



104TH GENERAL ASSEMBLY

State of Illinois

2025 and 2026

SB2899

Introduced 1/27/2026, by Sen. Willie Preston

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	
30 ILCS 805/8.50 new	

Amends the Illinois Insurance Code. Provides that a group or individual policy of accident and health insurance or a managed care plan that is amended, delivered, issued, or renewed on or after January 1, 2028 that provides coverage for: habilitative services shall provide coverage for habilitative speech therapy as a treatment for stuttering, regardless of whether the stuttering is classified as developmental; rehabilitative services shall provide coverage for rehabilitative speech therapy as a treatment for stuttering; or both habilitative services and rehabilitative services shall provide coverage for habilitative speech therapy as a treatment for stuttering, regardless of whether the stuttering is classified as developmental, and shall provide coverage for rehabilitative speech therapy as a treatment for stuttering. Sets forth requirements and limitations for the coverage. 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. Amends the State Mandates Act to require implementation without reimbursement. Effective January 1, 2028.

LRB104 16346 BAB 29733 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, and 356z.81 ~~356z.80~~ of the Illinois Insurance Code.
15 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 of treatment for stuttering.

2 (a) As used in this Section:

3 "Habilitative services" means health care services that
4 help a person keep, learn, or improve skills and functioning
5 for daily living.

6 "Habilitative speech therapy" means speech therapy that
7 helps a person keep, learn, or improve skills and functioning
8 for daily living.

9 "Rehabilitative services" means health care services that
10 help a person restore or improve skills and functioning for
11 daily living that have been lost or impaired.

12 "Rehabilitative speech therapy" means speech therapy that
13 helps a person restore or improve skills and functioning for
14 daily living that have been lost or impaired.

15 (b) Except as provided in subsection (d) of this Section,
16 a group or individual policy of accident and health insurance
17 or a managed care plan that is amended, delivered, issued, or
18 renewed on or after January 1, 2028 that provides coverage
19 for:

20 (1) habilitative services shall provide coverage for
21 habilitative speech therapy as a treatment for stuttering,
22 regardless of whether the stuttering is classified as
23 developmental;

24 (2) rehabilitative services shall provide coverage for
25 rehabilitative speech therapy as a treatment for
26 stuttering; or

1 (3) both habilitative services and rehabilitative
2 services shall provide the coverage required under
3 paragraphs (1) and (2) of this subsection.

4 (c) The coverage required under subsection (b) of this
5 Section shall:

6 (1) not be:

7 (A) subject to any maximum annual benefit limit,
8 including any limits on the number of visits an
9 insured may make to a speech-language pathologist;

10 (B) limited based on the type of disease, injury,
11 disorder, or other medical condition that resulted in
12 the stuttering; or

13 (C) subject to utilization review or utilization
14 management requirements, including prior
15 authorization;

16 (2) be considered medically necessary if the patient's
17 treating provider determines, in that provider's clinical
18 judgment, that such speech therapy services for stuttering
19 are medically appropriate to help the patient keep, learn,
20 improve, or restore skills or functioning for daily
21 living; and

22 (3) include coverage for speech therapy provided in
23 person and through telehealth, which shall:

24 (A) not be less than the coverage required for
25 health benefit plans under Section 356z.22; and

26 (B) include the use of any communication

1 technology, application, or platform to deliver
2 telehealth services, except coverage may be restricted
3 to technology, applications, or platforms that are
4 compliant with any applicable privacy provisions of
5 the federal Health Insurance Portability and
6 Accountability Act of 1996, 42 U.S.C. 1320d et seq.,
7 as amended.

8 (d) If, at any time, the Secretary of the United States
9 Department of Health and Human Services, or its successor
10 agency, adopts rules or regulations to be published in the
11 Federal Register or publishes a comment in the Federal
12 Register or issues an opinion, guidance, or other action that
13 would require the State, pursuant to any provision of the
14 Patient Protection and Affordable Care Act (Public Law
15 111-148), including, but not limited to, 42 U.S.C.
16 18031(d)(3)(B) or any successor provision, to defray the cost
17 of any coverage outlined in this Section, then this Section is
18 inoperative with respect to all coverage outlined in this
19 Section other than that authorized under Section 1902 of the
20 Social Security Act, 42 U.S.C. 1396a, and the State shall not
21 assume any obligation for the cost of the coverage set forth in
22 this Section.

