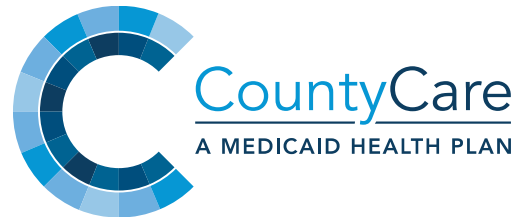


August CM Webinar

Wednesday, August 19, 2026

Stephanie R. Nickles

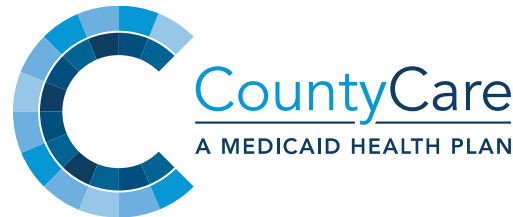
Clinical Training Manager



Meeting Schedule

Wednesday, August 19th, 2026

1. Korrine Lee– Evolent Oncology (20 Minutes)
2. Kera Beskin- HR1 Training(40 minutes)

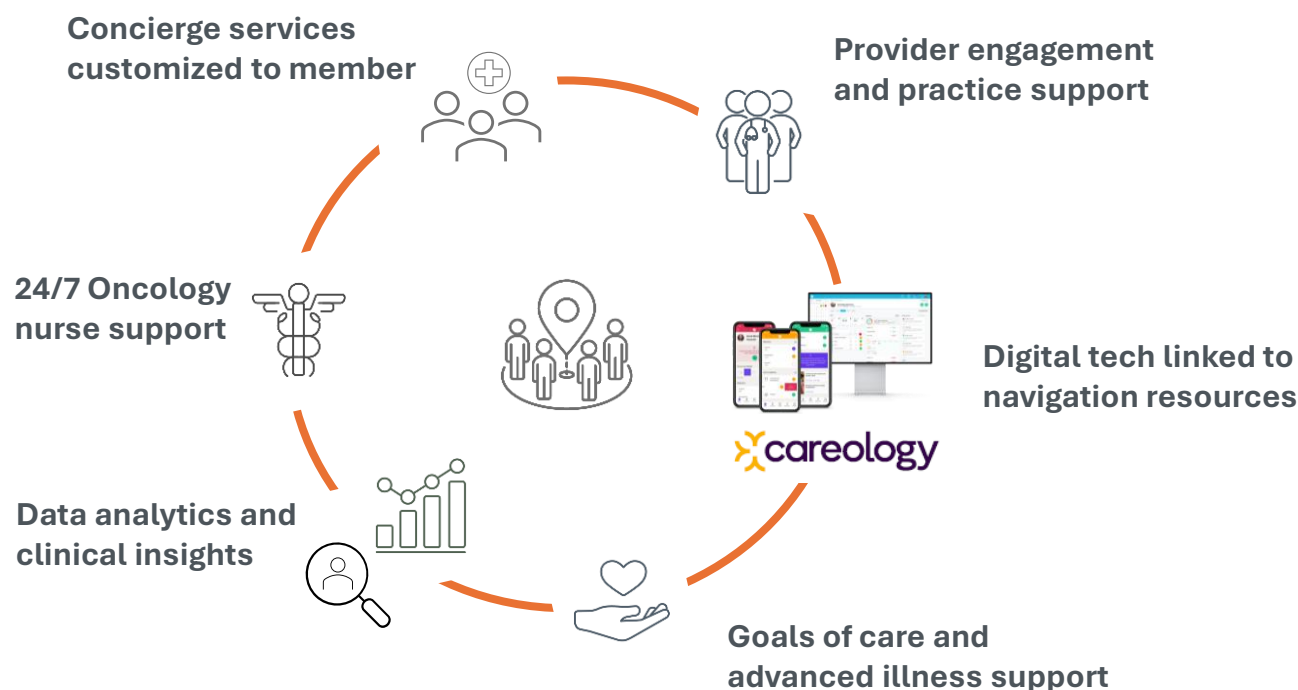




Evolut's Oncology Navigation Program

Korinne Lee, FNP-C, AOCNP

Our services: Whole-person focus supporting each member from diagnosis through every step of the cancer care experience



Early identification of member risk through Evolent data and provider collaboration

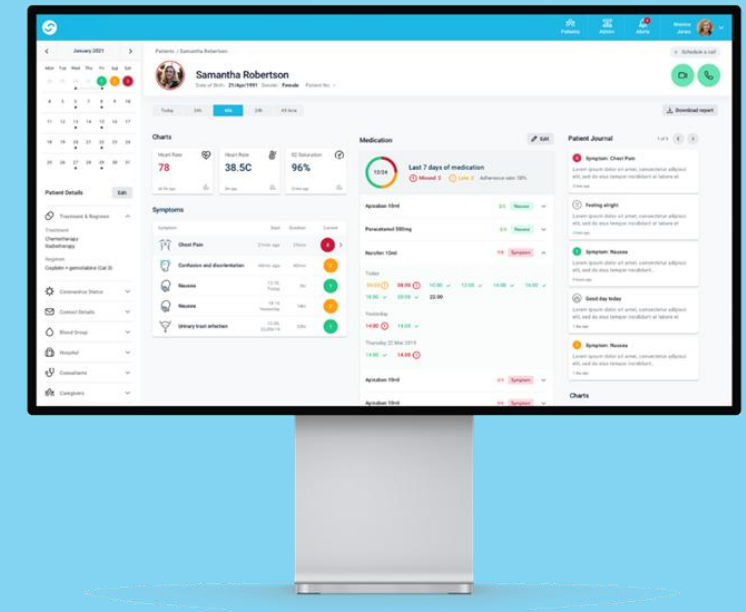
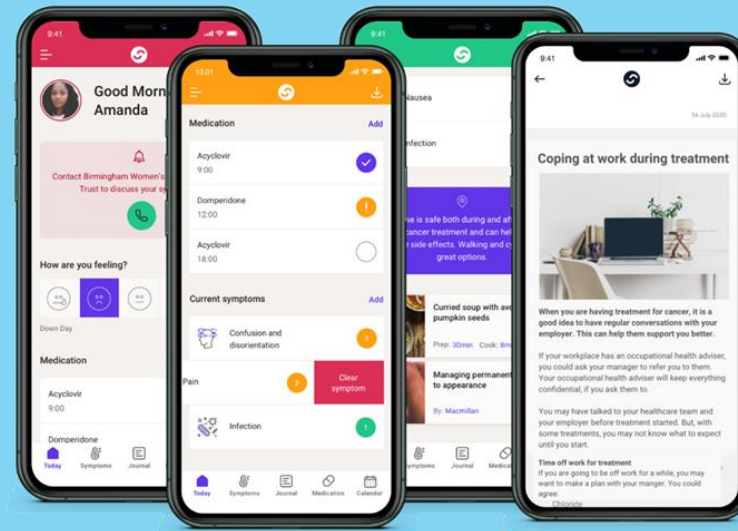
Flexible, integrated patient engagement modalities – high-tech, high-touch support

Deep expertise in patient activation to engage in support and empower in care journey

Evidence-based clinical insights driving all interventions as part of Oncology condition management

Evolut's partnership with Careology provides patients with an intuitive tool which empowers our navigators to intervene in real time.

