



96TH GENERAL ASSEMBLY

State of Illinois

2009 and 2010

HB6116

Introduced 2/11/2010, by Rep. Barbara Flynn Currie

SYNOPSIS AS INTRODUCED:

5 ILCS 375/6.11	
55 ILCS 5/5-1069.3	
65 ILCS 5/10-4-2.3	
105 ILCS 5/10-22.3f	
215 ILCS 5/359d new	
215 ILCS 125/5-3	from Ch. 111 1/2, par. 1411.2
215 ILCS 130/4003	from Ch. 73, par. 1504-3
215 ILCS 165/10	from Ch. 32, par. 604

Amends the State Employees Group Insurance Act of 1971, Counties Code, Illinois Municipal Code, School Code, Illinois Insurance Code, Health Maintenance Organization Act, Limited Health Service Organization Act, and Voluntary Health Services Plans Act to provide that if an insured is owed any amount of money by an insurer, then the insurer shall provide the insured with the option of having the amount owed payed to the insured or applied to the insured's future premiums. Contains a nonacceleration clause.

LRB096 20881 RPM 36666 b

1 AN ACT concerning insurance.

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 provide
9 the post-mastectomy care benefits required to be covered by a
10 policy of accident and health insurance under Section 356t of
11 the Illinois Insurance Code. The program of health benefits
12 shall provide the coverage required under Sections 356g,
13 356g.5, 356g.5-1, 356m, 356u, 356w, 356x, 356z.2, 356z.4,
14 356z.6, 356z.8, 356z.9, 356z.10, 356z.11, 356z.12, ~~and~~
15 356z.13, ~~and~~ 356z.14, 356z.15 ~~and 356z.14~~, and 356z.17 ~~356z.15~~
16 of the Illinois Insurance Code. The program of health benefits
17 must comply with Sections ~~Section~~ 155.37 and 359d of the
18 Illinois Insurance Code.

19 Rulemaking authority to implement Public Act 95-1045 ~~this~~
20 ~~amendatory Act of the 95th General Assembly~~, if any, is
21 conditioned on the rules being adopted in accordance with all
22 provisions of the Illinois Administrative Procedure Act and all
23 rules and procedures of the Joint Committee on Administrative

1 Rules; any purported rule not so adopted, for whatever reason,
2 is unauthorized.

3 (Source: P.A. 95-189, eff. 8-16-07; 95-422, eff. 8-24-07;
4 95-520, eff. 8-28-07; 95-876, eff. 8-21-08; 95-958, eff.
5 6-1-09; 95-978, eff. 1-1-09; 95-1005, eff. 12-12-08; 95-1044,
6 eff. 3-26-09; 95-1045, eff. 3-27-09; 95-1049, eff. 1-1-10;
7 96-139, eff. 1-1-10; 96-328, eff. 8-11-09; 96-639, eff. 1-1-10;
8 revised 10-22-09.)

9 Section 10. The Counties Code is amended by changing
10 Section 5-1069.3 as follows:

11 (55 ILCS 5/5-1069.3)

12 Sec. 5-1069.3. Required health benefits. If a county,
13 including a home rule county, is a self-insurer for purposes of
14 providing health insurance coverage for its employees, the
15 coverage shall include coverage for the post-mastectomy care
16 benefits required to be covered by a policy of accident and
17 health insurance under Section 356t and the coverage required
18 under Sections 356g, 356g.5, 356g.5-1, 356u, 356w, 356x,
19 356z.6, 356z.8, 356z.9, 356z.10, 356z.11, 356z.12, ~~and~~
20 356z.13, ~~and~~ 356z.14, and 356z.15 ~~356z.14~~ of the Illinois
21 Insurance Code and shall comply with Section 359d of the
22 Illinois Insurance Code. The requirement that health benefits
23 be covered as provided in this Section is an exclusive power
24 and function of the State and is a denial and limitation under

1 Article VII, Section 6, subsection (h) of the Illinois
2 Constitution. A home rule county to which this Section applies
3 must comply with every provision of this Section.

