HFS

Illinois Department of Healthcare and Family Services

June 2026: Medicaid and CHIP Redeterminations (as of: October 7, 2026)

SNAPSHOT

Redetermination is the annual process for verifying continued eligibility and coverage for Medicaid and CHIP program enrollees. This report includes redetermination completion rates, renewal outcomes, demographics, and coverage type for enrollees who were due for redetermination in June 2026. This report also includes the summary analysis for Fiscal Year-To-Date 2026.

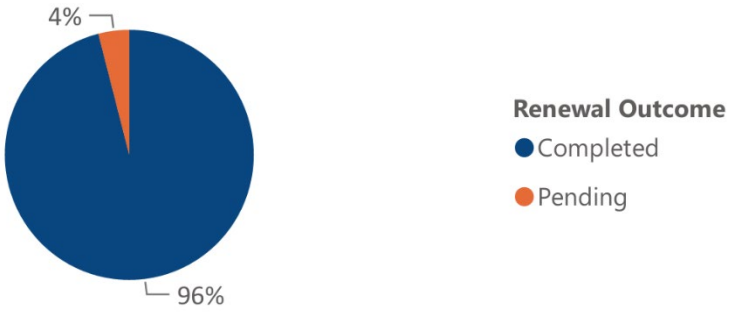
June 2026 Summary

June 2026 Redetermination Completion Rates

213,136 enrollees were due for redetermination in June 2026.

- 204,612 (96%) redes have been completed; and
- 8,524 (4%) redes are still pending.
  - Redes still pending include:
    - Redes received on time but have not been completed by a caseworker; enrollee retains coverage until rede completion.
    - Redes received late (during the 90-day reinstatement period) but have not been completed by a caseworker; enrollee lost coverage for not returning the rede on time, but coverage may be reinstated if found eligible upon rede completion.

Redetermination Completion Rate

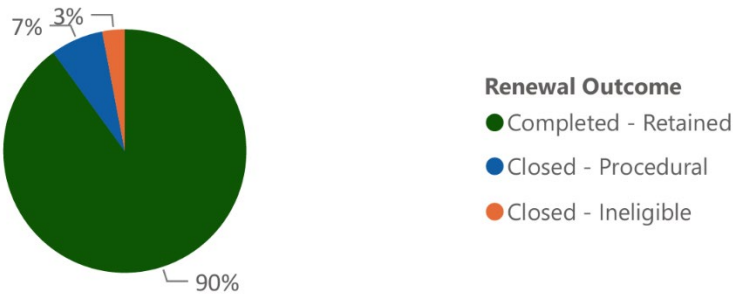


June 2026 Redetermination Outcomes

Of the 204,612 redes that have been completed:

- 184,134 (90%) enrollees retained coverage.
- 6,115 (3%) enrollees lost coverage for ineligible reasons; and
- 14,363 (7%) enrollees lost coverage for procedural reasons.

Redetermination Outcomes

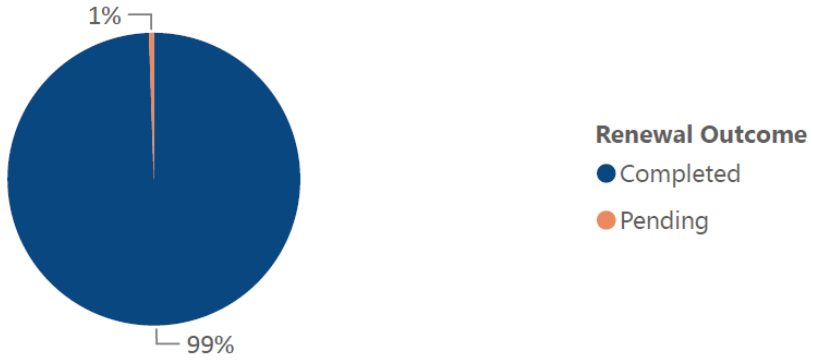


Fiscal Year 2026 Year-To-Date Summary

2,718,269 enrollees were due for redetermination in FY 2026-YTD.

- 2,682,444 (99%) redes have been completed; and
- 35,825 (1%) redes are still pending.

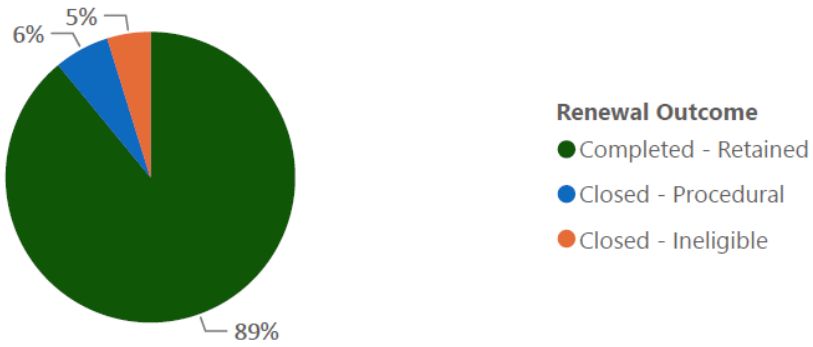
Redetermination Completion Rate SFY 2026



Of the 2,682,444 redes that have been completed:

- 2,386,407 (89%) enrollees retained coverage;
- 126,826 (5%) enrollees lost coverage for ineligible reasons; and
- 169,211 (6%) enrollees lost coverage for procedural reasons.

