

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 Sec. 6.11. Required health benefits; Illinois Insurance  
8 Code requirements. The program of health benefits shall  
9 provide the post-mastectomy care benefits required to be  
10 covered by a policy of accident and health insurance under  
11 Section 356t of the Illinois Insurance Code. The program of  
12 health benefits shall provide the coverage required under  
13 Sections 356g, 356g.5, 356g.5-1, 356m, 356q, 356u, 356w, 356x,  
14 356z.2, 356z.4, 356z.4a, 356z.6, 356z.8, 356z.9, 356z.10,  
15 356z.11, 356z.12, 356z.13, 356z.14, 356z.15, 356z.17, 356z.22,  
16 356z.25, 356z.26, 356z.29, 356z.30a, 356z.32, 356z.33,  
17 356z.36, and 356z.41 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 and Article XXXIIB of  
20 the Illinois Insurance Code. The Department of Insurance shall  
21 enforce the requirements of this Section with respect to  
22 Sections 370c and 370c.1 of the Illinois Insurance Code; all  
23 other requirements of this Section shall be enforced by the

1 Department of Central 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. 100-24, eff. 7-18-17; 100-138, eff. 8-18-17;  
9 100-863, eff. 8-14-18; 100-1024, eff. 1-1-19; 100-1057, eff.  
10 1-1-19; 100-1102, eff. 1-1-19; 100-1170, eff. 6-1-19; 101-13,  
11 eff. 6-12-19; 101-281, eff. 1-1-20; 101-393, eff. 1-1-20;  
12 101-452, eff. 1-1-20; 101-461, eff. 1-1-20; 101-625, eff.  
13 1-1-21.)

14 Section 10. The Illinois Insurance Code is amended by  
15 changing Section 356q as follows:

16 (215 ILCS 5/356q)

17 Sec. 356q. Temporomandibular joint disorder and  
18 craniomandibular disorder. On or after the effective date of  
19 this amendatory Act of the 102nd General Assembly ~~On or after~~  
20 ~~the effective date of this Section,~~ every insurer which  
21 delivers or issues for delivery in this State a group accident  
22 and health policy providing coverage for hospital, medical, or  
23 surgical treatment on an expense-incurred basis shall offer,  
24 ~~for an additional premium and subject to the insurer's~~

1 ~~standard of insurability, optional~~ coverage for the reasonable  
2 and necessary medical treatment of temporomandibular joint  
3 disorder and craniomandibular disorder. ~~The group policyholder~~  
4 ~~shall accept or reject the coverage in writing on the~~  
5 ~~application or an amendment thereto for the master group~~  
6 ~~policy. Benefits may be subject to the same pre existing~~  
7 ~~conditions, limitations, deductibles, co payments and~~  
8 ~~co insurance that generally apply to any other sickness. The~~  
9 ~~maximum lifetime benefits for temporomandibular joint disorder~~  
10 ~~and craniomandibular treatment shall be no less than \$2,500.~~  
11 ~~Nothing herein shall prevent an insurer from including such~~  
12 ~~coverage for temporomandibular joint disorder and~~  
13 ~~craniomandibular disorder as part of a policy's basic~~  
14 ~~coverage, in lieu of offering optional coverage.~~

15 (Source: P.A. 88-592, eff. 1-1-95.)

16 Section 15. The Illinois Public Aid Code is amended by  
17 changing Section 5-16.8 as follows:

18 (305 ILCS 5/5-16.8)

19 Sec. 5-16.8. Required health benefits. The medical  
20 assistance program shall (i) provide the post-mastectomy care  
21 benefits required to be covered by a policy of accident and  
22 health insurance under Section 356t and the coverage required  
23 under Sections 356g.5, 356g, 356u, 356w, 356x, 356z.6,  
24 356z.26, 356z.29, 356z.32, 356z.33, 356z.34, and 356z.35 of

1 the Illinois Insurance Code and (ii) be subject to the  
2 provisions of Sections 356z.19, 364.01, 370c, and 370c.1 of  
3 the Illinois Insurance Code.

4 The Department, by rule, shall adopt a model similar to  
5 the requirements of Section 356z.39 of the Illinois Insurance  
6 Code.

7 On and after July 1, 2012, the Department shall reduce any  
8 rate of reimbursement for services or other payments or alter  
9 any methodologies authorized by this Code to reduce any rate  
10 of reimbursement for services or other payments in accordance  
11 with Section 5-5e.

12 To ensure full access to the benefits set forth in this  
13 Section, on and after January 1, 2016, the Department shall  
14 ensure that provider and hospital reimbursement for  
15 post-mastectomy care benefits required under this Section are  
16 no lower than the Medicare reimbursement rate.

17 (Source: P.A. 100-138, eff. 8-18-17; 100-863, eff. 8-14-18;  
18 100-1057, eff. 1-1-19; 100-1102, eff. 1-1-19; 101-81, eff.  
19 7-12-19; 101-218, eff. 1-1-20; 101-281, eff. 1-1-20; 101-371,  
20 eff. 1-1-20; 101-574, eff. 1-1-20; 101-649, eff. 7-7-20.)