




Illinois Case Study:

A State Campaign to Expand Health Coverage to Noncitizen Older Adults

APRIL 2022



This case study was written by Katherine Villeda, Policy Analyst at Community Catalyst with consultation from Andrea Kovach and Stephani Becker at the Shriver Center on Poverty Law, Eréndira Rendón, The Resurrection Project, and Graciela Guzman, former Campaign Director of the Healthy Illinois Campaign.

All photo credits: Healthy Illinois Campaign

Illinois Case Study: A State Campaign to Expand Health Coverage to Noncitizen Older Adults

INTRODUCTION

Approximately 10.5 million undocumented immigrants currently reside in the United States, representing 3.2 percent of the total U.S. population. Although they may have lived in the U.S. for years and have been [contributing to the economy](#), undocumented immigrants are barred from accessing federally-funded public health insurance programs, like Medicaid, and buying coverage from the Affordable Care Act (ACA) Marketplaces.¹ As a result, the [uninsured rate of undocumented immigrants](#) is nearly five times higher than that of citizens. In 2019, an estimated half of undocumented adults and one-third of undocumented children were uninsured.

Undocumented immigrants have few options for affordable health care. Many undocumented immigrants cannot afford to pay full price for individual insurance coverage nor have employer coverage. Therefore, they often must rely on no-fee or low-fee care provided at community health centers or varying hospital financial assistance programs to help pay for hospital care. Additionally, since 2016, due to the confusion, fear and panic among immigrants as a result of the attempted changes to the public charge regulations, as well as threats of detention and deportation, many undocumented immigrants have gone entirely without health care coverage to avoid [running afoul](#) of immigration authorities. These concerns have persisted in the midst of the COVID-19 pandemic as lack of health insurance and fear of deportation have left many undocumented patients unable or unwilling to seek care during this crisis. Furthermore, the COVID-19 pandemic has taken a disproportionate toll on noncitizen immigrants who are more concentrated in [construction and service industries, with jobs](#) that cannot be performed virtually and have been more likely to experience cutbacks during the height of the pandemic than other industries, leading to widespread personal financial hardship.

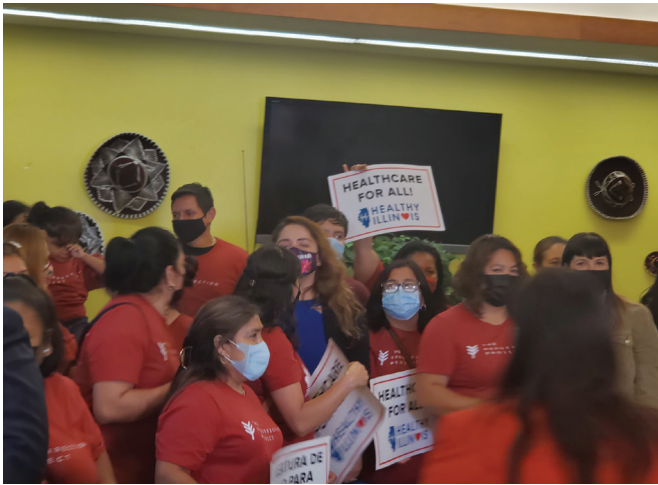
Despite the challenging coverage and access environment, and in recognition of the significant contribution of undocumented communities, several states and localities have forged ahead with [state-funded innovative solutions](#) for this population – working to ensure that their health care needs are met.

This case study highlights the work of the Healthy Illinois Campaign, which has so far achieved success in passing and implementing two new programs using state funds to provide Medicaid-like health coverage to low-income undocumented immigrants and Legal Permanent Residents (LPRs) under five years. The first program, the Health Benefits for Immigrant Seniors program (HBIS) was authorized and had funding appropriated in the Spring of 2020 and the second program, the Health Benefits for Immigrant Adults (HBIA) program was authorized and had funding appropriated in Spring of 2021.

¹ With the exception of emergency Medicaid benefits, the Personal Responsibility and Work Reconciliation Act of 1996 (also known as welfare reform) greatly restricted undocumented immigrants and others from enrolling in Medicare, Medicaid, and the Children's Health Insurance Program. The Affordable Care Act of 2010 (ACA) prohibited undocumented immigrants (including Deferred Action for Childhood Arrivals (DACA) recipients) from enrolling in state and federal marketplaces, preventing them from receiving federal financial assistance (i.e., premium tax credits and cost-sharing subsidies) and even from purchasing qualified health plans at full price.

