



Sen. Michael E. Hastings

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10300SB2639sam002

LRB103 35235 RPS 72174 a

1 AMENDMENT TO SENATE BILL 2639

2 AMENDMENT NO. \_\_\_\_\_. Amend Senate Bill 2639 by replacing  
3 everything after the enacting clause with the following:

4 "Section 5. The Counties Code is amended by changing  
5 Section 5-1069.3 as follows:

6 (55 ILCS 5/5-1069.3)

7 Sec. 5-1069.3. Required health benefits. If a county,  
8 including a home rule county, is a self-insurer for purposes  
9 of providing health insurance coverage for its employees, the  
10 coverage shall include coverage for the post-mastectomy care  
11 benefits required to be covered by a policy of accident and  
12 health insurance under Section 356t and the coverage required  
13 under Sections 356g, 356g.5, 356g.5-1, 356m, 356q, 356u, 356w,  
14 356x, 356z.4, 356z.4a, 356z.6, 356z.8, 356z.9, 356z.10,  
15 356z.11, 356z.12, 356z.13, 356z.14, 356z.15, 356z.22, 356z.25,  
16 356z.26, 356z.29, 356z.30a, 356z.32, 356z.33, 356z.36,

1 356z.40, 356z.41, 356z.45, 356z.46, 356z.47, 356z.48, 356z.51,  
2 356z.53, 356z.54, 356z.56, 356z.57, 356z.59, 356z.60, ~~and~~  
3 356z.61, ~~and~~ 356z.62, 356z.64, 356z.67, 356z.68, and 356z.70  
4 of the Illinois Insurance Code. The coverage shall comply with  
5 Sections 155.22a, 355b, 356z.19, and 370c of the Illinois  
6 Insurance Code. The Department of Insurance shall enforce the  
7 requirements of this Section. The requirement that health  
8 benefits be covered as provided in this Section is an  
9 exclusive power and function of the State and is a denial and  
10 limitation under Article VII, Section 6, subsection (h) of the  
11 Illinois Constitution. A home rule county to which this  
12 Section applies must comply with every provision of this  
13 Section.

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

20 (Source: P.A. 102-30, eff. 1-1-22; 102-103, eff. 1-1-22;  
21 102-203, eff. 1-1-22; 102-306, eff. 1-1-22; 102-443, eff.  
22 1-1-22; 102-642, eff. 1-1-22; 102-665, eff. 10-8-21; 102-731,  
23 eff. 1-1-23; 102-804, eff. 1-1-23; 102-813, eff. 5-13-22;  
24 102-816, eff. 1-1-23; 102-860, eff. 1-1-23; 102-1093, eff.  
25 1-1-23; 102-1117, eff. 1-13-23; 103-84, eff. 1-1-24; 103-91,  
26 eff. 1-1-24; 103-420, eff. 1-1-24; 103-445, eff. 1-1-24;

1 103-535, eff. 8-11-23; 103-551, eff. 8-11-23; revised  
2 8-29-23.)

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

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

6 Sec. 10-4-2.3. Required health benefits. If a  
7 municipality, including a home rule municipality, is a  
8 self-insurer for purposes of providing health insurance  
9 coverage for its employees, the coverage shall include  
10 coverage for the post-mastectomy care benefits required to be  
11 covered by a policy of accident and health insurance under  
12 Section 356t and the coverage required under Sections 356g,  
13 356g.5, 356g.5-1, 356m, 356q, 356u, 356w, 356x, 356z.4,  
14 356z.4a, 356z.6, 356z.8, 356z.9, 356z.10, 356z.11, 356z.12,  
15 356z.13, 356z.14, 356z.15, 356z.22, 356z.25, 356z.26, 356z.29,  
16 356z.30a, 356z.32, 356z.33, 356z.36, 356z.40, 356z.41,  
17 356z.45, 356z.46, 356z.47, 356z.48, 356z.51, 356z.53, 356z.54,  
18 356z.56, 356z.57, 356z.59, 356z.60, ~~and~~ 356z.61, ~~and~~ 356z.62,  
19 356z.64, 356z.67, 356z.68, and 356z.70 of the Illinois  
20 Insurance Code. The coverage shall comply with Sections  
21 155.22a, 355b, 356z.19, and 370c of the Illinois Insurance  
22 Code. The Department of Insurance shall enforce the  
23 requirements of this Section. The requirement that health  
24 benefits be covered as provided in this is an exclusive power

1 and function of the State and is a denial and limitation under  
2 Article VII, Section 6, subsection (h) of the Illinois  
3 Constitution. A home rule municipality to which this Section  
4 applies must comply with every provision of this Section.

