate members; conflict of interest; terms; additional staff; salary; compensation and reimbursement; and meetings. Creates the Prescription Drug Affordability Stakeholder Council and includes provisions regarding: purpose; members; knowledge requirements; terms; and compensation. Provides the manner in which a conflict of interest shall be disclosed. Provides that gifts or donations of services or property that indicate a potential conflict of interest may not be accepted by any member of the Board, Board staff, or third-party contractor. Includes provisions on applicability. Provides that the Board shall identify specified prescription drug products and determine whether each prescription drug product should be subject to a cost review. Provides that if the Board finds that spending on a prescription drug product creates affordability challenges, the Board shall establish an upper payment limit that applies to all purchases and payor reimbursements. Includes provisions regarding remedies and an appeal process. Creates the Prescription Drug Affordability Fund. Provides that the Board shall submit a report to the General Assembly including specified information. Includes a provision on term expiration for Board and Council members. Provides that the Board shall conduct a study of the operation of the generic drug market that includes specified information on or before June 1, 2020. Makes conforming changes in the State Finance Act. Effective immediately.	Prescription Drug Affordability & Accessibility Committee	
HB4362	Moeller – Elgin, D	Creates the Wholesale Importation of Prescription Drugs Act. Requires the Department of Public Health to design an importation program where the State is the licensed wholesaler of imported drugs from licensed, regulated Canadian suppliers. Requires the program to address specified issues, including billing issues, cost savings issues, and safety and regulatory issues. Contains auditing and reporting requirements. Provides that the Department shall enlist the assistance of the Attorney General to identify the potential for anti-competitive behavior in industries that would be affected by an importation program. Requires the Department to submit a formal request to the Secretary of the United States Department of Health and Human Services for certification of the importation program. Requires the Department to have the program operational within 6 months after receiving the certification. Contains provisions concerning implementation requirements.	Referred to Rules Committee	Opposed
HB4475	Zalewski – Riverside, D	Amends the Pharmacy Practice Act. Provides that provisions relating to pharmacist working hours shall not apply when an emergency, as deemed by the professional judgement of the pharmacist in charge (rather than the pharmacist) , necessitates that a pharmacist, student pharmacist, or pharmacy technician work longer than 12 continuous hours, work without	Referred to Rules Committee	Support

		taking required meal breaks, or have a break interrupted in order to minimize immediate health risks for patients.		
HB4477	Harris – Chicago, D	Amends the Managed Care Reform and Patient Rights Act. Requires health insurance carriers that provide coverage for prescription drugs to ensure that, within service areas and levels of coverage specified by federal law, at least half of individual and group plans meet one or more of the following criteria: apply a pre-deductible and flat-dollar copayment structure to the entire drug benefit, limit a beneficiary's monthly out-of-pocket financial responsibility for prescription drugs to a specified amount, or limit a beneficiary's annual out-of-pocket financial responsibility for prescription drugs to a specified amount. Provides that all plans for prescription drugs offered under the amendatory Act must be clearly and appropriately named, marketed in the same manner as other plans offered by the health insurance carrier, and offered for purchase to any individual and group plan sponsor. Effective January 1, 2021.	Rules Committee	
HB4552	McCombie – Savana, R	Amends the Criminal Code of 2012. Enhances the penalties from assault and battery to aggravated assault and aggravated battery if the victim is a pharmacist, student pharmacist, or pharmacy technician performing his or her duties as a pharmacist, student pharmacist, or pharmacy technician. Enhances from a Class 2 felony to a Class 1 felony a robbery or burglary committed in a pharmacy. Amends the Illinois Controlled Substances Act. Provides that any person who violates the provisions concerning the illegal delivery of a controlled substance in an amount not otherwise specified in the statute classified in Schedule II, III, IV, or V that was illegally and directly obtained from a pharmacy, either through robbery or burglary, which substance is not included as a Class 2 felony by the statute, is guilty of a Class 2 felony. Provides that the fine for a violation shall not be more than \$200,000. Effective January 1, 2020.	Referred to Rules Committee	Support
HB4578	Moeller – Elgin, D	Amends the Clinical Psychologist Licensing Act. In language providing that a written delegation of prescriptive authority by a collaborating physician may only include medications for the treatment of mental health disease or illness the collaborating physician generally provides to his or her patients in the normal course of his or her clinical practice, deletes an exception for patients who are less than 17 years of age or over 65 years of age.	Referred to Rules Committee	
HB4633	LaPointe – Chicago, D	Amends the Illinois Insurance Code. Provides that an insurer that amends, delivers, issues, or renews group accident and health policies providing coverage for hospital or medical treatment or services for illness entered into on or after January 1, 2021 shall ensure that the insured have timely and proximate access to treatment for mental, emotional, nervous, or substance use disorders or conditions. Provides that network adequacy standards for timely and proximate access to treatment for mental, emotional, nervous, or substance use disorders or conditions must satisfy specified minimum requirements. Provides that if there is no in-network facility or provider available for an insured to receive timely and proximate access to treatment for mental, emotional, nervous, or substance use disorders or conditions in accordance with the minimum network adequacy standards, the insurer shall provide necessary exceptions to its network to ensure admission and	Referred to Rules Committee	

