

Rep. Mary E. Flowers

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1	AMENDMENT TO HOUSE BILL 4085
2	AMENDMENT NO Amend House Bill 4085 on page 5,
3	immediately below line 1, by inserting the following:
4	"Section 55. 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 provide
9	the post-mastectomy care benefits required to be covered by a
10	policy of accident and health insurance under Section 356t of
11	the Illinois Insurance Code. The program of health benefits
12	shall provide the coverage required under Sections 356g,
13	356g.5, 356g.5-1, 356m, 356u, 356w, 356x, 356z.2, 356z.4,
14	356z.6, 356z.8, 356z.9, 356z.10, 356z.11, 356z.12, 356z.13,
15	356z.14, 356z.15, and 356z.17, and 356z.19, and 356z.22 of the

comply with Sections 155.22a, and 155.37, and 356z.19 of the
 Illinois Insurance Code.

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.

9 (Source: P.A. 96-139, eff. 1-1-10; 96-328, eff. 8-11-09;
10 96-639, eff. 1-1-10; 96-1000, eff. 7-2-10; 97-282, eff. 8-9-11;
11 97-343, eff. 1-1-12; revised 10-14-11.)

Section 60. The Counties Code is amended by changing Section 5-1069.3 as follows:

14 (55 ILCS 5/5-1069.3)

Sec. 5-1069.3. Required health benefits. If a county, 15 including a home rule county, is a self-insurer for purposes of 16 providing health insurance coverage for its employees, the 17 18 coverage shall include coverage for the post-mastectomy care benefits required to be covered by a policy of accident and 19 20 health insurance under Section 356t and the coverage required under Sections 356q, 356q.5, 356q.5-1, 356u, 356w, 356x, 21 22 356z.6, 356z.8, 356z.9, 356z.10, 356z.11, 356z.12, 356z.13, 23 356z.14, and 356z.15, and 356z.22 of the Illinois Insurance 24 Code. The coverage shall comply with Sections Section 155.22a 09700HB4085ham007 -3- LRB097 15077 RPM 67252 a

1 <u>and</u> 356z.19 of the Illinois Insurance Code. The requirement 2 that health benefits be covered as provided in this Section is 3 an exclusive power and function of the State and is a denial 4 and limitation under Article VII, Section 6, subsection (h) of 5 the Illinois Constitution. A home rule county to which this 6 Section applies must comply with every provision of this 7 Section.

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 12 Administrative Rules; any purported rule not so adopted, for 13 whatever reason, is unauthorized.

14 (Source: P.A. 96-139, eff. 1-1-10; 96-328, eff. 8-11-09; 15 96-1000, eff. 7-2-10; 97-282, eff. 8-9-11; 97-343, eff. 1-1-12; 16 revised 10-14-11.)

Section 65. The Illinois Municipal Code is amended by changing Section 10-4-2.3 as follows:

19 (65 ILCS 5/10-4-2.3)

Sec. 10-4-2.3. Required health benefits. If a municipality, including a home rule municipality, is a self-insurer for purposes of providing health insurance coverage for its employees, the coverage shall include coverage for the post-mastectomy care benefits required to be covered by 09700HB4085ham007 -4- LRB097 15077 RPM 67252 a

1 a policy of accident and health insurance under Section 356t and the coverage required under Sections 356q, 356q.5, 2 356g.5-1, 356u, 356w, 356x, 356z.6, 356z.8, 356z.9, 356z.10, 3 4 356z.11, 356z.12, 356z.13, 356z.14, and 356z.15, and 356z.22 of 5 the Illinois Insurance Code. The coverage shall comply with Sections Section 155.22a and 356z.19 of the Illinois Insurance 6 Code. The requirement that health benefits be covered as 7 8 provided in this is an exclusive power and function of the 9 State and is a denial and limitation under Article VII, Section 10 6, subsection (h) of the Illinois Constitution. A home rule 11 municipality to which this Section applies must comply with every provision of this Section. 12

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.

