



104TH GENERAL ASSEMBLY

State of Illinois

2025 and 2026

HB4207

Introduced 1/14/2026, by Rep. Yolonda Morris

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.88 new	
215 ILCS 125/5-3	from Ch. 111 1/2, par. 1411.2
215 ILCS 130/4003	from Ch. 73, par. 1504-3
215 ILCS 165/10	from Ch. 32, par. 604
305 ILCS 5/5-16.8	

Amends the Accident and Health Article of the Illinois Insurance Code. Provides that an individual or group policy of accident and health insurance that is amended, delivered, issued, or renewed on or after January 1, 2028 shall cover a medically necessary coronary calcium scan and scoring every 36 months for individuals over the age of 40. Defines "coronary calcium scan and scoring". Makes conforming changes in the State Employees Group Insurance Act of 1971, the Counties Code, the Illinois Municipal Code, the School Code, the Health Maintenance Organization Act, the Limited Health Service Organization Act, the Voluntary Health Services Plans Act, and the Medical Assistance Article of the Illinois Public Aid Code. Effective January 1, 2027.

LRB104 15812 BAB 29011 b

1 AN ACT concerning regulation.

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. 104-1, 104-27,
8 104-68, 104-73, 104-289, 104-324, and 104-379)

9 Sec. 6.11. Required health benefits; Illinois Insurance
10 Code requirements. The program of health benefits shall
11 provide the post-mastectomy care benefits required to be
12 covered by a policy of accident and health insurance under
13 Section 356t of the Illinois Insurance Code. The program of
14 health benefits shall provide the coverage required under
15 Sections 356g, 356g.5, 356g.5-1, 356m, 356q, 356u, 356u.10,
16 356w, 356x, 356z.2, 356z.4, 356z.4a, 356z.5, 356z.6, 356z.8,
17 356z.9, 356z.10, 356z.11, 356z.12, 356z.13, 356z.14, 356z.15,
18 356z.17, 356z.22, 356z.25, 356z.26, 356z.29, 356z.30, 356z.32,
19 356z.33, 356z.36, 356z.40, 356z.41, 356z.45, 356z.46, 356z.47,
20 356z.51, 356z.53, 356z.54, 356z.55, 356z.56, 356z.57, 356z.59,
21 356z.60, 356z.61, 356z.62, 356z.64, 356z.67, 356z.68, 356z.70,
22 356z.71, 356z.74, 356z.76, ~~and~~ 356z.77, ~~and~~ 356z.81, ~~and~~
23 356z.88 ~~356z.80~~ of the Illinois Insurance Code. The program of

1 health benefits must comply with Sections 155.22a, 155.37,
2 355b, 356z.19, 370c, and 370c.1 and Article XXXIIB of the
3 Illinois Insurance Code. The program of health benefits shall
4 provide the coverage required under Section 356m of the
5 Illinois Insurance Code and, for the employees of the State
6 Employee Group Insurance Program only, the coverage as also
7 provided in Section 6.11B of this Act. The Department of
8 Insurance shall enforce the requirements of this Section with
9 respect to Sections 370c and 370c.1 of the Illinois Insurance
10 Code; all other requirements of this Section shall be enforced
11 by the Department of Central Management Services.

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

18 (Source: P.A. 103-8, eff. 1-1-24; 103-84, eff. 1-1-24; 103-91,
19 eff. 1-1-24; 103-420, eff. 1-1-24; 103-445, eff. 1-1-24;
20 103-535, eff. 8-11-23; 103-551, eff. 8-11-23; 103-605, eff.
21 7-1-24; 103-718, eff. 7-19-24; 103-751, eff. 8-2-24; 103-870,
22 eff. 1-1-25; 103-914, eff. 1-1-25; 103-918, eff. 1-1-25;
23 103-951, eff. 1-1-25; 103-1024, eff. 1-1-25; 104-42, eff.
24 8-1-25; 104-417, eff. 8-15-25; revised 10-1-25.)

25 (Text of Section after amendment by P.A. 104-27, 104-68,

1 104-73, 104-289, 104-324, and 104-379 but before amendment by
2 P.A. 104-1)

3 Sec. 6.11. Required health benefits; Illinois Insurance
4 Code requirements. The program of health benefits shall
5 provide the post-mastectomy care benefits required to be
6 covered by a policy of accident and health insurance under
7 Section 356t of the Illinois Insurance Code. The program of
8 health benefits shall provide the coverage required under
9 Sections 356g, 356g.5, 356g.5-1, 356m, 356q, 356u, 356u.10,
10 356w, 356x, 356z.2, 356z.4, 356z.4a, 356z.5, 356z.6, 356z.8,
11 356z.9, 356z.10, 356z.11, 356z.12, 356z.13, 356z.14, 356z.15,
12 356z.17, 356z.22, 356z.25, 356z.26, 356z.29, 356z.30, 356z.32,
13 356z.33, 356z.36, 356z.40, 356z.41, 356z.45, 356z.46, 356z.47,
14 356z.51, 356z.53, 356z.54, 356z.55, 356z.56, 356z.57, 356z.59,
15 356z.60, 356z.61, 356z.62, 356z.64, 356z.67, 356z.68, 356z.70,
16 356z.71, 356z.74, 356z.76, ~~and 356z.77, and 356z.80, 356z.81,~~
17 356z.82, 356z.83, 356z.84, 356z.85, and 356z.88 of the
18 Illinois Insurance Code. The program of health benefits must
19 comply with Sections 155.22a, 155.37, 355b, 356z.19, 370c, and
20 370c.1 and Article XXXIIB of the Illinois Insurance Code. The
21 program of health benefits shall provide the coverage required
22 under Section 356m of the Illinois Insurance Code and, for the
23 employees of the State Employee Group Insurance Program only,
24 the coverage as also provided in Section 6.11B of this Act. The
25 Department of Insurance shall enforce the requirements of this
26 Section with respect to Sections 370c and 370c.1 and Article

1 XXXIIB of the Illinois Insurance Code; all other requirements
2 of this Section shall be enforced by the Department of Central
3 Management Services.

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

10 (Source: P.A. 103-8, eff. 1-1-24; 103-84, eff. 1-1-24; 103-91,
11 eff. 1-1-24; 103-420, eff. 1-1-24; 103-445, eff. 1-1-24;
12 103-535, eff. 8-11-23; 103-551, eff. 8-11-23; 103-605, eff.
13 7-1-24; 103-718, eff. 7-19-24; 103-751, eff. 8-2-24; 103-870,
14 eff. 1-1-25; 103-914, eff. 1-1-25; 103-918, eff. 1-1-25;
15 103-951, eff. 1-1-25; 103-1024, eff. 1-1-25; 104-27, eff.
16 1-1-26, 104-42, eff. 8-1-25; 104-68, eff. 1-1-26; 104-73, eff.
17 1-1-26; 104-289, eff. 1-1-26; 104-324, eff. 1-1-26; 104-379,
18 eff. 1-1-26; 104-417, eff. 8-15-25; revised 10-1-25.)

