

HR1 Medicaid Provisions & Implementation Updates

Legislative Townhall

September 28, 2026



HFS

Illinois Department of
Healthcare and Family Services



HFS

Illinois Department of
Healthcare and Family Services

OUR VISION FOR THE FUTURE

We improve lives.

- ▶ We address social and structural determinants of health.
- ▶ We empower customers to maximize their health and well being.
- ▶ We provide consistent, responsive service to our colleagues and customers.
- ▶ We make equity the foundation of everything we do.

This is possible because:

▶ **We value our staff as our greatest asset.**

We do this by:

Fully staffing a diverse workforce whose skills and experiences strengthen HFS.

Ensuring all staff and systems work together.

Maintaining a positive workplace where strong teams contribute, grow and stay.

Providing exceptional training programs that develop and support all employees.

▶ **We are always improving.**

We do this by:

Having specific and measurable goals and using analytics to improve outcomes.

Using technology and interagency collaboration to maximize efficiency and impact.

Learning from successes and failures.

▶ **We inspire public confidence.**

We do this by:

Using research and analytics to drive policy and shape legislative initiatives.

Clearly communicating the impacts of our work.

Being responsible stewards of public resources.

Staying focused on our goals.

Housekeeping Town Hall Basics



All participants are muted and in listen-only mode.



If you'd like to ask a question, click on the chat feature icon located at the bottom of your screen and select "direct" NOT "everyone". Then type your question into the chat box.



We will be monitoring questions and will have time to address Q&A after our planned presentation.



We may not be able to answer every question asked, but we will have a record of all your questions and will use them as a guide for future resources and presentations.



After the webinar, please visit our Federal Resource Center page on the HFS website for additional resources, training webinar series, toolkits, and other helpful H.R. 1 resources.



Automated captions have been enabled for this webinar. To view them, click on the "more" option with three dots at the bottom of your screen. There you should have the option to turn on closed captioning.

Technology Check

House Keeping



- Meeting Chat – Contact the Meeting Host with Questions or Comments



- Connect Audio - Mute and Unmute – Microphone



- Closed Captioning



- Start Video – Turn Camera On or Off



Hi, I'm the Webex Assistant!

Captions and highlights
View captions and highlights created in the meeting.

Voice commands
Say commands like: "On Webex, the action item to capture highlights."

Turn on Webex Assistant

Spoken language
English

Caption language
English

Webex Meeting Bar

Buttons: Connect audio, Start video, Share, Record, Mute, Unmute, Stop Video, End Meeting, Apps, Participants, Chat, More

HFS Guiding Principles

- **Mitigate harm** as much as possible.
- Ensure eligible **Illinoisans receive and maintain the coverage and benefits** for which they qualify.
- Ensure the Illinois Medicaid program maintains the ability to **cover as many health care services as possible**.





Today's Townhall Agenda

- Medicaid Background
- HR1 Changes to Medicaid Eligibility
- HFS Response to HR1
- HR1 Changes to Medicaid Eligibility
- Q&A



HFS

Illinois Department of
Healthcare and Family Services

Medicaid Background





What is Medicaid?

- A federal and state partnership that **provides comprehensive health insurance**
 - Created by Congress under Title XIX of the Social Security Act
 - Eligibility varies by state (some populations are required to be covered by all states);
 - Includes mandatory & optional services
 - Current Illinois Medicaid enrollment is roughly **3.1 million people**, or 1 in 4 Illinois residents
 - IL Medicaid budget exceeded **\$40 billion** in FY26
- Medicaid ≠ Medicare
 - Medi**CARE** = Older adults over 65 and some people w/disabilities (Federal ONLY)
 - Medic**AID** = Lower income and now all populations (State administered in partnership with Federal – split funded)



HFS

Illinois Department of
Healthcare and Family Services

How do we pay for Medicaid?

- Medicaid is financed by **both the state & federal governments**;
- Federal government reimburses for health services and admin costs – HFS must spend up front;
- **FMAP** (Federal Medical Assistance Percentage)
 - FMAP base varies by state but 50% floor based on state's per capita income relative to the national average;
 - Services to individuals covered by the ACA Medicaid expansion ("ACA Adults") receive 90% FMAP;
 - IL base FMAP currently 50.96%
- The federal government paid over **\$23.5 billion** to help fund the Illinois Medicaid program in calendar year 2025, including **\$9.5 billion for services to ACA Adults**.
- Last year, more than **17% of the state's general funds** was for Medicaid.



HR 1 Impacts Healthcare Across 5 Areas



1. Medicaid eligibility

- **New eligibility conditions + compliance requirements**, including **work requirements**, more frequent **redeterminations**, limits on **retroactive coverage** & expanded verification processes



2. Medicaid financing

- **Reduces federal funding participation** and **restructures key Medicaid financing tools** by adjusting tax structures and limiting SDPs



3. Medicaid oversight

- **Strengthens federal review and enforcement standards**, narrowing waiver flexibility and increasing accountability for state program administration



4. Rural health

- **Offers incremental funding** to expand access to rural healthcare, including via workforce development, investing in new care models, and tech innovation



5. ACA marketplace

- **Restricts premium tax credit eligibility** for specific populations and removes it for specific enrollment periods



HFS

Illinois Department of
Healthcare and Family Services



Economic Impact of Changes to Medicaid

- **Hospitals:** Illinois' hospitals and health systems, most of which serve Medicaid customers, contribute about **\$117.7 billion** to the state's economy every year and support **445,000 full-time jobs**, comprising about 11% of the state's total employment.
- **Local government:** HR1's cuts to Medicaid will leave state and local governments with vast budget shortfalls, compromising successful existing partnerships.
 - For example, the **Ground Emergency Transportation (GEMT) Program** is federally funded and HFS receives hundreds of millions in federal match for emergency transportation services, which is passed to providers annually as a supplemental reimbursement.
- **Schools:** Nationally, Medicaid is the third-largest funding stream for K-12 public schools. **Illinois Local Education Agencies (LEAs)** are reimbursed hundreds of millions by the Medicaid program.



