

2019 Illinois 101st General Assembly Bill Summary

Bill Number	Sponsor	Summary	Location	ICHP Position	Keywords/Phrase
SJRCA0001	Harmon – Oak Park, D	Proposes to amend the Revenue Article of the Illinois Constitution. Removes a provision that provides that a tax on income shall be measured at a non-graduated rate. Provides that there may be one tax on the income of individuals and corporations (currently, there may be no more than one income tax imposed on individuals and one income tax imposed on corporations, and the rate of tax imposed upon corporations shall not exceed the rate imposed on individuals by more than a ratio of 8 to 5). Provides that the income tax may be a fair tax where lower rates apply to lower income levels and higher rates apply to higher income levels. Provides that no government other than the State may impose a tax on or measured by income. Effective upon being declared adopted.	Subcommittee on Constitutional Amendments		Income Tax
SB0007	Steans – Chicago, D	Creates the Cannabis Regulation and Taxation Act. Contains only a short title provision.	Executive Committee		Cannabis
SB0021 Same as HB0345	Morrison – Deerfield, D	Amends the Prevention of Tobacco Use by Minors and Sale and Distribution of Tobacco Products Act. Changes the name of the Act to the Prevention of Tobacco Use by Persons under 21 Years of Age and Sale and Distribution of Tobacco Products Act. Raises the age for whom tobacco products, electronic cigarettes, and alternative nicotine products may be sold to and possessed by from at least 18 years of age to at least 21 years of age. Defines "electronic cigarette". Repeals the Smokeless Tobacco Limitation Act. Amends various other Acts to make conforming changes. Effective July 1, 2019.	Placed on 3 rd reading in Senate		Tobacco
SB1135	Harmon – Oak Park, D	Amends the Hospital Licensing Act. Permits hospitals that admit patients for treatment of mental illness to grant medical staff privileges to licensed prescribing psychologists. Amends the Clinical Psychologist Licensing Act. Requires a psychologist applying for a prescribing psychologist license to have completed 30 psychology doctoral graduate credit hours and 31 credit hours in a Master of Science degree program. Provides that clinical rotation training requirements for prescribing psychologists shall be completed under the administrative supervision of a Director or other faculty member of a regionally approved University that provides training for the master's degree in clinical psychopharmacology. Requires the clinical rotation training to be housed in a healthcare setting and to meet certain academic standards. Provides that all prescriptions written by a prescribing psychologist must contain the prescribing psychologist's name and signature. Provides that physicians may provide collaboration and consultation with prescribing psychologists via telehealth. Permits persons who have 5 years of experience as a prescribing psychologist in another state or at a federal medical facility to apply for an Illinois prescribing psychologist license by endorsement. Makes changes to the Clinical Psychologists Licensing and Disciplinary Board. Amends the Telehealth Act. Expands the definition of "health care professional" to include prescribing psychologists. Amends the Illinois Public Aid Code. Requires the Department of Healthcare and Family Services to reimburse prescribing psychologists for behavioral health services provided via telehealth. Requires the	2 nd Reading in the Senate		Prescribing psychologists

		Department to, by rule, establish rates to be paid for specified services provided by clinical psychologists and prescribing psychologists. Effective immediately.			
SB1220 Same as HB2338	Jones – Chicago, D	Amends the Medical Practice Act of 1987. Provides for the licensure of naturopathic physicians. Makes conforming changes in various other Acts. Effective immediately.	Re-referred to Assignments Committee		Naturopathic physicians
SB1240 Same as HB3335	Link – Gurnee, D	Creates the Checkout Bag Tax Act. Imposes a tax of \$0.07 on each checkout bag used by a customer at a retail establishment in the State. Provides that the term "checkout bag" means a single use plastic, paper, or compostable bag provided by a retail establishment at the checkout, cash register, point of sale, or other point of departure to a customer for the purpose of transporting goods out of the retail establishment. Sets forth certain exceptions. Provides that the proceeds from the tax shall be distributed as follows: (1) the retailer shall retain \$0.02 per bag; (2) the wholesaler shall retain \$0.02 per bag; and (3) \$0.03 per bag shall be deposited into the Checkout Bag Tax Fund. Amends the State Finance Act to create the Checkout Bag Tax Fund. Provides that moneys in the Fund shall be remitted to counties and municipal joint action agencies. Amends the Counties Code and the Illinois Municipal Code to preempt certain actions by counties and municipalities concerning auxiliary containers or checkout bags.	2 nd Reading in the Senate		Plastic bags
SB1250	Murphy – Des Plaines, D	Amends the School Code. Requires a school district, public school, or nonpublic school to permit a student diagnosed with a pancreatic insufficiency to self-administer and self-manage his or her pancreatic enzyme replacement therapy if the parent or guardian of the student provides the school with written authorization for the self-administration or self-management and written authorization for the therapy from the student's physician, physician assistant, or advanced practice registered nurse; defines terms. Requires each school district or school to adopt an emergency care plan and develop an individualized health care plan for a student subject to the provision; specifies plan requirements. Provides that any disclosure of information under the provision shall not constitute a violation of the federal Health Insurance Portability and Accountability Act of 1996 or any regulations promulgated under that Act. Provides that any records created under the provision must be maintained in a confidential manner consistent with the federal Health Insurance Portability and Accountability Act of 1996.	2 nd Reading in the Senate		Pancreatic enzyme administration in schools
SB1327	Murphy – Des Plaines, D	Amends the Medical Assistance Article of the Illinois Public Aid Code. Provides that drugs prescribed to residents of the following facilities are not subject to prior approval as a result of the 4-prescription limit: long-term care facilities as defined in the Nursing Home Care Act; community-integrated living arrangements as defined in the Community-Integrated Living Arrangements Licensure and Certification Act; and supportive living facilities as defined in the Code.	Re-referred to Assignments Committee		4-prescription limit
SB1333	Rose – Champaign, D	Amends the Medical Assistance Article of the Illinois Public Aid Code. Provides that continuous glucose monitors shall be covered under the medical assistance program for children with diabetes who are under the age of 19 and otherwise eligible for medical assistance under the Article.	Re-referred to Assignments Committee		Childhood Diabetes - Medicaid

SB1455	Aquino – Chicago, D	Amends the Pharmacy Practice Act. Makes a technical change in a Section concerning licensure without examination.	Assignments Committee		PPA Tech
SB1557	Stadelman – Rockford, D	Amends the Illinois Insurance Code. Creates the Pharmacy Benefits Managers Article. Provides that a pharmacy benefits manager may not prohibit a pharmacy or pharmacist from providing a customer with a more affordable alternative if a more affordable alternative is available.	3 rd Reading in the Senate		PBM reg
SB1665 Same as HB2439	Hastings – Frankfort, D	Amends the Illinois Controlled Substances Act concerning the Prescription Monitoring Program. Excludes licensed veterinarians from the reporting requirements under the Program. Provides that a licensed veterinarian shall report information required under the Prescription Monitoring Program if the person who is presenting an animal for treatment is suspected of fraudulently obtaining any controlled substance or prescription for a controlled substance to the Department of Human Services. Provides that a licensed veterinarian may not be subject to any licensure or disciplinary action by the Department of Financial and Professional Regulation for the failure to report such a person. Effective immediately.	2 nd Reading in the Senate		Veterinarian PMP
SB1683	Jones – Chicago, D	Amends the Nurse Practice Act. Provides that collaboration does not require an employment relationship between the collaborating physician, podiatric physician, or dentist and the advanced practice registered nurse. Provides that, in the case of anesthesia services provided by a certified registered nurse anesthetist, an anesthesiologist, a physician, a dentist, or a podiatric physician must participate through discussion of and agreement with the anesthesia plan and remain available (rather than remain physically present and available on the premises during the delivery of anesthesia services) for diagnosis, consultation, and treatment of emergency medical conditions. Makes changes concerning the written collaborative agreements between a certified registered nurse anesthetist and a dentist. Changes provisions concerning full practice authority to apply them to certified registered nurse anesthetists. Requires that during the delivery of anesthesia by a certified registered nurse anesthetists, the attestation for completion of clinical experience must be attested to by the collaborating physician or physicians, podiatrists, or dentists, and the certified registered nurse anesthetist. Makes other changes. Effective immediately.	2 nd Reading in the Senate		APN collaboration
SB1688	Tracy – Quincy, R	Creates the Department of Health and Human Services Act and amends various Acts. Abolishes the Department of Human Services, the Department of Healthcare and Family Services, and the Department on Aging and transfers the functions of those agencies to the Department of Health and Human Services, which is created. Provides that the Secretary of Health and Human Services is the head of the new agency and transfers the staffs, records, and unexpended funds of the abolished agencies to the Department of Health and Human Services. Provides that the Secretary of Health and Human Services shall take all steps necessary to accomplish administrative efficiencies, staff reductions, containment of costs, and reallocation of existing resources and that the Secretary shall submit a report on those accomplishments to the General Assembly and the Governor. Makes conforming changes in other Acts. Effective July 1, 2020.	Re-referred to Assignments Committee		Merging DHFS, DHS and DAGing
SB1696	Steans – Chicago, D	Amends the Medical Assistance Article of the Illinois Public Aid Code. Provides that during the first quarter of State Fiscal Year 2020, the Department of Healthcare of Family Services must convene a technical advisory group consisting of members of all trade associations representing Illinois skilled nursing providers	Arrived in the House		Medicaid LTC nursing task force