19 (Text of Section after amendment by P.A. 104-1)

20 Sec. 6.11. Required health benefits; Illinois Insurance
21 Code requirements. The program of health benefits shall
22 provide the post-mastectomy care benefits required to be
23 covered by a policy of accident and health insurance under
24 Section 356t of the Illinois Insurance Code. The program of
25 health benefits shall provide the coverage required under

1 Sections 356g, 356g.5, 356g.5-1, 356m, 356q, 356u, 356u.10,
2 356w, 356x, 356z.2, 356z.4, 356z.4a, 356z.5, 356z.6, 356z.8,
3 356z.9, 356z.10, 356z.11, 356z.12, 356z.13, 356z.14, 356z.15,
4 356z.17, 356z.22, 356z.25, 356z.26, 356z.29, 356z.30, 356z.32,
5 356z.33, 356z.36, 356z.40, 356z.41, 356z.45, 356z.46, 356z.47,
6 356z.51, 356z.53, 356z.54, 356z.55, 356z.56, 356z.57, 356z.59,
7 356z.60, 356z.61, 356z.62, 356z.64, 356z.67, 356z.68, 356z.70,
8 356z.71, 356z.74, 356z.76, ~~and 356z.77, 356z.79, and 356z.80,~~
9 356z.81, 356z.82, 356z.83, 356z.84, 356z.85, and 356z.88 of
10 the Illinois Insurance Code. The program of health benefits
11 must comply with Sections 155.22a, 155.37, 355b, 356z.19,
12 370c, and 370c.1 and Article XXXIIB of the Illinois Insurance
13 Code. The program of health benefits shall provide the
14 coverage required under Section 356m of the Illinois Insurance
15 Code and, for the employees of the State Employee Group
16 Insurance Program only, the coverage as also provided in
17 Section 6.11B of this Act. The Department of Insurance shall
18 enforce the requirements of this Section with respect to
19 Sections 370c and 370c.1 and Article XXXIIB of the Illinois
20 Insurance Code; all other requirements of this Section shall
21 be enforced by the Department of Central Management Services.

22 Rulemaking authority to implement Public Act 95-1045, if
23 any, is conditioned on the rules being adopted in accordance
24 with all provisions of the Illinois Administrative Procedure
25 Act and all rules and procedures of the Joint Committee on
26 Administrative Rules; any purported rule not so adopted, for

1 whatever reason, is unauthorized.

2 (Source: P.A. 103-8, eff. 1-1-24; 103-84, eff. 1-1-24; 103-91,
3 eff. 1-1-24; 103-420, eff. 1-1-24; 103-445, eff. 1-1-24;
4 103-535, eff. 8-11-23; 103-551, eff. 8-11-23; 103-605, eff.
5 7-1-24; 103-718, eff. 7-19-24; 103-751, eff. 8-2-24; 103-870,
6 eff. 1-1-25; 103-914, eff. 1-1-25; 103-918, eff. 1-1-25;
7 103-951, eff. 1-1-25; 103-1024, eff. 1-1-25; 104-1, eff.
8 7-1-27; 104-27, eff. 1-1-26, 104-42, eff. 8-1-25; 104-68, eff.
9 1-1-26; 104-73, eff. 1-1-26; 104-289, eff. 1-1-26; 104-324,
10 eff. 1-1-26; 104-379, eff. 1-1-26; 104-417, eff. 8-15-25;
11 revised 10-1-25.)

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

14 (55 ILCS 5/5-1069.3)

15 (Text of Section before amendment by P.A. 104-68, 104-73,
16 104-289, 104-324, and 104-379)

17 Sec. 5-1069.3. Required health benefits. If a county,
18 including a home rule county, is a self-insurer for purposes
19 of providing health insurance coverage for its employees, the
20 coverage shall include coverage for the post-mastectomy care
21 benefits required to be covered by a policy of accident and
22 health insurance under Section 356t and the coverage required
23 under Sections 356g, 356g.5, 356g.5-1, 356m, 356q, 356u,
24 356u.10, 356w, 356x, 356z.4, 356z.4a, 356z.6, 356z.8, 356z.9,

1 356z.10, 356z.11, 356z.12, 356z.13, 356z.14, 356z.15, 356z.22,
2 356z.25, 356z.26, 356z.29, 356z.30, 356z.32, 356z.33, 356z.36,
3 356z.40, 356z.41, 356z.45, 356z.46, 356z.47, 356z.48, 356z.51,
4 356z.53, 356z.54, 356z.56, 356z.57, 356z.59, 356z.60, 356z.61,
5 356z.62, 356z.64, 356z.67, 356z.68, 356z.70, 356z.71, 356z.74,
6 ~~and~~ 356z.77, 356z.79, 356z.81, and 356z.88 ~~356z.80~~ of the
7 Illinois Insurance Code. The coverage shall comply with
8 Sections 155.22a, 355b, 356z.19, and 370c of the Illinois
9 Insurance Code. The Department of Insurance shall enforce the
10 requirements of this Section. The requirement that health
11 benefits be covered as provided in this Section is an
12 exclusive power and function of the State and is a denial and
13 limitation under Article VII, Section 6, subsection (h) of the
14 Illinois Constitution. A home rule county to which this
15 Section applies must comply with every provision of this
16 Section.

17 Rulemaking authority to implement Public Act 95-1045, if
18 any, is conditioned on the rules being adopted in accordance
19 with all provisions of the Illinois Administrative Procedure
20 Act and all rules and procedures of the Joint Committee on
21 Administrative Rules; any purported rule not so adopted, for
22 whatever reason, is unauthorized.

23 (Source: P.A. 103-84, eff. 1-1-24; 103-91, eff. 1-1-24;
24 103-420, eff. 1-1-24; 103-445, eff. 1-1-24; 103-535, eff.
25 8-11-23; 103-551, eff. 8-11-23; 103-605, eff. 7-1-24; 103-718,
26 eff. 7-19-24; 103-751, eff. 8-2-24; 103-914, eff. 1-1-25;

1 103-918, eff. 1-1-25; 103-1024, eff. 1-1-25; 104-1, eff.
2 6-9-25; 104-42, eff. 8-1-25; 104-417, eff. 8-15-25; revised
3 10-1-25.)