		treatment with a provider or at a treatment facility in accordance with those network adequacy standards. Effective immediately.		
HB4692	Willis – Northlake, D	Amends the Medical Practice Act of 1987. Provides that a physician licensed to practice medicine in all its branches may collaborate with a physician assistant if specified requirements are met for a collaborative agreement. Provides that a collaborative agreement shall be for services in the same area of practice or specialty as the collaborating physician in his or her clinical medical practice. Amends the Physician Assistant Practice Act of 1987. Deletes language requiring a collaborative agreement to be written for a physician assistant and changes requirements for the collaborative agreement. Provides that medical care provided by a physician assistant shall be consistent with the physician assistant's education, training, and experience. Makes changes to provisions concerning prescriptive authority of a physician assistant. Provides that in a hospital, hospital affiliate, or ambulatory surgical treatment center, the medical staff (instead of the attending physician) shall determine a physician assistant's role in providing care for patients. Changes the physician assistant advisory committee to the Physician Assistant Medical Licensing Board. Changes the membership and duties of the Board. Removes provisions concerning initial terms of office for Board members. Makes conforming and other changes. Effective January 1, 2021.	Filed with the Clerk	
HB4771	Mazzochi – Westmont, R	Amends the Illinois Food, Drug and Cosmetic Act. Requires a manufacturer of a prescription drug that is sold, offered for sale, or distributed in this State, or placed on a formulary to be eligible for payment, co-payment, or reimbursement in this State, to notify the Department of Public Health of specified information concerning active pharmaceutical ingredients.	Rules Committee	
HB4785	Edly-Allen – Libertyville, D	Amends the Illinois Controlled Substances Act. Provides that whenever a controlled substance that is an opioid is dispensed by a practitioner, it shall have an orange sticker with the word "opioid" in easily legible font placed on the cap or dispenser and shall have a warning label stating "Risk of addiction and overdose". Provides that a patient may remove the cap sticker or warning label. Provides that the practitioner shall also provide each person with a pamphlet that shall be developed and approved by the Department of Human Services Substance Use Prevention and Recovery Division, which shall include guidance on associated risks of opioid use and how to mitigate them, and the Illinois Helpline for Opioids and Other Substances helpline number or its successor. Provides that the Department of Human Services may adopt rules to implement this provision. Effective January 1, 2021.	Filed with the Clerk	
HB4822	Demmer – Dixon, R	Creates the Preserving Access to Affordable Drugs Act. Provides that an agreement resolving or settling, on a final or interim basis, a patent infringement claim in connection with the sale of a pharmaceutical product is presumed to have anticompetitive effects and is a violation of the Act if certain circumstances apply. Provides other requirements for patent infringement claims in connection with the sale of a pharmaceutical product. Contains provisions regarding presumptions in an action under the Act. Provides civil penalties for violating the Act. Provides that any penalty shall accrue only to the State of Illinois and shall be recovered in a civil	Rules Committee	

