

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. 102-768)

8 Sec. 6.11. Required health benefits; Illinois Insurance
9 Code requirements. The program of health benefits shall
10 provide the post-mastectomy care benefits required to be
11 covered by a policy of accident and health insurance under
12 Section 356t of the Illinois Insurance Code. The program of
13 health benefits shall provide the coverage required under
14 Sections 356g, 356g.5, 356g.5-1, 356m, 356q, 356u, 356w, 356x,
15 356z.2, 356z.4, 356z.4a, 356z.6, 356z.8, 356z.9, 356z.10,
16 356z.11, 356z.12, 356z.13, 356z.14, 356z.15, 356z.17, 356z.22,
17 356z.25, 356z.26, 356z.29, 356z.30a, 356z.32, 356z.33,
18 356z.36, 356z.40, 356z.41, 356z.45, 356z.46, 356z.47, 356z.51,
19 356z.53, 356z.54, 356z.56, 356z.57, 356z.59, ~~and~~ 356z.60, and
20 356z.61 of the Illinois Insurance Code. The program of health
21 benefits must comply with Sections 155.22a, 155.37, 355b,
22 356z.19, 370c, and 370c.1 and Article XXXIIB of the Illinois
23 Insurance Code. The Department of Insurance shall enforce the

1 requirements of this Section with respect to Sections 370c and
2 370c.1 of the Illinois Insurance Code; all other requirements
3 of this Section shall be enforced by the Department of Central
4 Management Services.

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. 101-13, eff. 6-12-19; 101-281, eff. 1-1-20;
12 101-393, eff. 1-1-20; 101-452, eff. 1-1-20; 101-461, eff.
13 1-1-20; 101-625, eff. 1-1-21; 102-30, eff. 1-1-22; 102-103,
14 eff. 1-1-22; 102-203, eff. 1-1-22; 102-306, eff. 1-1-22;
15 102-642, eff. 1-1-22; 102-665, eff. 10-8-21; 102-731, eff.
16 1-1-23; 102-804, eff. 1-1-23; 102-813, eff. 5-13-22; 102-816,
17 eff. 1-1-23; 102-860, eff. 1-1-23; 102-1093, eff. 1-1-23;
18 revised 12-13-22.)

19 (Text of Section after amendment by P.A. 102-768)

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, 356w, 356x,
2 356z.2, 356z.4, 356z.4a, 356z.6, 356z.8, 356z.9, 356z.10,
3 356z.11, 356z.12, 356z.13, 356z.14, 356z.15, 356z.17, 356z.22,
4 356z.25, 356z.26, 356z.29, 356z.30a, 356z.32, 356z.33,
5 356z.36, 356z.40, 356z.41, 356z.45, 356z.46, 356z.47, 356z.51,
6 356z.53, 356z.54, 356z.55, 356z.56, 356z.57, 356z.59, ~~and~~
7 356z.60, and 356z.61 of the Illinois Insurance Code. The
8 program of health benefits must comply with Sections 155.22a,
9 155.37, 355b, 356z.19, 370c, and 370c.1 and Article XXXIIB of
10 the Illinois Insurance Code. The Department of Insurance shall
11 enforce the requirements of this Section with respect to
12 Sections 370c and 370c.1 of the Illinois Insurance Code; all
13 other requirements of this Section shall be enforced by the
14 Department of Central Management Services.

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

21 (Source: P.A. 101-13, eff. 6-12-19; 101-281, eff. 1-1-20;
22 101-393, eff. 1-1-20; 101-452, eff. 1-1-20; 101-461, eff.
23 1-1-20; 101-625, eff. 1-1-21; 102-30, eff. 1-1-22; 102-103,
24 eff. 1-1-22; 102-203, eff. 1-1-22; 102-306, eff. 1-1-22;
25 102-642, eff. 1-1-22; 102-665, eff. 10-8-21; 102-731, eff.
26 1-1-23; 102-768, eff. 1-1-24; 102-804, eff. 1-1-23; 102-813,

1 eff. 5-13-22; 102-816, eff. 1-1-23; 102-860, eff. 1-1-23;
2 102-1093, eff. 1-1-23; 102-1117, eff. 1-13-23.)

