



Sen. J. Bradley Burzynski

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LRB095 04187 DRJ 50657 a

1 AMENDMENT TO HOUSE BILL 1533

2 AMENDMENT NO. \_\_\_\_\_. Amend House Bill 1533, by replacing  
3 everything after the enacting clause with the following:

4 "Section 5. The Illinois Public Aid Code is amended by  
5 changing Section 5-2 as follows:

6 (305 ILCS 5/5-2) (from Ch. 23, par. 5-2)

7 Sec. 5-2. Classes of Persons Eligible. Medical assistance  
8 under this Article shall be available to any of the following  
9 classes of persons in respect to whom a plan for coverage has  
10 been submitted to the Governor by the Illinois Department and  
11 approved by him:

12 1. Recipients of basic maintenance grants under  
13 Articles III and IV.

14 2. Persons otherwise eligible for basic maintenance  
15 under Articles III and IV but who fail to qualify  
16 thereunder on the basis of need, and who have insufficient

1 income and resources to meet the costs of necessary medical  
2 care, including but not limited to the following:

3 (a) All persons otherwise eligible for basic  
4 maintenance under Article III but who fail to qualify  
5 under that Article on the basis of need and who meet  
6 either of the following requirements:

7 (i) their income, as determined by the  
8 Illinois Department in accordance with any federal  
9 requirements, is equal to or less than 70% in  
10 fiscal year 2001, equal to or less than 85% in  
11 fiscal year 2002 and until a date to be determined  
12 by the Department by rule, and equal to or less  
13 than 100% beginning on the date determined by the  
14 Department by rule, of the nonfarm income official  
15 poverty line, as defined by the federal Office of  
16 Management and Budget and revised annually in  
17 accordance with Section 673(2) of the Omnibus  
18 Budget Reconciliation Act of 1981, applicable to  
19 families of the same size; or

20 (ii) their income, after the deduction of  
21 costs incurred for medical care and for other types  
22 of remedial care, is equal to or less than 70% in  
23 fiscal year 2001, equal to or less than 85% in  
24 fiscal year 2002 and until a date to be determined  
25 by the Department by rule, and equal to or less  
26 than 100% beginning on the date determined by the

1 Department by rule, of the nonfarm income official  
2 poverty line, as defined in item (i) of this  
3 subparagraph (a).

4 (b) All persons who would be determined eligible  
5 for such basic maintenance under Article IV by  
6 disregarding the maximum earned income permitted by  
7 federal law.

8 3. Persons who would otherwise qualify for Aid to the  
9 Medically Indigent under Article VII.

10 4. Persons not eligible under any of the preceding  
11 paragraphs who fall sick, are injured, or die, not having  
12 sufficient money, property or other resources to meet the  
13 costs of necessary medical care or funeral and burial  
14 expenses.

15 5.(a) Women during pregnancy, after the fact of  
16 pregnancy has been determined by medical diagnosis, and  
17 during the 60-day period beginning on the last day of the  
18 pregnancy, together with their infants and children born  
19 after September 30, 1983, whose income and resources are  
20 insufficient to meet the costs of necessary medical care to  
21 the maximum extent possible under Title XIX of the Federal  
22 Social Security Act.

23 (b) The Illinois Department and the Governor shall  
24 provide a plan for coverage of the persons eligible under  
25 paragraph 5(a) by April 1, 1990. Such plan shall provide  
26 ambulatory prenatal care to pregnant women during a

1 presumptive eligibility period and establish an income  
2 eligibility standard that is equal to 133% of the nonfarm  
3 income official poverty line, as defined by the federal  
4 Office of Management and Budget and revised annually in  
5 accordance with Section 673(2) of the Omnibus Budget  
6 Reconciliation Act of 1981, applicable to families of the  
7 same size, provided that costs incurred for medical care  
8 are not taken into account in determining such income  
9 eligibility.

10 (c) The Illinois Department may conduct a  
11 demonstration in at least one county that will provide  
12 medical assistance to pregnant women, together with their  
13 infants and children up to one year of age, where the  
14 income eligibility standard is set up to 185% of the  
15 nonfarm income official poverty line, as defined by the  
16 federal Office of Management and Budget. The Illinois  
17 Department shall seek and obtain necessary authorization  
18 provided under federal law to implement such a  
19 demonstration. Such demonstration may establish resource  
20 standards that are not more restrictive than those  
21 established under Article IV of this Code.

22 6. Persons under the age of 18 who fail to qualify as  
23 dependent under Article IV and who have insufficient income  
24 and resources to meet the costs of necessary medical care  
25 to the maximum extent permitted under Title XIX of the  
26 Federal Social Security Act.

