

Sen. Laura M. Murphy

Filed: 2/29/2024

10300SB2671sam001

LRB103 35940 RPS 70241 a

1 AMENDMENT TO SENATE BILL 2671

- 2 AMENDMENT NO. _____. Amend Senate Bill 2671 by replacing
- 3 everything after the enacting clause with the following:
- 4 "Section 5. The State Employees Group Insurance Act of
- 5 1971 is amended by changing Section 6.11 as follows:
- 6 (5 ILCS 375/6.11)
- 7 Sec. 6.11. Required health benefits; Illinois Insurance
- 8 Code requirements. The program of health benefits shall
- 9 provide the post-mastectomy care benefits required to be
- 10 covered by a policy of accident and health insurance under
- 11 Section 356t of the Illinois Insurance Code. The program of
- 12 health benefits shall provide the coverage required under
- 13 Sections 356g, 356g.5, 356g.5-1, 356m, 356g, 356u, 356w, 356x,
- 14 356z.2, 356z.4, 356z.4a, 356z.6, 356z.8, 356z.9, 356z.10,
- 356z.11, 356z.12, 356z.13, 356z.14, 356z.15, 356z.17, 356z.22,
- 16 356z.25, 356z.26, 356z.29, 356z.30a, 356z.32, 356z.33,

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- 356z.36, 356z.40, 356z.41, 356z.45, 356z.46, 356z.47, 356z.51, 1 356z.53, 356z.54, 356z.55, 356z.56, 356z.57, 356z.59, 356z.60, 2 and 356z.61, and 356z.62, 356z.64, 356z.67, 356z.68, 356z.70, 3 4 and 356z.71 of the Illinois Insurance Code. The program of 5 health benefits must comply with Sections 155.22a, 155.37, 6 355b, 356z.19, 370c, and 370c.1 and Article XXXIIB of the Illinois Insurance Code. The program of health benefits shall 7 8 provide the coverage required under Section 356m of the Illinois Insurance Code and, for the employees of the State 9 10 Employee Group Insurance Program only, the coverage as also 11 provided in Section 6.11B of this Act. The Department of Insurance shall enforce the requirements of this Section with 12 13 respect to Sections 370c and 370c.1 of the Illinois Insurance
- Rulemaking authority to implement Public Act 95-1045, if any, is conditioned on the rules being adopted in accordance with all provisions of the Illinois Administrative Procedure Act and all rules and procedures of the Joint Committee on Administrative Rules; any purported rule not so adopted, for whatever reason, is unauthorized.

by the Department of Central Management Services.

Code; all other requirements of this Section shall be enforced

- 22 (Source: P.A. 102-30, eff. 1-1-22; 102-103, eff. 1-1-22;
- 23 102-203, eff. 1-1-22; 102-306, eff. 1-1-22; 102-642, eff.
- 24 1-1-22; 102-665, eff. 10-8-21; 102-731, eff. 1-1-23; 102-768,
- 25 eff. 1-1-24; 102-804, eff. 1-1-23; 102-813, eff. 5-13-22;
- 26 102-816, eff. 1-1-23; 102-860, eff. 1-1-23; 102-1093, eff.

- 1-1-23; 102-1117, eff. 1-13-23; 103-8, eff. 1-1-24; 103-84, 1
- eff. 1-1-24; 103-91, eff. 1-1-24; 103-420, eff. 1-1-24; 2
- 103-445, eff. 1-1-24; 103-535, eff. 8-11-23; 103-551, eff. 3
- 4 8-11-23; revised 8-29-23.)
- 5 Section 10. The Counties Code is amended by changing
- Section 5-1069.3 as follows: 6
- 7 (55 ILCS 5/5-1069.3)
- 8 Sec. 5-1069.3. Required health benefits. If a county,
- 9 including a home rule county, is a self-insurer for purposes
- of providing health insurance coverage for its employees, the 10
- 11 coverage shall include coverage for the post-mastectomy care
- 12 benefits required to be covered by a policy of accident and
- 13 health insurance under Section 356t and the coverage required
- under Sections 356q, 356q.5, 356q.5-1, 356q, 356u, 356w, 356x, 14
- 356z.4, 356z.4a, 356z.6, 356z.8, 356z.9, 356z.10, 356z.11, 15
- 356z.12, 356z.13, 356z.14, 356z.15, 356z.22, 356z.25, 356z.26, 16
- 356z.29, 356z.30a, 356z.32, 356z.33, 356z.36, 356z.40, 17
- 18 356z.41, 356z.45, 356z.46, 356z.47, 356z.48, 356z.51, 356z.53,
- 356z.54, 356z.56, 356z.57, 356z.59, 356z.60, and 356z.61, and 19
- 356z.62, 356z.64, 356z.67, 356z.68, 356z.70, and 356z.71 of 20
- the Illinois Insurance Code. The coverage shall comply with 21
- 22 Sections 155.22a, 355b, 356z.19, and 370c of the Illinois
- 23 Insurance Code. The Department of Insurance shall enforce the
- requirements of this Section. The requirement that health 24