Real time symptom escalation allows our navigators to reach out to patients with guidance and support any time day or night 365 days a year.



- Symptoms & side effects
- Medication management
- Personalized supportive care
- PROs & assessments
- Treatment journal
- History

- Visibility of patient status
- Escalation path / Directionality
- Watch lists
- Patient engagement
- Interoperability
- Content prescription

Patient story

Meet Janet

- 48-year-old member with breast cancer
- Status post left mastectomy, starting chemotherapy
- Limited family support, multiple comorbidities

Before Navigation

- Historically used the ER to manage symptoms
- Gaps in understanding her cancer and treatment
- Fearful of side effects and comorbidity impact
- Reluctant to call for help when symptoms arose
- No advance care planning in place

After Navigation

Our Approach in Action

- **Personalized plan:** Motivational interviewing led holistic intake
- **Provider feedback loops:** Coordination with her oncology team and case managers
- **Longitudinal engagement:** Careology app symptom logging and ongoing check-ins

Concrete Interventions

- Tailored emergency plan and treatment education
- Real-time coaching on side effects, avoiding the ER and dehydration
- ACP discussions with the Primary Navigator
- Financial needs coordinated with case management

Results

Improved member experience

- Completed chemotherapy feeling supported
- Symptoms managed from home
- Confident using the app for support
- Prepared for the radiation phase

Cost Savings

Avoided unnecessary hospital and ED visits

Estimated savings:

\$50,200

Integrated Care team

- Executable Advance Directive sent to patient
- Oncology and navigation teams aligned

Member Participation

Cancer Care Navigation Program



Who is eligible to participate?

- Active County Care Medicaid member
- 18 years or older
- Confirmed cancer diagnosis



How do members join the program?

- Referrals from CCH Care management team
- Interest form on CountyCare website (Self-Referral)
- Data model
- Referrals from Providers

Care Navigation Program: Referral Portal

Leverage our secure [Referral Portal](https://care.navigation.Evolent.com) using the link below to quickly and seamlessly refer members to Evolent's Care Navigation program.

- Key components and features:
 - Built to accelerate referrals and simplify communication
 - Real-Time Support: Direct line to the full navigation team
 - Document Upload: Attach supporting files in pdf form

<https://care.navigation.Evolent.com>

Evolut Navigation program

Slides deck to share with CCH CM team

Understanding Medicaid and H.R. 1 Medicaid Eligibility Changes

Kera Beskin

August 19, 2026



Cook County DEPT. of
Public Health

**BUILDING
HEALTHIER
COMMUNITIES**



**COOK COUNTY
HEALTH**

Agenda

- Welcome and Introductions
- Overview of Cook County Health
- Medicaid 101
- H.R. 1 Medicaid eligibility changes
- Response from Cook County Health
- How to help - resources and actions to take now
- Q&A

H.R. 1 Medicaid Eligibility Changes



H.R.1 / One Big Beautiful Bill Act (OBBBA)

- H.R. 1 was signed by President Trump July 4, 2025. The law makes significant changes to Medicaid, SNAP, and the social safety net, making it harder for individuals to get and keep benefits and shifting costs to state and local governments.
- The Congressional Budget Office and other sources estimate that over next 10 years, H.R. 1:
 - Cuts \$1+ trillion from health care programs and result in 10M people losing health insurance coverage
 - Cuts \$187 billion from the Supplemental Nutrition Assistance Program (SNAP) with estimated losses of 300,000 people/month
 - Illinois has seen a 16% decrease in SNAP statewide about ~305,000 individuals
 - Increases federal deficit by \$3.4 trillion
- **H.R.1 will result in more uninsured people in every state.** This will lead to more people delaying care, reduction or closure of health care services/facilities, and other harmful effects that will be devastating and deadly.
- Even for those who do not rely on Medicaid, the downstream impacts will be felt in access to emergency and primary care, health care premiums, and public health.

H.R. 1 Medicaid Eligibility Changes

400,000 Illinoisans at risk of losing coverage

“Qualified” Immigrants

Federal definition changing Oct. 2026 to exclude many previously eligible, lawfully present immigrants from Medicaid coverage

Emergency Medicaid remains unchanged



What's Changing Effective October 2026

- These groups of adult non-citizens will no longer qualify for Medicaid
 - Refugees and asylum seekers
 - Victims of domestic violence and trafficking
- These groups of non-citizens will still qualify for Medicaid
 - Children under 19
 - Pregnant and postpartum people
 - Green card holders, living in the US for 5+ years
 - Cuban and Haitian immigrants
 - Compact of Free Association (COFA) migrants

ACA Adults

- Individuals age 19-64
- Income up to 138% FPL
- No Medicare coverage
- No dependent children living with them



What's Changing Effective January 2027

- Must renew coverage every 6 months
- Report 80 hours of work, school, or volunteering in a one-month period
 - *Exemptions may be available for some, including for those who can show income of at least \$580/month.*
 - *Federal guidance published June 1, 2026 still under review*

