

1 Section 10. Policy. It is the policy of the State of
2 Illinois to insure that all residents have access to quality
3 health care at costs that are affordable.

4 Section 15. Health care access plan. On or before
5 December 31, 2006, the State of Illinois shall implement a
6 health care access plan that does the following:

7 (1) provides access to a full range of preventive,
8 acute, and long-term health care services;

9 (2) maintains and improves the quality of health
10 care services offered to Illinois residents;

11 (3) provides portability of coverage, regardless of
12 employment status;

13 (4) provides uniform benefits for all Illinois
14 residents;

15 (5) encourages regional and local consumer
16 participation in decisions about health care delivery,
17 financing, and provider supply;

18 (6) controls capital and overall expenditures;

19 (7) provides global budgeting for health care
20 providers;

21 (8) avoids unnecessary duplication in the
22 development and availability of health care facilities
23 and services;

24 (9) provides a mechanism for reviewing and
25 implementing multiple approaches to preventive medicine
26 based on new technologies; and

27 (10) implements comprehensive health planning tied
28 to a unified State health care budget.

29 Section 20. Public hearings and preliminary report.

30 (a) The Department of Insurance shall seek public input
31 on the development of the health care access plan by holding
32 at least 10 public hearings in different geographic locations

1 in the State, including urban, rural, suburban, and small
2 city sites between September 1, 2002, and December 1, 2003.
3 The Department of Insurance may also consult with health care
4 providers, health care consumers, and other appropriate
5 individuals and organizations to assist in the development of
6 the health care access plan.

7 (b) The Department of Insurance shall submit a
8 preliminary report on the status of the health care access
9 plan to the General Assembly and the Governor by no later
10 than January 1, 2004. The preliminary report shall be based
11 upon the research of the Department of Insurance and the
12 public hearings and shall include a comparison analysis of
13 proposals for health care coverage.

14 Section 25. Public hearings and final report. Following
15 the submission of its preliminary report, the Department of
16 Insurance shall hold 10 additional public hearings in
17 different geographic locations in the State, including urban,
18 rural, suburban, and small city sites to obtain public input
19 in the development of the final health care access plan.
20 These hearings shall be held between January 2, 2004 and
21 December 31, 2005. The Department of Insurance shall also
22 ensure that residents throughout the State of Illinois are
23 informed about the different plan proposals under
24 consideration including the content of each of the plan
25 proposals and the impact each may have on the quality and
26 availability of health care in Illinois.

27 No later than January 1, 2006, the Department of
28 Insurance shall submit its final report on the health care
29 access plan to the General Assembly and the Governor. The
30 final report may recommend more than one type of plan and
31 alternative methods of funding the plan. The final report
32 shall make recommendations that, if implemented, provide
33 access to a full range of preventive, acute, and long-term

1 health care services to residents of the State of Illinois by
2 December 31, 2006, including:

3 (1) an integrated system or systems of health care
4 delivery;

5 (2) incentives to be used to contain costs and
6 direct resources;

7 (3) uniform benefits that would be provided under
8 each type of plan;

9 (4) reimbursement mechanisms for health care
10 providers;

11 (5) administrative efficiencies;

12 (6) mechanisms for generating spending priorities
13 based on multidisciplinary standards of care established
14 by verifiable replicated research studies demonstrating
15 quality and cost effectiveness of interventions,
16 providers, and facilities;

17 (7) mechanisms for applying and implementing the
18 unified health care budget on a statewide basis to all
19 sectors of the health care system;

20 (8) methods for reducing the cost of prescription
21 drugs both as part of, and as separate from, the health
22 care access plan;

23 (9) appropriate reallocation of existing health
24 care resources;

25 (10) equitable financing of each proposal; and

26 (11) recommendations concerning the delivery of
27 long-term care services, including:

28 (A) those currently covered under Title XIX of
29 the Social Security Act;

30 (B) recommendations on potential cost sharing
31 arrangements for long-term care services and the
32 phasing in of such arrangements over time;

33 (C) consideration of the potential for
34 utilizing informal care-giving by friends and family

1 members;

2 (D) recommendations on cost-containment
3 strategies for long-term care services;

4 (E) the possibility of using independent
5 financing for the provision of long-term care
6 services; and

7 (F) the projected cost to the State of
8 Illinois over the next 20 years if no changes were
9 made in the present system of delivering and paying
10 for long-term care services.

11 The final report shall also include findings from the
12 public hearings held by the Department of Insurance between
13 January 2, 2004, and December 31, 2005. In addition, the
14 Department of Insurance shall present in its final report the
15 range of services that would be available under each plan
16 proposal if there were to be no increase, beyond inflation,
17 in the total gross health care expenditures in Illinois as
18 determined by the Department of Insurance for the first year
19 that the health care access plan would be in effect. The
20 plan proposals shall also address any anticipated or actual
21 changes in federal policies regarding the availability and
22 cost of health care and assess their adequacy for achieving
23 the goals of this Act. The Department of Insurance shall
24 consult with the Illinois Department on Aging in developing
25 its recommendations on long-term care services.

26 Section 99. Effective Date. This Act takes effect upon
27 becoming law."