



Provider Notice

September 25, 2026

H.R.1 Medicaid Updates for Providers

What Providers Need to Know About Changes to Medicaid Eligibility and How to Help Members Maintain Coverage

CountyCare is committed to working with providers and community partners to help members understand these changes and take the necessary steps to maintain their Medicaid coverage.

Recently, letters were sent to some Illinois Medicaid enrollees informing them of upcoming changes to eligibility as a result of federal legislation, also known as H.R. 1 or the One Big Beautiful Bill Act.

Medicaid enrollees who received these letters included:

- ~8,400 non-citizens/qualified immigrants statewide – this group was informed that they would no longer qualify for Medicaid starting October 1, 2026
- ~700,000 Affordable Care Act adults statewide – this group was informed about new eligibility requirements in 2027 including twice per year redetermination and work requirements.

The notices that were sent to these Medicaid enrollees are linked here:

- Letter dated 7/6 sent to [non-citizens losing coverage 10/1](#)
- Letter dated 8/10 sent to [non-citizens losing coverage 10/1](#)
- Letter dated 9/1 sent to [700,000 ACA members](#)

Illinois Healthcare and Family Services (HFS) intends to share more details about the work requirements, including information about exemptions, at a later date. To support Medicaid members, providers can:

1. **Encourage members to keep their contact information current:** Members should make sure HFS has their current address, phone number and email address. Keeping contact information up to date helps ensure members receive important notices. Members can update their information by:
 - a. **Logging** into the [ABE Illinois system](#)
 - b. **Visting** the [HFS Account Changes](#) website for instructions
 - c. **Calling** 1-877-805-5312
2. **Check a member's Medicaid coverage type (also known as line of business or LOB):** CountyCare has developed a [Provider Portal Quick Reference Guide](#) explaining how to locate a member's Medicaid coverage type and other important eligibility information. CountyCare members can also call CountyCare at 312-864-8200 to ask what type of Medicaid/Line of Business they have.

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3. **Encourage ACA adult members to prepare for more frequent renewals:** Remind ACA adult members that they will need to renew their Medicaid coverage every 6 months starting in 2027 (after their full year of coverage that started in 2026 ends). Encourage members to:
 - a. Read and respond to all notices from HFS
 - b. Complete renewal forms by the deadline
 - c. Submit requested documents promptly

What Changes Are Being Made to Medicaid?

1. 1) New Work, Education, or Volunteer Requirements (also called “community engagement requirements” or just “work requirements”) for Affordable Care Act (ACA) adults

In Illinois, Medicaid enrollees will need to meet the work requirement **for one month** during their “eligibility period” (unless they have been deemed exempt from this requirement). After ACA members’ first redetermination in 2027, their case will now be reviewed for eligibility **every 6 months** instead of every 12 months. They will need to meet or be exempt from the work requirement for one month during that 6-month period of review.

ACA adults enrolled in 2026 will receive a full 12-months of Medicaid coverage before the new requirements apply to them. Medicaid applications submitted after December 31, 2026, at 5 pm CST, for **newly enrolled** ACA Medicaid enrollees will need to comply, immediately.

2. More Frequent Medicaid Renewals for ACA Adults

ACA adults will be required to complete Medicaid eligibility renewals every 6 months instead of every 12 months. Members should be prepared to respond to renewal notices and provide information requested by HFS to avoid losing coverage for procedural reasons.

3. Changes to Medicaid Eligibility for Certain Non-Citizens

Beginning October 1, 2026, federal changes will narrow the categories of non-citizens who qualify for full Medicaid coverage. These changes are expected to result in approximately 8,400 Illinois non-citizen Medicaid enrollees losing coverage, including approximately 2,000 CountyCare members. HFS has sent information to affected members.

For more information on H.R.1 and resources to support Medicaid members:

- Visit Cook County Health’s [GetMedicaidFacts.com](https://www.getmedicaidfacts.com) website
- View HFS’ [Federal Resource Center](#) for toolkits, flyers, and webinars
- Join CountyCare for an upcoming [Provider Lunch & Learn](#): 10/6/26 11am-12pm

Contact Us

Thank you for working with us to ensure that CountyCare members receive quality care at the right time and in the right setting. If you have any questions or would like additional information, please contact CountyCare Provider Services at countycareproviderservices@cookcountyhhs.org or your assigned provider relations representative.