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

11 (Source: P.A. 95-189, eff. 8-16-07; 95-422, eff. 8-24-07;
12 95-520, eff. 8-28-07; 95-876, eff. 8-21-08; 95-958, eff.
13 6-1-09; 95-978, eff. 1-1-09; 95-1005, eff. 12-12-08; 95-1045,
14 eff. 3-27-09; 95-1049, eff. 1-1-10; 96-139, eff. 1-1-10;
15 96-328, eff. 8-11-09; revised 10-22-09.)

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

18 (65 ILCS 5/10-4-2.3)

19 Sec. 10-4-2.3. Required health benefits. If a
20 municipality, including a home rule municipality, is a
21 self-insurer for purposes of providing health insurance
22 coverage for its employees, the coverage shall include coverage
23 for the post-mastectomy care benefits required to be covered by
24 a policy of accident and health insurance under Section 356t

1 and the coverage required under Sections 356g, 356g.5,
2 356g.5-1, 356u, 356w, 356x, 356z.6, 356z.8, 356z.9, 356z.10,
3 356z.11, 356z.12, ~~and 356z.13, and 356z.14~~, and 356z.15 ~~356z.14~~
4 of the Illinois Insurance Code and shall comply with Section
5 359d of the Illinois Insurance Code. The requirement that
6 health benefits be covered as provided in this is an exclusive
7 power and function of the State and is a denial and limitation
8 under Article VII, Section 6, subsection (h) of the Illinois
9 Constitution. A home rule municipality to which this Section
10 applies must comply with every provision of this Section.

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

18 (Source: P.A. 95-189, eff. 8-16-07; 95-422, eff. 8-24-07;
19 95-520, eff. 8-28-07; 95-876, eff. 8-21-08; 95-958, eff.
20 6-1-09; 95-978, eff. 1-1-09; 95-1005, eff. 12-12-08; 95-1045,
21 eff. 3-27-09; 95-1049, eff. 1-1-10; 96-139, eff. 1-1-10;
22 96-328, eff. 8-11-09; revised 10-23-09.)

23 Section 20. The School Code is amended by changing Section
24 10-22.3f as follows:

1 (105 ILCS 5/10-22.3f)

2 Sec. 10-22.3f. Required health benefits. Insurance
3 protection and benefits for employees shall provide the
4 post-mastectomy care benefits required to be covered by a
5 policy of accident and health insurance under Section 356t and
6 the coverage required under Sections 356g, 356g.5, 356g.5-1,
7 356u, 356w, 356x, 356z.6, 356z.8, 356z.9, 356z.11, 356z.12,
8 356z.13, ~~and 356z.14~~, and 356z.15 ~~356z.14~~ of the Illinois
9 Insurance Code and shall comply with Section 359d of the
10 Illinois Insurance Code.

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

18 (Source: P.A. 95-189, eff. 8-16-07; 95-422, eff. 8-24-07;
19 95-876, eff. 8-21-08; 95-958, eff. 6-1-09; 95-978, eff. 1-1-09;
20 95-1005, 12-12-08; 95-1045, eff. 3-27-09; 95-1049, eff.
21 1-1-10; 96-139, eff. 1-1-10; 96-328, eff. 8-11-09; revised
22 10-23-09.)

23 Section 25. The Illinois Insurance Code is amended by
24 adding Section 359d as follows:

1 (215 ILCS 5/359d new)

2 Sec. 359d. Refunds. If an insured is owed any amount of
3 money by an insurer, then the insurer shall provide the insured
4 with the option of having the amount owed paid to the insured
5 or applied to the insured's future premiums.

