



104TH GENERAL ASSEMBLY

State of Illinois

2025 and 2026

SB2762

Introduced 1/13/2026, by Sen. Julie A. Morrison - Terri Bryant

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 5/356z.88 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
305 ILCS 5/5-16.8	

Amends the Illinois Insurance Code. Provides that a group or individual plan of accident and health insurance or managed care plan amended, delivered, issued, or renewed on or after January 1, 2027 shall provide coverage for medically prescribed seizure detection devices. Requires all covered seizure detection devices to be approved for use by individuals, and for the choice of device to be made based upon the individual's circumstances and medical needs in consultation with the individual's medical provider. Sets forth provisions prohibiting prior authorization and cost-sharing, as specified. Amends the State Employees Group Insurance Act of 1971, the Counties Code, the Illinois Municipal Code, the School Code, the Health Maintenance Organization Act, the Limited Health Service Organization Act, the Voluntary Health Services Plans Act, and the Illinois Public Aid Code to require coverage under the provisions of those Acts. Effective immediately.

LRB104 16499 BAB 29895 b

1 AN ACT concerning regulation.

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 (Text of Section before amendment by P.A. 104-1, 104-27,
8 104-68, 104-73, 104-289, 104-324, and 104-379)

9 Sec. 6.11. Required health benefits; Illinois Insurance
10 Code requirements. The program of health benefits shall
11 provide the post-mastectomy care benefits required to be
12 covered by a policy of accident and health insurance under
13 Section 356t of the Illinois Insurance Code. The program of
14 health benefits shall provide the coverage required under
15 Sections 356g, 356g.5, 356g.5-1, 356m, 356q, 356u, 356u.10,
16 356w, 356x, 356z.2, 356z.4, 356z.4a, 356z.5, 356z.6, 356z.8,
17 356z.9, 356z.10, 356z.11, 356z.12, 356z.13, 356z.14, 356z.15,
18 356z.17, 356z.22, 356z.25, 356z.26, 356z.29, 356z.30, 356z.32,
19 356z.33, 356z.36, 356z.40, 356z.41, 356z.45, 356z.46, 356z.47,
20 356z.51, 356z.53, 356z.54, 356z.55, 356z.56, 356z.57, 356z.59,
21 356z.60, 356z.61, 356z.62, 356z.64, 356z.67, 356z.68, 356z.70,
22 356z.71, 356z.74, 356z.76, ~~and 356z.77, and 356z.81 356z.80~~ of
23 the Illinois Insurance Code. The program of health benefits

1 must comply with Sections 155.22a, 155.37, 355b, 356z.19,
2 370c, and 370c.1 and Article XXXIIB of the Illinois Insurance
3 Code. The program of health benefits shall provide the
4 coverage required under Section 356m of the Illinois Insurance
5 Code and, for the employees of the State Employee Group
6 Insurance Program only, the coverage as also provided in
7 Section 6.11B of this Act. The Department of Insurance shall
8 enforce the requirements of this Section with respect to
9 Sections 370c and 370c.1 of the Illinois Insurance Code; all
10 other requirements of this Section shall be enforced by the
11 Department of Central Management Services.

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

18 (Source: P.A. 103-8, eff. 1-1-24; 103-84, eff. 1-1-24; 103-91,
19 eff. 1-1-24; 103-420, eff. 1-1-24; 103-445, eff. 1-1-24;
20 103-535, eff. 8-11-23; 103-551, eff. 8-11-23; 103-605, eff.
21 7-1-24; 103-718, eff. 7-19-24; 103-751, eff. 8-2-24; 103-870,
22 eff. 1-1-25; 103-914, eff. 1-1-25; 103-918, eff. 1-1-25;
23 103-951, eff. 1-1-25; 103-1024, eff. 1-1-25; 104-42, eff.
24 8-1-25; 104-417, eff. 8-15-25; revised 10-1-25.)

25 (Text of Section after amendment by P.A. 104-27, 104-68,

1 104-73, 104-289, 104-324, and 104-379 but before amendment by
2 P.A. 104-1)

3 Sec. 6.11. Required health benefits; Illinois Insurance
4 Code requirements. The program of health benefits shall
5 provide the post-mastectomy care benefits required to be
6 covered by a policy of accident and health insurance under
7 Section 356t of the Illinois Insurance Code. The program of
8 health benefits shall provide the coverage required under
9 Sections 356g, 356g.5, 356g.5-1, 356m, 356q, 356u, 356u.10,
10 356w, 356x, 356z.2, 356z.4, 356z.4a, 356z.5, 356z.6, 356z.8,
11 356z.9, 356z.10, 356z.11, 356z.12, 356z.13, 356z.14, 356z.15,
12 356z.17, 356z.22, 356z.25, 356z.26, 356z.29, 356z.30, 356z.32,
13 356z.33, 356z.36, 356z.40, 356z.41, 356z.45, 356z.46, 356z.47,
14 356z.51, 356z.53, 356z.54, 356z.55, 356z.56, 356z.57, 356z.59,
15 356z.60, 356z.61, 356z.62, 356z.64, 356z.67, 356z.68, 356z.70,
16 356z.71, 356z.74, 356z.76, ~~and 356z.77, and 356z.80, 356z.81,~~
17 356z.82, 356z.83, 356z.84, 356z.85, and 356z.88 of the
18 Illinois Insurance Code. The program of health benefits must
19 comply with Sections 155.22a, 155.37, 355b, 356z.19, 370c, and
20 370c.1 and Article XXXIIB of the Illinois Insurance Code. The
21 program of health benefits shall provide the coverage required
22 under Section 356m of the Illinois Insurance Code and, for the
23 employees of the State Employee Group Insurance Program only,
24 the coverage as also provided in Section 6.11B of this Act. The
25 Department of Insurance shall enforce the requirements of this
26 Section with respect to Sections 370c and 370c.1 and Article

1 XXXIIB of the Illinois Insurance Code; all other requirements
2 of this Section shall be enforced by the Department of Central
3 Management Services.

4 Rulemaking authority to implement Public Act 95-1045, if
5 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. 103-8, eff. 1-1-24; 103-84, eff. 1-1-24; 103-91,
11 eff. 1-1-24; 103-420, eff. 1-1-24; 103-445, eff. 1-1-24;
12 103-535, eff. 8-11-23; 103-551, eff. 8-11-23; 103-605, eff.
13 7-1-24; 103-718, eff. 7-19-24; 103-751, eff. 8-2-24; 103-870,
14 eff. 1-1-25; 103-914, eff. 1-1-25; 103-918, eff. 1-1-25;
15 103-951, eff. 1-1-25; 103-1024, eff. 1-1-25; 104-27, eff.
16 1-1-26, 104-42, eff. 8-1-25; 104-68, eff. 1-1-26; 104-73, eff.
17 1-1-26; 104-289, eff. 1-1-26; 104-324, eff. 1-1-26; 104-379,
18 eff. 1-1-26; 104-417, eff. 8-15-25; revised 10-1-25.)