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

5 (55 ILCS 5/5-1069.3)

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, 356q, 356u, 356w, 356x,
13 356z.4, 356z.4a, 356z.6, 356z.8, 356z.9, 356z.10, 356z.11,
14 356z.12, 356z.13, 356z.14, 356z.15, 356z.22, 356z.25, 356z.26,
15 356z.29, 356z.30a, 356z.32, 356z.33, 356z.36, 356z.40,
16 356z.41, 356z.45, 356z.46, 356z.47, 356z.48, 356z.51, 356z.53,
17 356z.54, 356z.56, 356z.57, 356z.59, ~~and~~ 356z.60, and 356z.61
18 of the Illinois Insurance Code. The coverage shall comply with
19 Sections 155.22a, 355b, 356z.19, and 370c of the Illinois
20 Insurance Code. The Department of Insurance shall enforce the
21 requirements of this Section. The requirement that health
22 benefits be covered as provided in this Section is an
23 exclusive power and function of the State and is a denial and
24 limitation under Article VII, Section 6, subsection (h) of the

1 Illinois Constitution. A home rule county to which this
2 Section applies must comply with every provision of this
3 Section.

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. 101-81, eff. 7-12-19; 101-281, eff. 1-1-20;
11 101-393, eff. 1-1-20; 101-461, eff. 1-1-20; 101-625, eff.
12 1-1-21; 102-30, eff. 1-1-22; 102-103, eff. 1-1-22; 102-203,
13 eff. 1-1-22; 102-306, eff. 1-1-22; 102-443, eff. 1-1-22;
14 102-642, eff. 1-1-22; 102-665, eff. 10-8-21; 102-731, eff.
15 1-1-23; 102-804, eff. 1-1-23; 102-813, eff. 5-13-22; 102-816,
16 eff. 1-1-23; 102-860, eff. 1-1-23; 102-1093, eff. 1-1-23;
17 102-1117, eff. 1-13-23.)

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

20 (65 ILCS 5/10-4-2.3)

21 Sec. 10-4-2.3. Required health benefits. If a
22 municipality, including a home rule municipality, is a
23 self-insurer for purposes of providing health insurance
24 coverage for its employees, the coverage shall include

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

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

25 (Source: P.A. 101-81, eff. 7-12-19; 101-281, eff. 1-1-20;
26 101-393, eff. 1-1-20; 101-461, eff. 1-1-20; 101-625, eff.

1 1-1-21; 102-30, eff. 1-1-22; 102-103, eff. 1-1-22; 102-203,
2 eff. 1-1-22; 102-306, eff. 1-1-22; 102-443, eff. 1-1-22;
3 102-642, eff. 1-1-22; 102-665, eff. 10-8-21; 102-731, eff.
4 1-1-23; 102-804, eff. 1-1-23; 102-813, eff. 5-13-22; 102-816,
5 eff. 1-1-23; 102-860, eff. 1-1-23; 102-1093, eff. 1-1-23;
6 102-1117, eff. 1-13-23.)

7 Section 20. The School Code is amended by changing Section
8 10-22.3f as follows:

9 (105 ILCS 5/10-22.3f)

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

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

7 (Source: P.A. 101-81, eff. 7-12-19; 101-281, eff. 1-1-20;
8 101-393, eff. 1-1-20; 101-461, eff. 1-1-20; 101-625, eff.
9 1-1-21; 102-30, eff. 1-1-22; 102-103, eff. 1-1-22; 102-203,
10 eff. 1-1-22; 102-306, eff. 1-1-22; 102-642, eff. 1-1-22;
11 102-665, eff. 10-8-21; 102-731, eff. 1-1-23; 102-804, eff.
12 1-1-23; 102-813, eff. 5-13-22; 102-816, eff. 1-1-23; 102-860,
13 eff. 1-1-23; 102-1093, eff. 1-1-23; 102-1117, eff. 1-13-23.)