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

8 (215 ILCS 125/5-3) (from Ch. 111 1/2, par. 1411.2)

9 (Text of Section before amendment by P.A. 96-833)

10 Sec. 5-3. Insurance Code provisions.

11 (a) Health Maintenance Organizations shall be subject to
12 the provisions of Sections 133, 134, 137, 140, 141.1, 141.2,
13 141.3, 143, 143c, 147, 148, 149, 151, 152, 153, 154, 154.5,
14 154.6, 154.7, 154.8, 155.04, 355.2, 356g.5-1, 356m, 356v, 356w,
15 356x, 356y, 356z.2, 356z.4, 356z.5, 356z.6, 356z.8, 356z.9,
16 356z.10, 356z.11, 356z.12, 356z.13, 356z.14, 356z.15 ~~356z.14,~~
17 356z.17 ~~356z.15,~~ 359d, 364.01, 367.2, 367.2-5, 367i, 368a,
18 368b, 368c, 368d, 368e, 370c, 401, 401.1, 402, 403, 403A, 408,
19 408.2, 409, 412, 444, and 444.1, paragraph (c) of subsection
20 (2) of Section 367, and Articles IIA, VIII 1/2, XII, XII 1/2,
21 XIII, XIII 1/2, XXV, and XXVI of the Illinois Insurance Code.

22 (b) For purposes of the Illinois Insurance Code, except for
23 Sections 444 and 444.1 and Articles XIII and XIII 1/2, Health
24 Maintenance Organizations in the following categories are

1 deemed to be "domestic companies":

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

4 (2) a corporation organized under the laws of this
5 State; or

6 (3) a corporation organized under the laws of another
7 state, 30% or more of the enrollees of which are residents
8 of this State, except a corporation subject to
9 substantially the same requirements in its state of
10 organization as is a "domestic company" under Article VIII
11 1/2 of the Illinois Insurance Code.

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

15 (1) the Director shall give primary consideration to
16 the continuation of benefits to enrollees and the financial
17 conditions of the acquired Health Maintenance Organization
18 after the merger, consolidation, or other acquisition of
19 control takes effect;

20 (2) (i) the criteria specified in subsection (1) (b) of
21 Section 131.8 of the Illinois Insurance Code shall not
22 apply and (ii) the Director, in making his determination
23 with respect to the merger, consolidation, or other
24 acquisition of control, need not take into account the
25 effect on competition of the merger, consolidation, or
26 other acquisition of control;

1 (3) the Director shall have the power to require the
2 following information:

3 (A) certification by an independent actuary of the
4 adequacy of the reserves of the Health Maintenance
5 Organization sought to be acquired;

6 (B) pro forma financial statements reflecting the
7 combined balance sheets of the acquiring company and
8 the Health Maintenance Organization sought to be
9 acquired as of the end of the preceding year and as of
10 a date 90 days prior to the acquisition, as well as pro
11 forma financial statements reflecting projected
12 combined operation for a period of 2 years;

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

17 (D) such other information as the Director shall
18 require.

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

25 (e) In considering any management contract or service
26 agreement subject to Section 141.1 of the Illinois Insurance

1 Code, the Director (i) shall, in addition to the criteria
2 specified in Section 141.2 of the Illinois Insurance Code, take
3 into account the effect of the management contract or service
4 agreement on the continuation of benefits to enrollees and the
5 financial condition of the health maintenance organization to
6 be managed or serviced, and (ii) need not take into account the
7 effect of the management contract or service agreement on
8 competition.

9 (f) Except for small employer groups as defined in the
10 Small Employer Rating, Renewability and Portability Health
11 Insurance Act and except for medicare supplement policies as
12 defined in Section 363 of the Illinois Insurance Code, a Health
13 Maintenance Organization may by contract agree with a group or
14 other enrollment unit to effect refunds or charge additional
15 premiums under the following terms and conditions:

16 (i) the amount of, and other terms and conditions with
17 respect to, the refund or additional premium are set forth
18 in the group or enrollment unit contract agreed in advance
19 of the period for which a refund is to be paid or
20 additional premium is to be charged (which period shall not
21 be less than one year); and

22 (ii) the amount of the refund or additional premium
23 shall not exceed 20% of the Health Maintenance
24 Organization's profitable or unprofitable experience with
25 respect to the group or other enrollment unit for the
26 period (and, for purposes of a refund or additional

1 premium, the profitable or unprofitable experience shall
2 be calculated taking into account a pro rata share of the
3 Health Maintenance Organization's administrative and
4 marketing expenses, but shall not include any refund to be
5 made or additional premium to be paid pursuant to this
6 subsection (f)). The Health Maintenance Organization and
7 the group or enrollment unit may agree that the profitable
8 or unprofitable experience may be calculated taking into
9 account the refund period and the immediately preceding 2
10 plan years.