		to discuss changes necessary with the federal implementation of Medicare's Patient-Driven Payment Model. Provides that implementation of Medicare's Patient-Driven Payment Model shall, by September 1, 2020, end the collection of the MDS data that is necessary to maintain the current RUG-IV Medicaid payment methodology. Requires the technical advisory group to consider a revised reimbursement methodology that takes into account transparency, accountability, actual staffing as reported under the federally required Payroll Based Journal system, changes to the minimum wage, adequacy in coverage of the cost of care, and a quality component that rewards quality improvements. Effective immediately.			
SB1703	Harmon – Oak Park, D	Amends the Medical Assistance Article of the Illinois Public Aid Code. Provides that a provider who has exhausted the written internal appeals process of a managed care organization (MCO) shall be entitled to an external independent third-party review of the MCO's final decision that denies, in whole or in part, a health care service to an enrollee or a claim for reimbursement to a provider for a health care service rendered to an enrollee of the Medicaid managed care organization. Requires a MCO's final decision letter to a provider to include: (i) a statement that the provider's internal appeal rights within the MCO have been exhausted; (ii) a statement that the provider is entitled to an external independent third-party review; (iii) the time period granted to request an external independent third-party review; and (iv) the mailing address to initiate an external independent third-party review. Provides that a party shall be entitled to appeal a final decision of the external independent third-party review within 30 days after the date upon which the appealing party receives the external independent third-party review. Provides that a final decision by the Director of Healthcare and Family Services shall be final and reviewable under the Administrative Review Law. Contains provisions concerning fees to help defray the cost of the administrative hearings; the specific claims of services that are appealable; and the Department's rulemaking authority. Effective immediately.	Re-referred to Assignments Committee		Medicaid MCO appeals
SB1710	Ellman – Naperville, D	Amends the Illinois Insurance Code. Provides that all entities providing prescription drug coverage shall permit and apply a prorated daily cost-sharing rate to prescriptions that are dispensed by a pharmacy for less than a 30-day supply if the prescriber or pharmacist indicates the fill or refill could be in the best interest of the patient or is for the purpose of synchronizing the patient's chronic medications. Provides that no entity providing prescription drug coverage shall deny coverage for the dispensing of any drug prescribed for the treatment of a chronic illness that is made in accordance with a plan among the insured, the prescriber, and a pharmacist to synchronize the refilling of multiple prescriptions for the insured. Provides that no entity providing prescription drug coverage shall use payment structures incorporating prorated dispensing fees determined by calculation of the days' supply of medication dispensed. Provides that dispensing fees shall be determined exclusively on the total number of prescriptions dispensed. Establishes criteria for an entity conducting audits (either on-site or remotely) of pharmacy records. Provides that the Department of Insurance and Director of Insurance shall have the authority to enforce the provisions of the Act and impose financial penalties. Effective January 1, 2020.	Re-referred to Assignments Committee		Medication synchronization
SB1715	Hastings – Frankfort, D	Amends the Pharmacy Practice Act. Provides that the "practice of pharmacy" includes the administration of injections of long-term antipsychotic medications	Rules Committee in the House		Pharmacist administration of

		pursuant to a valid prescription by a physician licensed to practice medicine in all its branches, upon completion of appropriate training, including how to address contraindications and adverse reactions set forth by rule, with notification to the patient's physician and appropriate record retention, or pursuant to hospital pharmacy and therapeutics committee policies and procedures.			long-term anti-psychotics
SB1716	Hastings – Frankfort, D	Amends the Medical Assistance Article of the Illinois Public Aid Code. Provides that on or after July 1, 2019, all FDA approved prescription medications that are recognized by a generally accepted standard medical reference as effective in the treatment of conditions specified in the most recent Diagnostic and Statistical Manual of Mental Disorders published by the American Psychiatric Association must be covered under both fee-for-service and managed care medical assistance programs for persons who are otherwise eligible for medical assistance and shall not be subject to any (i) utilization control, (ii) prior authorization mandate, or (iii) lifetime restriction limit mandate.	2 nd Reading in the Senate		Medicaid psych med coverage
SB1725	Munoz – Chicago, 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 (rather than may delegate care and treatment responsibilities to a physician assistant). 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 medical practice. Deletes language providing that a physician may enter into collaborative agreements with no more than 7 full-time physician assistants. Amends the Physician Practice Act of 1987. Provides that a physician assistant in a health professional shortage area with a score greater than or equal to 12 shall own his or her own medical practice. Provides that medical and surgical services provided by a physician assistant include: obtaining and performing comprehensive health histories and physical examinations; evaluating, diagnosing, and providing medical treatment; ordering, performing, and interpreting diagnostic studies and therapeutic procedures; educating patients on health promotion and disease prevention; providing consultation upon request; and writing medical orders. Provides other provisions regarding scope of practice. Deletes language requiring: a written collaborative agreement for all physician assistants to practice in the State; and a written collaborative agreement to describe the working relationship of the physician assistant with the collaborating physician and the categories of care, treatment, or procedures to be provided by the physician assistant. Creates the Physician Assistant Medical Licensing Board (rather than the physician assistant advisory committee). Makes other changes. Effective January 1, 2020.	Re-referred to Assignments Committee		PA collaboration
SB1828	Bush – Grayslake, D	Creates the Needle and Hypodermic Syringe Access Program Act. Provides that persons or entities that promote scientifically proven ways of mitigating health risks associated with drug use and other high-risk behaviors may establish and operate a needle and hypodermic syringe access program. Provides objectives for programs established under the Act. Includes language requiring programs to provide specified services. Provides that no employee or volunteer of or participant in a program shall be charged with or prosecuted for possession of specified substances. Provides that law enforcement officers who in good faith arrest or charge a person entitled to immunity under the Act shall not be subject to civil liability for the arrest or filing of charges. Provides that prior to commencing operations under the Act, an organization shall report specified information to the	Placed on 3 rd Reading in the Senate		Needle and syringe access

		Department of Public Health. Amends the Alcoholism and Other Drug Abuse and Dependency Act. Provides that the Department of Human Service shall give preference for grants and proposals to specified drug overdose prevention programs. Provides that the Department of Human Services shall conduct an evidence-based treatment needs assessment to be submitted to the General Assembly by December 31, 2019. Effective immediately.			
SB1873	Anderson – Moline, R	Amends the Regulatory Sunset Act. Extends the repeal date of the Pharmacy Practice Act from January 1, 2020 to January 1, 2030. Makes conforming changes. Effective immediately.	2 nd Reading in the Senate		PPA sunset
SB1900	Weaver – Peoria, R	Amends the Illinois Controlled Substances Act. Provides that when issuing a prescription for an opiate to a patient 18 years of age or older for outpatient use for the first time, a practitioner may not issue a prescription for more than a 7-day supply. Provides that a practitioner may not issue an opiate prescription to a person under 18 years of age for more than a 7-day supply at any time and shall discuss with the parent or guardian of the person under 18 years of age the risks associated with opiate use and the reasons why the prescription is necessary. Provides that notwithstanding this provision, if, in the professional medical judgment of a practitioner, more than a 7-day supply of an opiate is required to treat the patient's acute medical condition or is necessary for the treatment of chronic pain management, pain associated with a cancer diagnoses, or for palliative care, then the practitioner may issue a prescription for the quantity needed to treat that acute medical condition, chronic pain, pain associated with a cancer diagnosis, or pain experienced while the patient is in palliative care. Provides that the condition triggering the prescription of an opiate for more than a 7-day supply shall be documented in the patient's medical record and the practitioner shall indicate that a non-opiate alternative was not appropriate to address the medical condition. Provides that these provisions do not apply to medications designed for the treatment of substance abuse or opioid dependence. Effective immediately.	Re-referred to Assignments Committee		CS initial quantity
SB1942 Same as HB2495	Bush – Grayslake, D	Creates the Reproductive Health Act. Provides that every individual has a fundamental right to make autonomous decisions about one's own reproductive health. Provides that every individual who becomes pregnant has a fundamental right to continue the pregnancy and give birth or to have an abortion, and to make autonomous decisions about how to exercise that right. Provides that a fertilized egg, embryo, or fetus does not have independent rights under the law, of this State. Provides prohibited State actions. Provides that a party aggrieved by a violation of the Act may bring a civil lawsuit. Provides that a health care professional shall report each abortion performed to the Department of Public Health. Limits home rule powers. Repeals provisions regarding abortion in the Ambulatory Surgical Treatment Center Act, the Sexual Assault Survivors Emergency Treatment Act, and the Injunction Article of the Code of Civil Procedure. Repeals the Illinois Abortion Law of 1975, the Partial-birth Abortion Ban Act, and the Abortion Performance Refusal Act. Makes corresponding changes in the Children and Family Services Act, the Counties Code, the Medical Practice Act of 1987, the Vital Records Act, the Criminal Code of 2012, and the Rights of Married Persons Act. Amends the Freedom of Information Act. Provides that information and records held by the Department collected under the Reproductive	Re-referred to Assignments Committee		Abortion

