



## 101ST GENERAL ASSEMBLY

### State of Illinois

2019 and 2020

HB5230

by Rep. Michael D. Unes

#### SYNOPSIS AS INTRODUCED:

215 ILCS 5/356z.43 new

Amends the Illinois Insurance Code. Provides that an individual or group policy of accident and health insurance that is amended, delivered, issued, or renewed on or after January 1, 2021 shall cover a medically necessary hypofractionated proton therapy protocol to deliver a biological effective dose by paying the same aggregate amount as would be paid for the delivery of the same biological effective dose with a standard radiation therapy protocol delivered with intensity modulated radiation therapy for the same indication if specified conditions are satisfied. Provides standards concerning the aggregate amount chargeable to or payable by an eligible patient for a covered course of hypofractionated proton therapy. Provides that proton therapy coverage may not impose an annual deductible, coinsurance, or other cost-sharing limitation that is greater than that required for radiation therapy and other similar benefits within the insurance policy or contract. Defines terms. Effective January 1, 2021.

LRB101 18346 BMS 67793 b

1 AN ACT concerning regulation.

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

4 Section 5. The Illinois Insurance Code is amended by adding  
5 Section 356z.43 as follows:

6 (215 ILCS 5/356z.43 new)

7 Sec. 356z.43. Proton therapy access.

8 (a) As used in this Section:

9 "Aggregate amount" means the total amount paid under an  
10 individual or group policy of accident and health insurance for  
11 the applicable radiation treatment delivery current procedural  
12 terminology codes to deliver a biological effective dose.

13 "Biological effective dose" means the total prescribed  
14 radiation dose delivered in a course of radiation therapy  
15 treatments to induce tumor cell death.

16 "Current procedural terminology code" means the unique  
17 numerical designations established by the American Medical  
18 Association for various medical, surgical, and diagnostic  
19 services used in billing health care services.

20 "Eligible patient" means a cancer patient who is approved  
21 for a standard radiation therapy protocol delivered with IMRT  
22 and prescribed a hypofractionated proton therapy protocol for  
23 the treatment of the same cancer.

1       "Hypofractionated proton therapy protocol" means a cancer  
2 treatment protocol that involves the delivery of fewer, larger  
3 radiation therapy treatment doses than a standard radiation  
4 therapy protocol to deliver a biological effective dose.

5       "Intensity modulated radiation therapy" or "IMRT" means a  
6 type of conformal radiation therapy that delivers x-ray  
7 radiation beams of different intensities from many angles for  
8 the treatment of tumors.

9       "Proton therapy" means the advanced form of radiation  
10 therapy that utilizes protons as the radiation delivery method  
11 for the treatment of tumors.

12       "Radiation therapy" means the delivery of a biological  
13 effective dose with proton therapy, IMRT, brachytherapy,  
14 stereotactic body radiation therapy, three-dimensional  
15 conformal radiation therapy, or other forms of therapy using  
16 radiation.

17       "Registry" means an organized system that uses  
18 observational study methods to collect uniform clinical data to  
19 evaluate specified outcomes for a population defined by a  
20 particular disease and is compliant with the principles  
21 established by the Registries for Evaluating Patient Outcomes:  
22 A User's Guide - Third Edition published by the Agency for  
23 Healthcare Research and Quality of the U.S. Department of  
24 Health and Human Services.

25       "Standard radiation therapy protocol" means a cancer  
26 treatment protocol that involves the delivery of radiation

1 therapy treatment doses over an extended period of time to  
2 deliver a biological effective dose.

3 "Treatment dose" means the amount of radiation delivered in  
4 a single treatment or fraction of radiation therapy.

5 (b) An individual or group policy of accident and health  
6 insurance that is amended, delivered, issued, or renewed on or  
7 after January 1, 2021 shall cover a medically necessary  
8 hypofractionated proton therapy protocol to deliver a  
9 biological effective dose by paying the same aggregate amount  
10 as would be paid for the delivery of the same biological  
11 effective dose with a standard radiation therapy protocol  
12 delivered with IMRT for the same indication if the following  
13 conditions are satisfied:

14 (1) coverage is provided to an eligible patient who is  
15 being treated as part of a clinical trial or registry;

16 (2) the eligible patient is diagnosed with a cancer  
17 type or indication that can be treated with a  
18 hypofractionated proton therapy protocol; and

19 (3) the radiation oncologist prescribing the  
20 hypofractionated proton therapy protocol is board  
21 certified or board eligible in the specialty of radiation  
22 oncology.

23 (c) If coverage of a hypofractionated proton therapy  
24 protocol is required pursuant to subsection (b), then:

25 (1) the aggregate amount must be equal to the average  
26 cost actually paid by an individual or group policy of

1 accident and health insurance for a standard radiation  
2 therapy protocol delivered with IMRT required to deliver  
3 the prescribed biological effective dose for the  
4 particular indication. For the purposes of this paragraph  
5 (1), aggregate amounts must be established by reference to  
6 the amount paid for a course of IMRT treatment under a  
7 standard radiation therapy protocol delivered with IMRT  
8 for the indication under the applicable policy; and

9 (2) coverage may not impose an annual deductible,  
10 coinsurance, or other cost-sharing limitation that is  
11 greater than that required for radiation therapy and other  
12 similar benefits within the insurance policy or contract.

13 (d) Notwithstanding any other provision of this Section to  
14 the contrary, the aggregate amount:

15 (1) reimbursed for the hypofractionated proton therapy  
16 protocol must not exceed the average aggregate amount paid  
17 by an individual or group policy of accident and health  
18 insurance for a course of IMRT treatment under a standard  
19 radiation therapy protocol delivered with IMRT to deliver  
20 the prescribed biological effective dose for the same  
21 indication;

22 (2) chargeable to or payable by an eligible patient for  
23 a covered course of hypofractionated proton therapy by an  
24 in-network provider must not exceed the aggregate amount  
25 that would otherwise be chargeable to or payable by the  
26 eligible patient for a course of IMRT treatment under a

1 standard radiation therapy protocol delivered with IMRT  
2 that is covered by the applicable policy for the delivery  
3 of the same biological effective dose by an in-network  
4 provider; and

5 (3) chargeable to or payable by an eligible patient for  
6 a covered course of hypofractionated proton therapy by an  
7 out-of-network provider must not exceed the aggregate  
8 amount that would otherwise be chargeable to or payable by  
9 the eligible patient for a course of treatment under a  
10 standard radiation therapy protocol delivered with IMRT  
11 that is covered by the applicable policy for the delivery  
12 of the same biological effective dose by an out-of-network  
13 provider. However, the patient is not responsible for  
14 amounts greater than the allowable maximum charge.

15 Section 99. Effective date. This Act takes effect January  
16 1, 2021.