Redetermination Outcomes SFY 2026



FORM AB RENEWALS

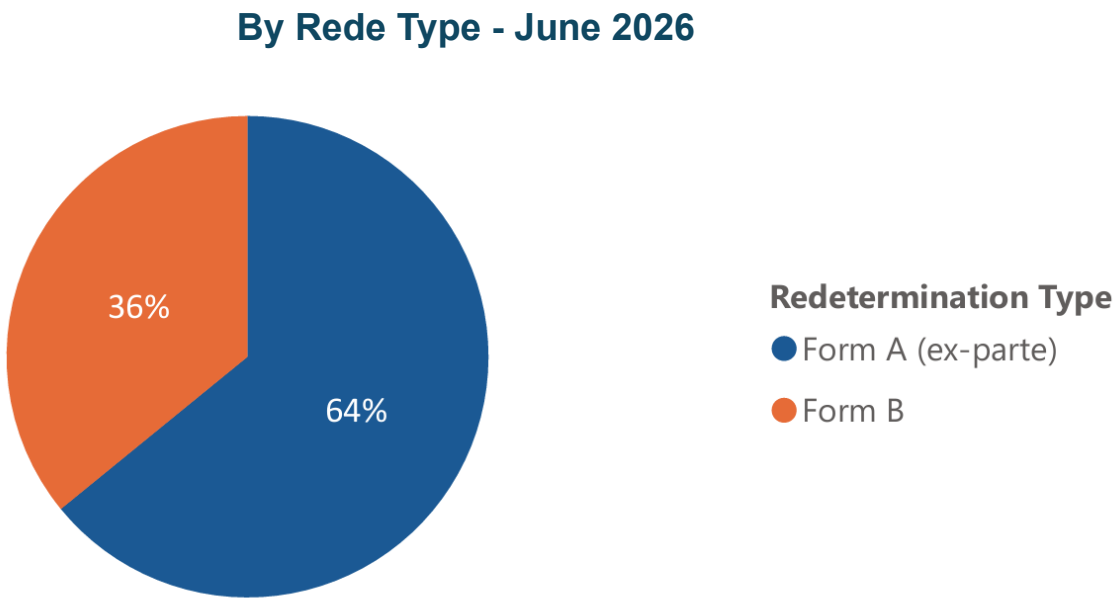
To determine Medicaid eligibility, current enrollees due for redetermination are mailed one of two different request forms: Form A or Form B.

Form A: Form A renewals are based on reliable information contained in the customer's case, including information that can be accessed through external electronic data sources, also known as ex-parte. A key distinction in defining Form A renewals is that it happens "without" customer involvement. All medical cases are reviewed to determine if eligibility can be determined through the ex-parte process. If eligibility is confirmed, a Form A redetermination notice is automatically mailed to the customer informing them of the continuation of benefits. The customer is required to review the information on the form that was used to make the determination; if any of the information is not accurate, the customer must report the change(s) and the new information is used to determine eligibility for medical benefits.

Form B: Form B renewals are completed when a customer's eligibility information cannot be fully accessed and/or verified through external electronic data sources. In this situation, a Form B redetermination notice is mailed to the customer requesting additional information. The customer is required to submit the requested information in order for eligibility for medical benefits to be assessed.

Redetermination Type

Redetermination Type	Enrollees
Form A (ex-parte)	136,634
Form B	76,502
Total	**213,136**



Redetermination Outcome Breakdown by Managed Care Organization and Fee-For-Service

The following chart shows redetermination breakdown by MCO and Fee-For-Service

Redetermination Outcomes Breakdown by MCO – June 2026

Renewal Outcome	Closed - Ineligible		Closed - Procedural		Completed - Retained		Pending		Total	
MCO	Count	Percent Column	Count	Percent Column	Count	Percent Column	Count	Percent Column	Count	Percent Column
Aetna Better Health	486	2%	1,457	6%	22,497	89%	722	3%	25,162	100%
Blue Cross/Blue Shield of Illinois	1,328	3%	2,961	6%	43,263	87%	2,155	4%	49,707	100%
Cook County Care	662	2%	1,781	6%	24,641	86%	1,608	6%	28,692	100%
FFS	2,155	5%	4,693	11%	33,363	80%	1,513	4%	41,724	100%
Humana Health Plan	11	1%	19	1%	1,931	98%	15	1%	1,976	100%
Meridian Health Plan	950	2%	2,249	5%	40,073	89%	1,786	4%	45,058	100%
Molina Healthcare	523	3%	1,203	6%	18,366	88%	725	3%	20,817	100%
Total	**6,115**	**3%**	**14,363**	**7%**	**184,134**	**86%**	**8,524**	**4%**	**213,136**	**100%**

Redetermination Outcome Breakdown by Race

The following chart shows redetermination outcomes breakdown by Race.

