



Communities Learning Together

Advancing HIV Care and Support through Effective Fiscal Management

Illinois Public Health Insurance Resources

See <http://www.hfs.illinois.gov/programs/>

The Illinois Department of Healthcare and Family Services (HFS) is committed to improving the health of Illinois' families by providing access to quality health care. This mission is accomplished through HFS Medical Programs that pay for a wide range of health services provided by thousands of medical providers throughout Illinois to about two million Illinoisans each year. The primary medical programs are:

1. **Medical Assistance** as authorized under the Illinois Public Aid Code (305 ILCS 5/5 *et seq.*) and Title XIX of the Social Security Act, Medicaid; and
2. **Children's Health Insurance** as authorized under the Illinois Insurance Code (215 ILCS 106/1 *et seq.*) and Title XXI of the Social Security Act, the State Children's Health Insurance Program (SCHIP).

Necessary medical benefits as well as preventive care for children are covered for eligible persons when provided by an enrolled health care provider. Eligibility requirements vary by program. Most people who enroll are covered for comprehensive services. Some programs, however, cover a limited set of services.

Comprehensive Medical Benefits

HFS provides comprehensive medical benefits to residents of Illinois who are children, parents or caretaker relatives raising children younger than 19, pregnant women, seniors 65 years of age or older and persons who have a disability or blindness.

Eligible persons are covered for a comprehensive array of health services including doctor visits and dental care, well-child care, immunizations for children, specialty medical services, mental health and substance abuse services, hospital care, nursing facility care, emergency services, prescription drugs, family planning and medical equipment and supplies.

To be eligible, most persons must also be U.S. citizens or qualified immigrants. This requirement does not apply to pregnant women.

Family Health Plans cover children and parents or caretaker relatives of children.

- [All Kids](#) offers health care coverage to all children living in Illinois. Illinois is the first state in the nation to ensure that every child, regardless of medical conditions or income, has access to healthcare. Some families have to pay premiums and co-payments for All Kids health insurance. What you pay will depend on your [income](#).
- [FamilyCare](#) covers health care services for parents or caretaker relatives of children with income up to 185% of poverty. Parents who are Illinois residents can get FamilyCare if they are U.S. citizens or meet immigration requirements and have income within the [FamilyCare income standard](#) for their family size. There are small co-pays, from \$2 to \$5, for doctor visits and prescriptions. Parents in FamilyCare Premium pay a monthly premium, from \$15 to \$40, depending on the number of family members covered.

- [Moms and Babies](#) provides health care coverage to pregnant women and their infant up to 200% of poverty. Pregnant women who are residents of Illinois can get Moms and Babies if their income is within the Moms and Babies income standard for their family size. There is no cost to the women and infants in Moms and Babies.

Foster Care and Adoption Assistance covers foster and subsidized adopted children for whom the Illinois Department of Children and Family Services has legal responsibility and foster or adopted children living in Illinois who are technically the responsibility of other states.

Aid to the Aged, Blind, or Disabled (AABD) Medical covers persons who are seniors or who have a disability or are blind. An eligible single person may have income up to 100% of poverty (\$867 per month) and no more than \$2,000 of assets other than a home. A couple may have income up to \$1,167 per month and up to \$3,000 of assets in addition to their home.

[Health Benefits for Workers with Disabilities](#) covers persons with disabilities who work and have earnings up to 200% of poverty (\$1,733 per month for a single person) who pay a monthly premium. Eligible persons may have up to \$10,000 in assets other than a home. For more information visit the [HBWD Web site](#).

[Health Benefits for Persons with Breast or Cervical Cancer \(DPH\)](#) covers persons who are screened through the Illinois Breast and Cervical Cancer Program operated by the Illinois Department of Public Health (DPH) and found to need treatment. Referrals for enrollment must come from the public health program. For more information visit [DPH Illinois Breast and Cervical Cancer Program pages](#).

Refugee Program covers persons who are not citizens and who are not otherwise qualified aliens but who are admitted to the U.S. as refugees, asylees or conditional entrants; resident non-citizens who were formerly refugees; certain Amerasian immigrants from Vietnam; certain Cubans and Haitians; or victims of human trafficking.

The [Illinois Cares Rx](#) program combines SeniorCare and pharmaceutical portion of the CircuitBreaker program to provide comprehensive prescription coverage to seniors, age 65 or older, that Medicare Part D does not cover. Illinois Cares Rx consists of two plans: Basic and Plus. To qualify for the program you must fill out Form IL-1363 each year. For more information visit the [Illinois Cares Rx Web site](#).

Healthy Start – Medicaid Presumptive Eligibility provides outpatient care to pregnant women who have been determined presumptively eligible by a qualified medical provider. These temporary benefits continue until either the date of disposition of the woman's application for regular benefits or the last day of the month following the month the determination was made if no application is received by HFS. To be eligible, a woman must live in Illinois and have income under 200% of poverty (\$2,333 per month for a two-person family).

