

SNAP Federal Impacts on Illinois

Preparing for the SNAP Work Requirement and Time Limit

December 10, 2025

The **Supplemental Nutrition Assistance Program** (SNAP) (formerly Food Stamps) **helps low-income people and families buy the food they need for good health.**

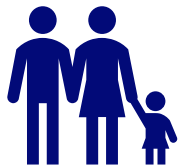


Benefits are provided on the Illinois Link Card - an electronic card that is accepted at most grocery stores. The program is managed by the Food and Nutrition Service (FNS) of the United States Department of Agriculture. The Department of Human Services administers the program in Illinois.



Eligibility is determined based on:

- income and expenses
- the number of persons who live and eat together



Households may be eligible for benefits with gross incomes less than **165% of the Federal Poverty Level (FPL)** or less than 200% FPL if the household includes elderly or disabled members* (above the federal minimum of 130%).



- **\$4.7B in SNAP benefits** issued to Illinoisans, annually:
- **~1.0M households**
- **~1.9M people**
- This includes **44,217 Veterans**¹
- Notably:
 - **37%** SNAP households have **older adults**¹
 - **45%** SNAP households have **children**¹
 - **44%** SNAP households have a person with a **disability**¹

1. https://frac.org/wp-content/uploads/SNAP_FactSheets_022525_IL14.pdf



~340K
ILLINOISANS

Changes in SNAP policies could **directly impact more than ~340K Illinoisans who may no longer be eligible for SNAP benefits** due to work requirements for Illinoisans including veterans, youth out of care, and the unhoused as well as non-citizen eligibility changes.



\$1B
ILLINOIS
INDUSTRIES

Federal government's actions to pull back from SNAP investment could cause **wage losses of up to \$1 Billion annually across Illinois industries along the supply chain from farms to tables.**



\$7.2B
ECONOMIC
IMPACT

Threatens \$7.2B in positive economic impact for IL.



~1.7M
ILLINOISANS

Compounded impact on over 1.7 million Illinoisians who rely on both SNAP and Medicaid.

H.R. 1 – the "Big Beautiful Bill"

Additional Key Provisions

- Requires states to cover a portion of the SNAP program based on the state's Payment Error Rate (PER) – threatening the longevity of the program in Illinois

Impact

- A price tag of potentially over \$800M for the state beginning in October 2027
- Changes in state-level policies for documentation and re-determination in order to mitigate PER impacts.

Impacts to Able Bodied Adults Without Dependents (ABAWDs)

H.R. 1 changes the Able-Bodied Adults Without Dependents (ABAWD) eligibility requirements, which subject SNAP recipients to work requirements, unless a state or county has a waiver.