19 (Text of Section after amendment by P.A. 104-1)

20 Sec. 6.11. Required health benefits; Illinois Insurance
21 Code requirements. The program of health benefits shall
22 provide the post-mastectomy care benefits required to be
23 covered by a policy of accident and health insurance under
24 Section 356t of the Illinois Insurance Code. The program of
25 health benefits shall provide the coverage required under

1 Sections 356g, 356g.5, 356g.5-1, 356m, 356q, 356u, 356u.10,
2 356w, 356x, 356z.2, 356z.4, 356z.4a, 356z.5, 356z.6, 356z.8,
3 356z.9, 356z.10, 356z.11, 356z.12, 356z.13, 356z.14, 356z.15,
4 356z.17, 356z.22, 356z.25, 356z.26, 356z.29, 356z.30, 356z.32,
5 356z.33, 356z.36, 356z.40, 356z.41, 356z.45, 356z.46, 356z.47,
6 356z.51, 356z.53, 356z.54, 356z.55, 356z.56, 356z.57, 356z.59,
7 356z.60, 356z.61, 356z.62, 356z.64, 356z.67, 356z.68, 356z.70,
8 356z.71, 356z.74, 356z.76, ~~and~~ 356z.77, 356z.79, ~~and~~ 356z.80,
9 356z.81, 356z.82, 356z.83, 356z.84, 356z.85, and 356z.88 of
10 the Illinois Insurance Code. The program of health benefits
11 must comply with Sections 155.22a, 155.37, 355b, 356z.19,
12 370c, and 370c.1 and Article XXXIIB of the Illinois Insurance
13 Code. The program of health benefits shall provide the
14 coverage required under Section 356m of the Illinois Insurance
15 Code and, for the employees of the State Employee Group
16 Insurance Program only, the coverage as also provided in
17 Section 6.11B of this Act. The Department of Insurance shall
18 enforce the requirements of this Section with respect to
19 Sections 370c and 370c.1 and Article XXXIIB of the Illinois
20 Insurance Code; all other requirements of this Section shall
21 be enforced by the Department of Central Management Services.

22 Rulemaking authority to implement Public Act 95-1045, if
23 any, is conditioned on the rules being adopted in accordance
24 with all provisions of the Illinois Administrative Procedure
25 Act and all rules and procedures of the Joint Committee on
26 Administrative Rules; any purported rule not so adopted, for

1 whatever reason, is unauthorized.

2 (Source: P.A. 103-8, eff. 1-1-24; 103-84, eff. 1-1-24; 103-91,
3 eff. 1-1-24; 103-420, eff. 1-1-24; 103-445, eff. 1-1-24;
4 103-535, eff. 8-11-23; 103-551, eff. 8-11-23; 103-605, eff.
5 7-1-24; 103-718, eff. 7-19-24; 103-751, eff. 8-2-24; 103-870,
6 eff. 1-1-25; 103-914, eff. 1-1-25; 103-918, eff. 1-1-25;
7 103-951, eff. 1-1-25; 103-1024, eff. 1-1-25; 104-1, eff.
8 7-1-27; 104-27, eff. 1-1-26, 104-42, eff. 8-1-25; 104-68, eff.
9 1-1-26; 104-73, eff. 1-1-26; 104-289, eff. 1-1-26; 104-324,
10 eff. 1-1-26; 104-379, eff. 1-1-26; 104-417, eff. 8-15-25;
11 revised 10-1-25.)

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

14 (55 ILCS 5/5-1069.3)

15 (Text of Section before amendment by P.A. 104-68, 104-73,
16 104-289, 104-324, and 104-379)

17 Sec. 5-1069.3. Required health benefits. If a county,
18 including a home rule county, is a self-insurer for purposes
19 of providing health insurance coverage for its employees, the
20 coverage shall include coverage for the post-mastectomy care
21 benefits required to be covered by a policy of accident and
22 health insurance under Section 356t and the coverage required
23 under Sections 356g, 356g.5, 356g.5-1, 356m, 356q, 356u,
24 356u.10, 356w, 356x, 356z.4, 356z.4a, 356z.6, 356z.8, 356z.9,

1 356z.10, 356z.11, 356z.12, 356z.13, 356z.14, 356z.15, 356z.22,
2 356z.25, 356z.26, 356z.29, 356z.30, 356z.32, 356z.33, 356z.36,
3 356z.40, 356z.41, 356z.45, 356z.46, 356z.47, 356z.48, 356z.51,
4 356z.53, 356z.54, 356z.56, 356z.57, 356z.59, 356z.60, 356z.61,
5 356z.62, 356z.64, 356z.67, 356z.68, 356z.70, 356z.71, 356z.74,
6 ~~and~~ 356z.77, 356z.79, and 356z.81 ~~356z.80~~ of the Illinois
7 Insurance Code. The coverage shall comply with Sections
8 155.22a, 355b, 356z.19, and 370c of the Illinois Insurance
9 Code. The Department of Insurance shall enforce the
10 requirements of this Section. The requirement that health
11 benefits be covered as provided in this Section is an
12 exclusive power and function of the State and is a denial and
13 limitation under Article VII, Section 6, subsection (h) of the
14 Illinois Constitution. A home rule county to which this
15 Section applies must comply with every provision of this
16 Section.

17 Rulemaking authority to implement Public Act 95-1045, if
18 any, is conditioned on the rules being adopted in accordance
19 with all provisions of the Illinois Administrative Procedure
20 Act and all rules and procedures of the Joint Committee on
21 Administrative Rules; any purported rule not so adopted, for
22 whatever reason, is unauthorized.

23 (Source: P.A. 103-84, eff. 1-1-24; 103-91, eff. 1-1-24;
24 103-420, eff. 1-1-24; 103-445, eff. 1-1-24; 103-535, eff.
25 8-11-23; 103-551, eff. 8-11-23; 103-605, eff. 7-1-24; 103-718,
26 eff. 7-19-24; 103-751, eff. 8-2-24; 103-914, eff. 1-1-25;

1 103-918, eff. 1-1-25; 103-1024, eff. 1-1-25; 104-1, eff.
2 6-9-25; 104-42, eff. 8-1-25; 104-417, eff. 8-15-25; revised
3 10-1-25.)

4 (Text of Section after amendment by P.A. 104-68, 104-73,
5 104-289, 104-324, and 104-379)

6 Sec. 5-1069.3. Required health benefits. If a county,
7 including a home rule county, is a self-insurer for purposes
8 of providing health insurance coverage for its employees, the
9 coverage shall include coverage for the post-mastectomy care
10 benefits required to be covered by a policy of accident and
11 health insurance under Section 356t and the coverage required
12 under Sections 356g, 356g.5, 356g.5-1, 356m, 356q, 356u,
13 356u.10, 356w, 356x, 356z.4, 356z.4a, 356z.6, 356z.8, 356z.9,
14 356z.10, 356z.11, 356z.12, 356z.13, 356z.14, 356z.15, 356z.22,
15 356z.25, 356z.26, 356z.29, 356z.30, 356z.32, 356z.33, 356z.36,
16 356z.40, 356z.41, 356z.45, 356z.46, 356z.47, 356z.48, 356z.51,
17 356z.53, 356z.54, 356z.56, 356z.57, 356z.59, 356z.60, 356z.61,
18 356z.62, 356z.64, 356z.67, 356z.68, 356z.70, 356z.71, 356z.74,
19 ~~and~~ 356z.77, 356z.79, and 356z.80, 356z.81, 356z.82, 356z.83,
20 356z.84, 356z.85, and 356z.88 of the Illinois Insurance Code.
21 The coverage shall comply with Sections 155.22a, 355b,
22 356z.19, and 370c of the Illinois Insurance Code. The
23 Department of Insurance shall enforce the requirements of this
24 Section. The requirement that health benefits be covered as
25 provided in this Section is an exclusive power and function of

1 the State and is a denial and limitation under Article VII,
2 Section 6, subsection (h) of the Illinois Constitution. A home
3 rule county to which this Section applies must comply with
4 every provision of this Section.