SUMMARY OF ILLINOIS'S INITIATIVE

Due to federal restrictions, certain immigrants, including undocumented immigrants and immigrants who are subject to the [five-year waiting period](#)², do not qualify for government health insurance (e.g., nonemergency Medicaid, Medicare). It has been well-established that uninsured individuals who cannot afford care often feel compelled to [postpone or forgo](#) medical care until their health conditions worsen, contributing to greater health care costs in the long run. This issue became more apparent during the COVID-19 pandemic when the Center for Disease Control (CDC) reported that [uninsured older people](#) who became infected with COVID-19 were at higher risk for developing severe



complications and incurring more expensive medical bills. With COVID-19 deaths disproportionately affecting older adults, noncitizen older adults were not only especially vulnerable to the COVID-19 virus due to their age, but also because of the barriers they face accessing affordable, comprehensive health care due to their immigration status.

Fortunately, in 2020, after six years of grassroots power building and advocacy, Illinois became the [first state](#) to provide state-funded Medicaid-like health insurance coverage to all low-income individuals who are age 65 years or older,

regardless of immigration status.³ In order to qualify for the program (which the state officially named the “Health Benefits for Immigrant Seniors” program), an enrollee’s income must be at or below the federal poverty level ([\\$1,133 monthly in 2022 for 1 person](#)). With zero cost to the participant, the program covers [health care services](#) such as hospital visits, doctor visits and prescription drugs but does not cover nursing facility services or home and community based services (HCBS). The program also retroactively covers prior health care utilization for up to three months if the applicant was financially eligible. Since it was signed into law in 2020, more than 10,000 people in the state have enrolled into the HBIS program, several times as many as originally expected, thanks to advocacy and community outreach efforts.

Advocacy efforts did not end there. In [2021](#), the Healthy Illinois Campaign expanded on their 2020 victory and Illinois became the second state to extend state-funded Medicaid-like health insurance to low-income (up to 138% FPL) noncitizens between the ages of 55-64 years of age, regardless of immigration status. The eligible population includes immigrants who are undocumented and Legal Permanent Residents who are subject to the 5-year waiting period. The Health Benefits for Immigrant Adults (HBIA) program is expected to benefit an estimated 11,000 people in Illinois. Coverage for HBIA began on March 29, 2022 and will cover the same services as listed above for the HBIS program above; HBIA will retroactively cover prior qualifying health care costs for up to three months.

² Undocumented immigrants include recipients of Deferred Action for Childhood Arrivals (DACA). The five-year waiting period affects certain “Qualified Immigrants” that entered the United States on or after August 22, 1996, including: Lawful Permanent Resident (LPR/Green Card Holder); Parolees, if granted parole for one year or more; Battered spouse, child, or parent who has a pending or approved petition with DHS; Conditional Entrants (granted before 1980).

³ This includes people who are undocumented or have been legal permanent residents/green card holders, for less than five (5) years.

CAMPAIGN ROADMAP

The path to victory in Illinois is based on the Healthy Illinois Campaign’s understanding of intricate state-level politics to structure a multi-year campaign that would progressively provide coverage for adults regardless of their immigration status. The campaign utilized the strategies described below to successfully implement these changes in Illinois.

Leveraging Diverse Stakeholders and Coalition Alliances

The Healthy Illinois Campaign (“the Campaign”) launched in 2014 and was started by grassroots organizations, many of whom worked together previously to pass [All Kids Coverage](#)⁴ and [Driver’s Licenses](#) for all Illinois residents, and presently continues to be an active coalition. Building off those successful campaigns, stakeholders set their sights on building a robust coalition that would push for coverage expansion for all Illinois residents regardless of immigration status. Carmen Velásquez, the founder of Alivio Medical Center⁵, who was retiring after 30 years of service in 2014, spearheaded the Campaign to ensure that immigrant health care advocates in Illinois spoke with one voice. Carmen



continues to be the moral center of the Campaign, engaging on a daily basis with policymakers, community members and stakeholders, and inspiring the Healthy Illinois forward to victory. The Campaign is comprised of an executive board⁶ and steering committee as well as grassroots, legislative and policy committees; it is [endorsed](#) by over 70 partners and community leaders. Partners include safety net providers, hospitals, clinics, grassroots organizations, immigrant service organizations, faith-based institutions, as well as policy and legal organizations. This mix of groups has brought strength in the coalition’s understanding of the whole public health system and community issues related to health.