[Illinois Healthy Women](#) provides reproductive health care coverage to women between the ages of 19 through 44 years who are U.S. citizens or qualified immigrants who are losing other HFS medical benefits. Illinois Healthy Women provides an opportunity for these women to plan if and when to get pregnant to help them have a healthy birth. For more information visit the [Illinois Healthy Women Web site](#).

The program covers annual physicals, pap smears, mammograms, contraceptives, testing and treatment for sexually transmitted diseases, multi-vitamins with folic acid or folic acid and HIV testing.

Medicare Cost Sharing covers the cost of Medicare Part B premiums, coinsurance and deductibles for persons who have Medicare Part A Hospital Insurance and income up to 100% of poverty (e.g., \$867 per month for a single person or \$1,167 for a couple). For persons who have Medicare Part A Hospital Insurance and income up to 135% of poverty (\$1,170 per month for a single person or

\$1,575 for a couple) the program only covers the cost of Medicare Part B premiums. To be eligible, a single person may have no more than \$4,000 in assets other than a home, and a couple may have no more than \$6,000 in assets other than a home.

State Sexual Assault Survivors Emergency Treatment Program pays certified Illinois transfer centers and treatment hospitals for outpatient emergency room services on behalf of survivors of alleged sexual assault. The program also provides reimbursement for two follow-up visits rendered at the emergency room within six weeks of the initial visit. Hospitals are responsible for collecting all associated bills from other providers such as physicians, ambulance companies, etc., and submit these bills in a billing packet to HFS for payment.

[State Chronic Renal Disease Program](#) assists persons with chronic renal disease who do not qualify for other HFS medical benefits. Services covered include treatment in dialysis centers and hospitals, transplant surgery, treatment in a limited care facility, home dialysis training and home dialysis. Some individuals may be responsible for paying a monthly participation fee to the dialysis facility. Participation fees are determined by the individual's family income and family size. For more information visit the [State Chronic Renal Disease Program](#).

State Hemophilia Program provides financial assistance to persons with hemophilia who do not qualify for other HFS medical benefits. The program pays for the cost of the antihemophilic factors, annual comprehensive medical visits and other medical expenses related to the disease. Participants must complete a financial application to qualify for the program.

Transitional Assistance (City of Chicago) provides limited outpatient services to very low-income persons (income less than 30% of poverty) living in Chicago who are not otherwise eligible.

Emergency Services Program covers the cost of emergency services for noncitizens who meet all other qualifications for Family Health Plans or AABD medical except they do not have qualifying immigration status.

Helplines

For more information about medical benefits, call the Health Benefits Hotline:	
In Illinois	1-866-4-OUR-KIDS (1-866-468-7543) (toll-free)
Outside Illinois	1-217-785-8036
Persons Using TTY	1-877-204-1012 (toll-free)
For information about where to apply for medical benefits, you may also call: 1-800-843-6154 or, for persons using a TTY, 1-800-447-6404 or go to a local office operated by the Department of Human Services .	

Illinois Temporary Assistance to Needy Families (TANF)

For information: <http://www.dhs.state.il.us/page.aspx?item=30358>

Illinois Food Stamps

For information: <http://www.dhs.state.il.us/page.aspx?item=30357>

Illinois Low Income Home Energy Assistance Program (LIHEAP)

For information: <http://www.liheapillinois.com/>

Federally-Funded Disability Programs

For basic information: <http://www.ssa.gov/disability/>

Supplemental Security Income (SSI) Program

For Federal SSI program information: <http://www.ssa.gov/applyfordisability/>

The Illinois Department of Human Services (DHS) Disability Determination Services is responsible for determining the eligibility of Illinois citizens to receive benefits under Social Security's disability programs. These programs are Social Security Disability Insurance (SSDI) and Supplemental Security Income (SSI). For information: <http://www.dhs.state.il.us/page.aspx?item=29979>

Supplemental Security Disability Income (SSDI)

For information: <http://www.cms.hhs.gov/apps/firststep/content/ssditips.html>

HIV Disability Listing for SSI and SSDI

- Adults: <http://www.ssa.gov/disability/professionals/bluebook/14.00-Immune-Adult.htm>
- Children: <http://www.ssa.gov/disability/professionals/bluebook/114.00-Immune-Childhood.htm>

US Veterans Administration

The HIV/AIDS Bureau's policy regarding RWHAP-funded services to HIV+ veterans who also are eligible for VA benefits is at: <http://hab.hrsa.gov/law/0401.htm>. The website identifies VA eligibility criteria and local VA facilities.

Illinois AIDS Drug Assistance Program (ADAP) and Continuation of Health Insurance Coverage Program (CHICP)

<http://www.idph.state.il.us/aids/materials/less.htm>

Federally-Funded HIV Housing Assistance for People With AIDS (HOPWA) Program

State of Illinois

AIDS Foundation of Chicago

City of Chicago

Cornerstone Services, Inc.

Heartland Community Care Services, Inc.

Heartland Human Care Services, Inc.

Pioneer Civic Services

Travelers & Immigrants Aid/Chicago Connections