Get Covered Illinois Broker Webinar

Thursday, July 16, 2026

11:00 AM CT

Get Covered Illinois℠

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**!

Agenda

- Important Updates
- Learning Management System (LMS) Update
- Rebalancing
- HR1 Information
- For Your Information (FYI) for Brokers
- Q&A Session

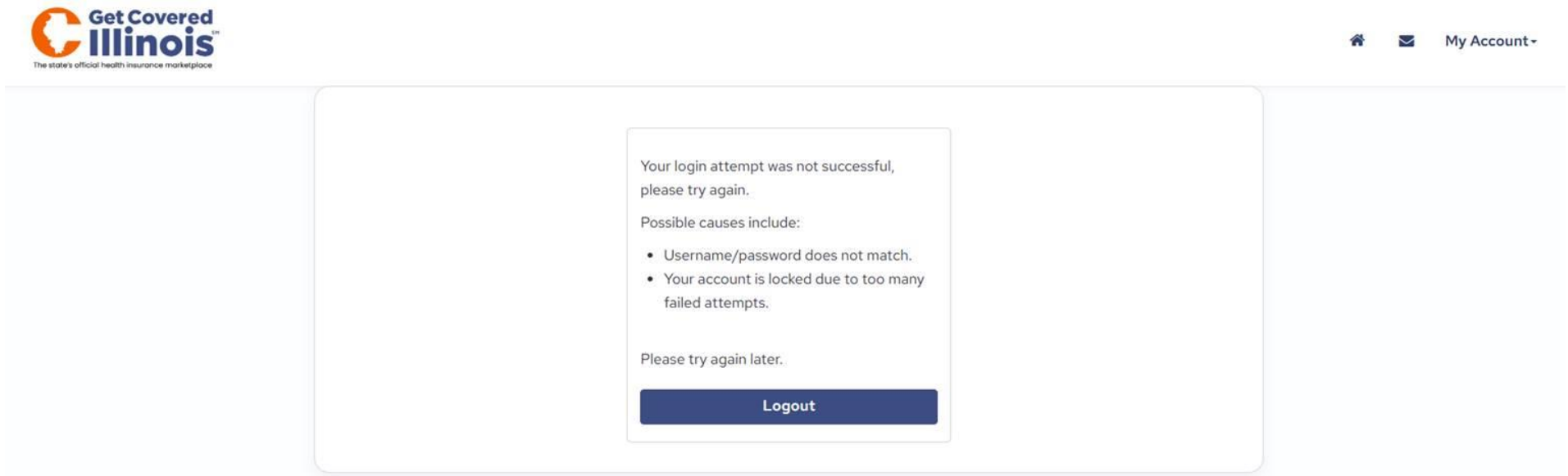
Important Updates

Open Enrollment Plan Year 2027

- No change for the upcoming Open Enrollment
- November 1, 2026 - January 15, 2027
- Enroll by December 15 for coverage beginning January 1

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 closed for the annual "dark period" as we prepare to release the Plan Year 2027 training.

All brokers who have an active Get Covered Illinois Portal account will receive an email notification when the PY2027 training becomes available. We encourage you to monitor your email for updates and important announcements regarding training and certification requirements.

In the meantime, you can stay informed by participating in the Get Covered Illinois Webinar Series and visiting GetCoveredIllinois.gov for the latest program updates, resources, and training information. Visit: https://getcovered.illinois.gov/for-brokers.html

Rebalancing

APTC Rebalancing

Households must **report changes** to current and/or projected annual income to Get Covered Illinois to ensure that they are receiving the correct level of financial assistance. When a household reports an income change that requires the Advance Premium Tax Credit (APTC) to be recalculated, Get Covered Illinois considers the **amount of APTC the household has already received during the year.**

The updated APTC amount is **then adjusted, or "rebalanced**," for the remaining months of the year. This helps align the household's total annual APTC with the expected Premium Tax Credit (PTC) based on the most current application information.

