



Sen. Carole Pankau

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LRB096 20613 KTG 38851 a

1 AMENDMENT TO SENATE BILL 3707

2 AMENDMENT NO. _____. Amend Senate Bill 3707, AS AMENDED,
3 with reference to page and line numbers of Senate Amendment No.
4 1 as follows:

5 by replacing line 25 on page 8 and line 1 on page 9 with the
6 following:

7 "Section 10. The Children's Health Insurance Program Act is
8 amended by changing Sections 20 and 40 as follows:

9 (215 ILCS 106/20)

10 Sec. 20. Eligibility.

11 (a) To be eligible for this Program, a person must be a
12 person who has a child eligible under this Act and who is
13 eligible under a waiver of federal requirements pursuant to an
14 application made pursuant to subdivision (a)(1) of Section 40
15 of this Act or who is a child who:

1 (1) is a child who is not eligible for medical
2 assistance;

3 (2) is a child whose annual household income, as
4 determined by the Department, is above 133% of the federal
5 poverty level and at or below 200% of the federal poverty
6 level;

7 (2.5) is a child whose household assets do not exceed
8 \$10,000, excluding (i) the value of the residence in which
9 the child lives and (ii) the value of a vehicle used by the
10 household for transportation purposes; for purposes of
11 this paragraph (2.5), "vehicle" does not include a
12 recreational vehicle as defined in the Campground
13 Licensing and Recreational Area Act;

14 (3) is a resident of the State of Illinois; and

15 (4) is a child who is either a United States citizen or
16 included in one of the following categories of
17 non-citizens:

18 (A) unmarried dependent children of either a
19 United States Veteran honorably discharged or a person
20 on active military duty;

21 (B) refugees under Section 207 of the Immigration
22 and Nationality Act;

23 (C) asylees under Section 208 of the Immigration
24 and Nationality Act;

25 (D) persons for whom deportation has been withheld
26 under Section 243(h) of the Immigration and

1 Nationality Act;

2 (E) persons granted conditional entry under
3 Section 203(a)(7) of the Immigration and Nationality
4 Act as in effect prior to April 1, 1980;

5 (F) persons lawfully admitted for permanent
6 residence under the Immigration and Nationality Act;
7 and

8 (G) parolees, for at least one year, under Section
9 212(d)(5) of the Immigration and Nationality Act.

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

15 (b) A child who is determined to be eligible for assistance
16 may remain eligible for 12 months, provided the child maintains
17 his or her residence in the State, has not yet attained 19
18 years of age, and is not excluded pursuant to subsection (c). A
19 child who has been determined to be eligible for assistance
20 must reapply or otherwise establish eligibility at least
21 annually. An eligible child shall be required, ~~as determined by~~
22 ~~the Department by rule,~~ to report ~~promptly~~ those changes in
23 income and other circumstances that affect eligibility within
24 30 days after the occurrence of the change. A failure to report
25 such a change to the Department within 30 days, without good
26 cause, is punishable as provided in Section 8A-6 of the

1 Illinois Public Aid Code. The eligibility of a child may be
2 redetermined based on the information reported or may be
3 terminated based on the failure to report or failure to report
4 accurately. A child's responsible relative or caretaker may
5 also be held liable to the Department for any payments made by
6 the Department on such child's behalf that were inappropriate.
7 An applicant shall be provided with notice of these
8 obligations.

9 (c) A child shall not be eligible for coverage under this
10 Program if:

11 (1) the premium required pursuant to Section 30 of this
12 Act has not been paid. If the required premiums are not
13 paid the liability of the Program shall be limited to
14 benefits incurred under the Program for the time period for
15 which premiums had been paid. If the required monthly
16 premium is not paid, the child shall be ineligible for
17 re-enrollment for a minimum period of 3 months.
18 Re-enrollment shall be completed prior to the next covered
19 medical visit and the first month's required premium shall
20 be paid in advance of the next covered medical visit. The
21 Department shall promulgate rules regarding grace periods,
22 notice requirements, and hearing procedures pursuant to
23 this subsection;

24 (2) the child is an inmate of a public institution or a
25 patient in an institution for mental diseases; or

26 (3) the child is a member of a family that is eligible

1 for health benefits covered under the State of Illinois
2 health benefits plan on the basis of a member's employment
3 with a public agency.

4 (d) The Department shall promulgate rules necessary to
5 implement the changes made by this amendatory Act of the 96th
6 General Assembly. The Department shall implement these rules by
7 January 1, 2012.

8 (Source: P.A. 92-597, eff. 6-28-02; 93-63, eff. 6-30-03.)

9 (215 ILCS 106/40)

10 Sec. 40. Waivers.

11 (a) The Department shall request any necessary waivers of
12 federal requirements in order to allow receipt of federal
13 funding for:

14 (1) the coverage of families with eligible children
15 under this Act; and

16 (2) the coverage of children who would otherwise be
17 eligible under this Act, but who have health insurance.

18 (b) The failure of the responsible federal agency to
19 approve a waiver for children who would otherwise be eligible
20 under this Act but who have health insurance shall not prevent
21 the implementation of any Section of this Act provided that
22 there are sufficient appropriated funds.

