



Rep. Mary E. Flowers

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09800HB4335ham003

LRB098 17245 RPM 58437 a

1 AMENDMENT TO HOUSE BILL 4335

2 AMENDMENT NO. \_\_\_\_\_. Amend House Bill 4335 by replacing  
3 everything after the enacting clause with the following:

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 Sec. 6.11. Required health benefits; Illinois Insurance  
8 Code requirements. The program of health benefits shall provide  
9 the post-mastectomy care benefits required to be covered by a  
10 policy of accident and health insurance under Section 356t of  
11 the Illinois Insurance Code. The program of health benefits  
12 shall provide the coverage required under Sections 356g,  
13 356g.5, 356g.5-1, 356m, 356u, 356w, 356x, 356z.2, 356z.4,  
14 356z.6, 356z.8, 356z.9, 356z.10, 356z.11, 356z.12, 356z.13,  
15 356z.14, 356z.15, ~~and~~ 356z.17, and 356z.22 of the Illinois  
16 Insurance Code. The program of health benefits must comply with

1 Sections 155.22a, 155.37, 355b, and 356z.19 of the Illinois  
2 Insurance Code.

3 Rulemaking authority to implement Public Act 95-1045, if  
4 any, is conditioned on the rules being adopted in accordance  
5 with all provisions of the Illinois Administrative Procedure  
6 Act and all rules and procedures of the Joint Committee on  
7 Administrative Rules; any purported rule not so adopted, for  
8 whatever reason, is unauthorized.

9 (Source: P.A. 97-282, eff. 8-9-11; 97-343, eff. 1-1-12; 97-813,  
10 eff. 7-13-12; 98-189, eff. 1-1-14.)

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

13 (55 ILCS 5/5-1069.3)

14 Sec. 5-1069.3. Required health benefits. If a county,  
15 including a home rule county, is a self-insurer for purposes of  
16 providing health insurance coverage for its employees, the  
17 coverage shall include coverage for the post-mastectomy care  
18 benefits required to be covered by a policy of accident and  
19 health insurance under Section 356t and the coverage required  
20 under Sections 356g, 356g.5, 356g.5-1, 356u, 356w, 356x,  
21 356z.6, 356z.8, 356z.9, 356z.10, 356z.11, 356z.12, 356z.13,  
22 356z.14, ~~and~~ 356z.15, and 356z.22 of the Illinois Insurance  
23 Code. The coverage shall comply with Sections 155.22a, 355b,  
24 and 356z.19 of the Illinois Insurance Code. The requirement

1 that health benefits be covered as provided in this Section is  
2 an exclusive power and function of the State and is a denial  
3 and limitation under Article VII, Section 6, subsection (h) of  
4 the Illinois Constitution. A home rule county to which this  
5 Section applies must comply with every provision of this  
6 Section.

7 Rulemaking authority to implement Public Act 95-1045, if  
8 any, is conditioned on the rules being adopted in accordance  
9 with all provisions of the Illinois Administrative Procedure  
10 Act and all rules and procedures of the Joint Committee on  
11 Administrative Rules; any purported rule not so adopted, for  
12 whatever reason, is unauthorized.

13 (Source: P.A. 97-282, eff. 8-9-11; 97-343, eff. 1-1-12; 97-813,  
14 eff. 7-13-12; 98-189, eff. 1-1-14.)

