

Sen. Carole Pankau

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Filed: 2/24/2010

09600SB2991sam001 LRB096 20078 KTG 37629 a 1 AMENDMENT TO SENATE BILL 2991 AMENDMENT NO. _____. Amend Senate Bill 2991 by replacing 2 3 everything after the enacting clause with the following: "Section 5. The Children's Health Insurance Program Act is 4 5 amended by changing Sections 20 and 40 as follows: 6 (215 ILCS 106/20) 7 Sec. 20. Eligibility. (a) To be eligible for this Program, a person must be a 8 person who has a child eligible under this Act and who is 9 10 eligible under a waiver of federal requirements pursuant to an 11 application made pursuant to subdivision (a)(1) of Section 40 of this Act or who is a child who: 12 13 (1) is a child who is not eligible for medical 14 assistance;

(2) is a child whose annual household income,

determined by the Department, is above 133% of the federal

| 1 | poverty level and at or below 200% of the federal poverty |
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| 2 | level; |
| 3 | (2.5) is a child whose household assets do not exceed |
| 4 | \$10,000, excluding (i) the value of the residence in which |
| 5 | the child lives and (ii) the value of a vehicle used by the |
| 6 | household for transportation purposes; for purposes of |
| 7 | this paragraph (2.5), "vehicle" does not include a |
| 8 | recreational vehicle as defined in the Campground |
| 9 | Licensing and Recreational Area Act; |
| 10 | (3) is a resident of the State of Illinois; and |
| 11 | (4) is a child who is either a United States citizen or |
| 12 | included in one of the following categories of |
| 13 | non-citizens: |
| 14 | (A) unmarried dependent children of either a |
| 15 | United States Veteran honorably discharged or a person |
| 16 | on active military duty; |
| 17 | (B) refugees under Section 207 of the Immigration |
| 18 | and Nationality Act; |
| 19 | (C) asylees under Section 208 of the Immigration |
| 20 | and Nationality Act; |
| 21 | (D) persons for whom deportation has been withheld |
| 22 | under Section 243(h) of the Immigration and |
| 23 | Nationality Act; |
| 24 | (E) persons granted conditional entry under |
| 25 | Section 203(a)(7) of the Immigration and Nationality |
| 26 | Act as in effect prior to April 1, 1980; |

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| 1 | (F) | persons | la | wfully | admi | tted | for | perma | inent |
|---|-----------|---------|-----|----------|------|------|---------|-------|-------|
| 2 | residence | under | the | Immigrat | ion | and | Nationa | ality | Act; |
| 3 | and | | | | | | | | |

(G) parolees, for at least one year, under Section 212(d)(5) of the Immigration and Nationality Act.

Those children who are in the categories set forth in subdivisions (4)(F) and (4)(G) of this subsection, who enter the United States on or after August 22, 1996, shall not be eligible for 5 years beginning on the date the child entered the United States.

(b) A child who is determined to be eliqible for assistance may remain eligible for 12 months, provided the child maintains his or her residence in the State, has not yet attained 19 years of age, and is not excluded pursuant to subsection (c). A child who has been determined to be eligible for assistance must reapply or otherwise establish eligibility at least annually. An eligible child shall be required, as determined by the Department by rule, to report promptly those changes in income and other circumstances that affect eligibility within 30 days after the occurrence of the change. A failure to report such a change to the Department within 30 days, without good cause, is punishable as provided in Section 8A-6 of the Illinois Public Aid Code. The eligibility of a child may be redetermined based on the information reported or may be terminated based on the failure to report or failure to report accurately. A child's responsible relative or caretaker may

this subsection;

- also be held liable to the Department for any payments made by
- 2 the Department on such child's behalf that were inappropriate.
- 3 An applicant shall be provided with notice of these
- 4 obligations.
- 5 (c) A child shall not be eligible for coverage under this
- 6 Program if:

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- (1) the premium required pursuant to Section 30 of this Act has not been paid. If the required premiums are not paid the liability of the Program shall be limited to benefits incurred under the Program for the time period for which premiums had been paid. If the required monthly premium is not paid, the child shall be ineligible for re-enrollment for a minimum period of 3 months. Re-enrollment shall be completed prior to the next covered medical visit and the first month's required premium shall be paid in advance of the next covered medical visit. The Department shall promulgate rules regarding grace periods, notice requirements, and hearing procedures pursuant to
 - (2) the child is an inmate of a public institution or a patient in an institution for mental diseases; or
 - (3) the child is a member of a family that is eligible for health benefits covered under the State of Illinois health benefits plan on the basis of a member's employment with a public agency.
- (d) The changes made by this amendatory Act of the 96th

