Get Covered Illinois Broker Webinar

Thursday, May 21, 2026

11:00 AM CT

Get Covered Illinois[SM]

The state's official health insurance marketplace.

Logistics

- **Phone lines are muted upon entry**.
- **To submit comments or questions**, click the icon with three dots at the bottom right of your screen, then select the "Q&A" option.
  - Questions are encouraged!
- We will address technical questions about the webinar and recording as they come in.
- The **slides** and **recording** will soon be available on the Get Covered Illinois **website**!
- Please complete the survey that will pop up on your screen after exiting the office hour.

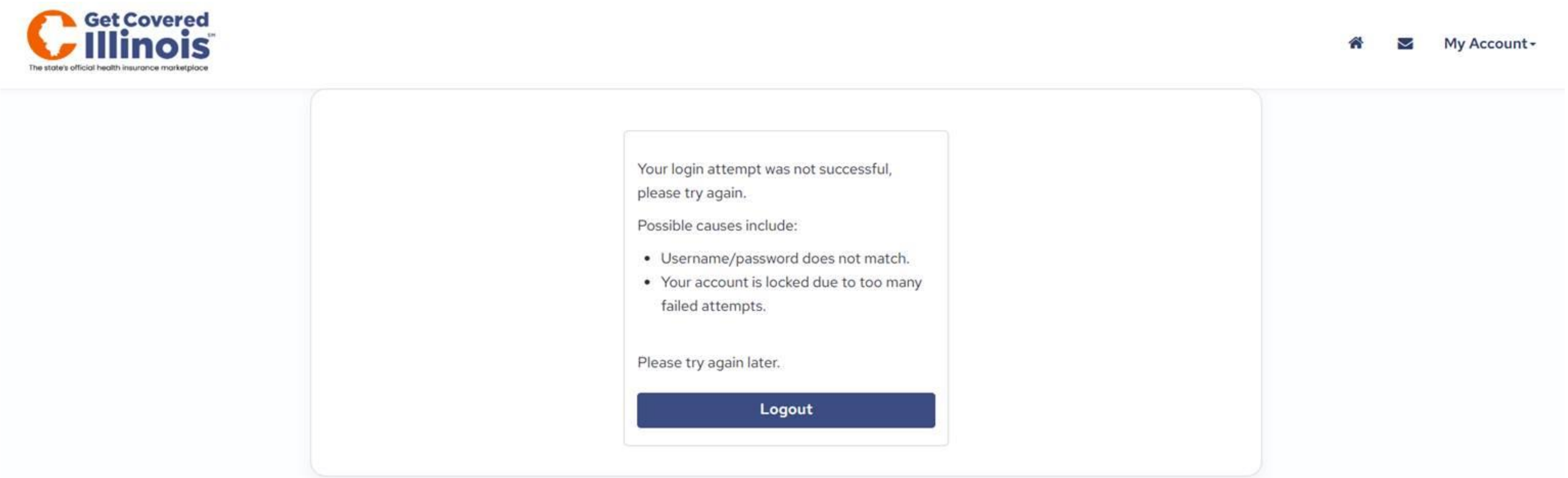
Agenda

- Important Reminders
- LMS Update
- Medicaid Scenarios
- FYI for Brokers
- Q&A Session

Important Reminders

Broker Account Inactivity: IMPORTANT

- Login credentials for Broker Portal accounts will be locked after 60 days of inactivity (i.e., not logging in) due to privacy and security reasons.
- To unlock your account:
  - Call the Get Covered Illinois Assister & Broker Support Team (1-866-349-7579) to verify your identity and reactivate your Broker Portal account.
  - Update your Broker Portal password.
  - Log into your account regularly to prevent future lockouts.



Steps to Becoming a Get Covered Illinois-Certified Broker

Step 1
Create your Broker Portal account with Get Covered Illinois

Step 2
Maintain a license with the Illinois Department of Insurance with a health line of authority

Step 3
Complete the online training and score at least 80% on the post-training assessment

Learning Management System

The Get Covered Illinois certification training for plan year **2026** is now available **for new brokers** who have not yet certified with Get Covered Illinois and want to help residents enroll in health coverage through a **Special Enrollment Period**.

Please email:

GCI.Outreach@Illinois.gov

to be registered for training.

Get Covered Illinois℠

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Agent/Broker Marketplace Certification Training

Course

H.R.1

This legislation was signed into law in July 2025. It contains major overhauls to various public health programs, including the ACA and Medicaid. Our assessment of Marketplace impacts and implementation timeline include:

Effective 2026

- Eliminate caps on recapture of APTC.
- End PTC eligibility for immigrants with incomes up to 100% FPL subject to Medicaid waiting periods (5-year bar).
- Disallow PTC for income-based SEPs.

Effective 2027

- Narrow the categories of noncitizens eligible for PTC.
- Medicaid work requirements.