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

11 (Source: P.A. 103-84, eff. 1-1-24; 103-91, eff. 1-1-24;
12 103-420, eff. 1-1-24; 103-445, eff. 1-1-24; 103-535, eff.
13 8-11-23; 103-551, eff. 8-11-23; 103-605, eff. 7-1-24; 103-718,
14 eff. 7-19-24; 103-751, eff. 8-2-24; 103-914, eff. 1-1-25;
15 103-918, eff. 1-1-25; 103-1024, eff. 1-1-25; 104-1, eff.
16 6-9-25; 104-42, eff. 8-1-25; 104-68, eff. 1-1-26; 104-73, eff.
17 1-1-26; 104-289, eff. 1-1-26; 104-324, eff. 1-1-26; 104-379,
18 eff. 1-1-26; 104-417, eff. 8-15-25; revised 10-1-25.)

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

21 (65 ILCS 5/10-4-2.3)

22 (Text of Section before amendment by P.A. 104-68, 104-73,
23 104-289, 104-324, and 104-379)

24 Sec. 10-4-2.3. Required health benefits. If a

1 municipality, including a home rule municipality, is a
2 self-insurer for purposes of providing health insurance
3 coverage for its employees, the coverage shall include
4 coverage for the post-mastectomy care benefits required to be
5 covered by a policy of accident and health insurance under
6 Section 356t and the coverage required under Sections 356g,
7 356g.5, 356g.5-1, 356m, 356q, 356u, 356u.10, 356w, 356x,
8 356z.4, 356z.4a, 356z.6, 356z.8, 356z.9, 356z.10, 356z.11,
9 356z.12, 356z.13, 356z.14, 356z.15, 356z.22, 356z.25, 356z.26,
10 356z.29, 356z.30, 356z.32, 356z.33, 356z.36, 356z.40, 356z.41,
11 356z.45, 356z.46, 356z.47, 356z.48, 356z.51, 356z.53, 356z.54,
12 356z.56, 356z.57, 356z.59, 356z.60, 356z.61, 356z.62, 356z.64,
13 356z.67, 356z.68, 356z.70, 356z.71, 356z.74, ~~and~~ 356z.77,
14 356z.79, 356z.81 and 356z.88 ~~356z.80~~ of the Illinois Insurance
15 Code. The coverage shall comply with Sections 155.22a, 355b,
16 356z.19, and 370c of the Illinois Insurance Code. The
17 Department of Insurance shall enforce the requirements of this
18 Section. The requirement that health benefits be covered as
19 provided in this is an exclusive power and function of the
20 State and is a denial and limitation under Article VII,
21 Section 6, subsection (h) of the Illinois Constitution. A home
22 rule municipality to which this Section applies must comply
23 with every provision of this Section.

24 Rulemaking authority to implement Public Act 95-1045, if
25 any, is conditioned on the rules being adopted in accordance
26 with all provisions of the Illinois Administrative Procedure

1 Act and all rules and procedures of the Joint Committee on
2 Administrative Rules; any purported rule not so adopted, for
3 whatever reason, is unauthorized.

4 (Source: P.A. 103-84, eff. 1-1-24; 103-91, eff. 1-1-24;
5 103-420, eff. 1-1-24; 103-445, eff. 1-1-24; 103-535, eff.
6 8-11-23; 103-551, eff. 8-11-23; 103-605, eff. 7-1-24; 103-718,
7 eff. 7-19-24; 103-751, eff. 8-2-24; 103-914, eff. 1-1-25;
8 103-918, eff. 1-1-25; 103-1024, eff. 1-1-25; 104-1, eff.
9 6-9-25; 104-42, eff. 8-1-25; 104-417, eff. 8-15-25; revised
10 10-2-25.)

11 (Text of Section after amendment by P.A. 104-68, 104-73,
12 104-289, 104-324, and 104-379)

13 Sec. 10-4-2.3. Required health benefits. If a
14 municipality, including a home rule municipality, is a
15 self-insurer for purposes of providing health insurance
16 coverage for its employees, the coverage shall include
17 coverage for the post-mastectomy care benefits required to be
18 covered by a policy of accident and health insurance under
19 Section 356t and the coverage required under Sections 356g,
20 356g.5, 356g.5-1, 356m, 356q, 356u, 356u.10, 356w, 356x,
21 356z.4, 356z.4a, 356z.6, 356z.8, 356z.9, 356z.10, 356z.11,
22 356z.12, 356z.13, 356z.14, 356z.15, 356z.22, 356z.25, 356z.26,
23 356z.29, 356z.30, 356z.32, 356z.33, 356z.36, 356z.40, 356z.41,
24 356z.45, 356z.46, 356z.47, 356z.48, 356z.51, 356z.53, 356z.54,
25 356z.56, 356z.57, 356z.59, 356z.60, 356z.61, 356z.62, 356z.64,

1 356z.67, 356z.68, 356z.70, 356z.71, 356z.74, ~~and~~ 356z.77,
2 356z.79, ~~and~~ 356z.80, 356z.81, 356z.82, 356z.83, 356z.84,
3 356z.85, and 356z.88 of the Illinois Insurance Code. The
4 coverage shall comply with Sections 155.22a, 355b, 356z.19,
5 and 370c of the Illinois Insurance Code. The Department of
6 Insurance shall enforce the requirements of this Section. The
7 requirement that health benefits be covered as provided in
8 this is an exclusive power and function of the State and is a
9 denial and limitation under Article VII, Section 6, subsection
10 (h) of the Illinois Constitution. A home rule municipality to
11 which this Section applies must comply with every provision of
12 this Section.

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

19 (Source: P.A. 103-84, eff. 1-1-24; 103-91, eff. 1-1-24;
20 103-420, eff. 1-1-24; 103-445, eff. 1-1-24; 103-535, eff.
21 8-11-23; 103-551, eff. 8-11-23; 103-605, eff. 7-1-24; 103-718,
22 eff. 7-19-24; 103-751, eff. 8-2-24; 103-914, eff. 1-1-25;
23 103-918, eff. 1-1-25; 103-1024, eff. 1-1-25; 104-1, eff.
24 6-9-25; 104-42, eff. 8-1-25; 104-68, eff. 1-1-26; 104-73, eff.
25 1-1-26; 104-289, eff. 1-1-26; 104-324, eff. 1-1-26; 104-379,
26 eff. 1-1-26; 104-417, eff. 8-15-25; revised 10-2-25.)