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

11 (Source: P.A. 102-30, eff. 1-1-22; 102-103, eff. 1-1-22;  
12 102-203, eff. 1-1-22; 102-306, eff. 1-1-22; 102-443, eff.  
13 1-1-22; 102-642, eff. 1-1-22; 102-665, eff. 10-8-21; 102-731,  
14 eff. 1-1-23; 102-804, eff. 1-1-23; 102-813, eff. 5-13-22;  
15 102-816, eff. 1-1-23; 102-860, eff. 1-1-23; 102-1093, eff.  
16 1-1-23; 102-1117, eff. 1-13-23; 103-84, eff. 1-1-24; 103-91,  
17 eff. 1-1-24; 103-420, eff. 1-1-24; 103-445, eff. 1-1-24;  
18 103-535, eff. 8-11-23; 103-551, eff. 8-11-23; revised  
19 8-29-23.)

20 Section 15. The School Code is amended by changing Section  
21 10-22.3f as follows:

22 (105 ILCS 5/10-22.3f)

23 Sec. 10-22.3f. Required health benefits. Insurance  
24 protection and benefits for employees shall provide the

1 post-mastectomy care benefits required to be covered by a  
2 policy of accident and health insurance under Section 356t and  
3 the coverage required under Sections 356g, 356g.5, 356g.5-1,  
4 356m, 356q, 356u, 356w, 356x, 356z.4, 356z.4a, 356z.6, 356z.8,  
5 356z.9, 356z.11, 356z.12, 356z.13, 356z.14, 356z.15, 356z.22,  
6 356z.25, 356z.26, 356z.29, 356z.30a, 356z.32, 356z.33,  
7 356z.36, 356z.40, 356z.41, 356z.45, 356z.46, 356z.47, 356z.51,  
8 356z.53, 356z.54, 356z.56, 356z.57, 356z.59, 356z.60, ~~and~~  
9 356z.61, ~~and~~ 356z.62, 356z.64, 356z.67, 356z.68, and 356z.70  
10 of the Illinois Insurance Code. Insurance policies shall  
11 comply with Section 356z.19 of the Illinois Insurance Code.  
12 The coverage shall comply with Sections 155.22a, 355b, and  
13 370c of the Illinois Insurance Code. The Department of  
14 Insurance shall enforce the requirements of this Section.

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

21 (Source: P.A. 102-30, eff. 1-1-22; 102-103, eff. 1-1-22;  
22 102-203, eff. 1-1-22; 102-306, eff. 1-1-22; 102-642, eff.  
23 1-1-22; 102-665, eff. 10-8-21; 102-731, eff. 1-1-23; 102-804,  
24 eff. 1-1-23; 102-813, eff. 5-13-22; 102-816, eff. 1-1-23;  
25 102-860, eff. 1-1-23; 102-1093, eff. 1-1-23; 102-1117, eff.  
26 1-13-23; 103-84, eff. 1-1-24; 103-91, eff. 1-1-24; 103-420,

1 eff. 1-1-24; 103-445, eff. 1-1-24; 103-535, eff. 8-11-23;  
2 103-551, eff. 8-11-23; revised 8-29-23.)

3 Section 20. The Illinois Insurance Code is amended by  
4 changing Section 356m as follows:

5 (215 ILCS 5/356m) (from Ch. 73, par. 968m)

6 Sec. 356m. Infertility coverage.

7 (a) No group policy of accident and health insurance  
8 providing coverage for more than 25 employees that provides  
9 pregnancy-related ~~pregnancy-related~~ benefits may be issued,  
10 amended, delivered, or renewed in this State after the  
11 effective date of this amendatory Act of the 99th General  
12 Assembly unless the policy contains coverage for the diagnosis  
13 and treatment of infertility including, but not limited to, in  
14 vitro fertilization, uterine embryo lavage, embryo transfer,  
15 artificial insemination, gamete intrafallopian tube transfer,  
16 zygote intrafallopian tube transfer, and low tubal ovum  
17 transfer.

18 (b) The coverage required under subsection (a) is subject  
19 to the following conditions:

20 (1) Coverage for procedures for in vitro  
21 fertilization, gamete intrafallopian tube transfer, or  
22 zygote intrafallopian tube transfer shall be required ~~only~~  
23 if:

24 (A) the covered individual has been unable to

1           attain a viable pregnancy, maintain a viable  
2           pregnancy, or sustain a successful pregnancy through  
3           reasonable, less costly medically appropriate  
4           infertility treatments for which coverage is available  
5           under the policy, plan, or contract;

6           (B) the covered individual has not undergone 4  
7           completed oocyte retrievals, except that if a live  
8           birth follows a completed oocyte retrieval, then 2  
9           more completed oocyte retrievals shall be covered; and

10          (C) the procedures are performed at medical  
11          facilities that conform to the American College of  
12          Obstetric and Gynecology guidelines for in vitro  
13          fertilization clinics or to the American Fertility  
14          Society minimal standards for programs of in vitro  
15          fertilization.