- 1 benefits be covered as provided in this Section is an
- exclusive power and function of the State and is a denial and 2
- limitation under Article VII, Section 6, subsection (h) of the 3
- 4 Illinois Constitution. A home rule county to which this
- 5 Section applies must comply with every provision of this
- 6 Section.
- Rulemaking authority to implement Public Act 95-1045, if 7
- 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
- whatever reason, is unauthorized. 12
- 13 (Source: P.A. 102-30, eff. 1-1-22; 102-103, eff. 1-1-22;
- 14 102-203, eff. 1-1-22; 102-306, eff. 1-1-22; 102-443, eff.
- 15 1-1-22; 102-642, eff. 1-1-22; 102-665, eff. 10-8-21; 102-731,
- eff. 1-1-23; 102-804, eff. 1-1-23; 102-813, eff. 5-13-22; 16
- 102-816, eff. 1-1-23; 102-860, eff. 1-1-23; 102-1093, eff. 17
- 1-1-23; 102-1117, eff. 1-13-23; 103-84, eff. 1-1-24; 103-91, 18
- eff. 1-1-24; 103-420, eff. 1-1-24; 103-445, eff. 1-1-24; 19
- 20 103-535, eff. 8-11-23; 103-551, eff. 8-11-23; revised
- 8-29-23.2.1
- 22 Section 15. The Illinois Municipal Code is amended by
- changing Section 10-4-2.3 as follows: 23
- 24 (65 ILCS 5/10-4-2.3)

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1 Sec. 10-4-2.3. Required health benefits. Τf municipality, including a home rule municipality, is a 2 self-insurer for purposes of providing health insurance 3 4 coverage for its employees, the coverage shall include 5 coverage for the post-mastectomy care benefits required to be 6 covered by a policy of accident and health insurance under Section 356t and the coverage required under Sections 356g, 7 356g.5, 356g.5-1, 356q, 356u, 356w, 356x, 356z.4, 356z.4a, 8 9 356z.6, 356z.8, 356z.9, 356z.10, 356z.11, 356z.12, 356z.13, 10 356z.14, 356z.15, 356z.22, 356z.25, 356z.26, 356z.29, 356z.30a, 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 13 356z.56, 356z.57, 356z.59, 356z.60, and 356z.61, and 356z.62, 356z.64, 356z.67, 356z.68, 356z.70, and 356z.71 of the 14 15 Illinois Insurance Code. The coverage shall comply with 16 Sections 155.22a, 355b, 356z.19, and 370c of the Illinois Insurance Code. The Department of Insurance shall enforce the 17 requirements of this Section. The requirement that health 18 benefits be covered as provided in this is an exclusive power 19 20 and function of the State and is a denial and limitation under Article VII, Section 6, subsection (h) of the Illinois 21 22 Constitution. A home rule municipality to which this Section 23 applies must comply with every provision of this Section. 24 Rulemaking authority to implement Public Act 95-1045, if