HFS

Illinois Department of
Healthcare and Family Services

HR1 Changes to Medicaid Eligibility

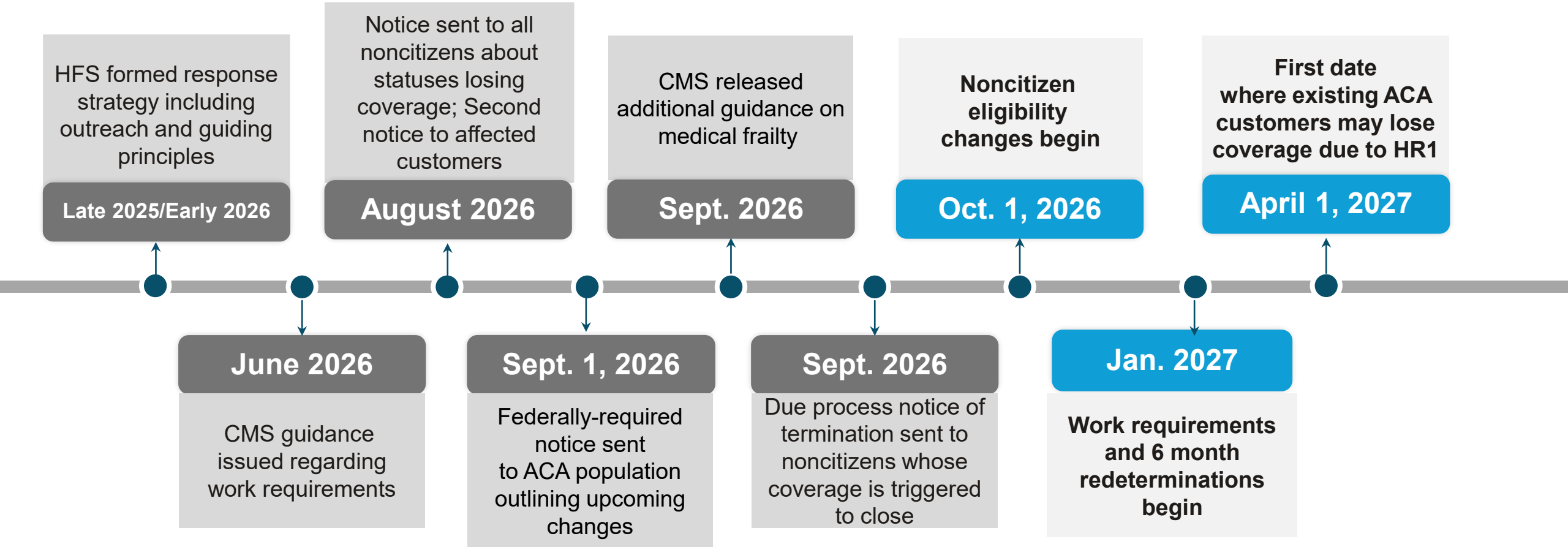


HR 1 Medicaid changes | Four Key Eligibility Changes Effective 1/1/2027 or Earlier

HR1 was passed by Congress and signed by the President in July 2025. State Medicaid programs must comply with federal law in order to receive federal Medicaid funding.

		Effective Date
1	Noncitizen eligibility	Removes federal matching funds for certain previously eligible noncitizen statuses 10/1/26
2	Work Requirements	Imposed a work requirement on ACA adults that applicants and enrollees must meet or be exempted from 1/1/27
3	6-Month Redeterminations	Requires states to review eligibility every six months for ACA adults, instead of every twelve 1/1/27
4	Retroactive coverage limits	Reduces medical coverage before the application month from 3 months to 2 months** 1/1/27

Implementation Timeline for HR1 Eligibility Changes



Noncitizen Eligibility Changes

October 1, 2026

Many noncitizens who have long been eligible for federally matched Medicaid are losing coverage, including:

- Humanitarian Refugees residing in US for 1+ years
- 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
- Amerasian immigrant (US citizen father, Vietnamese mother from Vietnam war)
- Noncitizen whose deportation is withheld

Noncitizen Eligibility Changes

October 1, 2026

Noncitizens who remain eligible for federally matched Medicaid, including:

- Naturalized citizens
 - Children under 19 years old
 - Pregnant / postpartum individuals
- Lawful permanent residents (subject to the five-year waiting period unless federally exempt)
Certain Cuban & Haitian entrants, and COFA migrants (from Marshall Islands, Micronesia or Palau)

Noncitizen Eligibility Changes in Illinois

October 1, 2026

- HFS estimates that more than 9,300 **individuals will lose coverage** due to this provision.
- Coverage for pregnant women and children under CHIPRA 214 will not change.
- Individuals may still qualify for Emergency Medicaid. However, this program only pays for care during a serious medical emergency. Emergency Medicaid does not cover regular doctor visits, prescriptions, or ongoing treatment.
- Individuals can get primary and preventive care at Federally Qualified Health Centers (FQHCs) and free and charitable clinics, which serve uninsured and underinsured people regardless of their immigration status and ability to pay.
- Noncitizen toolkit, including a flyer, palm card, slides, and social media posts, is available on the HFS Federal Resource Center webpage in seven languages.

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.

