

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. 100-1170)

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,  
14 356g.5, 356g.5-1, 356m, 356u, 356w, 356x, 356z.2, 356z.4,  
15 356z.6, 356z.8, 356z.9, 356z.10, 356z.11, 356z.12, 356z.13,  
16 356z.14, 356z.15, 356z.17, 356z.22, 356z.25, ~~and~~ 356z.26, ~~and~~  
17 356z.29, and 356z.32 of the Illinois Insurance Code. The  
18 program of health benefits must comply with Sections 155.22a,  
19 155.37, 355b, 356z.19, 370c, and 370c.1 of the Illinois  
20 Insurance Code. The Department of Insurance shall enforce the  
21 requirements of this Section.

22 Rulemaking authority to implement Public Act 95-1045, if  
23 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. 99-480, eff. 9-9-15; 100-24, eff. 7-18-17;  
6 100-138, eff. 8-18-17; 100-863, eff. 8-14-18; 100-1024, eff.  
7 1-1-19; 100-1057, eff. 1-1-19; 100-1102, eff. 1-1-19; revised  
8 1-8-19.)

9 (Text of Section after amendment by P.A. 100-1170)

10 Sec. 6.11. Required health benefits; Illinois Insurance  
11 Code requirements. The program of health benefits shall provide  
12 the post-mastectomy care benefits required to be covered by a  
13 policy of accident and health insurance under Section 356t of  
14 the Illinois Insurance Code. The program of health benefits  
15 shall provide the coverage required under Sections 356g,  
16 356g.5, 356g.5-1, 356m, 356u, 356w, 356x, 356z.2, 356z.4,  
17 356z.6, 356z.8, 356z.9, 356z.10, 356z.11, 356z.12, 356z.13,  
18 356z.14, 356z.15, 356z.17, 356z.22, 356z.25, 356z.26, 356z.29,  
19 356z.30a, and 356z.32 of the Illinois Insurance Code. The  
20 program of health benefits must comply with Sections 155.22a,  
21 155.37, 355b, 356z.19, 370c, and 370c.1 of the Illinois  
22 Insurance Code. The Department of Insurance shall enforce the  
23 requirements of this Section with respect to Sections 370c and  
24 370c.1 of the Illinois Insurance Code; all other requirements  
25 of this Section shall be enforced by the Department of Central

1 Management Services.

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

8 (Source: P.A. 99-480, eff. 9-9-15; 100-24, eff. 7-18-17;  
9 100-138, eff. 8-18-17; 100-863, eff. 8-14-18; 100-1024, eff.  
10 1-1-19; 100-1057, eff. 1-1-19; 100-1102, eff. 1-1-19;  
11 100-1170, eff. 6-1-19.)

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 Sec. 5-1069.3. Required health benefits. If a county,  
16 including a home rule county, is a self-insurer for purposes of  
17 providing health insurance coverage for its employees, the  
18 coverage shall include coverage for the post-mastectomy care  
19 benefits required to be covered by a policy of accident and  
20 health insurance under Section 356t and the coverage required  
21 under Sections 356g, 356g.5, 356g.5-1, 356u, 356w, 356x,  
22 356z.6, 356z.8, 356z.9, 356z.10, 356z.11, 356z.12, 356z.13,  
23 356z.14, 356z.15, 356z.22, 356z.25, ~~and~~ 356z.26, ~~and~~ 356z.29,  
24 356z.30a, and 356z.32 of the Illinois Insurance Code. The

1 coverage shall comply with Sections 155.22a, 355b, 356z.19, and  
2 370c of the Illinois Insurance Code. The Department of  
3 Insurance shall enforce the requirements of this Section. The  
4 requirement that health benefits be covered as provided in this  
5 Section is an exclusive power and function of the State and is  
6 a denial and limitation under Article VII, Section 6,  
7 subsection (h) of the Illinois Constitution. A home rule county  
8 to which this Section applies must comply with every provision  
9 of this Section.

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

16 (Source: P.A. 99-480, eff. 9-9-15; 100-24, eff. 7-18-17;  
17 100-138, eff. 8-18-17; 100-863, eff. 8-14-18; 100-1024, eff.  
18 1-1-19; 100-1057, eff. 1-1-19; 100-1102, eff. 1-1-19; revised  
19 10-3-18.)