1 Section 20. The School Code is amended by changing Section
2 10-22.3f as follows:

3 (105 ILCS 5/10-22.3f)

4 (Text of Section before amendment by P.A. 104-27, 104-68,
5 104-73, 104-289, 104-324, and 104-379)

6 Sec. 10-22.3f. Required health benefits. Insurance
7 protection and benefits for employees shall provide the
8 post-mastectomy care benefits required to be covered by a
9 policy of accident and health insurance under Section 356t and
10 the coverage required under Sections 356g, 356g.5, 356g.5-1,
11 356m, 356q, 356u, 356u.10, 356w, 356x, 356z.4, 356z.4a,
12 356z.6, 356z.8, 356z.9, 356z.11, 356z.12, 356z.13, 356z.14,
13 356z.15, 356z.22, 356z.25, 356z.26, 356z.29, 356z.30, 356z.32,
14 356z.33, 356z.36, 356z.40, 356z.41, 356z.45, 356z.46, 356z.47,
15 356z.51, 356z.53, 356z.54, 356z.56, 356z.57, 356z.59, 356z.60,
16 356z.61, 356z.62, 356z.64, 356z.67, 356z.68, 356z.70, 356z.71,
17 356z.74, ~~and 356z.77, 356z.79,~~ and 356z.81 ~~356z.80~~ of the
18 Illinois Insurance Code. Insurance policies shall comply with
19 Section 356z.19 of the Illinois Insurance Code. The coverage
20 shall comply with Sections 155.22a, 355b, and 370c of the
21 Illinois Insurance Code. The Department of Insurance shall
22 enforce the requirements of this Section.

23 Rulemaking authority to implement Public Act 95-1045, if
24 any, is conditioned on the rules being adopted in accordance

1 with all provisions of the Illinois Administrative Procedure
2 Act and all rules and procedures of the Joint Committee on
3 Administrative Rules; any purported rule not so adopted, for
4 whatever reason, is unauthorized.

5 (Source: P.A. 103-84, eff. 1-1-24; 103-91, eff. 1-1-24;
6 103-420, eff. 1-1-24; 103-445, eff. 1-1-24; 103-535, eff.
7 8-11-23; 103-551, eff. 8-11-23; 103-605, eff. 7-1-24; 103-718,
8 eff. 7-19-24; 103-751, eff. 8-2-24; 103-914, eff. 1-1-25;
9 103-918, eff. 1-1-25; 103-1024, eff. 1-1-25; 104-1, eff.
10 6-9-25; 104-42, eff. 8-1-25; 104-417, eff. 8-15-25; revised
11 10-2-25.)

12 (Text of Section after amendment by P.A. 104-27, 104-68,
13 104-73, 104-289, 104-324, and 104-379)

14 Sec. 10-22.3f. Required health benefits. Insurance
15 protection and benefits for employees shall provide the
16 post-mastectomy care benefits required to be covered by a
17 policy of accident and health insurance under Section 356t and
18 the coverage required under Sections 356g, 356g.5, 356g.5-1,
19 356m, 356q, 356u, 356u.10, 356w, 356x, 356z.4, 356z.4a,
20 356z.6, 356z.8, 356z.9, 356z.11, 356z.12, 356z.13, 356z.14,
21 356z.15, 356z.22, 356z.25, 356z.26, 356z.29, 356z.30, 356z.32,
22 356z.33, 356z.36, 356z.40, 356z.41, 356z.45, 356z.46, 356z.47,
23 356z.51, 356z.53, 356z.54, 356z.56, 356z.57, 356z.59, 356z.60,
24 356z.61, 356z.62, 356z.64, 356z.67, 356z.68, 356z.70, 356z.71,
25 356z.74, ~~and~~ 356z.77, 356z.79, ~~and~~ 356z.80, 356z.81, 356z.82,

1 356z.83, 356z.84, 356z.85, and 356z.88 of the Illinois
2 Insurance Code. Insurance policies shall comply with Section
3 356z.19 of the Illinois Insurance Code. The coverage shall
4 comply with Sections 155.22a, 355b, and 370c and Article
5 XXXIIB of the Illinois Insurance Code. The Department of
6 Insurance shall enforce the requirements of this Section.

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

13 (Source: P.A. 103-84, eff. 1-1-24; 103-91, eff. 1-1-24;
14 103-420, eff. 1-1-24; 103-445, eff. 1-1-24; 103-535, eff.
15 8-11-23; 103-551, eff. 8-11-23; 103-605, eff. 7-1-24; 103-718,
16 eff. 7-19-24; 103-751, eff. 8-2-24; 103-914, eff. 1-1-25;
17 103-918, eff. 1-1-25; 103-1024, eff. 1-1-25; 104-1, eff.
18 6-9-25; 104-27, eff. 1-1-26; 104-42, eff. 8-1-25; 104-68, eff.
19 1-1-26; 104-73, eff. 1-1-26; 104-289, eff. 1-1-26; 104-324,
20 eff. 1-1-26; 104-379, eff. 1-1-26; 104-417, eff. 8-15-25;
21 revised 10-2-25.)

22 Section 25. The Illinois Insurance Code is amended by
23 adding Section 356z.88 as follows:

24 (215 ILCS 5/356z.88 new)

1 Sec. 356z.88. Coverage for seizure detection devices.

2 (a) For the purposes of this Section, "seizure detection
3 device" means a monitoring device cleared by the United States
4 Food and Drug Administration, and any related technology,
5 application, service, or subscription supporting the
6 prescribed use of the device, that provides the following:

7 (1) individual monitoring and alert services relating
8 to seizure activity;

9 (2) detection or prediction of seizure activity and
10 transmission of notification of the seizure activity to
11 the individual or a caregiver for appropriate medical
12 response; or

13 (3) collection of data of the seizure activity of the
14 individual that can be used by a health care provider to
15 diagnose or appropriately treat a health care condition
16 that causes the seizure activity.

17 (b) A group or individual plan of accident and health
18 insurance or managed care plan amended, delivered, issued, or
19 renewed on or after January 1, 2027 shall provide coverage for
20 medically prescribed seizure detection devices.

21 (c) All seizure detection devices covered under this
22 Section shall be approved for use by individuals, and the
23 choice of device shall be made based upon the individual's
24 circumstances and medical needs in consultation with the
25 individual's medical provider.

26 (d) Any individual who has been prescribed a seizure

1 detection device shall not be required to obtain prior
2 authorization for coverage for a seizure detection device, and
3 coverage shall be continuous once the seizure detection device
4 is prescribed.

5 (e) A group or individual policy of accident and health
6 insurance or a managed care plan that is amended, delivered,
7 issued or renewed on or after January 1, 2027 shall not impose
8 a deductible, coinsurance, copayment, or any other
9 cost-sharing requirement on the coverage of a seizure
10 detection device. The provisions of this subsection do not
11 apply to coverage under this Section to the extent that the
12 coverage would disqualify a high-deductible health plan from
13 eligibility for a health savings account.