4 (Text of Section after amendment by P.A. 104-68, 104-73,
5 104-289, 104-324, and 104-379)

6 Sec. 5-1069.3. Required health benefits. If a county,
7 including a home rule county, is a self-insurer for purposes
8 of providing health insurance coverage for its employees, the
9 coverage shall include coverage for the post-mastectomy care
10 benefits required to be covered by a policy of accident and
11 health insurance under Section 356t and the coverage required
12 under Sections 356g, 356g.5, 356g.5-1, 356m, 356q, 356u,
13 356u.10, 356w, 356x, 356z.4, 356z.4a, 356z.6, 356z.8, 356z.9,
14 356z.10, 356z.11, 356z.12, 356z.13, 356z.14, 356z.15, 356z.22,
15 356z.25, 356z.26, 356z.29, 356z.30, 356z.32, 356z.33, 356z.36,
16 356z.40, 356z.41, 356z.45, 356z.46, 356z.47, 356z.48, 356z.51,
17 356z.53, 356z.54, 356z.56, 356z.57, 356z.59, 356z.60, 356z.61,
18 356z.62, 356z.64, 356z.67, 356z.68, 356z.70, 356z.71, 356z.74,
19 ~~and~~ 356z.77, 356z.79, and 356z.80, 356z.81, 356z.82, 356z.83,
20 356z.84, 356z.85, and 356z.88 of the Illinois Insurance Code.
21 The coverage shall comply with Sections 155.22a, 355b,
22 356z.19, and 370c of the Illinois Insurance Code. The
23 Department of Insurance shall enforce the requirements of this
24 Section. The requirement that health benefits be covered as
25 provided in this Section is an exclusive power and function of

1 the State and is a denial and limitation under Article VII,
2 Section 6, subsection (h) of the Illinois Constitution. A home
3 rule county to which this Section applies must comply with
4 every provision of this Section.

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

11 (Source: P.A. 103-84, eff. 1-1-24; 103-91, eff. 1-1-24;
12 103-420, eff. 1-1-24; 103-445, eff. 1-1-24; 103-535, eff.
13 8-11-23; 103-551, eff. 8-11-23; 103-605, eff. 7-1-24; 103-718,
14 eff. 7-19-24; 103-751, eff. 8-2-24; 103-914, eff. 1-1-25;
15 103-918, eff. 1-1-25; 103-1024, eff. 1-1-25; 104-1, eff.
16 6-9-25; 104-42, eff. 8-1-25; 104-68, eff. 1-1-26; 104-73, eff.
17 1-1-26; 104-289, eff. 1-1-26; 104-324, eff. 1-1-26; 104-379,
18 eff. 1-1-26; 104-417, eff. 8-15-25; revised 10-1-25.)

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

21 (65 ILCS 5/10-4-2.3)

22 (Text of Section before amendment by P.A. 104-68, 104-73,
23 104-289, 104-324, and 104-379)

24 Sec. 10-4-2.3. Required health benefits. If a

1 municipality, including a home rule municipality, is a
2 self-insurer for purposes of providing health insurance
3 coverage for its employees, the coverage shall include
4 coverage for the post-mastectomy care benefits required to be
5 covered by a policy of accident and health insurance under
6 Section 356t and the coverage required under Sections 356g,
7 356g.5, 356g.5-1, 356m, 356q, 356u, 356u.10, 356w, 356x,
8 356z.4, 356z.4a, 356z.6, 356z.8, 356z.9, 356z.10, 356z.11,
9 356z.12, 356z.13, 356z.14, 356z.15, 356z.22, 356z.25, 356z.26,
10 356z.29, 356z.30, 356z.32, 356z.33, 356z.36, 356z.40, 356z.41,
11 356z.45, 356z.46, 356z.47, 356z.48, 356z.51, 356z.53, 356z.54,
12 356z.56, 356z.57, 356z.59, 356z.60, 356z.61, 356z.62, 356z.64,
13 356z.67, 356z.68, 356z.70, 356z.71, 356z.74, ~~and~~ 356z.77,
14 356z.79, 356z.81, and 356z.88 ~~356z.80~~ of the Illinois
15 Insurance Code. The coverage shall comply with Sections
16 155.22a, 355b, 356z.19, and 370c of the Illinois Insurance
17 Code. The Department of Insurance shall enforce the
18 requirements of this Section. The requirement that health
19 benefits be covered as provided in this is an exclusive power
20 and function of the State and is a denial and limitation under
21 Article VII, Section 6, subsection (h) of the Illinois
22 Constitution. A home rule municipality to which this Section
23 applies must comply with every provision of this Section.

24 Rulemaking authority to implement Public Act 95-1045, if
25 any, is conditioned on the rules being adopted in accordance
26 with all provisions of the Illinois Administrative Procedure

1 Act and all rules and procedures of the Joint Committee on
2 Administrative Rules; any purported rule not so adopted, for
3 whatever reason, is unauthorized.

4 (Source: P.A. 103-84, eff. 1-1-24; 103-91, eff. 1-1-24;
5 103-420, eff. 1-1-24; 103-445, eff. 1-1-24; 103-535, eff.
6 8-11-23; 103-551, eff. 8-11-23; 103-605, eff. 7-1-24; 103-718,
7 eff. 7-19-24; 103-751, eff. 8-2-24; 103-914, eff. 1-1-25;
8 103-918, eff. 1-1-25; 103-1024, eff. 1-1-25; 104-1, eff.
9 6-9-25; 104-42, eff. 8-1-25; 104-417, eff. 8-15-25; revised
10 10-2-25.)

11 (Text of Section after amendment by P.A. 104-68, 104-73,
12 104-289, 104-324, and 104-379)

13 Sec. 10-4-2.3. Required health benefits. If a
14 municipality, including a home rule municipality, is a
15 self-insurer for purposes of providing health insurance
16 coverage for its employees, the coverage shall include
17 coverage for the post-mastectomy care benefits required to be
18 covered by a policy of accident and health insurance under
19 Section 356t and the coverage required under Sections 356g,
20 356g.5, 356g.5-1, 356m, 356q, 356u, 356u.10, 356w, 356x,
21 356z.4, 356z.4a, 356z.6, 356z.8, 356z.9, 356z.10, 356z.11,
22 356z.12, 356z.13, 356z.14, 356z.15, 356z.22, 356z.25, 356z.26,
23 356z.29, 356z.30, 356z.32, 356z.33, 356z.36, 356z.40, 356z.41,
24 356z.45, 356z.46, 356z.47, 356z.48, 356z.51, 356z.53, 356z.54,
25 356z.56, 356z.57, 356z.59, 356z.60, 356z.61, 356z.62, 356z.64,

1 356z.67, 356z.68, 356z.70, 356z.71, 356z.74, ~~and~~ 356z.77,
2 356z.79, ~~and~~ 356z.80, 356z.81, 356z.82, 356z.83, 356z.84,
3 356z.85, and 356z.88 of the Illinois Insurance Code. The
4 coverage shall comply with Sections 155.22a, 355b, 356z.19,
5 and 370c of the Illinois Insurance Code. The Department of
6 Insurance shall enforce the requirements of this Section. The
7 requirement that health benefits be covered as provided in
8 this is an exclusive power and function of the State and is a
9 denial and limitation under Article VII, Section 6, subsection
10 (h) of the Illinois Constitution. A home rule municipality to
11 which this Section applies must comply with every provision of
12 this Section.

