



## 96TH GENERAL ASSEMBLY

### State of Illinois

2009 and 2010

HB0244

Introduced 1/20/2009, by Rep. Robert W. Pritchard

#### 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.8  
30 ILCS 805/8.33 new

Amends the State Employees Group Insurance Act of 1971, the Counties Code, the Illinois Municipal Code, and the School Code to require coverage for medically necessary preventative physical therapy for insureds diagnosed with multiple sclerosis. Amends the Illinois Insurance Code. In the provisions concerning multiple sclerosis preventative physical therapy, provides a definition for "medically necessary". Amends the State Mandates Act to require implementation without reimbursement.

LRB096 03477 RPM 13501 b

FISCAL NOTE ACT  
MAY APPLY

STATE MANDATES  
ACT MAY REQUIRE  
REIMBURSEMENT

1 AN ACT concerning insurance.

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

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

6 (5 ILCS 375/6.11)

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

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

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

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

22 Sec. 6.11. Required health benefits; Illinois Insurance

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

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

16 (55 ILCS 5/5-1069.3)

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

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

1 356z.9, 356z.10, 356z.13 ~~356z.11~~, and 356z.14 of the Illinois  
2 Insurance Code. The requirement that health benefits be covered  
3 as provided in this Section is an exclusive power and function  
4 of the State and is a denial and limitation under Article VII,  
5 Section 6, subsection (h) of the Illinois Constitution. A home  
6 rule county to which this Section applies must comply with  
7 every provision of this Section.

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

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

12 Sec. 5-1069.3. Required health benefits. If a county,  
13 including a home rule county, is a self-insurer for purposes of  
14 providing health insurance coverage for its employees, the  
15 coverage shall include coverage for the post-mastectomy care  
16 benefits required to be covered by a policy of accident and  
17 health insurance under Section 356t and the coverage required  
18 under Sections 356g.5, 356u, 356w, 356x, 356z.6, 356z.8,  
19 356z.9, 356z.10, 356z.11, ~~and~~ 356z.12, 356z.13 ~~356z.11~~, and  
20 356z.14 of the Illinois Insurance Code. The requirement that  
21 health benefits be covered as provided in this Section is an  
22 exclusive power and function of the State and is a denial and  
23 limitation under Article VII, Section 6, subsection (h) of the  
24 Illinois Constitution. A home rule county to which this Section  
25 applies must comply with every provision of this Section.

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

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

7 (65 ILCS 5/10-4-2.3)

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

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

23 (Source: P.A. 95-189, eff. 8-16-07; 95-422, eff. 8-24-07;  
24 95-520, eff. 8-28-07; 95-876, eff. 8-21-08; 95-978, eff.

1 1-1-09; 95-1005, eff. 12-12-08; revised 12-15-08.)

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

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

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

22 Section 20. The School Code is amended by changing Section  
23 10-22.3f as follows:

1 (105 ILCS 5/10-22.3f)

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

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

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

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

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.5, 356u, 356w, 356x,  
19 356z.6, 356z.8, 356z.9, 356z.11, ~~and~~ 356z.12, 356z.13 ~~and~~  
20 ~~356z.11~~, and 356z.14 of the Illinois Insurance Code.

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

24 Section 25. The Illinois Insurance Code is amended by

1 changing Section 356z.8 as follows:

2 (215 ILCS 5/356z.8)

3 Sec. 356z.8. Multiple sclerosis preventative physical  
4 therapy.

5 (a) A group or individual policy of accident and health  
6 insurance or managed care plan amended, delivered, issued, or  
7 renewed after the effective date of this amendatory Act of the  
8 94th General Assembly must provide coverage for medically  
9 necessary preventative physical therapy for insureds diagnosed  
10 with multiple sclerosis.

11 (b) For the purposes of this Section:7

12 "Preventative ~~preventative~~ physical therapy" means  
13 physical therapy that is prescribed by a physician licensed to  
14 practice medicine in all of its branches for the purpose of  
15 treating parts of the body affected by multiple sclerosis, but  
16 only where the physical therapy includes reasonably defined  
17 goals, including, but not limited to, sustaining the level of  
18 function the person has achieved, with periodic evaluation of  
19 the efficacy of the physical therapy against those goals. The  
20 coverage required under this Section shall be subject to the  
21 same deductible, coinsurance, waiting period, cost sharing  
22 limitation, treatment limitation, calendar year maximum, or  
23 other limitations as provided for other physical or  
24 rehabilitative therapy benefits covered by the policy.

25 "Medically necessary" means any care, treatment,



1 intervention, service, or item that will or is reasonably  
2 expected to do any of the following: (i) prevent the onset of  
3 an illness, condition, injury, disease, or disability; (ii)  
4 reduce or ameliorate the physical, mental, or developmental  
5 effects of an illness, condition, injury, disease, or  
6 disability; or (iii) assist in achieving or maintaining maximum  
7 functional activity in performing daily activities.

8 (Source: P.A. 94-1076, eff. 12-29-06.)

9 Section 90. The State Mandates Act is amended by adding  
10 Section 8.33 as follows:

11 (30 ILCS 805/8.33 new)

12 Sec. 8.33. Exempt mandate. Notwithstanding Sections 6 and 8  
13 of this Act, no reimbursement by the State is required for the  
14 implementation of any mandate created by this amendatory Act of  
15 the 96th General Assembly.

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