- 1 General Assembly shall apply to persons applying for benefits
- under this Act on or after January 1, 2011, as prescribed by 2
- 3 Department rules.
- 4 (e) The changes made by this amendatory Act of the 96th
- 5 General Assembly shall apply to persons entitled to benefits
- under this Act beginning January 1, 2012. For purposes of this 6
- Section "persons entitled to benefits" means persons entitled 7
- to benefits under this Act as of the effective date of this 8
- 9 amendatory Act of the 96th General Assembly. The Department
- 10 shall adopt rules to implement the changes made by this
- 11 amendatory Act of the 96th General Assembly by January 1, 2012.
- The Department shall create, by rule, compliance dates for new 12
- 13 applicants and existing applicants.
- (Source: P.A. 92-597, eff. 6-28-02; 93-63, eff. 6-30-03.) 14
- (215 ILCS 106/40) 15
- 16 Sec. 40. Waivers.
- (a) The Department shall request any necessary waivers of 17
- federal requirements in order to allow receipt of federal 18
- 19 funding for:
- (1) the coverage of families with eligible children 20
- 21 under this Act; and
- 22 (2) the coverage of children who would otherwise be
- 23 eligible under this Act, but who have health insurance.
- 24 (b) The failure of the responsible federal agency to
- 25 approve a waiver for children who would otherwise be eligible

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under this Act but who have health insurance shall not prevent the implementation of any Section of this Act provided that there are sufficient appropriated funds.

(c) Eligibility of a person under an approved waiver due to the relationship with a child pursuant to Article V of the Illinois Public Aid Code or this Act shall be limited to such a person whose countable income is determined by the Department to be at or below such income eligibility standard as the Department by rule shall establish. The income level established by the Department shall not be below 90% of the federal poverty level. Such persons who are determined to be eligible must reapply, or otherwise establish eligibility, at least annually. An eligible person shall be required, as determined by the Department by rule, to report promptly those income and other circumstances that affect changes in eligibility to the Department within 30 days after the occurrence of the change. A failure to report such a change to the Department within 30 days, without good cause, is punishable as provided in Section 8A-6 of the Illinois Public Aid Code. The eligibility of a person may be redetermined based on the information reported or may be terminated based on the failure to report or failure to report accurately. A person may also be held liable to the Department for any payments made by the Department on such person's behalf that were inappropriate. applicant shall be provided with notice of obligations.

- 1 (d) The changes made by this amendatory Act of the 96th
- General Assembly shall apply to persons applying for benefits 2
- under this Act on or after January 1, 2011, as prescribed by 3
- 4 Department rules.
- 5 (e) The changes made by this amendatory Act of the 96th
- 6 General Assembly shall apply to persons entitled to benefits
- under this Act beginning January 1, 2012. For purposes of this 7
- Section "persons entitled to benefits" means persons entitled 8
- 9 to benefits under this Act as of the effective date of this
- 10 amendatory Act of the 96th General Assembly. The Department
- 11 shall adopt rules to implement the changes made by this
- amendatory Act of the 96th General Assembly by January 1, 2012. 12
- 13 The Department shall create, by rule, compliance dates for new
- 14 applicants and existing applicants.
- 15 (Source: P.A. 96-328, eff. 8-11-09.)
- Section 10. The Covering ALL KIDS Health Insurance Act is 16
- 17 amended by changing Section 20 as follows:
- 18 (215 ILCS 170/20)
- 19 (Section scheduled to be repealed on July 1, 2011)
- 20 Sec. 20. Eligibility.
- (a) To be eligible for the Program, a person must be a 21
- 22 child:
- 2.3 (1) who is a resident of the State of Illinois; and
- 24 (2) who is ineligible for medical assistance under the

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Illinois Public Aid Code or benefits under the Children's Health Insurance Program Act; and

(3) either (i) who has been without health insurance coverage for a period set forth by the Department in rules, but not less than 6 months during the first month of operation of the Program, 7 months during the second month of operation, 8 months during the third month of operation, 9 months during the fourth month of operation, 10 months during the fifth month of operation, 11 months during the sixth month of operation, and 12 months thereafter, (ii) whose parent has lost employment that made available affordable dependent health insurance coverage, until such time as affordable employer-sponsored dependent health insurance coverage is again available for the child as set forth by the Department in rules, (iii) who is a newborn whose responsible relative does not have available affordable private or employer-sponsored health insurance, or (iv) who, within one year of applying for coverage under this Act, lost medical benefits under the Illinois Public Aid Code or the Children's Health Insurance Program Act; and.