The steering committee governs operations and strategy for the Campaign and is composed of health care providers (clinics and hospital systems), immigrant-serving organizations, community-based organizations, workers’ rights organizations and faith-based institutions. Grassroots members, particularly immigrant rights organizations, shared their top priorities for coverage and the barriers impeding their ability to access care and coverage. The policy team compiled research on the importance of providing health care coverage for everyone regardless of immigration status; how undocumented people have been excluded from federal pathways to health coverage; and identifying points of potential negotiations for the campaign to bring back to the entire coalition.

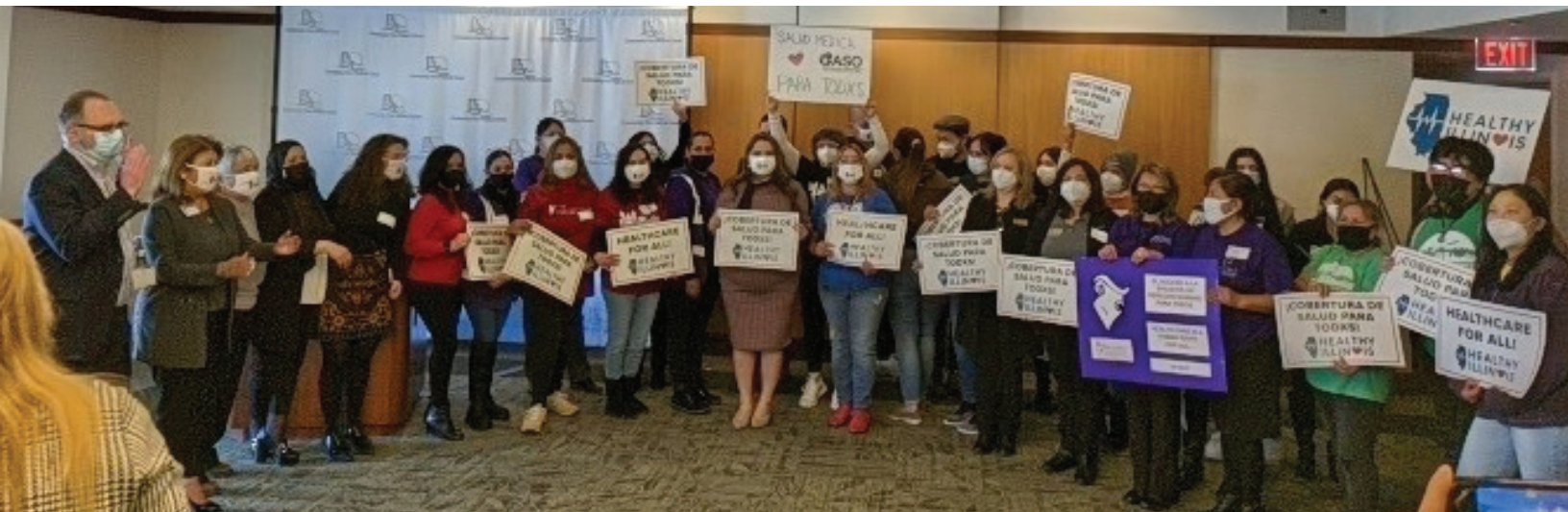
⁴ All Kids is Illinois’ program for children who need comprehensive, affordable, health insurance, regardless of immigration status or health condition.

⁵ [Alivio Medical Center](#) is a bilingual, bicultural community health center in Chicago committed to providing access to quality cost effective health care to the Hispanic community, the uninsured, and the underinsured, and not to the exclusion of other cultures and races.

⁶ The Executive Board consist of staff and/or members from Alivio Medical Center, Shriver Center on Poverty Law, National Partnership for New Americans, The Resurrection Project, and the Illinois Business Immigration Coalition.

Though each committee played a specific role in the Campaign, the coalition worked with all members to create and implement a group decision-making processes while also providing transparency through open and timely communication about the negotiations happening with policymakers. As a result, all decisions of the Campaign were and are community and consensus-driven.

The Campaign also built strong relationships with legislative and administrative champions. The Illinois Legislative Latino Caucus (ILLC) was instrumental in passing the policy victories in 2020 and 2021. In 2020, the ILLC leveraged their power in pushing up the timeline for coverage to begin for HBIS on December 1, 2020 — when every day of coverage counted for seniors experiencing the pandemic — rather than in mid-2021. The Illinois Department of Healthcare and Family Services (HFS) also joined advocates by making implementation a high priority after the 2020 victory.