11 The Health Maintenance Organization shall include a
12 statement in the evidence of coverage issued to each enrollee
13 describing the possibility of a refund or additional premium,
14 and upon request of any group or enrollment unit, provide to
15 the group or enrollment unit a description of the method used
16 to calculate (1) the Health Maintenance Organization's
17 profitable experience with respect to the group or enrollment
18 unit and the resulting refund to the group or enrollment unit
19 or (2) the Health Maintenance Organization's unprofitable
20 experience with respect to the group or enrollment unit and the
21 resulting additional premium to be paid by the group or
22 enrollment unit.

23 In no event shall the Illinois Health Maintenance
24 Organization Guaranty Association be liable to pay any
25 contractual obligation of an insolvent organization to pay any
26 refund authorized under this Section.

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

8 (Source: P.A. 95-422, eff. 8-24-07; 95-520, eff. 8-28-07;
9 95-876, eff. 8-21-08; 95-958, eff. 6-1-09; 95-978, eff. 1-1-09;
10 95-1005, eff. 12-12-08; 95-1045, eff. 3-27-09; 95-1049, eff.
11 1-1-10; 96-328, eff. 8-11-09; 96-639, eff. 1-1-10; revised
12 10-23-09.)

13 (Text of Section after amendment by P.A. 96-833)

14 Sec. 5-3. Insurance Code provisions.

15 (a) Health Maintenance Organizations shall be subject to
16 the provisions of Sections 133, 134, 137, 140, 141.1, 141.2,
17 141.3, 143, 143c, 147, 148, 149, 151, 152, 153, 154, 154.5,
18 154.6, 154.7, 154.8, 155.04, 355.2, 356g.5-1, 356m, 356v, 356w,
19 356x, 356y, 356z.2, 356z.4, 356z.5, 356z.6, 356z.8, 356z.9,
20 356z.10, 356z.11, 356z.12, 356z.13, 356z.14, 356z.15, 356z.17,
21 356z.18, 359d, 364.01, 367.2, 367.2-5, 367i, 368a, 368b, 368c,
22 368d, 368e, 370c, 401, 401.1, 402, 403, 403A, 408, 408.2, 409,
23 412, 444, and 444.1, paragraph (c) of subsection (2) of Section
24 367, and Articles IIA, VIII 1/2, XII, XII 1/2, XIII, XIII 1/2,
25 XXV, and XXVI of the Illinois Insurance Code.

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

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

7 (2) a corporation organized under the laws of this
8 State; or

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

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

18 (1) the Director shall give primary consideration to
19 the continuation of benefits to enrollees and the financial
20 conditions of the acquired Health Maintenance Organization
21 after the merger, consolidation, or other acquisition of
22 control takes effect;

23 (2) (i) the criteria specified in subsection (1) (b) of
24 Section 131.8 of the Illinois Insurance Code shall not
25 apply and (ii) the Director, in making his determination
26 with respect to the merger, consolidation, or other

1 acquisition of control, need not take into account the
2 effect on competition of the merger, consolidation, or
3 other acquisition of control;

4 (3) the Director shall have the power to require the
5 following information:

6 (A) certification by an independent actuary of the
7 adequacy of the reserves of the Health Maintenance
8 Organization sought to be acquired;

9 (B) pro forma financial statements reflecting the
10 combined balance sheets of the acquiring company and
11 the Health Maintenance Organization sought to be
12 acquired as of the end of the preceding year and as of
13 a date 90 days prior to the acquisition, as well as pro
14 forma financial statements reflecting projected
15 combined operation for a period of 2 years;

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

20 (D) such other information as the Director shall
21 require.

