

Rep. Laura Fine

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1 AMENDMENT TO HOUSE BILL 1337 2 AMENDMENT NO. . Amend House Bill 1337 by replacing everything after the enacting clause with the following: 3 "Section 1. Short title. This Act may be cited as the 4 5 Short-Term, Limited-Duration Health Insurance Coverage Act. 6 Section 5. Definitions. In this Act: 7 "Department" means the Department of Insurance. "Group health insurance coverage" means, in connection 8 with a group health plan, health insurance coverage offered in 10 connection with the plan. "Group health plan" means an employee welfare benefit plan 11 12 (as defined in Section 3(1) of the federal Employee Retirement Income Security Act of 1974) to the extent that the plan 13 provides medical care (as defined in paragraph (2) of that 14 15 Section and including items and services paid for as medical

care) to employees or their dependents (as defined under the

by a health insurance issuer.

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- 1 the plan) directly or through insurance, terms of 2 reimbursement, or otherwise.
- 3 "Health insurance coverage" means benefits consisting of 4 medical care (provided directly, through insurance or 5 reimbursement, or otherwise and including items and services paid for as medical care) under any hospital or medical service 6 policy or certificate, hospital or medical service plan 7 8 contract, or health maintenance organization contract offered
- 10 "Health insurance issuer" means an insurance company, 11 insurance service, or insurance organization (including a health maintenance organization) that is licensed to engage in 12 13 the business of insurance in a state and that is subject to 14 Illinois law that regulates insurance (within the meaning of 15 Section 514(b)(2) of the federal Employee Retirement Income 16 Security Act of 1974). "Health insurance issuer" does not 17 include a group health plan.
- 18 "Fraud" means an intentional misrepresentation of a 19 material fact in connection with the coverage.
- 20 "Individual health insurance coverage" means health insurance coverage offered to individuals in the individual 2.1 22 market, including short-term, limited-duration health 23 insurance coverage.
- 24 "Short-term, limited-duration health insurance coverage" 25 means individual health insurance coverage provided under a 26 contract offered by a licensed health insurance issuer,

- 1 regardless of the situs of the delivery of the policy or
- 2 contract that has a specified, limited-duration.
- 3 Section 10. Application; scope; duration of coverage.
- 4 (a) This Act applies to health insurance issuers that offer
- 5 short-term, limited-duration health insurance coverage to
- individuals in this State and to short-term, limited-duration 6
- health insurance coverage that is delivered or issued for 7
- 8 delivery in this State, including coverage issued outside of
- 9 this State that covers individuals in this State.
- 10 short-term, limited-duration health (b) Α insurance
- coverage policy (even where issued outside of this State) may 11
- 12 not cover any person residing in this State or be delivered or
- issued for delivery in this State unless the policy complies 13
- 14 with the provisions of this Act.
- 15 Any short-term, limited-duration health insurance
- 16 coverage policy that is delivered or issued for delivery in
- 17 this State must have an expiration date in the contract that is
- less than 91 days and shall not be renewable within a period of 18
- 19 365 days, beginning the day after the contract ends, either at
- the option of the issuer or the individual. Renewal of a 20
- 21 short-term, limited-duration health insurance coverage policy
- includes the issuance of a new short-term, limited-duration 22
- 23 health insurance policy by an issuer to a policyholder within
- 24 60 days after the expiration of a policy previously issued by
- 25 the issuer to the policyholder.

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- 1 Any short-term, limited-duration health insurance coverage policy that is delivered or issued for delivery in 2 3 this State may not be rescinded before the expiration date in 4 the contract, except in cases of nonpayment of premiums or 5 fraud.
- 6 Section 15. Disclosure requirements.
 - (a) A health insurance issuer that offers short-term, limited-duration health insurance coverage shall, in addition to all other documents required, including, but not limited to, the policy, the certificate, the membership booklet, and a description of appeal and external review rights, deliver an outline of coverage to an applicant for or an enrollee in limited-duration health short-term, insurance delivered or issued for delivery in this State.
 - Any short-term, limited-duration health insurance coverage policy that is delivered or issued for delivery in the State shall display prominently in the contract, any application, sales, and marketing materials provided in connection with enrollment in such coverage, and the outline of coverage for such coverage, in at least 14-point, bold type, the following: "WARNING! This plan may not cover all of the health care you need and may leave you with very high medical bills. If you buy this plan, you may not be able to get more complete insurance when this contract ends. You may be able to get more complete insurance now and help to pay for it at