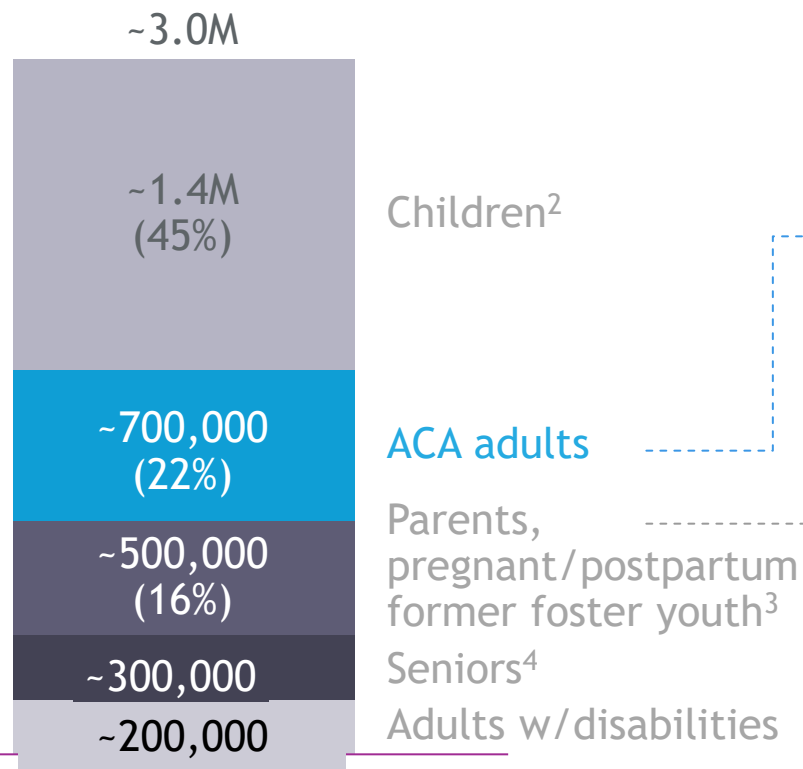
Scan the QR Code and click "Manage My Case"

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.illinoisatclinics.org and www.ihca.org/health-center-locator.

ACA Adults | 700K potentially subject to work requirements & 6-month redeterminations

IL Medicaid enrollment (Jan 2026)¹



HR1 Medicaid eligibility changes primarily impact ACA adults

- ACA adults ages 19-64 not residing with 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 redeterminations⁵

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



HFS

Illinois Department of
Healthcare and Family Services

1. Jan 2026 total statewide Medical enrollment (excludes partial beneficiaries); 2. Includes ~17K foster youth in Care 3. Includes ~402K parents/caretakers, ~57K pregnant women, ~26K former youth in care 4. Includes ~7K HBIS; 5. ACA adults also have more severe retroactive coverage loss (1 month from 3 months) vs. other populations (2 months from 3 months)

Sources: PM 06-25-01 Determining Nonfinancial Eligibility; [House Appropriations Health & Human Services Committee \(Oct 2025\)](#)

Find ACA Adults by Your District

ACA Adult
enrollment by
legislative district
is available on the
HFS Website
hfs.illinois.gov

The screenshot shows the HFS website interface. At the top, the HFS logo and name are on the left, and the Director's name, Elizabeth M. Whitehorn, is on the right. A search bar is also present. Below the header is a navigation menu with links: Home, My Healthcare, Medical Providers, Child Support Services, HFS OIG, Community, Info Center, and About Us. The main content area shows a breadcrumb trail: HFS > Info Center > Facts & Figures > Program Enrollment > HFS Enrollment by Sena... On the left side of the main content area, there is a sidebar with links: Program Enrollment, County Table, Enrollment Zip Code Search, Statewide Enrollment, HFS Enrollment Senate and House District, and HFS Enrollment by Congressional District. The main content area displays the title 'HFS Enrollment by Senate and House District' with two bullet points: 'FY 2025 Senate and House District (pdf)' and 'Archived Enrollment by Senate and House District'.

Info Center ➡ Facts & Figures ➡ Program Enrollment ➡ HFS Enrollment by District

Work Requirements Under HR1

January 1, 2027

Individuals between ages 19-64 in the ACA adult eligibility category are subject to **work requirements** starting in 2027 unless they meet certain exemptions.

- Work requirements are a **condition of eligibility for Medicaid for ACA Adults. This means that ACA Adults must meet or be exempt at application and at each redetermination to get/keep Medicaid.**
- Work requirements can be met in a variety of ways, including income, work, education and community service hours.
- Federal law exempts some ACA adults from work requirements.
- All ACA adult are subject to 6-month redeterminations, regardless if they are exempted from work requirements.



HFS

Illinois Department of
Healthcare and Family Services

Work Requirements Compliance

Having income of \$580 per month is sufficient to meet the work requirement.

OR

Individuals can complete any or a combination of these activities to reach 80 hours per month:

- **Employment** = Working, includes self-employment, unpaid work, and in-kind work
- **Community service** = Volunteering as part of a structured program
- **Work program participation** = Participating in an approved work program, like Job Ready Illinois
- **Enrollment in an educational program** = Enrollment in a higher education or a career or technical education program.
 - NOTE: At least half-time enrollment as defined by the institution alone is sufficient to meet the work requirement.

Work Requirements Exemptions

Exclusions

Medically frail, meaning their condition(s) significantly impairs their ability to work

Veterans with a total disability rating

Former foster youth under the age of 26

Pregnant or entitled to 12-month **postpartum** coverage

American Indian / Alaska Native

Parents, guardians, caretaker relatives, and family caregivers of dependent children ≤ 13 years or disabled individuals

Subject to SNAP work requirements and not exempt

Meeting TANF work requirements

Participating in a drug addiction or alcohol treatment rehabilitation program

Inmate of a public institution



HFS

Illinois Department of
Healthcare and Family Services

Work Requirements Exemptions Cont.