Redetermination Outcome Breakdown by Race – June 2026

Renewal Outcome	Closed - Ineligible		Closed - Procedural		Completed - Retained		Pending		Total	
RACE	Count	Percent Column	Count	Percent Column	Count	Percent Column	Count	Percent Column	Count	Percent Column
American Indian, Alaska Native, American Urban Indian, or California Indian	37	0.61%	90	0.63%	897	0.49%	56	0.66%	1,080	0.51%
Asian Indian	66	1.08%	156	1.09%	1,380	0.75%	94	1.10%	1,696	0.80%
Asian/Asian American	9	0.15%	13	0.09%	51	0.03%	3	0.04%	76	0.04%
Black or African American	1,174	19.20%	2,963	20.63%	47,274	25.67%	1,138	13.35%	52,549	24.66%
Chinese	11	0.18%	36	0.25%	513	0.28%	61	0.72%	621	0.29%
Filipino	13	0.21%	30	0.21%	313	0.17%	19	0.22%	375	0.18%
Guamanian or Chamorro	0	0.00%	2	0.01%	15	0.01%	1	0.01%	18	0.01%
Japanese	1	0.02%	5	0.03%	22	0.01%	0	0.00%	28	0.01%
Korean	10	0.16%	14	0.10%	224	0.12%	10	0.12%	258	0.12%
Middle Eastern North African	12	0.20%	21	0.15%	154	0.08%	12	0.14%	199	0.09%
Native Hawaiian	2	0.03%	5	0.03%	92	0.05%	4	0.05%	103	0.05%
Other	76	1.24%	190	1.32%	747	0.41%	153	1.79%	1,166	0.55%
Other Asian	116	1.90%	212	1.48%	3,648	1.98%	211	2.48%	4,187	1.96%
Other Pacific Islander	46	0.75%	99	0.69%	783	0.43%	81	0.95%	1,009	0.47%
Samoan	0	0.00%	2	0.01%	13	0.01%	1	0.01%	16	0.01%
Some Other Race Alone	4	0.07%	11	0.08%	48	0.03%	2	0.02%	65	0.03%
Unknown	1,782	29.14%	4,145	28.86%	49,465	26.86%	2,819	33.07%	58,211	27.31%
Vietnamese	10	0.16%	30	0.21%	148	0.08%	25	0.29%	213	0.10%
White	2,746	44.91%	6,339	44.13%	78,347	42.55%	3,834	44.98%	91,266	42.82%
Total	**6,115**	**100.00%**	**14,363**	**100.00%**	**184,134**	**100.00%**	**8,524**	**100.00%**	**213,136**	**100.00%**

Redetermination Outcome Breakdown by Ethnicity

The following chart shows redetermination outcomes breakdown by Ethnicity.

Redetermination Outcomes Breakdown by Ethnicity - June 2026

Renewal Outcome	Closed - Ineligible		Closed - Procedural		Completed - Retained		Pending		Total	
ETHNICITY	Count	Percent Column	Count	Percent Column	Count	Percent Column	Count	Percent Column	Count	Percent Column
Another Hispanic, Latino, or Spanish origin	821	13.43%	1,985	13.82%	16,980	9.22%	1,407	16.51%	21,193	9.94%
Cuban	12	0.20%	29	0.20%	164	0.09%	6	0.07%	211	0.10%
Mexican, Mexican American, Chicano/a	595	9.73%	1,471	10.24%	13,806	7.50%	1,006	11.80%	16,878	7.92%
Non-Hispanic/Latino	2,738	44.78%	6,212	43.25%	99,048	53.79%	3,148	36.93%	111,146	52.15%
Other Category Not Specified	21	0.34%	74	0.52%	312	0.17%	20	0.23%	427	0.20%
Prefer Not to Answer	98	1.60%	190	1.32%	759	0.41%	86	1.01%	1,133	0.53%
Puerto Rican	62	1.01%	164	1.14%	1,812	0.98%	102	1.20%	2,140	1.00%
Unknown	1,768	28.91%	4,238	29.51%	51,253	27.83%	2,749	32.25%	60,008	28.15%
Total	**6,115**	**100.00%**	**14,363**	**100.00%**	**184,134**	**100.00%**	**8,524**	**100.00%**	**213,136**	**100.00%**

Redetermination Outcome Breakdown by Language & Age

The following chart shows redetermination outcomes breakdown by Language and Age.

Language by Response – June 2026

Outcome	Did Not Respond		Responded		Total	
Primary Language	**Count**	**Percent Column**	**Count**	**Percent Column**	**Count**	**Percent Column**
English	10,236	83.25%	180,550	89.90%	190,786	89.51%
Spanish	1,794	14.59%	15,806	7.87%	17,600	8.26%
Other Primary Language	266	2.16%	4,484	2.23%	4,750	2.23%
Total	**12,296**	**100.00%**	**200,840**	**100.00%**	**213,136**	**100.00%**

Redetermination Outcomes by Age – June 2026

Age	Closed - Ineligible	Closed - Procedural	Completed - Retained	Pending	Total
00 - 18	1,855	6,573	82,826	4,866	96,120
19 - 64	3,500	6,567	79,004	2,926	91,997
65+	760	1,223	22,304	732	25,019
Total	**6,115**	**14,363**	**184,134**	**8,524**	**213,136**

Redetermination Outcome Breakdown by Other Coverage Type

The following charts show redetermination breakdown by Medicare and Third-Party Liability (TPL) coverage.

