

101ST GENERAL ASSEMBLY State of Illinois 2019 and 2020 HB0730

by Rep. Michael J. Madigan

SYNOPSIS AS INTRODUCED:

215 ILCS 106/20

Amends the Children's Health Insurance Program Act. Makes a technical change in a Section concerning eligibility for the Program.

LRB101 03437 SMS 48445 b

1 AN ACT concerning regulation.

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

- Section 5. The Children's Health Insurance Program Act is amended by changing Section 20 as follows:
- 6 (215 ILCS 106/20)

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- 7 Sec. 20. Eligibility.
- 8 (a) To be eligible for this Program, a person must be a
 9 person who has a child eligible under this Act and and who is
 10 eligible under a waiver of federal requirements pursuant to an
 11 application made pursuant to subdivision (a)(1) of Section 40
 12 of this Act or who is a child who:
- 13 (1) is a child who is not eligible for medical assistance:
- 15 (2) is a child whose annual household income, as
 16 determined by the Department, is above 133% of the federal
 17 poverty level and at or below 200% of the federal poverty
 18 level;
 - (3) is a resident of the State of Illinois; and
- 20 (4) is a child who is either a United States citizen or 21 included in one of the following categories of 22 non-citizens:
- 23 (A) unmarried dependent children of either a

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the United States.

1	United States Veteran honorably discharged or a person
2	on active military duty;
3	(B) refugees under Section 207 of the Immigration
4	and Nationality Act;
5	(C) asylees under Section 208 of the Immigration
6	and Nationality Act;
7	(D) persons for whom deportation has been withheld
8	under Section 243(h) of the Immigration and
9	Nationality Act;
10	(E) persons granted conditional entry under
11	Section 203(a)(7) of the Immigration and Nationality
12	Act as in effect prior to April 1, 1980;
13	(F) persons lawfully admitted for permanent
14	residence under the Immigration and Nationality Act;
15	and
16	(G) parolees, for at least one year, under Section
17	212(d)(5) of the Immigration and Nationality Act.
18	Those children who are in the categories set forth in
19	subdivisions (4)(F) and (4)(G) of this subsection, who enter
20	the United States on or after August 22, 1996, shall not be
21	eligible for 5 years beginning on the date the child entered

(b) A child who is determined to be eligible for assistance may remain eligible for 12 months, provided the child maintains his or her residence in the State, has not yet attained 19 years of age, and is not excluded pursuant to subsection (c). A

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child who has been determined to be eligible for assistance must reapply or otherwise establish eligibility at least annually. An eligible child shall be required, as determined by the Department by rule, to report promptly those changes in income and other circumstances that affect eligibility. The eligibility of a child may be redetermined based on the information reported or may be terminated based on the failure to report or failure to report accurately. A child's responsible relative or caretaker may also be held liable to the Department for any payments made by the Department on such child's behalf that were inappropriate. An applicant shall be provided with notice of these obligations.

- (c) A child shall not be eligible for coverage under this Program if:
 - (1) the premium required pursuant to Section 30 of this Act has not been paid. If the required premiums are not paid the liability of the Program shall be limited to benefits incurred under the Program for the time period for which premiums had been paid. Re-enrollment shall be completed prior to the next covered medical visit and the first month's required premium shall be paid in advance of the next covered medical visit. The Department shall promulgate rules regarding grace periods, notice requirements, and hearing procedures pursuant to this subsection;
 - (2) the child is an inmate of a public institution or a

- 1 patient in an institution for mental diseases; or
- 2 (3) the child is a member of a family that is eligible
- 3 for health benefits covered under the State of Illinois
- 4 health benefits plan on the basis of a member's employment
- 5 with a public agency.
- 6 (Source: P.A. 96-1272, eff. 1-1-11.)