Grassroots Relationships and Mobilization

Grassroots organizations and engagement are at the forefront of Healthy Illinois’ efforts to expand coverage for Illinois residents regardless of status. A core tenant for grassroots mobilization in the Campaign is that people with lived experiences are always at the forefront helping define strategy, lifting up favorable policy options and being visible leaders in the coalition and in the Campaign. People with lived experiences and representatives from grassroots organizations participate in the steering committee, the body responsible for making decisions about the campaign and to get direct feedback from grassroots members on strategy execution.

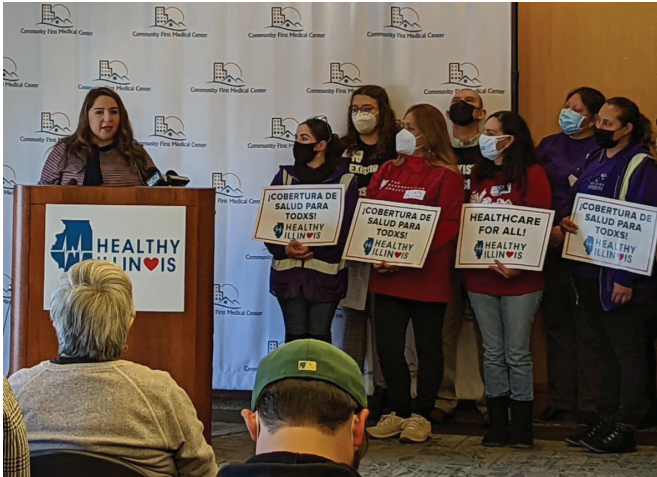
Grassroots engagement began in 2014 when Governor Rauner took office. Healthy Illinois led the charge with cultivating relationships behind the scenes, which ultimately led to having strong legislative champions. During the 2020 legislative session, on the last day of negotiations, grassroots organizations were able to engage their members and reach every legislator with a leadership role ahead of the vote and ask them to vote favorably.

The Campaign has mobilized grassroots organizations with tactics including:

- Training impacted individuals to share their personal health care stories with the press and legislators;
- Organizing members to email/call legislators to fill up their inboxes with calls to vote favorably on the budget bill;
- Meetings (both in district and at the Capitol) with legislators, state agency staff and the Governor’s office;
- “Days of Action” at the Capitol and large public actions in churches and community centers with legislators and media;
- Developing and utilizing strategic messaging that centered the dignity, safety and humanity of immigrant communities and emphasizing the importance of implementing the program as quickly as possible as a way to provide coverage during the COVID-19 health crisis; and
- Press conferences and candidates’ forums.

Leveraging a State-Level Favorable Political Climate

After the 2018 elections, the state of Illinois regained a stronghold of pro-health care and immigrant rights legislators across all six statewide elected offices. Governor J.B. Pritzker’s victory, in particular, proved to be crucial to advocates’ efforts to provide accessible health coverage to low-income noncitizen seniors. Although Gov. Pritzker did not campaign on immigrant issues, it was apparent from the outset of his term that he would consider immigrant-friendly policies.



[Support](#) for the campaigns was further catalyzed and championed by the ILLC and effectively framed the coverage gap as a budget issue. In 2021, they held a press conference on legislative and budget priorities where they highlighted the Healthy Illinois Campaign. [Representative Delia Ramirez](#) has been a chief champion of the Healthy Illinois Campaign and tirelessly advanced both coverage expansions.

During the 2021 legislative session, the House chose a new speaker, [Representative Emanuel Chris Welch](#), and Latine/x legislators also began picking up leadership roles in the House. Several Latine/x legislators assumed leadership roles in the Senate as well, all of which helped propel the Campaign’s success, leading to its inclusion in the state budget. The ILLC, particularly Representatives Delia Ramirez and [Lisa Hernandez](#) and [Senator Omar Aquino](#), were very vocal about the crisis that low-income noncitizen older adults could no longer be left uncovered, especially in light of the COVID-19 pandemic. Sen. Aquino’s new leadership position as a Majority Whip gave him an opportunity to further bolster the bill to the forefront in the Senate. With the COVID pandemic hitting communities of color especially hard, the Black Caucus and Asian Caucus also championed the bill.

Understanding the Opposition to Inform a Campaign Strategy

Before 2020, when advocates pushed for state-funded Medicaid-like health insurance expansion for low-income noncitizens, 19 years and older, a challenge that the advocates faced was winning over the support of key stakeholders who were on the fence about the program. The Illinois Department of Healthcare and Family Services did not support the proposal largely due to concerns related to cost and operations. The governor's office was supportive of the idea of covering undocumented adults but was hesitant to take on the issue proactively. Once the COVID-19 pandemic began, the importance and urgency of health coverage for immigrant seniors was undeniable and the Governor became a stronger supporter. Ultimately, HFS joined advocates and made implementation of the HBIS a high priority after the 2020 victory to ensure a smooth implementation process.



