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Get Ready for 2026: Important Compliance Updates for Health Insurance Sales in Illinois

We hope the Medicare Annual Enrollment Period was successful for you and your clients and that you can enjoy time to recharge after a busy season. Starting January 1, 2026, new compliance updates will affect health insurance sales in the state of Illinois. Please review these changes carefully and incorporate them into your interactions with applicable clients.

Illinois House Bill 1865 – Senior & Long-Term Care Protections

Effective January 1, 2026, IL HB 1865 introduces new requirements designed to protect certain persons age 65 and older and residents of long-term care facilities from **unfair or deceptive practices in the solicitation of health insurance**:

- **No Immediate Purchase Pressure:** Do not require a decision during the first contact.
- **Encourage Review & Consultation:** Advise prospects to review their current Medicare coverage and consult a trusted advisor, such as a relative or healthcare Power of Attorney (POA) where applicable, before making changes.
- **Mandatory 48-Hour Waiting Period:** Before initiating any policy changes.
- **Provide Contact Information:** Share a phone number for questions from the individual or their advisors.
- **Opt-Out Option:** Allow individuals to decline future communications.
- **Restrictions on Vulnerable Populations:** Written agreements required for individuals with health care POA or cognitive impairments.

Key Takeaway: The law focuses on both **vulnerability** and **age**. It applies to nursing home/ long-term care residents of any age, and to Individuals age 65+ with or without a health care POA or diminished decision-making capacity.

Who Does it Cover and What are the Compliance Requirements?

Who it Covers	Compliance Requirements Apply to All
<p>Everyone age 65+ (no other factors)</p> <p>Age 65+ AND living in a nursing home/long-term care facility</p> <p>WHY: Residents of these facilities are explicitly protected.</p>	<ul style="list-style-type: none"> • Observe 48-hour waiting period before enrolling in a new policy or initiating any policy changes • There can be no pressure to make a purchasing decision in the first contact with the potential enrollee • Encourage the potential enrollee to review their current insurance plan and potential changes with a family member, friend, or other trusted advisor • Provide a phone number to call for any questions • Provide an opt out method the individual can use to decline any future communications with the agent
<p>Age 65+ AND has health care Power of Attorney</p> <p>WHY: POA indicates vulnerability; law applies</p>	<p>All of the above plus:</p> <ul style="list-style-type: none"> • Restrictions on Vulnerable Populations: Written agreements required for individuals with health care POA or cognitive impairments and if under POA, the authorized agent must sign.
<p>Age 65+ AND has condition impairing informed decisions (e.g., dementia)</p> <p>WHY: Cognitive impairment is a trigger under the statute</p>	

Commitment to Ethical Practices

Agents play a critical role in being a trusted resource for older Americans. Your guidance should empower clients to make informed decisions without pressure or confusion. And while this current bill only applies in the state of Illinois, **you should always prioritize transparency, fairness, and respect in every interaction.**

Best Practices for Ethical Medicare Sales

- **Be Transparent:** Clearly explain plan details, costs, and coverage limitations. Avoid jargon that may confuse clients.
- **Respect Decision-Making:** Give clients time to review options and consult family or advisors—never rush a decision.
- **Avoid Misrepresentation:** Do not exaggerate benefits or omit key details about coverage.
- **Document Everything:** Keep accurate records of disclosures, waiting periods, and client communications.
- **Protect Privacy:** Follow HIPAA guidelines when handling personal health information.

Your success starts with trust – earned through honesty, transparency, and integrity. Thank you for your continued commitment!

For questions or clarification, please contact your upline’s compliance team.