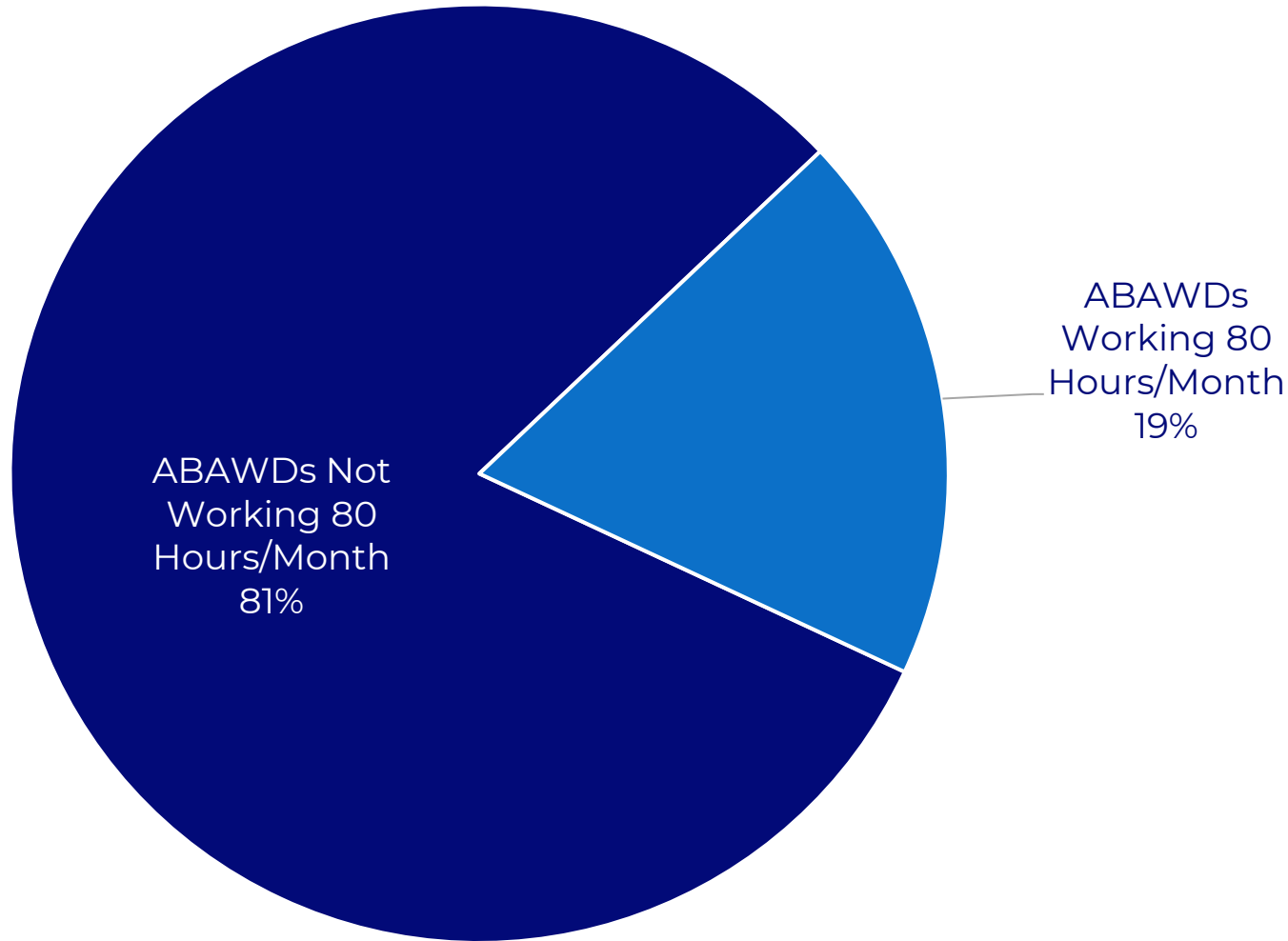
Before

- ABAWD eligibility
 - Adults aged 18-54
 - Dependents = under age 18
 - Exceptions for the homeless, veterans, and foster youth 18-24.
- States can waive ABAWD requirements if a county's unemployment exceeds 10% or there are insufficient jobs. **IL meets this threshold.**

After

- ABAWD eligibility
 - Adults aged **18-64**
 - Dependents = **under age 14**
 - **Limited** exception pathways
- States can waive ABAWD requirements if a county's unemployment exceeds 10%. **IL does not meet threshold.**





- In Illinois, approximately 20% of the total SNAP population are identified as ABAWDs.
- Under the new ABAWD definition, only 19% of individuals are currently meeting the work requirement.
- Illinois was one of only [six \(6\) States and Territories](#) that was under a statewide time limit waiver.
- Illinois' time limit waiver ends in January 2026. Starting February 1, ABAWDs are limited to three months in three years of SNAP benefits, unless exempt or meeting the work requirement.

- Experiencing **instability** and managing **immediate crises**.
- Higher rates of **homelessness and mental and physical limitations** that may not qualify as a full disability but impact the ability to work 80 hours a month.
- Often **disconnected from the workforce** or **working in low-paid jobs** with unpredictable hours that don't offer benefits like paid sick leave.
- **Lack of consistent mailing address and less responsive** to traditional means of communication, such as phone, email, and regular mail than other SNAP recipients.
- **Rural participants** have even less access to job opportunities, training programs, transportation, and broadband internet access.