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

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

2 (Text of Section before amendment by P.A. 103-808, 104-28,
3 104-68, 104-73, 104-98, 104-289, 104-324, and 104-379)

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

5 (a) Health Maintenance Organizations shall be subject to
6 the provisions of Sections 133, 134, 136, 137, 139, 140,
7 141.1, 141.2, 141.3, 143, 143.31, 143c, 147, 148, 149, 151,
8 152, 153, 154, 154.5, 154.6, 154.7, 154.8, 155.04, 155.22a,
9 155.49, 352c, 355.2, 355.3, 355.6, 355b, 355c, 356f, 356g.5-1,
10 356m, 356q, 356u.10, 356v, 356w, 356x, 356z.2, 356z.3a,
11 356z.4, 356z.4a, 356z.5, 356z.6, 356z.8, 356z.9, 356z.10,
12 356z.11, 356z.12, 356z.13, 356z.14, 356z.15, 356z.17, 356z.18,
13 356z.19, 356z.20, 356z.21, 356z.22, 356z.23, 356z.24, 356z.25,
14 356z.26, 356z.28, 356z.29, 356z.30, 356z.31, 356z.32, 356z.33,
15 356z.34, 356z.35, 356z.36, 356z.37, 356z.38, 356z.39, 356z.40,
16 356z.40a, 356z.41, 356z.44, 356z.45, 356z.46, 356z.47,
17 356z.48, 356z.49, 356z.50, 356z.51, 356z.53, 356z.54, 356z.55,
18 356z.56, 356z.57, 356z.58, 356z.59, 356z.60, 356z.61, 356z.62,
19 356z.63, 356z.64, 356z.65, 356z.66, 356z.67, 356z.68, 356z.69,
20 356z.70, 356z.71, 356z.72, 356z.73, 356z.74, 356z.75, 356z.76,
21 356z.77, 356z.78, 356z.79, 356z.81, ~~356z.80,~~ 364, 364.01,
22 364.3, 367.2, 367.2-5, 367i, 368a, 368b, 368c, 368d, 368e,
23 370c, 370c.1, 401, 401.1, 402, 403, 403A, 408, 408.2, 409,
24 412, 444, and 444.1, paragraph (c) of subsection (2) of
25 Section 367, and Articles IIA, VIII 1/2, XII, XII 1/2, XIII,
26 XIII 1/2, XXV, XXVI, and XXXIIB of the Illinois Insurance

1 Code. Section 356z.81 ~~365z.80~~ of the Illinois Insurance Code
2 is not applicable to health care plans under contract with the
3 Department of Healthcare and Family Services.

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

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

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

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

21 (1) the Director shall give primary consideration to
22 the continuation of benefits to enrollees and the
23 financial conditions of the acquired Health Maintenance
24 Organization after the merger, consolidation, or other
25 acquisition of control takes effect;

26 (2) (i) the criteria specified in subsection (1) (b) of

1 Section 131.8 of the Illinois Insurance Code shall not
2 apply and (ii) the Director, in making his determination
3 with respect to the merger, consolidation, or other
4 acquisition of control, need not take into account the
5 effect on competition of the merger, consolidation, or
6 other acquisition of control;

7 (3) the Director shall have the power to require the
8 following information:

9 (A) certification by an independent actuary of the
10 adequacy of the reserves of the Health Maintenance
11 Organization sought to be acquired;

12 (B) pro forma financial statements reflecting the
13 combined balance sheets of the acquiring company and
14 the Health Maintenance Organization sought to be
15 acquired as of the end of the preceding year and as of
16 a date 90 days prior to the acquisition, as well as pro
17 forma financial statements reflecting projected
18 combined operation for a period of 2 years;

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

23 (D) such other information as the Director shall
24 require.

25 (d) The provisions of Article VIII 1/2 of the Illinois
26 Insurance Code and this Section 5-3 shall apply to the sale by

1 any health maintenance organization of greater than 10% of its
2 enrollee population (including, without limitation, the health
3 maintenance organization's right, title, and interest in and
4 to its health care certificates).

