

93RD GENERAL ASSEMBLY State of Illinois 2003 and 2004

Introduced 2/4/2004, by Martin A. Sandoval

SYNOPSIS AS INTRODUCED:

215 ILCS 106/20

Amends the Children's Health Insurance Program Act. Makes technical changes in a Section concerning eligibility for the program.

LRB093 20436 SAS 46219 b

1 AN ACT in relation to insurance.

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

4	Section	5.	The	Children	' S	Health	Insurance	Program	Act	is
5	amended by c	han	ging	Section 2	20	as foll	ows:			

6 (215 ILCS 106/20)

7 Sec. 20. Eligibility.

- (a) To be eligible for this Program, a person must be a person who has a child eligible under this Act and who is eligible under a waiver of federal requirements pursuant to an application made <u>under pursuant to</u> subdivision (a)(1) of Section 40 of this Act or who is a child who:
- 13 (1) is a child who is not eligible for medical assistance;
 - (2) is a child whose annual household income, as determined by the Department, is above 133% of the federal poverty level and at or below 200% of the federal poverty level;
 - (3) is a resident of the State of Illinois; and
 - (4) is a child who is either a United States citizen or included in one of the following categories of non-citizens:
 - (A) unmarried dependent children of either a United States Veteran honorably discharged or a person on active military duty;
 - (B) refugees under Section 207 of the Immigration and Nationality Act;
 - (C) asylees under Section 208 of the Immigration and Nationality Act;
 - (D) persons for whom deportation has been withheld under Section 243(h) of the Immigration and Nationality Act;

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(E)	persons	gran	nted	conditiona	.1 6	entry	under
Section	203(a)(7)	of t	the	Immigration	and	Natio	nality
Act as i	n effect pi	rior t	to A	pril 1, 1980	;		

- (F) persons lawfully admitted for permanent residence under the Immigration and Nationality Act; and
- (G) parolees, for at least one year, under Section 212(d)(5) of the Immigration and Nationality Act.

Those children who are in the categories set forth in subdivisions (4)(F) and (4)(G) of this subsection, who enter the United States on or after August 22, 1996, shall not be eligible for 5 years beginning on the date the child entered the United States.

- (b) A child who is determined to be eligible for assistance may remain eligible for 12 months, provided the child maintains his or her residence in the State, has not yet attained 19 years of age, and is not excluded pursuant to subsection (c). A child who has been determined to be eligible for assistance must reapply or otherwise establish eligibility at least annually. An eligible child shall be required, as determined by the Department by rule, to report promptly those changes in income and other circumstances that affect eligibility. The eligibility of a child may be redetermined based on the information reported or may be terminated based on the failure report or failure to report accurately. A child's responsible relative or caretaker may also be held liable to the Department for any payments made by the Department on such child's behalf that were inappropriate. An applicant shall be provided with notice of these obligations.
- (c) A child shall not be eligible for coverage under this
 Program if:
 - (1) the premium required pursuant to Section 30 of this Act has not been paid. If the required premiums are not paid the liability of the Program shall be limited to benefits incurred under the Program for the time period for which premiums had been paid. If the required monthly

premium is not paid, the child shall be ineligible for re-enrollment for a minimum period of 3 months. Re-enrollment shall be completed prior to the next covered medical visit and the first month's required premium shall be paid in advance of the next covered medical visit. The Department shall promulgate rules regarding grace periods, notice requirements, and hearing procedures pursuant to this subsection;

- (2) the child is an inmate of a public institution or a patient in an institution for mental diseases; or
- (3) the child is a member of a family that is eligible for health benefits covered under the State of Illinois health benefits plan on the basis of a member's employment with a public agency.

15 (Source: P.A. 92-597, eff. 6-28-02; 93-63, eff. 6-30-03.)