		Health Act is exempt from inspection and copying. Amends the Ambulatory Surgical Treatment Center Act. Provides that that term "ambulatory surgical treatment center" does not include any facility in which the performance of abortion procedures is limited to those performed without general, epidural, or spinal anesthesia. Amends the Illinois Insurance Code. Provides insurance requirements for the coverage of abortion. Makes corresponding changes in the State Employees Group Insurance Act, the Health Maintenance Organization Act, and the Voluntary Health Services Plans Act. Amends the Nurse Practice Act. Provides that operative surgery does not include abortions performed without general, epidural, or spinal anesthesia, and other gynecological procedures related to abortions. Amends the Environmental Act. Provides that tissue and products from an abortion or miscarriage may be buried, entombed, or cremated. Effective immediately.			
SB1972	Hutchinson – Chicago Heights, D	Creates the Healthy Workplace Act and amends the State Finance Act. Requires employers to provide specified paid sick days to employees. Sets forth the purposes for and manner in which the sick days may be used. Contains provisions regarding employer responsibilities, unlawful employer practices, and other matters. Provides that an employee who works in the State who is absent from work for specified reasons is entitled to earn and use a minimum of 40 hours of paid sick time during a 12-month period or a pro rata number of hours of paid sick time under the provisions of the Act. Provides that it is unlawful for an employer to interfere with, restrain, deny, change work days or hours scheduled to avoid paying sick time, or discipline an employee for the exercise of, or the attempt to exercise, any right provided under or in connection with the Act, including considering the use of paid sick time as a negative factor in an employment action that involves hiring, terminating, evaluating, promoting, disciplining, or counting the paid sick time under a no-fault attendance policy. Provides that any employer that the Department of Labor or a court finds by a preponderance of the evidence to have knowingly, repeatedly, or with reckless disregard violated any provision of the Act or any rule adopted under the Act is subject to a civil money penalty to be paid to the employee not to exceed \$2,500 for each separate offense. Provides that the Department of Labor shall administer the Act. Authorizes individuals to file civil actions with respect to violations. Creates the Healthy Workplace Fund as a special fund in the State treasury. Effective immediately	Re-referred to Assignments Committee		Paid sick leave
SB2056	Murphy – Des Plaines, D	Amends the Illinois Insurance Code. Provides that no individual or group policy of accident and health insurance or managed care organization shall change an insured's eligibility or coverage during a contract period. Provides that during a contract period, insureds shall have the protection and continuity of their providers, medication, covered benefits, and formulary during the contract period. Amends the Illinois Public Aid Code making conforming changes.	Re-referred to Assignments Committee		Insurance coverage changes
SB2057	Murphy – Des Plaines, D	Amends the State Prompt Payment Act. Provides that by July 1, 2019, and by July 1 of each year thereafter, the State Comptroller shall determine the prompt payment interest rate for the fiscal year beginning on that July 1. Provides that any bill approved for payment on or after July 1, 2019 must be paid or the payment issued to the payee within 90 days of receipt of a proper bill or invoice. Provides that if payment is not issued to the payee within this 90-day period, an interest penalty calculated using the prompt payment interest rate shall be added for each	Re-referred to Assignments Committee		Prompt payment act

		month or fraction thereof after the end of this 90-day period until final payment is made. Provides for the prompt payment interest rate under the applicable provisions. Makes conforming and other changes. Effective immediately.			
SB2094	Glowiak – Western Springs, D	Amends the Safe Pharmaceutical Disposal Act. Provides that any county or municipality shall (rather than may) authorize the use of its city hall, police department, or any other facility under the county's or municipality's control to display a container suitable for use as a receptacle for used, expired, or unwanted pharmaceuticals. Effective January 1, 2020.	Re-referred to Assignments Committee		Take-back Kiosks in Police stations
HB0008	Flowers – Chicago, D	Creates the Illinois Medicare for All Health Care Act. Provides that all individuals residing in the State are covered under the Illinois Health Services Program for health insurance. Sets forth the health coverage benefits that participants are entitled to under the Program. Sets forth the qualification requirements for participating health providers. Sets forth standards for provider reimbursement. Provides that it is unlawful for private health insurers to sell health insurance coverage that duplicates the coverage of the Program. Provides that investor-ownership of health delivery facilities is unlawful. Provides that the State shall establish the Illinois Health Services Trust to provide financing for the Program. Sets forth the requirements for claims billing under the Program. Provides that the Program shall include funding for long-term care services and mental health services. Provides that the Program shall establish a single prescription drug formulary and list of approved durable medical goods and supplies. Creates the Pharmaceutical and Durable Medical Goods Committee to negotiate the prices of pharmaceuticals and durable medical goods with suppliers or manufacturers on an open bid competitive basis. Sets forth provisions concerning patients' rights. Provides that the employees of the Program shall be compensated in accordance with the current pay scale for State employees and as deemed professionally appropriate by the General Assembly. Effective January 1, 2020.	2 nd Reading in the House		Universal Health Care
HB0010 Same as 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 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.	Re-referred to Rules Committee	Oppose	Pharmacy Workload
HB0013	Flowers – Chicago, D	Amends the Illinois Insurance Code, the Pharmacy Practice Act, and the Wholesale Drug Distribution Licensing Act. Prohibits the licensure, transference, use, or sale of any records relative to prescription information containing patient-	Assignments in the Senate		Sale of health info

		identifiable or prescriber-identifiable data by any licensee or registrant of the Acts for commercial purposes.			
HB0041	Flowers – Chicago, D	Amends the Medical Assistance Article of the Illinois Public Aid Code. Extends medical assistance coverage to all women of childbearing age regardless of income level.	Re-referred to Rules Committee		Expands Medicaid
HB0053	Flowers – Chicago, D	Amends the Illinois Food, Drug and Cosmetic Act. Requires manufacturers of brand name or generic prescription drugs to notify State purchasers, health insurers, health care service plan providers, pharmacy benefit managers, and the General Assembly of specified increases in drug prices at least 60 days before such increase and the cost of specified new prescription drugs within 3 days after approval by the U.S. Food and Drug Administration. Provides that within 30 days after such notifications, prescription drug manufacturers shall report specified information to State purchasers, health insurers, health care service plan providers, pharmacy benefit managers, and the General Assembly. Provides that failure to report such information shall result in a specified civil penalty. Requires the General Assembly to conduct an annual public hearing on aggregate trends in prescription drug pricing. Provides that if the manufacturer of a prescription drug or its agent meets or otherwise communicates with a prescriber for the purpose of marketing a drug, then the manufacturer or its agent shall disclose to the prescriber if any ingredient in the drug it is marketing is known to pose a risk of dependency in humans. Makes other changes.	Re-referred to Rules Committee		Drug price regulation
HB0156	Flowers – Chicago, D	Creates the Prescription Drug Pricing Transparency Act. Requires health insurers to disclose certain rate and spending information concerning prescription drugs and certain prescription drug pricing information to the Department of Public Health. Requires the Department and health insurers to create annual lists of prescription drugs on which the State spends significant health care dollars and for which costs have increased at a certain rate over time. Requires the Department and health insurers to provide their lists to the Attorney General. Requires prescription drug manufacturers to notify the Attorney General if they are introducing a new prescription drug at a wholesale acquisition cost that exceeds the threshold set for a specialty drug under the Medicare Part D program. Amends the Illinois Insurance Code. Requires a group or individual policy of accident and health insurance that provides coverage for prescription drugs to apply the same cost-sharing requirements to interchangeable biological products as apply to generic drugs under the policy. Amends the Pharmacy Practice Act. Provides that when a pharmacist receives a prescription for a biological product, the pharmacist shall select the lowest priced interchangeable biological product (rather than allowing a pharmacist to substitute an interchangeable biological product only if certain requirements are met). Requires that when a pharmacist receives a prescription from a Medicaid recipient, the pharmacist shall select the preferred drug or biological product from the State's preferred drug list. Makes other changes. Makes conforming changes in the Freedom of Information Act. Effective immediately.	2 nd Reading in the House		Drug pricing
HB0162	Stuart – Collinsville, D	Amends the Illinois Controlled Substances Act. Provides that a sentencing enhancement of an additional 3 years imprisonment is applicable when the controlled substance also contains any amount of a fentanyl analog for the following violations: manufacture or delivery, or possession with intent to	Re-referred to Rules Committee		Fentanyl sentencing

