**Medicaid & CHIP (Children's Health Insurance Program) in Illinois**

Medicaid ([medicaid-chip-program-information/program-information/medicaid-and-chip-program-information.html](https://www.medicaid.gov/medicaid-chip-program-information/program-information/medicaid-and-chip-program-information.html)) is a health and long-term care coverage program that was enacted in 1965. The Children's Health Insurance Program ([chip/chip-program-information.html](https://www.medicaid.gov/medicaid-chip-program-information/chip-program-information.html)) (CHIP) was established in 1997 to provide new coverage opportunities for children in families with incomes too high to qualify for Medicaid, but who cannot afford private coverage. Both Medicaid and CHIP are administered by states within broad federal guidelines and jointly funded by the federal government and states.

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This page outlines key characteristics of Medicaid and CHIP in Illinois and provides documents and information relevant to how the programs have been implemented by Illinois within federal guidelines.

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As of June 2016, Illinois has enrolled 3,088,448 individuals in Medicaid and CHIP — a net increase of 17.57% since the first Marketplace Open Enrollment Period and related Medicaid program changes in October 2013. Illinois has adopted one or more of the targeted enrollment strategies outlined in guidance CMS issued on May 17, 2013, designed to facilitate enrollment in Medicaid and CHIP.

The Federally-facilitated marketplace (FFM) offers coverage in Illinois through a partnership model in which Illinois assumes primary responsibility for certain functions of the FFM, either permanently or as they work towards running a State-based Marketplace.

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In federal fiscal year (FFY) 2014, Illinois voluntarily reported 18 of 18 frequently reported health care quality measures in the CMS Medicaid/CHIP Child Core Set. Illinois voluntarily reported 9 of 10 frequently reported health care quality measures in the CMS Medicaid Adult Core Set.

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More detailed information and source references are available on each of these topics.

View Another State

Choose a State  Go

Program Documents for Illinois

- CHIP State Plan Amendments (/chip/state-program-information/chip-state-program-information.html?filterBy=Illinois)
- Demonstrations & Waivers (/medicaid-chip-program-information/by-topics/waivers/waivers_faceted.html?filterBy=Illinois)
- Managed Care Profile (/medicaid-chip-program-information/by-topics/delivery-systems/managed-care/downloads/illinois-mcp.pdf)

Eligibility in Illinois

Information about how Illinois determines whether a person is eligible for Medicaid and CHIP.

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Eligibility in Illinois

Most Medicaid eligibility and all CHIP eligibility is based on modified adjusted gross income (MAGI) (/medicaid-chip-program-information/program-information/downloads/modified-adjusted-gross-income-and-medicaid-chip.pdf). Income eligibility levels are tied to the federal poverty level (FPL).

The following table provides a more detailed view of Illinois's MAGI-based eligibility levels, expressed as a percentage of the FPL, for several key groups: children, pregnant women, parents/caretaker relatives, and, other adults

<table>
<thead>
<tr>
<th>State</th>
<th>Children Ages 0-1</th>
<th>Children Ages 1-5</th>
<th>Separate CHIP</th>
<th>Medicaid CHIP</th>
<th>Parent/Caretaker Expansion to Adults</th>
</tr>
</thead>
<tbody>
<tr>
<td>Illinois</td>
<td>142%</td>
<td>142%</td>
<td>142%</td>
<td>313%</td>
<td>208% N/A 133%</td>
</tr>
</tbody>
</table>

1. This table reflects the principal but not all MAGI coverage groups. All income standards are expressed as a percentage of the federal poverty level (FPL). For the eligibility groups reflected in the table, an individual’s income, computed using the Modified Adjusted Gross Income (MAGI)-based income rules described in 42 CFR 435.603, is compared to the income standards identified in this table to determine if they are income eligible for Medicaid or CHIP. The MAGI-based rules generally include adjusting an individual’s income by an amount equivalent to 5% FPL disregard. Other eligibility criteria also apply, for example, with respect to citizenship, immigration status and residency.