5 (e) In considering any management contract or service
6 agreement subject to Section 141.1 of the Illinois Insurance
7 Code, the Director (i) shall, in addition to the criteria
8 specified in Section 141.2 of the Illinois Insurance Code,
9 take into account the effect of the management contract or
10 service agreement on the continuation of benefits to enrollees
11 and the financial condition of the health maintenance
12 organization to be managed or serviced, and (ii) need not take
13 into account the effect of the management contract or service
14 agreement on competition.

15 (f) Except for small employer groups as defined in the
16 Small Employer Rating, Renewability and Portability Health
17 Insurance Act and except for medicare supplement policies as
18 defined in Section 363 of the Illinois Insurance Code, a
19 Health Maintenance Organization may by contract agree with a
20 group or other enrollment unit to effect refunds or charge
21 additional premiums under the following terms and conditions:

22 (i) the amount of, and other terms and conditions with
23 respect to, the refund or additional premium are set forth
24 in the group or enrollment unit contract agreed in advance
25 of the period for which a refund is to be paid or
26 additional premium is to be charged (which period shall

1 not be less than one year); and

2 (ii) the amount of the refund or additional premium
3 shall not exceed 20% of the Health Maintenance
4 Organization's profitable or unprofitable experience with
5 respect to the group or other enrollment unit for the
6 period (and, for purposes of a refund or additional
7 premium, the profitable or unprofitable experience shall
8 be calculated taking into account a pro rata share of the
9 Health Maintenance Organization's administrative and
10 marketing expenses, but shall not include any refund to be
11 made or additional premium to be paid pursuant to this
12 subsection (f)). The Health Maintenance Organization and
13 the group or enrollment unit may agree that the profitable
14 or unprofitable experience may be calculated taking into
15 account the refund period and the immediately preceding 2
16 plan years.

17 The Health Maintenance Organization shall include a
18 statement in the evidence of coverage issued to each enrollee
19 describing the possibility of a refund or additional premium,
20 and upon request of any group or enrollment unit, provide to
21 the group or enrollment unit a description of the method used
22 to calculate (1) the Health Maintenance Organization's
23 profitable experience with respect to the group or enrollment
24 unit and the resulting refund to the group or enrollment unit
25 or (2) the Health Maintenance Organization's unprofitable
26 experience with respect to the group or enrollment unit and

1 the resulting additional premium to be paid by the group or
2 enrollment unit.

3 In no event shall the Illinois Health Maintenance
4 Organization Guaranty Association be liable to pay any
5 contractual obligation of an insolvent organization to pay any
6 refund authorized under this Section.

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

13 (Source: P.A. 103-84, eff. 1-1-24; 103-91, eff. 1-1-24;
14 103-123, eff. 1-1-24; 103-154, eff. 6-30-23; 103-420, eff.
15 1-1-24; 103-426, eff. 8-4-23; 103-445, eff. 1-1-24; 103-551,
16 eff. 8-11-23; 103-605, eff. 7-1-24; 103-618, eff. 1-1-25;
17 103-649, eff. 1-1-25; 103-656, eff. 1-1-25; 103-700, eff.
18 1-1-25; 103-718, eff. 7-19-24; 103-751, eff. 8-2-24; 103-753,
19 eff. 8-2-24; 103-758, eff. 1-1-25; 103-777, eff. 8-2-24;
20 103-914, eff. 1-1-25; 103-918, eff. 1-1-25; 103-1024, eff.
21 1-1-25; 104-1, eff. 6-9-25; 104-42, eff. 8-1-25; 104-334, eff.
22 8-15-25; 104-417, eff. 8-15-25; revised 10-3-25.)

