

HB5363



102ND GENERAL ASSEMBLY

State of Illinois

2021 and 2022

HB5363

Introduced 1/31/2022, by Rep. Brad Halbrook

SYNOPSIS AS INTRODUCED:

55 ILCS 5/5-1069

from Ch. 34, par. 5-1069

Amends the Counties Code. Provides that, on and after January 1, 2023, group life, health, accident, hospital, and medical insurance may not be provided to part-time county board members unless the same benefits are provided or offered to part-time employees of the county. Effective immediately.

LRB102 25367 AWJ 34647 b

A BILL FOR

1 AN ACT concerning local government.

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

4 Section 5. The Counties Code is amended by changing
5 Section 5-1069 as follows:

6 (55 ILCS 5/5-1069) (from Ch. 34, par. 5-1069)

7 Sec. 5-1069. Group life, health, accident, hospital, and
8 medical insurance.

9 (a) The county board of any county may arrange to provide,
10 for the benefit of employees of the county, group life,
11 health, accident, hospital, and medical insurance, or any one
12 or any combination of those types of insurance, or the county
13 board may self-insure, for the benefit of its employees, all
14 or a portion of the employees' group life, health, accident,
15 hospital, and medical insurance, or any one or any combination
16 of those types of insurance, including a combination of
17 self-insurance and other types of insurance authorized by this
18 Section, provided that the county board complies with all
19 other requirements of this Section. The insurance may include
20 provision for employees who rely on treatment by prayer or
21 spiritual means alone for healing in accordance with the
22 tenets and practice of a well recognized religious
23 denomination. The county board may provide for payment by the

1 county of a portion or all of the premium or charge for the
2 insurance with the employee paying the balance of the premium
3 or charge, if any. If the county board undertakes a plan under
4 which the county pays only a portion of the premium or charge,
5 the county board shall provide for withholding and deducting
6 from the compensation of those employees who consent to join
7 the plan the balance of the premium or charge for the
8 insurance.

9 (b) If the county board does not provide for
10 self-insurance or for a plan under which the county pays a
11 portion or all of the premium or charge for a group insurance
12 plan, the county board may provide for withholding and
13 deducting from the compensation of those employees who consent
14 thereto the total premium or charge for any group life,
15 health, accident, hospital, and medical insurance.

16 (c) The county board may exercise the powers granted in
17 this Section only if it provides for self-insurance or, where
18 it makes arrangements to provide group insurance through an
19 insurance carrier, if the kinds of group insurance are
20 obtained from an insurance company authorized to do business
21 in the State of Illinois. The county board may enact an
22 ordinance prescribing the method of operation of the insurance
23 program.

24 (c-5) On and after January 1, 2023, benefits under this
25 Section may not be provided to part-time county board members
26 unless the same benefits are provided or offered to part-time

1 employees of the county.

2 (d) If a county, including a home rule county, is a
3 self-insurer for purposes of providing health insurance
4 coverage for its employees, the insurance coverage shall
5 include screening by low-dose mammography for all women 35
6 years of age or older for the presence of occult breast cancer
7 unless the county elects to provide mammograms itself under
8 Section 5-1069.1. The coverage shall be as follows:

9 (1) A baseline mammogram for women 35 to 39 years of
10 age.

11 (2) An annual mammogram for women 40 years of age or
12 older.

13 (3) A mammogram at the age and intervals considered
14 medically necessary by the woman's health care provider
15 for women under 40 years of age and having a family history
16 of breast cancer, prior personal history of breast cancer,
17 positive genetic testing, or other risk factors.

18 (4) For a group policy of accident and health
19 insurance that is amended, delivered, issued, or renewed
20 on or after the effective date of this amendatory Act of
21 the 101st General Assembly, a comprehensive ultrasound
22 screening of an entire breast or breasts if a mammogram
23 demonstrates heterogeneous or dense breast tissue or when
24 medically necessary as determined by a physician licensed
25 to practice medicine in all of its branches, advanced
26 practice registered nurse, or physician assistant.

1 (5) For a group policy of accident and health
2 insurance that is amended, delivered, issued, or renewed
3 on or after the effective date of this amendatory Act of
4 the 101st General Assembly, a diagnostic mammogram when
5 medically necessary, as determined by a physician licensed
6 to practice medicine in all its branches, advanced
7 practice registered nurse, or physician assistant.