1           7. Persons who are under 21 years of age and would  
2           qualify as disabled as defined under the Federal  
3           Supplemental Security Income Program, provided medical  
4           service for such persons would be eligible for Federal  
5           Financial Participation, and provided the Illinois  
6           Department determines that:

7                   (a) the person requires a level of care provided by  
8                   a hospital, skilled nursing facility, or intermediate  
9                   care facility, as determined by a physician licensed to  
10                  practice medicine in all its branches;

11                   (b) it is appropriate to provide such care outside  
12                  of an institution, as determined by a physician  
13                  licensed to practice medicine in all its branches;

14                   (c) the estimated amount which would be expended  
15                  for care outside the institution is not greater than  
16                  the estimated amount which would be expended in an  
17                  institution.

18           8. Persons who become ineligible for basic maintenance  
19           assistance under Article IV of this Code in programs  
20           administered by the Illinois Department due to employment  
21           earnings and persons in assistance units comprised of  
22           adults and children who become ineligible for basic  
23           maintenance assistance under Article VI of this Code due to  
24           employment earnings. The plan for coverage for this class  
25           of persons shall:

26                   (a) extend the medical assistance coverage for up

1 to 12 months following termination of basic  
2 maintenance assistance; and

3 (b) offer persons who have initially received 6  
4 months of the coverage provided in paragraph (a) above,  
5 the option of receiving an additional 6 months of  
6 coverage, subject to the following:

7 (i) such coverage shall be pursuant to  
8 provisions of the federal Social Security Act;

9 (ii) such coverage shall include all services  
10 covered while the person was eligible for basic  
11 maintenance assistance;

12 (iii) no premium shall be charged for such  
13 coverage; and

14 (iv) such coverage shall be suspended in the  
15 event of a person's failure without good cause to  
16 file in a timely fashion reports required for this  
17 coverage under the Social Security Act and  
18 coverage shall be reinstated upon the filing of  
19 such reports if the person remains otherwise  
20 eligible.

21 9. Persons with acquired immunodeficiency syndrome  
22 (AIDS) or with AIDS-related conditions with respect to whom  
23 there has been a determination that but for home or  
24 community-based services such individuals would require  
25 the level of care provided in an inpatient hospital,  
26 skilled nursing facility or intermediate care facility the

1 cost of which is reimbursed under this Article. Assistance  
2 shall be provided to such persons to the maximum extent  
3 permitted under Title XIX of the Federal Social Security  
4 Act.

5 10. Participants in the long-term care insurance  
6 partnership program established under the Illinois  
7 Long-Term Care Partnership Program Act ~~Partnership for~~  
8 ~~Long Term Care Act~~ who meet the qualifications for  
9 protection of resources described in Section 15 ~~25~~ of that  
10 Act.

11 11. Persons with disabilities who are employed and  
12 eligible for Medicaid, pursuant to Section  
13 1902(a)(10)(A)(ii)(xv) of the Social Security Act, as  
14 provided by the Illinois Department by rule. In  
15 establishing eligibility standards under this paragraph  
16 11, the Department shall, subject to federal approval:

17 (a) set the income eligibility standard at not  
18 lower than 350% of the federal poverty level;

19 (b) exempt retirement accounts that the person  
20 cannot access without penalty before the age of 59 1/2,  
21 and medical savings accounts established pursuant to  
22 26 U.S.C. 220;

23 (c) allow non-exempt assets up to \$25,000 as to  
24 those assets accumulated during periods of eligibility  
25 under this paragraph 11; and

26 (d) continue to apply subparagraphs (b) and (c) in

1 determining the eligibility of the person under this  
2 Article even if the person loses eligibility under this  
3 paragraph 11.

4 12. Subject to federal approval, persons who are  
5 eligible for medical assistance coverage under applicable  
6 provisions of the federal Social Security Act and the  
7 federal Breast and Cervical Cancer Prevention and  
8 Treatment Act of 2000. Those eligible persons are defined  
9 to include, but not be limited to, the following persons:

10 (1) persons who have been screened for breast or  
11 cervical cancer under the U.S. Centers for Disease  
12 Control and Prevention Breast and Cervical Cancer  
13 Program established under Title XV of the federal  
14 Public Health Services Act in accordance with the  
15 requirements of Section 1504 of that Act as  
16 administered by the Illinois Department of Public  
17 Health; and

18 (2) persons whose screenings under the above  
19 program were funded in whole or in part by funds  
20 appropriated to the Illinois Department of Public  
21 Health for breast or cervical cancer screening.

22 "Medical assistance" under this paragraph 12 shall be  
23 identical to the benefits provided under the State's  
24 approved plan under Title XIX of the Social Security Act.  
25 The Department must request federal approval of the  
26 coverage under this paragraph 12 within 30 days after the



1 effective date of this amendatory Act of the 92nd General  
2 Assembly.