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

16 (215 ILCS 125/5-3) (from Ch. 111 1/2, par. 1411.2)

17 (Text of Section before amendment by P.A. 103-808, 104-28,
18 104-68, 104-73, 104-98, 104-289, 104-324, and 104-379)

19 Sec. 5-3. Illinois Insurance Code provisions.

20 (a) Health Maintenance Organizations shall be subject to
21 the provisions of Sections 133, 134, 136, 137, 139, 140,
22 141.1, 141.2, 141.3, 143, 143.31, 143c, 147, 148, 149, 151,
23 152, 153, 154, 154.5, 154.6, 154.7, 154.8, 155.04, 155.22a,
24 155.49, 352c, 355.2, 355.3, 355.6, 355b, 355c, 356f, 356g.5-1,

1 356m, 356q, 356u.10, 356v, 356w, 356x, 356z.2, 356z.3a,
2 356z.4, 356z.4a, 356z.5, 356z.6, 356z.8, 356z.9, 356z.10,
3 356z.11, 356z.12, 356z.13, 356z.14, 356z.15, 356z.17, 356z.18,
4 356z.19, 356z.20, 356z.21, 356z.22, 356z.23, 356z.24, 356z.25,
5 356z.26, 356z.28, 356z.29, 356z.30, 356z.31, 356z.32, 356z.33,
6 356z.34, 356z.35, 356z.36, 356z.37, 356z.38, 356z.39, 356z.40,
7 356z.40a, 356z.41, 356z.44, 356z.45, 356z.46, 356z.47,
8 356z.48, 356z.49, 356z.50, 356z.51, 356z.53, 356z.54, 356z.55,
9 356z.56, 356z.57, 356z.58, 356z.59, 356z.60, 356z.61, 356z.62,
10 356z.63, 356z.64, 356z.65, 356z.66, 356z.67, 356z.68, 356z.69,
11 356z.70, 356z.71, 356z.72, 356z.73, 356z.74, 356z.75, 356z.76,
12 356z.77, 356z.78, 356z.79, 356z.81, ~~356z.80~~, 364, 364.01,
13 364.3, 367.2, 367.2-5, 367i, 368a, 368b, 368c, 368d, 368e,
14 370c, 370c.1, 401, 401.1, 402, 403, 403A, 408, 408.2, 409,
15 412, 444, and 444.1, paragraph (c) of subsection (2) of
16 Section 367, and Articles IIA, VIII 1/2, XII, XII 1/2, XIII,
17 XIII 1/2, XXV, XXVI, and XXXIIB of the Illinois Insurance
18 Code. Section 356z.81 ~~365z.80~~ of the Illinois Insurance Code
19 is not applicable to health care plans under contract with the
20 Department of Healthcare and Family Services.

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

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

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

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

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

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

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

24 (3) the Director shall have the power to require the
25 following information:

26 (A) certification by an independent actuary of the

1 adequacy of the reserves of the Health Maintenance
2 Organization sought to be acquired;

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

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

14 (D) such other information as the Director shall
15 require.

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

22 (e) In considering any management contract or service
23 agreement subject to Section 141.1 of the Illinois Insurance
24 Code, the Director (i) shall, in addition to the criteria
25 specified in Section 141.2 of the Illinois Insurance Code,
26 take into account the effect of the management contract or

1 service agreement on the continuation of benefits to enrollees
2 and the financial condition of the health maintenance
3 organization to be managed or serviced, and (ii) need not take
4 into account the effect of the management contract or service
5 agreement on competition.

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

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

19 (ii) the amount of the refund or additional premium
20 shall not exceed 20% of the Health Maintenance
21 Organization's profitable or unprofitable experience with
22 respect to the group or other enrollment unit for the
23 period (and, for purposes of a refund or additional
24 premium, the profitable or unprofitable experience shall
25 be calculated taking into account a pro rata share of the
26 Health Maintenance Organization's administrative and

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

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

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

24 (g) Rulemaking authority to implement Public Act 95-1045,
25 if any, is conditioned on the rules being adopted in
26 accordance with all provisions of the Illinois Administrative

1 Procedure Act and all rules and procedures of the Joint
2 Committee on Administrative Rules; any purported rule not so
3 adopted, for whatever reason, is unauthorized.

4 (Source: P.A. 103-84, eff. 1-1-24; 103-91, eff. 1-1-24;
5 103-123, eff. 1-1-24; 103-154, eff. 6-30-23; 103-420, eff.
6 1-1-24; 103-426, eff. 8-4-23; 103-445, eff. 1-1-24; 103-551,
7 eff. 8-11-23; 103-605, eff. 7-1-24; 103-618, eff. 1-1-25;
8 103-649, eff. 1-1-25; 103-656, eff. 1-1-25; 103-700, eff.
9 1-1-25; 103-718, eff. 7-19-24; 103-751, eff. 8-2-24; 103-753,
10 eff. 8-2-24; 103-758, eff. 1-1-25; 103-777, eff. 8-2-24;
11 103-914, eff. 1-1-25; 103-918, eff. 1-1-25; 103-1024, eff.
12 1-1-25; 104-1, eff. 6-9-25; 104-42, eff. 8-1-25; 104-334, eff.
13 8-15-25; 104-417, eff. 8-15-25; revised 10-3-25.)

14 (Text of Section after amendment by P.A. 103-808, 104-28,
15 104-68, 104-73, 104-98, 104-289, 104-324, and 104-379)

16 Sec. 5-3. Illinois Insurance Code provisions.

17 (a) Health Maintenance Organizations shall be subject to
18 the provisions of Sections 133, 134, 136, 137, 139, 140,
19 141.1, 141.2, 141.3, 143, 143.31, 143c, 147, 148, 149, 151,
20 152, 153, 154, 154.5, 154.6, 154.7, 154.8, 155.04, 155.22a,
21 155.49, 352c, 355.2, 355.3, 355.6, 355.7, 355b, 355c, 356f,
22 356g, 356g.5-1, 356m, 356q, 356u.10, 356v, 356w, 356x, 356z.2,
23 356z.3a, 356z.4, 356z.4a, 356z.5, 356z.6, 356z.8, 356z.9,
24 356z.10, 356z.11, 356z.12, 356z.13, 356z.14, 356z.15, 356z.17,
25 356z.18, 356z.19, 356z.20, 356z.21, 356z.22, 356z.23, 356z.24,

1 356z.25, 356z.26, 356z.28, 356z.29, 356z.30, 356z.31, 356z.32,
2 356z.33, 356z.34, 356z.35, 356z.36, 356z.37, 356z.38, 356z.39,
3 356z.40, 356z.40a, 356z.41, 356z.44, 356z.45, 356z.46,
4 356z.47, 356z.48, 356z.49, 356z.50, 356z.51, 356z.53, 356z.54,
5 356z.55, 356z.56, 356z.57, 356z.58, 356z.59, 356z.60, 356z.61,
6 356z.62, 356z.63, 356z.64, 356z.65, 356z.66, 356z.67, 356z.68,
7 356z.69, 356z.70, 356z.71, 356z.72, 356z.73, 356z.74, 356z.75,
8 356z.76, 356z.77, 356z.78, 356z.79, 356z.80, 356z.81, 356z.82,
9 356z.83, 356z.84, 356z.85, 356z.88, 364, 364.01, 364.3, 367.2,
10 367.2-5, 367i, 368a, 368b, 368c, 368d, 368e, 370a, 370c,
11 370c.1, 401, 401.1, 402, 403, 403A, 408, 408.2, 409, 412, 444,
12 and 444.1, paragraph (c) of subsection (2) of Section 367, and
13 Articles IIA, VIII 1/2, XII, XII 1/2, XIII, XIII 1/2, XXV,
14 XXVI, and XXXIIB of the Illinois Insurance Code.

