



96TH GENERAL ASSEMBLY

State of Illinois

2009 and 2010

HB1082

Introduced 2/11/2009, by Rep. Careen M Gordon - Barbara Flynn
Currie - Mary E. Flowers - Lisa M. Dugan

SYNOPSIS AS INTRODUCED:

5 ILCS 375/6.11
55 ILCS 5/5-1069.3
65 ILCS 5/10-4-2.3
105 ILCS 5/10-22.3f
215 ILCS 5/356z.15 new
215 ILCS 125/5-3 from Ch. 111 1/2, par. 1411.2
215 ILCS 165/10 from Ch. 32, par. 604
305 ILCS 5/5-16.8

Amends the State Employees Group Insurance Act of 1971, the Counties Code, the Illinois Municipal Code, the School Code, the Illinois Insurance Code, the Health Maintenance Organization Act, the Voluntary Health Services Plans Act, and the Illinois Public Aid Code to require an insurer, upon request of an insured intended parent, to provide maternity coverage for a gestational surrogate as a dependent for a term that extends throughout the duration of the expected pregnancy and for 8 weeks after the birth of the child. Effective immediately.

LRB096 03442 RPM 13466 b

FISCAL NOTE ACT
MAY APPLY

STATE MANDATES
ACT MAY REQUIRE
REIMBURSEMENT

1 AN ACT concerning insurance.

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

4 Section 5. The State Employees Group Insurance Act of 1971
5 is amended by changing Section 6.11 as follows:

6 (5 ILCS 375/6.11)

7 (Text of Section before amendment by P.A. 95-958)

8 Sec. 6.11. Required health benefits; Illinois Insurance
9 Code requirements. The program of health benefits shall provide
10 the post-mastectomy care benefits required to be covered by a
11 policy of accident and health insurance under Section 356t of
12 the Illinois Insurance Code. The program of health benefits
13 shall provide the coverage required under Sections 356g.5,
14 356u, 356w, 356x, 356z.2, 356z.4, 356z.6, 356z.9, 356z.10,
15 356z.13 ~~356z.11~~, ~~and~~ 356z.14, and 356z.15 of the Illinois
16 Insurance Code. The program of health benefits must comply with
17 Section 155.37 of the Illinois Insurance Code.

18 (Source: P.A. 95-189, eff. 8-16-07; 95-422, eff. 8-24-07;
19 95-520, eff. 8-28-07; 95-876, eff. 8-21-08; 95-978, eff.
20 1-1-09; 95-1005, eff. 12-12-08; revised 12-15-08.)

21 (Text of Section after amendment by P.A. 95-958)

22 Sec. 6.11. Required health benefits; Illinois Insurance

1 Code requirements. The program of health benefits shall provide
2 the post-mastectomy care benefits required to be covered by a
3 policy of accident and health insurance under Section 356t of
4 the Illinois Insurance Code. The program of health benefits
5 shall provide the coverage required under Sections 356g.5,
6 356u, 356w, 356x, 356z.2, 356z.4, 356z.6, 356z.9, 356z.10,
7 356z.11, ~~and 356z.12, 356z.13~~ 356z.11, and 356z.14, and 356z.15
8 of the Illinois Insurance Code. The program of health benefits
9 must comply with Section 155.37 of the Illinois Insurance Code.
10 (Source: P.A. 95-189, eff. 8-16-07; 95-422, eff. 8-24-07;
11 95-520, eff. 8-28-07; 95-876, eff. 8-21-08; 95-958, eff.
12 6-1-09; 95-978, eff. 1-1-09; 95-1005, eff. 12-12-08; revised
13 12-15-08.)