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

22 (65 ILCS 5/10-4-2.3)

23 Sec. 10-4-2.3. Required health benefits. If a  
24 municipality, including a home rule municipality, is a

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

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. 99-480, eff. 9-9-15; 100-24, eff. 7-18-17;  
25 100-138, eff. 8-18-17; 100-863, eff. 8-14-18; 100-1024, eff.  
26 1-1-19; 100-1057, eff. 1-1-19; 100-1102, eff. 1-1-19; revised

1 10-4-18.)

2 Section 20. The School Code is amended by changing Section  
3 10-22.3f as follows:

4 (105 ILCS 5/10-22.3f)

5 Sec. 10-22.3f. Required health benefits. Insurance  
6 protection and benefits for employees shall provide the  
7 post-mastectomy care benefits required to be covered by a  
8 policy of accident and health insurance under Section 356t and  
9 the coverage required under Sections 356g, 356g.5, 356g.5-1,  
10 356u, 356w, 356x, 356z.6, 356z.8, 356z.9, 356z.11, 356z.12,  
11 356z.13, 356z.14, 356z.15, 356z.22, 356z.25, ~~and~~ 356z.26, ~~and~~  
12 356z.29, 356z.30a, and 356z.32 of the Illinois Insurance Code.  
13 Insurance policies shall comply with Section 356z.19 of the  
14 Illinois Insurance Code. The coverage shall comply with  
15 Sections 155.22a, 355b, and 370c of the Illinois Insurance  
16 Code. The Department of Insurance shall enforce the  
17 requirements of this Section.

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. 100-24, eff. 7-18-17; 100-138, eff. 8-18-17;

1 100-863, eff. 8-14-18; 100-1024, eff. 1-1-19; 100-1057, eff.  
2 1-1-19; 100-1102, eff. 1-1-19; revised 10-4-18.)

3 Section 25. The Illinois Insurance Code is amended by  
4 adding Section 356z.30a as follows:

5 (215 ILCS 5/356z.30a new)

6 Sec. 356z.30a. Coverage for hearing instruments.

7 (a) As used in this Section:

8 "Hearing care professional" means a person who is a  
9 licensed hearing instrument dispenser, licensed audiologist,  
10 or a licensed physician.

11 "Hearing instrument" means any wearable non-disposable  
12 instrument or device designed to aid or compensate for impaired  
13 human hearing and any parts, attachments, or accessories for  
14 the instrument or device, including an ear mold but excluding  
15 batteries and cords.

16 "Related services" means those services necessary to  
17 assess, select, and adjust or fit the hearing instrument to  
18 ensure optimal performance, including, but not limited to:  
19 audiological exams, replacement ear molds, and repairs to the  
20 hearing instrument.

21 (b) An individual or group policy of accident and health  
22 insurance or managed care plan that is amended, delivered,  
23 issued, or renewed after the effective date of this amendatory  
24 Act of the 101st General Assembly shall offer, for an

1 additional premium and subject to the insurer's standard of  
2 insurability, optional coverage or optional reimbursement for  
3 hearing instruments and related services for all individuals  
4 when a hearing care professional prescribes a hearing  
5 instrument to augment communication.

6 (c) This optional coverage shall be subject to all  
7 applicable copayments, coinsurance, deductibles, and  
8 out-of-pocket limits for the cost of a hearing instrument for  
9 each ear, as needed, as well as related services, with a  
10 maximum for the hearing instrument and related services of no  
11 more than \$2,500 per hearing instrument every 24 months.

12 (d) Nothing in this Section precludes an insured from  
13 selecting a hearing instrument that costs more than the amount  
14 covered by a plan of accident and health insurance or a managed  
15 care plan and paying the uncovered cost at his or her own  
16 expense.

17 (e) Nothing in this Section shall be construed to require a  
18 group policy of accident and health insurance to provide  
19 coverage if the group is unable to meet mandatory minimum  
20 participation requirements set by the insurer.

