

State of Your Health:

How the New Law in Illinois May Impact You



In 2016, Illinois passed legislation to address step therapy and the law went into effect in 2018.

First, let's define step therapy.

Step therapy is a practice used by insurers that requires people with arthritis to try lower-cost medications before permitting more expensive treatments, even when the doctor wants to prescribe them. In other words, more expensive and effective drugs can only be prescribed if the cheaper ones prove ineffective.

How does this new law address step therapy in Illinois?

This new law increases the ability of the patient's health care provider, not insurance company, to make important decisions about a patient's treatment.

Specific components of the law include:

- ▼ If an insurer denies a request (within 72 hours, or 24 for expedited), they must provide a reason.
- ▼ Medical exceptions shall be approved if
 - required drug is contraindicated (meaning the drug may be harmful to the patient)
 - patient has tried and failed under current or previous insurance, or
 - the patient is stable on a prescription drug selected by his or her health care provider

Who benefits from this new law?

This law is applicable to all plans sold in Illinois, along with plans on the Exchange. While this new law is not applicable to Medicare, Medicaid or ERISA-protected, self-insured plans, Illinois patients are more likely to get access to the medication their physician prescribed to treat their illness or condition.

What should I do if I experience step therapy in Illinois?

If you are experiencing a barrier to care, you should contact your insurance commissioner, who can help address your situation. You can easily find instructions on how to appeal, request an external review or file a complaint with your commissioner by going to [coveragerights.org/illinois](https://www.coveragerights.org/illinois). You can also call the Illinois Department of Insurance Customer Assistance Hotline at (866) 445-5364.