22 (d) The provisions of Article VIII 1/2 of the Illinois
23 Insurance Code and this Section 5-3 shall apply to the sale by
24 any health maintenance organization of greater than 10% of its
25 enrollee population (including without limitation the health
26 maintenance organization's right, title, and interest in and to

1 its health care certificates).

2 (e) In considering any management contract or service
3 agreement subject to Section 141.1 of the Illinois Insurance
4 Code, the Director (i) shall, in addition to the criteria
5 specified in Section 141.2 of the Illinois Insurance Code, take
6 into account the effect of the management contract or service
7 agreement on the continuation of benefits to enrollees and the
8 financial condition of the health maintenance organization to
9 be managed or serviced, and (ii) need not take into account the
10 effect of the management contract or service agreement on
11 competition.

12 (f) Except for small employer groups as defined in the
13 Small Employer Rating, Renewability and Portability Health
14 Insurance Act and except for medicare supplement policies as
15 defined in Section 363 of the Illinois Insurance Code, a Health
16 Maintenance Organization may by contract agree with a group or
17 other enrollment unit to effect refunds or charge additional
18 premiums under the following terms and conditions:

19 (i) the amount of, and other terms and conditions with
20 respect to, the refund or additional premium are set forth
21 in the group or enrollment unit contract agreed in advance
22 of the period for which a refund is to be paid or
23 additional premium is to be charged (which period shall not
24 be less than one year); and

25 (ii) the amount of the refund or additional premium
26 shall not exceed 20% of the Health Maintenance

1 Organization's profitable or unprofitable experience with
2 respect to the group or other enrollment unit for the
3 period (and, for purposes of a refund or additional
4 premium, the profitable or unprofitable experience shall
5 be calculated taking into account a pro rata share of the
6 Health Maintenance Organization's administrative and
7 marketing expenses, but shall not include any refund to be
8 made or additional premium to be paid pursuant to this
9 subsection (f)). The Health Maintenance Organization and
10 the group or enrollment unit may agree that the profitable
11 or unprofitable experience may be calculated taking into
12 account the refund period and the immediately preceding 2
13 plan years.

14 The Health Maintenance Organization shall include a
15 statement in the evidence of coverage issued to each enrollee
16 describing the possibility of a refund or additional premium,
17 and upon request of any group or enrollment unit, provide to
18 the group or enrollment unit a description of the method used
19 to calculate (1) the Health Maintenance Organization's
20 profitable experience with respect to the group or enrollment
21 unit and the resulting refund to the group or enrollment unit
22 or (2) the Health Maintenance Organization's unprofitable
23 experience with respect to the group or enrollment unit and the
24 resulting additional premium to be paid by the group or
25 enrollment unit.

26 In no event shall the Illinois Health Maintenance

1 Organization Guaranty Association be liable to pay any
2 contractual obligation of an insolvent organization to pay any
3 refund authorized under this Section.

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

10 (Source: P.A. 95-422, eff. 8-24-07; 95-520, eff. 8-28-07;
11 95-876, eff. 8-21-08; 95-958, eff. 6-1-09; 95-978, eff. 1-1-09;
12 95-1005, eff. 12-12-08; 95-1045, eff. 3-27-09; 95-1049, eff.
13 1-1-10; 96-328, eff. 8-11-09; 96-639, eff. 1-1-10; 96-833, eff.
14 6-1-10.)