2. These eligibility standards include CHIP-funded Medicaid expansions.

3. CHIP covers birth through age 18 unless otherwise noted in parentheses.

4. States have the option to cover pregnant women under CHIP. This table does not include notations of states that have elected to provide CHIP coverage of unborn children from conception to birth.

5. Reflects Medicaid state plan coverage of the eligibility group for parents and other caretaker relatives. Parents and caretaker relatives with income over the income standard for coverage under this group may be eligible for coverage in the adult group in states that have expanded to cover the adult group. In states that use dollar amounts based on household size, rather than percentages of the FPL, to determine eligibility for parents, we converted those amounts to a percentage of the FPL and selected the highest percentage to reflect the eligibility level for the group.

Source: Medicaid Eligibility (/medicaid-chip-program-information/program-information/medicaid-and-chip-eligibility-levels/medicaid-chip-eligibility-levels.html). Learn more (//medicaid.gov/medicaid-chip-program-information/by-topics/eligibility/eligibility.html) about how states determine Medicaid eligibility for other populations.

View available state's eligibility verifications plans (/affordablecareact/provisions/eligibility-verification-plans.html), MAGI Conversion Plans and Results (/affordablecareact/provisions/magi-conversion-plans-and-results.html).

Medicaid and CHIP agencies now rely primarily on information available through data sources (for example, the Social Security Administration, the Departments of Homeland Security and Labor) rather than paper documentation from families for purposes of verifying eligibility for Medicaid and CHIP.

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Enrollment in Illinois
Information about efforts to enroll eligible individuals in Medicaid and CHIP in Illinois.

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**Enrollment in Illinois**

**Medicaid & CHIP Enrollment Data**

The table below presents the most recent, point-in-time count of total Medicaid and CHIP enrollment in Illinois for the last day of the indicated month, and is not solely a count of those newly enrolled during the reporting period. For purpose of comparison, the table also presents (a) the change in enrollment since the initial open of the Health Insurance Marketplaces, and (b) national counts and change statistics for the same period.

<table>
<thead>
<tr>
<th>Region</th>
<th>Total Medicaid &amp; CHIP Enrollment (Preliminary)</th>
<th>Change in Enrollment (compared to July-September 2013)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Illinois</td>
<td>3,088,448</td>
<td>461,505</td>
</tr>
<tr>
<td>National Totals</td>
<td>72,675,726</td>
<td>15,239,169</td>
</tr>
</tbody>
</table>


**Enrollment Strategies**

Illinois has adopted strategies to facilitate Medicaid and CHIP enrollment and to retain coverage for eligible individuals. Learn more (https://www.medicaid.gov/medicaid-chip-program-information/by-topics/outreach-and-enrollment/enrollment-strategies.html) about targeted enrollment strategies.

**Illinois Medicaid & CHIP Targeted Enrollment Strategies**

<table>
<thead>
<tr>
<th>Strategy 1: Early MAGI</th>
<th>Strategy 2: Delayed Renewals &amp; Date of Completion</th>
<th>Strategy 3: Facilitating Enrollment through Administrative Data Transfer</th>
<th>Strategy 4: Enrolling Parents Based on Children's Eligibility</th>
<th>Strategy 5: Adopting 12-month Continuous Eligibility for Parents/Other Adults</th>
</tr>
</thead>
<tbody>
<tr>
<td>Illinois Approved</td>
<td>Approved - June 2014</td>
<td>Approved - SNAP to Medicaid transfer</td>
<td>Approved - SNAP to Medicaid transfer</td>
<td>Approved - SNAP to Medicaid transfer</td>
</tr>
</tbody>
</table>
Quality of Care in Illinois

Information about performance on frequently-reported health care quality measures in the CMS Medicaid/CHIP Child and Adult Core Sets in Illinois.

Child Quality Measure Data

In federal fiscal year (FFY) 2014, Illinois reported 18 of 18 frequently reported health care quality measures in the CMS Medicaid/CHIP Child Core Set.

Adult Quality Measure Data

In federal fiscal year (FFY) 2014, Illinois reported 9 of 10 frequently reported health care quality measures in the CMS Medicaid Adult Core Set.