23 (c) Eligibility of a person under an approved waiver due to
24 the relationship with a child pursuant to Article V of the
25 Illinois Public Aid Code or this Act shall be limited to such a

1 person whose countable income is determined by the Department
2 to be at or below such income eligibility standard as the
3 Department by rule shall establish. The income level
4 established by the Department shall not be below 90% of the
5 federal poverty level. Such persons who are determined to be
6 eligible must reapply, or otherwise establish eligibility, at
7 least annually. An eligible person shall be required, ~~as~~
8 ~~determined by the Department by rule,~~ to report ~~promptly~~ those
9 changes in income and other circumstances that affect
10 eligibility to the Department within 30 days after the
11 occurrence of the change. A failure to report such a change to
12 the Department within 30 days, without good cause, is
13 punishable as provided in Section 8A-6 of the Illinois Public
14 Aid Code. The eligibility of a person may be redetermined based
15 on the information reported or may be terminated based on the
16 failure to report or failure to report accurately. A person may
17 also be held liable to the Department for any payments made by
18 the Department on such person's behalf that were inappropriate.
19 An applicant shall be provided with notice of these
20 obligations.

21 (d) The Department shall promulgate rules necessary to
22 implement the changes made by this amendatory Act of the 96th
23 General Assembly. The Department shall implement these rules by
24 January 1, 2012.

25 (Source: P.A. 96-328, eff. 8-11-09.)

1 Section 15. The Covering ALL KIDS Health Insurance Act is
2 amended by changing Section 20 as follows:

3 (215 ILCS 170/20)

4 (Section scheduled to be repealed on July 1, 2011)

5 Sec. 20. Eligibility.

6 (a) To be eligible for the Program, a person must be a
7 child:

8 (1) who is a resident of the State of Illinois; and

9 (2) who is ineligible for medical assistance under the
10 Illinois Public Aid Code or benefits under the Children's
11 Health Insurance Program Act; and

12 (3) either (i) who has been without health insurance
13 coverage for a period set forth by the Department in rules,
14 but not less than 6 months during the first month of
15 operation of the Program, 7 months during the second month
16 of operation, 8 months during the third month of operation,
17 9 months during the fourth month of operation, 10 months
18 during the fifth month of operation, 11 months during the
19 sixth month of operation, and 12 months thereafter, (ii)
20 whose parent has lost employment that made available
21 affordable dependent health insurance coverage, until such
22 time as affordable employer-sponsored dependent health
23 insurance coverage is again available for the child as set
24 forth by the Department in rules, (iii) who is a newborn
25 whose responsible relative does not have available

1 affordable private or employer-sponsored health insurance,
2 or (iv) who, within one year of applying for coverage under
3 this Act, lost medical benefits under the Illinois Public
4 Aid Code or the Children's Health Insurance Program Act;
5 and-

6 (4) whose household assets do not exceed \$10,000,
7 excluding (i) the value of the residence in which the child
8 lives and (ii) the value of a vehicle used by the household
9 for transportation purposes; for purposes of this
10 paragraph (4), "vehicle" does not include a recreational
11 vehicle as defined in the Campground Licensing and
12 Recreational Area Act.

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

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

1 (b) The Department shall monitor the availability and
2 retention of employer-sponsored dependent health insurance
3 coverage and shall modify the period described in subdivision
4 (a)(3) if necessary to promote retention of private or
5 employer-sponsored health insurance and timely access to
6 healthcare services, but at no time shall the period described
7 in subdivision (a)(3) be less than 6 months.

8 (c) The Department, at its discretion, may take into
9 account the affordability of dependent health insurance when
10 determining whether employer-sponsored dependent health
11 insurance coverage is available upon reemployment of a child's
12 parent as provided in subdivision (a)(3).

13 (d) A child who is determined to be eligible for the
14 Program shall remain eligible for 12 months, provided that the
15 child maintains his or her residence in this State, has not yet
16 attained 19 years of age, and is not excluded under subsection
17 (e). A child who has been determined to be eligible for the
18 Program must reapply or otherwise establish eligibility at
19 least annually. An eligible child shall be required to report
20 those changes in income and other circumstances that affect
21 eligibility within 30 days after the occurrence of the change.
22 A failure to report such a change to the Department within 30
23 days, without good cause, is punishable as provided in Section
24 8A-6 of the Illinois Public Aid Code. The eligibility of a
25 child may be redetermined based on the information reported or
26 may be terminated based on the failure to report or failure to

1 report accurately. A child's responsible relative or caretaker
2 may also be held liable to the Department for any payments made
3 by the Department on the child's behalf that were
4 inappropriate. An applicant shall be provided with notice of
5 these obligations.

6 (e) A child is not eligible for coverage under the Program
7 if:

8 (1) the premium required under Section 40 has not been
9 timely paid; if the required premiums are not paid, the
10 liability of the Program shall be limited to benefits
11 incurred under the Program for the time period for which
12 premiums have been paid; if the required monthly premium is
13 not paid, the child is ineligible for re-enrollment for a
14 minimum period of 3 months; re-enrollment shall be
15 completed before the next covered medical visit, and the
16 first month's required premium shall be paid in advance of
17 the next covered medical visit; or

18 (2) the child is an inmate of a public institution or
19 an institution for mental diseases.