		manufacture or deliver, a controlled substance, a counterfeit substance, or controlled substance analog; controlled substance trafficking; calculated criminal drug conspiracy; criminal drug conspiracy; streetgang criminal drug conspiracy; or delivery of a controlled, counterfeit, or look-alike substance to a person under 18 years of age (currently, the sentencing enhancement is applicable only to additional amounts of fentanyl). Effective immediately.			
HB0163	Stuart – Collinsville, D	Amends the Illinois Controlled Substances Act. Provides that the information required to be transmitted under the prescription monitoring program must be transmitted not later than the end of the business day on which a controlled substance is dispensed, or at such other time as may be required by the Department of Human Services by administrative rule (rather than, at the end of the next business day on which the controlled substance is dispensed).	Referred to Assignments Committee in the Senate	Opposed	Same day PMP posting
HB0170	Bennett – Pontiac, R	Amends the Administration Article of the Illinois Public Aid Code. Provides that the Department of Human Services shall require a drug test to screen each individual who applies for Temporary Assistance for Needy Families, and that subject to federal approval, the Department shall require a drug test to screen each individual who applies for benefits under the federal Supplemental Nutrition Assistance Program. Contains provisions concerning notice; persons required to comply with the drug testing requirements; persons exempt from the drug testing requirements; reimbursements for the cost of the drug testing; and other matters. Effective July 1, 2019.	Re-referred to Rules Committee		Drug test to receive Medicaid
HB0197 Same as HB0010	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 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.	Re-referred to Rules Committee	Oppose same as HB0010	Pharmacy Workload
HB0204	Ford – Chicago, D	Amends the Senior Citizens and Persons with Disabilities Property Tax Relief Act by reinstating the pharmaceutical assistance program that was eliminated by Public Act 97-689 and changing the short title to the Senior Citizens and Persons with Disabilities Property Tax Relief and Pharmaceutical Assistance Act. Makes conforming changes in various Acts.	Re-referred to Rules Committee		Re-establishes pharmaceutical assistance program
HB0207	Flowers – Chicago, D	Creates the Health Care for All Illinois Act. Provides that all individuals residing in this State are covered under the Illinois Health Services Program for health insurance. Sets forth requirements and qualifications of participating health care providers. Sets forth the specific standards for provider reimbursement. Provides that it is unlawful for private health insurers to sell health insurance coverage that	Re-referred to Rules Committee		Universal Health Care

		duplicates the coverage of the program. Requires the State to establish the Illinois Health Services Trust to provide financing for the program. Sets forth the specific requirements for claims billed under the program. Provides that the program shall include funding for long-term care services and mental health services. Creates the Pharmaceutical and Durable Medical Goods Committee to negotiate the prices of pharmaceuticals and durable medical goods with suppliers or manufacturers on an open bid competitive basis. Provides that patients in the program shall have the same rights and privacy as they are entitled to under current State and federal law. Provides that the Commissioner, the Chief Medical Officer, the public State board members, and employees of the program shall be compensated in accordance with the current pay scale for State employees and as deemed professionally appropriate by the General Assembly. Effective July 1, 2019.			
HB0208	Flowers – Chicago, D	Amends the School Code. Provides that beginning with the 2019-2020 school year, in every public school maintaining any of grades kindergarten through 12, there shall be instruction, study, and discussion on the side effects of cannabis when the use of cannabis is not authorized by the Compassionate Use of Medical Cannabis Pilot Program Act. Provides that each school board must develop and integrate a test on the use and side effects of cannabis into the instruction and require passage of the test by each student. Amends the State Mandates Act to require implementation without reimbursement by the State. Effective immediately.	2 nd Reading in the House		School education of cannabis effects
HB0239	Bennett – Pontiac, R	Amends the Illinois Controlled Substances Act. Provides that the limited immunity for a person who seeks or obtains emergency medical assistance for someone experiencing an overdose or for a person who is experiencing an overdose in a reasonably prudent manner (rather than in good faith) shall not be extended if law enforcement has reasonable suspicion or probable cause to detain, arrest, or search that person for criminal activity and the reasonable suspicion or probable cause is based on information obtained prior to or independent of the individual seeking or obtaining emergency medical assistance and not obtained as a direct result of the action of seeking or obtaining emergency medical assistance (rather than taking action to seek or obtain emergency medical assistance).	Re-referred to Rules Committee		Changes immunity for overdose reporting
HB0272	Harris – Chicago, D	Creates the Health Insurer Claims Assessment Act. Imposes an assessment of 1% on claims paid by a health insurance carrier or third-party administrator. Provides that the moneys received and collected under the Act shall be deposited into the Healthcare Provider Relief Fund and used solely for the purpose of funding Medicaid services provided under the medical assistance programs administered by the Department of Healthcare and Family Services.	Appropriations Human Services Committee		Insurance assessment Act
HB0315	McSweeney – Cary, R	Amends the Medical Assistance Article of the Illinois Public Aid Code. Requires the Department of Healthcare and Family Services to establish, by rule, minimum quality standards for providers of medical supplies, equipment, and related services applicable to contracted managed care organizations for all services rendered to MCO enrollees. Requires the minimum quality standards to be based upon recognized national standards promulgated by national bodies and by the Centers for Medicare and Medicaid Services. Requires the Department to set a rate of reimbursement payable by contracted managed care organizations to contracted, in-network providers of medical supplies, equipment, and related services at the default rate of reimbursement paid under the Illinois Medicaid fee-for-service program methodology for such medical supplies, equipment, and	Re-referred to Rules Committee		Medicaid MCO regulation

		related services in effect as of June 30, 2017. Requires contracted managed care organizations to offer a reimbursement rate to contracted, in-network providers of medical supplies, equipment, and related services at not less than 90% of the default rate of reimbursement paid under the Illinois Medicaid fee-for-service program methodology, including all policy adjusters, for such medical supplies, equipment, and related services of similar quality. Provides that these provisions shall not be construed to allow the Department or its contracted MCOs to enter into sole source contracts for the provision of durable medical equipment, supplies, or related services to Medicaid beneficiaries and Medicaid managed care enrollees. Effective immediately.			
HB0345 Same as SB0021	Lilly – Oak Park, D	Amends the Prevention of Tobacco Use by Minors and Sale and Distribution of Tobacco Products Act. Changes the name of the Act to the Prevention of Tobacco Use by Persons under 21 Years of Age and Sale and Distribution of Tobacco Products Act. Raises the age for whom tobacco products, electronic cigarettes, and alternative nicotine products may be sold to and possessed by from at least 18 years of age to at least 21 years of age. Defines "electronic cigarette". Repeals the Smokeless Tobacco Limitation Act. Amends various other Acts to make conforming changes. Effective July 1, 2019.	Sent to the Governor		Tobacco
HB0349	Cassidy – Chicago, D	Creates the Drug and Sharps Waste Stewardship Act. Directs the Environmental Protection Agency to administer a drug and sharps waste stewardship program. Provides that the State Board of Pharmacy is to guide and advise the Agency in its administration of the program. Requires covered entities to provide lists of covered and not covered products to the State Board and to implement stewardship plans. Requires stewardship plans to be submitted to the Agency for review and acceptance. Requires that all counties have at least one collection site for unused drugs and sharps per 50,000 people, and no fewer than 5 such collection sites. Requires counties that do not have the necessary number of collection sites to establish a mail-back program, or alternative collection program for covered products, or both. Imposes an administrative fee on covered entities. Provides penalties for covered entities that fail to comply with the provisions of the Act. Creates the Drug and Sharps Stewardship Fund and the Drug and Sharps Stewardship Penalty Account within the Fund. Directs the Agency to post lists of compliant covered entities on its website. Exempts stewardship programs already in existence under local ordinances at the time the Act takes effect from the Act's provisions, but provides that those entities with programs that are not within the Act's purview are not to receive any monetary support from the Drug and Sharps Stewardship Fund or the Drug and Sharps Stewardship Penalty Account. Exempts confidential proprietary information from public disclosure by the Agency.	Re-referred to Rules Committee		Drug waste stewardships
Hb0465	Harris – Chicago, D	Amends the Illinois Insurance Code. Provides that a contract between a health insurer and a pharmacy benefit manager must:(1) require the pharmacy benefit manager to update maximum allowable cost pricing information and maintain a process that will eliminate drugs from maximum allowable cost lists or modify drug prices to remain consistent with changes in pricing data; (2) prohibit the pharmacy benefit manager from limiting a pharmacist's ability to disclose the availability of a more affordable alternative drug; and (3) prohibit the pharmacy benefit manager from requiring an insured to make a payment for a prescription drug in an amount that exceeds the lesser of the applicable cost-sharing amount or the retail price of	2 nd Reading in the House	Support	PBM regulation

