

102ND GENERAL ASSEMBLY State of Illinois 2021 and 2022 SB3021

Introduced 1/5/2022, by Sen. Adriane Johnson

SYNOPSIS AS INTRODUCED:

5 ILCS 377/10-5 5 ILCS 377/10-15

Amends the State Employee Health Savings Account Law. Provides that funds held in a health savings account may be used to cover expenses of the eligible individual or his or her dependents to pay for diapers or diaper services. Makes conforming changes.

LRB102 23037 RJF 32191 b

1 AN ACT concerning government.

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

- Section 5. The State Employee Health Savings Account Law is amended by changing Sections 10-5 and 10-15 as follows:
- 6 (5 ILCS 377/10-5)

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- 7 Sec. 10-5. Definitions. As used in this Law:
- 8 (a) "Deductible" means the total deductible of a high 9 deductible health plan for an eligible individual and all the 10 dependents of that eligible individual for a calendar year.
 - (b) "Dependent" means a dependent as defined in Section 3 of the State Employees Group Insurance Act of 1971, provided that the dependent meets the definition of "dependent" under Section 152 of the Internal Revenue Code of 1986, determined without regard to subdivisions (b)(1), (b)(2), and (d)(1)(B) of that Section.
 - (c) "Eligible individual" means an employee, as defined in Section 3 of the State Employees Group Insurance Act of 1971, who contributes to health savings accounts on the employees' behalf, who:
- 21 (1) is covered by a high deductible health plan 22 individually or with dependents;
- 23 (2) is not covered under any health plan that is not a

1	high deductible health plan, except for:
2	(i) coverage for accidents;
3	(ii) workers' compensation insurance;
4	(iii) insurance for a specified disease or
5	illness;
6	(iv) insurance paying a fixed amount per day per
7	hospitalization; and
8	<pre>(v) tort liabilities;</pre>
9	(3) establishes a health savings account or on whose
10	behalf the health savings account is established;
11	(4) is not entitled to Medicare; and
12	(5) cannot be claimed as a dependent on another
13	person's tax return.
14	(d) "Employer" means a State agency, department, or other
15	entity that employs an eligible individual.
16	(e) "Health savings account" or "account" means a trust or
17	custodial account established under a State program
18	exclusively to pay the qualified medical expenses of an
19	eligible individual, or his or her dependents, that meets all
20	of the following requirements:
21	(1) Except in the case of a rollover contribution, no
22	contribution may be accepted:
23	(A) unless it is in cash; or
24	(B) to the extent that the contribution, when
25	added to the previous contributions to the Account for
26	the calendar year, exceeds the contribution level set

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- for that year by the Internal Revenue Service.
- 2 (2) The trustee or custodian is a bank, an insurance 3 company, or another person approved by the Director of 4 Insurance.
 - (3) No part of the trust assets shall be invested in life insurance contracts.
 - (4) The assets of the account shall not be commingled with other property except as allowed for under Individual Retirement Accounts.
- 10 (5) Eligible individual's interest in the account is nonforfeitable.
- 12 (f) "Health savings account program" or "program" means a 13 program that includes all of the following:
 - (1) Participation by an eligible individual in an employer-sponsored high deductible health plan.
 - (2) The contribution into a health savings account by an eligible individual or on behalf of an employee or by his or her employer. The total annual contribution may not exceed the amount listed in sub-item (B) of item (1) of subsection (e) of this Section.
 - (g) "High deductible" means:
 - (1) In the case of self-only coverage, an annual deductible that is not less than the level set by the Internal Revenue Service and that, when added to the other annual out-of-pocket expenses required to be paid under the plan for covered benefits, does not exceed the maximum

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- 1 level set by the Internal Revenue Service; and
- 2 (2) In the case of family coverage, an annual
 3 deductible of not less than the level set by the Internal
 4 Revenue Service and that, when added to the other annual
 5 out-of-pocket expenses required to be paid under the plan
 6 for covered benefits, does not exceed the maximum level
 7 set by the Internal Revenue Service.

A plan shall not fail to be treated as a high deductible plan by reason of a failure to have a deductible for preventive care or, in the case of network plans, for having out-of-pocket expenses that exceed these limits on an annual deductible for services that are provided outside the network.

- (h) "High deductible health plan" means health coverage that provides for payments for covered benefits that exceed the high deductible.
- (i) "Qualified medical expense" means an expense paid by the eligible individual for medical care described in Section 213(d) of the Internal Revenue Code of 1986, and shall include any additional use of funds as provided under Section 10-15.
- 20 (Source: P.A. 97-142, eff. 7-14-11; 97-644, eff. 12-30-11.)
- 21 (5 ILCS 377/10-15)
- 22 Sec. 10-15. Use of funds.
- 23 (a) The trustee or custodian must use the funds held in a 24 health savings account solely (i) for the purpose of paying 25 the qualified medical expenses of the eligible individual or

- 1 his or her dependents, (ii) to purchase a health coverage
- 2 policy, certificate, or contract, or (iii) to pay for health
- 3 insurance other than a Medicare supplemental policy for those
- 4 who are Medicare eligible.
- 5 (b) Funds held in a health savings account may not be used
- 6 to cover expenses of the eligible individual or his or her
- 7 dependents that are otherwise covered, including, but not
- 8 limited to, medical expense covered under an automobile
- 9 insurance policy, worker's compensation insurance policy or
- 10 self-insured plan, or another employer-funded health coverage
- 11 policy, certificate, or contract.
- 12 (c) Funds held in a health savings account may be used to
- 13 cover expenses of the eligible individual or his or her
- dependents to pay for diapers or diaper services.
- 15 (Source: P.A. 97-142, eff. 7-14-11.)