



**HFS**

Illinois Department of  
Healthcare and Family Services

We improve lives.

## ***HFS to Proceed With Health Benefits for Immigrant Adults and Seniors Redetermination Process***

***Clarified eligibility requirements will preserve coverage for eligible individuals with no alternative insurance options***

**FOR IMMEDIATE RELEASE:**

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**SPRINGFIELD** - The Illinois Department of Healthcare and Family Services (HFS) will begin annual redeterminations, or eligibility verifications, for [Health Benefits for Immigrant Adults](#) (HBIA) and [Health Benefits for Immigrant Seniors](#) (HBIS) program enrollees. This process will mirror the redetermination process used in the traditional Medicaid program to ensure those enrolled remain eligible. In addition, to further clarify program eligibility requirements, HFS has filed amended emergency rules.

HFS remains committed to operating these programs to provide health coverage for eligible individuals who meet income eligibility requirements for the program and have no alternative coverage options. In the next quarter, HFS will be working to make the following program adjustments:

- Close ineligible cases for any enrollee who is over income or who otherwise no longer meets the program eligibility requirements, effective May 1. This automated process, which is standard practice in the regular Medicaid program, would already be occurring, if not for the federal COVID-19 public health emergency.
- Begin conducting redeterminations for HBIA/HBIS enrollees, mirroring the process that Medicaid customers go through annually to verify their continued eligibility for coverage. HBIA and HBIS redeterminations will begin to be processed starting April 1, and these renewals will incorporate notification and a public health emergency unwinding grace period for response. Anyone found ineligible for continued coverage or who does not respond to HFS when they are

required to do so will lose coverage effective July 1. The HBIS and HBIA programs launched during the federal public health emergency, when the federal government required states to pause Medicaid redeterminations. Medicaid redeterminations began again in 2023, following the end of the federal Medicaid Continuous Coverage Requirement.

- Refer Legal Permanent Residents who qualify for other available health care coverage to the alternative coverage they are eligible for.
  - Legal Permanent Residents who have been in the United States for over five years may qualify for Medicaid coverage and will automatically transition to Medicaid in May if they otherwise meet eligibility requirements. Customer services will remain consistent and will be eligible for federal matching funds.
  - Legal Permanent Residents who have been in the United States for less than five years will be removed from the program and referred to the Affordable Care Act (ACA) Health Insurance Marketplace, which provides subsidies to noncitizens who are lawfully present in the country. HFS will encourage and assist affected HBIA/HBIS members with enrolling in an ACA Marketplace plan and is working with the Illinois Department of Insurance (IDOI) to ensure that Navigators can assist individuals with enrolling in coverage. These individuals will qualify for Medicaid coverage if they meet the eligibility requirements once they have been in the country for five years. This change is provided for in the amended administrative rules HFS has filed.

The HBIS program provides health care coverage to eligible individuals aged 65 and older, while the HBIA program provides coverage to eligible individuals aged 42 to 64. Many of the changes HFS will make to these programs in the coming months would have otherwise already been made if not for the ongoing process of unwinding from the federal public health emergency that has been taking place over the past year.

Redeterminations ensure that enrollee eligibility for these health care programs is consistently evaluated. HFS is committed to ensuring that individuals who remain eligible for coverage stay covered through the redetermination process. The Department is also committed to ensuring that individuals who are no longer eligible for benefits – whether those are Medicaid or HBIA/HBIS benefits – receive helpful information about their options so they can connect to alternative coverage, particularly through the federal ACA Marketplace.

HFS' goal is to provide robust assistance during this process that meets the needs of affected customers. The Department is working closely with IDOI to make sure Get Covered Illinois resources are deployed to support individuals who will be seeking coverage through the ACA Marketplace. Anyone who is referred to the ACA Marketplace and is in need of assistance with enrolling in coverage is encouraged to connect with a Navigator:

- choose Get Free Help on the Getcoveredillinois.gov menu,
- or call the ACA Marketplace Call Center at 1-800-318-2596.

Navigators have resources available to assist individuals in languages other than English.

HFS understands the HBIA and HBIS programs have provided critical health care access for thousands of previously uninsured Illinois residents, and the Department will continue to balance its commitment to ensuring that HBIA and HBIS remain sources of high-quality health coverage for those who are eligible with the fiscal sustainability of the program.

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