Current CountyCare Membership by Lines of Business

Monthly Membership as of June 10th, 2026

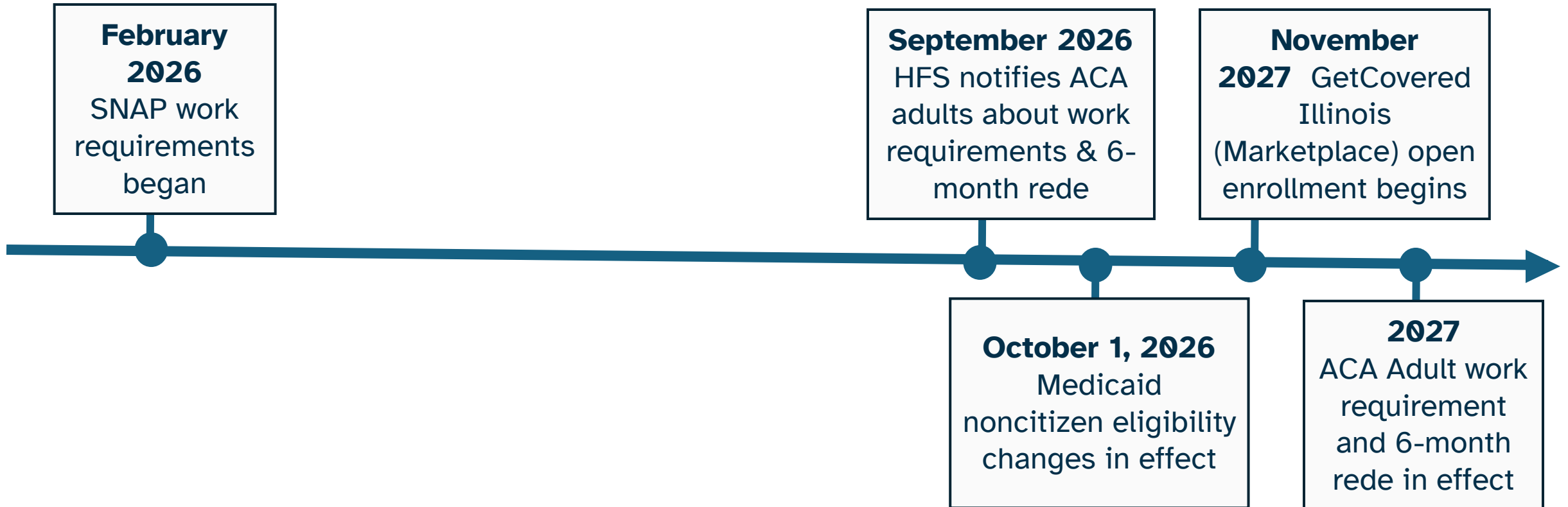
Category	Total Members	Ambulatory & Community Health Network of Cook County Members	% ACHN
Family Health Plan	213,461	9,841	4.61%
Affordable Care Act	97,316	9,640	9.91%
Integrated Care Program	31,712	4,404	13.89%
Managed Long Term Service and Support (Dual Eligible)	10,848	-	0.00%
Special Needs Children	8,310	330	3.97%
Health Benefits for Immigrant Seniors	3,223	1,050	32.58%
Health Benefits for Immigrant Children	12,462	1,208	9.69%
Total	377,332	26,473	7.02%

Work requirements and every 6-month REDE only apply to ACA adults.

ACA Adults are 97,316 CountyCare members (26% of CountyCare membership)

Note: ACHN is a measure for how many CountyCare members seek care at a Cook County affiliated clinic

H.R.1 Changes & Eligibility Changes Timeline



H.R. 1 Eligibility Changes – Immigrants

Starting October 1, 2026, many noncitizens who have long been eligible for federally matched Medicaid will lose coverage, including:

- ☐ Refugees
- ☐ Asylees
- ☐ Humanitarian parolees (including Ukrainian & Afghan parole programs)
- ☐ Trafficking survivors
- ☐ Amerasian immigrants not adjusted to Legal Permanent Resident (LPR) status
- ☐ Conditional entrants
- ☐ Domestic violence victims
- ☐ American Indians born in Canada
- ☐ Immigrant whose deportation is withheld

Note: HFS reviews eligibility for any other program when a member loses current coverage. (this includes the state programs on the next slide)

Immigrant Eligibility - What is NOT changing

Non-citizen coverage programs unchanged by H.R. 1:

- All Kids and Moms & Babies: Coverage for children and pregnant/12-months postpartum individuals, including those who terminated their pregnancy or had a miscarriage
- State-funded programs, including:
 - Asylum Applicants and Torture Victims (AATV)
 - Victims of Trafficking , Torture or Other Serious Crimes (VTTC), now AATV
 - Violence Against Women Act (VAWA) petitioners
 - Coverage for current Health Benefit for Immigrant Seniors (HBIS) enrollees
 - State funded kidney/renal coverage

H.R. 1 Work Requirements: Exemptions

HR 1 provides exemptions from work requirements for some populations and for individuals with certain circumstances, including:

- Parents, guardians and caretakers of dependent children 13 years or younger or disabled individuals
- Veterans with total disability ratings
- Medically frail individuals
- Individuals subject to Supplemental Nutrition Assistance Program (SNAP) work requirements
- Pregnant individuals or those receiving postpartum coverage (12 months postpartum)
- Foster youth or former foster youth under age 26

H.R. 1 Work Requirements: Compliance

Individuals subject to work requirements can satisfy the requirement in multiple ways:

- **Employment** = A minimum of 80 hours of work per month OR a monthly income of \$580 per month. (Different rules for seasonal workers.)
- **Community service** = A minimum of 80 hours of community service per month.
- **Work program participation** = Participation in a work program for a minimum of 80 hours per month.
- **Enrollment in an educational program** = Enrollment at least half-time in higher education or a career or technical education program.

Any combination of these activities totaling at least 80 hours/month satisfies the work requirement.

H.R. 1 Work Requirements: Compliance

- **At application**, Illinois will use a 1-month lookback period for work requirement compliance for ACA Adults.
- **At redetermination**, Illinois will select a 1-month lookback period, requiring ACA Adults to show 1 month of work requirement compliance or exemption between 6-month eligibility verifications.
- The 1-month lookback period was selected by Illinois from among the state options authorized under HR1 to support a smooth and accurate implementation.

Illinois Guidance on 6-month Rede

Illinois will opt to implement 6-month redetermination cohort by cohort starting in January 2027 rather than adjusting all certification periods for ACA adults.

- This option enables Illinois to avoid large clusters of renewals in January 2027 and ensures a more even distribution of renewal periods into the future.
- Remember, individuals exempt from work requirements still must go through 6-month redetermination.
- Remember, some individuals may be able to have their eligibility redetermined ex-parte.

Ex-parte is an automated, administrative renewal process that allows the state to use existing data like pay information to determine that someone is still eligible for Medicaid. This reduces the administrative burden on the enrollee since no action is needed from them.

Retractive Eligibility Changes for All Medicaid

Generally, applicants for Medicaid can request and, if eligible, receive coverage for the 3 months prior to their first month eligibility.

Starting 1/01/2027, HR1 reduces federal match for retroactive coverage:

- ACA Adults to 1 month*
- Other eligibility categories to 2 months

Impact: Reduced reimbursement for providers, increased medical debt or forgone care for customers, and increased workload for patients and providers.

***Illinois Update:** Will provide retroactive coverage for all populations for two months, beginning 1/01/2027

Member Attrition During Redetermination

- CountyCare has among the highest retention rate of any Medicaid managed care plan in Illinois, thanks to concerted member outreach strategies
- Even so, 11-14% of CountyCare members still lose coverage during every redetermination period



CountyCare Redetermination Events

Dates and times may change. Check countycare.com/redetermination for the latest event information.

March 9th, 2026 | 10AM-2PM
Jorge Prieto Health Center
2424 S. Pulaski Rd.,
Chicago, IL 60623

March 10th, 2026 | 10AM-2PM
Robbins Health Center
13450 S. Kedzie Ave.,
Robbins, IL 60472

March 10th, 2026 | 10AM-2PM
Family Guidance Center
310 W. Chicago Ave.,
Chicago, IL 60654





cookcountyhealth • Follow

cookcountyhealth • 1w
Need help renewing your Medicaid?
CountyCare is here for you!