15 Section 35. 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 provisions
20 of Sections 133, 134, 137, 140, 141.1, 141.2, 141.3, 143, 143c,
21 147, 148, 149, 151, 152, 153, 154, 154.5, 154.6, 154.7, 154.8,
22 155.04, 155.37, 355.2, 356v, 356z.10, 359d, 368a, 401, 401.1,
23 402, 403, 403A, 408, 408.2, 409, 412, 444, and 444.1 and
24 Articles IIA, VIII 1/2, XII, XII 1/2, XIII, XIII 1/2, XXV, and

1 XXVI of the Illinois Insurance Code. For purposes of the
2 Illinois Insurance Code, except for Sections 444 and 444.1 and
3 Articles XIII and XIII 1/2, limited health service
4 organizations in the following categories are deemed to be
5 domestic companies:

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

7 (2) a corporation organized under the laws of another
8 state, 30% of more of the enrollees of which are residents
9 of this State, except a corporation subject to
10 substantially the same requirements in its state of
11 organization as is a domestic company under Article VIII
12 1/2 of the Illinois Insurance Code.

13 (Source: P.A. 95-520, eff. 8-28-07; 95-876, eff. 8-21-08.)

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

16 (215 ILCS 165/10) (from Ch. 32, par. 604)

17 (Text of Section before amendment by P.A. 96-833)

18 Sec. 10. Application of Insurance Code provisions. Health
19 services plan corporations and all persons interested therein
20 or dealing therewith shall be subject to the provisions of
21 Articles IIA and XII 1/2 and Sections 3.1, 133, 140, 143, 143c,
22 149, 155.37, 354, 355.2, 356g, 356g.5, 356g.5-1, 356r, 356t,
23 356u, 356v, 356w, 356x, 356y, 356z.1, 356z.2, 356z.4, 356z.5,
24 356z.6, 356z.8, 356z.9, 356z.10, 356z.11, 356z.12, 356z.13,

1 356z.14, 356z.15 ~~356z.14~~, 359d, 364.01, 367.2, 368a, 401,
2 401.1, 402, 403, 403A, 408, 408.2, and 412, and paragraphs (7)
3 and (15) of Section 367 of the Illinois Insurance Code.

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

11 (Source: P.A. 95-189, eff. 8-16-07; 95-331, eff. 8-21-07;
12 95-422, eff. 8-24-07; 95-520, eff. 8-28-07; 95-876, eff.
13 8-21-08; 95-958, eff. 6-1-09; 95-978, eff. 1-1-09; 95-1005,
14 eff. 12-12-08; 95-1045, eff. 3-27-09; 95-1049, eff. 1-1-10;
15 96-328, eff. 8-11-09; revised 9-25-09.)

16 (Text of Section after amendment by P.A. 96-833)

17 Sec. 10. Application of Insurance Code provisions. Health
18 services plan corporations and all persons interested therein
19 or dealing therewith shall be subject to the provisions of
20 Articles IIA and XII 1/2 and Sections 3.1, 133, 140, 143, 143c,
21 149, 155.37, 354, 355.2, 356g, 356g.5, 356g.5-1, 356r, 356t,
22 356u, 356v, 356w, 356x, 356y, 356z.1, 356z.2, 356z.4, 356z.5,
23 356z.6, 356z.8, 356z.9, 356z.10, 356z.11, 356z.12, 356z.13,
24 356z.14, 356z.15, 356z.18, 359d, 364.01, 367.2, 368a, 401,
25 401.1, 402, 403, 403A, 408, 408.2, and 412, and paragraphs (7)

1 and (15) of Section 367 of the Illinois Insurance Code.

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. 95-189, eff. 8-16-07; 95-331, eff. 8-21-07;
9 95-422, eff. 8-24-07; 95-520, eff. 8-28-07; 95-876, eff.
10 8-21-08; 95-958, eff. 6-1-09; 95-978, eff. 1-1-09; 95-1005,
11 eff. 12-12-08; 95-1045, eff. 3-27-09; 95-1049, eff. 1-1-10;
12 96-328, eff. 8-11-09; 96-833, eff. 6-1-10.)

13 Section 95. No acceleration or delay. Where this Act makes
14 changes in a statute that is represented in this Act by text
15 that is not yet or no longer in effect (for example, a Section
16 represented by multiple versions), the use of that text does
17 not accelerate or delay the taking effect of (i) the changes
18 made by this Act or (ii) provisions derived from any other
19 Public Act.