		the drug. Contains provisions concerning the inclusion of prescription drugs on a maximum allowable cost list, State licensing requirements for pharmacy benefit managers, and other matters. Makes conforming changes to other Acts. Amends the Managed Care Reform and Patient Rights Act. Provides that a health care plan shall apply any third-party payments for prescription drugs. Makes changes to provisions concerning the denial of coverage for emergency services. Amends the Illinois Public Aid Code. Provides that the Department of Healthcare and Family Services may enter into a contract with any third party on a fee-for-service reimbursement model for the purpose of administering pharmacy benefits. Requires the Department to ensure coordination of care between the third-party administrator and managed care organizations as a consideration in any contracts established. Amends the Freedom of Information Act to exempt from disclosure certain information pharmacy benefits managers are required to provide under the Illinois Public Aid Code. Contains a severability provision.			
HB0513	Madigan – Chicago, D	Amends the Substance Use Disorder Act. Makes a technical change in a Section concerning opiate prescriptions and educational materials.	2 nd Reading in the House		Tech – Substance Abuse
HB0634	Madigan – Chicago, D	Amends the Hypodermic Syringes and Needles Act. Makes a technical change in a Section concerning possession of hypodermic syringes and needles.	Executive Comm.		Tech – Hypodermic Needles
HB0822	Halpin – Rock Island, D	Amends the Care of Students with Diabetes Act. Provides that a school may maintain a supply of glucagon medication in any secure location that is accessible before, during, or after school where a student is most at risk, including, but not limited to, a classroom or the nurse's office; defines "glucagon medication" and "undesignated glucagon medication". Provides that a physician, a physician assistant who has prescriptive authority, or an advanced practice registered nurse who has prescriptive authority may prescribe undesignated glucagon medication in the name of the school to be maintained for use when necessary. Allows a delegated care aide to carry undesignated glucagon medication. Provides that within 24 hours after the administration of undesignated glucagon medication, a school must notify the school nurse and the student's parent or guardian or emergency contact, if known, and health care provider of its use. Effective immediately.	Referred to Assignments Committee in the Senate		Glucagon in schools
HB0889	Swanson – Woodhull, R	Amends the Illinois Insurance Code. Requires an individual or group policy of accident and health insurance or managed care plan to provide coverage for long-term antibiotic therapy for a person with a tick-borne disease. Makes conforming changes in the Health Maintenance Organization Act and the Illinois Public Aid Code.	Passed in the House		Insurance – Lyme Disease
HB0891	Sosnowski – Rockford, R	Amends the Illinois Insurance Code. Creates the Pharmacy Benefits Managers Article. Provides that a pharmacy or pharmacist shall have the right to provide an insured information regarding the amount of the insured's cost share for a prescription drug and that neither a pharmacy nor a pharmacist shall be penalized by a pharmacy benefits manager for discussing certain information or for selling a lower-priced drug to the insured if one is available. Provides that a pharmacy benefits manager shall not, through contract, prohibit a pharmacy from offering and providing direct and limited delivery services to an insured as an ancillary service of the pharmacy, as delineated in the contract between the pharmacy benefits	Re-referred to Rules Committee		PBM regulation

		manager and the pharmacy. Provides that a pharmacy benefits manager shall not charge, or attempt to collect from, an insured a copayment that exceeds the total charges submitted by the network pharmacy.			
HB0902	Ammons – Champaign, D	Creates the Cannabis Legalization Equity Act. Provides that notwithstanding any other provision of law, except as otherwise provided in the Act, the following acts are lawful and shall not be a criminal or civil offense under State law or the law of any political subdivision of this State or be a basis for seizure or forfeiture of assets under State law for persons 21 years of age or older: (1) possessing, consuming, using, displaying, purchasing, or transporting cannabis accessories; (2) possessing, growing, processing, or transporting on one's own premises no more than 24 mature cannabis plants and possession of the cannabis produced by the plants on the premises where the plants were grown; (3) possessing outside one's premises no more than 224 grams of cannabis; and (4) assisting another person who is 21 years of age or older in any of the acts described in items (1) through (3). Provides that an excise tax is imposed at the rate of 10% of the sale price of the sale or transfer of cannabis from a cannabis cultivation facility to a retail cannabis store or cannabis product manufacturing facility. Provides that at least 51% of the licenses issued by the Department of Agriculture for cannabis cultivation facilities and at least 51% of the licenses issued by the Department of Financial and Professional Regulation for retail cannabis stores shall be in communities disproportionately harmed by the war on drugs. Amends various other Acts to make conforming changes. Effective immediately.	Re-referred to Rules Committee		Cannabis legalization
HB1441	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.	Re-referred to Rules Committee		Drug Importation
HB1442	Mussman – Schaumburg, 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.	3 rd Reading in the House	Support	Pharmacist prescribing of hormonal contraceptives

		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, 2020.			
HB1654	Crespo – Streamwood, D	Amends the Medical Assistance Article of the Illinois Public Aid Code. Requires the Department of Healthcare and Family Services to calculate the payout ratios reported by managed care organizations no less frequently than annually and to post these calculations on its website. Provides that the minimum payout ratio shall be 85% and that a managed care organization not meeting the 85% threshold must refund to the State, for each coverage year, an amount equal to the difference between the calculated payout ratio and 85% multiplied by coverage year revenue for that managed care organization. Requires the Department to exclusively use paid claims data submitted by managed care organizations in establishing managed care capitation rates. Provides that managed care organizations shall not be reimbursed by the State for any costs associated with health insurance fees. Provides that beginning July 1, 2019, in addition to any other payments made for inpatient Medicaid inpatient services, the Department must make the following add-on enhancement payments for each covered inpatient day for any patient covered by any medical assistance program administered by the Department: (i) for each general acute care hospital with a rate year 2017 Medicaid inpatient utilization rate equal to or greater than 47%, an additional \$172 per inpatient day; (ii) for each hospital defined as a children's hospital under the Code with a rate year 2017 Medicaid inpatient utilization rate equal to or greater than 59%, an additional \$200 per inpatient day; and (iii) for each critical access hospital, an additional \$600 per inpatient day. Provides that the Department must require managed care organizations to make the same inpatient high-volume add-on enhancements for inpatient days of care. Effective July 1, 2019.	Re-referred to Rules Committee		Medicaid MCO regulation
HB2160	Conroy – Villa Park, D	Amends the Illinois Insurance Code. Requires the Department of Insurance to develop a uniform electronic prior authorization form to be used by an insurer that provides prescription drug benefits when requiring prior authorization. Provides that the development of the uniform electronic prior authorization form shall include input from specified interested parties and that the Department of Insurance shall take into consideration certain existing prior authorization forms and national standards pertaining to electronic authorization. Includes procedures for when a completed and accurate uniform electronic prior authorization form is not accepted by the insurer. Amends the Illinois Public Aid Code. Requires the Department of Healthcare and Family services to develop a uniform electronic prior authorization form to be used by a managed care organization that provides prescription drug benefits when requiring prior authorization. Provides that the development of the uniform electronic prior authorization form shall include input from specified interested parties and that the Department of Healthcare and Family Services shall take into consideration certain existing prior authorization forms and national standards pertaining to electronic authorization. Includes procedures for when a	Referred to Assignments Committee in the Senate		Insurance Prior Authorization Form

		completed and accurate uniform electronic prior authorization form is not accepted by the managed care organization.			
HB2174	Willis – Northlake, D	Amends the Managed Care Reform and Patient Rights Act. Provides that every health insurance carrier that provides coverage for prescription drugs shall ensure that no fewer than 25% of certain individual and group plans offered shall apply a pre-deductible, flat-dollar copayment structure to the entire drug benefit. Provides that the flat-dollar copayment structure for prescription drugs must be reasonably graduated and proportionately related in all tier levels such that the copayment structure as a whole does not discriminate against or discourage the enrollment of individuals with significant health care needs. Requires the health insurance carriers to clearly and appropriately name the plans to aid in consumer or plan-sponsor plan selection. Requires the health insurance carriers to market the plans in the same manner as their other plans. Provides that if a health insurance carrier offers fewer than 4 plans, the health insurance carrier shall ensure that one plan shall use the drug benefit structure, including cost-sharing requirements. Requires the Department of Insurance to adopt rules necessary to implement and enforce the provisions. Effective January 1, 2020.	Passed in the House		Managed care drug deductible
HB2259	Feigenholtz – Chicago, D	Amends the Medical Assistance Article of the Illinois Public Aid Code. Requires the Department of Healthcare and Family Services to develop, no later than January 1, 2020, a standardized format for all Medicaid managed care organization preferred drug lists in collaboration with Medicaid managed care organizations and other stakeholders, including, but not limited to, organizations that serve individuals impacted by HIV/AIDS or epilepsy, and community-based organizations, providers, and entities with expertise in drug formulary development. Requires the Department to allow Medicaid managed care organizations 6 months from the completion date of the standardized format to comply with the new Preferred Drug List format. Requires each Medicaid managed care organization to post its preferred drug list on its website without restricting access and to update the preferred drug list posted on its website no less than 30 days prior to the date upon which any update or change takes effect. Requires the Department to establish, no later than January 1, 2020, the Illinois Drug and Therapeutics Advisory Board to have the authority and responsibility to provide recommendations to the Department regarding which drug products to list on the Department's preferred drug list. Contains provisions concerning Board meetings and correspondence; the Board's composition; voting and non-voting members; and other matters. Requires the Department to adopt rules, to be in place no later than January 1, 2020, for the purpose of establishing and maintaining the Board. Effective immediately.	2 nd Reading in the House		Medicaid MCO formularies
HB2288	Lilly – Oak Park, D	Amends the Medical Assistance Article of the Illinois Public Aid Code. Provides that the Department of Healthcare and Family Services shall not require any person committed to the custody of the Department of Corrections who is eligible for medical assistance to pay a fee as a co-payment for services.	Re-referred to Rules Committee		Medicaid copay waiver for inmates
HB2303	Slaughter – Chicago, D	Amends the registrant violation provisions of the Illinois Controlled Substances Act. Provides that it is unlawful for any person knowingly to use or possess a prescriber's Illinois controlled substance license or United States Drug Enforcement Administration registration number: (A) other than for: (i) prescribing or dispensing controlled substances; (ii) insurance processing related to controlled substances; (iii) professional	2 nd Reading in the House		Fraudulent CS prescriptions