14 Section 10. The Counties Code is amended by changing
15 Section 5-1069.3 as follows:

16 (55 ILCS 5/5-1069.3)

17 (Text of Section before amendment by P.A. 95-958)

18 Sec. 5-1069.3. Required health benefits. If a county,
19 including a home rule county, is a self-insurer for purposes of
20 providing health insurance coverage for its employees, the
21 coverage shall include coverage for the post-mastectomy care
22 benefits required to be covered by a policy of accident and
23 health insurance under Section 356t and the coverage required
24 under Sections 356g.5, 356u, 356w, 356x, 356z.6, 356z.9,

1 356z.10, 356z.13 ~~356z.11~~, and 356z.14, and 356z.15 of the
2 Illinois Insurance Code. The requirement that health benefits
3 be covered as provided in this Section is an exclusive power
4 and function of the State and is a denial and limitation under
5 Article VII, Section 6, subsection (h) of the Illinois
6 Constitution. A home rule county to which this Section applies
7 must comply with every provision of this Section.

8 (Source: P.A. 95-189, eff. 8-16-07; 95-422, eff. 8-24-07;
9 95-520, eff. 8-28-07; 95-876, eff. 8-21-08; 95-978, eff.
10 1-1-09; 95-1005, eff. 12-12-08; revised 12-15-08.)

11 (Text of Section after amendment by P.A. 95-958)

12 Sec. 5-1069.3. Required health benefits. If a county,
13 including a home rule county, is a self-insurer for purposes of
14 providing health insurance coverage for its employees, the
15 coverage shall include coverage for the post-mastectomy care
16 benefits required to be covered by a policy of accident and
17 health insurance under Section 356t and the coverage required
18 under Sections 356g.5, 356u, 356w, 356x, 356z.6, 356z.9,
19 356z.10, 356z.11, ~~and 356z.12~~, 356z.13 ~~356z.11~~, ~~and 356z.14~~,
20 and 356z.15 of the Illinois Insurance Code. The requirement
21 that health benefits be covered as provided in this Section is
22 an exclusive power and function of the State and is a denial
23 and limitation under Article VII, Section 6, subsection (h) of
24 the Illinois Constitution. A home rule county to which this
25 Section applies must comply with every provision of this

1 Section.

2 (Source: P.A. 95-189, eff. 8-16-07; 95-422, eff. 8-24-07;
3 95-520, eff. 8-28-07; 95-876, eff. 8-21-08; 95-958, eff.
4 6-1-09; 95-978, eff. 1-1-09; 95-1005, eff. 12-12-08; revised
5 12-15-08.)

6 Section 15. The Illinois Municipal Code is amended by
7 changing Section 10-4-2.3 as follows:

8 (65 ILCS 5/10-4-2.3)

9 (Text of Section before amendment by P.A. 95-958)

10 Sec. 10-4-2.3. Required health benefits. If a
11 municipality, including a home rule municipality, is a
12 self-insurer for purposes of providing health insurance
13 coverage for its employees, the coverage shall include coverage
14 for the post-mastectomy care benefits required to be covered by
15 a policy of accident and health insurance under Section 356t
16 and the coverage required under Sections 356g.5, 356u, 356w,
17 356x, 356z.6, 356z.9, 356z.10, 356z.13 ~~356z.11~~, ~~and~~ 356z.14,
18 and 356z.15 of the Illinois Insurance Code. The requirement
19 that health benefits be covered as provided in this is an
20 exclusive power and function of the State and is a denial and
21 limitation under Article VII, Section 6, subsection (h) of the
22 Illinois Constitution. A home rule municipality to which this
23 Section applies must comply with every provision of this
24 Section.

1 (Source: P.A. 95-189, eff. 8-16-07; 95-422, eff. 8-24-07;
2 95-520, eff. 8-28-07; 95-876, eff. 8-21-08; 95-978, eff.
3 1-1-09; 95-1005, eff. 12-12-08; revised 12-15-08.)

4 (Text of Section after amendment by P.A. 95-958)

5 Sec. 10-4-2.3. Required health benefits. If a
6 municipality, including a home rule municipality, is a
7 self-insurer for purposes of providing health insurance
8 coverage for its employees, the coverage shall include coverage
9 for the post-mastectomy care benefits required to be covered by
10 a policy of accident and health insurance under Section 356t
11 and the coverage required under Sections 356g.5, 356u, 356w,
12 356x, 356z.6, 356z.9, 356z.10, 356z.11, ~~and~~ 356z.12, 356z.13
13 ~~356z.11, and~~ 356z.14, and 356z.15 of the Illinois Insurance
14 Code. The requirement that health benefits be covered as
15 provided in this is an exclusive power and function of the
16 State and is a denial and limitation under Article VII, Section
17 6, subsection (h) of the Illinois Constitution. A home rule
18 municipality to which this Section applies must comply with
19 every provision of this Section.