The ABAWD time limit substantially reduces SNAP participation and does not increase employment or earnings.**

**Source: Urban Institute Report: [The Impact of SNAP ABAWD Time Limit Reinstatement in Nine States](#), June 2021

*ABAWD characteristics may shift with the OBBBA addition of individuals in households with school-age children and 55-64 year-olds.

Return of the Time Limit – What to Know


- **Effective Date:**
Time limit return in Illinois on February 1, 2026.
- **Who's Affected:**
Adults 18–64 without dependents under age 14 in their SNAP household.
- **What's Changing:**
Illinois' current waiver will expire in January— meaning the 3-month time limit will start applying again for ABAWDs who aren't meeting work requirements or exempt.
- **What's ahead:**
 - Local offices are screening for exemptions before applying the time limit
 - Impacted customers are being informed about the change and how they can maintain eligibility
- **For Community Partners:**
 - Support customers who qualify for exemptions through completing the necessary steps to stay eligible.
 - Connect non-exempt individuals to work programs like SNAP E&T, WIOA title 1, and other approved federal, state, and local programs to help them meet the work requirement. **IDHS is working on tools to help ABAWDs find qualifying programs in their area.*

- Time limit return in Illinois **in February 2026**.
- ABAWDs can only get SNAP benefits for **3 months in the 3-year period** unless they meet the work requirement or are otherwise exempt.
- ABAWDs may **regain eligibility** during the 3-year period if they **become exempt** or **begin meeting the work requirement**.
- In Illinois, the **3-year period began January 1, 2024, and ends December 31, 2026**.
- On **January 1, 2027**, the clock resets and a new 3-year period begins.



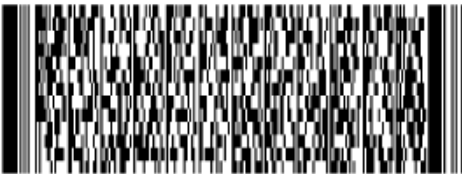
IL 444-5175 SNAP Work Rules Notice: ABAWDs will receive this notice at:

- Initial certification
- Renewal
- When previously exempt household member or new household member becomes subject to the work rules.



State of Illinois
Department of Human Services

SNAP WORK RULES



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Date:

Case Name:

Address:

City, State, Zip:

Case Number:

Office Name:

Office Address:

Phone:

TTY:

Tenemos este aviso en español. Para solicitar avisos en español, por Internet vaya al sitio ABE-MMC o llamas al 1-800-843-6154 (TTY 1-866-324-5553 TTY/ Nextalk, 711 TTY Relay).

You can manage your account online at: ABE.illinois.gov

This notice tells you about the work rules that apply to people who receive Supplemental Nutrition Assistance Program (SNAP) benefits and are able to work. There are two types of work rules, Work Provisions and Work Requirements.

If these work rules are not followed, your SNAP benefits may decrease or stop if there is not a good cause reason. A household member(s) needs to meet work rules to receive SNAP benefits. The name of the individual(s) is listed below.

☐ The person(s) listed below is required to comply with the Work Provisions. To learn more about the requirements that must be followed to get SNAP, read the Work Provisions included with this notice.

1. Name:

2. Name:

3. Name:

☐ The person(s) listed below is required to comply with the Work Provisions and the Work Requirement. To learn more about the requirements that must be followed to get SNAP, read the Work Provisions and the Work Requirement rules included with this notice.

1. Name:

2. Name:

3. Name:

VOLUNTARY SNAP EMPLOYMENT & TRAINING PROGRAM (SNAP E&T)

Information about the Supplemental Nutrition Assistance Program Employment and Training (SNAP E&T) Program is also included with this notice. SNAP E&T is a voluntary program to help SNAP customers acquire work skills and find employment and can help you meet the work rules. To learn more, read the SNAP Employment and Training Program section of this notice.