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

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

21 (2) a corporation organized under the laws of this
22 State; or

23 (3) a corporation organized under the laws of another
24 state, 30% or more of the enrollees of which are residents
25 of this State, except a corporation subject to
26 substantially the same requirements in its state of

1 organization as is a "domestic company" under Article VIII
2 1/2 of the Illinois Insurance Code.

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

6 (1) the Director shall give primary consideration to
7 the continuation of benefits to enrollees and the
8 financial conditions of the acquired Health Maintenance
9 Organization after the merger, consolidation, or other
10 acquisition of control takes effect;

11 (2) (i) the criteria specified in subsection (1) (b) of
12 Section 131.8 of the Illinois Insurance Code shall not
13 apply and (ii) the Director, in making his determination
14 with respect to the merger, consolidation, or other
15 acquisition of control, need not take into account the
16 effect on competition of the merger, consolidation, or
17 other acquisition of control;

18 (3) the Director shall have the power to require the
19 following information:

20 (A) certification by an independent actuary of the
21 adequacy of the reserves of the Health Maintenance
22 Organization sought to be acquired;

23 (B) pro forma financial statements reflecting the
24 combined balance sheets of the acquiring company and
25 the Health Maintenance Organization sought to be
26 acquired as of the end of the preceding year and as of

1 a date 90 days prior to the acquisition, as well as pro
2 forma financial statements reflecting projected
3 combined operation for a period of 2 years;

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

8 (D) such other information as the Director shall
9 require.

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

16 (e) In considering any management contract or service
17 agreement subject to Section 141.1 of the Illinois Insurance
18 Code, the Director (i) shall, in addition to the criteria
19 specified in Section 141.2 of the Illinois Insurance Code,
20 take into account the effect of the management contract or
21 service agreement on the continuation of benefits to enrollees
22 and the financial condition of the health maintenance
23 organization to be managed or serviced, and (ii) need not take
24 into account the effect of the management contract or service
25 agreement on competition.

26 (f) Except for small employer groups as defined in the

1 Small Employer Rating, Renewability and Portability Health
2 Insurance Act and except for medicare supplement policies as
3 defined in Section 363 of the Illinois Insurance Code, a
4 Health Maintenance Organization may by contract agree with a
5 group or other enrollment unit to effect refunds or charge
6 additional premiums under the following terms and conditions:

7 (i) the amount of, and other terms and conditions with
8 respect to, the refund or additional premium are set forth
9 in the group or enrollment unit contract agreed in advance
10 of the period for which a refund is to be paid or
11 additional premium is to be charged (which period shall
12 not be less than one year); and

13 (ii) the amount of the refund or additional premium
14 shall not exceed 20% of the Health Maintenance
15 Organization's profitable or unprofitable experience with
16 respect to the group or other enrollment unit for the
17 period (and, for purposes of a refund or additional
18 premium, the profitable or unprofitable experience shall
19 be calculated taking into account a pro rata share of the
20 Health Maintenance Organization's administrative and
21 marketing expenses, but shall not include any refund to be
22 made or additional premium to be paid pursuant to this
23 subsection (f)). The Health Maintenance Organization and
24 the group or enrollment unit may agree that the profitable
25 or unprofitable experience may be calculated taking into
26 account the refund period and the immediately preceding 2

1 plan years.

2 The Health Maintenance Organization shall include a
3 statement in the evidence of coverage issued to each enrollee
4 describing the possibility of a refund or additional premium,
5 and upon request of any group or enrollment unit, provide to
6 the group or enrollment unit a description of the method used
7 to calculate (1) the Health Maintenance Organization's
8 profitable experience with respect to the group or enrollment
9 unit and the resulting refund to the group or enrollment unit
10 or (2) the Health Maintenance Organization's unprofitable
11 experience with respect to the group or enrollment unit and
12 the resulting additional premium to be paid by the group or
13 enrollment unit.

14 In no event shall the Illinois Health Maintenance
15 Organization Guaranty Association be liable to pay any
16 contractual obligation of an insolvent organization to pay any
17 refund authorized under this Section.

18 (g) Rulemaking authority to implement Public Act 95-1045,
19 if any, is conditioned on the rules being adopted in
20 accordance with all provisions of the Illinois Administrative
21 Procedure Act and all rules and procedures of the Joint
22 Committee on Administrative Rules; any purported rule not so
23 adopted, for whatever reason, is unauthorized.

24 (Source: P.A. 103-84, eff. 1-1-24; 103-91, eff. 1-1-24;
25 103-123, eff. 1-1-24; 103-154, eff. 6-30-23; 103-420, eff.
26 1-1-24; 103-426, eff. 8-4-23; 103-445, eff. 1-1-24; 103-551,

1 eff. 8-11-23; 103-605, eff. 7-1-24; 103-618, eff. 1-1-25;
2 103-649, eff. 1-1-25; 103-656, eff. 1-1-25; 103-700, eff.
3 1-1-25; 103-718, eff. 7-19-24; 103-751, eff. 8-2-24; 103-753,
4 eff. 8-2-24; 103-758, eff. 1-1-25; 103-777, eff. 8-2-24;
5 103-808, eff. 1-1-26; 103-914, eff. 1-1-25; 103-918, eff.
6 1-1-25; 103-1024, eff. 1-1-25; 104-1, eff. 6-9-25; 104-28,
7 eff. 1-1-26; 104-42, eff. 8-1-25; 104-68, eff. 1-1-26; 104-73,
8 eff. 1-1-26; 104-98, eff. 1-1-26; 104-289, eff. 1-1-26;
9 104-324, eff. 1-1-26; 104-334, eff. 8-15-25; 104-379, eff.
10 1-1-26; 104-417, eff. 8-15-25; revised 10-3-25.)

11 Section 35. The Limited Health Service Organization Act is
12 amended by changing Section 4003 as follows:

13 (215 ILCS 130/4003) (from Ch. 73, par. 1504-3)

14 (Text of Section before amendment by P.A. 104-73, 104-98,
15 104-289, 104-324, and 104-379)

16 Sec. 4003. Illinois Insurance Code provisions. Limited
17 health service organizations shall be subject to the
18 provisions of Sections 133, 134, 136, 137, 139, 140, 141.1,
19 141.2, 141.3, 143, 143.31, 143c, 147, 148, 149, 151, 152, 153,
20 154, 154.5, 154.6, 154.7, 154.8, 155.04, 155.37, 155.49, 352c,
21 355.2, 355.3, 355b, 355d, 356m, 356q, 356v, 356z.4, 356z.4a,
22 356z.10, 356z.21, 356z.22, 356z.25, 356z.26, 356z.29, 356z.32,
23 356z.33, 356z.41, 356z.46, 356z.47, 356z.51, 356z.53, 356z.54,
24 356z.57, 356z.59, 356z.61, 356z.64, 356z.67, 356z.68, 356z.71,

1 356z.73, 356z.74, 356z.75, 356z.79, 356z.81, ~~356z.80~~, 364.3,
2 368a, 401, 401.1, 402, 403, 403A, 408, 408.2, 409, 412, 444,
3 and 444.1 and Articles IIA, VIII 1/2, XII, XII 1/2, XIII, XIII
4 1/2, XXV, XXVI, and XXXIIB of the Illinois Insurance Code.
5 Nothing in this Section shall require a limited health care
6 plan to cover any service that is not a limited health service.
7 For purposes of the Illinois Insurance Code, except for
8 Sections 444 and 444.1 and Articles XIII and XIII 1/2, limited
9 health service organizations in the following categories are
10 deemed to be domestic companies:

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

12 (2) a corporation organized under the laws of another
13 state, 30% or more of the enrollees of which are residents
14 of this State, except a corporation subject to
15 substantially the same requirements in its state of
16 organization as is a domestic company under Article VIII
17 1/2 of the Illinois Insurance Code.