20 (Source: P.A. 95-189, eff. 8-16-07; 95-422, eff. 8-24-07;
21 95-520, eff. 8-28-07; 95-876, eff. 8-21-08; 95-958, eff.
22 6-1-09; 95-978, eff. 1-1-09; 95-1005, eff. 12-12-08; revised
23 12-15-08.)

24 Section 20. The School Code is amended by changing Section

1 10-22.3f as follows:

2 (105 ILCS 5/10-22.3f)

3 (Text of Section before amendment by P.A. 95-958)

4 Sec. 10-22.3f. Required health benefits. Insurance
5 protection and benefits for employees shall provide the
6 post-mastectomy care benefits required to be covered by a
7 policy of accident and health insurance under Section 356t and
8 the coverage required under Sections 356g.5, 356u, 356w, 356x,
9 356z.6, 356z.9, 356z.13 ~~and 356z.11,~~ ~~and~~ 356z.14, and 356z.15
10 of the Illinois Insurance Code.

11 (Source: P.A. 95-189, eff. 8-16-07; 95-422, eff. 8-24-07;
12 95-876, eff. 8-21-08; 95-978, eff. 1-1-09; 95-1005, eff.
13 12-12-08; revised 12-15-08.)

14 (Text of Section after amendment by P.A. 95-958)

15 Sec. 10-22.3f. Required health benefits. Insurance
16 protection and benefits for employees shall provide the
17 post-mastectomy care benefits required to be covered by a
18 policy of accident and health insurance under Section 356t and
19 the coverage required under Sections 356g.5, 356u, 356w, 356x,
20 356z.6, 356z.9, 356z.11, ~~and~~ 356z.12, 356z.13 ~~and 356z.11,~~ ~~and~~
21 356z.14, and 356z.15 of the Illinois Insurance Code.

22 (Source: P.A. 95-189, eff. 8-16-07; 95-422, eff. 8-24-07;
23 95-876, eff. 8-21-08; 95-958, eff. 6-1-09; 95-978, eff. 1-1-09;
24 95-1005, 12-12-08; revised 12-15-08.)

1 Section 25. The Illinois Insurance Code is amended by
2 adding Section 356z.15 as follows:

3 (215 ILCS 5/356z.15 new)

4 Sec. 356z.15. Gestational surrogate coverage. A group or
5 individual policy of accident and health insurance or managed
6 care plan that provides maternity coverage and is amended,
7 delivered, issued, or renewed after the effective date of this
8 amendatory Act of the 96th General Assembly must, upon request
9 of an insured intended parent, provide maternity coverage for a
10 gestational surrogate as a dependent for a term that extends
11 throughout the duration of the expected pregnancy and for 8
12 weeks after the birth of the child.

13 For the purposes of this Section, "intended parent" and
14 "gestational surrogate" shall have the meanings given to those
15 terms under the Gestational Surrogacy Act.

16 Section 30. The Health Maintenance Organization Act is
17 amended by changing Section 5-3 as follows:

18 (215 ILCS 125/5-3) (from Ch. 111 1/2, par. 1411.2)

19 (Text of Section before amendment by P.A. 95-958)

20 Sec. 5-3. Insurance Code provisions.

21 (a) Health Maintenance Organizations shall be subject to
22 the provisions of Sections 133, 134, 137, 140, 141.1, 141.2,

1 141.3, 143, 143c, 147, 148, 149, 151, 152, 153, 154, 154.5,
2 154.6, 154.7, 154.8, 155.04, 355.2, 356m, 356v, 356w, 356x,
3 356y, 356z.2, 356z.4, 356z.5, 356z.6, 356z.8, 356z.9, 356z.10,
4 356z.13 ~~356z.11~~, 356z.14, 356z.15, 364.01, 367.2, 367.2-5,
5 367i, 368a, 368b, 368c, 368d, 368e, 370c, 401, 401.1, 402, 403,
6 403A, 408, 408.2, 409, 412, 444, and 444.1, paragraph (c) of
7 subsection (2) of Section 367, and Articles IIA, VIII 1/2, XII,
8 XII 1/2, XIII, XIII 1/2, XXV, and XXVI of the Illinois
9 Insurance Code.