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Effective 2028

- End automatic renewal of financial assistance.
- End eligibility for APTC pending verification.
- Codify 1-year Failure to Reconcile (FTR) rule

Medicaid Scenarios

Medicaid Scenarios from Brokers

Scenario A

A couple enrolled in a Qualified Health Plan (QHP) through the Get Covered Illinois platform just had a baby. The broker assisted the couple with updating their household information, including the new family member and income adjustments, to see what to expect. The process showed the child would potentially be eligible for Medicaid.

Concerned about eligibility determination for the newborn, the couple wanted to know if they chose to cover their baby immediately through their current QHP, would they need to pay the full premium until they receive a decision from Medicaid. The additional cost is $492.34 per month for the newborn to be added to their current plan. Will the household be eligible for reimbursement of these premiums if/when Medicaid approves coverage?

Questions and Answers

Question #1: What is the best practice for adding a newborn on the Get Covered Illinois Application?

Answer:

- Update the Get Covered Illinois application to add the newborn. If the newborn appears to be Medicaid eligible on basis of household's monthly income, Get Covered Illinois will automatically send the application to HFS via the Account Transfer process. (**Only the individual who is requesting coverage will be evaluated for Medicaid.**)
- HFS may require verification of income prior to approving the newborn for coverage. Customers should promptly provide any documentation requested by HFS.
- The customer may, optionally choose to enroll the newborn in a full-cost QHP while waiting for the final Medicaid determination. If they elect this option and the baby is subsequently approved for Medicaid, the newborn will be automatically terminated from their QHP at the end of the month following the approval.
- **Get Covered Illinois will not approve retroactive cancels of full cost QHP coverage for costumers who elect this option while waiting for Medicaid approval.**

Questions and Answers

Question #1: What is the best practice for adding a newborn on the Get Covered Illinois Application? (Continued)

Answer:

- If HFS approves the newborn for Medicaid coverage, their coverage will be retroactive to date of birth. However, the application has to be received **within 3 months of birth** to be potentially eligible for backdate to the date of birth.
    - **Example:** *Child was born in January and couple applies in May. Medicaid would not be able to go back to date of birth in that scenario.*
- If Get Covered Illinois assesses the newborn for Medicaid and Medicaid subsequently determines that they are NOT eligible for Medicaid, and the determination of Medicaid ineligibility occurs after the end of the 60-day SEP window for Birth or Adoption, the household will then qualify for a SEP for "Unable to Enroll Due to Medicaid Denial after Enrollment Period" **and can enroll the newborn retroactive to date of birth.**

Questions and Answers

Question #2: What if, in this scenario, the pregnant mom was already enrolled in Moms & Babies instead of Get Covered Illinois?

Answer:

- If the pregnant individual is already on Mediciad/Moms & Babies, once the child is born, the newborn is “deemed” eligible by Medicaid and covered instantly.

Questions and Answers

Question #3: How does Get Covered Illinois and Medicaid handle the 12-month Medicaid postpartum period?

Answer:

- Individuals who are approved for Medicaid in the pregnant women ("Moms & Babies") category remain covered by Medicaid for the 12-month postpartum period following the end of the pregnancy regardless of changes to income or household size.
  - It is not relevant to new eligibility assessments for individuals who were previously but are no longer pregnant.
- The 12-month postpartum period applies to individuals whose pregnancy ends for any reason including birth, miscarriage, or elective end of pregnancy.
- HFS additionally permits retroactive enrollment in Moms & Babies up to 3 months after the end of pregnancy for individuals who met income requirements in the month in which the pregnancy ended.
- Individuals whose pregnancy ended prior to the current month who are seeking retroactive enrollment in Medicaid should work directly with HFS.

Questions and Answers

Question #3: How does Get Covered Illinois and Medicaid handle the 12-month Medicaid postpartum period (continued)?

Answer:

- The Get Covered Illinois platform assessment for pregnant individuals within the Moms & Babies program is based on pregnancy status and income in the current month.
- Individuals who were assessed by Get Covered Illinois and then confirmed as Medicaid eligible by HFS in the pregnant women category remain Medicaid eligible on the Get Covered Illinois platform during the 12-month postpartum period regardless of changes to income or household size.

Medicaid Scenarios from Brokers

Scenario B

Based on the information provided before beginning an application, a broker notifies their customer that they might be eligible for Medicaid. The customer wanted to enroll in a QHP through the Get Covered Illinois platform, so broker assisted the customer in submitting an application for their household.

The broker later noticed there was a new application in the customer's portal showing that Get Covered Illinois had generated an application for Medicaid. The broker was unsure if they should submit a new application on the platform or through ABE and unsure of the impact of creating a new application in either system.

Questions and Answers

Question #1: What do I do if a Medicaid application is generated through the application process on the Get Covered Illinois application platform?