any, is conditioned on the rules being adopted in accordance

with all provisions of the Illinois Administrative Procedure

- 1 Act and all rules and procedures of the Joint Committee on
- Administrative Rules; any purported rule not so adopted, for 2
- whatever reason, is unauthorized. 3
- 4 (Source: P.A. 102-30, eff. 1-1-22; 102-103, eff. 1-1-22;
- 5 102-203, eff. 1-1-22; 102-306, eff. 1-1-22; 102-443, eff.
- 6 1-1-22; 102-642, eff. 1-1-22; 102-665, eff. 10-8-21; 102-731,
- eff. 1-1-23; 102-804, eff. 1-1-23; 102-813, eff. 5-13-22; 7
- 102-816, eff. 1-1-23; 102-860, eff. 1-1-23; 102-1093, eff. 8
- 9 1-1-23; 102-1117, eff. 1-13-23; 103-84, eff. 1-1-24; 103-91,
- 10 eff. 1-1-24; 103-420, eff. 1-1-24; 103-445, eff. 1-1-24;
- 103-535, eff. 8-11-23; 103-551, eff. 8-11-23; revised 11
- 8-29-23.12
- Section 20. The School Code is amended by changing Section 13
- 14 10-22.3f as follows:
- 15 (105 ILCS 5/10-22.3f)
- 16 Sec. 10-22.3f. Required health benefits. Insurance
- protection and benefits for employees shall provide the 17
- 18 post-mastectomy care benefits required to be covered by a
- 19 policy of accident and health insurance under Section 356t and
- 20 the coverage required under Sections 356q, 356q.5, 356g.5-1,
- 356q, 356u, 356w, 356x, 356z.4, 356z.4a, 356z.6, 356z.8, 21
- 22 356z.9, 356z.11, 356z.12, 356z.13, 356z.14, 356z.15, 356z.22,
- 23 356z.25, 356z.26, 356z.29, 356z.30a, 356z.32,
- 356z.36, 356z.40, 356z.41, 356z.45, 356z.46, 356z.47, 356z.51, 24

- 356z.53, 356z.54, 356z.56, 356z.57, 356z.59, 356z.60, and 1
- 356z.61, and 356z.62, 356z.64, 356z.67, 356z.68, 356z.70, and 2
- 356z.71 of the Illinois Insurance Code. Insurance policies 3
- shall comply with Section 356z.19 of the Illinois Insurance 4
- 5 Code. The coverage shall comply with Sections 155.22a, 355b,
- 6 and 370c of the Illinois Insurance Code. The Department of
- Insurance shall enforce the requirements of this Section. 7
- 8 Rulemaking authority to implement Public Act 95-1045, if
- 9 any, is conditioned on the rules being adopted in accordance
- 10 with all provisions of the Illinois Administrative Procedure
- 11 Act and all rules and procedures of the Joint Committee on
- Administrative Rules; any purported rule not so adopted, for 12
- 13 whatever reason, is unauthorized.
- (Source: P.A. 102-30, eff. 1-1-22; 102-103, eff. 1-1-22; 14
- 15 102-203, eff. 1-1-22; 102-306, eff. 1-1-22; 102-642, eff.
- 16 1-1-22; 102-665, eff. 10-8-21; 102-731, eff. 1-1-23; 102-804,
- eff. 1-1-23; 102-813, eff. 5-13-22; 102-816, eff. 1-1-23; 17
- 102-860, eff. 1-1-23; 102-1093, eff. 1-1-23; 102-1117, eff. 18
- 1-13-23; 103-84, eff. 1-1-24; 103-91, eff. 1-1-24; 103-420, 19
- 20 eff. 1-1-24; 103-445, eff. 1-1-24; 103-535, eff. 8-11-23;
- 103-551, eff. 8-11-23; revised 8-29-23.) 21
- 22 Section 25. The Illinois Insurance Code is amended by
- adding Section 356z.71 as follows: 23
- 24 (215 ILCS 5/356z.71 new)

1	Sec. 356z.71. Coverage for hippotherapy, equine therapy,
2	and therapeutic riding.
3	(a) As used in this Section:
4	"Disability" means a determinable physical or mental
5	characteristic of a person, including, but not limited to, a
6	determinable physical characteristic that necessitates the
7	person's use of a quide, hearing, or support dog, that may
8	result from a disease, injury, or congenital condition of
9	birth or a functional disorder.
10	"Equine therapy" means behavioral health therapy delivered
11	by a licensed clinical social worker, licensed marriage and
12	family therapist, or licensed clinical professional counselor,
13	in conjunction with a professional horse handler and a therapy
14	horse.
15	"Hippotherapy" means physical, occupational, or speech
16	therapy, prescribed by a physician and delivered by a licensed
17	occupational therapist, physical therapist, or speech-language
18	pathologist, in conjunction with a professional horse handler
19	and a therapy horse.
20	"Therapeutic riding" means horseback riding lessons
21	adapted to an individual with a disability, delivered by a
22	professional horse handler and a therapy horse.
23	(b) A group or individual policy of accident and health
24	insurance or managed care plan that is amended, delivered,
25	issued, or renewed after the effective date of this amendatory

