

# Illinois Governor Pritzker Signs HB 767 Expanding IDPH Authority to Issue State-Specific Vaccine Guidance and Mandate Insurance Coverage

DECEMBER 29, 2025

Authors: [Juan Morado Jr.](#), [Shil Mehta](#)

## Key Takeaways

- **Expanded IDPH Authority:** House Bill 767 (“HB 767”) expands the Illinois Department of Public Health’s statutory authority by allowing the Director of IDPH to issue state-specific vaccine guidance, independent of federal recommendations.
- **Insurance Company Mandates:** HB 767 requires Illinois-regulated health insurance issuers to cover all immunizations recommended by IDPH, even where such immunizations are not recommended or required under federal law.
- **Immunization Advisory Committee:** The bill requires the Director of IDPH to appoint an Immunization Advisory Committee to advise the director on disease control, immunizations and medical countermeasures, introducing a formal advisory process into state vaccine policymaking.

## Background

On December 2, 2025, Governor Pritzker signed HB 767 into law, amending powers of the Illinois Department of Public Health (“IDPH”). HB 767 creates an independent mechanism for Illinois to develop vaccine guidance tailored to state-specific public health needs. HB 767 is effective immediately with insurance provisions effective on January 1, 2026, and provides Illinois a statutory framework to create and administer vaccine guidelines separate from, and potentially broader than, federal FDA or CDC recommendations. This legislation marks a significant shift from decades-long alignment between the state and federal government surrounding public health and vaccination policy.

HB 767 requires IDPH’s Director to appoint an Immunization Advisory Committee (“IAC”) to provide input on immunization guidelines. The IAC is to be made up of no more than 21 members, consisting of healthcare professionals, public health experts and education professionals, as determined by the Director. The IAC existed previously and was bolstered by Governor Pritzker’s Executive Order 2025-04 signed on September 12, 2025. The new IAC membership reflects the broader mandate for the committee outlined in HB 767. The IAC’s recommendations will be published on [IDPH’s website](#) for public viewing. Vaccine recommendations issued by the Director of IDPH may be overruled by a two-thirds vote of the IAC, providing a check on unilateral agency action and ensuring that guidance reflects professional and clinical consensus.

## Impact on Insurance Coverage and Vaccine Access

Illinois-regulated insurance companies will be required to cover all immunizations recommended by IDPH, including immunizations that may not be covered at the federal level. As a result, Illinois-regulated insurers will need to monitor and update Illinois-specific coverage determinations, formularies and reimbursement policies based on IDPH recommendations. The bill also expands vaccine access without a prescription to children three (3) years of age and older, lowering the prior age threshold of seven (7) years old. This change is intended to increase access to immunizations through pharmacies and other authorized providers.

## What This Means for Hospitals, Insurers and Pharmacies

HB 767 will affect healthcare stakeholders differently depending on their role in the immunization ecosystem. Hospitals and health systems should anticipate the need to align clinical protocols, order sets and patient communications with IDPH-specific vaccine guidance—even where such guidance diverges from federal recommendations—and ensure internal governance processes are in place to track and implement state-level updates. Providers should review their procedures and payor contracts, recognizing that misalignment between IDPH guidance and federal recommendations could present claims-processing delays or post-payment review risk. Illinois-regulated insurers will need to closely monitor IDPH recommendations and timely adjust coverage policies, formularies, and reimbursement practices to ensure compliance with state-mandated coverage obligations. Pharmacies and other vaccine providers should prepare for expanded authority to administer vaccines to younger pediatric populations and ensure that standing orders, scope-of-practice protocols and billing workflows reflect current IDPH guidance, as claims for immunizations not properly aligned with state recommendations may be subject to increased scrutiny or denial. Multistate organizations operating across Illinois and other jurisdictions should also plan for operational divergence between state and federal immunization frameworks and consider internal escalation or compliance coordination mechanisms to mitigate downstream reimbursement and audit exposure.

With HB 767 taking effect immediately, and insurance coverage requirements beginning January 1, 2026, IDPH has already deployed the IAC to issue state specific vaccine guidance. Hospitals, insurers and pharmacies have a narrow window to assess operational, coverage and compliance implications now that state-level recommendations are driving reimbursement and clinical expectations.

## Compliance Considerations and Recommended Actions

On December 16, 2025, the [Immunization Advisory Committee](#) advised IDPH that newborns are to receive [Hepatitis B vaccinations](#) at birth already marking a departure from federal guidance. IDPH promptly [reaffirmed the recommendation](#) on December 17. The IAC has previously recommended pediatric COVID-19 vaccinations. Until additional regulatory guidance from IDPH is issued, healthcare providers, pharmacies and Illinois-regulated insurers should consider proactively reviewing their existing compliance infrastructure in advance of HB 767's effective date, including:

- **Review of Existing Procedures:** Evaluate current immunization policies, protocols and billing practices for compliance with anticipated IDPH vaccine guidance.

- **Monitor IDPH Vaccine Guidance:** Actively monitor IDPH publications and updates regarding vaccine recommendations and advisory committee actions to ensure timely operational alignment.
- **Reconcile State and Federal Guidance:** Organizations operating across multiple states should assess potential divergences between IDPH recommendations and federal FDA/CDC guidance and develop internal escalation or compliance protocols accordingly. IDPH guidance may evolve rapidly and create operational divergences from federal guidance, especially affecting multistate operators.
- **Review Payor Contracts:** Review and, where appropriate, update agreements with Illinois-regulated insurers to ensure that vaccine coverage, reimbursement and medical necessity provisions align with HB 767 requirements.

## How Benesch can Help

The implementation of HB 767 represents a major shift from the traditional alignment between state and federal public health guidelines, creating significant compliance and reimbursement challenges for providers. These changes are driven by evolving CDC guidance and state-level responses. As a result, providers find themselves in a volatile healthcare landscape.

Benesch Healthcare+ is positioned to help providers navigate this uncertainty by focusing on two critical areas:

1. **Compliance:** Benesch can assist providers with updating internal policies, drafting protocols, developing staff training materials, aligning compliance requirements for multistate operations and assessing risk exposure related to noncompliance.
2. **Reimbursement Disputes:** Our team supports providers in addressing payment challenges with insurers, including disputes over partial or delayed reimbursements. Our team will also review payor contracts to identify and remedy gaps in coverage to reduce reimbursement dispute exposure.

With major changes impacting reimbursement at both federal and state levels, Benesch serves as a strategic partner to ensure compliance documentation and operational protocols meet both state and federal requirements. Benesch also provides readiness planning for hospitals, health systems, pharmacies and multistate provider organizations.

Benesch Healthcare+ will continue monitoring IDPH communications and remains available to assist clients stay ahead of these significant changes.