Mandatory Exceptions

Recently **incarcerated** within the last three months

Medicare Part A eligible or enrolled or **Part B** enrolled

Those in **mandatory eligibility groups** (e.g., AABD Medicaid or Family Health Plans)

Formerly a specified excluded individual (in lookback) under age 19

Short-term Hardship Exceptions

Traveling for medical care for serious or complex condition for yourself or a dependent

Receiving inpatient services in a hospital, nursing home, ICF/IDD, or other services of similar acuity

Residing in county with **high-unemployment** rate

Residing in area with **federally-declared disaster**



HFS

Illinois Department of
Healthcare and Family Services

Establishing Compliance or Exemption from Work Requirements

Data Sources

- If HFS can verify that a customer meets work requirements or has an exemption using a data source, customers will not need to take any action.
- If we need more information, HFS will ask individuals to provide verification of compliance or an exemption.

Self-Attestation

- ACA Adults will be able to answer specific questions about their compliance activities and exemptions on applications and renewal form. Illinois will accept their sworn answers when we do not have conflicting information from a data source.
- Changes in verification requirements are coming in 2028 per federal regulation.

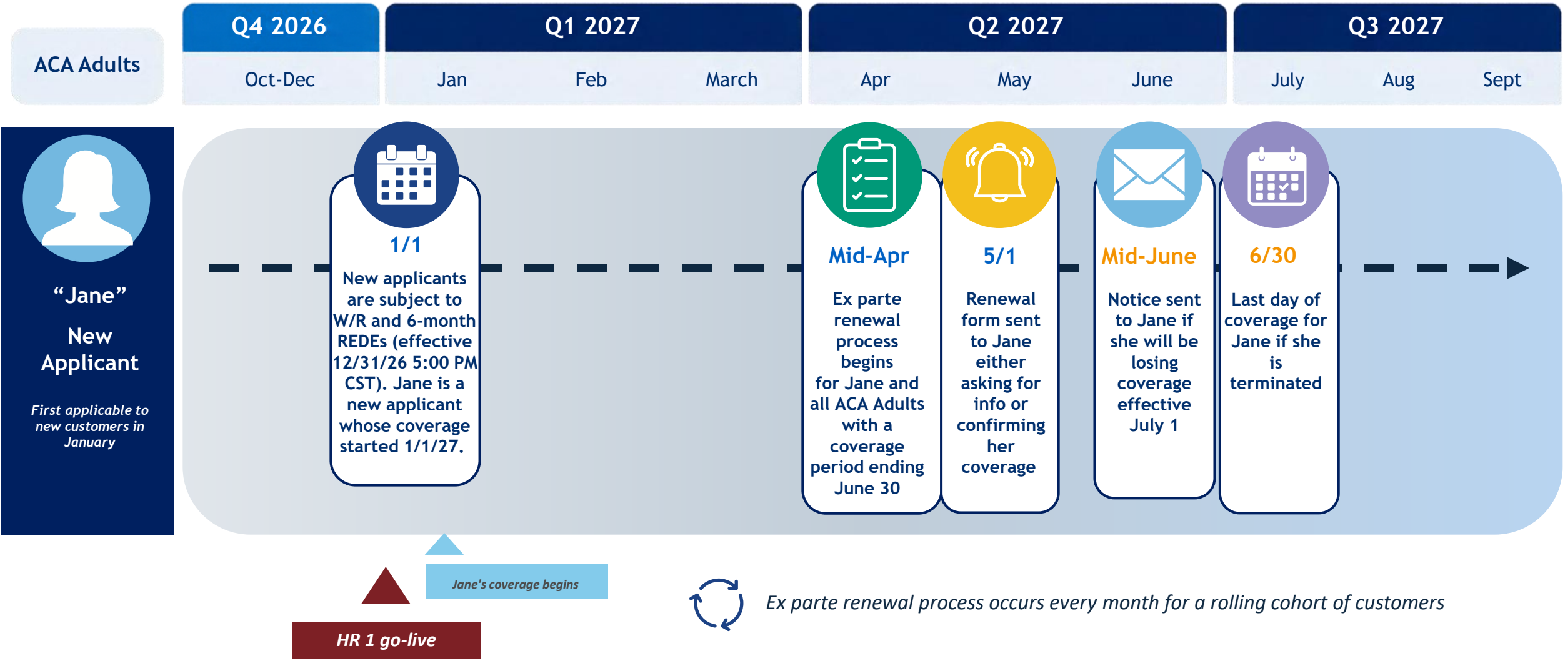
6-Month Redeterminations

January 1, 2027

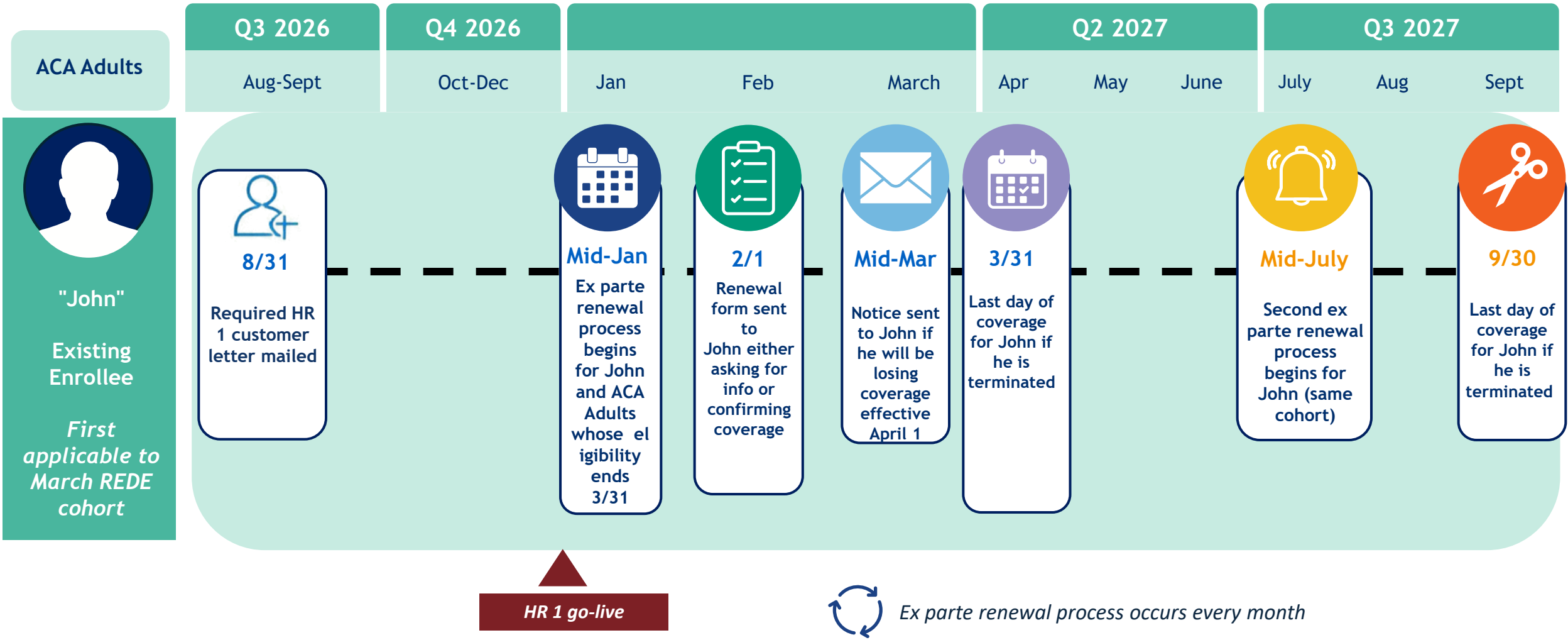
- Medical redeterminations are currently required annually for all medical programs.
- **HR1 changes will require ACA Adults to be redetermined every 6 months.**
- ACA Adults are subject to 6-month redeterminations even if they are exempt from the work requirement.

Impact: Additional administrative burden and increased likelihood of procedural disenrollments (i.e., customers losing coverage for admin reasons while still eligible)

New Applicant Timeline



Existing customer timeline: First Renewal Cohort



Retroactive Coverage Changes

January 1, 2027

- Retroactive coverage currently allows eligible Medicaid applicants to be covered for health services received for up to 3 months prior to their application month.
- H.R. 1 reduces retroactive coverage from the current 3 months to:
 - 1 month for ACA Adults
 - 2 months for all other coverage groups
- However, Illinois is extending a **second month** of retroactive coverage to ACA Adults. Thus, **all coverage groups will receive 2 months of retroactive coverage.**

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



HFS Response to HR1



Actively Partnering Across Agencies

Work Requirements Across SNAP and Medicaid