Act of the 103rd General Assembly shall provide coverage for

- 1 hippotherapy, equine therapy, and other forms of therapeutic
- 2 <u>riding.</u>
- 3 Section 30. The Health Maintenance Organization Act is
- 4 amended by changing Section 5-3 as follows:
- 5 (215 ILCS 125/5-3) (from Ch. 111 1/2, par. 1411.2)
- 6 Sec. 5-3. Insurance Code provisions.
- 7 (a) Health Maintenance Organizations shall be subject to
- 8 the provisions of Sections 133, 134, 136, 137, 139, 140,
- 9 141.1, 141.2, 141.3, 143, 143c, 147, 148, 149, 151, 152, 153,
- 10 154, 154.5, 154.6, 154.7, 154.8, 155.04, 155.22a, 155.49,
- 11 355.2, 355.3, 355b, 355c, 356f, 356g.5-1, 356m, 356q, 356v,
- 12 356w, 356x, 356z.2, 356z.3a, 356z.4, 356z.4a, 356z.5, 356z.6,
- 13 356z.8, 356z.9, 356z.10, 356z.11, 356z.12, 356z.13, 356z.14,
- 14 356z.15, 356z.17, 356z.18, 356z.19, 356z.20, 356z.21, 356z.22,
- 15 356z.23, 356z.24, 356z.25, 356z.26, 356z.28, 356z.29, 356z.30,
- 16 356z.30a, 356z.31, 356z.32, 356z.33, 356z.34, 356z.35,
- 356z.36, 356z.37, 356z.38, 356z.39, 356z.40, 356z.41, 356z.44,
- 18 356z.45, 356z.46, 356z.47, 356z.48, 356z.49, 356z.50, 356z.51,
- 19 356z.53, 356z.54, 356z.55, 356z.56, 356z.57, 356z.58, 356z.59,
- 356z.60, 356z.61, 356z.62, <u>356z.64, 356z.65, 356z.67, 356z.68,</u>
- 21 356z.71, 364, 364.01, 364.3, 367.2, 367.2-5, 367i, 368a, 368b,
- 368c, 368d, 368e, 370c, 370c.1, 401, 401.1, 402, 403, 403A,
- 23 408, 408.2, 409, 412, 444, and 444.1, paragraph (c) of
- 24 subsection (2) of Section 367, and Articles IIA, VIII 1/2,

- XII, XII 1/2, XIII, XIII 1/2, XXV, XXVI, and XXXIIB of the 1
- Illinois Insurance Code. 2

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- (b) For purposes of the Illinois Insurance Code, except 3
- 4 for Sections 444 and 444.1 and Articles XIII and XIII 1/2,
- 5 Health Maintenance Organizations in the following categories
- are deemed to be "domestic companies": 6
- (1) a corporation authorized under the Dental Service 7
- 8 Plan Act or the Voluntary Health Services Plans Act;
 - (2) a corporation organized under the laws of this State; or
- (3) a corporation organized under the laws of another 11
- state, 30% or more of the enrollees of which are residents 12
- 13 this State, except a corporation subject of
- 14 substantially the same requirements in its state of
- organization as is a "domestic company" under Article VIII 15
- 16 1/2 of the Illinois Insurance Code.
- (c) In considering the merger, consolidation, or other 17
- acquisition of control of a Health Maintenance Organization 18
- pursuant to Article VIII 1/2 of the Illinois Insurance Code, 19
- 20 (1) the Director shall give primary consideration to
- the continuation of benefits to enrollees and the 2.1
- 22 financial conditions of the acquired Health Maintenance
- 23 Organization after the merger, consolidation, or other
- 24 acquisition of control takes effect;
- 25 (2)(i) the criteria specified in subsection (1)(b) of
- Section 131.8 of the Illinois Insurance Code shall not 26