Possible Outcomes of Rebalancing:

- Receive more APTC or less APTC
- Changes to Cost Sharing Reductions eligibility
- May open a Special Enrollment Period (SEP) that allows the customer to select a plan at a different metal level, **if they become newly eligible for or lose eligibility for cost-sharing reductions (CSRs).**
- Experience a premium increase or decrease

Increase

Example: Mid-year increase of projected income

On January 1st, a customer with a projected annual income of $50,000 receives a PTC of $3,000/year ($250/month). The customer applies $250 APTC effective January 1st.

Effective July 1st, the customer increases their projected annual income to $60,000 receiving a newly calculated PTC of $1,500/year ($125/month).

Without Rebalancing:

- Eligible APTC effective July 1st = $125 / month
- Annual APTC received = $250 x 6 (Jan-Jun) + $125 x 6 (Jul-Dec) = $2,250.
- Eligible PTC = $1,500 /year

Difference = $750 owed back to IRS on tax return

With Rebalancing:

- Eligible APTC effective July 1st = $1,500 (annual PTC) - $250 x 6 (APTC received so far this year, Jan-Jun) / 6 (months left in year) = $0 / month APTC (Jul-Dec)
- Annual APTC received = $250 x 6 (Jan-Jun) + $0 x 6 (Jul-Dec) = $1,500.
- Eligible PTC = $1,500 /year
- **Difference = $0 owed back to IRS on tax return**

Decrease

Example: Mid-Year decrease in projected income

Effective January 1, a customer with projected annual income of $60,000 receives a PTC of $1,500/year ($125/month). Customer applies $125 APTC effective January 1st.

Effective July 1st, the customer's projected annual income decreases to $50,000 and now receives a PTC of $3,000/year ($250/month).

Without Rebalancing:

- Eligible APTC effective July 1st = $250 / month
- Annual APTC received = $125 x 6 (Jan-Jun) + $250 x 6 (Jul-Dec) = $2,250.
- Eligible PTC = $3,000 /year
- **Difference = $750 additional PTC received back from IRS on tax return**

With Rebalancing:

- Eligible APTC effective July 1st = $3,000 (annual PTC) - $125 x 6 (APTC received so far this year, Jan-Jun) / 6 (months left in year) = $375 / month APTC (Jul-Dec)
- Annual APTC received = $125 x 6 (Jan-Jun) + $375 x 6 (Jul-Dec) = $3,000.
- Eligible PTC = $3,000/year
- **Difference = $0 owed back to IRS on tax return**

Income Changes May Affect Both APTC and Cost-Sharing Reductions

Potential for Special Enrollment Period:

Changes in income or household size may affect a customer's eligibility for cost-sharing reductions (CSRs).

If a customer becomes newly eligible for CSRs or loses CSR eligibility, they may qualify for a Special Enrollment Period (SEP).

Customers enrolled in a Silver plan who report a change that affects their CSR eligibility are automatically moved to the Silver plan variant that matches their updated level of cost-sharing assistance.

If the customer...	**They may...**
Becomes newly eligible for **CSRs**	Enroll in a **Silver** Marketplace plan to receive CSR savings.
Loses **CSR** eligibility while enrolled in a Silver plan	Change to a **Bronze or Gold** Marketplace plan.
Becomes newly ineligible for **APTC**	Change to a Marketplace plan at **any metal level**.
Becomes newly eligible for **APTC**	Change to another Marketplace plan at the **same metal level**.


H.R.1

HR 1 Overview | HR 1 Medicaid Changes

Effective date: 2025-2026 2027 2028 and beyond

Category	HR 1 changes	Deadline(s)
Eligibility	Non-citizen eligibility reduction	Oct 1, 2026
	Community engagement (work requirements) for ACA adults	Jan 1, 2027
	6-month redeterminations for ACA adults	Jan 1, 2027
	Retroactive coverage limits	Jan 1, 2027
	Deceased member checks for disenrollment	Jan 1, 2027
	Multi-state address verification requirements	Jan 1, 2027
	Deceased provider checks for disenrollment	Jan 1, 2028
	Asset ceiling for long term care implemented	Jan 1, 2028
	HCBS waiver expansion allowed	Jul 1, 2028
	Cost sharing for ACA adults via co-pays	Oct 1, 2028
Financing	Abortion funding freeze	Jul 4, 2025 – Jul 3, 2026
	Provider and MCO tax changes	Jul 1, 2027-Oct 1, 2032
	Caps state directed payments	Jan 1, 2028
Oversight	1115 waiver budget neutrality	Jan 1, 2027
	Good faith administrative error payments reduced	Oct 1, 2029
	Rule delays (Medicare savings plan, Medicaid / CHIP eligibility, nursing home staffing)	Oct 1, 2034+