- To mitigate potential coverage loss, HFS is **collaborating closely with DHS to leverage recent system changes to SNAP** work requirements for ABAWDS.
- Where Medicaid and SNAP work requirements diverge, HFS is consulting with national experts, and like-minded state Medicaid agencies, to identify best practices on policy and system builds.

Maximize Policy Flexibilities & Leverage IT

- HFS is developing policies and procedures that will **reduce the burden of HR1 requirements on customers and state staff.**
- HFS is collaborating with IDHS and DoIT to leverage information technology to maximize ex parte verifications, streamline applications and redeterminations, and improve our interfaces to help customers navigate and maintain compliance.

HFS, DHS, and DoIT are working together to implement HR 1 requirements for Medicaid.



HFS

Illinois Department of
Healthcare and Family Services

Communicating Directly with Customers

- HFS is sending **letters, text messages, and emails** to customers
- Public **FAQs, toolkits, and factsheets**, including HR1 SNAP and Marketplace resources, are available on the HFS website and have been circulated with external stakeholders
- HFS is contracting with an **external communications firm** and is planning to execute a paid media component of the larger public awareness campaign starting this fall and into 2027
- HFS will continue to update publicly available resources

Convening New HR1-Related Forums

- HFS has convened new forums to communicate with stakeholders about HR1 changes and hear feedback, concerns, and needs from partners
- HFS has conducted subject-matter expert focus groups to gather expertise about the law's impact on various populations
 - E.g. HRSN, pregnant and post partum, persons with disabilities
- HFS has also conducted public webinars and ad-hoc presentations
 - ~4,000 total attendees at all public webinars so far (6 to date, 1 remaining)
- HFS will continue to engage with stakeholders across various platforms

Leveraging Existing Forums

- HFS has continued attendance at existing forums to provide regular updates about HR1 implementation and anticipated impacts. These forums include:
 - Medicaid Advisory Committee (MAC)
 - MAC Public Education Subcommittee
 - Beneficiary Advisory Council (BAC)
 - Cook County Health (CCH) Medicaid Impact Workgroup, including three subgroups (Comms, Coalition Building, and Innovate & Create)

Activating Help from Stakeholders

HFS is conducting comprehensive stakeholder engagement and a public awareness & outreach campaign to raise awareness about the HR1 eligibility changes.

HFS sends updates and quarterly newsletters to our stakeholder list.

Subscribe and find the stakeholder newsletter archive [here](#).