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

19 (Source: P.A. 103-84, eff. 1-1-24; 103-91, eff. 1-1-24;
20 103-420, eff. 1-1-24; 103-445, eff. 1-1-24; 103-535, eff.
21 8-11-23; 103-551, eff. 8-11-23; 103-605, eff. 7-1-24; 103-718,
22 eff. 7-19-24; 103-751, eff. 8-2-24; 103-914, eff. 1-1-25;
23 103-918, eff. 1-1-25; 103-1024, eff. 1-1-25; 104-1, eff.
24 6-9-25; 104-42, eff. 8-1-25; 104-68, eff. 1-1-26; 104-73, eff.
25 1-1-26; 104-289, eff. 1-1-26; 104-324, eff. 1-1-26; 104-379,
26 eff. 1-1-26; 104-417, eff. 8-15-25; revised 10-2-25.)

1 Section 20. The School Code is amended by changing Section
2 10-22.3f as follows:

3 (105 ILCS 5/10-22.3f)

4 (Text of Section before amendment by P.A. 104-27, 104-68,
5 104-73, 104-289, 104-324, and 104-379)

6 Sec. 10-22.3f. Required health benefits. Insurance
7 protection and benefits for employees shall provide the
8 post-mastectomy care benefits required to be covered by a
9 policy of accident and health insurance under Section 356t and
10 the coverage required under Sections 356g, 356g.5, 356g.5-1,
11 356m, 356q, 356u, 356u.10, 356w, 356x, 356z.4, 356z.4a,
12 356z.6, 356z.8, 356z.9, 356z.11, 356z.12, 356z.13, 356z.14,
13 356z.15, 356z.22, 356z.25, 356z.26, 356z.29, 356z.30, 356z.32,
14 356z.33, 356z.36, 356z.40, 356z.41, 356z.45, 356z.46, 356z.47,
15 356z.51, 356z.53, 356z.54, 356z.56, 356z.57, 356z.59, 356z.60,
16 356z.61, 356z.62, 356z.64, 356z.67, 356z.68, 356z.70, 356z.71,
17 356z.74, ~~and 356z.77, 356z.79, 356z.81, and 356z.88 356z.80~~ of
18 the Illinois Insurance Code. Insurance policies shall comply
19 with Section 356z.19 of the Illinois Insurance Code. The
20 coverage shall comply with Sections 155.22a, 355b, and 370c of
21 the Illinois Insurance Code. The Department of Insurance shall
22 enforce the requirements of this Section.

23 Rulemaking authority to implement Public Act 95-1045, if
24 any, is conditioned on the rules being adopted in accordance

1 with all provisions of the Illinois Administrative Procedure
2 Act and all rules and procedures of the Joint Committee on
3 Administrative Rules; any purported rule not so adopted, for
4 whatever reason, is unauthorized.

5 (Source: P.A. 103-84, eff. 1-1-24; 103-91, eff. 1-1-24;
6 103-420, eff. 1-1-24; 103-445, eff. 1-1-24; 103-535, eff.
7 8-11-23; 103-551, eff. 8-11-23; 103-605, eff. 7-1-24; 103-718,
8 eff. 7-19-24; 103-751, eff. 8-2-24; 103-914, eff. 1-1-25;
9 103-918, eff. 1-1-25; 103-1024, eff. 1-1-25; 104-1, eff.
10 6-9-25; 104-42, eff. 8-1-25; 104-417, eff. 8-15-25; revised
11 10-2-25.)

12 (Text of Section after amendment by P.A. 104-27, 104-68,
13 104-73, 104-289, 104-324, and 104-379)

14 Sec. 10-22.3f. Required health benefits. Insurance
15 protection and benefits for employees shall provide the
16 post-mastectomy care benefits required to be covered by a
17 policy of accident and health insurance under Section 356t and
18 the coverage required under Sections 356g, 356g.5, 356g.5-1,
19 356m, 356q, 356u, 356u.10, 356w, 356x, 356z.4, 356z.4a,
20 356z.6, 356z.8, 356z.9, 356z.11, 356z.12, 356z.13, 356z.14,
21 356z.15, 356z.22, 356z.25, 356z.26, 356z.29, 356z.30, 356z.32,
22 356z.33, 356z.36, 356z.40, 356z.41, 356z.45, 356z.46, 356z.47,
23 356z.51, 356z.53, 356z.54, 356z.56, 356z.57, 356z.59, 356z.60,
24 356z.61, 356z.62, 356z.64, 356z.67, 356z.68, 356z.70, 356z.71,
25 356z.74, ~~and~~ 356z.77, 356z.79, ~~and~~ 356z.80, 356z.81, 356z.82,

1 356z.83, 356z.84, 356z.85, and 356z.88 of the Illinois
2 Insurance Code. Insurance policies shall comply with Section
3 356z.19 of the Illinois Insurance Code. The coverage shall
4 comply with Sections 155.22a, 355b, and 370c and Article
5 XXXIIB of the Illinois Insurance Code. The Department of
6 Insurance shall enforce the requirements of this 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. 103-84, eff. 1-1-24; 103-91, eff. 1-1-24;
14 103-420, eff. 1-1-24; 103-445, eff. 1-1-24; 103-535, eff.
15 8-11-23; 103-551, eff. 8-11-23; 103-605, eff. 7-1-24; 103-718,
16 eff. 7-19-24; 103-751, eff. 8-2-24; 103-914, eff. 1-1-25;
17 103-918, eff. 1-1-25; 103-1024, eff. 1-1-25; 104-1, eff.
18 6-9-25; 104-27, eff. 1-1-26; 104-42, eff. 8-1-25; 104-68, eff.
19 1-1-26; 104-73, eff. 1-1-26; 104-289, eff. 1-1-26; 104-324,
20 eff. 1-1-26; 104-379, eff. 1-1-26; 104-417, eff. 8-15-25;
21 revised 10-2-25.)

22 Section 25. The Illinois Insurance Code is amended by
23 adding Section 356z.88 as follows:

24 (215 ILCS 5/356z.88 new)

1 Sec. 356z.88. Coronary calcium scan and scoring.

2 (a) As used in this Section, "coronary calcium scan and
3 scoring" means the use of computed tomography equipment to
4 produce pictures of the coronary arteries to locate blockages
5 or narrowing.

6 (b) An individual or group policy of accident and health
7 insurance that is amended, delivered, issued, or renewed on or
8 after January 1, 2028 shall cover a medically necessary
9 coronary calcium scan and scoring every 36 months for
10 individuals over the age of 40.