Medicare Coverage by Redetermination Outcome – June 2026

Coverage Type	Closed – Ineligible	Closed – Procedural	Completed – Retained	Pending	Total
PART A ONLY	5	35	391	19	450
PART B ONLY	3	3	876	1	883
PART A AND B	457	1,206	26,683	632	28,978
NO MEDICARE	5,650	13,119	156,184	7,872	182,825
Total	**6,115**	**14,363**	**184,134**	**8,524**	**213,136**

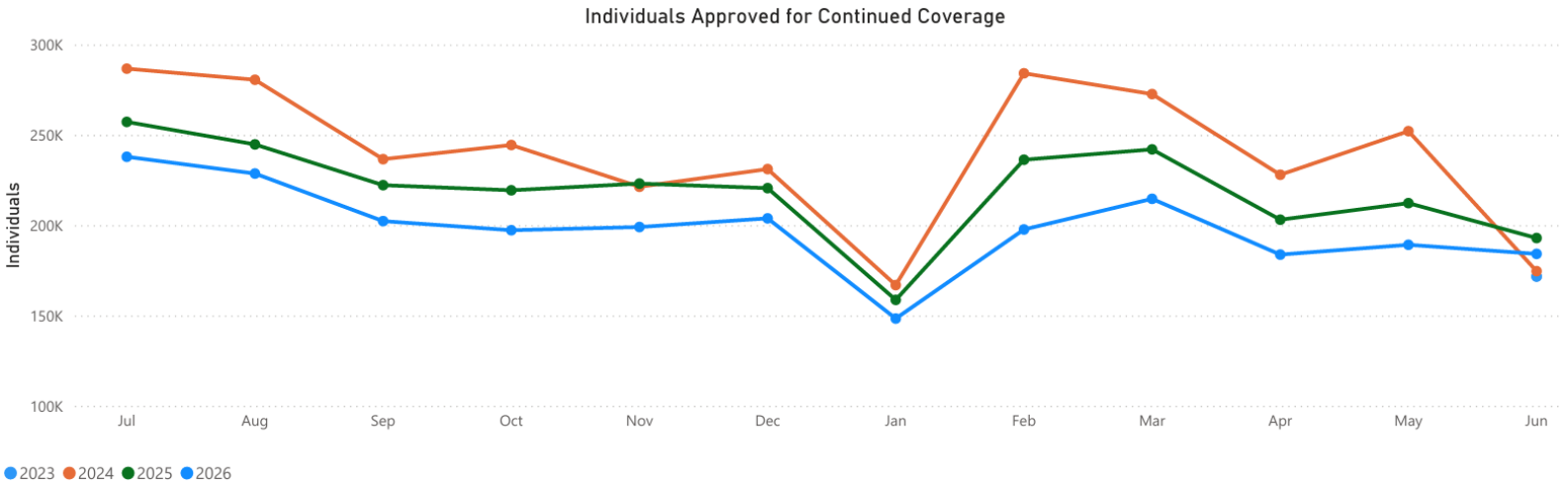
Comprehensive Coverage by Redetermination Outcome – June 2026

Coverage Type	Closed – Ineligible	Closed – Procedural	Completed – Retained	Pending	Total
Comprehensive Coverage	652	2,869	12,243	781	16,545
Non-Comprehensive Coverage	5,463	11,494	171,891	7,743	196,591
Total	**6,115**	**14,363**	**184,134**	**8,524**	**213,136**

Comprehensive health insurance (High-Level TPL) is a major medical plan that covers a wide range of medical services ranging from routine preventative care to major surgeries, ED visits, and hospitalizations. Comprehensive medical plans must meet the Minimum Essential Coverage (MEC) requirements established by the Affordable Care Act. Most employer sponsored plans, private health insurance plans, Marketplace plans, and Medicare coverage meet this definition. Plans that are not considered comprehensive are for limited coverage, such as catastrophic plans.

Individuals Approved for Continued Coverage

The following line graph and table show the monthly number of individuals approved for continued coverage from Fiscal Years 2023–2026. FY 2023 includes only June because renewals resumed that month following PHE Unwinding. The data highlight month to month changes and allow comparison across fiscal years.