19 (Source: P.A. 96-139, eff. 1-1-10; 96-328, eff. 8-11-09; 20 96-1000, eff. 7-2-10; 97-282, eff. 8-9-11; 97-343, eff. 1-1-12; 21 revised 10-14-11.)

Section 70. The School Code is amended by changing Section 10-22.3f as follows:

24 (105 ILCS 5/10-22.3f)

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1 Sec. 10-22.3f. Required health benefits. Insurance protection and benefits for employees shall provide the 2 post-mastectomy care benefits required to be covered by a 3 4 policy of accident and health insurance under Section 356t and 5 the coverage required under Sections 356g, 356g.5, 356g.5-1, 6 356u, 356w, 356x, 356z.6, 356z.8, 356z.9, 356z.11, 356z.12, 356z.13, 356z.14, and 356z.15, and 356z.22 of the Illinois 7 Insurance Code. Insurance policies shall comply with Section 8 9 356z.19 of the Illinois Insurance Code. The coverage shall 10 comply with Section 155.22a of the Illinois Insurance Code.

11 Rulemaking authority to implement Public Act 95-1045, if 12 any, is conditioned on the rules being adopted in accordance 13 with all provisions of the Illinois Administrative Procedure 14 Act and all rules and procedures of the Joint Committee on 15 Administrative Rules; any purported rule not so adopted, for 16 whatever reason, is unauthorized.

17 (Source: P.A. 96-139, eff. 1-1-10; 96-328, eff. 8-11-09; 18 96-1000, eff. 7-2-10; 97-282, eff. 8-9-11; 97-343, eff. 1-1-12; 19 revised 9-28-11.)

20 Section 75. The Illinois Insurance Code is amended by 21 adding Section 356z.22 as follows:

22 (215 ILCS 5/356z.22 new)

23 <u>Sec. 356z.22. Limitation; erectile dysfunction medication.</u>
 24 <u>A group or individual policy of accident and health insurance</u>

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1 <u>or managed care plan amended, delivered, issued, or renewed</u>
2 <u>after the effective date of this amendatory Act of the 97th</u>
3 <u>General Assembly that does not provide coverage for</u>
4 <u>contraception may not provide coverage for erectile</u>
5 <u>dysfunction medication.</u>

6 Section 80. The Health Maintenance Organization Act is
7 amended by changing Section 5-3 as follows:

8 (215 ILCS 125/5-3) (from Ch. 111 1/2, par. 1411.2)

9 Sec. 5-3. Insurance Code provisions.

(a) Health Maintenance Organizations shall be subject to 10 11 the provisions of Sections 133, 134, 136, 137, 139, 140, 141.1, 12 141.2, 141.3, 143, 143c, 147, 148, 149, 151, 152, 153, 154, 13 154.5, 154.6, 154.7, 154.8, 155.04, 155.22a, 355.2, 356g.5-1, 14 356m, 356v, 356w, 356x, 356y, 356z.2, 356z.4, 356z.5, 356z.6, 356z.8, 356z.9, 356z.10, 356z.11, 356z.12, 356z.13, 356z.14, 15 356z.15, 356z.17, 356z.18, 356z.19, <u>356z.21</u> 356z.19, <u>356z.22</u>, 16 364.01, 367.2, 367.2-5, 367i, 368a, 368b, 368c, 368d, 368e, 17 18 370c, 370c.1, 401, 401.1, 402, 403, 403A, 408, 408.2, 409, 412, 19 444, and 444.1, paragraph (c) of subsection (2) of Section 367, and Articles IIA, VIII 1/2, XII, XII 1/2, XIII, XIII 1/2, XXV, 20 21 and XXVI of the Illinois Insurance Code.

