



Rep. Anna Moeller

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10400HB5408ham001

LRB104 20688 BAB 35478 a

1 AMENDMENT TO HOUSE BILL 5408

2 AMENDMENT NO. _____. Amend House Bill 5408 by replacing
3 everything after the enacting clause with the following:

4 "Section 5. The State Finance Act is amended by adding
5 Section 5.1038 as follows:

6 (30 ILCS 105/5.1038 new)

7 Sec. 5.1038. The Abortion Access Fund.

8 Section 10. The Department of Public Health Powers and
9 Duties Law of the Civil Administrative Code of Illinois is
10 amended by adding Section 2310-426 as follows:

11 (20 ILCS 2310/2310-426 new)

12 Sec. 2310-426. Abortion Access Fund Grant Program.

13 (a) As used in this Section:

14 "Abortion" has the meaning given to that term in Section

1 1-10 of the Reproductive Health Act.

2 "Fund" means the Abortion Access Fund.

3 (b) The Department shall establish the Abortion Access
4 Fund Grant Program. Subject to appropriation, the Program
5 shall use moneys in the Fund to award grants to support access
6 to abortions throughout the State. Grants awarded under the
7 Program shall only be used to fund abortions for which the use
8 of federal funds is prohibited for patients who are uninsured
9 or underinsured with respect to those services.

10 (c) The Abortion Access Fund is created as a special fund
11 in the State treasury. The Fund shall consist of moneys
12 deposited into the Fund under Section 5-35 of the Illinois
13 Health Benefits Exchange Law.

14 Section 15. The Illinois Health Benefits Exchange Law is
15 amended by adding Section 5-35 as follows:

16 (215 ILCS 122/5-35 new)

17 Sec. 5-35. Separate allocation account reports and
18 transfers.

19 (a) Beginning on or before March 1, 2027, and on or before
20 March 1 of each year thereafter, a health insurance issuer
21 described in subsection (b) or (c) that has offered one or more
22 qualified health plans through the Illinois Health Benefits
23 Exchange shall report to the Department of Insurance an
24 accounting of receipts, disbursements, transfers of funds

1 between accounts, total dollar claims paid, accrued interest,
2 and the year-end balance each reporting year for the separate
3 allocation accounts that the issuer has established under 42
4 U.S.C. 18023(b)(2)(B) and 42 U.S.C. 18023(b)(2)(C) for
5 abortion services for which federal funding is prohibited. If
6 funds have been transferred from a separate allocation account
7 described in this subsection to any other account maintained
8 by, on behalf of, or for the benefit of the health insurance
9 issuer, the annual report shall attribute the amount of or
10 amounts within the transfer to premiums collected by plan year
11 under 42 U.S.C. 1303(B)(2)(B)(i)(II), except that the
12 attribution shall not result in premiums collected being less
13 than claims paid for services rendered during the plan year.
14 The annual reports shall include any related documentation and
15 shall adhere to any format as the Director of Insurance may
16 prescribe.

17 (b) For the report due on or before March 1, 2027, if a
18 health insurance issuer has an active certificate of authority
19 from the Director of Insurance on the reporting deadline, and
20 if the issuer has offered a qualified health plan in this State
21 through the Illinois Health Benefits Exchange at any time
22 since plan year 2014, regardless of whether it was a
23 Federally-facilitated Exchange, a State-based Exchange on the
24 Federal platform, or a State-based Exchange, the issuer shall
25 submit the report required under this Section for all
26 qualified health plans offered through this Exchange. With

1 respect to the separate allocation account described in
2 subsection (a), the health insurance issuer shall report as
3 prescribed by the Director of Insurance the balances and
4 transactions during the periods:

5 (1) January 1, 2014 through December 31, 2023;

6 (2) January 1, 2024 through December 31, 2024;

7 (3) January 1, 2025 through December 31, 2025;

8 (4) January 1, 2026 through December 31, 2026; and

9 (5) between December 31, 2026 and the date the report
10 is submitted, but only with respect to transfers from the
11 separate allocation account described in subsection (a) to
12 other accounts maintained by, on behalf of, or for the
13 benefit of the health insurance issuer.

14 (c) For annual reports due on or before March 1, 2028 and
15 on or before March 1 of each year thereafter, if a health
16 insurance issuer has an active certificate of authority from
17 the Director of Insurance on the reporting deadline, and if
18 the issuer offered a qualified health plan through the
19 Illinois Health Benefits Exchange during the preceding
20 calendar year, the issuer shall submit the report required
21 under this Section for that calendar year for all qualified
22 health plans offered through this Exchange. For the period
23 between the end of the calendar year and the date the report is
24 submitted, the report shall also include any transfers from
25 the separate allocation account described in subsection (a) to
26 other accounts maintained by, on behalf of, or for the benefit

1 of the health insurance issuer.

2 (d) While 42 U.S.C. 1303(B)(2)(B)(i)(II) remains in
3 effect, any premium funds collected by a health insurance
4 issuer under that provision shall be used only to pay for
5 abortions for which federal funding is prohibited, including
6 through the remittances under subsection (e).

7 (e) If after the 12-month period following the end of a
8 plan year the amount of premiums collected during the plan
9 year for abortions for which federal funding is prohibited
10 exceeds total claims paid for such services rendered during
11 the plan year, the Director of Insurance shall order the
12 health insurance issuer to remit funds, and the issuer shall
13 complete the remittance to the Department of Insurance as
14 follows:

15 (1) on or before September 1, 2027, 90% of the amount
16 of the excess for each of the plan years 2014 through 2025,
17 plus interest accrued on the excess; and

18 (2) on or before September 1, 2028, and on or before
19 September 1 of each year thereafter, 90% of the excess for
20 the second preceding plan year, plus interest accrued on
21 the excess.

22 Notwithstanding any other provision of this subsection, on
23 or before September 1, 2027 and on or before September 1 of
24 each year thereafter, the health insurance issuer shall remit
25 to the Department of Insurance all funds the health insurance
26 issuer previously transferred from the separate allocation

1 account described in subsection (a) to other accounts
2 maintained by, on behalf of, or for the benefit of the health
3 insurance issuer. Amounts transferred to other accounts
4 maintained by, on behalf of, or for the benefit of the health
5 insurance issuer shall count toward the excess in paragraph
6 (1) or (2) of this subsection for the plan year for which the
7 report attributed the transfer under subsection (a).

8 (f) All moneys remitted to the Department of Insurance
9 under this Section shall be deposited into the Abortion Access
10 Fund.

11 Section 99. Effective date. This Act takes effect upon
12 becoming law."