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

17 (65 ILCS 5/10-4-2.3)

18 Sec. 10-4-2.3. Required health benefits. If a  
19 municipality, including a home rule municipality, is a  
20 self-insurer for purposes of providing health insurance  
21 coverage for its employees, the coverage shall include coverage  
22 for the post-mastectomy care benefits required to be covered by  
23 a policy of accident and health insurance under Section 356t  
24 and the coverage required under Sections 356g, 356g.5,

1 356g.5-1, 356u, 356w, 356x, 356z.6, 356z.8, 356z.9, 356z.10,  
2 356z.11, 356z.12, 356z.13, 356z.14, ~~and~~ 356z.15, and 356z.22 of  
3 the Illinois Insurance Code. The coverage shall comply with  
4 Sections 155.22a, 355b, and 356z.19 of the Illinois Insurance  
5 Code. The requirement that health benefits be covered as  
6 provided in this is an exclusive power and function of the  
7 State and is a denial and limitation under Article VII, Section  
8 6, subsection (h) of the Illinois Constitution. A home rule  
9 municipality to which this Section applies must comply with  
10 every provision of this Section.

11 Rulemaking authority to implement Public Act 95-1045, if  
12 any, is conditioned on the rules being adopted in accordance  
13 with all provisions of the Illinois Administrative Procedure  
14 Act and all rules and procedures of the Joint Committee on  
15 Administrative Rules; any purported rule not so adopted, for  
16 whatever reason, is unauthorized.

17 (Source: P.A. 97-282, eff. 8-9-11; 97-343, eff. 1-1-12; 97-813,  
18 eff. 7-13-12; 98-189, eff. 1-1-14.)

19 Section 20. The Illinois Insurance Code is amended by  
20 adding Section 356z.22 as follows:

21 (215 ILCS 5/356z.22 new)

22 Sec. 356z.22. Hospital patient assessments. A group or  
23 individual policy of accident and health insurance or managed  
24 care plan amended, delivered, issued, or renewed after the

1 effective date of this amendatory Act of the 98th General  
2 Assembly that provides coverage for hospital care shall include  
3 in that coverage all services ordered by a physician and  
4 provided in the hospital that are considered medically  
5 necessary per the terms set forth in the insurance policy or  
6 certificate or, in the case of programs administered by the  
7 Department of Healthcare and Family Services, within the  
8 services covered by the Illinois Title XIX State Plan and the  
9 Illinois Title XXI State Plan for the evaluation, assessment,  
10 and diagnosis of the illness or condition that resulted in the  
11 hospital stay of the enrollee or recipient. The services are  
12 subject to reasonable review and utilization standards  
13 required by the policy or plan for all hospital services, as  
14 defined by the Department or its successor agency.

15 Section 25. The Illinois Public Aid Code is amended by  
16 changing Section 5-16.8 as follows:

17 (305 ILCS 5/5-16.8)

18 Sec. 5-16.8. Required health benefits. The medical  
19 assistance program shall (i) provide the post-mastectomy care  
20 benefits required to be covered by a policy of accident and  
21 health insurance under Section 356t and the coverage required  
22 under Sections 356g.5, 356u, 356w, 356x, ~~and~~ 356z.6, and  
23 356z.22 of the Illinois Insurance Code and (ii) be subject to  
24 the provisions of Sections 356z.19 and 364.01 of the Illinois

1 Insurance Code.

2 On and after July 1, 2012, the Department shall reduce any  
3 rate of reimbursement for services or other payments or alter  
4 any methodologies authorized by this Code to reduce any rate of  
5 reimbursement for services or other payments in accordance with  
6 Section 5-5e.

7 (Source: P.A. 97-282, eff. 8-9-11; 97-689, eff. 6-14-12.)

8 Section 30. The Medical Patient Rights Act is amended by  
9 changing Section 2.04 as follows:

10 (410 ILCS 50/2.04) (from Ch. 111 1/2, par. 5402.04)

11 Sec. 2.04. "Insurance company" means (1) an insurance  
12 company, fraternal benefit society, and any other insurer  
13 subject to regulation under the Illinois Insurance Code; or (2)  
14 a health maintenance organization, a limited health service  
15 organization under the Limited Health Service Organization  
16 Act, or a voluntary health services plan under the Voluntary  
17 Health Services Plans Act.

18 (Source: P.A. 85-677; 85-679.)

19 Section 99. Effective date. This Act takes effect upon  
20 becoming law."