The image shows a screenshot of an email template from the Illinois Department of Healthcare and Family Services (HFS). The header features the HFS logo and the text "HFS Illinois Department of Healthcare and Family Services". Below this, the main heading is "STAKEHOLDER NEWS" in large blue letters, with "HR 1 UPDATES" in white text on a blue and orange geometric background. The body of the email starts with the subheading "Introducing the HR 1 Phase One Stakeholder Toolkit: Update Your Address Campaign". The text explains that HFS is launching Phase One of its communications strategy to prepare Medicaid customers for upcoming federal changes under HR 1. It states that beginning in 2027, new federal requirements may require some adult Medicaid customers to report work, school, or training activities, but many will be exempt and no one will be required to take action until they receive direct notice from the State. To support early awareness and prevent avoidable loss of coverage, HFS is introducing the "Phase One Stakeholder Toolkit: Update Your Address Campaign". Inside the toolkit, users will find a flyer, social media posts and copy, and additional information in both English and Spanish. At the bottom, there are two prominent buttons: a dark blue one labeled "Phase One Stakeholder Toolkit: Update Your Address" and a light blue one labeled "Medicaid Federal Policy Changes Fact Sheet - English". A link at the very bottom says "View this email as a Webpage".

HFS
Illinois Department of
Healthcare and Family Services

STAKEHOLDER NEWS **HR 1 UPDATES**

**Introducing the HR 1 Phase One Stakeholder Toolkit:
Update Your Address Campaign**

The Illinois Department of Healthcare and Family Services (HFS) is launching Phase One of its communications strategy to prepare Medicaid customers for upcoming federal changes under HR 1.

Beginning in 2027, new federal requirements may require some adult Medicaid customers to report work, school, or training activities. Many customers will be exempt, and no one will be required to take action until they receive direct notice from the State. However, ensuring customers receive timely and accurate information is critical.

To support early awareness and prevent avoidable loss of coverage, HFS is introducing the [Phase One Stakeholder Toolkit: Update Your Address Campaign](#). Inside you will find a flyer, social media posts and copy, and additional information you can use to help us reach our customers in both English and Spanish. We will notify you when additional languages are available.

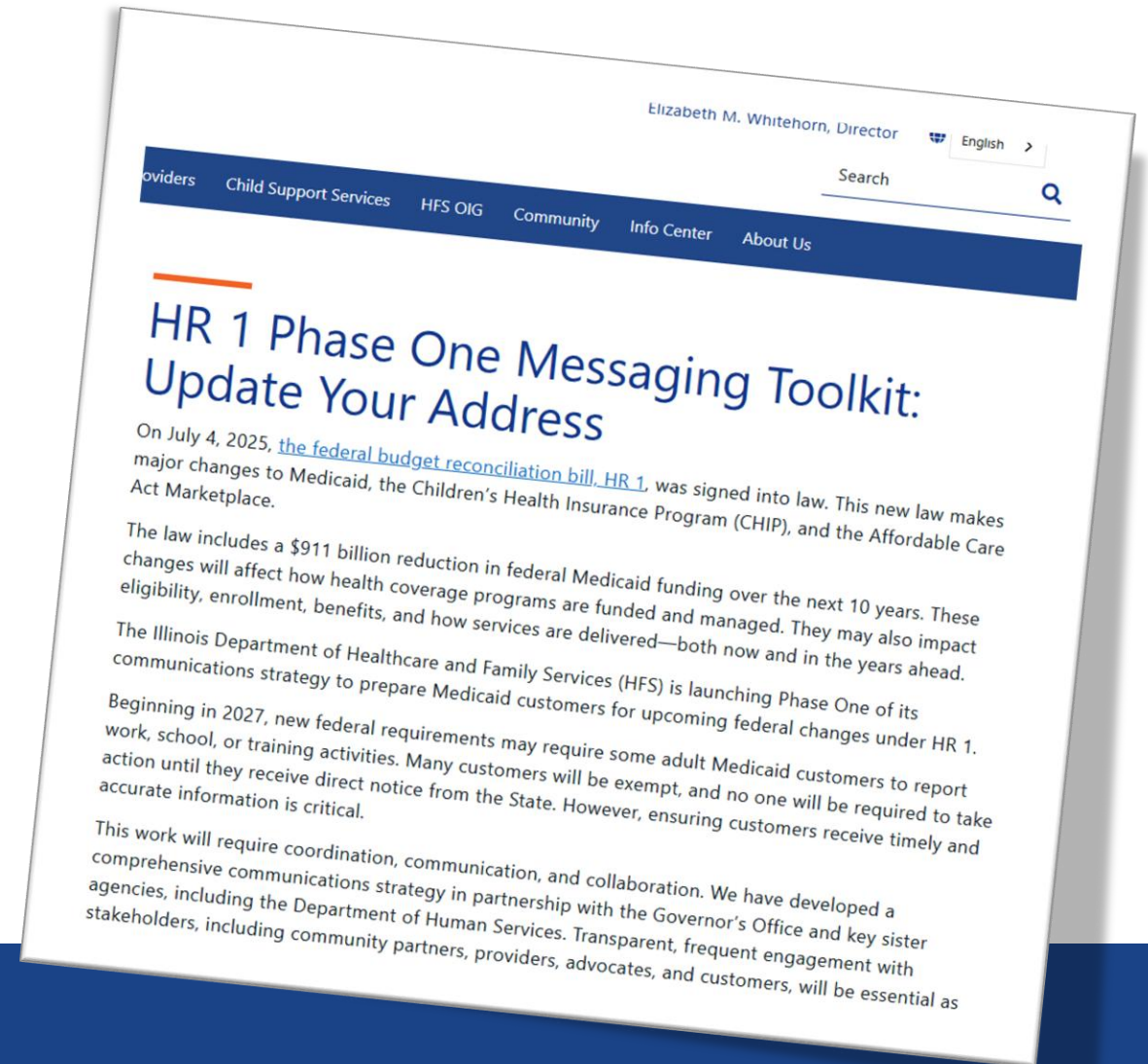
Phase One Stakeholder Toolkit: Update Your Address