Attend a redetermination event to:

- Get help with your paperwork
- Receive a free box of fresh fruit and vegetables
- Meet with a care coordinator

CountyCare and CountyCare Access members are welcome.
Questions? Call 312-864-7333.

Beware of scams. Illinois will never ask you for money to renew or apply for Medicaid. Report scams to the fraud report website or the Medicaid fraud hotline at 1-844-453-7283/1-844-ILFRAUD - <https://hfs.illinois.gov/oig/reportfraud.html>

4 3 1

March 10



What causes coverage loss during redetermination?

Paperwork/admin issue: **70%**
Enrollee no longer eligible: **30%**



HFS 915IES (N-4-15)

State of Illinois
Department of Human Services
Department of Healthcare and Family Services
PO Box 19138
Springfield IL 62763

IMPORTANT INFORMATION. OPEN IMMEDIATELY.

Medicaid Customer
123 Somewhere Street
Somewhere, Illinois 12345

IMPORTANT INFORMATION ABOUT YOUR COVERAGE

INFORMACIÓN IMPORTANTE SOBRE SU COBERTURA

WAŻNA INFORMACJA O GWARANCJI

ВАЖНАЯ ИНФОРМАЦИЯ О ВАШЕМ ОСВЕЩЕНИИ

關於你的報導的重要信息

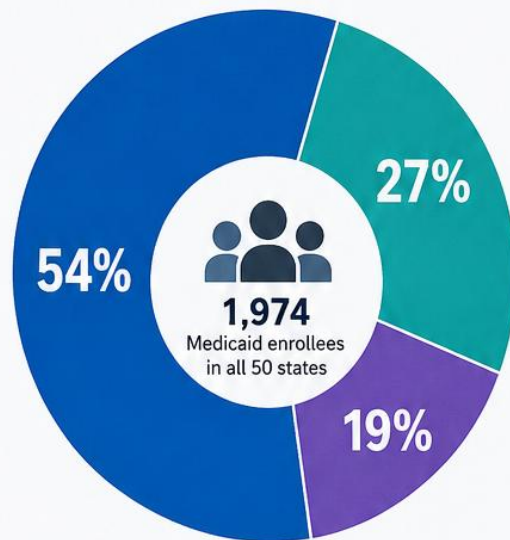
The Challenge: Most Enrollees Are Unaware Of Changes

WHAT WORK REQUIREMENTS?

A survey of 1,974 Medicaid enrollees in all 50 states shows most are unaware—or only vaguely aware—of new work requirements.



AWARENESS OF NEW WORK REQUIREMENTS



- 54%** Completely unaware
More than half of enrollees are completely unaware of new work requirements.
- 27%** Vaguely aware
Another 27% are only vaguely aware of them.
- 19%** Very/somewhat aware
Fewer than 1 in 5 are very or somewhat aware.

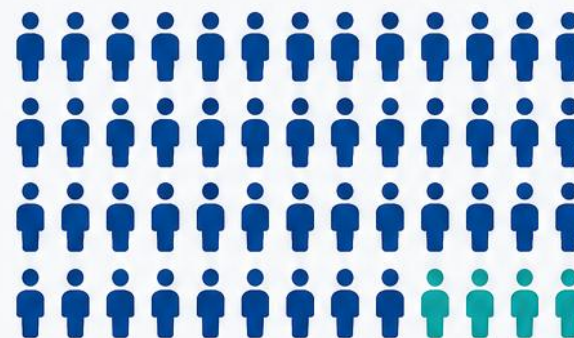


The Republican-passed work requirements take effect **Jan. 1**, though some states plan to start sooner.



Those who aren't exempt will need to show that they're eligible for Medicaid **twice a year**.

AWARENESS OF SHIFT TO EVERY-SIX-MONTHS ELIGIBILITY REDETERMINATIONS



85%

of enrollees said the shift from annual to every-six-months eligibility redeterminations was news to them.



85%
News to me



15%
Not news to me

Source: Health Management Academy survey of 1,974 Medicaid enrollees in all 50 states.

GetMedicaidFacts.com

Microsite & Toolkit

Stay Enrolled
Stay Connected
Stay Informed

MEDICAID BET THE FACTS

Changes to Medicaid are coming. ARE YOU READY?

Medicaid changes begin January 2027.
(October 2026 for qualified immigrants)



STAY ENROLLED



STAY CONNECTED



STAY INFORMED



STAY ENROLLED

Changes to Medicaid are coming.

But they do not start for most people until January 2027*.

Right now, you still can:

- [Get Medicaid health coverage.](#)
- [Sign up or renew your plan at \[abe.illinois.gov\]\(#\).](#)
- [Get in-person help at a redetermination event.](#)

*Changes to Medicaid for some immigrants begin October 2026.

REDETERMINATION EVENTS

S	M	T	W	T	F	S
1	2	3	4	5	6	7
8	9	10	11	12	13	14
15	16	17	18	19	20	21
22	23	24	25	26	27	28
29	30	1	2	3	4	5



STAY CONNECTED

The Illinois Department of Healthcare and Family Services (HFS) will tell you if you have to do something new to keep your Medicaid.

Fill out the Medicaid Change of Address form or call HFS to update.

Fill out the Medicaid Change of Address form or call HFS to update.



Make sure HFS has your
address and phone number.

Medicaid Change of Address Form

HFS
Illinois Department of
Healthcare and Family Services

877-805-5312

STAY INFORMED

Change can be confusing. We're here to help.

HERE ARE ANSWERS TO SOME QUESTIONS
YOU MIGHT HAVE ABOUT MEDICAID.

What is Medicaid?

Medicaid is a program that helps Americans get health insurance. It is run by both the state (Illinois) and federal (Washington, D.C.) government. Many people who have Medicaid need extra help getting and paying for their health care. This includes adults with limited income, children, pregnant women, elderly people and people with disabilities. Medicaid covers a wide range of people, and you may know it by other names, such as medical card, HealthChoice Illinois, All Kids, Aetna, BlueCross BlueShield, CountyCare, Meridian or Molina.

What is happening to Medicaid?

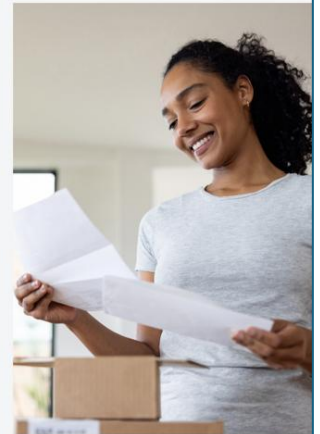
What will I have to do to keep my Medicaid plan?

Do these new rules apply to me?

Can I sign up for Medicaid right now?

What happens if I lose my Medicaid coverage?

How can I get information on changes to Medicaid?