		employment; (iv) collecting credentials data under the Health Care Professional Credentials Data Collection Act; or (v) licensure purposes; (B) without authorization; (C) to fraudulently obtain any medication or to fraudulently create a prescription or order; or (D) except as authorized by law. Provides that a violation is a Class 4 felony for the first offense and a Class 3 felony for each subsequent offense. The fine for the first offense shall be not more than \$100,000. Provides that the fine for each subsequent offense shall not be more than \$200,000.			
HB2326	Crespo – Streamwood, D	Amends the Illinois Insurance Code and the Illinois Public Aid Code. Requires that on or before July 1, 2020, the Department of Insurance and Department of Healthcare and Family Services to jointly develop a uniform prior authorization form to be used by prescribing providers to request prior authorization for prescription drug benefits. Provides that on and after January 1, 2021 or 6 months after the uniform prior authorization form is developed, whichever is later, health insurers, managed care organizations, and fee-for-service medical assistance programs that provide prescription drug benefits shall utilize and accept the uniform prior authorization form and prescribing providers may use the uniform prior authorization form. Provides criteria for developing the uniform prior authorization form. Provides requirements and limitations of prior authorization requests. Effective immediately.	Tabled		Insurance Prior authorization form
HB2338 Same as SB1220	Gabel – Evanston, D	Amends the Medical Practice Act of 1987. Provides for the licensure of naturopathic physicians. Makes conforming changes in various other Acts. Effective immediately.	Re-referred to Rules Committee		Naturopathic physician
HB2432	Flowers – Chicago, D	Amends the Administration of Psychotropic Medications to Children Act. Provides that the Department of Children and Family Services shall adopt rules requiring the Department to distribute treatment guidelines on an annual basis to all persons licensed under the Medical Practice Act of 1987 to practice medicine in all of its branches who prescribe psychotropic medications to youth for whom the Department is legally responsible. Provides that the Department shall prepare and submit an annual report to the General Assembly with specified information concerning the administration of psychotropic medication to youth for whom it is legally responsible. Amends the Medical Practice Act of 1987. Provides that the Department of Financial and Professional Regulation may revoke, suspend, place on probation, reprimand, refuse to issue or renew, or take any other disciplinary or non-disciplinary action as the Department may deem proper with regard to the license or permit of any person issued under the Act upon repeated acts of clearly excessive prescribing, furnishing, or administering psychotropic medications to a minor without a good faith prior examination of the patient and medical reason. Makes other changes.	Re-referred to Rules Committee		Psychotropic Meds to children
HB2439 Same as SB1665	McAuliffe – Chicago, R	Amends the Illinois Controlled Substances Act concerning the Prescription Monitoring Program. Excludes licensed veterinarians from the reporting requirements under the Program. Provides that a licensed veterinarian shall report information required under the Prescription Monitoring Program if the person who is presenting an animal for treatment is suspected of fraudulently obtaining any controlled substance or prescription for a controlled substance to the Department	Re-referred to Rules Committee		Veterinarian PMP exclusion

		of Human Services. Provides that a licensed veterinarian may not be subject to any licensure or disciplinary action by the Department of Financial and Professional Regulation for the failure to report such a person. Effective immediately.			
HB2495 Same as SB1942	Cassidy – Chicago, D	Creates the Reproductive Health Act. Provides that every individual has a fundamental right to make autonomous decisions about one's own reproductive health. Provides that every individual who becomes pregnant has a fundamental right to continue the pregnancy and give birth or to have an abortion, and to make autonomous decisions about how to exercise that right. Provides that a fertilized egg, embryo, or fetus does not have independent rights under the law, of this State. Provides prohibited State actions. Provides that a party aggrieved by a violation of the Act may bring a civil lawsuit. Provides that a health care professional shall report each abortion performed to the Department of Public Health. Limits home rule powers. Repeals provisions regarding abortion in the Ambulatory Surgical Treatment Center Act, the Sexual Assault Survivors Emergency Treatment Act, and the Injunction Article of the Code of Civil Procedure. Repeals the Illinois Abortion Law of 1975, the Partial-birth Abortion Ban Act, and the Abortion Performance Refusal Act. Makes corresponding changes in the Children and Family Services Act, the Counties Code, the Medical Practice Act of 1987, the Vital Records Act, the Criminal Code of 2012, and the Rights of Married Persons Act. Amends the Freedom of Information Act. Provides that information and records held by the Department collected under the Reproductive Health Act is exempt from inspection and copying. Amends the Ambulatory Surgical Treatment Center Act. Provides that that term "ambulatory surgical treatment center" does not include any facility in which the performance of abortion procedures is limited to those performed without general, epidural, or spinal anesthesia. Amends the Illinois Insurance Code. Provides insurance requirements for the coverage of abortion. Makes corresponding changes in the State Employees Group Insurance Act, the Health Maintenance Organization Act, and the Voluntary Health Services Plans Act. Amends the Nurse Practice Act. Provides that operative surgery does not include abortions performed without general, epidural, or spinal anesthesia, and other gynecological procedures related to abortions. Amends the Environmental Act. Provides that tissue and products from an abortion or miscarriage may be buried, entombed, or cremated. Effective immediately.	Re-referred to Rules Committee		Abortion
HB2587	Bennett – Pontiac, R	Amends the Workers' Compensation Act. Requires a recipient of certain pain management medication to sign a written agreement with the prescribing physician agreeing to comply with the conditions of the prescription. Prohibits additional prescriptions while the recipient is noncompliant. Limits the applicability of the lack of pain management as a consideration in awarding benefits. Provides for the disclosure of violations of the agreement upon request by the employer. Requires a prescribing physician to file quarterly reports to obtain payment. Effective immediately	Re-referred to Rules Committee		Worker's Comp Opioid agreement
HB2638	Evans – Chicago, D	Amends the Illinois Controlled Substances Act. Provides that a prescriber shall offer a prescription for naloxone hydrochloride or another drug approved by the United States Food and Drug Administration for the complete or partial reversal of opioid depression to a patient when one or more of the following conditions are present: (1) the prescription dosage for the patient is 90 or more morphine	Re-referred to Rules Committee		Prescriber Naloxone Offer

		milligram equivalents of an opioid medication per day; (2) an opioid medication is prescribed concurrently with a prescription for benzodiazepine; (3) the patient presents with an increased risk for overdose, including a patient with a history of overdose, a patient with a history of substance use disorder, or a patient at risk for returning to a high dose of opioid medication to which the patient is no longer tolerant. Provides other requirements and exemptions. Makes other changes. Effective January 1, 2020			
HB2702	Rita – Blue Island, D	Amends the Regulatory Sunset Act. Extends the repeal date of specified Acts from January 1, 2020 to January 1, 2021. Makes conforming changes. Effective immediately.	2 nd Reading in the House		PPA Sunset
HB2794	Ugaste – St. Charles, R	Amends the Workers' Compensation Act in relation to custom compound medications. Sets forth conditions for approval of payment. Provides that charges shall be based upon the specific amount of each component drug and its original manufacturer's National Drug Code number and also upon specified criteria. Provides that a provider may prescribe a one-time 7-day supply unless a prescription for more than 7 days is preauthorized by the employer. Effective immediately.	Re-referred to Rules Committee		Worker's Comp compounded prescriptions
HB2795	Ugaste – St. Charles, R	Amends the Workers' Compensation Act. Provides that the Illinois Workers' Compensation Commission, upon consultation with the Workers' Compensation Medical Fee Advisory Board, shall promulgate an evidenced-based drug formulary. Requires prescriptions in workers' compensation cases to be limited to the drugs on the formulary. Effective immediately.	Re-referred to Rules Committee		Worker's Comp evidence-based formulary
HB2813	Moeller – Elgin, D	Amends the Nurse Practice Act. Provides that collaboration does not require an employment relationship between the collaborating physician, podiatric physician, or dentist and the advanced practice registered nurse. Provides that, in the case of anesthesia services provided by a certified registered nurse anesthetist, an anesthesiologist, a physician, a dentist, or a podiatric physician must participate through discussion of and agreement with the anesthesia plan and remain available (rather than remain physically present and available on the premises during the delivery of anesthesia services) for diagnosis, consultation, and treatment of emergency medical conditions. Makes changes concerning the written collaborative agreements between a certified registered nurse anesthetist and a dentist. Changes provisions concerning full practice authority to apply them to certified registered nurse anesthetists. Requires that during the delivery of anesthesia by a certified registered nurse anesthetists, the attestation for completion of clinical experience must be attested to by the collaborating physician or physicians, podiatrists, or dentists, and the certified registered nurse anesthetist. Makes other changes. Effective immediately.	Re-referred to Rules Committee		APN collaboration

