



Adopted in House Comm. on Mar 04, 2004

09300HB4730ham002

LRB093 19722 DRJ 48028 a

1 AMENDMENT TO HOUSE BILL 4730

2 AMENDMENT NO. _____. Amend House Bill 4730, AS AMENDED,
3 with reference to page and line numbers of House Amendment No.
4 1, on page 1, by replacing lines 5 and 6 with the following:
5 "changing Sections 5-2, 6-1.7, and 12-4.4 and by adding Section
6 9A-15 as follows:

7 (305 ILCS 5/5-2) (from Ch. 23, par. 5-2)

8 Sec. 5-2. Classes of Persons Eligible. Medical assistance
9 under this Article shall be available to any of the following
10 classes of persons in respect to whom a plan for coverage has
11 been submitted to the Governor by the Illinois Department and
12 approved by him:

13 1. Recipients of basic maintenance grants under Articles
14 III and IV.

15 2. Persons otherwise eligible for basic maintenance under
16 Articles III and IV but who fail to qualify thereunder on the
17 basis of need, and who have insufficient income and resources
18 to meet the costs of necessary medical care, including but not
19 limited to the following:

20 (a) All persons otherwise eligible for basic
21 maintenance under Article III but who fail to qualify under
22 that Article on the basis of need and who meet either of
23 the following requirements:

24 (i) their income, as determined by the Illinois
25 Department in accordance with any federal

1 requirements, is equal to or less than 70% in fiscal
2 year 2001, equal to or less than 85% in fiscal year
3 2002 and until a date to be determined by the
4 Department by rule, and equal to or less than 100%
5 beginning on the date determined by the Department by
6 rule, of the nonfarm income official poverty line, as
7 defined by the federal Office of Management and Budget
8 and revised annually in accordance with Section 673(2)
9 of the Omnibus Budget Reconciliation Act of 1981,
10 applicable to families of the same size; or

11 (ii) their income, after the deduction of costs
12 incurred for medical care and for other types of
13 remedial care, is equal to or less than 70% in fiscal
14 year 2001, equal to or less than 85% in fiscal year
15 2002 and until a date to be determined by the
16 Department by rule, and equal to or less than 100%
17 beginning on the date determined by the Department by
18 rule, of the nonfarm income official poverty line, as
19 defined in item (i) of this subparagraph (a).

20 (b) All persons who would be determined eligible for
21 such basic maintenance under Article IV by disregarding the
22 maximum earned income permitted by federal law.

23 3. Persons who would otherwise qualify for Aid to the
24 Medically Indigent under Article VII.

25 4. Persons not eligible under any of the preceding
26 paragraphs who fall sick, are injured, or die, not having
27 sufficient money, property or other resources to meet the costs
28 of necessary medical care or funeral and burial expenses.

29 5. (a) Women during pregnancy, after the fact of pregnancy
30 has been determined by medical diagnosis, and during the
31 60-day period beginning on the last day of the pregnancy,
32 together with their infants and children born after
33 September 30, 1983, whose income and resources are
34 insufficient to meet the costs of necessary medical care to

1 the maximum extent possible under Title XIX of the Federal
2 Social Security Act.

3 (b) The Illinois Department and the Governor shall
4 provide a plan for coverage of the persons eligible under
5 paragraph 5(a) by April 1, 1990. Such plan shall provide
6 ambulatory prenatal care to pregnant women during a
7 presumptive eligibility period and establish an income
8 eligibility standard that is equal to 133% of the nonfarm
9 income official poverty line, as defined by the federal
10 Office of Management and Budget and revised annually in
11 accordance with Section 673(2) of the Omnibus Budget
12 Reconciliation Act of 1981, applicable to families of the
13 same size, provided that costs incurred for medical care
14 are not taken into account in determining such income
15 eligibility.

16 (c) The Illinois Department may conduct a
17 demonstration in at least one county that will provide
18 medical assistance to pregnant women, together with their
19 infants and children up to one year of age, where the
20 income eligibility standard is set up to 185% of the
21 nonfarm income official poverty line, as defined by the
22 federal Office of Management and Budget. The Illinois
23 Department shall seek and obtain necessary authorization
24 provided under federal law to implement such a
25 demonstration. Such demonstration may establish resource
26 standards that are not more restrictive than those
27 established under Article IV of this Code.

28 6. Persons under the age of 18 who fail to qualify as
29 dependent under Article IV and who have insufficient income and
30 resources to meet the costs of necessary medical care to the
31 maximum extent permitted under Title XIX of the Federal Social
32 Security Act.

33 7. Persons who are under 21 years of age and would qualify
34 as disabled as defined under the Federal Supplemental Security

1 Income Program, provided medical service for such persons would
2 be eligible for Federal Financial Participation, and provided
3 the Illinois Department determines that:

4 (a) the person requires a level of care provided by a
5 hospital, skilled nursing facility, or intermediate care
6 facility, as determined by a physician licensed to practice
7 medicine in all its branches;

8 (b) it is appropriate to provide such care outside of
9 an institution, as determined by a physician licensed to
10 practice medicine in all its branches;

11 (c) the estimated amount which would be expended for
12 care outside the institution is not greater than the
13 estimated amount which would be expended in an institution.