(b) For purposes of the Illinois Insurance Code, except for
Sections 444 and 444.1 and Articles XIII and XIII 1/2, Health
Maintenance Organizations in the following categories are

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to

1 deemed to be "domestic companies": (1) a corporation authorized under the Dental Service 2 3 Plan Act or the Voluntary Health Services Plans Act; (2) a corporation organized under the laws of this 4 5 State; or (3) a corporation organized under the laws of another 6 state, 30% or more of the enrollees of which are residents 7 8 of this State, except a corporation subject 9 substantially the same requirements in its state of

10 organization as is a "domestic company" under Article VIII 1/2 of the Illinois Insurance Code. 11

(c) In considering the merger, consolidation, or other 12 13 acquisition of control of a Health Maintenance Organization pursuant to Article VIII 1/2 of the Illinois Insurance Code, 14

15 (1) the Director shall give primary consideration to 16 the continuation of benefits to enrollees and the financial 17 conditions of the acquired Health Maintenance Organization after the merger, consolidation, or other acquisition of 18 control takes effect; 19

20 (2) (i) the criteria specified in subsection (1) (b) of Section 131.8 of the Illinois Insurance Code shall not 21 22 apply and (ii) the Director, in making his determination with respect to the merger, consolidation, or other 23 24 acquisition of control, need not take into account the 25 effect on competition of the merger, consolidation, or 26 other acquisition of control;

(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 6 combined balance sheets of the acquiring company and 7 8 the Health Maintenance Organization sought to be 9 acquired as of the end of the preceding year and as of 10 a date 90 days prior to the acquisition, as well as pro 11 forma financial statements reflecting projected 12 combined operation for a period of 2 years;

13 (C) a pro forma business plan detailing an 14 acquiring party's plans with respect to the operation 15 of the Health Maintenance Organization sought to be 16 acquired for a period of not less than 3 years; and

17 (D) such other information as the Director shall18 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 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

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1 Code, the Director (i) shall, in addition to the criteria specified in Section 141.2 of the Illinois Insurance Code, take 2 into account the effect of the management contract or service 3 4 agreement on the continuation of benefits to enrollees and the 5 financial condition of the health maintenance organization to 6 be managed or serviced, and (ii) need not take into account the effect of the management contract or service agreement on 7 8 competition.

9 (f) Except for small employer groups as defined in the 10 Small Employer Rating, Renewability and Portability Health 11 Insurance Act and except for medicare supplement policies as 12 defined in Section 363 of the Illinois Insurance Code, a Health 13 Maintenance Organization may by contract agree with a group or 14 other enrollment unit to effect refunds or charge additional 15 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

(ii) the amount of the refund or additional premium 22 23 shall not exceed 20% of the Health Maintenance 24 Organization's profitable or unprofitable experience with 25 respect to the group or other enrollment unit for the 26 period (and, for purposes of a refund or additional

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1 premium, the profitable or unprofitable experience shall be calculated taking into account a pro rata share of the 2 3 Health Maintenance Organization's administrative and 4 marketing expenses, but shall not include any refund to be 5 made or additional premium to be paid pursuant to this subsection (f)). The Health Maintenance Organization and 6 the group or enrollment unit may agree that the profitable 7 8 or unprofitable experience may be calculated taking into 9 account the refund period and the immediately preceding 2 10 plan years.

11 Health Maintenance Organization shall include The а statement in the evidence of coverage issued to each enrollee 12 13 describing the possibility of a refund or additional premium, 14 and upon request of any group or enrollment unit, provide to 15 the group or enrollment unit a description of the method used 16 calculate (1)the Health Maintenance Organization's to 17 profitable experience with respect to the group or enrollment 18 unit and the resulting refund to the group or enrollment unit or (2) the Health Maintenance Organization's unprofitable 19 20 experience with respect to the group or enrollment unit and the 21 resulting additional premium to be paid by the group or 22 enrollment unit.