(4) whose household assets do not exceed \$10,000, excluding (i) the value of the residence in which the child lives and (ii) the value of a vehicle used by the household for transportation purposes; for purposes of this paragraph (4), "vehicle" does not include a recreational

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1 vehicle as defined in the Campground Licensing and 2 Recreational Area Act.

An entity that provides health insurance coverage defined in Section 2 of the Comprehensive Health Insurance Plan Act) to Illinois residents shall provide health insurance data match to the Department of Healthcare and Family Services for the purpose of determining eligibility for the Program under this Act.

The Department of Healthcare and Family Services, in collaboration with the Department of Financial and Professional Regulation, Division of Insurance, shall adopt rules governing the exchange of information under this Section. The rules shall be consistent with all laws relating to the confidentiality or privacy of personal information or medical records, including provisions under the Federal Insurance Portability and Accountability Act (HIPAA).

- (b) The Department shall monitor the availability and retention of employer-sponsored dependent health insurance coverage and shall modify the period described in subdivision (a)(3) if necessary to promote retention of private or employer-sponsored health insurance and timely access to healthcare services, but at no time shall the period described in subdivision (a)(3) be less than 6 months.
- The Department, at its discretion, may take into account the affordability of dependent health insurance when determining whether employer-sponsored dependent

- 1 insurance coverage is available upon reemployment of a child's parent as provided in subdivision (a) (3). 2
- 3 (d) A child who is determined to be eliqible for the 4 Program shall remain eligible for 12 months, provided that the 5 child maintains his or her residence in this State, has not yet 6 attained 19 years of age, and is not excluded under subsection (e). A child who has been determined to be eligible for the 7 Program must reapply or otherwise establish eligibility at 8 9 least annually. An eligible child shall be required to report 10 those changes in income and other circumstances that affect 11 eligibility within 30 days after the occurrence of the change. A failure to report such a change to the Department within 30 12 13 days, without good cause, is punishable as provided in Section 14 8A-6 of the Illinois Public Aid Code. The eligibility of a 15 child may be redetermined based on the information reported or 16 may be terminated based on the failure to report or failure to report accurately. A child's responsible relative or caretaker 17 may also be held liable to the Department for any payments made 18 19 by the Department on the child's behalf that were 20 inappropriate. An applicant shall be provided with notice of 21 these obligations.
- 22 (e) A child is not eligible for coverage under the Program if: 23
- 24 (1) the premium required under Section 40 has not been 25 timely paid; if the required premiums are not paid, the 26 liability of the Program shall be limited to benefits

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incurred under the Program for the time period for which premiums have been paid; if the required monthly premium is not paid, the child is ineligible for re-enrollment for a minimum period of 3 months; re-enrollment shall be completed before the next covered medical visit, and the first month's required premium shall be paid in advance of the next covered medical visit; or

- (2) the child is an inmate of a public institution or an institution for mental diseases.
- The Department shall adopt eligibility rules, (f)including, but not limited to: rules regarding annual renewals the Program; rules eligibility for providing re-enrollment, grace periods, notice requirements, and hearing procedures under subdivision (e) (1) of this Section; and rules regarding what constitutes availability and affordability of employer-sponsored health or insurance, consideration of such factors as the percentage of income needed to purchase children or family health insurance, the availability of employer subsidies, and other relevant factors.
 - (g) The changes made by this amendatory Act of the 96th General Assembly shall apply to persons applying for benefits under this Act on or after January 1, 2011, as prescribed by Department rules.
- (h) The changes made by this amendatory Act of the 96th