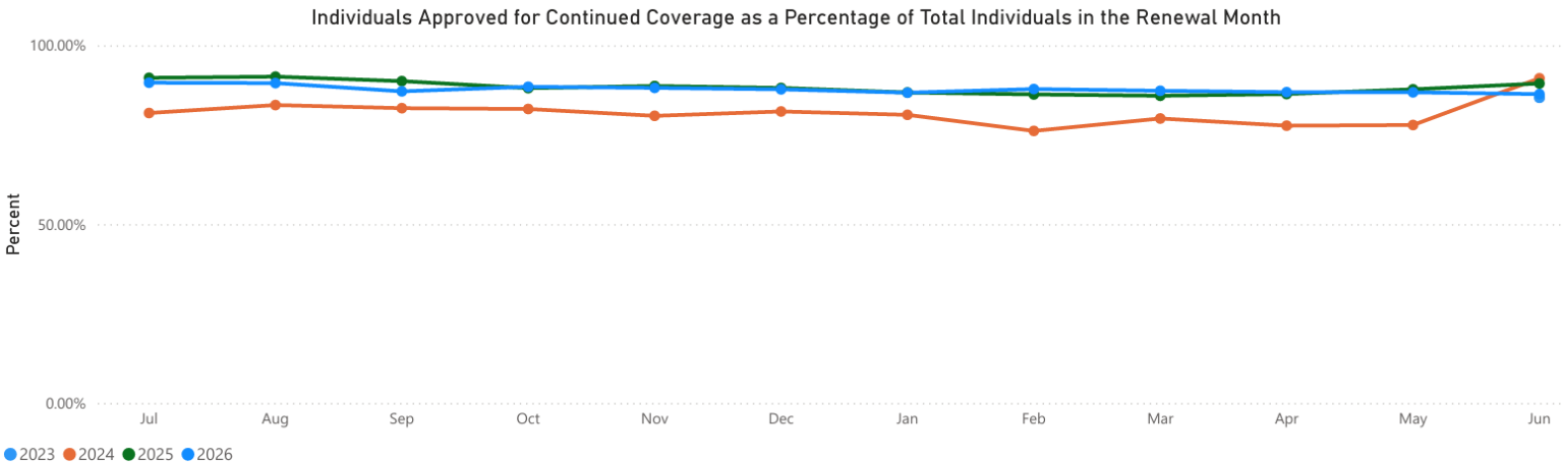


Individuals Approved for Continued Coverage

Year	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun
2023												171,620
2024	286,720	280,550	236,570	244,420	221,293	231,090	166,850	284,144	272,627	227,943	252,106	174,573
2025	257,233	244,752	222,182	219,340	223,047	220,539	158,660	236,260	241,990	203,049	212,246	192,908
2026	237,903	228,616	202,267	197,227	198,995	203,794	148,322	197,630	214,624	183,738	189,157	184,134

Individuals Approved for Continued Coverage as a Percentage of Total Individuals in the Renewal Month

The following line graph and table show the percentage of individuals approved for continued coverage each month from Fiscal Years 2023–2026. FY 2023 includes only June because renewals restarted that month after PHE Unwinding. The percentages allow year-to-year comparison of approval rates relative to all individuals up for renewal in each month.

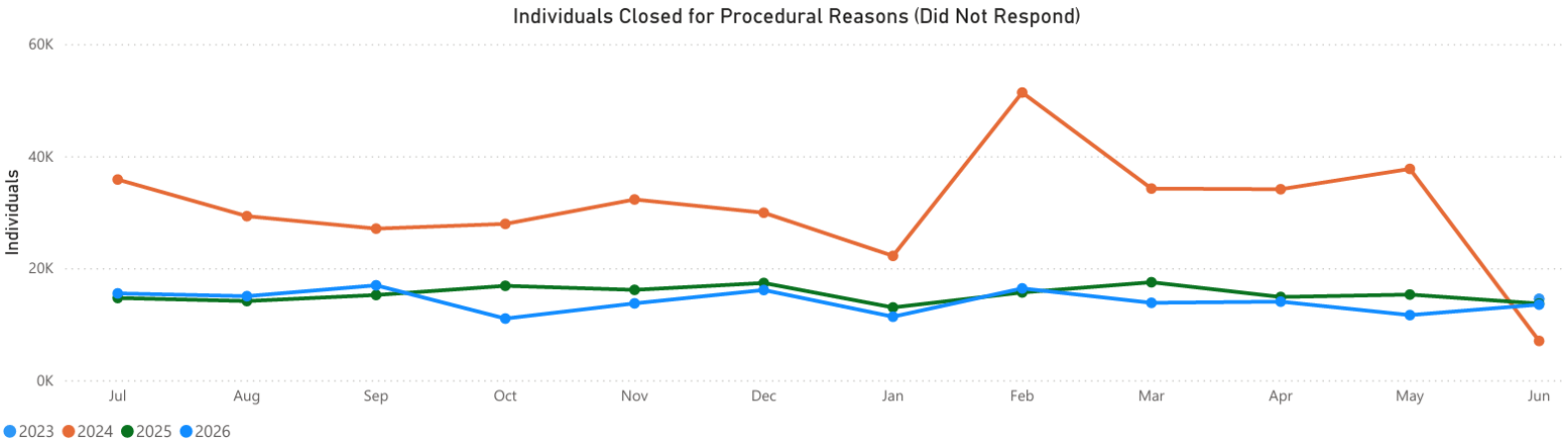


Individuals Approved for Continued Coverage as a Percentage of Total Individuals in the Renewal Month