MEDICAID ELIGIBILITY FOR IMMIGRANTS

What is a "qualified immigrant"?

A "qualified immigrant" is someone who is not a U.S. citizen but can still get Medicaid. The meaning of "qualified immigrant" is changing in October 2026.

Which immigrants can get Medicaid?

Which immigrants cannot get Medicaid?

Enrollee Education Materials

One page summary, social media assets available in English, Spanish, Polish, Simplified Chinese, Arabic, Ukrainian online at [GetMedicaidFacts.com](https://www.getmedicaidfacts.com).

TOOLKIT

Help spread the facts about Medicaid by sharing these assets on your social channels.

These assets are provided as unbranded templates so agencies can add their own branding if desired. If you download the social media assets, we recommend adding your organization's logo in the bottom corner of the graphic.

You may use the assets as provided or customize them before sharing with your audience.

[Click here](#) to access the Illinois Department of Healthcare and Family Services' (HFS) communications resources.

ENGLISHSPANISHPOLISHUKRAINIANARABICCHINESE

SPANISH - SOCIAL ASSETS

¿HAZ ESCUCHADO?

Vienen cambios en Medicaid, pero todavía no ha cambiado nada!



Medicaid
SABER

[Copy](#) [Download](#)

Aunque aún no ha cambiado nada, las nuevas normas de Medicaid entrarán en vigor más adelante este año.

No todos los miembros de HealthChoice Illinois se verán afectados.

Es posible que tenga que renovar su afiliación a Medicaid dos veces al año y demostrar que trabaja, estudia o realiza labores de voluntariado.

Aprenda más en [GetMedicaidFacts.com](https://www.getmedicaidfacts.com).

VIENEN CAMBIOS EN MEDICAID.

Todavía puedes obtener cobertura médica y renovar tu plan.



Medicaid
SABER

[Copy](#) [Download](#)

Puede que haya escuchado sobre cambios que se avecinan en Medicaid, pero aún no ha cambiado nada.

No todos los miembros de HealthChoice Illinois se verán afectados.

En este momento, aún puede inscribirse en un plan de salud de Medicaid o renovar su cobertura.

Aprenda más en [GetMedicaidFacts.com](https://www.getmedicaidfacts.com).

TARJETA MÉDICA. HEALTHCHOICE ILLINOIS. MEDICAID.

No importa cómo le llamen, vienen cambios.



Medicaid
SABER

[Copy](#) [Download](#)

La tarjeta médica es importante para ti.

Aunque aún no ha cambiado nada, las nuevas normas de Medicaid entrarán en vigor más adelante este año.

No todos los miembros de HealthChoice Illinois se verán afectados.

Algunos miembros adultos podrán tener nuevos requisitos de trabajo y deberán demostrar su elegibilidad dos veces al año en lugar de una.

Manténgase inscrito, conectado e informado para conservar su cobertura.

Aprenda más en [GetMedicaidFacts.com](https://www.getmedicaidfacts.com).

¿CÓMO SABRÉ SI LAS NUEVAS REGLAS DE MEDICAID ME AFECTAN?

HealthChoice Illinois lo va notificar. Mantenga la atención y comente sus dudas, actualizaciones para no perderse la notificación.



Medicaid
SABER

[Copy](#) [Download](#)

Puede que haya escuchado sobre cambios que se avecinan en Medicaid, pero aún no ha cambiado nada.

Algunos miembros adultos deberán renovar su cobertura dos veces al año y reportar 80 horas de trabajo, estudio o voluntariado.

No todos los miembros de HealthChoice Illinois se verán afectados. El Departamento de Salud y Servicios Familiares de Illinois (HFS) le informará si tiene que hacer estas cosas.

Asegúrese de que su información de contacto esté actualizada.

Aprenda más en [GetMedicaidFacts.com](https://www.getmedicaidfacts.com).

¡ATENCIÓN PADRES DE ADULTOS JÓVENES CON TARJETA MEDICAID!

Vienen cambios en Medicaid. Si su hijo tiene 19 y es miembro de Medicaid, pronto se actualizarán sus requisitos de renovación de cobertura médica y pronto serán los nuevos requisitos.



Medicaid
SABER

[Copy](#) [Download](#)

Si tu es padre o madre de un joven adulto que tiene Medicaid, asegúrese de que esté preparado para las próximas actualizaciones.

Aunque en este momento no hay cambios, algunos adultos podrán tener nuevos requisitos más adelante este año.

Ayúdalo a mantener su cobertura actualizando su información de contacto y prestando atención a los avisos oficiales de HFS.

Aprenda más en [GetMedicaidFacts.com](https://www.getmedicaidfacts.com).

Medicaid

GET THE FACTS

Medicaid Changes Are Coming. Are You Ready?

What is changing and when?

Eligibility for “Qualified Immigrants”	Effective October 2026
The federal definition of “qualified immigrants” will soon change to exclude many previously eligible, lawfully present non-citizens from Medicaid coverage.	These adult groups will no longer qualify: - Refugees and asylum seekers - Victims of domestic violence and trafficking These groups will still qualify: - Children under 19 - Pregnant people - Green card holders, living in the US for 5+ years - Cuban and Haitian immigrants - Compact of Free Association (COFA) migrants
Work Requirements & Increased Renewals (Redetermination)	Effective January 2027
Individuals who qualify for health coverage thanks to Medicaid expansion under the Affordable Care Act (also known as “ACA adults”) will be subject to new eligibility requirements. “ACA adults” enrollees are defined as: - Individuals age 19-64 - Have no dependent children age 13 or younger living with them	To maintain eligibility, “ACA adult” Medicaid enrollees must: - Renew coverage every 6 months (also known as going through redetermination) - Demonstrate 80 hours per month of work, school, or volunteering Some individuals may be eligible for exemptions. Details coming from HFS in September 2026

Do you have Medicaid? Here's what you can do now:

- Stay enrolled.** The first eligibility changes don't take effect until October. Renew your coverage and get the care you need now.
- Stay connected.** Keep your address and phone number up-to-date with the Illinois Department of Healthcare and Family Services (HFS). HFS will tell you if you have to do something new to keep your Medicaid.
- Stay informed.** Be on the lookout for information on Medicaid changes from HFS, your health plan and your doctor's office. Follow them on social media and sign up for newsletters. Visit [GetMedicaidFacts.com](https://www.getmedicaidfacts.com) for more information.

CHANGES TO MEDICAID ARE COMING.

Starting January 1, 2027



Medicaid
GET THE FACTS

COOK COUNTY HEALTH
[GetMedicaidFacts.com](https://www.getmedicaidfacts.com)

Cook County Public Health
CountyCare
HealthChoice Illinois

Medicaid

GET THE FACTS



Starting Jan. 1, 2027, some adult Medicaid customers may need to:

- Prove they meet the new work, education or community service requirements
- Renew their Medicaid coverage twice a year (every six months), instead of once a year (every 12 months)

Generally, the new federal requirements will apply to individuals in the Affordable Care Act (ACA) expansion population, also known as ACA adults, who are:

- aged 19 to 64,
- not receiving Medicare, and
- do not have a dependent child 18 years old or younger in their home.