		action brought by the Attorney General against any party to an agreement that violates this Act. Requires an action to enforce a cause of action for a violation of the Act to be commenced within 4 years after the cause of action accrued. Contains other provisions.		
HB4888	Gong-Gershowitz – Glenview, D	Creates the Pharmaceutical Recovery Act. Requires covered manufacturers to, no later than July 1, 2021 or 6 months after becoming a covered manufacturer, whichever is later, participate in an approved drug take-back program or have established and implemented a drug take-back program independently or as part of a group of covered manufacturers. Provides requirements for the drug take-back program and for manufacturer program operators. Requires each manufacturer program operator to submit a proposal for the establishment and implementation of a drug take-back program to the Environmental Protection Agency for review and approval. Contains provisions regarding changes or modifications to drug take-back programs, promotion of drug take-back programs, annual reports, funding, and reimbursement. Requires covered manufacturers and manufacturer program operators to submit an annual \$5,000 registration fee. Provides civil penalties. Creates the Pharmaceutical Take-Back Reimbursement Program Fund and makes a conforming change in the State Finance Act. Contains other provisions. Amends the Freedom of Information Act. Provides that proprietary information submitted to the Environmental Protection Agency under the Pharmaceutical Recovery Act is exempt from inspection and copying under the Act. Effective immediately.	Filed with the Clerk	
HB4997	Meier – Highland, D	Amends the Illinois Controlled Substances Act. Provides that a prescriber who is licensed to prescribe controlled substances shall, prior to issuing a prescription for an opioid that is a Schedule II controlled substance, discuss with a patient who is under 18 years of age and is an emancipated minor, or with the patient's parent or guardian if the patient is under 18 years of age and is not an emancipated minor, the risks of developing a physical or psychological dependence on the opioid and, if the prescriber deems it appropriate, any alternative treatments as may be available. Provides that a prescriber who engages in a discussion required under this provision shall include a note in the patient's medical record indicating that the discussion took place. Provides that the discussion required under this provision shall not be required prior to issuing a prescription to any patient who is currently receiving hospice care from a comprehensive hospice licensed under the Hospice Program Licensing Act. Effective immediately.	Rules committee	
HB4998	Meier – Highland, D	Amends the Illinois Controlled Substances Act. Provides that an initial prescription for an opioid may only be issued for a 7-day supply. Defines "opioid".	Filed with the Clerk	
HB5005	LaPointe – Chicago, D	Creates the Prescription Drug Repository Program Act. Requires the Department of Public Health to establish a prescription drug repository program, under which a healthcare facility may donate a prescription drug or supplies needed to administer a prescription drug for use by an individual who meets eligibility criteria specified by the Department. Sets forth requirements that prescription drugs or supplies must meet in order to be accepted and dispensed under the program. Provides that no drugs or supplies donated under the prescription drug repository program may be resold. Provides that nothing in the Act requires that a pharmacy or pharmacist	Filed with the Clerk	

		participate in the prescription drug repository program. Provides for civil and criminal immunity for drug and supply manufacturers and pharmacists in relation to the donation, acceptance, or dispensing of prescription drugs or supplies under the prescription drug repository program. Amends the Pharmacy Practice Act, the Wholesale Drug Distribution Licensing Act, the Senior Pharmaceutical Assistance Act, the Illinois Food, Drug and Cosmetic Act, the Illinois Controlled Substances Act, and the Cannabis and Controlled Substances Tort Claims Act to provide that persons engaged in donating or accepting, or packaging, repackaging, or labeling, prescription drugs to the extent permitted or required under the Prescription Drug Repository Program Act are exempt from provisions of those other Acts that might prohibit or otherwise regulate such activity.		
HB5510	Harris – Chicago, D	Creates the Prior Authorization Reform Act. Provides requirements concerning disclosure and review of prior authorization requirements, denial of claims or coverage by a utilization review program, and the implementation of prior authorization requirements or restrictions. Provides requirements concerning a utilization review program's obligations with respect to prior authorizations in non-urgent circumstances, urgent health care services, and emergency health care services. Provides that a utilization review program shall not require prior authorization under specified circumstances. Provides requirements concerning the length of prior authorizations. Provides that health care services are automatically deemed authorized if a utilization review program fails to comply with the requirements of the Act. Provides that the Director of Insurance may impose an administrative fine not to exceed \$250,000 for violations of the Act. Defines terms. Amends the Managed Care Reform and Patient Rights Act to provide that an insurer that provides prescription drug benefits must comply with the requirements of the Prior Authorization Reform Act. Provides that if prior authorization for covered post-stabilization services is required by a health care plan, the plan shall comply with the requirements of the Prior Authorization Reform Act. Amends the Illinois Public Aid Code to provide that all managed care organizations shall comply with the requirements of the Prior Authorization Reform Act. Makes other changes. Effective January 1, 2021.	Human Services Committee	
HB5498	Conroy – Villa Park, D	Amends the Illinois Insurance Code. Provides that the Department of Insurance and the Department of Healthcare and Family Services shall each appoint a Mental Health and Substance Use Disorder Parity Compliance Officer to assist with the responsibilities of enforcing the requirements of the Illinois Insurance Code. Provides that group accident and health policies providing coverage for hospital or medical treatment or services for illness on an expense-incurred basis shall provide specified coverage for the diagnosis and medically necessary treatment of mental, emotional, nervous, or substance use disorders or conditions. Provides criteria and standards for the types of treatment that constitute medically necessary treatment of mental, emotional, nervous, or substance use disorders or conditions. Provides that an insurer shall not limit benefits or coverage for chronic or pervasive mental, emotional, nervous, or substance use disorders or conditions to short-term treatment or to alleviating current symptoms. Provides that insurers shall perform specified actions to ensure the proper use of medical necessity criteria. Provides	Filed with the Clerk	