23 (Text of Section after amendment by P.A. 103-808, 104-28,
24 104-68, 104-73, 104-98, 104-289, 104-324, and 104-379)

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

1 (a) Health Maintenance Organizations shall be subject to
2 the provisions of Sections 133, 134, 136, 137, 139, 140,
3 141.1, 141.2, 141.3, 143, 143.31, 143c, 147, 148, 149, 151,
4 152, 153, 154, 154.5, 154.6, 154.7, 154.8, 155.04, 155.22a,
5 155.49, 352c, 355.2, 355.3, 355.6, 355.7, 355b, 355c, 356f,
6 356g, 356g.5-1, 356m, 356q, 356u.10, 356v, 356w, 356x, 356z.2,
7 356z.3a, 356z.4, 356z.4a, 356z.5, 356z.6, 356z.8, 356z.9,
8 356z.10, 356z.11, 356z.12, 356z.13, 356z.14, 356z.15, 356z.17,
9 356z.18, 356z.19, 356z.20, 356z.21, 356z.22, 356z.23, 356z.24,
10 356z.25, 356z.26, 356z.28, 356z.29, 356z.30, 356z.31, 356z.32,
11 356z.33, 356z.34, 356z.35, 356z.36, 356z.37, 356z.38, 356z.39,
12 356z.40, 356z.40a, 356z.41, 356z.44, 356z.45, 356z.46,
13 356z.47, 356z.48, 356z.49, 356z.50, 356z.51, 356z.53, 356z.54,
14 356z.55, 356z.56, 356z.57, 356z.58, 356z.59, 356z.60, 356z.61,
15 356z.62, 356z.63, 356z.64, 356z.65, 356z.66, 356z.67, 356z.68,
16 356z.69, 356z.70, 356z.71, 356z.72, 356z.73, 356z.74, 356z.75,
17 356z.76, 356z.77, 356z.78, 356z.79, 356z.80, 356z.81, 356z.82,
18 356z.83, 356z.84, 356z.85, 356z.88, 364, 364.01, 364.3, 367.2,
19 367.2-5, 367i, 368a, 368b, 368c, 368d, 368e, 370a, 370c,
20 370c.1, 401, 401.1, 402, 403, 403A, 408, 408.2, 409, 412, 444,
21 and 444.1, paragraph (c) of subsection (2) of Section 367, and
22 Articles IIA, VIII 1/2, XII, XII 1/2, XIII, XIII 1/2, XXV,
23 XXVI, and XXXIIB of the Illinois Insurance Code.

24 (b) For purposes of the Illinois Insurance Code, except
25 for Sections 444 and 444.1 and Articles XIII and XIII 1/2,
26 Health Maintenance Organizations in the following categories

1 are deemed to be "domestic companies":

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

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

6 (3) a corporation organized under the laws of another
7 state, 30% or more of the enrollees of which are residents
8 of this State, except a corporation subject to
9 substantially the same requirements in its state of
10 organization as is a "domestic company" under Article VIII
11 1/2 of the Illinois Insurance Code.

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

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

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

1 (3) the Director shall have the power to require the
2 following information:

3 (A) certification by an independent actuary of the
4 adequacy of the reserves of the Health Maintenance
5 Organization sought to be acquired;

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

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

17 (D) such other information as the Director shall
18 require.

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

25 (e) In considering any management contract or service
26 agreement subject to Section 141.1 of the Illinois Insurance

1 Code, the Director (i) shall, in addition to the criteria
2 specified in Section 141.2 of the Illinois Insurance Code,
3 take into account the effect of the management contract or
4 service agreement on the continuation of benefits to enrollees
5 and the financial condition of the health maintenance
6 organization to be managed or serviced, and (ii) need not take
7 into account the effect of the management contract or service
8 agreement on competition.

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

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

22 (ii) the amount of the refund or additional premium
23 shall not exceed 20% of the Health Maintenance
24 Organization's profitable or unprofitable experience with
25 respect to the group or other enrollment unit for the
26 period (and, for purposes of a refund or additional

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

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

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

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

7 (Source: P.A. 103-84, eff. 1-1-24; 103-91, eff. 1-1-24;
8 103-123, eff. 1-1-24; 103-154, eff. 6-30-23; 103-420, eff.
9 1-1-24; 103-426, eff. 8-4-23; 103-445, eff. 1-1-24; 103-551,
10 eff. 8-11-23; 103-605, eff. 7-1-24; 103-618, eff. 1-1-25;
11 103-649, eff. 1-1-25; 103-656, eff. 1-1-25; 103-700, eff.
12 1-1-25; 103-718, eff. 7-19-24; 103-751, eff. 8-2-24; 103-753,
13 eff. 8-2-24; 103-758, eff. 1-1-25; 103-777, eff. 8-2-24;
14 103-808, eff. 1-1-26; 103-914, eff. 1-1-25; 103-918, eff.
15 1-1-25; 103-1024, eff. 1-1-25; 104-1, eff. 6-9-25; 104-28,
16 eff. 1-1-26; 104-42, eff. 8-1-25; 104-68, eff. 1-1-26; 104-73,
17 eff. 1-1-26; 104-98, eff. 1-1-26; 104-289, eff. 1-1-26;
18 104-324, eff. 1-1-26; 104-334, eff. 8-15-25; 104-379, eff.
19 1-1-26; 104-417, eff. 8-15-25; revised 10-3-25.)