Year	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun
2023												85.39%
2024	81.11%	83.33%	82.46%	82.23%	80.32%	81.54%	80.60%	76.11%	79.58%	77.57%	77.76%	90.81%
2025	90.95%	91.28%	90.02%	88.06%	88.66%	88.12%	86.84%	86.30%	85.93%	86.41%	87.73%	89.36%
2026	89.58%	89.47%	87.16%	88.44%	88.13%	87.72%	86.79%	87.80%	87.32%	86.93%	86.89%	86.39%

Individuals Closed for Procedural Reasons (Did Not Respond)

The following line graph and table show the number of individuals whose coverage was closed for procedural reasons (did not respond) from Fiscal Years 2023–2026. FY 2023 includes only June due to the restart of renewals after PHE Unwinding. The data illustrate monthly trends and allow comparison of procedural closure levels across fiscal years.

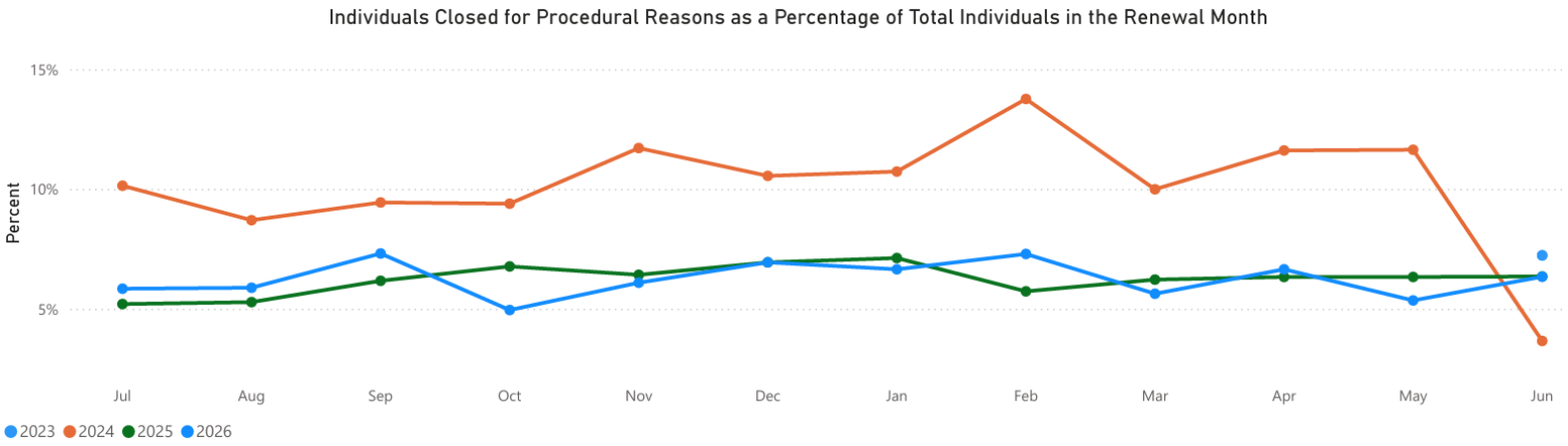


Individuals Closed for Procedural Reasons (Did Not Respond)

Year	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun
2023												14,525
2024	35,840	29,304	27,076	27,923	32,276	29,912	22,215	51,370	34,225	34,105	37,740	7,037
2025	14,698	14,151	15,231	16,868	16,146	17,374	13,013	15,690	17,508	14,880	15,309	13,701
2026	15,516	15,023	16,958	11,028	13,741	16,121	11,358	16,407	13,841	14,050	11,645	13,523

Individuals Closed for Procedural Reasons as a Percentage of Total Individuals in the Renewal Month

The line graph and table show the percentage of individuals whose coverage was closed for procedural reasons each month from Fiscal Years 2023–2026. FY 2023 includes only June because renewals resumed that month after PHE Unwinding. The percentages allow quick comparison of procedural closure rates across fiscal years and highlight month-to-month changes.