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HR1 Medicaid Changes: Eligibility

Four key eligibility changes with significant impacts take effect 1/1/27 or earlier

1 **Work requirements**	ACA adults need to meet work requirements or claim an exemption to be eligible
2 **6-month redeterminations**	Eligibility is redetermined every six months for ACA adults, instead of every twelve
3 **Retroactive coverage limits**	Reduces medical coverage pre-enrollment from 3 months to 2-months
4 **Non-citizen eligibility**	Removes federal matching funds for certain previously eligible immigrant categories

HR 1 changes are likely to drive disenrollment and coverage gaps

Summary | Eligibility Changes

October 1, 2026:

Non-citizen eligibility

- Limits federal matching funds for certain **previously eligible immigrant categories** (e.g., refugees, asylees)
- SB3462 / HB4824 are state bills that would preserve coverage for legal/humanitarian immigrants, including those who would lose Medicaid effective October 2026 due to HR1 changes. No action taken.

January 1, 2027:

Community engagement for ACA adults

- Requires certain ACA adults to meet work or qualifying activity requirements as a condition of eligibility
- ~700,000 enrollees subject to compliance; an **estimated 165,000-300,000 at risk** of not meeting and not exempt
- All new applicants eligible solely under the ACA adult category must satisfy work requirements prior to eligibility determination

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Summary | Eligibility Changes

January 1, 2027:

6-month redeterminations for ACA adults

- Requires eligibility redeterminations every **six months**, instead of every twelve

Retroactive coverage limits

- Reduces retroactive coverage reduced from 3 months to **2 months for all eligibility groups**

HR1-Specific Eligibility Changes

October 1, 2026

Eliminates federal match for certain previously eligible immigrant statuses such as refugees, asylees, and victims of trafficking, among others by:

- Narrowing the definition of " those noncitizens eligible for federal medical benefits" – to:
  - Lawful permanent residents over 5 years *or* exempt from the 5-year bar,
  - certain Cuban/Haitian immigrants, and
  - individuals living in the U.S. through a Compact of Free Association (COFA), People from the Federated States of Micronesia, Republic of the Marshall Islands, or Republic of Palau who live and work in the United States under Compacts of Free Association (COFA).

HR1-Specific Eligibility Changes

This means that many noncitizens who have long been eligible for federally matched Medicaid are losing coverage, including:

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

What is NOT Changing

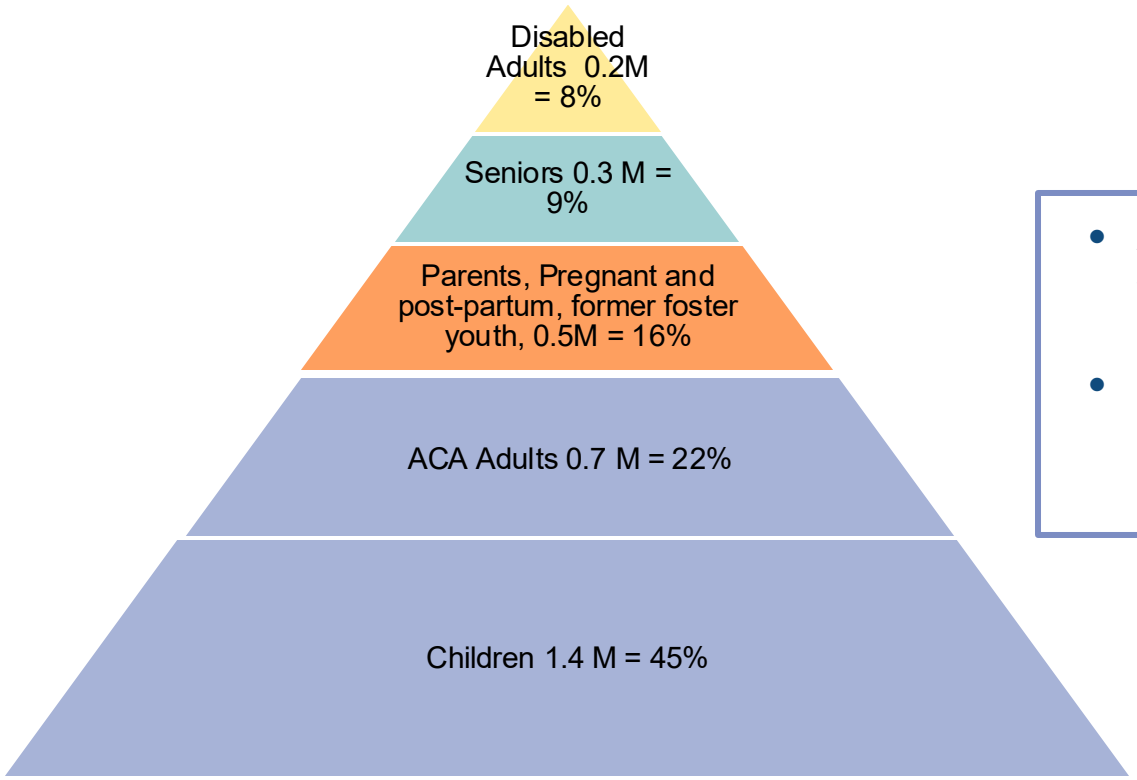
Noncitizen programs that remail unchanged:

- All Kids and Moms & Babies: Coverage for pregnant women and children under CHIPRA 214 is not changed.
- State-funded programs:
  - 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 HBIS enrollees
  - State funded kidney/renal coverage

Marketplace Changes

- Beginning January 1, 2026, immigrant populations under 100% FPL are no longer eligible for premium tax credits (PTCs).
- Beginning January 1, 2027, PTCs will only be available to lawful permanent residents, certain Cuban/Haitian immigrants, and individuals living in the U.S. through COFA, for immigrants with income at or above 100% of the FPL.

HR1 Changes Expected to Impact ~700K ACA Adults



IL Medicaid enrollment Jan 2026

- ACA adults ages 19-64 without children under 18 who earn less than 138% of FPL
- Individuals 19 or older in the ACA Adult eligibility category are subject to work requirements and 6-month redeterminations

IL is unique: parent/caregiver relatives have their own eligibility category outside of ACA adults and are therefore excluded from work requirements under HR1

Impact of Work Requirements on Medicaid Customers

Between 165,000 and 330,000 Illinoisans could lose Medicaid coverage due to the new federal work requirements

- About **700,000 Illinoisans** (ACA Adults) will be subject to Medicaid work requirements, and about 440,000 Illinoisans will be subject to SNAP work requirements.
  - About half of Medicaid customers are SNAP recipients.
  - About 90% of SNAP recipients are Medicaid customers.

Projected Losses:

- Internal estimates show that between **165,000 and 330,000 Illinoisans** will lose Medicaid coverage due to the new federal work requirements (~ **10% of our current customers)**. National expert firm Manatt estimates approximately 330,000 Illinoisians may lose coverage.
- States that have imposed work requirements, such as Arkansas and Georgia, saw tens of thousands of eligible enrollees lose coverage. Of those disenrolled in Arkansas, **97% were compliant or had exemptions, but still lost coverage.**

Work Requirements Under HR1

Individuals between ages 19-64 in the ACA adult eligibility category are "applicable individuals" and are subject to **work requirements** starting in 2027.