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

22 (215 ILCS 130/4003) (from Ch. 73, par. 1504-3)

23 (Text of Section before amendment by P.A. 104-73, 104-98,
24 104-289, 104-324, and 104-379)

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

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

21 (2) a corporation organized under the laws of another
22 state, 30% or more of the enrollees of which are residents
23 of this State, except a corporation subject to
24 substantially the same requirements in its state of
25 organization as is a domestic company under Article VIII
26 1/2 of the Illinois Insurance Code.

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

9 (Text of Section after amendment by P.A. 104-73, 104-98,
10 104-289, 104-324, and 104-379)

11 Sec. 4003. Illinois Insurance Code provisions. Limited
12 health service organizations shall be subject to the
13 provisions of Sections 133, 134, 136, 137, 139, 140, 141.1,
14 141.2, 141.3, 143, 143.31, 143c, 147, 148, 149, 151, 152, 153,
15 154, 154.5, 154.6, 154.7, 154.8, 155.04, 155.37, 155.49, 352c,
16 355.2, 355.3, 355b, 355d, 356m, 356q, 356v, 356z.4, 356z.4a,
17 356z.10, 356z.21, 356z.22, 356z.25, 356z.26, 356z.29, 356z.32,
18 356z.33, 356z.41, 356z.46, 356z.47, 356z.51, 356z.53, 356z.54,
19 356z.57, 356z.59, 356z.61, 356z.64, 356z.67, 356z.68, 356z.71,
20 356z.73, 356z.74, 356z.75, 356z.79, 356z.80, 356z.81, 356z.83,
21 356z.84, 356z.85, 356z.88, 364.3, 368a, 370a, 401, 401.1, 402,
22 403, 403A, 408, 408.2, 409, 412, 444, and 444.1 and Articles
23 IIA, VIII 1/2, XII, XII 1/2, XIII, XIII 1/2, XXV, XXVI, and
24 XXXIIB of the Illinois Insurance Code. Nothing in this Section
25 shall require a limited health care plan to cover any service

1 that is not a limited health service. For purposes of the
2 Illinois Insurance Code, except for Sections 444 and 444.1 and
3 Articles XIII and XIII 1/2, limited health service
4 organizations in the following categories are deemed to be
5 domestic companies:

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

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

13 (Source: P.A. 103-84, eff. 1-1-24; 103-91, eff. 1-1-24;
14 103-420, eff. 1-1-24; 103-426, eff. 8-4-23; 103-445, eff.
15 1-1-24; 103-605, eff. 7-1-24; 103-649, eff. 1-1-25; 103-656,
16 eff. 1-1-25; 103-700, eff. 1-1-25; 103-718, eff. 7-19-24;
17 103-751, eff. 8-2-24; 103-758, eff. 1-1-25; 103-832, eff.
18 1-1-25; 103-1024, eff. 1-1-25; 104-1, eff. 6-9-25; 104-42,
19 eff. 8-1-25; 104-73, eff. 1-1-26; 104-98, eff. 1-1-26;
20 104-289, eff. 1-1-26; 104-324, eff. 1-1-26; 104-334, eff.
21 8-15-25; 104-379, eff. 1-1-26; 104-417, eff. 8-15-25; revised
22 10-3-25.)