16          (1.5) For a group policy of accident and health  
17          insurance that provides pregnancy-related benefits that is  
18          issued, amended, delivered, or renewed in this State after  
19          January 1, 2026, if the requirements of paragraph (1) are  
20          met or if the covered individual obtains, from a physician  
21          licensed to practice medicine in all its branches, a  
22          recommendation approving the covered individual to seek in  
23          vitro fertilization, gamete intrafallopian tube transfer,  
24          or zygote intrafallopian tube transfer based on any of the  
25          following: (i) the covered individual's medical, sexual,  
26          and reproductive history; (ii) the covered individual's

1       age; (iii) physical findings; or (iv) diagnostic testing,  
2       then the procedure shall be covered without any other  
3       restrictions or requirements.

4           (2) The procedures required to be covered under this  
5       Section are not required to be contained in any policy or  
6       plan issued to or by a religious institution or  
7       organization or to or by an entity sponsored by a  
8       religious institution or organization that finds the  
9       procedures required to be covered under this Section to  
10      violate its religious and moral teachings and beliefs.

11      (c) As used in this Section, "infertility" means a  
12      disease, condition, or status characterized by:

13           (1) a failure to establish a pregnancy or to carry a  
14      pregnancy to live birth after 12 months of regular,  
15      unprotected sexual intercourse if the woman is 35 years of  
16      age or younger, or after 6 months of regular, unprotected  
17      sexual intercourse if the woman is over 35 years of age;  
18      conceiving but having a miscarriage does not restart the  
19      12-month or 6-month term for determining infertility;

20           (2) a person's inability to reproduce either as a  
21      single individual or with a partner without medical  
22      intervention; or

23           (3) a licensed physician's findings based on a  
24      patient's medical, sexual, and reproductive history, age,  
25      physical findings, or diagnostic testing.

26      (d) A policy, contract, or certificate may not impose any



1 exclusions, limitations, or other restrictions on coverage of  
2 fertility medications that are different from those imposed on  
3 any other prescription medications, nor may it impose any  
4 exclusions, limitations, or other restrictions on coverage of  
5 any fertility services based on a covered individual's  
6 participation in fertility services provided by or to a third  
7 party, nor may it impose deductibles, copayments, coinsurance,  
8 benefit maximums, waiting periods, or any other limitations on  
9 coverage for the diagnosis of infertility, treatment for  
10 infertility, and standard fertility preservation services,  
11 except as provided in this Section, that are different from  
12 those imposed upon benefits for services not related to  
13 infertility.

14 (Source: P.A. 102-170, eff. 1-1-22.)

15 Section 25. The Limited Health Service Organization Act is  
16 amended by changing Section 4003 as follows:

17 (215 ILCS 130/4003) (from Ch. 73, par. 1504-3)

18 Sec. 4003. Illinois Insurance Code provisions. Limited  
19 health service organizations shall be subject to the  
20 provisions of Sections 133, 134, 136, 137, 139, 140, 141.1,  
21 141.2, 141.3, 143, 143c, 147, 148, 149, 151, 152, 153, 154,  
22 154.5, 154.6, 154.7, 154.8, 155.04, 155.37, 155.49, 355.2,  
23 355.3, 355b, 356m, 356q, 356v, 356z.4, 356z.4a, 356z.10,  
24 356z.21, 356z.22, 356z.25, 356z.26, 356z.29, 356z.30a,

1 356z.32, 356z.33, 356z.41, 356z.46, 356z.47, 356z.51, 356z.53,  
2 356z.54, 356z.57, 356z.59, 356z.61, 356z.64, 356z.67, 356z.68,  
3 364.3, 368a, 401, 401.1, 402, 403, 403A, 408, 408.2, 409, 412,  
4 444, and 444.1 and Articles IIA, VIII 1/2, XII, XII 1/2, XIII,  
5 XIII 1/2, XXV, and XXVI of the Illinois Insurance Code.  
6 Nothing in this Section shall require a limited health care  
7 plan to cover any service that is not a limited health service.  
8 For purposes of the Illinois Insurance Code, except for  
9 Sections 444 and 444.1 and Articles XIII and XIII 1/2, limited  
10 health service organizations in the following categories are  
11 deemed to be domestic companies:

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

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

19 (Source: P.A. 102-30, eff. 1-1-22; 102-203, eff. 1-1-22;  
20 102-306, eff. 1-1-22; 102-642, eff. 1-1-22; 102-731, eff.  
21 1-1-23; 102-775, eff. 5-13-22; 102-813, eff. 5-13-22; 102-816,  
22 eff. 1-1-23; 102-860, eff. 1-1-23; 102-1093, eff. 1-1-23;  
23 102-1117, eff. 1-13-23; 103-84, eff. 1-1-24; 103-91, eff.  
24 1-1-24; 103-420, eff. 1-1-24; 103-426, eff. 8-4-23; 103-445,  
25 eff. 1-1-24; revised 8-29-23.)