20 (f) The Department shall adopt eligibility rules,
21 including, but not limited to: rules regarding annual renewals
22 of eligibility for the Program; rules providing for
23 re-enrollment, grace periods, notice requirements, and hearing
24 procedures under subdivision (e)(1) of this Section; and rules
25 regarding what constitutes availability and affordability of
26 private or employer-sponsored health insurance, with

1 consideration of such factors as the percentage of income
2 needed to purchase children or family health insurance, the
3 availability of employer subsidies, and other relevant
4 factors.

5 The Department shall promulgate rules necessary to
6 implement the changes made by this amendatory Act of the 96th
7 General Assembly. The Department shall implement these rules by
8 January 1, 2012.

9 (Source: P.A. 94-693, eff. 7-1-06.)

10 Section 20. The Illinois Public Aid Code is amended by
11 changing Sections 5-16 and 8A-6 as follows:"; and

12 on page 12, after line 7, by inserting the following:

13 "(305 ILCS 5/8A-6) (from Ch. 23, par. 8A-6)

14 Sec. 8A-6. Classification of violations.

15 (a) Any person, firm, corporation, association, agency,
16 institution or other legal entity that has been found by a
17 court to have engaged in an act, practice or course of conduct
18 declared unlawful under Sections 8A-2 through 8A-5 or Section
19 8A-13 or 8A-14 where:

20 (1) the total amount of money involved in the
21 violation, including the monetary value of federal food
22 stamps and the value of commodities, is less than \$150,
23 shall be guilty of a Class A misdemeanor;

1 (2) the total amount of money involved in the
2 violation, including the monetary value of federal food
3 stamps and the value of commodities, is \$150 or more but
4 less than \$1,000, shall be guilty of a Class 4 felony;

5 (3) the total amount of money involved in the
6 violation, including the monetary value of federal food
7 stamps and the value of commodities, is \$1,000 or more but
8 less than \$5,000, shall be guilty of a Class 3 felony;

9 (4) the total amount of money involved in the
10 violation, including the monetary value of federal food
11 stamps and the value of commodities, is \$5,000 or more but
12 less than \$10,000, shall be guilty of a Class 2 felony; or

13 (5) the total amount of money involved in the
14 violation, including the monetary value of federal food
15 stamps and the value of commodities, is \$10,000 or more,
16 shall be guilty of a Class 1 felony and, notwithstanding
17 the provisions of Section 8A-8 except for Subsection (c) of
18 Section 8A-8, shall be ineligible for financial aid under
19 this Article for a period of two years following conviction
20 or until the total amount of money, including the value of
21 federal food stamps, is repaid, whichever first occurs.

22 (b) Any person, firm, corporation, association, agency,
23 institution or other legal entity that commits a subsequent
24 violation of any of the provisions of Sections 8A-2 through
25 8A-5 and:

26 (1) the total amount of money involved in the

1 subsequent violation, including the monetary value of
2 federal food stamps and the value of commodities, is less
3 than \$150, shall be guilty of a Class 4 felony;

4 (2) the total amount of money involved in the
5 subsequent violation, including the monetary value of
6 federal food stamps and the value of commodities, is \$150
7 or more but less than \$1,000, shall be guilty of a Class 3
8 felony;

9 (3) the total amount of money involved in the
10 subsequent violation, including the monetary value of
11 federal food stamps and the value of commodities, is \$1,000
12 or more but less than \$5,000, shall be guilty of a Class 2
13 felony;

14 (4) the total amount of money involved in the
15 subsequent violation, including the monetary value of
16 federal food stamps and the value of commodities, is \$5,000
17 or more but less than \$10,000, shall be guilty of a Class 1
18 felony.

19 (c) For purposes of determining the classification of
20 offense under this Section, all of the money received as a
21 result of the unlawful act, practice or course of conduct can
22 be accumulated.

23 (d) A failure to report a change in income or other
24 circumstances to the Department of Healthcare and Family
25 Services within 30 days as required under subsection (b) of
26 Section 20 or subsection (c) of Section 40 of the Children's

1 Health Insurance Program Act, or subsection (d) of Section 20
2 of the Covering ALL KIDS Health Insurance Act, without good
3 cause, is a Class A misdemeanor for which a fine not to exceed
4 \$10,000 may be imposed. In addition, if a person receives
5 benefits under Section 20 or 40 of the Children's Health
6 Insurance Program Act or Section 20 of the Covering ALL KIDS
7 Health Insurance Act to which he or she was not entitled
8 because of the person's failure, without good cause, to report
9 a change in income or other circumstances that would have
10 rendered the person ineligible for those benefits, the person
11 must repay to the Department of Healthcare and Family Services
12 the amount of benefits wrongly received.

13 (Source: P.A. 90-538, eff. 12-1-97.)".