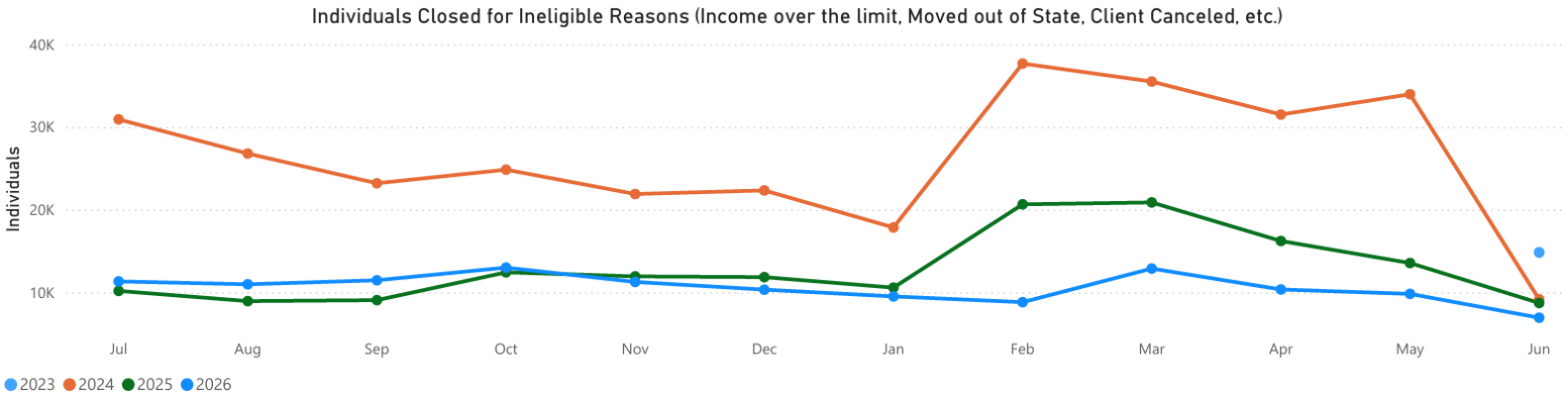


Individuals Closed for Procedural Reasons as a Percentage of Total Individuals in the Renewal Month

Year	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun
2023												7.23%
2024	10.14%	8.70%	9.44%	9.39%	11.71%	10.55%	10.73%	13.76%	9.99%	11.61%	11.64%	3.66%
2025	5.20%	5.28%	6.17%	6.77%	6.42%	6.94%	7.12%	5.73%	6.22%	6.33%	6.33%	6.35%
2026	5.84%	5.88%	7.31%	4.95%	6.09%	6.94%	6.65%	7.29%	5.63%	6.65%	5.35%	6.34%

Individuals Closed for Ineligible Reasons (Income over the limit, Moved out of State, Client Canceled, etc.)

The following line graph and table show the number of individuals whose coverage was closed for ineligible reasons (such as income over the limit, moving out of state, or client requested cancellation) from Fiscal Years 2023–2026. FY 2023 includes only June due to the restart of renewals after PHE Unwinding. The data highlight monthly changes in ineligible closures and support comparison across fiscal years.

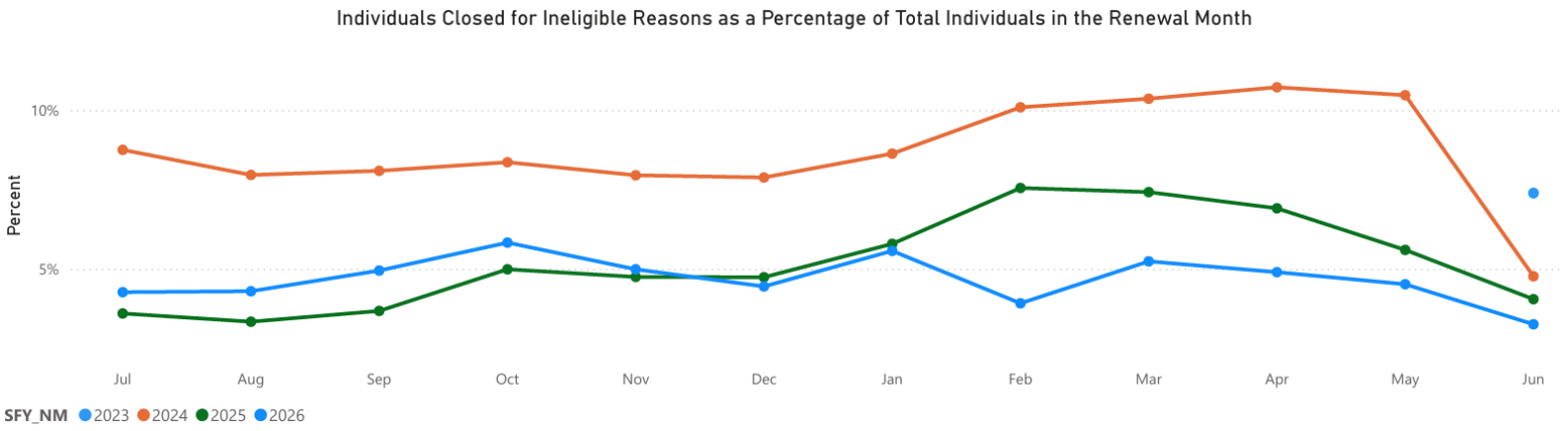


Individuals Closed for Ineligible Reasons (Income over the limit, Moved out of State, Client Canceled, etc.)

Year	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun
2023												14,845
2024	30,926	26,792	23,202	24,843	21,901	22,338	17,863	37,668	35,495	31,511	33,960	9,169
2025	10,192	8,957	9,075	12,434	11,943	11,856	10,586	20,657	20,887	16,227	13,559	8,733
2026	11,338	10,989	11,476	13,006	11,276	10,345	9,525	8,829	12,890	10,365	9,832	6,955

Individuals Closed for Ineligible Reasons as a Percentage of Total Individuals in the Renewal Month

The following line graph and table show the percentage of individuals whose coverage was closed for ineligible reasons from Fiscal Years 2023–2026. FY 2023 includes only June due to the restart of renewals after PHE Unwinding. These percentages allow comparison of ineligible closure rates across fiscal years and illustrate how they vary from month to month.