Advocates and organizers recognized that passing their policy goals would be more difficult if done as standalone bills that would require a majority of legislators to vote on the program without the context of the budget to fund the program. In order to ensure a better chance of passage, the Campaign strategized and worked closely with legislative champions to incorporate their measures in the budget bill rather than trying to pass them as stand-alone bills.

Furthermore, coalition partners found that they could leverage their power by negotiating with individual legislators and holding subject matter hearings during the legislative session as opposed to engaging in more public events such as rallies. Coalition partners strategically managed the use of media to avoid unwanted attention about the campaign from opponents. By being strategic about when and where to be public, the Campaign may have had less opposition and a more influential push on key stakeholders, like the Governor and his administration.

Towards the end of the legislative session, both in 2020 and in 2021, when it was evident that the policy goals of the campaign would be included in the budget, the Campaign began to utilize the media to bring awareness to the campaign. Though in 2021, opposition was more vocal in the media than in 2020, advocates and the ILLC proved to be much more vocal and effective proponents.

Negotiating Compromises

From the onset of the Campaign, the goal had always been to cover all low-income Illinois residents ages 19 and older, regardless of immigration status. In 2020, with the onset of COVID-19 pandemic and its disproportionate impact on older adults and communities of color, advocates prioritized the passage of free, comprehensive health coverage to low-income, uninsured, immigrant seniors in Illinois. It was more feasible to achieve coverage for older adults due to the political and social impact of the pandemic, but compromise proved to be inevitable when the expansion did not include coverage of

nursing home facility services. The Medicaid agency proposed a rule that would [exclude long-term care facility services and other facility-based services](#). Advocates submitted comments opposing the service exclusions and educated legislators who championed the bill to provide their input as well. However, ultimately, long-term care services and supports (including Home and Community Based services) were excluded from the program due to cost. The Campaign continues to push for the inclusion of these services and stories of widespread need are getting [media attention](#).

In 2021, advocates returned to their overarching goal and initially pushed for coverage for all income-eligible Illinois' residents 19 years and older regardless of immigration status. As the impact of the pandemic became clear, stakeholders continued to point to data showing a high density of essential workers between the ages of 50 and 64 could benefit most from the expansion. Therefore, given the budget challenges, advocates and champions came to an agreement and ultimately won coverage for older adults, 55 years and older, regardless of immigration status. Advocates see this as an important next step as they continue to work towards coverage for all eligible adults 19 years and older regardless of immigration status.

THE ROAD TO IMPLEMENTATION

In 2020, after vigorous post-passage administrative advocacy to expedite the implementation of this Medicaid-like program to address the COVID-19 pandemic, the Illinois Department of Healthcare and Family Services (HFS) made implementation their highest priority. Enrollment began on December 1, 2020 and offered three months of retroactive coverage, dating back to September 1, 2020. The new program has already enrolled over 10,000 low-income, uninsured, immigrant seniors in Illinois into free, comprehensive health coverage, greatly exceeding initial enrollment predictions of 800-2,000 enrollees. The campaign and its partners continue to work with HFS to roll out the program by advertising enrollment events and providing input on provider guidance and consumer outreach materials, as well as providing assistance on individual case referrals. When the program first launched in late 2020, health care providers shared that they were not seeing as high enrollment numbers as they had expected. Advocates identified the community-based providers and trusted messengers needed to ensure outreach was grounded in community and could overcome any fear of public charge. As a result, grassroots community partners helped to create messages clarifying the benefits of coverage, the potential to prevent medical debt through payment of medical bills and the facts on public charge, all of which spurred enrollment.

In 2021, the Healthy Illinois Campaign was successful in expanding coverage again to approximately 11,000 Illinoisans ages 55 through 64 through inclusion in the Illinois' Budget Implementation (BIMP) bill, which was signed by the Governor in June 2021. The program began enrolling newly eligible Illinoisans on March 29, 2022, a month ahead of its estimated start date of May 1st. Advocates are currently working with the state to ensure that the messaging created to inform community members about this new coverage is not rushed as the implementation date quickly approaches, and ensuring the messaging focuses on empowering eligible community members to enroll.