 General Assembly shall apply to persons entitled to benefits

- under this Act beginning January 1, 2012. For purposes of this 1
- Section "persons entitled to benefits" means persons entitled 2
- to benefits under this Act as of the effective date of this 3
- 4 amendatory Act of the 96th General Assembly. The Department
- 5 shall adopt rules to implement the changes made by this
- amendatory Act of the 96th General Assembly by January 1, 2012. 6
- The Department shall create, by rule, compliance dates for new 7
- 8 applicants and existing applicants.
- 9 (Source: P.A. 94-693, eff. 7-1-06.)
- 10 Section 15. The Illinois Public Aid Code is amended by
- changing Section 8A-6 as follows: 11
- (305 ILCS 5/8A-6) (from Ch. 23, par. 8A-6) 12
- 13 Sec. 8A-6. Classification of violations.
- 14 (a) Any person, firm, corporation, association, agency,
- institution or other legal entity that has been found by a 15
- court to have engaged in an act, practice or course of conduct 16
- 17 declared unlawful under Sections 8A-2 through 8A-5 or Section
- 18 8A-13 or 8A-14 where:
- 19 (1) the total amount of money involved in the
- 20 violation, including the monetary value of federal food
- 21 stamps and the value of commodities, is less than \$150,
- 22 shall be quilty of a Class A misdemeanor;
- 23 (2) the total amount of money involved in the
- 24 violation, including the monetary value of federal food

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- stamps and the value of commodities, is \$150 or more but less than \$1,000, shall be guilty of a Class 4 felony;
 - (3) the total amount of money involved in the violation, including the monetary value of federal food stamps and the value of commodities, is \$1,000 or more but less than \$5,000, shall be guilty of a Class 3 felony;
 - (4) the total amount of money involved in the violation, including the monetary value of federal food stamps and the value of commodities, is \$5,000 or more but less than \$10,000, shall be guilty of a Class 2 felony; or
 - (5) the total amount of money involved in the violation, including the monetary value of federal food stamps and the value of commodities, is \$10,000 or more, shall be guilty of a Class 1 felony and, notwithstanding the provisions of Section 8A-8 except for Subsection (c) of Section 8A-8, shall be ineligible for financial aid under this Article for a period of two years following conviction or until the total amount of money, including the value of federal food stamps, is repaid, whichever first occurs.
 - (b) Any person, firm, corporation, association, agency, institution or other legal entity that commits a subsequent violation of any of the provisions of Sections 8A-2 through 8A-5 and:
 - (1) the total amount of money involved in the subsequent violation, including the monetary value of federal food stamps and the value of commodities, is less

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than \$150, shall be guilty of a Class 4 felony; 1

- (2) the total amount of money involved in the subsequent violation, including the monetary value of federal food stamps and the value of commodities, is \$150 or more but less than \$1,000, shall be quilty of a Class 3 felony;
- (3) the total amount of money involved in the subsequent violation, including the monetary value of federal food stamps and the value of commodities, is \$1,000 or more but less than \$5,000, shall be guilty of a Class 2 felonv;
- the total amount of money involved in the subsequent violation, including the monetary value of federal food stamps and the value of commodities, is \$5,000 or more but less than \$10,000, shall be guilty of a Class 1 felony.
- (c) For purposes of determining the classification of offense under this Section, all of the money received as a result of the unlawful act, practice or course of conduct can be accumulated.
- (d) A failure to report a change in income or other circumstances to the Department of Healthcare and Family Services within 30 days as required under subsection (b) of Section 20 or subsection (c) of Section 40 of the Children's Health Insurance Program Act, or subsection (d) of Section 20 of the Covering ALL KIDS Health Insurance Act, without good

- 1 cause, is a Class A misdemeanor for which a fine not to exceed
- \$10,000 may be imposed. In addition, if a person receives 2
- benefits under Section 20 or 40 of the Children's Health 3
- 4 Insurance Program Act or Section 20 of the Covering ALL KIDS
- 5 Health Insurance Act to which he or she was not entitled
- 6 because of the person's failure, without good cause, to report
- a change in income or other circumstances that would have 7
- rendered the person ineligible for those benefits, the person 8
- 9 must repay to the Department of Healthcare and Family Services
- 10 the amount of benefits wrongly received.
- 11 (e) The changes made by this amendatory Act of the 96th
- General Assembly shall apply to persons applying for benefits 12
- 13 under this Code on or after January 1, 2011, as prescribed by
- 14 Department rules.
- 15 (f) The changes made by this amendatory Act of the 96th
- 16 General Assembly shall apply to persons entitled to benefits
- under this Code beginning January 1, 2012. For purposes of this 17
- Section "persons entitled to benefits" means persons entitled 18
- to benefits under this Act as of the effective date of this 19
- 20 amendatory Act of the 96th General Assembly.
- 21 (Source: P.A. 90-538, eff. 12-1-97.)
- 22 Section 99. Effective date. This Act takes effect upon
- 23 becoming law.".