

April 27, 2026

The Honorable Emanuel “Chris” Welch
Speaker
Illinois House of Representatives
Springfield, IL 62706

The Honorable Don Harmon
President
Illinois Senate
Springfield, IL 62706

Dear Speaker Welch and President Harmon:

We write as organizations committed to expanding access to mental health and substance use disorder (MH/SUD) care to urge the Illinois General Assembly to act this session to codify into state law the key protections from the 2024 federal Mental Health Parity and Addiction Equity Act (MHPAEA) rule that the Trump administration intends to roll back. Illinois must act now to ensure consumers' hard-won parity rights are secured in state statute.

The Problem: Parity on Paper, Not in Practice

Mental health parity has been federal law for more than 15 years, yet too often it exists only on paper. Illinois families are told that mental health and substance use services are “covered,” but when they try to get treatment, their insurers put barrier after barrier between them and the care they need. State and federal regulators have repeatedly found that health plans are not able to demonstrate parity compliance. The result is that Illinoisans seeking care for depression, schizophrenia, or substance use disorder face obstacles their neighbors with diabetes or cancer do not.

Federal Protections Are Under Threat

The 2024 federal parity rule, finalized by the Biden administration, represented the most significant update to parity enforcement in years. It required plans to provide meaningful mental health and substance use benefits; used data to hold them accountable for real-world access disparities; and prohibited the use of biased or discriminatory factors to justify coverage restrictions. Health plans sued to stop the rule in January 2025, the Trump administration declined to defend it, halted enforcement in May 2025, and has since announced plans to undo key protections through new rulemaking.

Illinois has already taken the first step to protect its residents against these harmful federal attacks on mental healthcare. The Illinois Department of Insurance (IDOI) issued a bulletin last year making clear that it will enforce all provisions in the 2024 rule that are in effect, regardless of the federal non-enforcement posture.¹ But if those rules are formally undone at the federal level, IDOI will lose an essential tool to hold insurers accountable. Codifying these protections in Illinois statute would preserve the state’s ability to enforce the rules, regardless of any administration action to undermine them.

¹ Illinois Department of Insurance, [Company Bulletin 2025-10](#) (June 23, 2025).

What Codification Would Do

Codifying the 2024 rule's key protections into Illinois law would:

- **Guarantee real coverage.** If a health plan covers core treatments for physical health conditions, it must also cover core treatments—standard, clinically accepted interventions like psychotherapy, medication for opioid use disorder, and nutritional counseling for eating disorders—for MH/SUDs. Plans would no longer be permitted to say they cover MH/SUDs while excluding the treatments those conditions actually require.
- **Ensure fair access.** Carriers would be required to collect and evaluate data on how their coverage practices affect access to MH/SUD care in comparison to physical health care. Where the data reveals material disparities, those disparities would constitute evidence of noncompliance and carriers would be required to take reasonable action to address them. Parity compliance would be assessed based on outcomes for real patients, not written policies on paper.
- **Prohibit discriminatory standards.** Insurers would be prohibited from citing biased or discriminatory data or sources (e.g., such as data that itself reflects historic coverage disparities) in parity compliance analyses. This prevents insurers from justifying discriminatory coverage restrictions by pointing to sources that are themselves skewed against MH/SUDs.

Other States Are Codifying Protections

Illinois would be joining a growing group of states that have codified these protections. Colorado and Washington enacted legislation in 2025. Earlier this month, Governor Moore of Maryland and Governor Spanberger of Virginia each signed similar legislation—in all four cases with the support of their state insurance regulators. On a bipartisan basis, these states have rejected insurers' hollow arguments against accountability, and their regulators have embraced codification as a tool they need.

Illinois Parity Leadership Requires Action

Illinois has long been a national leader on mental health parity enforcement, conducting examinations of insurers' conduct in the market, and requiring insurers to follow the law to protect Illinois residents. Now is the moment to enshrine those standards in statute and ensure they cannot be undone in Washington D.C.

We urge you to bring legislation to the floor this session. The people of Illinois cannot wait.

Sincerely,

Inseparable
Community Behavioral Healthcare Association of Illinois
NAMI Illinois
Access Living
CUREII

Delve Psychotherapy of Chicago
Empower Mental Health, LLC
IARF
Illinois Association for Behavioral Health
Illinois Psychiatric Society
Illinois Psychological Association
Illinois State Medical Society
Josselyn
Mental Health America of Illinois
NAMI Chicago
NAMI NWSC
NAMI South Suburbs of Chicago
Trilogy

*Cc: The Honorable Thaddeus Jones, Chair, House Insurance Committee
The Honorable Julie Morrison, Chair, Senate Insurance Committee
The Honorable Lindsey LaPointe, Chair, House Mental Health & Addiction Committee
The Honorable Laura Fine, Chair, Senate Behavioral and Mental Health Committee
The Honorable Ann Gillespie, Director, Illinois Department of Insurance*