



Rep. Kathleen Willis

Filed: 5/17/2019

10100SB0659ham001

LRB101 04420 SMS 60839 a

1 AMENDMENT TO SENATE BILL 659

2 AMENDMENT NO. _____. Amend Senate Bill 659 by replacing
3 everything after the enacting clause with the following:

4 "Section 5. The Illinois Insurance Code is amended by
5 adding Section 356z.33 as follows:

6 (215 ILCS 5/356z.33 new)

7 Sec. 356z.33. Coverage for congenital anomaly or birth
8 defect.

9 (a) As used in this Section, "treatment" includes inpatient
10 and outpatient care and services performed to improve or
11 restore body function, or performed to approximate a normal
12 appearance, due to congenital anomaly or birth defect and
13 includes treatment to any and all missing or abnormal body
14 parts, including teeth, the oral cavity, and their associated
15 structures, that would otherwise be provided under the plan or
16 coverage for any other injury and sickness, including:

1 (1) inpatient and outpatient care, reconstructive
2 services and procedures, and complications thereof,
3 including prosthetics and appliances;

4 (2) adjunctive dental, orthodontic, or prosthodontic
5 support from birth until the medical or surgical treatment
6 of the defect or anomaly has been completed, including
7 ongoing or subsequent treatment required to maintain
8 function or approximate a normal appearance;

9 (3) procedures that do not materially restore or
10 improve the function of the body part being treated;

11 (4) procedures for secondary conditions and follow-up
12 treatment; and

13 (5) anesthetics provided by a dentist with a permit
14 provided under Section 8.1 of the Illinois Dental Practice
15 Act.

16 "Treatment" does not include cosmetic surgery performed to
17 reshape normal structures of the body to improve appearance or
18 self-esteem.

19 (b) An individual or group policy of accident and health
20 insurance amended, delivered, issued, or renewed after the
21 effective date of this amendatory Act of the 101st General
22 Assembly shall cover charges incurred and services provided for
23 outpatient and inpatient care in conjunction with services that
24 are provided to a covered individual related to the diagnosis
25 and treatment of a congenital anomaly or birth defect.

26 (c) Coverage required under this Section includes any

1 service to functionally improve, repair, or restore any body
2 part that is medically necessary to achieve normal body
3 function or appearance, as determined by the treating physician
4 or dentist. Any coverage provided may be subject to coverage
5 limits, such as pre-authorization or pre-certification, as
6 required by the plan or issuer that are no more restrictive
7 than the predominant treatment limitations applied to
8 substantially all medical and surgical benefits covered by the
9 plan.

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