Regaining Eligibility for ABAWDs

- ABAWDs who have exhausted their 3 countable months can regain eligibility by:
 - **Meeting an exemption** from the ABAWD work requirement, or
 - **Fulfilling the 80-hour work requirement for 30 consecutive days**
- Individuals remain eligible for SNAP as long as they continue to be **exempt** or **meet the 80-hour requirement**. They may also **reapply once their 3-year clock resets**.
- **One-Time Additional Eligibility Period**
 - **ABAWDs who regain eligibility by meeting the 80-hour requirement are eligible for one additional set of three consecutive countable months** when they later stop meeting the requirement and notify their eligibility worker. This additional three-month period is available **only once** during the 36-month cycle.
 - A **“countable month”** is any month in which an ABAWD receives a FULL month of benefits while not fulfilling the ABAWD work requirement or otherwise exempt.

- Time limit returns in Illinois **in February 2026**.
- ABAWDs can only get SNAP benefits for **3 months in the 3-year period** unless they meet the work requirement or are otherwise exempt.
- ABAWDs may **regain eligibility** during the 3-year period if they **become exempt** or **begin meeting the work requirement**.
 - **ABAWDs who regain eligibility by meeting the 80-hour requirement are eligible for one additional set of three consecutive countable months** if they later stop meeting the requirement and notify their eligibility worker
- In Illinois, the **3-year period began January 1, 2024, and ends December 31, 2026**.
- On **January 1, 2027**, the clock resets and a new 3-year period begins.

A large blue arrow pointing to the right, representing a timeline. It has a light blue dot at the start and another at the end.

Jan 1, 2024

Dec 31, 2026

Exemptions from SNAP Work Rules

Exemptions from SNAP Work Rules

A person is exempt from the SNAP Work Rules if they are:

- under age 18 or 65 years of age or older; or
- physically or mentally unable to work, including experiencing chronic homelessness, domestic violence, and/or other barriers; or
- pregnant; or
- living in a SNAP household (purchase and prepare) with a child under age 14, even if the child is ineligible for SNAP; or
- Individuals who are an Alaskan Native, American Indian, American Urban Indian, or California Indian (as defined in the Indian Health Care Improvement Act); or
- Caring for a child under age 6 or a person who needs help caring for themselves; or
- Going to school, college, or training program at least half time; or
- Meeting the work rules for TANF; or
- Receiving unemployment benefits or applied for unemployment benefits; or
- Participating regularly in alcohol or drug treatment program; or
- Working at least 30 hours a week or earning at least \$217.50 (federal minimum wage \$7.25 multiplied by 30 hours) a week. The person can be employed or self-employed.

Work Requirement Screening Tool

Welcome to ABE
Helping people in Illinois
lead healthy and
independent lives

Use this site to apply for and manage your
healthcare, food, and cash assistance benefits.

Check if I Should Apply

Apply for Benefits

Manage My Case

Check if I Should Apply for
Summer EBT

Check if I Meet SNAP
Work Requirements

ABE Provider Sign In

Community Partner Registration

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



Exemption Request Process

Customers can request an exemption at any time by:

- ▶ Contacting their local FCRC in person, via phone call etc.
- ▶ Submitting form IL444-2341 SNAP Work Requirement- Request for Exemption
- ▶ Manage My Case: Manage My SNAP Work Requirements. Customers have access to links to the forms listed below and can use the new button to report changes for their work rules and submit a request for an exemption.

Note: Customers can upload documents and forms to show proof of meeting the Work Requirement or of being exempt thru Manage My Case

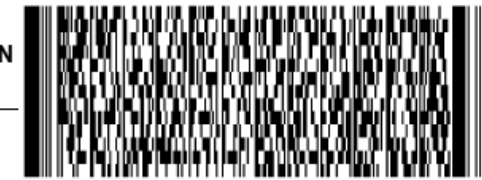
A service provider may support an individual with completing this process.

Help with MMC @ : ABE.questions@illinois.gov

IL 444-2341 SNAP Work Rules: Request for Exemption



State of Illinois - Department of Human Services SNAP WORK RULES - REQUEST FOR EXEMPTION



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Date:

Case Name:

Address:

Address:

City/State/Zip:

Case Number:

Office Name:

Office Address:

Phone:

TTY:

Fax:

Tenemos este aviso en español. Para solicitar avisos en español, por Internet vaya al sitio ABE-MMC o llamas al 1-800-843-6154 (TTY 1-866-324-5553 TTY/ Nextalk, 711 TTY Relay).