		that if medically necessary services for mental, emotional, nervous, or substance use disorders or conditions are not available in-network within the geography and timeliness standards, the insurer must cover out-of-network services. Provides that if the Department of Insurance determines that an insurer has failed to meet the requirements of the amendatory Act, it shall impose a penalty per product line with respect to each beneficiary. Makes other changes.		
HB5510	Harris – Chicago, D	Creates the Prior Authorization Reform Act. Provides requirements concerning disclosure and review of prior authorization requirements, denial of claims or coverage by a utilization review program, and the implementation of prior authorization requirements or restrictions. Provides requirements concerning a utilization review program's obligations with respect to prior authorizations in non-urgent circumstances, urgent health care services, and emergency health care services. Provides that a utilization review program shall not require prior authorization under specified circumstances. Provides requirements concerning the length of prior authorizations. Provides that health care services are automatically deemed authorized if a utilization review program fails to comply with the requirements of the Act. Provides that the Director of Insurance may impose an administrative fine not to exceed \$250,000 for violations of the Act. Defines terms. Amends the Managed Care Reform and Patient Rights Act to provide that an insurer that provides prescription drug benefits must comply with the requirements of the Prior Authorization Reform Act. Provides that if prior authorization for covered post-stabilization services is required by a health care plan, the plan shall comply with the requirements of the Prior Authorization Reform Act. Amends the Illinois Public Aid Code to provide that all managed care organizations shall comply with the requirements of the Prior Authorization Reform Act. Makes other changes. Effective January 1, 2021.	Filed with the Clerk	
HB5571	West – Rockford, D	Amends the Nursing Home Care Act. Provides that the maximum possible period for informed consent to administration of psychotropic medication shall be until: a change in the prescription occurs, either as to type of psychotropic medication or an increase in the dosage, unless the physician's order provides for a change in the type of medication or an increase in dosage (rather than as to type of psychotropic medication or dosage); or a resident's care plan changes. Requires informed consent to be sought from (rather than by) a resident's guardian of the person if one has been named by a court of competent jurisdiction. Effective immediately.	Filed with the Clerk	
HB5659	Walsh – Joliet, D	Amends the Pharmacy Practice Act. Provides that the Department of Financial and Professional Regulation may refuse to issue or renew a license, may revoke a license, or may suspend, place on probation, fine, or take any disciplinary or non-disciplinary action against a license subject to the approval of the Disciplinary Review Board (rather than as the Department may deem proper). Creates the Disciplinary Review Board to approve findings and actions taken by the Department in regard to disciplinary matters under the Act. Provides that the Department may not deny an application for licensure or take any other disciplinary	Filed with the Clerk	Amend Add ICHP

		or non-disciplinary action against a license without approval from the Disciplinary Review Board. Effective immediately.		

Senate Deadlines

Bill Introduction February 14, 2020
 Senate bills out of Committee March 27, 2020
 Third Reading for Senate Bills April 24, 2020
 House Bills out of Committee May 15, 2020
 Third Reading House Bills May 22, 2020
 Adjournment May 31, 2020
 Veto Session

House Deadlines

Bill Introduction
 House Bills out of Committee
 Third Reading House Bills
 Senate Bills out of Committee
 Third Reading Senate Bills
 Adjournment
 Veto Session