- 1 AN ACT concerning health insurance coverage.
- 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
- 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 356u, 356w, 356x, and 356z.2, and 356z.4 of the
- 14 Illinois Insurance Code. The program of health benefits must
- comply with Section 155.37 of the Illinois Insurance Code.
- 16 (Source: P.A. 92-440, eff. 8-17-01; 92-764, eff. 1-1-03.)
- 17 Section 10. The Counties Code is amended by changing
- 18 Section 5-1069.3 as follows:
- 19 (55 ILCS 5/5-1069.3)

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- Sec. 5-1069.3. Required health benefits. If a county,
- 21 including a home rule county, is a self-insurer for purposes
- of providing health insurance coverage for its employees, the
- 23 coverage shall include coverage for the post-mastectomy care
- 24 benefits required to be covered by a policy of accident and
- 25 health insurance under Section 356t and the coverage required

under Sections 356u, 356w, and 356x, and 356z.4 of the

- 27 Illinois Insurance Code. The requirement that health
- 28 benefits be covered as provided in this Section is an
- 29 exclusive power and function of the State and is a denial and

- 1 limitation under Article VII, Section 6, subsection (h) of
- 2 the Illinois Constitution. A home rule county to which this
- 3 Section applies must comply with every provision of this
- 4 Section.
- 5 (Source: P.A. 90-7, eff. 6-10-97; 90-741, eff. 1-1-99.)
- 6 Section 15. The Illinois Municipal Code is amended by
- 7 changing Section 10-4-2.3 as follows:
- 8 (65 ILCS 5/10-4-2.3)
- 9 Sec. 10-4-2.3. Required health benefits. If a
- 10 municipality, including a home rule municipality, is a
- 11 self-insurer for purposes of providing health insurance
- 12 coverage for its employees, the coverage shall include
- 13 coverage for the post-mastectomy care benefits required to be
- 14 covered by a policy of accident and health insurance under
- 15 Section 356t and the coverage required under Sections 356u,
- 16 356w, and 356x, and 356z.4 of the Illinois Insurance Code.
- 17 The requirement that health benefits be covered as provided
- in this is an exclusive power and function of the State and
- is a denial and limitation under Article VII, Section 6,
- 20 subsection (h) of the Illinois Constitution. A home rule
- 21 municipality to which this Section applies must comply with
- 22 every provision of this Section.
- 23 (Source: P.A. 90-7, eff. 6-10-97; 90-741, eff. 1-1-99.)
- 24 Section 20. The Illinois Insurance Code is amended by
- 25 changing Section 351B-5 and adding Section 356z.4 as follows:
- 26 (215 ILCS 5/351B-5) (from Ch. 73, par. 963B-5)
- 27 Sec. 351B-5. Applicability of other Code provisions. All
- 28 policies of accident and health insurance issued under this
- 29 Article shall be subject to the provisions of Sections 356c,
- 30 subsection (a) of Section 356g, 356h, 356h, <u>356z.4</u>, 367c,

- 1 367d, 370, 370a, and 370e of this Code.
- 2 (Source: P.A. 86-1407; 87-792; 87-1066.)
- 3 (215 ILCS 5/356z.4 new)
- 4 Sec. 356z.4. Coverage for certain benefits related to
- 5 <u>brain injury.</u>
- 6 (a) A group or individual policy of accident and health
- 7 <u>insurance</u>, a managed care plan, or multiple employer welfare
- 8 arrangement, that is amended, delivered, issued, or renewed
- 9 after the effective date of this amendatory Act of the 93rd
- 10 General Assembly may not exclude coverage for cognitive
- 11 rehabilitation therapy, cognitive communication therapy,
- 12 <u>neurocognitive therapy and rehabilitation, neurobehavioral,</u>
- 13 <u>neurophysiological</u>, <u>neuropsychological</u>, <u>and</u>
- 14 psychophysiological testing or treatment, neurofeedback
- 15 therapy, remediation, post-acute transition services, or
- 16 <u>community reintegration services necessary as a result of and</u>
- 17 <u>related to an acquired brain injury.</u>
- (b) Coverage required under this Section may be subject
- 19 <u>to deductibles, copayments, coinsurance, or annual or maximum</u>
- 20 payment limits that are consistent with deductibles,
- 21 copayments, coinsurance, and annual or maximum payment limits
- 22 <u>applicable to other similar coverage under the policy.</u>
- 23 (c) The Department shall adopt rules as necessary to
- implement this Section.
- 25 Section 25. The Health Maintenance Organization Act is
- amended by changing Section 4-6.5 as follows:
- 27 (215 ILCS 125/4-6.5)
- Sec. 4-6.5. Required health benefits; Illinois Insurance
- 29 Code requirements. A health maintenance organization is
- 30 subject to the provisions of Sections 155.37, 356t, 356u, and
- 31 356z.1, and 356z.4 of the Illinois Insurance Code.

- 1 (Source: P.A. 92-130, eff. 7-20-01; 92-440, eff. 8-17-01;
- 2 92-651, eff. 7-11-02.)
- 3 Section 30. The Voluntary Health Services Plans Act is
- 4 amended by changing Section 10 as follows:
- 5 (215 ILCS 165/10) (from Ch. 32, par. 604)
- 6 Sec. 10. Application of Insurance Code provisions.
- 7 Health services plan corporations and all persons interested
- 8 therein or dealing therewith shall be subject to the
- 9 provisions of Articles IIA and XII 1/2 and Sections 3.1, 133,
- 10 140, 143, 143c, 149, 155.37, 354, 355.2, 356r, 356t, 356u,
- 11 356v, 356w, 356x, 356y, 356z.1, 356z.2, <u>356z.4</u>, 367.2, 368a,
- 12 401, 401.1, 402, 403, 403A, 408, 408.2, and 412, and
- 13 paragraphs (7) and (15) of Section 367 of the Illinois
- 14 Insurance Code.
- 15 (Source: P.A. 91-406, eff. 1-1-00; 91-549, eff. 8-14-99;
- 16 91-605, eff. 12-14-99; 91-788, eff. 6-9-00; 92-130, eff.
- 7-20-01; 92-440, eff. 8-17-01; 92-651, eff. 7-11-02; 92-764,
- 18 eff. 1-1-03.)
- 19 Section 90. The State Mandates Act is amended by adding
- 20 Section 8.27 as follows:
- 21 (30 ILCS 805/8.27 new)
- 22 <u>Sec. 8.27. Exempt mandate. Notwithstanding Sections 6</u>
- 23 and 8 of this Act, no reimbursement by the State is required
- 24 for the implementation of any mandate created by this
- amendatory Act of the 93rd General Assembly.