Medicaid Federal Policy Changes Fact Sheet - English

[View this email as a Webpage](#)

HR 1 Phase 1 Toolkit

- The HR 1 **Phase One Stakeholder Toolkit** was released in February 2026. This toolkit encourages customers to prepare for upcoming Medicaid changes by keeping their contact information up to date, and includes slides, a flyer, and social media posts.
- This toolkit is now available in 15 languages.
 - English, Spanish, Arabic, Burmese, Chinese, French, German, Greek, Gujarati, Hindi, Korean, Polish, Russian, Tagalog, Urdu



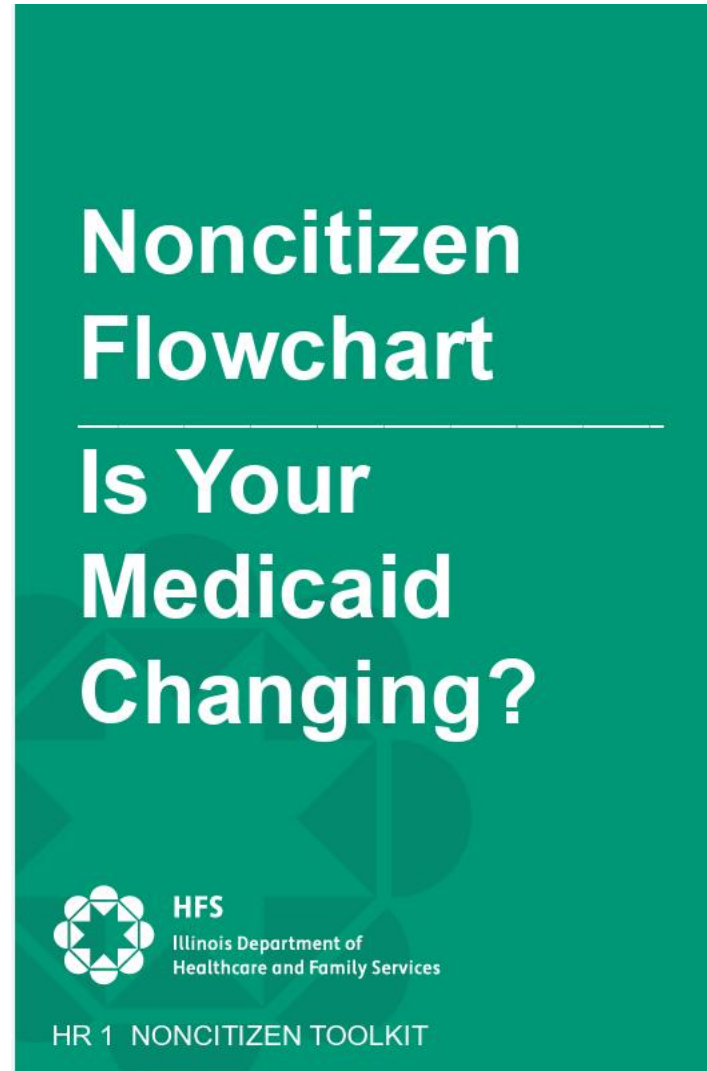
HFS

Illinois Department of
Healthcare and Family Services

HR 1 Noncitizen Eligibility Toolkit

Released in June 2026

Available in 7 languages



MEDICAID ELIGIBILITY FOR NONCITIZENS IS CHANGING, EFFECTIVE OCTOBER 1, 2026



HFS
Illinois Department of
Healthcare and Family Services

Read on to find out if you are affected and what options you may have.

If any of the following applies to you, you do NOT need to do anything. Your Medicaid eligibility is NOT affected. If you do not meet at least one of these qualifications, your Medicaid coverage is affected by the federal changes. However, you may qualify for AATV, a state-funded insurance program for select noncitizens.

✓

Naturalized Citizens
Born in the U.S., or became a citizen

✓

Lawful Permanent Resident (Green Card holder)
If subject to the 5-year bar (wait period), must have met the 5-year bar OR are exempt from the 5-year bar (such as adjusting to LPR from a refugee or asylee status). Call 1-877-805-5312 to confirm.

✓

Cuban or Haitian Entrant
Only if you entered under a specific humanitarian program - call 1-877-805-5312 if this applies to you.

✓

COFA Migrant
From Marshall Islands, Micronesia, or Palau

✓

Pregnant
Pregnant people are covered under other Medicaid regardless of immigrant status. Visit HFS Moms and Babies website or call 1-877-805-5312 to confirm eligibility and apply today.

✓

Under 19 Years Old
Children are covered under "All Kids" regardless of immigrant status. Visit the HFS All Kids website or call 1-877-805-5312 to confirm eligibility and apply today.

✗

Not in one of these groups?
Your Medicaid Coverage may end on October 1, 2026.
Call 1-877-805-5312 to find out if your coverage is changing.