Answer:

- Get Covered Illinois applicants who receive a notice that they are potentially eligible for Medicaid do **NOT** need to submit another application.
- Their initial application submitted through Get Covered Illinois will be transferred to the Department of Healthcare and Family Services (HFS) for a Medical Assistance eligibility determination. HFS will review their application and may request additional verification from the individual if necessary to make a final eligibility determination.
- If the customer is determined to be Medicaid eligible, **they are not able to get coverage through Get Covered Illinois with financial assistance, including advance premium tax credits or cost sharing reductions.**

Marketplace Trivia Moment

Question 1

Which of the following is considered an example of Personably Identifiable Information (PII)?

A. A website that measures time spent on their site without identifying you as a user.

B. A marketing campaign sent to all residents in your county with no individual resident details.

C. Personal characteristics, including photographic image, x-rays, fingerprints other and biometric image.

D. Your corporation's revenue, registered address, or industry classification.

Question 2

When updating the Get Covered Illinois application to add a newborn, if the newborn appears to be Medicaid eligible on basis of the household's monthly income, Get Covered Illinois will automatically send the application to HFS. Which of the following is also true?

A. Everyone in the entire household is evaluated, even if they are not applying for coverage.

B. Only the individual who is requesting coverage will be evaluated for Medicaid.

C. Only children will be evaluated for Medicaid coverage.

D. Get Covered Illinois will not provide any application information to HFS to determine Medicaid eligibility.

For Your Information (FYI) for Brokers

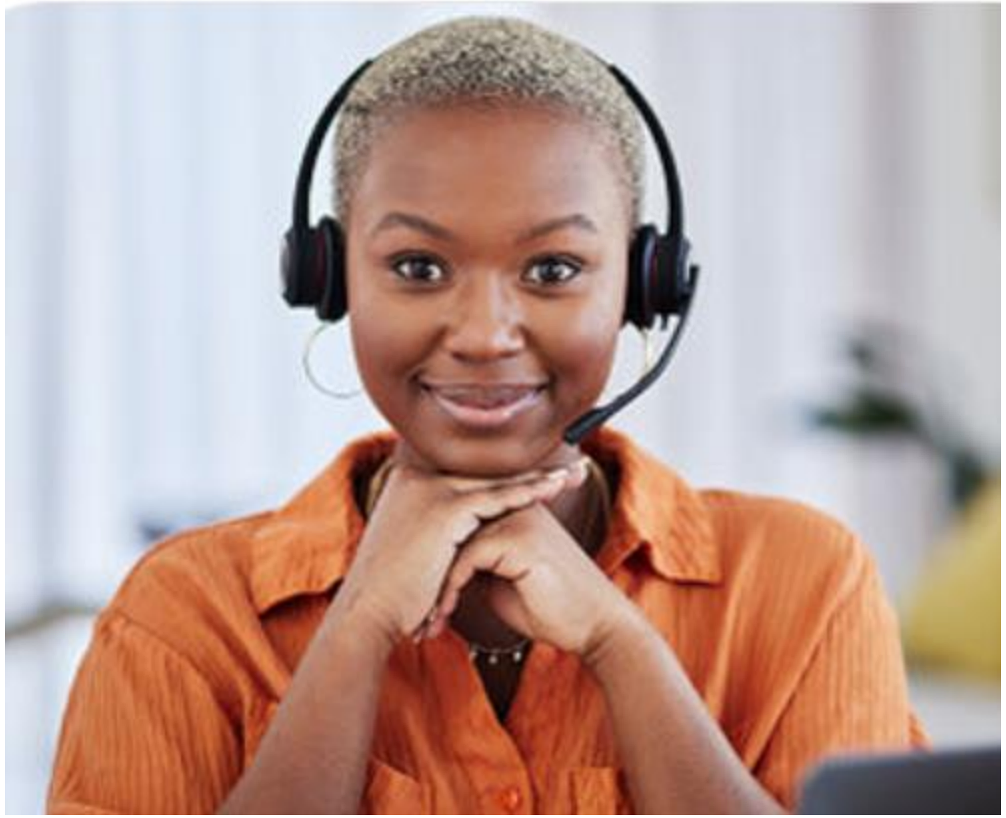
What are we seeing....

- Notifications are being missed
- Delayed document uploading (causing coverage gaps)
- Uploading incorrect documentation
- Each documentation request will have an associated deadline. If you don't submit requested documents by the deadline, you can lose your financial help or health insurance coverage.

Customer Assistance Center Hours

Days	Hours
Monday–Friday	8 am–6 pm
Saturday and Sunday	CLOSED

Visit GetCoveredIllinois.gov for days with extended hours due to key deadlines, and holiday closures.



Your Questions

Next Get Covered Illinois Broker Webinar

Join us for our next webinar!

Thursday, June 18, 2026, 11:00 AM CT

Registration link available soon.

Broker Webinar Resources

- Recordings of past webinars and office hours
- Slide decks
- FAQs

Thank You!

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