8 A policy subject to this subsection shall not impose a
9 deductible, coinsurance, copayment, or any other cost-sharing
10 requirement on the coverage provided; except that this
11 sentence does not apply to coverage of diagnostic mammograms
12 to the extent such coverage would disqualify a high-deductible
13 health plan from eligibility for a health savings account
14 pursuant to Section 223 of the Internal Revenue Code (26
15 U.S.C. 223).

16 For purposes of this subsection:

17 "Diagnostic mammogram" means a mammogram obtained using
18 diagnostic mammography.

19 "Diagnostic mammography" means a method of screening that
20 is designed to evaluate an abnormality in a breast, including
21 an abnormality seen or suspected on a screening mammogram or a
22 subjective or objective abnormality otherwise detected in the
23 breast.

24 "Low-dose mammography" means the x-ray examination of the
25 breast using equipment dedicated specifically for mammography,
26 including the x-ray tube, filter, compression device, and

1 image receptor, with an average radiation exposure delivery of
2 less than one rad per breast for 2 views of an average size
3 breast. The term also includes digital mammography.

4 (d-5) Coverage as described by subsection (d) shall be
5 provided at no cost to the insured and shall not be applied to
6 an annual or lifetime maximum benefit.

7 (d-10) When health care services are available through
8 contracted providers and a person does not comply with plan
9 provisions specific to the use of contracted providers, the
10 requirements of subsection (d-5) are not applicable. When a
11 person does not comply with plan provisions specific to the
12 use of contracted providers, plan provisions specific to the
13 use of non-contracted providers must be applied without
14 distinction for coverage required by this Section and shall be
15 at least as favorable as for other radiological examinations
16 covered by the policy or contract.

17 (d-15) If a county, including a home rule county, is a
18 self-insurer for purposes of providing health insurance
19 coverage for its employees, the insurance coverage shall
20 include mastectomy coverage, which includes coverage for
21 prosthetic devices or reconstructive surgery incident to the
22 mastectomy. Coverage for breast reconstruction in connection
23 with a mastectomy shall include:

24 (1) reconstruction of the breast upon which the
25 mastectomy has been performed;

26 (2) surgery and reconstruction of the other breast to

1 produce a symmetrical appearance; and

2 (3) prostheses and treatment for physical
3 complications at all stages of mastectomy, including
4 lymphedemas.

5 Care shall be determined in consultation with the attending
6 physician and the patient. The offered coverage for prosthetic
7 devices and reconstructive surgery shall be subject to the
8 deductible and coinsurance conditions applied to the
9 mastectomy, and all other terms and conditions applicable to
10 other benefits. When a mastectomy is performed and there is no
11 evidence of malignancy then the offered coverage may be
12 limited to the provision of prosthetic devices and
13 reconstructive surgery to within 2 years after the date of the
14 mastectomy. As used in this Section, "mastectomy" means the
15 removal of all or part of the breast for medically necessary
16 reasons, as determined by a licensed physician.

17 A county, including a home rule county, that is a
18 self-insurer for purposes of providing health insurance
19 coverage for its employees, may not penalize or reduce or
20 limit the reimbursement of an attending provider or provide
21 incentives (monetary or otherwise) to an attending provider to
22 induce the provider to provide care to an insured in a manner
23 inconsistent with this Section.

24 (d-20) The requirement that mammograms be included in
25 health insurance coverage as provided in subsections (d)
26 through (d-15) is an exclusive power and function of the State

1 and is a denial and limitation under Article VII, Section 6,
2 subsection (h) of the Illinois Constitution of home rule
3 county powers. A home rule county to which subsections (d)
4 through (d-15) apply must comply with every provision of those
5 subsections.

6 (e) The term "employees" as used in this Section includes
7 elected or appointed officials but does not include temporary
8 employees.

9 (f) The county board may, by ordinance, arrange to provide
10 group life, health, accident, hospital, and medical insurance,
11 or any one or a combination of those types of insurance, under
12 this Section to retired former employees and retired former
13 elected or appointed officials of the county.

14 (g) Rulemaking authority to implement this amendatory Act
15 of the 95th General Assembly, if any, is conditioned on the
16 rules being adopted in accordance with all provisions of the
17 Illinois Administrative Procedure Act and all rules and
18 procedures of the Joint Committee on Administrative Rules; any
19 purported rule not so adopted, for whatever reason, is
20 unauthorized.

21 (Source: P.A. 100-513, eff. 1-1-18; 101-580, eff. 1-1-20.)

22 Section 99. Effective date. This Act takes effect upon
23 becoming law.