Some ACA adults will also be eligible for exemptions from work requirements.

Do you have Medicaid? Here's what you can do now:

- Stay enrolled. Renew your coverage and get the care you need now.
- Stay connected. Keep your address and phone number up to date with the Illinois Department of Healthcare and Family Services (HFS). HFS will tell you if you have to do something new to keep your Medicaid.
- Stay informed. Be on the lookout for information on Medicaid changes from HFS, your health plan and your doctor's office. Follow them on social media and sign up for newsletters. Visit [GetMedicaidFacts.com](https://www.getmedicaidfacts.com) for more information.

COOK COUNTY HEALTH
[GetMedicaidFacts.com](https://www.getmedicaidfacts.com)

Cook County Public Health
CountyCare
HealthChoice Illinois

Online Toolkit

One-Page Summary

Postcard

Enrollee Education Materials

HFS Federal Resource Center includes Toolkits on Phase 2 (6-month renewal and work requirements), Phase 1 (update your address with the state of Illinois), and Noncitizen changes <https://hfs.illinois.gov/info/fedresctr.html>

**HFS**
Illinois Department of
Healthcare and Family Services



MEDICAID CHANGES COMING IN 2027

Starting January 1, 2027, some Affordable Care Act (ACA) adults may need to meet new federal requirements to keep their Medicaid coverage.

DO THESE CHANGES APPLY TO YOU?

 Are ages 19-64	 Received Medicaid through the ACA Adult Program	 Do not receive Medicare	 Do not have a child age 18 or younger living in your home
---	--	--	--

NOTE: You may qualify for an exemption. Some people may not need to meet these requirements because of a medical condition, disability, or other approved reason. To find out more about exemptions visit medicaid.illinois.gov.

WHAT IS CHANGING?

 At least 80 hours/month: • Work • Community service • Work program participation • Educational enrollment (at least half time)	 Income of at least \$580/month Seasonal workers - average \$580/month income over 6-months
 Renew your Medicaid coverage every 6 months instead of every 12 months	

NOTE: You can combine any of the activities listed above to meet the required 80 hours.

WHAT TO DO NOW


Update your contact information at abe.illinois.gov


Watch your mail. HFS will send you a notice if you are affected.


Scan the QR Code for more information

1-877-805-5312

Updating your contact information does not mean your benefits are changing.

Phase 2

Online Toolkit

**HFS**
Illinois Department of
Healthcare and Family Services

MEDICAID RULES ARE CHANGING

Medicaid eligibility for noncitizens is changing, effective October 1, 2026.

A new federal law (HR1) is changing who qualifies for Medicaid. You may also know Illinois Medicaid by names like All Kids, Aetna, BlueCross BlueShield, CountyCare, Meridian or Molina.

Some noncitizens may lose coverage starting October 1, 2026. Here's what is changing:

Some noncitizens, including but not limited to **refugees, asylees, humanitarian parolees, and survivors of trafficking or domestic violence** will no longer qualify for **federally-funded Medicaid**. Individuals in these groups may still receive Emergency Medicaid, but not regular full-scope benefits.

The following groups will remain eligible:

- Naturalized Citizens
- Lawful permanent residents who meet or are exempt from the 5-year eligibility bar
- Certain Cuban and Haitian entrants
- COFA migrants (from Marshall Islands, Micronesia or Palau)
- Children under 19 years old and pregnant people
- Individuals enrolled in a state-funded program including AATV, VTTC, and HBIS

What to do now:

- Update your contact information at abe.illinois.gov so HFS can reach you.
- Watch your mail. HFS will send you a personalized notice if you are affected.
- Get care and pick up prescriptions before October 1, 2026.
- If you are notified that you lost coverage, look for another health plan. Visit GetCoveredIllinois.gov and check employer plans. You may also call 1-877-805-5312 to speak with a caseworker.


Scan the QR Code and click "Manage My Case"

1-877-805-5312

Includes individuals with certain qualified immigration statuses, such as refugees, asylees, trafficking survivors, Special Immigrant Visa (SIV) holders, certain parolees, VAWA applicants, and other protected humanitarian categories. Medical Assistance for Asylum Applicants and Torture Victims, Victims of Trafficking, Torture, or Other Serious Crimes programs, and Health Benefits for Immigrant Seniors. These groups may still receive Emergency Medicaid, but not full-scope benefits. More information and clinic locations are available online at www.illinoisfreelinks.org and www.ihca.org/health-center-locator.

Noncitizen Changes

STAY INFORMED About Upcoming Medicaid Changes



Update Your Contact Information

Make sure Illinois Medicaid can reach you, so you don't miss important notices.

The federal government is enacting changes that will affect some Medicaid customers starting **January 2027**. **Many customers will not be affected**, and Illinois Medicaid will contact you if these changes apply to you.

If you receive mail from the state of Illinois, open it right away: your Medicaid coverage may depend on it.

Update your address, phone number, and email TODAY:

 Visit abe.illinois.gov, or

 Call **877-805-5312**

Updating your contact information does not mean your benefits are changing.


SCAN ME

**HFS**
Illinois Department of
Healthcare and Family Services



Phase 1

Line of Business – Where can Providers find this info?

- CountyCare has a [provider portal](#) where any in-network provider can log in, look up members and see their line of business. Plan Number=LOB
- Providers can also look at “Certification Date” for the member’s rede date.
- Providers can also see the member’s current physical address.

Enrollee name & address is listed at the top (phone number and email are not provided)

Member Status Active Coverage	Date of Birth [REDACTED]	Gender Female	Current Plan Effective Date Feb 1, 2025 - Jan 31, 2026	Relationship to Subscriber Self
---	------------------------------------	-------------------------	--	---

Member ID:	[REDACTED]	
Group Number:	MMCP	
Group Name:	MMCP	
Plan Name:	SERVICE PACKAGE 1 - ACA NO WAIVERS	Payer: COUNTYCARE HEALTH PLAN (CCH)
Plan Number:	ACA	Other or Additional Payer Information No additional payer information provided.
Certification Date:	Feb 28, 2027	

Finding Medical Coverage Group Category

Customers who are not sure what medical group they are classified as can find their medical coverage category in a few places.

