

H.R. 1 AND ILLINOIS' FAMILY PLANNING MEDICAID PROGRAM

The HFS Family Planning Program (HFS FPP) is an Illinois Medicaid program that covers sexual and reproductive health care, including birth control, HIV testing, PEP, PrEP, condoms, STI testing and treatment and more.

Here's what to know about how H.R. 1 ("The One Big Beautiful Bill") affects the HFS Family Planning Program.

1

HFS FPP enrollees will not be subject to eligibility redeterminations every 6 months. H.R. 1 requires that individuals enrolled in Medicaid Expansion (primarily childless adults up to 138% FPL) have their eligibility determined every 6 months. This requirement does **not apply** to partial benefit programs like HFS FPP. Redeterminations for HFS FPP should take place every 12 months.

2

HFS FPP enrollees will not have work requirements. H.R. 1 requires that, unless an exception applies, people enrolled in Medicaid Expansion report working or volunteering at least 80 hours per month to keep their coverage. This requirement **does not** apply to partial benefit programs like HFS FPP.

3

Beginning 12/31/2026 HFS FPP enrollees will only be eligible for 2 months of retroactive coverage. H.R. 1 reduces retroactive coverage from 3 months to 2 months for all covered populations except for the Expansion group. Expansion enrollees are only eligible for 1 month of retroactive coverage.

4

Beginning 10/1/2026, the categories of immigrants who qualify for HFS FPP coverage will be limited. H.R. 1 limits the categories of immigrants and non-citizens who can qualify for Medicaid programs, including programs like HFS FPP, to legal permanent residents (green card holders) who have lived in the U.S. for 5+ years, Cuban and Haitian immigrants, and COFA migrants. Unless states use state-dollars to cover their care, refugees, asylees, and other humanitarian visa holders will soon be ineligible for HFS FPP coverage. However, as of August 2025, Illinois applicants applying for immediate, temporary HFS FPP coverage, known as FPPE (Family Planning Presumptive Eligibility) will not be asked any questions about citizenship or immigration status.

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HERE'S HOW YOU CAN MAXIMIZE COVERAGE FOR SEXUAL AND REPRODUCTIVE HEALTHCARE USING HFS FPP/FPPE!

Despite changes to Medicaid, HFS FPP plays a critical role in maximizing available state and federal dollars for preventative care, including reproductive and sexual health care.

1

Increase enrollment in HFS FPP/FPPE to create sustainable funding for providers. Providers with Family Planning and HIV grant dollars should screen and enroll eligible patients into HFS FPP/FPPE coverage before applying grant dollars (Title X, Ryan White, PrEP4Illinois, etc) as a payor of last resort. This preserves limited grant dollars to serve the truly un/underinsured and creates a more sustainable stream of funding for providers.

2

Maximize presumptive eligibility (FPPE) to help fill coverage gaps caused by people falling off Expansion coverage. FPPE allows people to get immediate, temporary coverage for their visit and the sexual and reproductive care provided during that visit. FPPE covers all of the same services as HFS FPP, including all FDA-approved birth control methods, annual exams, STI testing and treatment, HIV testing, PEP, PrEP, and more. People can get FPPE coverage without being asked any questions about their citizenship or immigration status. Maximizing FPPE ensures that when people are ineligible for or fall off of Expansion coverage due to burdensome redeterminations and work reporting requirements, they have a means of accessing care without having to wait to reapply for full coverage.

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