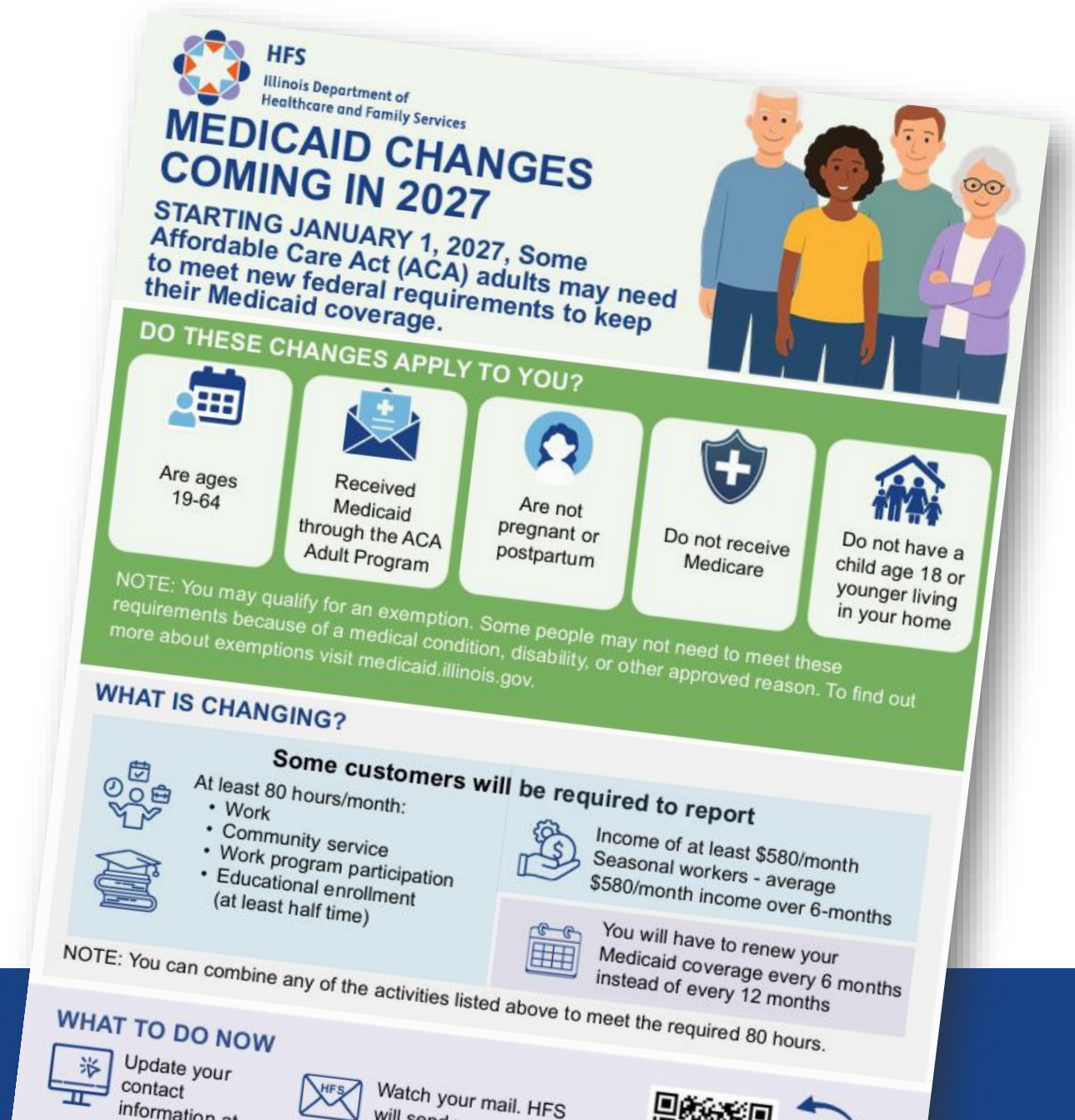
Other programs may help you pay for medical care - see other side to learn about AATV. →

HR 1 Phase 2 Stakeholder Toolkit

Focused on HR 1 changes for ACA
Adult population that take effect
January 1, 2027

Released in August 2026

Currently available in English and
Spanish, more languages to come



Next steps | Helpful links to support constituents

Item	Supporting materials	How you can help
Share with others	HFS Federal Resource Center: Access toolkits, fact sheets, webinars and other resources to help Medicaid customers understand the upcoming federal changes (link) Webinar 10/21/2026 – HR1 System Changes: How to Utilize and Assist HR 1 FAQs: Answers to common questions about federal changes (link) Illinois Medicaid Customer Guide: Online info hub for customers (link) HR 1 SNAP resources: DHS materials to help SNAP customers understanding upcoming changes (link)	Share these resources with constituents and community partners (e.g., via newsletters, district offices, etc.) to help raise awareness and prepare for upcoming changes
Stay informed	Follow for latest announcements and public-facing updates on federal changes • Facebook (link) • LinkedIn (link)	Follow HFS for the latest updates and resources



Any questions?

HR 1 introduces major federal shifts that will require careful, Illinois-specific implementation to protect patient care and ensure the state captures every available federal opportunity.

Our Legislative Affairs (OLA) team is your first stop for:

- **Resources and information**

The OLA team can direct you to the right resources that are available to inform constituents and raise awareness.

- **Practical policy analysis**

Clear, timely briefings on how HR 1 provisions interact with Illinois statutes, administrative rules, and budget priorities.

- **On-the-ground perspectives**

Direct input from providers, administrators, and patients on the real-world implications of proposed changes.

Your time and priorities are significant. We're here to ensure you have expert, ready-to-use guidance whenever Medicaid or federal healthcare alignment comes before you.

OLA Contact Info

Heather Eagleton

Director of Legislative Affairs
Heather.Eagleton@illinois.gov

Dominic Marchiori

Legislative Liaison
Dominic.Marchiori@illinois.gov

Patrick Hostert

Legislative Liaison
Patrick.S.Hostert@illinois.gov

Jesse Griffin

Constituent Affairs
Jessica.Griffin@illinois.gov



HFS

Illinois Department of
Healthcare and Family Services



Q & A

Facilitator: Melishia Bansa – Deputy Director of Community Outreach:
Boards and Commissions