- **Notices:**

- Mail from the State including Notice of Decision, Redetermination paperwork, or processing of a change.
- ABE Manage My Case – last 12 months of Notices are available

- **Manage My Case**

- Case Summary Tab
- Benefit Details Tab
- Notices

Notice Examples

Medical Benefits

The person(s) listed in the table below have been **approved** for ongoing Medical benefits

Name	Birth Date	Medical ID (RIN)	Medical Group	Start of Ongoing Coverage
MERCEDES ABREU MARTINEZ	Jul 16, 1963	4 10331000	AATV Medical	Jun 01, 2026

The person(s) listed in the table below have been **approved** for coverage for earlier date

Name	Birth Date	Medical ID (RIN)	Medical Group	Coverage Dates
MERCEDES ABREU MARTINEZ	Jul 16, 1963	4 10331000	VTTC Medical	Dec 01, 2025 Jan 31, 2026
MERCEDES ABREU MARTINEZ	Jul 16, 1963	4 10331000	AATV Medical	Feb 01, 2026 May 31, 2026



State of Illinois
Department of Human Services
Department of Healthcare and Family Services

Date of Notice: March 01, 2026
Case Number: [REDACTED]
Client Name: [REDACTED]
Individual ID: [REDACTED]
Office Name: OGDEN FCRC
Office Address: 3920 W OGDEN AVE
CHICAGO, IL 60623
Phone: 773-522-8370
TTY: 866-439-3716
Fax: 844-736-3563

You can manage your case online at abe.illinois.gov

Esta notificación está disponible en Español. Usted puede solicitarla por Internet en abe.illinois.gov o llame al 1-800-843-6154 (TTY 1-866-324-5553).

Medical Benefits: Time to Renew Notice

Based on the information we have today, the members of your household listed in the table below are approved to continue receiving **medical benefits** after April 2026.

These individuals will receive a new medical card before their new certification date of May 01, 2026. However, if we get new information about a change in their circumstance, their eligibility for medical benefits may change. If that happens, we will send you a new notice.

Name	Birth Date	Medical ID(RIN)	Medical Group	Action Required
[REDACTED]	07 [REDACTED]	[REDACTED]	ACA Adult	No

"Action Required= Yes" Individual must complete and return form included.

"Action Required= No" Individual's medical benefits have been automatically renewed.

If you are not currently receiving and want to apply for Food and/or Cash Assistance, go to www.abe.illinois.gov and choose "Apply for Benefits", call the ABE Help Line at 1-800-843-6154, or submit an application at a local Family Community Resource Center.



HFS

Illinois Department of
Healthcare and Family Services

MMC: Case Summary Tab

Case Summary

Benefit Details

Contact Information

Account Management

Report My Changes

Click this button to report changes to your DHS or HFS Office.

Apply for Other Benefits

Click this button to apply for additional benefits.

Welcome to the Case Summary Page. This page gives you a look at your benefits, and lets you know if there is anything you need to do to receive or continue benefits. From this page you can find information about your [benefit status](#), [verifications](#), [notices](#), [application or change report status](#).

We have taken a number of steps to keep your information private and secure. To learn more, [view your security and account management information](#).

As a head of household, you can [control benefit information displayed to other adults in your household](#).

What is the status of my benefit programs?

You have requested or are receiving the benefits mentioned below. Click on the "Click Here" link for each program to view a summary of your benefits. This information is current as of **May 27, 2026 04:27 AM**.

Follow this link and select Other Changes to [Cancel Your Case](#).

Benefit	Description	Summary
	Food Assistance Program	Food Assistance Program Details
	Healthcare Coverage Program	Healthcare Coverage Program Details

From Case Summary landing page in MMC, navigate to middle of page, **What is the status of my benefits programs?** Click on [Healthcare Coverage Program Details](#) in blue ink. This will take you to the Benefit Details page.

Benefit Details

Contact Information

Account Management

status of my Healthcare Coverage Program benefits?

many of the benefits you have requested or are receiving. If "Click Here For Details" appears, you can click view more details about your healthcare benefits. If you recently applied for benefits, the status of your shown. This information is current as of **May 27, 2026 04:27 AM**

Which Benefit?	Description	Summary
ACA Adult	In May 2026, [redacted] is getting ACA Adult.	Click Here for Details

its

on below to see a summary of other benefits you have requested or are receiving

Food Assistance Program

MMC: Benefit Details Tab

After logging in to Manage My Case (MMC), navigate to the Benefit Details tab. Choose **Healthcare Coverage Program**. For additional information on redetermination date choose [Click Here for Details](#).

Case Summary

Benefit Details

Contact Information

Account Management

What is the status of my Food Assistance Program benefits?

Here is a summary of the benefits you have requested or are receiving. If "Click Here For Details" appears, you can click on this link to view more details about your Food Assistance Program benefits. If you recently applied for benefits, the status of your application is shown. This information is current as of **May 27, 2026 04:27 AM**.

Who	Which Benefit?	Description	Summary
	Supplemental Nutrition Assistance Program	Your worker needs some more information before he or she can process your benefits. To see the list of items your worker is waiting for, please click on the Back to ABE button. They are listed under "What does my worker need from me?". Keep in mind that it may take some time for your worker to process information that you have already sent.	

Other Benefits

Click on an icon below to see a summary of other benefits you have requested or are receiving

 Healthcare Coverage Program

Benefit Details



Elizabeth
Medical ID (RIN)
036218045

You have ACA Adult coverage.

Your coverage started on August 2016.

Your next medical redetermination must be completed by April 2027. In the meantime, you must continue to report changes.

[View or print your HFS Medical Card](#) in your available notices.

[View your approval notice](#) to see how your benefits were determined

Hello, █████ You are logged in.

Case Summary

Benefit Details

Contact Information

Account Management

What is the status of my Healthcare Coverage Program benefits?

Here is a summary of the benefits you have requested or are receiving. If "Click Here For Details" appears, you can click on this link to view more details about your healthcare benefits. If you recently applied for benefits, the status of your application is shown. This information is current as of **May 22, 2026 03:05 AM**

Who	Which Benefit?	Description	Summary
	ACA Adult	In May 2026, █████ getting ACA Adult.	Click Here for Details

Other Benefits

Click on an icon below to see a summary of other benefits you have requested or are receiving

Back To Manage My Case

Manage My Case – Log in assistance

- For instructions on how to set up a Manage My Case Account and link it to an ABE (Applications for Benefits Eligibility):
<https://www.dhs.state.il.us/page.aspx?item=164791>
- For instructions on how to Recover an Account or Password:
<https://iloginhelp.illinois.gov/how-to-guides/recover-account-or-password.html>

Line of Business –Where can Enrollees find this info?

- CountyCare has a [member portal](#) where Line of Business is currently being added.
- CountyCare enrollees can call the CountyCare call center anytime to determine their line of business.
- Care Managers also have access to a member's LOB
- If a member has a complex question about work requirements or gaining a medical exemption to work requirements, they will be directed to the state. HFS has not released work requirement exemption information so members may not get a lot of clarity currently.

CountyCare Member Services
Call Center Number:
312-864-8200

HFS Call Center Number:
800-843-6154

Line of Business –Where can Enrollees find this info?