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_	apply and (ii) the Director, in making his determination
2	with respect to the merger, consolidation, or other
3	acquisition of control, need not take into account the
1	effect on competition of the merger, consolidation, or
5	other acquisition of control;
ō	(3) the Director shall have the power to require the

- following information:
 - (A) certification by an independent actuary of the adequacy of the reserves of the Health Maintenance Organization sought to be acquired;
 - (B) pro forma financial statements reflecting the combined balance sheets of the acquiring company and the Health Maintenance Organization sought to be acquired as of the end of the preceding year and as of a date 90 days prior to the acquisition, as well as pro financial statements reflecting projected forma combined operation for a period of 2 years;
 - (C) a pro forma business plan detailing an acquiring party's plans with respect to the operation of the Health Maintenance Organization sought to be acquired for a period of not less than 3 years; and
 - (D) such other information as the Director shall require.
- (d) The provisions of Article VIII 1/2 of the Illinois Insurance Code and this Section 5-3 shall apply to the sale by any health maintenance organization of greater than 10% of its

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- enrollee population (including, without limitation, the health maintenance organization's right, title, and interest in and to its health care certificates).
 - (e) In considering any management contract or service agreement subject to Section 141.1 of the Illinois Insurance Code, the Director (i) shall, in addition to the criteria specified in Section 141.2 of the Illinois Insurance Code, take into account the effect of the management contract or service agreement on the continuation of benefits to enrollees and the financial condition of the health maintenance organization to be managed or serviced, and (ii) need not take into account the effect of the management contract or service agreement on competition.
 - (f) Except for small employer groups as defined in the Small Employer Rating, Renewability and Portability Health Insurance Act and except for medicare supplement policies as defined in Section 363 of the Illinois Insurance Code, a Health Maintenance Organization may by contract agree with a group or other enrollment unit to effect refunds or charge additional premiums under the following terms and conditions:
 - (i) the amount of, and other terms and conditions with respect to, the refund or additional premium are set forth in the group or enrollment unit contract agreed in advance of the period for which a refund is to be paid or additional premium is to be charged (which period shall not be less than one year); and

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(ii) the amount of the refund or additional premium 2.0% of not. exceed t.he Health Maintenance Organization's profitable or unprofitable experience with respect to the group or other enrollment unit for the period (and, for purposes of a refund or additional premium, the profitable or unprofitable experience shall be calculated taking into account a pro rata share of the Maintenance Organization's administrative marketing expenses, but shall not include any refund to be made or additional premium to be paid pursuant to this subsection (f)). The Health Maintenance Organization and the group or enrollment unit may agree that the profitable or unprofitable experience may be calculated taking into account the refund period and the immediately preceding 2 plan years.

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

- 1 enrollment unit.
- 2 In no event shall the Illinois Health Maintenance
- 3 Organization Guaranty Association be liable to pay any
- 4 contractual obligation of an insolvent organization to pay any
- 5 refund authorized under this Section.
- 6 (g) Rulemaking authority to implement Public Act 95-1045,
- if any, is conditioned on the rules being adopted in 7
- accordance with all provisions of the Illinois Administrative 8
- 9 Procedure Act and all rules and procedures of the Joint
- 10 Committee on Administrative Rules; any purported rule not so
- 11 adopted, for whatever reason, is unauthorized.
- (Source: P.A. 102-30, eff. 1-1-22; 102-34, eff. 6-25-21; 12
- 13 102-203, eff. 1-1-22; 102-306, eff. 1-1-22; 102-443, eff.
- 1-1-22; 102-589, eff. 1-1-22; 102-642, eff. 1-1-22; 102-665, 14
- 15 eff. 10-8-21; 102-731, eff. 1-1-23; 102-775, eff. 5-13-22;
- 16 102-804, eff. 1-1-23; 102-813, eff. 5-13-22; 102-816, eff.
- 1-1-23; 102-860, eff. 1-1-23; 102-901, eff. 7-1-22; 102-1093, 17
- eff. 1-1-23; 102-1117, eff. 1-13-23; 103-84, eff. 1-1-24; 18
- 103-91, eff. 1-1-24; 103-123, eff. 1-1-24; 103-154, eff. 19
- 20 6-30-23; 103-420, eff. 1-1-24; 103-426, eff. 8-4-23; 103-445,
- eff. 1-1-24; 103-551, eff. 8-11-23; revised 8-29-23.)". 21