Illinois

Sources of Insurance Coverage

*Source: KFF, Health Insurance Coverage of the Total Population, 2022

Medicare

In Illinois, **1.77 million** residents are enrolled in Medicare, 14.4% of the state’s population (2022 data). Of those, **39%** are enrolled in a Medicare Advantage plan. For Illinoisans in the traditional Medicare program, the Illinois Department of Insurance regulates Medicare supplemental plans and the Senior Health Insurance Program (SHIP) within the Illinois Department of Aging provides free counseling services to Medicare beneficiaries. Information about insurers authorized to sell Medicare supplemental policies and plan premiums is available [here](#).

Medicaid and the Children’s Health Insurance Program (CHIP)

In Illinois, **2.47 million people** are enrolled in Medicaid or CHIP, 20.1% of the population (2022 data). Illinois has chosen to adopt the Affordable Care Act’s expansion of Medicaid, and this has extended coverage to **1 million** low-income adults.

In Illinois, Medicaid benefits are provided both directly by the state (Medicaid Fee-For-Service or FFS) and via private managed care organizations (referred to as HealthChoice Illinois Plans). These insurers have contracts with the Illinois Department of Healthcare and Family Services. About **80%** of Medicaid beneficiaries are enrolled in the managed care program.
The state’s program covers childless adults under 65 up to 138% of the federal poverty level (FPL), pregnant women up to 213% of FPL, and parents and caretakers of dependent minor children with family incomes up to 138% of FPL.

In Illinois, low-income children are covered only through Medicaid. Through Medicaid, Illinois covers children in households with income up to 318% of FPL. Approximately 38% of all births in Illinois are covered by Medicaid.

Health Benefit Programs for Immigrants
Illinois operates two state-funded programs for low-income immigrants who are ineligible for federal Medicare and Medicaid programs—Health Benefits for Immigrant Adults (for ages 42 through 64) and Health Benefits for Immigrant Seniors (for ages 65 and above). As of July 1, 2023, enrollment in the Health Benefits for Immigrant Adults has been temporarily paused.

Employer-sponsored insurance
In Illinois, 6.53 million people are covered by employer-sponsored insurance (ESI), or 53.1% of the total state population (2022 data). Approximately 52.1% of Illinois employers offer ESI. However, offer rates vary significantly by size of firm. In Illinois, 99.6% of large firms (50 or more employees) offer ESI, while only 36.2% of small employers offer ESI.

In Illinois, approximately 37% of private sector businesses that offer health insurance self-fund at least one health plan. For large firms (50 or more employees) that offer health insurance, 64.9% self-fund at least one health plan.

Individual Market Insurance
Approximately 5.2% of Illinoisans are enrolled in the individual market (2022 data). Of those, in 2023, 342,995 Illinoisans selected a plan through the Affordable Care Act (ACA) Marketplace, which in Illinois is run by the federal government. However, the state will transition to a state-run marketplace in 2025, and will be operational for plan year 2026. It is more challenging to ascertain enrollment numbers for off-Marketplace individual market enrollment.

Individual market health insurance (both on- and off-Marketplace) is regulated under state law. Illinois enforces the Affordable Care Act’s consumer protections through the Illinois Department of Insurance.

Other Coverage
Some Illinoisans are enrolled in other forms of insurance coverage, such as coverage for the military (TRICARE or U.S. Veterans Administration), which covers 0.6%, or 70,600 Illinoisans.

The Uninsured
Approximately 6.6%, or 815,100 Illinoisans are uninsured (2022 data). Illinois’s uninsured rate falls below the national average of 8.0% uninsured. Among the non-elderly, people of color are significantly more likely to be uninsured in Illinois than White people. Hispanic people have the highest uninsured rate (16.1%), followed by Asian (8.1%) and Black (7.8%) Americans. White
residents have the lowest uninsured rate (4.9%) among all racial groups. Lack of insurance is also highly correlated with income. Approximately 11.6% of non-elderly people under 100% FPL are the uninsured in Illinois, while just 3.7% of non-elderly people over 400% FPL are uninsured.