Member Portal:



[Español](#)[Contact Support](#)

Welcome 

[My Health Plan](#)[My Resources](#)[My Preferences](#)

Redetermination Assistance

For Illinois Medicaid redetermination assistance, contact the **IDHS Help Line**:

1-800-843-6154
TTY: 1-866-324-5553
Monday–Friday, 8:30 AM–4:30 PM

You can also manage your renewal online at abe.illinois.gov, or visit a local DHS Family Community Resource Center.

Benefits and Eligibility as of 23 Jun 2026

 [Download PDF](#)



DOB

Medicaid ID

Phone

Address

My PCP

BABUJI , ANGELINE

Family Medicine - Family Medicine - In Network

CHANGE PCP

REQUEST ID CARD

VIEW/PRINT ID CARD

Line of Business –Where can Enrollees find REDE date?

Member Portal:

Benefit Plan Information

Group: MMCP (MMCP)

Benefit Plan: EPO - EPO



Enrollment Date: 1 Apr 2026

Termination Date:

Redetermination Date: 30 Sep 2026

 BENEFIT DOCUMENTS ▾

VIEW ELIGIBILITY HISTORY

Financial Counselors

Cook County Health has financial counseling staff who can help by phone or in person. We can help with the following:

- Applying for state and federal assistance programs, such as Medicaid
- Completing Medicaid redetermination forms
- Understanding managed care options
- Understanding and applying for CCHs financial assistance (CareLink) program

You do not need to be an existing patient of Cook County Health or a CountyCare member to request help from financial counselors. CCH accommodates and respects all cultures and backgrounds. We have interpretation services available in more than 100 languages.



In-Person Financial Counseling by Location

Stroger Hospital and Central Campus

- Stroger Hospital, Room 1290, walk-in
Monday through Friday from 7 am to 5 pm
- Most Specialty Clinics in Stroger Hospital and the Professional Building have financial counselors available for walk-in assistance during clinic operating hours

Provident Campus

- Provident Hospital (room 1003G0) and Emergency Department, walk-in
- Floors 6 and 7 as part of Sengstacke Health Center, walk-in

North Cluster Clinics Financial Counselors – by appointment, 312-864-0200

Arlington Heights 8AM – 4PM

Austin 7:30 AM – 3:30 PM

Belmont Cragin 8 AM – 4 PM

North Riverside 8 AM – 4 PM

Prieto 8 AM – 4 PM

South Cluster Clinics Financial Counselors – walk-in

Blue Island 8 AM – 4 PM

Bronzeville 8 AM – 4 PM

Cottage Grove 7:30 AM – 3:30 PM

Englewood 8 AM – 4 PM

Robbins 8 AM – 4 PM

Phone-Based Financial Assistance

Cook County Health Call Center

(866) 223-2817

Monday through Friday 8am to 6pm

Saturday 8am to 4pm

More information online at:

<https://cookcountyhealth.org/patients-visitors/billing-insurance/>

How to Help: Resources and Actions

For Enrollees

- **Keep contact information up to date**, especially your mailing address, with:
 - The Illinois Department of Healthcare and Family Services (HFS)
<https://ilhfspartner3.dynamics365portals.us/addressupdate/>
 - Your Medicaid health plan
 - Your doctor's office or hospital
- **Create an iLogin account and Manage My Case account** to manage your application or renewal electronically at abe.illinois.gov.
- Determine **if the new requirement will affect you** and the steps you may need to do to keep your coverage (certain immigrants and ACA adult Medicaid)
- **Know that nothing has changed about Medicaid yet.** Use your Medicaid coverage as you have been normally.
- If you have CountyCare, call the hotline and ask if you will be impacted: 312-864-8200
- **Be on the look out for more information**, especially official communication from HFS.

For Organizations

Tasks	
Educate	Ask enrollees if their contact information has changed. If so, report to HFS at 1-800-843-6154 or 1-877-805-5312.
	Download materials from GetMedicaidFacts.com and share with enrollees via posters, in newsletters, on social media, etc. Materials are available in 13 languages.
Outreach	If you are a Medicaid vendor or provider, you may have access to eligibility data including information on who has ACA adult and rede dates. You can use this info to educate and engage.
Connect	If you host a community event (health fair, back to school event, job fair, etc.), we may have staff who can attend and share more information. Contact events@cookcountyhhs.org with details about your event.
	Help Medicaid enrollees create a Manage My Case account. CCH Financial Counselors may also be able to assist – call (866) 223-2812
	CountyCare plan members can call the CountyCare hotline and ask whether they will be impacted by these changes: 312-864-8200.
	Subscribe to the Cook County Health newsletter visit https://cookcountyhealth.org/patient-and-visitors/community-relations/

Q&A



COOK COUNTY
HEALTH



Cook County DEPT. of
Public Health

BUILDING
HEALTHIER
COMMUNITIES

Thank you!



COOK COUNTY
HEALTH

Appendix



H.R.1 Implementation Timeline

HR1 Provision	Effective Date
Freeze current and prohibit new provider taxes	July 4, 2025
Prohibit Medicaid funding to Planned Parenthood for 1 year	July 4, 2025
Cap new State Directed Payments (SDP) at 100% Medicare payment rates	July 4, 2025
Rural Health Transformation Program	Awarded, Implementation ongoing
Narrow the definition of “qualified aliens” terminating eligibility for many lawfully present individuals	October 1, 2026
6-month eligibility redetermination for ACA adults	January 1, 2027
Work requirements for ACA Adults	January 1, 2027
Ending federal match for 3 months of eligibility pre-application, limited to 2 months	January 1, 2027
Reduce current SDPs by 10% points per year until the SDPs are no greater than 100% of Medicare	January 1, 2028
Cost-sharing for ACA adults	October 1, 2028
Modify “generally redistributive” provider tax criteria	Transition period of up to 3 years
Several other eligibility-related proposals	January 1, 2027-October 1, 2029

requirements

CountyCare Preparation for H.R.1

- **CountyCare has developed a strategy and plan to be fully prepared to implement all H.R. 1 changes**

Communications

Focused on **noncitizen eligibility changes** going into effect October 1, 2026

Created **GetMedicaidFacts.com** toolkit

Created an **FAQ document** for call center and care management staff

Creating communications plan for members, providers, and community organization partners

Outreach and Partnerships

Utilizing CountyCare's existing **Redetermination Events to share information on HR1**

Creating a **list of partner organizations** including workforce, education, and others to share information on HR1

Data Sharing

Creating a **FAQ document for providers** on how to find line of business and redetermination dates for members

Working with HFS to **create data shares** required by HR1

Creating a list of questions for HFS on data sharing requirements for HR1

Announcements

- Our next webinar is Wednesday September 16th at 2:00pm.
- Slides posted on CountyCare Care Coordination Webpage:
 - <http://www.countycare.com/carecoordination>
- Have feedback? Ideas for future topics? Please share!
 - stephanie.nickles@cookcountyhealth.org