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

23 (215 ILCS 125/5-3) (from Ch. 111 1/2, par. 1411.2)

24 Sec. 5-3. Insurance Code provisions.



1 (a) Health Maintenance Organizations shall be subject to  
2 the provisions of Sections 133, 134, 136, 137, 139, 140, 141.1,  
3 141.2, 141.3, 143, 143c, 147, 148, 149, 151, 152, 153, 154,  
4 154.5, 154.6, 154.7, 154.8, 155.04, 155.22a, 355.2, 355.3,  
5 355b, 356g.5-1, 356m, 356v, 356w, 356x, 356y, 356z.2, 356z.4,  
6 356z.5, 356z.6, 356z.8, 356z.9, 356z.10, 356z.11, 356z.12,  
7 356z.13, 356z.14, 356z.15, 356z.17, 356z.18, 356z.19, 356z.21,  
8 356z.22, 356z.25, 356z.26, 356z.29, 356z.30, 356z.30a,  
9 356z.32, 364, 364.01, 367.2, 367.2-5, 367i, 368a, 368b, 368c,  
10 368d, 368e, 370c, 370c.1, 401, 401.1, 402, 403, 403A, 408,  
11 408.2, 409, 412, 444, and 444.1, paragraph (c) of subsection  
12 (2) of Section 367, and Articles IIA, VIII 1/2, XII, XII 1/2,  
13 XIII, XIII 1/2, XXV, and XXVI of the Illinois Insurance Code.

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

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

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

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

1           1/2 of the Illinois Insurance Code.

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

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

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

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

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

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

1           forma financial statements reflecting projected  
2           combined operation for a period of 2 years;

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

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

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

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

25          (f) Except for small employer groups as defined in the  
26          Small Employer Rating, Renewability and Portability Health

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

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

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

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

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

17           (g) Rulemaking authority to implement Public Act 95-1045,  
18 if 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. 99-761, eff. 1-1-18; 100-24, eff. 7-18-17;  
24 100-138, eff. 8-18-17; 100-863, eff. 8-14-18; 100-1026, eff.  
25 8-22-18; 100-1057, eff. 1-1-19; 100-1102, eff. 1-1-19; revised  
26 10-4-18.)

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

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

4 Sec. 4003. Illinois Insurance Code provisions. Limited  
5 health service organizations shall be subject to the provisions  
6 of Sections 133, 134, 136, 137, 139, 140, 141.1, 141.2, 141.3,  
7 143, 143c, 147, 148, 149, 151, 152, 153, 154, 154.5, 154.6,  
8 154.7, 154.8, 155.04, 155.37, 355.2, 355.3, 355b, 356v,  
9 356z.10, 356z.21, 356z.22, 356z.25, 356z.26, 356z.29,  
10 356z.30a, 356z.32, 368a, 401, 401.1, 402, 403, 403A, 408,  
11 408.2, 409, 412, 444, and 444.1 and Articles IIA, VIII 1/2,  
12 XII, XII 1/2, XIII, XIII 1/2, XXV, and XXVI of the Illinois  
13 Insurance Code. For purposes of the Illinois Insurance Code,  
14 except for Sections 444 and 444.1 and Articles XIII and XIII  
15 1/2, limited health service organizations in the following  
16 categories are deemed to be domestic companies:

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

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

24 (Source: P.A. 100-24, eff. 7-18-17; 100-138, eff. 8-18-17;

1 100-201, eff. 8-18-17; 100-863, eff. 8-14-18; 100-1057, eff.  
2 1-1-19; 100-1102, eff. 1-1-19; revised 10-4-18.)

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

5 (215 ILCS 165/10) (from Ch. 32, par. 604)

6 Sec. 10. Application of Insurance Code provisions. Health  
7 services plan corporations and all persons interested therein  
8 or dealing therewith shall be subject to the provisions of  
9 Articles IIA and XII 1/2 and Sections 3.1, 133, 136, 139, 140,  
10 143, 143c, 149, 155.22a, 155.37, 354, 355.2, 355.3, 355b, 356g,  
11 356g.5, 356g.5-1, 356r, 356t, 356u, 356v, 356w, 356x, 356y,  
12 356z.1, 356z.2, 356z.4, 356z.5, 356z.6, 356z.8, 356z.9,  
13 356z.10, 356z.11, 356z.12, 356z.13, 356z.14, 356z.15, 356z.18,  
14 356z.19, 356z.21, 356z.22, 356z.25, 356z.26, 356z.29,  
15 356z.30a, 356z.32, 364.01, 367.2, 368a, 401, 401.1, 402, 403,  
16 403A, 408, 408.2, and 412, and paragraphs (7) and (15) of  
17 Section 367 of 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. 100-24, eff. 7-18-17; 100-138, eff. 8-18-17;

1 100-863, eff. 8-14-18; 100-1026, eff. 8-22-18; 100-1057, eff.  
2 1-1-19; 100-1102, eff. 1-1-19; revised 10-4-18.)

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