23 Section 40. The Voluntary Health Services Plans Act is
24 amended by changing Section 10 as follows:

1 (215 ILCS 165/10) (from Ch. 32, par. 604)

2 (Text of Section before amendment by P.A. 104-28, 104-73,
3 104-98, 104-289, 104-324, and 104-379)

4 Sec. 10. Application of Insurance Code provisions. Health
5 services plan corporations and all persons interested therein
6 or dealing therewith shall be subject to the provisions of
7 Articles IIA and XII 1/2 and Sections 3.1, 133, 136, 139, 140,
8 143, 143.31, 143c, 149, 155.22a, 155.37, 354, 355.2, 355.3,
9 355b, 355d, 356g, 356g.5, 356g.5-1, 356m, 356q, 356r, 356t,
10 356u, 356u.10, 356v, 356w, 356x, 356y, 356z.1, 356z.2,
11 356z.3a, 356z.4, 356z.4a, 356z.5, 356z.6, 356z.8, 356z.9,
12 356z.10, 356z.11, 356z.12, 356z.13, 356z.14, 356z.15, 356z.18,
13 356z.19, 356z.21, 356z.22, 356z.25, 356z.26, 356z.29, 356z.30,
14 356z.32, 356z.32a, 356z.33, 356z.40, 356z.41, 356z.46,
15 356z.47, 356z.51, 356z.53, 356z.54, 356z.56, 356z.57, 356z.59,
16 356z.60, 356z.61, 356z.62, 356z.64, 356z.67, 356z.68, 356z.71,
17 356z.72, 356z.74, 356z.75, 356z.77, 356z.79, 356z.81, ~~356z.80,~~
18 364.01, 364.3, 367.2, 368a, 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; 104-42, eff. 8-1-25; 104-417, eff. 8-15-25;
8 revised 10-3-25.)

9 (Text of Section after amendment by P.A. 104-28, 104-73,
10 104-98, 104-289, 104-324, and 104-379)

11 Sec. 10. Application of Illinois Insurance Code
12 provisions. Health services plan corporations and all persons
13 interested therein or dealing therewith shall be subject to
14 the provisions of Articles IIA and XII 1/2 and Sections 3.1,
15 133, 136, 139, 140, 143, 143.31, 143c, 149, 155.22a, 155.37,
16 354, 355.2, 355.3, 355.7, 355b, 355d, 356g, 356g.5, 356g.5-1,
17 356m, 356q, 356r, 356t, 356u, 356u.10, 356v, 356w, 356x, 356y,
18 356z.1, 356z.2, 356z.3a, 356z.4, 356z.4a, 356z.5, 356z.6,
19 356z.8, 356z.9, 356z.10, 356z.11, 356z.12, 356z.13, 356z.14,
20 356z.15, 356z.18, 356z.19, 356z.21, 356z.22, 356z.25, 356z.26,
21 356z.29, 356z.30, 356z.32, 356z.32a, 356z.33, 356z.40,
22 356z.41, 356z.46, 356z.47, 356z.51, 356z.53, 356z.54, 356z.56,
23 356z.57, 356z.59, 356z.60, 356z.61, 356z.62, 356z.64, 356z.67,
24 356z.68, 356z.71, 356z.72, 356z.74, 356z.75, 356z.77, 356z.79,
25 356z.80, 356z.81, 356z.83, 356z.84, 356z.85, 356z.88, 364.01,

1 364.3, 367.2, 368a, 370a, 401, 401.1, 402, 403, 403A, 408,
2 408.2, and 412, and paragraphs (7) and (15) of Section 367 of
3 the Illinois Insurance Code.

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. 103-84, eff. 1-1-24; 103-91, eff. 1-1-24;
11 103-420, eff. 1-1-24; 103-445, eff. 1-1-24; 103-551, eff.
12 8-11-23; 103-605, eff. 7-1-24; 103-656, eff. 1-1-25; 103-718,
13 eff. 7-19-24; 103-751, eff. 8-2-24; 103-753, eff. 8-2-24;
14 103-758, eff. 1-1-25; 103-832, eff. 1-1-25; 103-914, eff.
15 1-1-25; 103-918, eff. 1-1-25; 103-1024, eff. 1-1-25; 104-1,
16 eff. 6-9-25; 104-28, eff. 1-1-26; 104-42, eff. 8-1-25; 104-73,
17 eff. 1-1-26; 104-98, eff. 1-1-26; 104-289, eff. 1-1-26;
18 104-324, eff. 1-1-26; 104-379, eff. 1-1-26; 104-417, eff.
19 8-15-25; revised 10-3-25.)