3 13. Subject to appropriation and to federal approval,  
4 persons living with HIV/AIDS who are not otherwise eligible  
5 under this Article and who qualify for services covered  
6 under Section 5-5.04 as provided by the Illinois Department  
7 by rule.

8 14. Subject to the availability of funds for this  
9 purpose, the Department may provide coverage under this  
10 Article to persons who reside in Illinois who are not  
11 eligible under any of the preceding paragraphs and who meet  
12 the income guidelines of paragraph 2(a) of this Section and  
13 (i) have an application for asylum pending before the  
14 federal Department of Homeland Security or on appeal before  
15 a court of competent jurisdiction and are represented  
16 either by counsel or by an advocate accredited by the  
17 federal Department of Homeland Security and employed by a  
18 not-for-profit organization in regard to that application  
19 or appeal, or (ii) are receiving services through a  
20 federally funded torture treatment center. Medical  
21 coverage under this paragraph 14 may be provided for up to  
22 24 continuous months from the initial eligibility date so  
23 long as an individual continues to satisfy the criteria of  
24 this paragraph 14. If an individual has an appeal pending  
25 regarding an application for asylum before the Department  
26 of Homeland Security, eligibility under this paragraph 14

1 may be extended until a final decision is rendered on the  
2 appeal. The Department may adopt rules governing the  
3 implementation of this paragraph 14.

4 15. FamilyCare eligibility.

5 (a) A caretaker relative who is 19 years of age or  
6 older when countable income is at or below 185% of the  
7 Federal Poverty Level Guidelines, as published  
8 annually in the Federal Register, for the appropriate  
9 family size. A person may not spend down to become  
10 eligible under this paragraph 15.

11 (b) Eligibility shall be reviewed annually.

12 (c) Caretaker relatives enrolled under this  
13 paragraph 15 in families with countable income above  
14 150% and at or below 185% of the Federal Poverty Level  
15 Guidelines shall be counted as family members and pay  
16 premiums as established under the Children's Health  
17 Insurance Program Act.

18 (d) Premiums shall be billed by and payable to the  
19 Department or its authorized agent, on a monthly basis.

20 (e) The premium due date is the last day of the  
21 month preceding the month of coverage.

22 (f) Individuals shall have a grace period through  
23 the month of coverage to pay the premium.

24 (g) Failure to pay the full monthly premium by the  
25 last day of the grace period shall result in  
26 termination of coverage.

1           (h) Partial premium payments shall not be  
2           refunded.

3           (i) Following termination of an individual's  
4           coverage under this paragraph 15, the following action  
5           is required before the individual can be re-enrolled:

6                   (1) A new application must be completed and the  
7                   individual must be determined otherwise eligible.

8                   (2) There must be full payment of premiums due  
9                   under this Code, the Children's Health Insurance  
10                   Program Act, the Covering ALL KIDS Health  
11                   Insurance Act, or any other healthcare program  
12                   administered by the Department for periods in  
13                   which a premium was owed and not paid for the  
14                   individual.

15                   (3) The first month's premium must be paid if  
16                   there was an unpaid premium on the date the  
17                   individual's previous coverage was canceled.

18           The Illinois Department and the Governor shall provide a  
19           plan for coverage of the persons eligible under paragraph 7 as  
20           soon as possible after July 1, 1984.

21           The eligibility of any such person for medical assistance  
22           under this Article is not affected by the payment of any grant  
23           under the Senior Citizens and Disabled Persons Property Tax  
24           Relief and Pharmaceutical Assistance Act or any distributions  
25           or items of income described under subparagraph (X) of  
26           paragraph (2) of subsection (a) of Section 203 of the Illinois

1 Income Tax Act. The Department shall by rule establish the  
2 amounts of assets to be disregarded in determining eligibility  
3 for medical assistance, which shall at a minimum equal the  
4 amounts to be disregarded under the Federal Supplemental  
5 Security Income Program. The amount of assets of a single  
6 person to be disregarded shall not be less than \$2,000, and the  
7 amount of assets of a married couple to be disregarded shall  
8 not be less than \$3,000.

9 To the extent permitted under federal law, any person found  
10 guilty of a second violation of Article VIII A shall be  
11 ineligible for medical assistance under this Article, as  
12 provided in Section 8A-8.

13 The eligibility of any person for medical assistance under  
14 this Article shall not be affected by the receipt by the person  
15 of donations or benefits from fundraisers held for the person  
16 in cases of serious illness, as long as neither the person nor  
17 members of the person's family have actual control over the  
18 donations or benefits or the disbursement of the donations or  
19 benefits.

20 (Source: P.A. 94-629, eff. 1-1-06; 94-1043, eff. 7-24-06;  
21 95-546, eff. 8-29-07; revised 1-22-08.)

22 Section 99. Effective date. This Act takes effect upon  
23 becoming law."