Individuals Closed for Ineligible Reasons as a Percentage of Total Individuals in the Renewal Month

Year	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun
2023												7.39%
2024	8.75%	7.96%	8.09%	8.36%	7.95%	7.88%	8.63%	10.09%	10.36%	10.72%	10.47%	4.77%
2025	3.60%	3.34%	3.68%	4.99%	4.75%	4.74%	5.79%	7.55%	7.42%	6.91%	5.60%	4.05%
2026	4.27%	4.30%	4.95%	5.83%	4.99%	4.45%	5.57%	3.92%	5.24%	4.90%	4.52%	3.26%

Redetermination Outcome Breakdown by Fiscal Year and MCO

The following chart shows the redetermination outcome breakdown by Fiscal Year and MCO.

YEAR	2023		2024		2025		2026	
MC0	INDV	Percentage	INDV	Percentage	INDV	Percentage	INDV	Percentage
Aetna Better Health	**24,837**	**12.36%**	**407,345**	**11.42%**	**336,233**	**11.28%**	**310,223**	**11.41%**
Closed - Ineligible	1,627	6.55%	30,688	7.53%	12,933	3.85%	10,988	3.54%
Closed - Procedural	1,454	5.85%	32,847	8.06%	15,753	4.69%	15,600	5.03%
Completed - Retained	21,756	87.60%	343,534	84.33%	306,958	91.29%	280,672	90.47%
Pending			276	0.07%	589	0.18%	2,963	0.96%
Blue Cross/Blue Shield of Illinois	**42,564**	**21.18%**	**758,163**	**21.26%**	**672,927**	**22.58%**	**635,740**	**23.39%**
Closed - Ineligible	3,027	7.11%	68,308	9.01%	30,985	4.60%	26,975	4.24%
Closed - Procedural	2,174	5.11%	53,696	7.08%	30,038	4.46%	31,769	5.00%
Completed - Retained	37,363	87.78%	635,656	83.84%	610,218	90.68%	567,682	89.29%
Pending			503	0.07%	1,686	0.25%	9,314	1.47%
Cook County Care	**25,047**	**12.46%**	**440,007**	**12.34%**	**371,981**	**12.48%**	**349,402**	**12.85%**
Closed - Ineligible	1,970	7.87%	41,000	9.32%	16,926	4.55%	14,298	4.09%
Closed - Procedural	1,092	4.36%	34,583	7.86%	18,642	5.01%	19,371	5.54%
Completed - Retained	21,984	87.77%	363,928	82.71%	334,997	90.06%	309,133	88.47%
Pending	1	0.00%	496	0.11%	1,416	0.38%	6,600	1.89%
FFS	**36,056**	**17.94%**	**770,554**	**21.61%**	**628,270**	**21.09%**	**561,783**	**20.67%**
Closed - Ineligible	3,476	9.64%	80,694	10.47%	55,628	8.85%	42,924	7.64%
Closed - Procedural	6,348	17.61%	165,024	21.42%	81,121	12.91%	63,968	11.39%
Completed - Retained	26,231	72.75%	523,870	67.99%	489,569	77.92%	447,960	79.74%
Pending	1	0.00%	966	0.13%	1,952	0.31%	6,931	1.23%
Humana Health Plan	**564**	**0.28%**	**17,712**	**0.50%**	**13,977**	**0.47%**	**18,334**	**0.67%**
Closed - Ineligible	2	0.35%	314	1.77%	211	1.51%	173	0.94%
Closed - Procedural	23	4.08%	938	5.30%	276	1.97%	215	1.17%
Completed - Retained	539	95.57%	16,449	92.87%	13,473	96.39%	17,867	97.45%
Pending			11	0.06%	17	0.12%	79	0.43%
Meridian Health Plan	**51,395**	**25.57%**	**832,321**	**23.34%**	**671,036**	**22.52%**	**584,452**	**21.50%**
Closed - Ineligible	3,472	6.76%	69,017	8.29%	27,482	4.10%	21,757	3.72%
Closed - Procedural	2,325	4.52%	54,732	6.58%	25,035	3.73%	24,951	4.27%
Completed - Retained	45,597	88.72%	708,079	85.07%	617,008	91.95%	530,668	90.80%
Pending	1	0.00%	493	0.06%	1,511	0.23%	7,076	1.21%
Molina Healthcare	**20,530**	**10.21%**	**340,430**	**9.55%**	**285,178**	**9.57%**	**258,335**	**9.50%**
Closed - Ineligible	1,271	6.19%	25,647	7.53%	10,941	3.84%	9,711	3.76%
Closed - Procedural	1,109	5.40%	27,203	7.99%	13,704	4.81%	13,337	5.16%
Completed - Retained	18,150	88.41%	287,370	84.41%	259,983	91.17%	232,425	89.97%
Pending			210	0.06%	550	0.19%	2,862	1.11%
Total	**200,993**	**100.00%**	**3,566,532**	**100.00%**	**2,979,602**	**100.00%**	**2,718,269**	**100.00%**