10 (b) For purposes of the Illinois Insurance Code, except for
11 Sections 444 and 444.1 and Articles XIII and XIII 1/2, Health
12 Maintenance Organizations in the following categories are
13 deemed to be "domestic companies":

14 (1) a corporation authorized under the Dental Service
15 Plan Act or the Voluntary Health Services Plans Act;

16 (2) a corporation organized under the laws of this
17 State; or

18 (3) a corporation organized under the laws of another
19 state, 30% or more of the enrollees of which are residents
20 of this State, except a corporation subject to
21 substantially the same requirements in its state of
22 organization as is a "domestic company" under Article VIII
23 1/2 of the Illinois Insurance Code.

24 (c) In considering the merger, consolidation, or other
25 acquisition of control of a Health Maintenance Organization
26 pursuant to Article VIII 1/2 of the Illinois Insurance Code,

1 (1) the Director shall give primary consideration to
2 the continuation of benefits to enrollees and the financial
3 conditions of the acquired Health Maintenance Organization
4 after the merger, consolidation, or other acquisition of
5 control takes effect;

6 (2) (i) the criteria specified in subsection (1) (b) of
7 Section 131.8 of the Illinois Insurance Code shall not
8 apply and (ii) the Director, in making his determination
9 with respect to the merger, consolidation, or other
10 acquisition of control, need not take into account the
11 effect on competition of the merger, consolidation, or
12 other acquisition of control;

13 (3) the Director shall have the power to require the
14 following information:

15 (A) certification by an independent actuary of the
16 adequacy of the reserves of the Health Maintenance
17 Organization sought to be acquired;

18 (B) pro forma financial statements reflecting the
19 combined balance sheets of the acquiring company and
20 the Health Maintenance Organization sought to be
21 acquired as of the end of the preceding year and as of
22 a date 90 days prior to the acquisition, as well as pro
23 forma financial statements reflecting projected
24 combined operation for a period of 2 years;

25 (C) a pro forma business plan detailing an
26 acquiring party's plans with respect to the operation

1 of the Health Maintenance Organization sought to be
2 acquired for a period of not less than 3 years; and

3 (D) such other information as the Director shall
4 require.

5 (d) The provisions of Article VIII 1/2 of the Illinois
6 Insurance Code and this Section 5-3 shall apply to the sale by
7 any health maintenance organization of greater than 10% of its
8 enrollee population (including without limitation the health
9 maintenance organization's right, title, and interest in and to
10 its health care certificates).

11 (e) In considering any management contract or service
12 agreement subject to Section 141.1 of the Illinois Insurance
13 Code, the Director (i) shall, in addition to the criteria
14 specified in Section 141.2 of the Illinois Insurance Code, take
15 into account the effect of the management contract or service
16 agreement on the continuation of benefits to enrollees and the
17 financial condition of the health maintenance organization to
18 be managed or serviced, and (ii) need not take into account the
19 effect of the management contract or service agreement on
20 competition.

21 (f) Except for small employer groups as defined in the
22 Small Employer Rating, Renewability and Portability Health
23 Insurance Act and except for medicare supplement policies as
24 defined in Section 363 of the Illinois Insurance Code, a Health
25 Maintenance Organization may by contract agree with a group or
26 other enrollment unit to effect refunds or charge additional

1 premiums under the following terms and conditions:

2 (i) the amount of, and other terms and conditions with
3 respect to, the refund or additional premium are set forth
4 in the group or enrollment unit contract agreed in advance
5 of the period for which a refund is to be paid or
6 additional premium is to be charged (which period shall not
7 be less than one year); and