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

22 (305 ILCS 5/5-16.8)

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

1 Sec. 5-16.8. Required health benefits. The medical
2 assistance program shall (i) provide the post-mastectomy care
3 benefits required to be covered by a policy of accident and
4 health insurance under Section 356t and the coverage required
5 under Sections 356g.5, 356q, 356u, 356w, 356x, 356z.6,
6 356z.26, 356z.29, 356z.32, 356z.33, 356z.34, 356z.35, 356z.46,
7 356z.47, 356z.51, 356z.53, 356z.59, 356z.60, 356z.61, 356z.64,
8 356z.67, 356z.71, and 356z.75 of the Illinois Insurance Code,
9 (ii) be subject to the provisions of Sections 356z.19,
10 356z.44, 356z.49, 364.01, 370c, and 370c.1 of the Illinois
11 Insurance Code, and (iii) be subject to the provisions of
12 subsection (d-5) of Section 10 of the Network Adequacy and
13 Transparency Act.

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

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

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

1 (Source: P.A. 103-84, eff. 1-1-24; 103-91, eff. 1-1-24;
2 103-420, eff. 1-1-24; 103-605, eff. 7-1-24; 103-703, eff.
3 1-1-25; 103-758, eff. 1-1-25; 103-1024, eff. 1-1-25; 104-417,
4 eff. 8-15-25.)

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

7 Sec. 5-16.8. Required health benefits. The medical
8 assistance program shall (i) provide the post-mastectomy care
9 benefits required to be covered by a policy of accident and
10 health insurance under Section 356t and the coverage required
11 under Sections 356g.5, 356q, 356u, 356w, 356x, 356z.6,
12 356z.26, 356z.29, 356z.32, 356z.33, 356z.34, 356z.35, 356z.46,
13 356z.47, 356z.51, 356z.53, 356z.59, 356z.60, 356z.61, 356z.64,
14 356z.67, 356z.71, ~~and 356z.75, and 356z.80~~, 356z.84, 356z.85,
15 and 356z.88 of the Illinois Insurance Code, (ii) be subject to
16 the provisions of Sections 356z.19, 356z.44, 356z.49, 364.01,
17 370c, and 370c.1 of the Illinois Insurance Code, and (iii) be
18 subject to the provisions of subsection (d-5) of Section 10 of
19 the Network Adequacy and Transparency Act.

20 The Department, by rule, shall adopt a model similar to
21 the requirements of Section 356z.39 of the Illinois Insurance
22 Code.

23 On and after July 1, 2012, the Department shall reduce any
24 rate of reimbursement for services or other payments or alter
25 any methodologies authorized by this Code to reduce any rate

1 of reimbursement for services or other payments in accordance
2 with Section 5-5e.

3 To ensure full access to the benefits set forth in this
4 Section, on and after January 1, 2016, the Department shall
5 ensure that provider and hospital reimbursement for
6 post-mastectomy care benefits required under this Section are
7 no lower than the Medicare reimbursement rate.

8 (Source: P.A. 103-84, eff. 1-1-24; 103-91, eff. 1-1-24;
9 103-420, eff. 1-1-24; 103-605, eff. 7-1-24; 103-703, eff.
10 1-1-25; 103-758, eff. 1-1-25; 103-1024, eff. 1-1-25; 104-73,
11 eff. 1-1-26; 104-324, eff. 1-1-26; 104-379, eff. 1-1-26;
12 104-417, eff. 8-15-25; revised 10-3-25.)

13 Section 90. The State Mandates Act is amended by adding
14 Section 8.50 as follows:

15 (30 ILCS 805/8.50 new)

16 Sec. 8.50. Exempt mandate. Notwithstanding Sections 6 and
17 8 of this Act, no reimbursement by the State is required for
18 the implementation of any mandate created by this amendatory
19 Act of the 104th General Assembly.

20 Section 95. No acceleration or delay. Where this Act makes
21 changes in a statute that is represented in this Act by text
22 that is not yet or no longer in effect (for example, a Section
23 represented by multiple versions), the use of that text does

1 not accelerate or delay the taking effect of (i) the changes
2 made by this Act or (ii) provisions derived from any other
3 Public Act.

4 Section 99. Effective date. This Act takes effect January
5 1, 2028.