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

13 (215 ILCS 125/5-3) (from Ch. 111 1/2, par. 1411.2)

14 (Text of Section before amendment by P.A. 103-808, 104-28,
15 104-68, 104-73, 104-98, 104-289, 104-324, and 104-379)

16 Sec. 5-3. Illinois Insurance Code provisions.

17 (a) Health Maintenance Organizations shall be subject to
18 the provisions of Sections 133, 134, 136, 137, 139, 140,
19 141.1, 141.2, 141.3, 143, 143.31, 143c, 147, 148, 149, 151,
20 152, 153, 154, 154.5, 154.6, 154.7, 154.8, 155.04, 155.22a,
21 155.49, 352c, 355.2, 355.3, 355.6, 355b, 355c, 356f, 356g.5-1,
22 356m, 356q, 356u.10, 356v, 356w, 356x, 356z.2, 356z.3a,
23 356z.4, 356z.4a, 356z.5, 356z.6, 356z.8, 356z.9, 356z.10,
24 356z.11, 356z.12, 356z.13, 356z.14, 356z.15, 356z.17, 356z.18,

1 356z.19, 356z.20, 356z.21, 356z.22, 356z.23, 356z.24, 356z.25,
2 356z.26, 356z.28, 356z.29, 356z.30, 356z.31, 356z.32, 356z.33,
3 356z.34, 356z.35, 356z.36, 356z.37, 356z.38, 356z.39, 356z.40,
4 356z.40a, 356z.41, 356z.44, 356z.45, 356z.46, 356z.47,
5 356z.48, 356z.49, 356z.50, 356z.51, 356z.53, 356z.54, 356z.55,
6 356z.56, 356z.57, 356z.58, 356z.59, 356z.60, 356z.61, 356z.62,
7 356z.63, 356z.64, 356z.65, 356z.66, 356z.67, 356z.68, 356z.69,
8 356z.70, 356z.71, 356z.72, 356z.73, 356z.74, 356z.75, 356z.76,
9 356z.77, 356z.78, 356z.79, 356z.81, 356z.88, ~~356z.80,~~ 364,
10 364.01, 364.3, 367.2, 367.2-5, 367i, 368a, 368b, 368c, 368d,
11 368e, 370c, 370c.1, 401, 401.1, 402, 403, 403A, 408, 408.2,
12 409, 412, 444, and 444.1, paragraph (c) of subsection (2) of
13 Section 367, and Articles IIA, VIII 1/2, XII, XII 1/2, XIII,
14 XIII 1/2, XXV, XXVI, and XXXIIB of the Illinois Insurance
15 Code. Section 356z.81 ~~365z.80~~ of the Illinois Insurance Code
16 is not applicable to health care plans under contract with the
17 Department of Healthcare and Family Services.

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

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

24 (2) a corporation organized under the laws of this
25 State; or

26 (3) a corporation organized under the laws of another

1 state, 30% or more of the enrollees of which are residents
2 of this State, except a corporation subject to
3 substantially the same requirements in its state of
4 organization as is a "domestic company" under Article VIII
5 1/2 of the Illinois Insurance Code.

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

9 (1) the Director shall give primary consideration to
10 the continuation of benefits to enrollees and the
11 financial conditions of the acquired Health Maintenance
12 Organization after the merger, consolidation, or other
13 acquisition of control takes effect;

14 (2) (i) the criteria specified in subsection (1) (b) of
15 Section 131.8 of the Illinois Insurance Code shall not
16 apply and (ii) the Director, in making his determination
17 with respect to the merger, consolidation, or other
18 acquisition of control, need not take into account the
19 effect on competition of the merger, consolidation, or
20 other acquisition of control;

21 (3) the Director shall have the power to require the
22 following information:

23 (A) certification by an independent actuary of the
24 adequacy of the reserves of the Health Maintenance
25 Organization sought to be acquired;

26 (B) pro forma financial statements reflecting the

1 combined balance sheets of the acquiring company and
2 the Health Maintenance Organization sought to be
3 acquired as of the end of the preceding year and as of
4 a date 90 days prior to the acquisition, as well as pro
5 forma financial statements reflecting projected
6 combined operation for a period of 2 years;

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

11 (D) such other information as the Director shall
12 require.

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

19 (e) In considering any management contract or service
20 agreement subject to Section 141.1 of the Illinois Insurance
21 Code, the Director (i) shall, in addition to the criteria
22 specified in Section 141.2 of the Illinois Insurance Code,
23 take into account the effect of the management contract or
24 service agreement on the continuation of benefits to enrollees
25 and the financial condition of the health maintenance
26 organization to be managed or serviced, and (ii) need not take

1 into account the effect of the management contract or service
2 agreement on competition.

3 (f) Except for small employer groups as defined in the
4 Small Employer Rating, Renewability and Portability Health
5 Insurance Act and except for medicare supplement policies as
6 defined in Section 363 of the Illinois Insurance Code, a
7 Health Maintenance Organization may by contract agree with a
8 group or other enrollment unit to effect refunds or charge
9 additional premiums under the following terms and conditions:

10 (i) the amount of, and other terms and conditions with
11 respect to, the refund or additional premium are set forth
12 in the group or enrollment unit contract agreed in advance
13 of the period for which a refund is to be paid or
14 additional premium is to be charged (which period shall
15 not be less than one year); and

16 (ii) the amount of the refund or additional premium
17 shall not exceed 20% of the Health Maintenance
18 Organization's profitable or unprofitable experience with
19 respect to the group or other enrollment unit for the
20 period (and, for purposes of a refund or additional
21 premium, the profitable or unprofitable experience shall
22 be calculated taking into account a pro rata share of the
23 Health Maintenance Organization's administrative and
24 marketing expenses, but shall not include any refund to be
25 made or additional premium to be paid pursuant to this
26 subsection (f)). The Health Maintenance Organization and

1 the group or enrollment unit may agree that the profitable
2 or unprofitable experience may be calculated taking into
3 account the refund period and the immediately preceding 2
4 plan years.

5 The Health Maintenance Organization shall include a
6 statement in the evidence of coverage issued to each enrollee
7 describing the possibility of a refund or additional premium,
8 and upon request of any group or enrollment unit, provide to
9 the group or enrollment unit a description of the method used
10 to calculate (1) the Health Maintenance Organization's
11 profitable experience with respect to the group or enrollment
12 unit and the resulting refund to the group or enrollment unit
13 or (2) the Health Maintenance Organization's unprofitable
14 experience with respect to the group or enrollment unit and
15 the resulting additional premium to be paid by the group or
16 enrollment unit.

17 In no event shall the Illinois Health Maintenance
18 Organization Guaranty Association be liable to pay any
19 contractual obligation of an insolvent organization to pay any
20 refund authorized under this Section.

21 (g) Rulemaking authority to implement Public Act 95-1045,
22 if any, is conditioned on the rules being adopted in
23 accordance with all provisions of the Illinois Administrative
24 Procedure Act and all rules and procedures of the Joint
25 Committee on Administrative Rules; any purported rule not so
26 adopted, for whatever reason, is unauthorized.

1 (Source: P.A. 103-84, eff. 1-1-24; 103-91, eff. 1-1-24;
2 103-123, eff. 1-1-24; 103-154, eff. 6-30-23; 103-420, eff.
3 1-1-24; 103-426, eff. 8-4-23; 103-445, eff. 1-1-24; 103-551,
4 eff. 8-11-23; 103-605, eff. 7-1-24; 103-618, eff. 1-1-25;
5 103-649, eff. 1-1-25; 103-656, eff. 1-1-25; 103-700, eff.
6 1-1-25; 103-718, eff. 7-19-24; 103-751, eff. 8-2-24; 103-753,
7 eff. 8-2-24; 103-758, eff. 1-1-25; 103-777, eff. 8-2-24;
8 103-914, eff. 1-1-25; 103-918, eff. 1-1-25; 103-1024, eff.
9 1-1-25; 104-1, eff. 6-9-25; 104-42, eff. 8-1-25; 104-334, eff.
10 8-15-25; 104-417, eff. 8-15-25; revised 10-3-25.)