14 8. Persons who become ineligible for basic maintenance
15 assistance under Article IV of this Code in programs
16 administered by the Illinois Department due to employment
17 earnings and persons in assistance units comprised of adults
18 and children who become ineligible for basic maintenance
19 assistance under Article VI of this Code due to employment
20 earnings. The plan for coverage for this class of persons
21 shall:

22 (a) extend the medical assistance coverage for up to 12
23 months following termination of basic maintenance
24 assistance; and

25 (b) offer persons who have initially received 6 months
26 of the coverage provided in paragraph (a) above, the option
27 of receiving an additional 6 months of coverage, subject to
28 the following:

29 (i) such coverage shall be pursuant to provisions
30 of the federal Social Security Act;

31 (ii) such coverage shall include all services
32 covered while the person was eligible for basic
33 maintenance assistance;

34 (iii) no premium shall be charged for such

1 coverage; and

2 (iv) such coverage shall be suspended in the event
3 of a person's failure without good cause to file in a
4 timely fashion reports required for this coverage
5 under the Social Security Act and coverage shall be
6 reinstated upon the filing of such reports if the
7 person remains otherwise eligible.

8 9. Persons with acquired immunodeficiency syndrome (AIDS)
9 or with AIDS-related conditions with respect to whom there has
10 been a determination that but for home or community-based
11 services such individuals would require the level of care
12 provided in an inpatient hospital, skilled nursing facility or
13 intermediate care facility the cost of which is reimbursed
14 under this Article. Assistance shall be provided to such
15 persons to the maximum extent permitted under Title XIX of the
16 Federal Social Security Act.

17 10. Participants in the long-term care insurance
18 partnership program established under the Partnership for
19 Long-Term Care Act who meet the qualifications for protection
20 of resources described in Section 25 of that Act.

21 11. Persons with disabilities who are employed and eligible
22 for Medicaid, pursuant to Section 1902(a)(10)(A)(ii)(xv) of
23 the Social Security Act, as provided by the Illinois Department
24 by rule.

25 12. Subject to federal approval, persons who are eligible
26 for medical assistance coverage under applicable provisions of
27 the federal Social Security Act and the federal Breast and
28 Cervical Cancer Prevention and Treatment Act of 2000 or who
29 would have been eligible for such coverage except that they are
30 found to need treatment for a cancer other than breast or
31 cervical cancer. Those eligible persons are defined to include,
32 but not be limited to, the following persons:

33 (1) persons who have been screened for breast or
34 cervical cancer under the U.S. Centers for Disease Control

1 and Prevention Breast and Cervical Cancer Program
2 established under Title XV of the federal Public Health
3 Services Act in accordance with the requirements of Section
4 1504 of that Act as administered by the Illinois Department
5 of Public Health; and

6 (2) persons whose screenings under the above program
7 were funded in whole or in part by funds appropriated to
8 the Illinois Department of Public Health for breast or
9 cervical cancer screening.

10 "Medical assistance" under this paragraph 12 shall be identical
11 to the benefits provided under the State's approved plan under
12 Title XIX of the Social Security Act. ~~The Department must~~
13 ~~request federal approval of the coverage under this paragraph~~
14 ~~12 within 30 days after the effective date of this amendatory~~
15 ~~Act of the 92nd General Assembly.~~

16 The Illinois Department and the Governor shall provide a
17 plan for coverage of the persons eligible under paragraph 7 as
18 soon as possible after July 1, 1984.

19 The eligibility of any such person for medical assistance
20 under this Article is not affected by the payment of any grant
21 under the Senior Citizens and Disabled Persons Property Tax
22 Relief and Pharmaceutical Assistance Act or any distributions
23 or items of income described under subparagraph (X) of
24 paragraph (2) of subsection (a) of Section 203 of the Illinois
25 Income Tax Act. The Department shall by rule establish the
26 amounts of assets to be disregarded in determining eligibility
27 for medical assistance, which shall at a minimum equal the
28 amounts to be disregarded under the Federal Supplemental
29 Security Income Program. The amount of assets of a single
30 person to be disregarded shall not be less than \$2,000, and the
31 amount of assets of a married couple to be disregarded shall
32 not be less than \$3,000.

33 To the extent permitted under federal law, any person found
34 guilty of a second violation of Article VIIIA shall be

1 ineligible for medical assistance under this Article, as
2 provided in Section 8A-8.

3 The eligibility of any person for medical assistance under
4 this Article shall not be affected by the receipt by the person
5 of donations or benefits from fundraisers held for the person
6 in cases of serious illness, as long as neither the person nor
7 members of the person's family have actual control over the
8 donations or benefits or the disbursement of the donations or
9 benefits.

10 (Source: P.A. 92-16, eff. 6-28-01; 92-47, eff. 7-3-01; 92-597,
11 eff. 6-28-02; 93-20, eff. 6-20-03.)"; and

12 on page 6, line 22, before the period, by inserting ", except
13 that the changes to Sec. 5-2 in Section 5 take effect on
14 January 1, 2005."