



Rep. Jil Tracy

**Filed: 4/13/2011**

09700HB3259ham002

LRB097 09429 RPM 54489 a

1 AMENDMENT TO HOUSE BILL 3259

2 AMENDMENT NO. \_\_\_\_\_. Amend House Bill 3259 by replacing  
3 everything after the enacting clause with the following:

4 "Section 5. The Covering ALL KIDS Health Insurance Act is  
5 amended by changing Section 20 as follows:

6 (215 ILCS 170/20)

7 (Section scheduled to be repealed on July 1, 2016)

8 Sec. 20. Eligibility.

9 (a) To be eligible for the Program, a person must be a  
10 child:

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

12 (2) who is ineligible for medical assistance under the  
13 Illinois Public Aid Code or benefits under the Children's  
14 Health Insurance Program Act;

15 (3) either (i) who has been without health insurance  
16 coverage for 12 months, (ii) whose parent has lost

1 employment that made available affordable dependent health  
2 insurance coverage, until such time as affordable  
3 employer-sponsored dependent health insurance coverage is  
4 again available for the child as set forth by the  
5 Department in rules, (iii) who is a newborn whose  
6 responsible relative does not have available affordable  
7 private or employer-sponsored health insurance, or (iv)  
8 who, within one year of applying for coverage under this  
9 Act, lost medical benefits under the Illinois Public Aid  
10 Code or the Children's Health Insurance Program Act; ~~and~~

11 (3.5) whose household income, as determined by the  
12 Department, is at or below 300% of the federal poverty  
13 level; ~~and~~ this ~~This~~ item (3.5) is effective July 1, 2011; and

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15 (4) who does not have access to affordable  
16 employer-sponsored dependent health insurance coverage  
17 that is comparable to the coverage of the existing Program  
18 as determined by the administering agency's rules.

19 An entity that provides health insurance coverage (as  
20 defined in Section 2 of the Comprehensive Health Insurance Plan  
21 Act) to Illinois residents shall provide health insurance data  
22 match to the Department of Healthcare and Family Services as  
23 provided by and subject to Section 5.5 of the Illinois  
24 Insurance Code.

25 The Department of Healthcare and Family Services, in  
26 collaboration with the Department of Insurance, shall adopt

1 rules governing the exchange of information under this Section.  
2 The rules shall be consistent with all laws relating to the  
3 confidentiality or privacy of personal information or medical  
4 records, including provisions under the Federal Health  
5 Insurance Portability and Accountability Act (HIPAA).

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

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

18 (d) A child who is determined to be eligible for the  
19 Program shall remain eligible for 12 months, provided that the  
20 child maintains his or her residence in this State, has not yet  
21 attained 19 years of age, and is not excluded under subsection  
22 (e).

23 (e) A child is not eligible for coverage under the Program  
24 if:

25 (1) the premium required under Section 40 has not been  
26 timely paid; if the required premiums are not paid, the

1 liability of the Program shall be limited to benefits  
2 incurred under the Program for the time period for which  
3 premiums have been paid; re-enrollment shall be completed  
4 before the next covered medical visit, and the first  
5 month's required premium shall be paid in advance of the  
6 next covered medical visit; or

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

9 (f) The Department may adopt rules, including, but not  
10 limited to: rules regarding annual renewals of eligibility for  
11 the Program in conformance with Section 7 of this Act; rules  
12 providing for re-enrollment, grace periods, notice  
13 requirements, and hearing procedures under subdivision (e)(1)  
14 of this Section; and rules regarding what constitutes  
15 availability and affordability of private or  
16 employer-sponsored health insurance, with consideration of  
17 such factors as the percentage of income needed to purchase  
18 children or family health insurance, the availability of  
19 employer subsidies, and other relevant factors.

20 (g) Each child enrolled in the Program as of July 1, 2011  
21 whose family income, as established by the Department, exceeds  
22 300% of the federal poverty level may remain enrolled in the  
23 Program for 12 additional months commencing July 1, 2011.  
24 Continued enrollment pursuant to this subsection shall be  
25 available only if the child continues to meet all eligibility  
26 criteria established under the Program as of the effective date

1 of this amendatory Act of the 96th General Assembly without a  
2 break in coverage. Nothing contained in this subsection shall  
3 prevent a child from qualifying for any other health benefits  
4 program operated by the Department.

5 (Source: P.A. 96-1272, eff. 1-1-11; 96-1501, eff. 1-25-11.)

6 Section 99. Effective date. This Act takes effect upon  
7 becoming law."