**Section 125.110 Definitions**

For the purpose of this Part, the following terms shall be defined as follows:

 "Act" means the Children's Health Insurance Program Act [215 ILCS 106].

"All Kids Health Plan" means the health benefits coverage containing cost sharing features that is available to eligible children under the Act and includes All Kids Share (no premium required) and All Kids Premium Level 1 (premium required).

"All Kids Rebate" means the program available under the Act until December 31, 2013, for which the Department, on behalf of an eligible child, made rebate payments to offset a family's cost of insuring that child under privately sponsored or employer-based health insurance.

 "Caretaker Relative" means a relative as specified in this definition, with whom the child lives, who is providing care, supervision and a home for the child. Caretaker relatives include:

 Blood or adoptive relatives within the fifth degree of kinship:

 father and mother

 brother and sister

 grandmother and grandfather (including up to great-great-great)

 uncle and aunt (including up to great-great)

 nephew and niece (including up to great-great)

 first cousin

 first cousin once removed (child of first cousin)

 second cousin (child of great-aunt/uncle)

 Step relatives:

 step-father and step-mother

 step-brother and step-sister

 A person who is or has been married to one of the above relatives.

 "Department" means the Department of Healthcare and Family Services and any successor agencies.

 "Family" means the child applying for the Program and the following individuals who live with the child:

The child's parents

 The spouse of the child's parent

 Children under 19 years of age of the parents or the parent's spouse

 The spouse of the child

 The children of the child

 If any of the above is pregnant, the unborn children.

"FamilyCare Premium" means coverage of parents and caretaker relatives in families with income above 150% of FPL. The FamilyCare Premium program ceased effective June 30, 2012, but unpaid premiums may be relevant to children's eligibility under this Part.

 "Federal Poverty Level" or "FPL" means the poverty guidelines updated periodically in the Federal Register by the U.S. Department of Health and Human Services. These guidelines set poverty levels by family size.

 "MAGI Methodology" means the method of determining income eligibility using Modified Adjusted Gross Income established at section 2102(b)(1)(v) of the Social Security Act (42 USC 1397bb(b)(1)(v)) and federal regulations at 42 CFR 457.315 (77 FR 17214, 2012).

"Medical Assistance" means the services and programs reimbursed under the Public Aid Code.

 "Practitioner" means a physician (including a hospital billing a physician office visit), osteopath, podiatrist, optometrist, chiropractor, advanced practice nurse, Federally Qualified Health Center (FQHC), Rural Health Clinic (RHC) or Encounter Rate Clinic (ERC).

"Program" means the program created under the Children's Health Insurance Program Act and this Part.

 "REV" means the Recipient Eligibility Verification system through which medical providers can obtain eligibility and claim status information electronically.

(Source: Amended at 38 Ill. Reg. 18451, effective August 19, 2014)