14 Section 25. The Illinois Insurance Code is amended by
15 adding Section 356z.61 as follows:

16 (215 ILCS 5/356z.61 new)

17 Sec. 356z.61. Coverage of prescription estrogen.

18 (a) A group or individual policy of accident and health
19 insurance or a managed care plan that is amended, delivered,
20 issued, or renewed on or after January 1, 2025 and that
21 provides coverage for prescription drugs shall include
22 coverage for one or more therapeutic equivalent versions of
23 vaginal estrogen in its formulary.

24 (b) If a particular vaginal estrogen product or its

1 therapeutic equivalent version approved by the United States
2 Food and Drug Administration is determined to be medically
3 necessary, the issuer must cover that service or item pursuant
4 to the cost-sharing requirement contained in subsection (c).

5 (c) A policy subject to this Section shall not impose a
6 deductible, copayment, or any other cost sharing requirement
7 that exceeds any deductible, coinsurance, copayment, or any
8 other cost-sharing requirement imposed on any prescription
9 drug authorized for the treatment of erectile dysfunction
10 covered by the policy; except that this subsection does not
11 apply to coverage of vaginal estrogen to the extent such
12 coverage would disqualify a high-deductible health plan from
13 eligibility for a health savings account pursuant to Section
14 223 of the Internal Revenue Code.

15 (d) As used in this Section, "therapeutic equivalent
16 version" has the meaning given to that term in paragraph (2) of
17 subsection (a) of Section 356z.4.

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

20 (215 ILCS 125/5-3) (from Ch. 111 1/2, par. 1411.2)

21 Sec. 5-3. Insurance Code provisions.

22 (a) Health Maintenance Organizations shall be subject to
23 the provisions of Sections 133, 134, 136, 137, 139, 140,
24 141.1, 141.2, 141.3, 143, 143c, 147, 148, 149, 151, 152, 153,

1 154, 154.5, 154.6, 154.7, 154.8, 155.04, 155.22a, 355.2,
2 355.3, 355b, 355c, 356g.5-1, 356m, 356q, 356v, 356w, 356x,
3 356y, 356z.2, 356z.3a, 356z.4, 356z.4a, 356z.5, 356z.6,
4 356z.8, 356z.9, 356z.10, 356z.11, 356z.12, 356z.13, 356z.14,
5 356z.15, 356z.17, 356z.18, 356z.19, 356z.21, 356z.22, 356z.25,
6 356z.26, 356z.29, 356z.30, 356z.30a, 356z.32, 356z.33,
7 356z.35, 356z.36, 356z.40, 356z.41, 356z.46, 356z.47, 356z.48,
8 356z.50, 356z.51, 356z.53 ~~256z.53~~, 356z.54, 356z.56, 356z.57,
9 356z.59, 356z.60, 356z.61, 364, 364.01, 364.3, 367.2, 367.2-5,
10 367i, 368a, 368b, 368c, 368d, 368e, 370c, 370c.1, 401, 401.1,
11 402, 403, 403A, 408, 408.2, 409, 412, 444, and 444.1,
12 paragraph (c) of subsection (2) of Section 367, and Articles
13 IIA, VIII 1/2, XII, XII 1/2, XIII, XIII 1/2, XXV, XXVI, and
14 XXXIIB of the Illinois Insurance Code.

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

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

21 (2) a corporation organized under the laws of this
22 State; or

23 (3) a corporation organized under the laws of another
24 state, 30% or more of the enrollees of which are residents
25 of this State, except a corporation subject to
26 substantially the same requirements in its state of

1 organization as is a "domestic company" under Article VIII
2 1/2 of the Illinois Insurance Code.