8 (ii) the amount of the refund or additional premium
9 shall not exceed 20% of the Health Maintenance
10 Organization's profitable or unprofitable experience with
11 respect to the group or other enrollment unit for the
12 period (and, for purposes of a refund or additional
13 premium, the profitable or unprofitable experience shall
14 be calculated taking into account a pro rata share of the
15 Health Maintenance Organization's administrative and
16 marketing expenses, but shall not include any refund to be
17 made or additional premium to be paid pursuant to this
18 subsection (f)). The Health Maintenance Organization and
19 the group or enrollment unit may agree that the profitable
20 or unprofitable experience may be calculated taking into
21 account the refund period and the immediately preceding 2
22 plan years.

23 The Health Maintenance Organization shall include a
24 statement in the evidence of coverage issued to each enrollee
25 describing the possibility of a refund or additional premium,
26 and upon request of any group or enrollment unit, provide to

1 the group or enrollment unit a description of the method used
2 to calculate (1) the Health Maintenance Organization's
3 profitable experience with respect to the group or enrollment
4 unit and the resulting refund to the group or enrollment unit
5 or (2) the Health Maintenance Organization's unprofitable
6 experience with respect to the group or enrollment unit and the
7 resulting additional premium to be paid by the group or
8 enrollment unit.

9 In no event shall the Illinois Health Maintenance
10 Organization Guaranty Association be liable to pay any
11 contractual obligation of an insolvent organization to pay any
12 refund authorized under this Section.

13 (Source: P.A. 94-906, eff. 1-1-07; 94-1076, eff. 12-29-06;
14 95-422, eff. 8-24-07; 95-520, eff. 8-28-07; 95-876, eff.
15 8-21-08; 95-978, eff. 1-1-09; 95-1005, eff. 12-12-08; revised
16 12-15-08.)

17 (Text of Section after amendment by P.A. 95-958)

18 Sec. 5-3. Insurance Code provisions.

19 (a) Health Maintenance Organizations shall be subject to
20 the provisions of Sections 133, 134, 137, 140, 141.1, 141.2,
21 141.3, 143, 143c, 147, 148, 149, 151, 152, 153, 154, 154.5,
22 154.6, 154.7, 154.8, 155.04, 355.2, 356m, 356v, 356w, 356x,
23 356y, 356z.2, 356z.4, 356z.5, 356z.6, 356z.8, 356z.9, 356z.10,
24 356z.11, 356z.12, 356z.13 ~~356z.11~~, 356z.14, 356z.15, 364.01,
25 367.2, 367.2-5, 367i, 368a, 368b, 368c, 368d, 368e, 370c, 401,

1 401.1, 402, 403, 403A, 408, 408.2, 409, 412, 444, and 444.1,
2 paragraph (c) of subsection (2) of Section 367, and Articles
3 IIA, VIII 1/2, XII, XII 1/2, XIII, XIII 1/2, XXV, and XXVI of
4 the Illinois Insurance Code.

5 (b) For purposes of the Illinois Insurance Code, except for
6 Sections 444 and 444.1 and Articles XIII and XIII 1/2, Health
7 Maintenance Organizations in the following categories are
8 deemed to be "domestic companies":

9 (1) a corporation authorized under the Dental Service
10 Plan Act or the Voluntary Health Services Plans Act;

11 (2) a corporation organized under the laws of this
12 State; or

13 (3) a corporation organized under the laws of another
14 state, 30% or more of the enrollees of which are residents
15 of this State, except a corporation subject to
16 substantially the same requirements in its state of
17 organization as is a "domestic company" under Article VIII
18 1/2 of the Illinois Insurance Code.