HB2880	Guzzardi – Chicago, D	Creates the Prescription Drug Price Increase Tax Act. Imposes a tax on each establishment that makes the first sale of a covered outpatient drug within the State. Provides that the term "first sale" means an initial sale of a covered outpatient drug from a manufacturer to a wholesaler or from a wholesaler to a pharmacy. Provides that the tax shall be charged against and paid by the establishment making the first sale and shall not be added as a separate charge or line item or otherwise passed down on any invoice to the customer. Provides that the proceeds shall be deposited into the Prescription Drug Fairness Fund and used by the Department of Healthcare and Family Services. Amends the State Finance Act to create the Prescription Drug Fairness Fund.	Re-referred to Rules Committee		Drug price control
HB2881	Guzzardi – Chicago, D	Creates the Prescription Drug Affordability Board Act. Contains only a short title provision.	Re-referred to Rules Committee		Drug price control
HB2882	Guzzardi – Chicago, D	Creates the Pharmaceutical and Health Affordability: Restrictions on Manufacturers' Amoral Behavior Through Reasonable Oversight Act. Provides that a manufacturer or wholesale drug distributor shall not engage in price gouging in the sale of an essential off-patent or generic drug. Provides that the Director of Healthcare and Family Services or Director of Central Management Services may notify the Attorney General of any increase in the price of any essential off-patent or generic drug under the Medical Assistance Program under the Illinois Public Aid Code or a State health plan, respectively, that amounts to price gouging. Provides that whenever the Attorney General has reason to believe that a manufacturer or wholesale drug distributor of an essential off-patent or generic drug has violated the Act, the Attorney General shall send a notice to the manufacturer or wholesale drug distributor requesting a specified statement. Provides that within 45 days after receipt of the request, the manufacturer or wholesale drug distributor shall submit the statement to the Attorney General. Provides that to accomplish the objectives and carry out the duties prescribed in the Act, the Attorney General may issue subpoenas or examine under oath any person to determine whether a manufacturer or wholesale drug distributor has violated the Act. Provides that upon petition of the Attorney General, a circuit court may issue specified orders against violations of the Act. Contains provisions concerning the disclosure of financial information provided by a manufacturer or wholesale drug distributor to the Attorney General. Effective January 1, 2020.	Re-referred to Rules Committee		Drug price control
HB2896	Flowers – Chicago, D	Amends the Department of Public Health Powers and Duties Law of the Civil Administrative Code of Illinois. Creates the Diversity in Health Care Professions Task Force. Provides that the Director of Public Health shall serve as the chairperson of the Task Force and it shall also be comprised of 2 dentists, 2 medical doctors, 2 nurses, 2 optometrists, 2 pharmacists, 2 physician assistants, 2 podiatrists, and 2 public health practitioners. Provides specified objectives. Provides specified recommendations to serve as guiding principals for the Task Force. Provides that Task Force members shall serve without compensation but may be reimbursed for their expenses incurred in performing their duties. Provides that the Task Force shall meet at least quarterly and at other times as called by the chairperson. Provides that the Department of Public Health shall provide administrative and other support to the Task Force. Provides that the Task Force shall prepare a report that summarizes its work and makes recommendations resulting from its study and shall submit the report of its findings and	1 st Reading in the Senate		Diversity in health care task force

		recommendations to the Governor and the General Assembly by December 1, 2020 and annually thereafter.			
HB3097	Mah – Chicago, D	Amends the Illinois Public Aid Code. Requires the Department of Human Services to develop in collaboration with an academic institution a program designed to provide prescribing physicians under the medical assistance program with an evidence-based, non-commercial source of the latest objective information about pharmaceuticals. Provides that the prescriber education program shall consist of a web-based curriculum and an academic educator outreach and shall contract with clinical pharmacists to provide scheduled visits with prescribing physicians to update them on the latest research concerning medication usage and new updates on disease states in an unbiased manner. Provides that education provided under the prescriber education program shall include disease-based educational modules on the treatment of chronic non-cancer pain, diabetes, hypertension, and other specified diseases and that such modules shall be reviewed and updated on an annual or as-needed basis. Provides that additional resources provided under the prescribing education program shall include, but not be limited to: (i) a drug information response center available to prescribing physicians that provides thorough and timely in-depth answers to any questions a prescribing physician may have within 48 hours after a question is received; and (ii) information on drug utilization trends within individual and group practices.	2 nd Reading in the House		Medicaid counter detailing
HB3178	Mazzochi – Westmont, R	Amends the Prevention of Tobacco Use by Minors and Sale and Distribution of Tobacco Products Act. Changes the short title of the Act to the Cigarette, Electronic Cigarette, and Alternative Nicotine Product Act. Raises the minimum age for the purchase, possession, and use of tobacco products, electronic cigarettes, and alternative nicotine products from 18 years of age to 21 years of age. Authorizes the Secretary of State to issue a smoking license to a person who: (1) is at least 18 years of age but under 21 years of age; (2) has completed the 8-hour online educational program regarding the dangers and consequences of smoking as verified by the Department of Public Health; and (3) has paid a \$50 fee to the Secretary of State. Provides for penalties and other matters. Repeals the Smokeless Tobacco Limitation Act. Amends various other Acts to make conforming changes.	Re-referred to Rules Committee		Tobacco
HB3186	Mazzochi – Westmont, R	Amends the Pharmacy Practice Act. Makes a technical change in a Section concerning licensure without examination.	Re-referred to Rules Committee		Tech - PPA
HB3187	Mazzochi – Westmont, R	Amends the Illinois Insurance Code. Creates the Pharmacy Benefit Managers Article. Provides that upon request by a party contracting with a pharmacy benefit manager, a pharmacy benefit manager shall disclose any rebate amounts provided to the pharmacy benefit manager by a pharmaceutical manufacturer. Provides that upon request by a party contracting with a pharmacy benefit manager, a pharmacy benefit manager shall disclose the actual amounts paid by the pharmacy benefit manager to the pharmacy. Provides that a pharmacy benefit manager shall provide notice to the party contracting with the pharmacy benefit manager of any consideration that the pharmacy benefit manager receives from the manufacturer for dispense as written prescriptions once a generic or biologically similar product becomes available. Provides that any provision of a contract entered into, amended, or renewed on or after the effective date of the amendatory Act that is contrary is unenforceable.	2 nd Reading in the House		PBM regulation

HB3192	West – Rockford, D	Amends the Department of Professional Regulation Law of the Civil Administrative Code of Illinois. Provides that certain health care providers licensed by the Department of Financial and Professional Regulation who have applied for license renewal shall be presumed licensed until their license renewals have been approved or denied by the Department. Requires the Department to provide proof of temporary licensure renewal to a licensed health care provider who applies for renewal of his or her license and is in good standing. Provides that the Department may adopt rules to implement the provisions.	Re-referred to Rules Committee.		License renewal
HB3232	Evans – Chicago, D	Creates the Prescription Drug Repository Program Act . Requires the Department of Public Health to, by rule, establish a prescription drug repository program, under which any person 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 participate in the prescription drug repository program. Provides for civil and criminal immunity for drug and supply manufacturers and individuals in relation to the donation, acceptance, or dispensing of prescription drugs or supplies under the prescription drug repository program. Imposes conditions on any rulemaking authority. 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.	Re-referred to Rules Committee		Drug repository
HB3268	Feigenholtz – Chicago, D	Amends the Illinois Public Aid Code. Provides that the Department of Healthcare and Family Services shall not make recommendations or determinations that are more restrictive than federal labeling requirements by the U.S. Food and Drug Administration when making coverage recommendations or determinations affecting medical assistance recipients' access to (1) drugs and biological products for rare diseases and (2) drugs and biological products that are genetically targeted therapies. Requires the Department to implement an open and transparent process that includes clear guidelines for open public comment for the review and study of those drugs and biological products for rare diseases and those that are genetically targeted therapies. Requires the Illinois Drug and Therapeutics Advisory Board (Board) to develop and maintain a list of external experts who (i) possess scientific or medical training with respect to one or more rare diseases and (ii) are qualified to provide advice on rare disease issues and specified topics, including the impact of particular coverage, utilization management, and other relevant drug access policies. Requires the Department to adopt rules to ensure that any provisions of the Illinois Title XIX State Plan that affect medical assistance recipients' access to drugs and biological products for rare diseases are available to the public in a user-friendly and searchable format. Prohibits the Department from disclosing any confidential commercial or trade secret information of a drug	Re-referred to Rules Committee		Medicaid formulary inclusion transparency