- 1 www.healthcare.gov.".
- 2 Any short-term, limited-duration health insurance 3 coverage policy that is delivered or issued for delivery in 4 this State shall display prominently in the footer on every 5 page of the contract, in any application, sales, and marketing 6 materials provided in connection with enrollment in such coverage, and in the outline of coverage for such coverage, in 7 8 at least 14-point, bold type, the following: "WARNING! This is 9 temporary coverage. This policy provides limited benefits.".
- 10 identification card for (d) Any short-term, 11 limited-duration health insurance coverage that is delivered or issued for delivery in this State must prominently display 12 13 the following in bold type: "WARNING! This is temporary 14 coverage. This policy provides limited benefits.".
- 15 (e) Any individual selling a short-term, limited-duration 16 health insurance coverage policy in this State must read out loud the disclosure in subsection (b) to a prospective 17 18 purchaser.
- 19 Section 20. Filing and approval.
- 2.0 (a) Coverage subject to this Act may not be delivered or 21 issued for delivery unless it has been approved by the 22 Department.
- 23 (b) A health insurance issuer who intends to deliver or 24 issue for delivery a short-term, limited-duration health 25 insurance coverage policy in this State shall file with the

1 Department:

- 2 (1) all paperwork required by health insurance issuers of individual health insurance coverage; 3
- 4 (2) all sales and marketing materials provided in 5 connection with enrollment in such coverage; and
- (3) the outline of such coverage. 6
- (c) The Department shall adopt any rules necessary to carry 7 8 out the provisions of this Act.
- 9 (d) The Department shall adopt any rules necessary to 10 protect Illinois consumers and promote the stability of 11 Illinois' health insurance markets.
- 12 Section 25. Illinois Insurance Code and benefit 13 requirements.
- 14 (a) Short-term, limited-duration coverage shall be subject
- 15 to Sections 143c, 155.36, 355, 356a, 356b, 356c, 356e, 356f,
- 356g, 356g.5, 356g.5-1, 356h, 356i, 356k, 356L, 356m, 356n, 16
- 356p, 356q, 356r, 356s, 356t, 356u, 356v, 356w, 356x, 356z.1, 17
- 356z.2, 356z.3a, 356z.4, 356z.5, 356z.6, 356z.7, 356z.8, 18
- 19 356z.9, 356z.10, 356z.11, 356z.12, 356z.13, 356z.14, 356z.15,
- 356z.17, 356z.18, 356z.19, 356z.20, 356z.21, 356z.22, 356z.24, 20
- 356z.25, 356z.25, 364, 364.01, 367b, 367k, 370a, and 370c, 21
- subsections (7) and (8) of Section 367, and subsection (a) of 22
- 23 Section 370i of the Illinois Insurance Code.
- 24 (b) Short-term, limited-duration coverage shall also be
- 25 subject to the provisions of the Network Adequacy and

- 1 Transparency Act, the Managed Care Reform and Patients Rights
- Act, the Topical Eye Medication Prescription Act, the Organ 2
- Transplant Medication Notification Act, and the Health Carrier 3
- 4 External Review Act.
- 5 Section 90. The Illinois Insurance Code is amended by
- changing Section 356z.16 and by changing and renumbering 6
- 7 Section 356z.25 (as added by Public Act 100-386) as follows:
- 8 (215 ILCS 5/356z.16)
- 9 356z.16. Applicability of mandated benefits to
- supplemental policies. Unless specified otherwise, the 10
- following Sections of the Illinois Insurance Code do not apply 11
- 12 to short-term travel, disability income, long-term care,
- 13 or limited (excluding short-term, accident only,
- 14 limited-duration health insurance coverage policies as defined
- in the Short-Term, Limited-Duration Health Insurance Coverage 15
- Act) or specified disease policies: 355b, 356b, 356c, 356d, 16
- 356q, 356k, 356m, 356n, 356p, 356q, 356r, 356t, 356u, 356w, 17
- 18 356x, 356z.1, 356z.2, 356z.4, 356z.5, 356z.6, 356z.8, 356z.12,
- 356z.14, 356z.19, 356z.21, 356z.25, 364.01, 367.2-5, and 367e. 19
- 20 (Source: P.A. 100-386, eff. 1-1-18.)
- 21 (215 ILCS 5/356z.27)
- 22 Sec. 356z.27 356z.25. Preexisting condition exclusion. No
- 23 policy of individual or group accident and health insurance,

- 1 including short-term, limited-duration health insurance
- 2 coverage as defined in the Short-Term, Limited-Duration Health
- 3 Insurance Coverage Act issued, amended, delivered, or renewed
- 4 on or after January 1, 2018 (the effective date of Public Act
- 5 100-386) this amendatory Act of the 100th General Assembly may
- 6 impose any preexisting condition exclusion, as defined in the
- 7 Illinois Health Insurance Portability and Accountability Act,
- with respect to such plan or coverage. 8
- 9 (Source: P.A. 100-386, eff. 1-1-18; revised 9-15-17.)
- Section 99. Effective date. This Act takes effect January 10
- 1, 2019.". 11