18 (Source: P.A. 103-84, eff. 1-1-24; 103-91, eff. 1-1-24;
19 103-420, eff. 1-1-24; 103-426, eff. 8-4-23; 103-445, eff.
20 1-1-24; 103-605, eff. 7-1-24; 103-649, eff. 1-1-25; 103-656,
21 eff. 1-1-25; 103-700, eff. 1-1-25; 103-718, eff. 7-19-24;
22 103-751, eff. 8-2-24; 103-758, eff. 1-1-25; 103-832, eff.
23 1-1-25; 103-1024, eff. 1-1-25; 104-1, eff. 6-9-25; 104-42,
24 eff. 8-1-25; 104-334, eff. 8-15-25; 104-417, eff. 8-15-25;
25 revised 10-3-25.)

1 (Text of Section after amendment by P.A. 104-73, 104-98,
2 104-289, 104-324, and 104-379)

3 Sec. 4003. Illinois Insurance Code provisions. Limited
4 health service organizations shall be subject to the
5 provisions of Sections 133, 134, 136, 137, 139, 140, 141.1,
6 141.2, 141.3, 143, 143.31, 143c, 147, 148, 149, 151, 152, 153,
7 154, 154.5, 154.6, 154.7, 154.8, 155.04, 155.37, 155.49, 352c,
8 355.2, 355.3, 355b, 355d, 356m, 356q, 356v, 356z.4, 356z.4a,
9 356z.10, 356z.21, 356z.22, 356z.25, 356z.26, 356z.29, 356z.32,
10 356z.33, 356z.41, 356z.46, 356z.47, 356z.51, 356z.53, 356z.54,
11 356z.57, 356z.59, 356z.61, 356z.64, 356z.67, 356z.68, 356z.71,
12 356z.73, 356z.74, 356z.75, 356z.79, 356z.80, 356z.81, 356z.83,
13 356z.84, 356z.85, 356z.88, 364.3, 368a, 370a, 401, 401.1, 402,
14 403, 403A, 408, 408.2, 409, 412, 444, and 444.1 and Articles
15 IIA, VIII 1/2, XII, XII 1/2, XIII, XIII 1/2, XXV, XXVI, and
16 XXXIIB of the Illinois Insurance Code. Nothing in this Section
17 shall require a limited health care plan to cover any service
18 that is not a limited health service. For purposes of the
19 Illinois Insurance Code, except for Sections 444 and 444.1 and
20 Articles XIII and XIII 1/2, limited health service
21 organizations in the following categories are deemed to be
22 domestic companies:

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

24 (2) a corporation organized under the laws of another
25 state, 30% or more of the enrollees of which are residents
26 of this State, except a corporation subject to

1 substantially the same requirements in its state of
2 organization as is a domestic company under Article VIII
3 1/2 of the Illinois Insurance Code.

4 (Source: P.A. 103-84, eff. 1-1-24; 103-91, eff. 1-1-24;
5 103-420, eff. 1-1-24; 103-426, eff. 8-4-23; 103-445, eff.
6 1-1-24; 103-605, eff. 7-1-24; 103-649, eff. 1-1-25; 103-656,
7 eff. 1-1-25; 103-700, eff. 1-1-25; 103-718, eff. 7-19-24;
8 103-751, eff. 8-2-24; 103-758, eff. 1-1-25; 103-832, eff.
9 1-1-25; 103-1024, eff. 1-1-25; 104-1, eff. 6-9-25; 104-42,
10 eff. 8-1-25; 104-73, eff. 1-1-26; 104-98, eff. 1-1-26;
11 104-289, eff. 1-1-26; 104-324, eff. 1-1-26; 104-334, eff.
12 8-15-25; 104-379, eff. 1-1-26; 104-417, eff. 8-15-25; revised
13 10-3-25.)

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. 104-28, 104-73,
18 104-98, 104-289, 104-324, and 104-379)

19 Sec. 10. Application of Insurance Code provisions. Health
20 services plan corporations and all persons interested therein
21 or dealing therewith shall be subject to the provisions of
22 Articles IIA and XII 1/2 and Sections 3.1, 133, 136, 139, 140,
23 143, 143.31, 143c, 149, 155.22a, 155.37, 354, 355.2, 355.3,
24 355b, 355d, 356g, 356g.5, 356g.5-1, 356m, 356q, 356r, 356t,

1 356u, 356u.10, 356v, 356w, 356x, 356y, 356z.1, 356z.2,
2 356z.3a, 356z.4, 356z.4a, 356z.5, 356z.6, 356z.8, 356z.9,
3 356z.10, 356z.11, 356z.12, 356z.13, 356z.14, 356z.15, 356z.18,
4 356z.19, 356z.21, 356z.22, 356z.25, 356z.26, 356z.29, 356z.30,
5 356z.32, 356z.32a, 356z.33, 356z.40, 356z.41, 356z.46,
6 356z.47, 356z.51, 356z.53, 356z.54, 356z.56, 356z.57, 356z.59,
7 356z.60, 356z.61, 356z.62, 356z.64, 356z.67, 356z.68, 356z.71,
8 356z.72, 356z.74, 356z.75, 356z.77, 356z.79, 356z.81, ~~356z.80~~,
9 364.01, 364.3, 367.2, 368a, 401, 401.1, 402, 403, 403A, 408,
10 408.2, and 412, and paragraphs (7) and (15) of Section 367 of
11 the Illinois Insurance Code.

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

18 (Source: P.A. 103-84, eff. 1-1-24; 103-91, eff. 1-1-24;
19 103-420, eff. 1-1-24; 103-445, eff. 1-1-24; 103-551, eff.
20 8-11-23; 103-605, eff. 7-1-24; 103-656, eff. 1-1-25; 103-718,
21 eff. 7-19-24; 103-751, eff. 8-2-24; 103-753, eff. 8-2-24;
22 103-758, eff. 1-1-25; 103-832, eff. 1-1-25; 103-914, eff.
23 1-1-25; 103-918, eff. 1-1-25; 103-1024, eff. 1-1-25; 104-1,
24 eff. 6-9-25; 104-42, eff. 8-1-25; 104-417, eff. 8-15-25;
25 revised 10-3-25.)