		manufacturer. Provides that the Board shall not be subject to the 6-month review moratorium for new drugs and shall review new drugs and biological products for rare diseases at the next regularly scheduled meeting. Effective immediately.			
HB3300	Manley – Romeoville, D	Amends the Veterinary Medicine and Surgery Practice Act of 2004. Provides that a veterinarian licensed under the Act shall limit the initial amount dispensed of a Schedule II controlled substance under the Illinois Controlled Substances Act to a 5-day supply at a dosage clinically appropriate for the animal being treated. Provides that a prescription that is filled at a pharmacy is not subject to this limit. Provides that a veterinarian licensed under the Act shall limit the initial amount dispensed of a benzodiazepine to a 14-day supply at a dosage clinically appropriate for the animal being treated. Provides that a prescription that is filled at a pharmacy is not subject to this limit. Provides that for the treatment of an animal with a chronic condition that requires the long-term use of a Schedule II controlled substance or a benzodiazepine, after the initial 5-day or 14-day period, the licensed veterinarian may dispense not more than a 30-day supply at one time at a dosage clinically appropriate for the animal being treated. Provides that a prescription that is filled at a pharmacy is not subject to this limit.	Re-referred to Rules Committee		Veterinarian CII limits
HB3335 Same as SB1240	Williams – Chicago, D	Creates the Carryout Bag Fee Act. Provides that a carryout bag fee of \$0.10 is imposed on each carryout bag used by a customer at retail establishments, except in municipalities with a population greater than 1,000,000, with \$0.03 being returned to the retail establishment, \$0.04 into the Carryout Bag Fee Fund, \$0.01 to the Prairie Research Institute of the University of Illinois, \$0.01 into the Solid Waste Management Fund, and \$0.01 into the Partners for Conservation Fund. Provides that the carryout bag fee does not apply to the retail sale or use of carryout bags that are used to carry items purchased under specified governmental food assistance programs. Repeals the new Act on January 1, 2026. Amends the State Finance Act making conforming changes. Amends the Counties Code and Illinois Municipal Code. Provides that a county or municipality may not ban, place a fee or tax on, or regulate in any other manner the use, disposition, content, taxation, or sale of carryout bags. Limits the applicability of the provisions as they relate to a county or municipality that charged a fee or tax on carryout bags on February 1, 2018 and specified recycling programs. Limits home rule powers.	Re-referred to Rules Committee		Plastic bags
HB3355	Hoffman – Belleville, R	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 (rather than may delegate care and treatment responsibilities to a physician assistant). 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 medical practice. Deletes language providing that a physician may enter into collaborative agreements with no more than 7 full-time physician assistants. Amends the Physician Assistant Practice Act of 1987. Provides that a physician assistant in a health professional shortage area with a score greater than or equal to 12 shall own his or her own medical practice. Provides that medical and surgical services provided by a physician assistant include: obtaining and performing comprehensive health histories and physical examinations; evaluating, diagnosing, and providing medical treatment; ordering, performing, and interpreting diagnostic studies and therapeutic procedures; educating patients on health promotion and disease prevention; providing consultation upon request; and writing medical	Re-referred to Rules Committee		PA collaboration

		orders. Provides other provisions regarding scope of practice. Deletes language requiring: a written collaborative agreement for all physician assistants to practice in the State; a written collaborative agreement to describe the working relationship of the physician assistant with the collaborating physician and the categories of care, treatment, or procedures to be provided by the physician assistant; and the collaborating physician to file with the Department of Financial and Professional Regulation notice when employing, discharging, or collaborating with a physician assistant. Makes other changes. Effective January 1, 2020.			
HB3414	Slaughter – Chicago, D	Creates the Prescription Drug Repository Pilot Program Act . Requires the Department of Public Health to establish a prescription drug repository program. Provides that collection efforts shall be performed by the Metropolitan Water Reclamation District. 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 to participate in the prescription drug repository pilot program. Provides for civil and criminal immunity regarding the donation, acceptance, or dispensing of prescription drugs or supplies under the program. Imposes conditions on any rulemaking authority. Provides that the Department, in collaboration with the Metropolitan Water Reclamation District, shall submit 2 reports to the General Assembly before December 31, 2024. Provides that after submission of the second report, the pilot program shall terminate. Repeals the Act on January 1, 2026. 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 Pilot Program Act are exempt from provisions of those other Acts that might prohibit or otherwise regulate such activity. Effective immediately.	Re-referred to Rules Committee		Drug repository
HB3459	Yednock – Ottawa, D	Amends the Department of Public Health Powers and Duties Law of the Civil Administrative Code of Illinois. Requires the Department of Public Health to annually report to the General Assembly the data collected by and reported to the Department concerning deaths in which an opioid overdose is determined to be a contributing factor. Amends the Counties Code. Provides that in every case in which an opioid overdose is determined to be a contributing factor in a death, the coroner shall report the death and the age, gender, race, and county of residence, if known, of the decedent to the Department.	Re-referred to Rules Committee		Overdose death reporting
HB3472	Conroy – Villa Park, D	Amends the Illinois Insurance Code. Provides that a group or individual policy of accident and health insurance shall provide coverage for the cost of opioid treatment drugs, including, but not limited to, opioid antagonists, regardless of whether or not they are generic drug formularies, and other buprenorphine-based medications meant to treat opioid addiction or prevent overdose by opioid use. Effective January 1, 2020.	Re-referred to Rules Committee		Insurance Opioid treatment coverage
HB3474	Yednock – Ottawa, D	Amends the Department of Professional Regulation Law of the Civil Administrative Code of Illinois. Requires the Department of Financial and Professional Regulation to adopt a standard marketing code of conduct for all pharmaceutical	Re-referred to Rules Committee		Pharmaceutical marketing

		manufacturing companies that employ a person to sell or market prescription drugs or medical devices in the State. Provides that the Department shall require gift disclosures for certain health care professionals and their spouses when receiving gifts from pharmaceutical manufacturing companies or employees of pharmaceutical manufacturing companies. Allows the Department to further define a gift by adopting rules. Effective January 1, 2020.			
HB3484	Gabel – Evanston, D	Amends the Medical Patient Rights Act. Provides that a patient or representative of the patient must give informed consent, or informed permission in the case of an infant, for biochemical testing for controlled substances unless there is a medical emergency and there is inadequate time to obtain consent. Describes the specific information that health care providers to supply to a patient, or a patient's representative, before informed consent can be given. Effective immediately.	2 nd Reading in the House		Informed consent prior to drug testing
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.	Re-referred to Rules Committee		Drug pricing
HB3494	Mussman – Schaumburg, D	Creates the Physician Gift Ban Act. Prohibits a pharmaceutical marketer from providing any promotions, including, but not limited to, travel and prizes, to a physician to induce the physician to prescribe Tier 1 medications.	Re-referred to Rules Committee		Physician gift ban
HB3500	Manley – Romeoville, D	Amends the Department of Public Health Powers and Duties Law of the Civil Administrative Code of Illinois and the Counties Code. Provides that the Department of Public Health and each county or multiple-county health department or public health district may provide to a person who is at risk of experiencing or who is experiencing an opioid-related overdose a kit containing naloxone hydrochloride or any other opioid antagonist approved for the treatment of an opioid overdose by the United States Food and Drug Administration. Provides that a person may administer an opioid antagonist that is provided by the Department, a county or multiple-county health department, or a public health district to a person who is experiencing an opioid-related overdose. Provides that a person who in good faith and without compensation administers an opioid antagonist to a	Re-referred to Rules Committee		Naloxone provision

		person who is experiencing an opioid-related overdose is not liable for any civil or other damages as the result of any act or omission by the person rendering the care, or as the result of any act or failure to act to arrange for further medical treatment or care, for the person experiencing the overdose, unless the person while rendering the care acts with gross negligence, willful misconduct, or intentional wrongdoing. Effective immediately.			
HB3647	Edly-Allen – Libertyville, D	Amends the Pharmacy Practice Act. Requires a pharmacy to offer a kiosk to dispose of prescription and over-the-counter medications free of charge.	Re-referred to Rules Committee	Opposed	Take-back Kiosks

Senate Deadlines

Bill Introduction

Senate bills out of Committee

Third Reading for Senate Bills

House Bills out of Committee

Third Reading House Bills

Adjournment

Veto Session

February 15, 2018

March 22, 2018

April 12, 2018

May 10, 2018

May 24, 2018

May 31, 2018

House Deadlines

February 15, 2018

March 29, 2018

April 12, 2018

May 10, 2018

May 24, 2018

May 31, 2018

Bill Introduction

House Bills out of Committee

Third Reading House Bills

Senate Bills out of Committee

Third Reading Senate Bills

Adjournment

Veto Session