In no event shall the Illinois Health Maintenance Organization Guaranty Association be liable to pay any contractual obligation of an insolvent organization to pay any refund authorized under this Section. 09700HB4085ham007 -11- LRB097 15077 RPM 67252 a

1	(g) Rulemaking authority to implement Public Act 95-1045,
2	if any, is conditioned on the rules being adopted in accordance
3	with all provisions of the Illinois Administrative Procedure
4	Act and all rules and procedures of the Joint Committee on
5	Administrative Rules; any purported rule not so adopted, for
6	whatever reason, is unauthorized.
7	(Source: P.A. 96-328, eff. 8-11-09; 96-639, eff. 1-1-10;
8	96-833, eff. 6-1-10; 96-1000, eff. 7-2-10; 97-282, eff. 8-9-11;
9	97-343, eff. 1-1-12; 97-437, eff. 8-18-11; 97-486, eff. 1-1-12;
10	97-592, eff. 1-1-12; revised 10-13-11.)

Section 85. The Limited Health Service Organization Act is amended by changing Section 4003 as follows:

13 (215 ILCS 130/4003) (from Ch. 73, par. 1504-3)

14 Sec. 4003. Illinois Insurance Code provisions. Limited health service organizations shall be subject to the provisions 15 of Sections 133, 134, 136, 137, 139, 140, 141.1, 141.2, 141.3, 16 143, 143c, 147, 148, 149, 151, 152, 153, 154, 154.5, 154.6, 17 18 154.7, 154.8, 155.04, 155.37, 355.2, 356v, 356z.10, 356z.21 356z.19, 356z.22, 368a, 401, 401.1, 402, 403, 403A, 408, 408.2, 19 409, 412, 444, and 444.1 and Articles IIA, VIII 1/2, XII, XII 20 21 1/2, XIII, XIII 1/2, XXV, and XXVI of the Illinois Insurance 22 Code. For purposes of the Illinois Insurance Code, except for 23 Sections 444 and 444.1 and Articles XIII and XIII 1/2, limited 24 health service organizations in the following categories are

1 deemed to be domestic companies: (1) a corporation under the laws of this State; or 2 3 (2) a corporation organized under the laws of another state, 30% of more of the enrollees of which are residents 4 5 State, except a corporation of this subject to substantially the same requirements in its state of 6 organization as is a domestic company under Article VIII 7 8 1/2 of the Illinois Insurance Code. (Source: P.A. 97-486, eff. 1-1-12; 97-592, 1-1-12; revised 9 10 10 - 13 - 11.)

Section 90. The Voluntary Health Services Plans Act is amended by changing Section 10 as follows:

13 (215 ILCS 165/10) (from Ch. 32, par. 604)

14 Sec. 10. Application of Insurance Code provisions. Health services plan corporations and all persons interested therein 15 or dealing therewith shall be subject to the provisions of 16 Articles IIA and XII 1/2 and Sections 3.1, 133, 136, 139, 140, 17 18 143, 143c, 149, 155.22a, 155.37, 354, 355.2, 356g, 356g.5, 356g.5-1, 356r, 356t, 356u, 356v, 356w, 356x, 356y, 356z.1, 19 356z.2, 356z.4, 356z.5, 356z.6, 356z.8, 356z.9, 356z.10, 20 21 356z.11, 356z.12, 356z.13, 356z.14, 356z.15, 356z.18, 356z.19, 22 356z.21 356z.19, 356z.22, 364.01, 367.2, 368a, 401, 401.1, 402, 23 403, 403A, 408, 408.2, and 412, and paragraphs (7) and (15) of 24 Section 367 of the Illinois Insurance Code.

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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. (Source: P.A. 96-328, eff. 8-11-09; 96-833, eff. 6-1-10;

8 96-1000, eff. 7-2-10; 97-282, eff. 8-9-11; 97-343, eff. 1-1-12;
9 97-486, eff. 1-1-12; 97-592, eff. 1-1-12; revised 10-13-11.)".