11 (Text of Section after amendment by P.A. 103-808, 104-28,
12 104-68, 104-73, 104-98, 104-289, 104-324, and 104-379)

13 Sec. 5-3. Illinois Insurance Code provisions.

14 (a) Health Maintenance Organizations shall be subject to
15 the provisions of Sections 133, 134, 136, 137, 139, 140,
16 141.1, 141.2, 141.3, 143, 143.31, 143c, 147, 148, 149, 151,
17 152, 153, 154, 154.5, 154.6, 154.7, 154.8, 155.04, 155.22a,
18 155.49, 352c, 355.2, 355.3, 355.6, 355.7, 355b, 355c, 356f,
19 356g, 356g.5-1, 356m, 356q, 356u.10, 356v, 356w, 356x, 356z.2,
20 356z.3a, 356z.4, 356z.4a, 356z.5, 356z.6, 356z.8, 356z.9,
21 356z.10, 356z.11, 356z.12, 356z.13, 356z.14, 356z.15, 356z.17,
22 356z.18, 356z.19, 356z.20, 356z.21, 356z.22, 356z.23, 356z.24,
23 356z.25, 356z.26, 356z.28, 356z.29, 356z.30, 356z.31, 356z.32,
24 356z.33, 356z.34, 356z.35, 356z.36, 356z.37, 356z.38, 356z.39,
25 356z.40, 356z.40a, 356z.41, 356z.44, 356z.45, 356z.46,

1 356z.47, 356z.48, 356z.49, 356z.50, 356z.51, 356z.53, 356z.54,
2 356z.55, 356z.56, 356z.57, 356z.58, 356z.59, 356z.60, 356z.61,
3 356z.62, 356z.63, 356z.64, 356z.65, 356z.66, 356z.67, 356z.68,
4 356z.69, 356z.70, 356z.71, 356z.72, 356z.73, 356z.74, 356z.75,
5 356z.76, 356z.77, 356z.78, 356z.79, 356z.80, 356z.81, 356z.82,
6 356z.83, 356z.84, 356z.85, 356z.88, 364, 364.01, 364.3, 367.2,
7 367.2-5, 367i, 368a, 368b, 368c, 368d, 368e, 370a, 370c,
8 370c.1, 401, 401.1, 402, 403, 403A, 408, 408.2, 409, 412, 444,
9 and 444.1, paragraph (c) of subsection (2) of Section 367, and
10 Articles IIA, VIII 1/2, XII, XII 1/2, XIII, XIII 1/2, XXV,
11 XXVI, and XXXIIB of the Illinois Insurance Code.

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

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

18 (2) a corporation organized under the laws of this
19 State; or

20 (3) a corporation organized under the laws of another
21 state, 30% or more of the enrollees of which are residents
22 of this State, except a corporation subject to
23 substantially the same requirements in its state of
24 organization as is a "domestic company" under Article VIII
25 1/2 of the Illinois Insurance Code.

26 (c) In considering the merger, consolidation, or other

1 acquisition of control of a Health Maintenance Organization
2 pursuant to Article VIII 1/2 of the Illinois Insurance Code,

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

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

15 (3) the Director shall have the power to require the
16 following information:

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

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

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

5 (D) such other information as the Director shall
6 require.

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

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

23 (f) Except for small employer groups as defined in the
24 Small Employer Rating, Renewability and Portability Health
25 Insurance Act and except for medicare supplement policies as
26 defined in Section 363 of the Illinois Insurance Code, a

1 Health Maintenance Organization may by contract agree with a
2 group or other enrollment unit to effect refunds or charge
3 additional premiums under the following terms and conditions:

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

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

25 The Health Maintenance Organization shall include a
26 statement in the evidence of coverage issued to each enrollee

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

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

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

21 (Source: P.A. 103-84, eff. 1-1-24; 103-91, eff. 1-1-24;
22 103-123, eff. 1-1-24; 103-154, eff. 6-30-23; 103-420, eff.
23 1-1-24; 103-426, eff. 8-4-23; 103-445, eff. 1-1-24; 103-551,
24 eff. 8-11-23; 103-605, eff. 7-1-24; 103-618, eff. 1-1-25;
25 103-649, eff. 1-1-25; 103-656, eff. 1-1-25; 103-700, eff.
26 1-1-25; 103-718, eff. 7-19-24; 103-751, eff. 8-2-24; 103-753,

1 eff. 8-2-24; 103-758, eff. 1-1-25; 103-777, eff. 8-2-24;
2 103-808, eff. 1-1-26; 103-914, eff. 1-1-25; 103-918, eff.
3 1-1-25; 103-1024, eff. 1-1-25; 104-1, eff. 6-9-25; 104-28,
4 eff. 1-1-26; 104-42, eff. 8-1-25; 104-68, eff. 1-1-26; 104-73,
5 eff. 1-1-26; 104-98, eff. 1-1-26; 104-289, eff. 1-1-26;
6 104-324, eff. 1-1-26; 104-334, eff. 8-15-25; 104-379, eff.
7 1-1-26; 104-417, eff. 8-15-25; revised 10-3-25.)

8 Section 35. The Limited Health Service Organization Act is
9 amended by changing Section 4003 as follows:

10 (215 ILCS 130/4003) (from Ch. 73, par. 1504-3)

11 (Text of Section before amendment by P.A. 104-73, 104-98,
12 104-289, 104-324, and 104-379)

13 Sec. 4003. Illinois Insurance Code provisions. Limited
14 health service organizations shall be subject to the
15 provisions of Sections 133, 134, 136, 137, 139, 140, 141.1,
16 141.2, 141.3, 143, 143.31, 143c, 147, 148, 149, 151, 152, 153,
17 154, 154.5, 154.6, 154.7, 154.8, 155.04, 155.37, 155.49, 352c,
18 355.2, 355.3, 355b, 355d, 356m, 356q, 356v, 356z.4, 356z.4a,
19 356z.10, 356z.21, 356z.22, 356z.25, 356z.26, 356z.29, 356z.32,
20 356z.33, 356z.41, 356z.46, 356z.47, 356z.51, 356z.53, 356z.54,
21 356z.57, 356z.59, 356z.61, 356z.64, 356z.67, 356z.68, 356z.71,
22 356z.73, 356z.74, 356z.75, 356z.79, 356z.81, 356z.88, ~~356z.80,~~
23 364.3, 368a, 401, 401.1, 402, 403, 403A, 408, 408.2, 409, 412,
24 444, and 444.1 and Articles IIA, VIII 1/2, XII, XII 1/2, XIII,

1 XIII 1/2, XXV, XXVI, and XXXIIB of the Illinois Insurance
2 Code. Nothing in this Section shall require a limited health
3 care plan to cover any service that is not a limited health
4 service. For purposes of the Illinois Insurance Code, except
5 for Sections 444 and 444.1 and Articles XIII and XIII 1/2,
6 limited health service organizations in the following
7 categories are deemed to be domestic companies:

8 (1) a corporation under the laws of this State; or

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

15 (Source: P.A. 103-84, eff. 1-1-24; 103-91, eff. 1-1-24;
16 103-420, eff. 1-1-24; 103-426, eff. 8-4-23; 103-445, eff.
17 1-1-24; 103-605, eff. 7-1-24; 103-649, eff. 1-1-25; 103-656,
18 eff. 1-1-25; 103-700, eff. 1-1-25; 103-718, eff. 7-19-24;
19 103-751, eff. 8-2-24; 103-758, eff. 1-1-25; 103-832, eff.
20 1-1-25; 103-1024, eff. 1-1-25; 104-1, eff. 6-9-25; 104-42,
21 eff. 8-1-25; 104-334, eff. 8-15-25; 104-417, eff. 8-15-25;
22 revised 10-3-25.)