1 (Text of Section after amendment by P.A. 104-28, 104-73,
2 104-98, 104-289, 104-324, and 104-379)

3 Sec. 10. Application of Illinois Insurance Code
4 provisions. Health services plan corporations and all persons
5 interested therein or dealing therewith shall be subject to
6 the provisions of Articles IIA and XII 1/2 and Sections 3.1,
7 133, 136, 139, 140, 143, 143.31, 143c, 149, 155.22a, 155.37,
8 354, 355.2, 355.3, 355.7, 355b, 355d, 356g, 356g.5, 356g.5-1,
9 356m, 356q, 356r, 356t, 356u, 356u.10, 356v, 356w, 356x, 356y,
10 356z.1, 356z.2, 356z.3a, 356z.4, 356z.4a, 356z.5, 356z.6,
11 356z.8, 356z.9, 356z.10, 356z.11, 356z.12, 356z.13, 356z.14,
12 356z.15, 356z.18, 356z.19, 356z.21, 356z.22, 356z.25, 356z.26,
13 356z.29, 356z.30, 356z.32, 356z.32a, 356z.33, 356z.40,
14 356z.41, 356z.46, 356z.47, 356z.51, 356z.53, 356z.54, 356z.56,
15 356z.57, 356z.59, 356z.60, 356z.61, 356z.62, 356z.64, 356z.67,
16 356z.68, 356z.71, 356z.72, 356z.74, 356z.75, 356z.77, 356z.79,
17 356z.80, 356z.81, 356z.83, 356z.84, 356z.85, 356z.88, 364.01,
18 364.3, 367.2, 368a, 370a, 401, 401.1, 402, 403, 403A, 408,
19 408.2, and 412, and paragraphs (7) and (15) of Section 367 of
20 the Illinois Insurance Code.

21 Rulemaking authority to implement Public Act 95-1045, if
22 any, is conditioned on the rules being adopted in accordance
23 with all provisions of the Illinois Administrative Procedure
24 Act and all rules and procedures of the Joint Committee on
25 Administrative Rules; any purported rule not so adopted, for
26 whatever reason, is unauthorized.

1 (Source: P.A. 103-84, eff. 1-1-24; 103-91, eff. 1-1-24;
2 103-420, eff. 1-1-24; 103-445, eff. 1-1-24; 103-551, eff.
3 8-11-23; 103-605, eff. 7-1-24; 103-656, eff. 1-1-25; 103-718,
4 eff. 7-19-24; 103-751, eff. 8-2-24; 103-753, eff. 8-2-24;
5 103-758, eff. 1-1-25; 103-832, eff. 1-1-25; 103-914, eff.
6 1-1-25; 103-918, eff. 1-1-25; 103-1024, eff. 1-1-25; 104-1,
7 eff. 6-9-25; 104-28, eff. 1-1-26; 104-42, eff. 8-1-25; 104-73,
8 eff. 1-1-26; 104-98, eff. 1-1-26; 104-289, eff. 1-1-26;
9 104-324, eff. 1-1-26; 104-379, eff. 1-1-26; 104-417, eff.
10 8-15-25; revised 10-3-25.)

11 Section 45. The Illinois Public Aid Code is amended by
12 changing Section 5-16.8 as follows:

13 (305 ILCS 5/5-16.8)

14 (Text of Section before amendment by P.A. 104-73, 104-324,
15 and 104-379)

16 Sec. 5-16.8. Required health benefits. The medical
17 assistance program shall (i) provide the post-mastectomy care
18 benefits required to be covered by a policy of accident and
19 health insurance under Section 356t and the coverage required
20 under Sections 356g.5, 356q, 356u, 356w, 356x, 356z.6,
21 356z.26, 356z.29, 356z.32, 356z.33, 356z.34, 356z.35, 356z.46,
22 356z.47, 356z.51, 356z.53, 356z.59, 356z.60, 356z.61, 356z.64,
23 356z.67, 356z.71, and 356z.75 of the Illinois Insurance Code,
24 (ii) be subject to the provisions of Sections 356z.19,

1 356z.44, 356z.49, 364.01, 370c, and 370c.1 of the Illinois
2 Insurance Code, and (iii) be subject to the provisions of
3 subsection (d-5) of Section 10 of the Network Adequacy and
4 Transparency Act.

5 The Department, by rule, shall adopt a model similar to
6 the requirements of Section 356z.39 of the Illinois Insurance
7 Code.

8 On and after July 1, 2012, the Department shall reduce any
9 rate of reimbursement for services or other payments or alter
10 any methodologies authorized by this Code to reduce any rate
11 of reimbursement for services or other payments in accordance
12 with Section 5-5e.

13 To ensure full access to the benefits set forth in this
14 Section, on and after January 1, 2016, the Department shall
15 ensure that provider and hospital reimbursement for
16 post-mastectomy care benefits required under this Section are
17 no lower than the Medicare reimbursement rate.

18 (Source: P.A. 103-84, eff. 1-1-24; 103-91, eff. 1-1-24;
19 103-420, eff. 1-1-24; 103-605, eff. 7-1-24; 103-703, eff.
20 1-1-25; 103-758, eff. 1-1-25; 103-1024, eff. 1-1-25; 104-417,
21 eff. 8-15-25.)

22 (Text of Section after amendment by P.A. 104-73, 104-324,
23 and 104-379)

24 Sec. 5-16.8. Required health benefits. The medical
25 assistance program shall (i) provide the post-mastectomy care

1 benefits required to be covered by a policy of accident and
2 health insurance under Section 356t and the coverage required
3 under Sections 356g.5, 356q, 356u, 356w, 356x, 356z.6,
4 356z.26, 356z.29, 356z.32, 356z.33, 356z.34, 356z.35, 356z.46,
5 356z.47, 356z.51, 356z.53, 356z.59, 356z.60, 356z.61, 356z.64,
6 356z.67, 356z.71, ~~and 356z.75, and 356z.80,~~ 356z.84, 356z.85,
7 and 356z.88 of the Illinois Insurance Code, (ii) be subject to
8 the provisions of Sections 356z.19, 356z.44, 356z.49, 364.01,
9 370c, and 370c.1 of the Illinois Insurance Code, and (iii) be
10 subject to the provisions of subsection (d-5) of Section 10 of
11 the Network Adequacy and Transparency Act.

12 The Department, by rule, shall adopt a model similar to
13 the requirements of Section 356z.39 of the Illinois Insurance
14 Code.

15 On and after July 1, 2012, the Department shall reduce any
16 rate of reimbursement for services or other payments or alter
17 any methodologies authorized by this Code to reduce any rate
18 of reimbursement for services or other payments in accordance
19 with Section 5-5e.

20 To ensure full access to the benefits set forth in this
21 Section, on and after January 1, 2016, the Department shall
22 ensure that provider and hospital reimbursement for
23 post-mastectomy care benefits required under this Section are
24 no lower than the Medicare reimbursement rate.

25 (Source: P.A. 103-84, eff. 1-1-24; 103-91, eff. 1-1-24;
26 103-420, eff. 1-1-24; 103-605, eff. 7-1-24; 103-703, eff.

1 1-1-25; 103-758, eff. 1-1-25; 103-1024, eff. 1-1-25; 104-73,
2 eff. 1-1-26; 104-324, eff. 1-1-26; 104-379, eff. 1-1-26;
3 104-417, eff. 8-15-25; revised 10-3-25.)

4 Section 95. No acceleration or delay. Where this Act makes
5 changes in a statute that is represented in this Act by text
6 that is not yet or no longer in effect (for example, a Section
7 represented by multiple versions), the use of that text does
8 not accelerate or delay the taking effect of (i) the changes
9 made by this Act or (ii) provisions derived from any other
10 Public Act.

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