19 (c) In considering the merger, consolidation, or other
20 acquisition of control of a Health Maintenance Organization
21 pursuant to Article VIII 1/2 of the Illinois Insurance Code,

22 (1) the Director shall give primary consideration to
23 the continuation of benefits to enrollees and the financial
24 conditions of the acquired Health Maintenance Organization
25 after the merger, consolidation, or other acquisition of
26 control takes effect;

1 (2) (i) the criteria specified in subsection (1) (b) of
2 Section 131.8 of the Illinois Insurance Code shall not
3 apply and (ii) the Director, in making his determination
4 with respect to the merger, consolidation, or other
5 acquisition of control, need not take into account the
6 effect on competition of the merger, consolidation, or
7 other acquisition of control;

8 (3) the Director shall have the power to require the
9 following information:

10 (A) certification by an independent actuary of the
11 adequacy of the reserves of the Health Maintenance
12 Organization sought to be acquired;

13 (B) pro forma financial statements reflecting the
14 combined balance sheets of the acquiring company and
15 the Health Maintenance Organization sought to be
16 acquired as of the end of the preceding year and as of
17 a date 90 days prior to the acquisition, as well as pro
18 forma financial statements reflecting projected
19 combined operation for a period of 2 years;

20 (C) a pro forma business plan detailing an
21 acquiring party's plans with respect to the operation
22 of the Health Maintenance Organization sought to be
23 acquired for a period of not less than 3 years; and

24 (D) such other information as the Director shall
25 require.

26 (d) The provisions of Article VIII 1/2 of the Illinois

1 Insurance Code and this Section 5-3 shall apply to the sale by
2 any health maintenance organization of greater than 10% of its
3 enrollee population (including without limitation the health
4 maintenance organization's right, title, and interest in and to
5 its health care certificates).

6 (e) In considering any management contract or service
7 agreement subject to Section 141.1 of the Illinois Insurance
8 Code, the Director (i) shall, in addition to the criteria
9 specified in Section 141.2 of the Illinois Insurance Code, take
10 into account the effect of the management contract or service
11 agreement on the continuation of benefits to enrollees and the
12 financial condition of the health maintenance organization to
13 be managed or serviced, and (ii) need not take into account the
14 effect of the management contract or service agreement on
15 competition.

16 (f) Except for small employer groups as defined in the
17 Small Employer Rating, Renewability and Portability Health
18 Insurance Act and except for medicare supplement policies as
19 defined in Section 363 of the Illinois Insurance Code, a Health
20 Maintenance Organization may by contract agree with a group or
21 other enrollment unit to effect refunds or charge additional
22 premiums under the following terms and conditions:

23 (i) the amount of, and other terms and conditions with
24 respect to, the refund or additional premium are set forth
25 in the group or enrollment unit contract agreed in advance
26 of the period for which a refund is to be paid or

1 additional premium is to be charged (which period shall not
2 be less than one year); and

3 (ii) the amount of the refund or additional premium
4 shall not exceed 20% of the Health Maintenance
5 Organization's profitable or unprofitable experience with
6 respect to the group or other enrollment unit for the
7 period (and, for purposes of a refund or additional
8 premium, the profitable or unprofitable experience shall
9 be calculated taking into account a pro rata share of the
10 Health Maintenance Organization's administrative and
11 marketing expenses, but shall not include any refund to be
12 made or additional premium to be paid pursuant to this
13 subsection (f)). The Health Maintenance Organization and
14 the group or enrollment unit may agree that the profitable
15 or unprofitable experience may be calculated taking into
16 account the refund period and the immediately preceding 2
17 plan years.

18 The Health Maintenance Organization shall include a
19 statement in the evidence of coverage issued to each enrollee
20 describing the possibility of a refund or additional premium,
21 and upon request of any group or enrollment unit, provide to
22 the group or enrollment unit a description of the method used
23 to calculate (1) the Health Maintenance Organization's
24 profitable experience with respect to the group or enrollment
25 unit and the resulting refund to the group or enrollment unit
26 or (2) the Health Maintenance Organization's unprofitable

1 experience with respect to the group or enrollment unit and the
2 resulting additional premium to be paid by the group or
3 enrollment unit.

4 In no event shall the Illinois Health Maintenance
5 Organization Guaranty Association be liable to pay any
6 contractual obligation of an insolvent organization to pay any
7 refund authorized under this Section.