1 Section 30. The Voluntary Health Services Plans Act is  
2 amended by changing Section 10 as follows:

3 (215 ILCS 165/10) (from Ch. 32, par. 604)

4 Sec. 10. Application of Insurance Code provisions. Health  
5 services plan corporations and all persons interested therein  
6 or dealing therewith shall be subject to the provisions of  
7 Articles IIA and XII 1/2 and Sections 3.1, 133, 136, 139, 140,  
8 143, 143c, 149, 155.22a, 155.37, 354, 355.2, 355.3, 355b,  
9 356g, 356g.5, 356g.5-1, 356m, 356q, 356r, 356t, 356u, 356v,  
10 356w, 356x, 356y, 356z.1, 356z.2, 356z.3a, 356z.4, 356z.4a,  
11 356z.5, 356z.6, 356z.8, 356z.9, 356z.10, 356z.11, 356z.12,  
12 356z.13, 356z.14, 356z.15, 356z.18, 356z.19, 356z.21, 356z.22,  
13 356z.25, 356z.26, 356z.29, 356z.30, 356z.30a, 356z.32,  
14 356z.33, 356z.40, 356z.41, 356z.46, 356z.47, 356z.51, 356z.53,  
15 356z.54, 356z.56, 356z.57, 356z.59, 356z.60, 356z.61, 356z.62,  
16 356z.64, 356z.67, 356z.68, 364.01, 364.3, 367.2, 368a, 401,  
17 401.1, 402, 403, 403A, 408, 408.2, and 412, and paragraphs (7)  
18 and (15) of Section 367 of the Illinois Insurance Code.

19 Rulemaking authority to implement Public Act 95-1045, if  
20 any, is conditioned on the rules being adopted in accordance  
21 with all provisions of the Illinois Administrative Procedure  
22 Act and all rules and procedures of the Joint Committee on  
23 Administrative Rules; any purported rule not so adopted, for  
24 whatever reason, is unauthorized.

25 (Source: P.A. 102-30, eff. 1-1-22; 102-203, eff. 1-1-22;

1 102-306, eff. 1-1-22; 102-642, eff. 1-1-22; 102-665, eff.  
2 10-8-21; 102-731, eff. 1-1-23; 102-775, eff. 5-13-22; 102-804,  
3 eff. 1-1-23; 102-813, eff. 5-13-22; 102-816, eff. 1-1-23;  
4 102-860, eff. 1-1-23; 102-901, eff. 7-1-22; 102-1093, eff.  
5 1-1-23; 102-1117, eff. 1-13-23; 103-84, eff. 1-1-24; 103-91,  
6 eff. 1-1-24; 103-420, eff. 1-1-24; 103-445, eff. 1-1-24;  
7 103-551, eff. 8-11-23; revised 8-29-23.)

8 Section 35. The Illinois Public Aid Code is amended by  
9 changing Section 5-16.8 as follows:

10 (305 ILCS 5/5-16.8)

11 Sec. 5-16.8. Required health benefits. The medical  
12 assistance program shall (i) provide the post-mastectomy care  
13 benefits required to be covered by a policy of accident and  
14 health insurance under Section 356t and the coverage required  
15 under Sections 356g.5, 356m, 356q, 356u, 356w, 356x, 356z.6,  
16 356z.26, 356z.29, 356z.32, 356z.33, 356z.34, 356z.35, 356z.46,  
17 356z.47, 356z.51, 356z.53, 356z.56, 356z.59, 356z.60, ~~and~~  
18 356z.61, 356z.64, and 356z.67 of the Illinois Insurance Code,  
19 (ii) be subject to the provisions of Sections 356z.19,  
20 356z.44, 356z.49, 364.01, 370c, and 370c.1 of the Illinois  
21 Insurance Code, and (iii) be subject to the provisions of  
22 subsection (d-5) of Section 10 of the Network Adequacy and  
23 Transparency Act.

24 The Department, by rule, shall adopt a model similar to

1 the requirements of Section 356z.39 of the Illinois Insurance  
2 Code.

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

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

13 (Source: P.A. 102-30, eff. 1-1-22; 102-144, eff. 1-1-22;  
14 102-203, eff. 1-1-22; 102-306, eff. 1-1-22; 102-530, eff.  
15 1-1-22; 102-642, eff. 1-1-22; 102-804, eff. 1-1-23; 102-813,  
16 eff. 5-13-22; 102-816, eff. 1-1-23; 102-1093, eff. 1-1-23;  
17 102-1117, eff. 1-13-23; 103-84, eff. 1-1-24; 103-91, eff.  
18 1-1-24; 103-420, eff. 1-1-24; revised 12-15-23.)

19 Section 99. Effective date. This Act takes effect January  
20 1, 2026."