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

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

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

18 (3) the Director shall have the power to require the
19 following information:

20 (A) certification by an independent actuary of the
21 adequacy of the reserves of the Health Maintenance
22 Organization sought to be acquired;

23 (B) pro forma financial statements reflecting the
24 combined balance sheets of the acquiring company and
25 the Health Maintenance Organization sought to be
26 acquired as of the end of the preceding year and as of

1 a date 90 days prior to the acquisition, as well as pro
2 forma financial statements reflecting projected
3 combined operation for a period of 2 years;

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

8 (D) such other information as the Director shall
9 require.

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

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

26 (f) Except for small employer groups as defined in the

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

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

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

1 plan years.

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

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

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

24 (Source: P.A. 101-13, eff. 6-12-19; 101-81, eff. 7-12-19;
25 101-281, eff. 1-1-20; 101-371, eff. 1-1-20; 101-393, eff.
26 1-1-20; 101-452, eff. 1-1-20; 101-461, eff. 1-1-20; 101-625,

1 eff. 1-1-21; 102-30, eff. 1-1-22; 102-34, eff. 6-25-21;
2 102-203, eff. 1-1-22; 102-306, eff. 1-1-22; 102-443, eff.
3 1-1-22; 102-589, eff. 1-1-22; 102-642, eff. 1-1-22; 102-665,
4 eff. 10-8-21; 102-731, eff. 1-1-23; 102-775, eff. 5-13-22;
5 102-804, eff. 1-1-23; 102-813, eff. 5-13-22; 102-816, eff.
6 1-1-23; 102-860, eff. 1-1-23; 102-901, eff. 7-1-22; 102-1093,
7 eff. 1-1-23; 102-1117, eff. 1-13-23; revised 1-22-23.)

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 Sec. 4003. Illinois Insurance Code provisions. Limited
12 health service organizations shall be subject to the
13 provisions of Sections 133, 134, 136, 137, 139, 140, 141.1,
14 141.2, 141.3, 143, 143c, 147, 148, 149, 151, 152, 153, 154,
15 154.5, 154.6, 154.7, 154.8, 155.04, 155.37, 355.2, 355.3,
16 355b, 356q, 356v, 356z.4, 356z.4a, 356z.10, 356z.21, 356z.22,
17 356z.25, 356z.26, 356z.29, 356z.30a, 356z.32, 356z.33,
18 356z.41, 356z.46, 356z.47, 356z.51, 356z.53, 356z.54, 356z.57,
19 356z.59, 356z.61, 364.3, 368a, 401, 401.1, 402, 403, 403A,
20 408, 408.2, 409, 412, 444, and 444.1 and Articles IIA, VIII
21 1/2, XII, XII 1/2, XIII, XIII 1/2, XXV, and XXVI of the
22 Illinois Insurance Code. Nothing in this Section shall require
23 a limited health care plan to cover any service that is not a
24 limited health service. For purposes of the Illinois Insurance

1 Code, except for Sections 444 and 444.1 and Articles XIII and
2 XIII 1/2, limited health service organizations in the
3 following categories are deemed to be domestic companies:

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

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

11 (Source: P.A. 101-81, eff. 7-12-19; 101-281, eff. 1-1-20;
12 101-393, eff. 1-1-20; 101-625, eff. 1-1-21; 102-30, eff.
13 1-1-22; 102-203, eff. 1-1-22; 102-306, eff. 1-1-22; 102-642,
14 eff. 1-1-22; 102-731, eff. 1-1-23; 102-775, eff. 5-13-22;
15 102-813, eff. 5-13-22; 102-816, eff. 1-1-23; 102-860, eff.
16 1-1-23; 102-1093, eff. 1-1-23; 102-1117, eff. 1-13-23.)