23 (Text of Section after amendment by P.A. 104-73, 104-98,
24 104-289, 104-324, and 104-379)

25 Sec. 4003. Illinois Insurance Code provisions. Limited

1 health service organizations shall be subject to the
2 provisions of Sections 133, 134, 136, 137, 139, 140, 141.1,
3 141.2, 141.3, 143, 143.31, 143c, 147, 148, 149, 151, 152, 153,
4 154, 154.5, 154.6, 154.7, 154.8, 155.04, 155.37, 155.49, 352c,
5 355.2, 355.3, 355b, 355d, 356m, 356q, 356v, 356z.4, 356z.4a,
6 356z.10, 356z.21, 356z.22, 356z.25, 356z.26, 356z.29, 356z.32,
7 356z.33, 356z.41, 356z.46, 356z.47, 356z.51, 356z.53, 356z.54,
8 356z.57, 356z.59, 356z.61, 356z.64, 356z.67, 356z.68, 356z.71,
9 356z.73, 356z.74, 356z.75, 356z.79, 356z.80, 356z.81, 356z.83,
10 356z.84, 356z.85, 356z.88, 364.3, 368a, 370a, 401, 401.1, 402,
11 403, 403A, 408, 408.2, 409, 412, 444, and 444.1 and Articles
12 IIA, VIII 1/2, XII, XII 1/2, XIII, XIII 1/2, XXV, XXVI, and
13 XXXIIB of the Illinois Insurance Code. Nothing in this Section
14 shall require a limited health care plan to cover any service
15 that is not a limited health service. For purposes of the
16 Illinois Insurance Code, except for Sections 444 and 444.1 and
17 Articles XIII and XIII 1/2, limited health service
18 organizations in the following categories are deemed to be
19 domestic companies:

20 (1) a corporation under the laws of this State; or

21 (2) a corporation organized under the laws of another
22 state, 30% or more of the enrollees of which are residents
23 of this State, except a corporation subject to
24 substantially the same requirements in its state of
25 organization as is a domestic company under Article VIII
26 1/2 of the Illinois Insurance Code.

1 (Source: P.A. 103-84, eff. 1-1-24; 103-91, eff. 1-1-24;
2 103-420, eff. 1-1-24; 103-426, eff. 8-4-23; 103-445, eff.
3 1-1-24; 103-605, eff. 7-1-24; 103-649, eff. 1-1-25; 103-656,
4 eff. 1-1-25; 103-700, eff. 1-1-25; 103-718, eff. 7-19-24;
5 103-751, eff. 8-2-24; 103-758, eff. 1-1-25; 103-832, eff.
6 1-1-25; 103-1024, eff. 1-1-25; 104-1, eff. 6-9-25; 104-42,
7 eff. 8-1-25; 104-73, eff. 1-1-26; 104-98, eff. 1-1-26;
8 104-289, eff. 1-1-26; 104-324, eff. 1-1-26; 104-334, eff.
9 8-15-25; 104-379, eff. 1-1-26; 104-417, eff. 8-15-25; revised
10 10-3-25.)

11 Section 40. The Voluntary Health Services Plans Act is
12 amended by changing Section 10 as follows:

13 (215 ILCS 165/10) (from Ch. 32, par. 604)

14 (Text of Section before amendment by P.A. 104-28, 104-73,
15 104-98, 104-289, 104-324, and 104-379)

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, 136, 139, 140,
20 143, 143.31, 143c, 149, 155.22a, 155.37, 354, 355.2, 355.3,
21 355b, 355d, 356g, 356g.5, 356g.5-1, 356m, 356q, 356r, 356t,
22 356u, 356u.10, 356v, 356w, 356x, 356y, 356z.1, 356z.2,
23 356z.3a, 356z.4, 356z.4a, 356z.5, 356z.6, 356z.8, 356z.9,
24 356z.10, 356z.11, 356z.12, 356z.13, 356z.14, 356z.15, 356z.18,

1 356z.19, 356z.21, 356z.22, 356z.25, 356z.26, 356z.29, 356z.30,
2 356z.32, 356z.32a, 356z.33, 356z.40, 356z.41, 356z.46,
3 356z.47, 356z.51, 356z.53, 356z.54, 356z.56, 356z.57, 356z.59,
4 356z.60, 356z.61, 356z.62, 356z.64, 356z.67, 356z.68, 356z.71,
5 356z.72, 356z.74, 356z.75, 356z.77, 356z.79, 356z.81, 356z.88,
6 ~~356z.80,~~ 364.01, 364.3, 367.2, 368a, 401, 401.1, 402, 403,
7 403A, 408, 408.2, and 412, and paragraphs (7) and (15) of
8 Section 367 of the Illinois Insurance Code.

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

15 (Source: P.A. 103-84, eff. 1-1-24; 103-91, eff. 1-1-24;
16 103-420, eff. 1-1-24; 103-445, eff. 1-1-24; 103-551, eff.
17 8-11-23; 103-605, eff. 7-1-24; 103-656, eff. 1-1-25; 103-718,
18 eff. 7-19-24; 103-751, eff. 8-2-24; 103-753, eff. 8-2-24;
19 103-758, eff. 1-1-25; 103-832, eff. 1-1-25; 103-914, eff.
20 1-1-25; 103-918, eff. 1-1-25; 103-1024, eff. 1-1-25; 104-1,
21 eff. 6-9-25; 104-42, eff. 8-1-25; 104-417, eff. 8-15-25;
22 revised 10-3-25.)