The Basics:

- Work requirements can be met in a variety of ways, including education and community service hours.
- Compliance and exemptions will be evaluated at ***application*** and ***redetermination***.
- HR1 exempts some ACA adults from work requirements.
- Even if an ACA adult is exempted from work requirements, they are not exempted from 6-month redeterminations.

Meeting Requirements

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 ($7.25 x 80)
- **Seasonal worker** = An average monthly income over the preceding 6 months that is not less than the applicable Federal minimum wage multiplied by 80 hours.
- **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

Marketplace Trivia Moment

Question 1

A consumer reports their annual income increased from $24,000 to $40,000. What should you expect the system to do?

A. Nothing Changes

B. Only the Premium Changes

C. Rebalance Eligibility by Reviewing Medicaid and Marketplace Eligibility

D. Automatically Cancels Coverage

Question 2

Beginning January 2027 PTCs will only be available to lawful permanent residents and which of the following:

A. Certain Cuban/Haitian immigrants

B. Individuals living in the U.S. through COFA

C. Immigrants with income at or above 100% of the FPL

D. All the above

For Your Information (FYI) for Brokers

Reminders for Our Brokers

PY2027 certification training is right around the corner

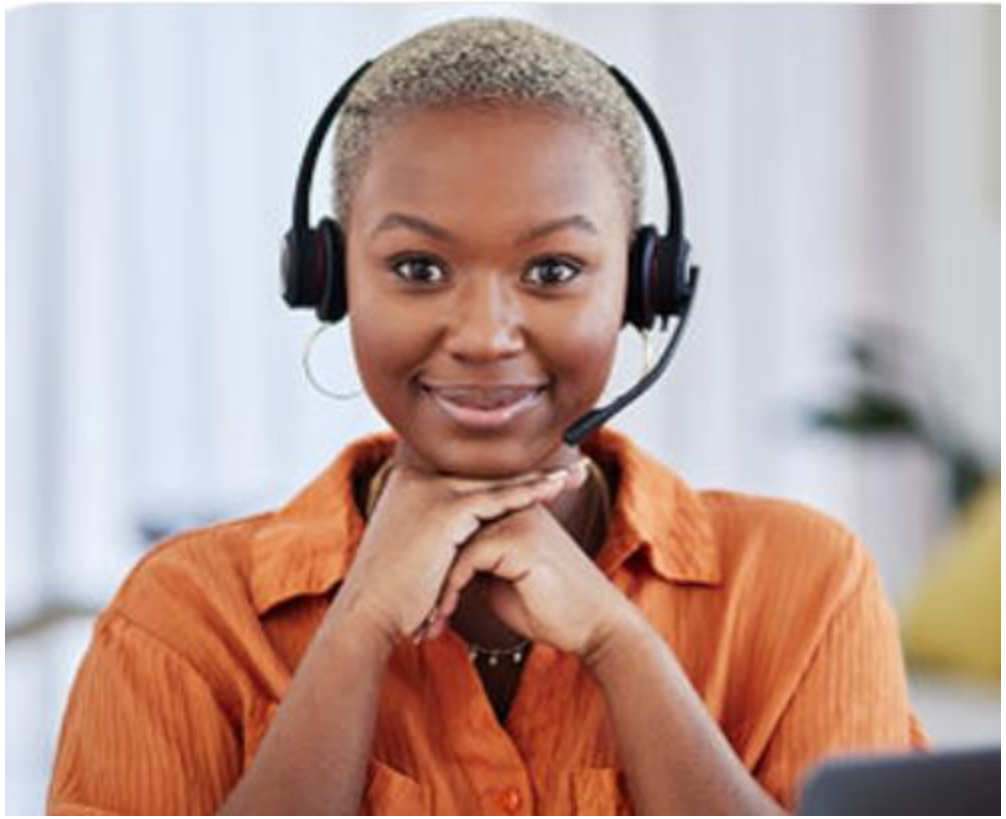
Health Line of Authority = License

Get Covered Illinois Certification = Your authorization to use your license

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, August 20, 2026, 11:00 AM CT

Registration link available soon.

Broker Webinar Resources

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

Thank You!

Get Covered Illinois℠

The state's official health insurance marketplace.