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

19 (215 ILCS 165/10) (from Ch. 32, par. 604)

20 Sec. 10. Application of Insurance Code provisions. Health
21 services plan corporations and all persons interested therein
22 or dealing therewith shall be subject to the provisions of
23 Articles IIA and XII 1/2 and Sections 3.1, 133, 136, 139, 140,
24 143, 143c, 149, 155.22a, 155.37, 354, 355.2, 355.3, 355b,

1 356g, 356g.5, 356g.5-1, 356q, 356r, 356t, 356u, 356v, 356w,
2 356x, 356y, 356z.1, 356z.2, 356z.3a, 356z.4, 356z.4a, 356z.5,
3 356z.6, 356z.8, 356z.9, 356z.10, 356z.11, 356z.12, 356z.13,
4 356z.14, 356z.15, 356z.18, 356z.19, 356z.21, 356z.22, 356z.25,
5 356z.26, 356z.29, 356z.30, 356z.30a, 356z.32, 356z.33,
6 356z.40, 356z.41, 356z.46, 356z.47, 356z.51, 356z.53, 356z.54,
7 356z.56, 356z.57, 356z.59, 356z.60, 356z.61, 364.01, 364.3,
8 367.2, 368a, 401, 401.1, 402, 403, 403A, 408, 408.2, and 412,
9 and paragraphs (7) and (15) of Section 367 of the Illinois
10 Insurance Code.

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. 101-13, eff. 6-12-19; 101-81, eff. 7-12-19;
18 101-281, eff. 1-1-20; 101-393, eff. 1-1-20; 101-625, eff.
19 1-1-21; 102-30, eff. 1-1-22; 102-203, eff. 1-1-22; 102-306,
20 eff. 1-1-22; 102-642, eff. 1-1-22; 102-665, eff. 10-8-21;
21 102-731, eff. 1-1-23; 102-775, eff. 5-13-22; 102-804, eff.
22 1-1-23; 102-813, eff. 5-13-22; 102-816, eff. 1-1-23; 102-860,
23 eff. 1-1-23; 102-901, eff. 7-1-22; 102-1093, eff. 1-1-23;
24 102-1117, eff. 1-13-23.)

25 Section 45. The Illinois Public Aid Code is amended by

1 changing Section 5-16.8 as follows:

2 (305 ILCS 5/5-16.8)

3 Sec. 5-16.8. Required health benefits. The medical
4 assistance program shall (i) provide the post-mastectomy care
5 benefits required to be covered by a policy of accident and
6 health insurance under Section 356t and the coverage required
7 under Sections 356g.5, 356q, 356u, 356w, 356x, 356z.6,
8 356z.26, 356z.29, 356z.32, 356z.33, 356z.34, 356z.35, 356z.46,
9 356z.47, 356z.51, 356z.53, 356z.56, 356z.59, ~~and~~ 356z.60, and
10 356z.61 of the Illinois Insurance Code, (ii) be subject to the
11 provisions of Sections 356z.19, 356z.44, 356z.49, 364.01,
12 370c, and 370c.1 of the Illinois Insurance Code, and (iii) be
13 subject to the provisions of subsection (d-5) of Section 10 of
14 the Network Adequacy and Transparency Act.

15 The Department, by rule, shall adopt a model similar to
16 the requirements of Section 356z.39 of the Illinois Insurance
17 Code.

18 On and after July 1, 2012, the Department shall reduce any
19 rate of reimbursement for services or other payments or alter
20 any methodologies authorized by this Code to reduce any rate
21 of reimbursement for services or other payments in accordance
22 with Section 5-5e.

23 To ensure full access to the benefits set forth in this
24 Section, on and after January 1, 2016, the Department shall
25 ensure that provider and hospital reimbursement for

1 post-mastectomy care benefits required under this Section are
2 no lower than the Medicare reimbursement rate.

3 (Source: P.A. 101-81, eff. 7-12-19; 101-218, eff. 1-1-20;
4 101-281, eff. 1-1-20; 101-371, eff. 1-1-20; 101-574, eff.
5 1-1-20; 101-649, eff. 7-7-20; 102-30, eff. 1-1-22; 102-144,
6 eff. 1-1-22; 102-203, eff. 1-1-22; 102-306, eff. 1-1-22;
7 102-530, eff. 1-1-22; 102-642, eff. 1-1-22; 102-804, eff.
8 1-1-23; 102-813, eff. 5-13-22; 102-816, eff. 1-1-23; 102-1093,
9 eff. 1-1-23; 102-1117, eff. 1-13-23.)

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.