8 (Source: P.A. 94-906, eff. 1-1-07; 94-1076, eff. 12-29-06;
9 95-422, eff. 8-24-07; 95-520, eff. 8-28-07; 95-876, eff.
10 8-21-08; 95-958, eff. 6-1-09; 95-978, eff. 1-1-09; 95-1005,
11 eff. 12-12-08; revised 12-15-08.)

12 Section 35. The Voluntary Health Services Plans Act is
13 amended by changing Section 10 as follows:

14 (215 ILCS 165/10) (from Ch. 32, par. 604)

15 (Text of Section before amendment by P.A. 95-958)

16 Sec. 10. Application of Insurance Code provisions. Health
17 services plan corporations and all persons interested therein
18 or dealing therewith shall be subject to the provisions of
19 Articles IIA and XII 1/2 and Sections 3.1, 133, 140, 143, 143c,
20 149, 155.37, 354, 355.2, 356g.5, 356r, 356t, 356u, 356v, 356w,
21 356x, 356y, 356z.1, 356z.2, 356z.4, 356z.5, 356z.6, 356z.8,
22 356z.9, 356z.10, 356z.13 ~~356z.11~~, 356z.14, 356z.15, 364.01,
23 367.2, 368a, 401, 401.1, 402, 403, 403A, 408, 408.2, and 412,
24 and paragraphs (7) and (15) of Section 367 of the Illinois

1 Insurance Code.

2 (Source: P.A. 94-1076, eff. 12-29-06; 95-189, eff. 8-16-07;
3 95-331, eff. 8-21-07; 95-422, eff. 8-24-07; 95-520, eff.
4 8-28-07; 95-876, eff. 8-21-08; 95-978, eff. 1-1-09; 95-1005,
5 eff. 12-12-08; revised 12-15-08.)

6 (Text of Section after amendment by P.A. 95-958)

7 Sec. 10. Application of Insurance Code provisions. Health
8 services plan corporations and all persons interested therein
9 or dealing therewith shall be subject to the provisions of
10 Articles IIA and XII 1/2 and Sections 3.1, 133, 140, 143, 143c,
11 149, 155.37, 354, 355.2, 356g.5, 356r, 356t, 356u, 356v, 356w,
12 356x, 356y, 356z.1, 356z.2, 356z.4, 356z.5, 356z.6, 356z.8,
13 356z.9, 356z.10, 356z.11, 356z.12, 356z.13 ~~356z.11~~, 356z.14,
14 356z.15, 364.01, 367.2, 368a, 401, 401.1, 402, 403, 403A, 408,
15 408.2, and 412, and paragraphs (7) and (15) of Section 367 of
16 the Illinois Insurance Code.

17 (Source: P.A. 94-1076, eff. 12-29-06; 95-189, eff. 8-16-07;
18 95-331, eff. 8-21-07; 95-422, eff. 8-24-07; 95-520, eff.
19 8-28-07; 95-876, eff. 8-21-08; 95-958, eff. 6-1-09; 95-978,
20 eff. 1-1-09; 95-1005, eff. 12-12-08; revised 12-15-08.)

21 Section 40. The Illinois Public Aid Code is amended by
22 changing Section 5-16.8 as follows:

23 (305 ILCS 5/5-16.8)

1 Sec. 5-16.8. Required health benefits. The medical
2 assistance program shall (i) provide the post-mastectomy care
3 benefits required to be covered by a policy of accident and
4 health insurance under Section 356t and the coverage required
5 under Sections 356g.5, 356u, 356w, 356x, ~~and~~ 356z.6, and
6 356z.15 of the Illinois Insurance Code and (ii) be subject to
7 the provisions of Section 364.01 of the Illinois Insurance
8 Code.

9 (Source: P.A. 95-189, eff. 8-16-07; 95-331, eff. 8-21-07.)

10 Section 95. No acceleration or delay. Where this Act makes
11 changes in a statute that is represented in this Act by text
12 that is not yet or no longer in effect (for example, a Section
13 represented by multiple versions), the use of that text does
14 not accelerate or delay the taking effect of (i) the changes
15 made by this Act or (ii) provisions derived from any other
16 Public Act.

17 Section 99. Effective date. This Act takes effect upon
18 becoming law.