State Regulators: Illinois
CMS is responsible for the oversight of Medicare Advantage plans. The CMS Regional Office for Illinois is based in Chicago. Contact information is available here.

Illinois Department of Insurance (DOI)
The Illinois Department of Insurance (DOI) regulates the business of insurance in the state of Illinois. For health insurance companies, Illinois is responsible for:

- **Licensure**: All insurers operating in the state must demonstrate that they are financially solvent and capable of paying claims. After initial licensure, companies must file financial information with DOI on a regular basis. The state provides a lookup tool for state-licensed insurers.
- **Form review**: DOI reviews health insurers’ contracts and covered benefits to ensure that they comport with state law, including state benefit mandates and network adequacy standards. DOI also enforces consumer protections under the ACA, mental health parity, HIPAA, and other federal laws.
- **Rate review**: DOI collects data from health insurers about their projected premium increases or decreases. Starting in plan year 2026, DOI will have the authority to review and require changes to or disapprove an insurer’s proposed premium rates. Current rate filings are available on the federal rate review website here, historical rate filings are available here, and beginning in plan year 2025, rate filings will be posted on the DOI website.
- **Marketing**: DOI is responsible for oversight of insurers’ marketing tactics and discouraging unfair or deceptive tactics. The agency also licenses and provides oversight over insurance agents and brokers.
- **Enforcement**: DOI has authority to enforce state and federal insurance laws. Their enforcement tools can range from requesting a corrective action, issuing a cease and desist order, imposing fines, or seeking an injunction. Consumers and providers can file a complaint with the DOI here. The DOI also produces annual reports on Illinois health plan compliance with state and federal Mental Health and Substance Use Disorder coverage and parity laws, market conduct examination results, and reports by the Office of Consumer Health Insurance on consumer inquiries and complaints.
- **Appeals**: Under the Affordable Care Act, insurers must provide enrollees with the right to an external, independent appeal. DOI manages the external review process for insured individuals. Consumers can request assistance with the appeals process here.
Illinois Department of Healthcare and Family Services (HFS) runs the state’s Medicaid program. Through its HealthChoice Illinois initiative, the Department contracts with a number of managed care organizations to provide care to approximately 80% of the state’s Medicaid recipients. A state map of Medicaid MCOs, by service area, is available here. HFS produces annual enrollment reports and a variety of Medicaid provider cost reports.

HFS is home to the Medicaid Managed Care Oversight Commission, which is responsible for evaluating the effectiveness of Illinois’ managed care plans, producing annual reports and making recommendations to improve care under the state’s Medicaid managed care plans. However, a 2019 report by the Illinois Comptroller found that “transferring the management of the state’s Medicaid system to a private management system has meant less government insight into the system overall.” An audit by the Illinois Auditor General in 2018 found that there was inadequate oversight of MCOs by HFS.

Office of the Illinois Attorney General
Illinois’ Attorney General represents the state in court when there is an action against an insurance company, entity, or individuals engaged in potentially fraudulent activity. The Attorney General’s Health Care Bureau assists consumers with issues accessing insurance benefits and paying for health care, such as billing disputes, denial of coverage, partial payment by insurers, unfair insurance practices, and difficulty navigating appeals processes. The Bureau operates a toll-free hotline (1-877-305-5145) as well as an online complaint portal. They also produce a variety of consumer education materials. Additionally, the Bureau files lawsuits on behalf of consumers against unfair business practices and drafts legislation to protect consumers.

Other Sources of Information
Health Insurance Navigators, Agents and Brokers (collectively, “consumer assisters”) Although Illinois’ health insurance Marketplace is run by the federal government, CMS provides grants to local organizations called “Navigators” that are tasked with assisting consumers to determine eligibility for subsidized coverage programs and helping them with post-enrollment questions. Illinois-based health insurance agents and brokers perform similar consumer assistance functions, and are generally paid on a commission basis. These consumer assisters can be helpful sources of information about health insurance and the challenges consumers face. They can be located through the “Find Local Help” search portal on HealthCare.gov and the “Get Free Help” link on Get Covered Illinois.