23 (Text of Section after amendment by P.A. 104-28, 104-73,
24 104-98, 104-289, 104-324, and 104-379)

25 Sec. 10. Application of Illinois Insurance Code

1 provisions. Health services plan corporations and all persons
2 interested therein or dealing therewith shall be subject to
3 the provisions of Articles IIA and XII 1/2 and Sections 3.1,
4 133, 136, 139, 140, 143, 143.31, 143c, 149, 155.22a, 155.37,
5 354, 355.2, 355.3, 355.7, 355b, 355d, 356g, 356g.5, 356g.5-1,
6 356m, 356q, 356r, 356t, 356u, 356u.10, 356v, 356w, 356x, 356y,
7 356z.1, 356z.2, 356z.3a, 356z.4, 356z.4a, 356z.5, 356z.6,
8 356z.8, 356z.9, 356z.10, 356z.11, 356z.12, 356z.13, 356z.14,
9 356z.15, 356z.18, 356z.19, 356z.21, 356z.22, 356z.25, 356z.26,
10 356z.29, 356z.30, 356z.32, 356z.32a, 356z.33, 356z.40,
11 356z.41, 356z.46, 356z.47, 356z.51, 356z.53, 356z.54, 356z.56,
12 356z.57, 356z.59, 356z.60, 356z.61, 356z.62, 356z.64, 356z.67,
13 356z.68, 356z.71, 356z.72, 356z.74, 356z.75, 356z.77, 356z.79,
14 356z.80, 356z.81, 356z.83, 356z.84, 356z.85, 356z.88, 364.01,
15 364.3, 367.2, 368a, 370a, 401, 401.1, 402, 403, 403A, 408,
16 408.2, and 412, and paragraphs (7) and (15) of Section 367 of
17 the Illinois Insurance Code.

18 Rulemaking authority to implement Public Act 95-1045, if
19 any, is conditioned on the rules being adopted in accordance
20 with all provisions of the Illinois Administrative Procedure
21 Act and all rules and procedures of the Joint Committee on
22 Administrative Rules; any purported rule not so adopted, for
23 whatever reason, is unauthorized.

24 (Source: P.A. 103-84, eff. 1-1-24; 103-91, eff. 1-1-24;
25 103-420, eff. 1-1-24; 103-445, eff. 1-1-24; 103-551, eff.
26 8-11-23; 103-605, eff. 7-1-24; 103-656, eff. 1-1-25; 103-718,

1 eff. 7-19-24; 103-751, eff. 8-2-24; 103-753, eff. 8-2-24;
2 103-758, eff. 1-1-25; 103-832, eff. 1-1-25; 103-914, eff.
3 1-1-25; 103-918, eff. 1-1-25; 103-1024, eff. 1-1-25; 104-1,
4 eff. 6-9-25; 104-28, eff. 1-1-26; 104-42, eff. 8-1-25; 104-73,
5 eff. 1-1-26; 104-98, eff. 1-1-26; 104-289, eff. 1-1-26;
6 104-324, eff. 1-1-26; 104-379, eff. 1-1-26; 104-417, eff.
7 8-15-25; revised 10-3-25.)

8 Section 45. The Illinois Public Aid Code is amended by
9 changing Section 5-16.8 as follows:

10 (305 ILCS 5/5-16.8)

11 (Text of Section before amendment by P.A. 104-73, 104-324,
12 and 104-379)

13 Sec. 5-16.8. Required health benefits. The medical
14 assistance program shall (i) provide the post-mastectomy care
15 benefits required to be covered by a policy of accident and
16 health insurance under Section 356t and the coverage required
17 under Sections 356g.5, 356q, 356u, 356w, 356x, 356z.6,
18 356z.26, 356z.29, 356z.32, 356z.33, 356z.34, 356z.35, 356z.46,
19 356z.47, 356z.51, 356z.53, 356z.59, 356z.60, 356z.61, 356z.64,
20 356z.67, 356z.71, ~~and~~ 356z.75, and 356z.88 of the Illinois
21 Insurance Code, (ii) be subject to the provisions of Sections
22 356z.19, 356z.44, 356z.49, 364.01, 370c, and 370c.1 of the
23 Illinois Insurance Code, and (iii) be subject to the
24 provisions of subsection (d-5) of Section 10 of the Network

1 Adequacy and Transparency Act.

2 The Department, by rule, shall adopt a model similar to
3 the requirements of Section 356z.39 of the Illinois Insurance
4 Code.

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

10 To ensure full access to the benefits set forth in this
11 Section, on and after January 1, 2016, the Department shall
12 ensure that provider and hospital reimbursement for
13 post-mastectomy care benefits required under this Section are
14 no lower than the Medicare reimbursement rate.

15 (Source: P.A. 103-84, eff. 1-1-24; 103-91, eff. 1-1-24;
16 103-420, eff. 1-1-24; 103-605, eff. 7-1-24; 103-703, eff.
17 1-1-25; 103-758, eff. 1-1-25; 103-1024, eff. 1-1-25; 104-417,
18 eff. 8-15-25.)

19 (Text of Section after amendment by P.A. 104-73, 104-324,
20 and 104-379)

21 Sec. 5-16.8. Required health benefits. The medical
22 assistance program shall (i) provide the post-mastectomy care
23 benefits required to be covered by a policy of accident and
24 health insurance under Section 356t and the coverage required
25 under Sections 356g.5, 356q, 356u, 356w, 356x, 356z.6,

1 356z.26, 356z.29, 356z.32, 356z.33, 356z.34, 356z.35, 356z.46,
2 356z.47, 356z.51, 356z.53, 356z.59, 356z.60, 356z.61, 356z.64,
3 356z.67, 356z.71, ~~and~~ 356z.75, ~~and~~ 356z.80, 356z.84, 356z.85,
4 and 356z.88 of the Illinois Insurance Code, (ii) be subject to
5 the provisions of Sections 356z.19, 356z.44, 356z.49, 364.01,
6 370c, and 370c.1 of the Illinois Insurance Code, and (iii) be
7 subject to the provisions of subsection (d-5) of Section 10 of
8 the Network Adequacy and Transparency Act.

9 The Department, by rule, shall adopt a model similar to
10 the requirements of Section 356z.39 of the Illinois Insurance
11 Code.

12 On and after July 1, 2012, the Department shall reduce any
13 rate of reimbursement for services or other payments or alter
14 any methodologies authorized by this Code to reduce any rate
15 of reimbursement for services or other payments in accordance
16 with Section 5-5e.

17 To ensure full access to the benefits set forth in this
18 Section, on and after January 1, 2016, the Department shall
19 ensure that provider and hospital reimbursement for
20 post-mastectomy care benefits required under this Section are
21 no lower than the Medicare reimbursement rate.

22 (Source: P.A. 103-84, eff. 1-1-24; 103-91, eff. 1-1-24;
23 103-420, eff. 1-1-24; 103-605, eff. 7-1-24; 103-703, eff.
24 1-1-25; 103-758, eff. 1-1-25; 103-1024, eff. 1-1-25; 104-73,
25 eff. 1-1-26; 104-324, eff. 1-1-26; 104-379, eff. 1-1-26;
26 104-417, eff. 8-15-25; revised 10-3-25.)

1 Section 95. No acceleration or delay. Where this Act makes
2 changes in a statute that is represented in this Act by text
3 that is not yet or no longer in effect (for example, a Section
4 represented by multiple versions), the use of that text does
5 not accelerate or delay the taking effect of (i) the changes
6 made by this Act or (ii) provisions derived from any other
7 Public Act.

8 Section 99. Effective date. This Act takes effect January
9 1, 2027.