LESSONS LEARNED

Coalition Base-Building Matters

When the Healthy Illinois Campaign was first created about seven years ago, it seemed ambitious to pass coverage for all Illinois income-eligible residents regardless of immigration status. The coalition therefore looked at this as a long-term strategy and used the first couple of years to build a campaign that was rooted in grassroots communities which included impacted people and researched politically and economically feasible policy options. During this initial period, the campaign was identifying coalition partners, and building out the coalition's mission, principles⁷ and capacity. By identifying the Campaign's mission and capacity early on, it allowed them to manage their mission with the limited resources they had. Though the Campaign often supported other state advocacy efforts through an intersectional lens, they primarily focused their advocacy and organizing efforts to move their primary mission forward. In turn, this has allowed grassroots members to be engaged and energized by the Campaign's mission.

One of the major advantages of the Campaign's structure was the integration of grassroots and policy work. An early example of the coalition's efforts to integrate grassroots and policy advocates was at their very first retreat. Everyone participated in an exercise in which they broke up into randomized small groups and discussed different potential policy options the newly formed coalition could take on. Collectively, they weighed the pros and cons of each policy option and ranked them. This allowed grassroots and policy advocates to hear relevant and timely concerns regarding each option and eventually allowed for everyone to come to a consensus on which option would be best to move forward. Presently, the policy team ensures that grassroots participants are present at every meeting and the organizing team ensures policy participants are present at every meeting, which helps in strategizing policy and grassroots tactics that complement one another and has cultivated trust across organizers and advocates. Trust across partners was fundamental to be a consensus-driven coalition.

Leverage and Adjust with Timing

Timing was an important factor in the strategizing of the Campaign. For example, coalition partners timed their strategic engagement of the [media](#) towards the end of the legislative sessions only once it was evident victory was in sight. Advocates also utilized the media to apply pressure to HFS in [Fall 2020](#) to speak to advocates and ensure the proper and timely implementation of the 2020 bill.

Furthermore, the public charge's chilling effect and the national anti-immigrant fear and hostile sentiment people felt, aggravated by former Pres. Trump's xenophobic policies, drove legislators and community members' interest and focused attention on the immediate need to provide all immigrants with meaningful access to affordable health coverage. The timing of the pandemic also created urgency to get coverage for older adults due to the disproportionate impact of the virus on seniors and communities of color.

⁷ Health Illinois Principles are: (1) Health care is a basic human right. (2) Quality, affordable health care coverage should be accessible for all in Illinois. (3) Increased access to care, timely preventative services and better management of chronic illnesses promote improved health outcomes and reduce costs of late health interventions. (4) Reducing the burden on local governments that are currently paying uninsured health care costs will save Illinois taxpayers. (5) Fewer uninsured patients seen in hospitals and other medical providers will reduce uncompensated care costs. (6) Providing health care for all in Illinois will balance costs and prevent health-related financial crises for individuals and families.

CONCLUSION

The Healthy Illinois Campaign, led by a new campaign director, Tovia Siegel, will continue to play an active role in supporting the implementation of coverage for low-income noncitizens regardless of immigration status between the ages of 55-64 years of age. Enrollment for coverage began on March 29, 2022 and the Campaign is also supporting outreach efforts to ensure eligible individuals know about the new program and to enroll once coverage begins.



HEALTHY ILLINOIS

NOTICIA
INSCRIPCIÓN DE
COBERTURA DE
ATENCIÓN MÉDICA
ABIERTA PARA
PERSONAS MAYORES
DE 55 AÑOS

* CUALQUIER ESTATUS
MIGRATORIO *

Aplicar en <https://abe.illinois.gov/abe/access/>



HEALTHY ILLINOIS

ANNOUNCEMENT
HEALTHCARE
COVERAGE
ENROLLMENT OPEN FOR
PEOPLE AGE 55+

* ANY IMMIGRATION STATUS *

Apply at <https://abe.illinois.gov/abe/access/>

Looking ahead, the Campaign continues to pursue their fundamental goal to expand coverage for all Illinois residents regardless of their immigration status, and to include long-term care services and supports in the existing expansions for immigrant seniors. The next step in their advocacy and organizing efforts builds off their last two victories in 2020 and 2021. In [HB4437](#), a bill pending in the 2022 Illinois General Assembly, they have proposed a state-funded Medicaid-like health insurance program for Illinois residents 19-54 years old regardless of their immigration status. The Healthy Illinois Campaign will continue to strive to make Illinois one of the first states in the country to offer health care coverage across all ages to all income-eligible residents regardless of immigration status.