You can manage your account online at: ABE.illinois.gov.

Complete this section to request an exemption from the SNAP work requirement. You may be asked to provide proof that you qualify for an exemption. If your request is denied you will need to meet the SNAP work requirement to maintain your eligibility for SNAP. You have the right to appeal the decision.

I, request to be exempt from meeting the SNAP work requirement because (select all that apply):

<input type="checkbox"/> I have a physical or mental condition that prevents me from working or makes it difficult to maintain work.
<input type="checkbox"/> I am experiencing chronic homelessness.
<input type="checkbox"/> I am pregnant.
<input type="checkbox"/> I live in a SNAP household with a child under age 14.
<input type="checkbox"/> I am attending a school, college, or training program at least half-time.
<input type="checkbox"/> I have applied for or am receiving unemployment benefits.
<input type="checkbox"/> I am in a drug or alcohol addiction treatment program or suffering from substance addiction.
<input type="checkbox"/> I am currently receiving TANF and am participating and complying with the TANF work and training requirements.
<input type="checkbox"/> I am an Alaskan Native, American Indian, American Urban Indian, or California Indian (as defined in the Indian Health Care Improvement Act).
<input type="checkbox"/> I am providing care for another person who needs help caring for themselves. (This person does not have to be living in your home).
<input type="checkbox"/> I am responsible for the care of a child under the age of 6. (Does not have to be your child or living in your home).
<input type="checkbox"/> I am an AmeriCorps VISTA volunteer working 30 or more hours a week paid, unpaid, or paid in-kind (living stipend).
<input type="checkbox"/> I am a migrant or seasonal farm worker under contract with an employer to begin employment within 30 days for an average of 30 hours per week or earning wages at least equal to \$217.50 per week before taxes and other deductions (federal minimum wage \$7.25 multiplied by 30 hours).



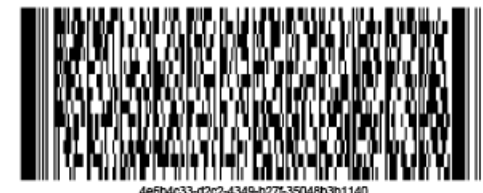
Supporting Documentation may be needed

- The FCRC may excuse someone from work requirements if they are mentally or physically unable to work, but verification may be needed in some cases
- Form IL444-2340 SNAP Work Provision and Work Requirements – Unable to Work Determination can be used to document the customer's situation. This form can be completed by:
 - Healthcare Professionals
 - Staff/Social Workers with direct knowledge of the potential exemption may complete
 - Drug and Alcohol Treatment Programs
 - Homelessness Service Providers
 - Domestic Violence Services Providers

IL444-2340 SNAP Work Requirement Request – Unable to Work Determination Form



State of Illinois - Department of Human Services
SNAP WORK RULES - UNABLE TO WORK DETERMINATION



Date:

Case Name:

Address:

City:

State:

Zip Code:

Case Number:

Office Name:

Office Address:

Phone:

TTY:

Fax:

Medical/Social Service Provider:

Please help us determine if the person named below is mentally or physically fit for employment. Please answer the questions in the appropriate section of this form for your profession and sign in the signature section. You do not need to provide medical records. A letter from a medical or social service provider can be provided instead completing and submitting this form. The letter must include all necessary information.

This information will help us determine if this person is unfit to participate in work requirements, per Section 6(o) of the Food and Nutrition Act of 2008. This form is authorized by 89 Ill. Adm. Code 121.160 and is voluntary. There are no penalties for failure to respond.

To be completed by SNAP Customer:

I, (please print name)

living at (please print address)

request verification of my:

☐ physical or mental condition

☐ participation in a drug and alcohol program

☐ participation in homelessness services

☐ participation in domestic violence services

I hereby authorize the release of the medical information and/or rehabilitation participation requested to the Illinois Department of Human Services.

Signature:

Date:

To be completed by Healthcare Professional**

Does this person have a temporary or permanent mental and/or physical condition which restricts their ability to:

- Work a job 20 hours per week? Yes ☐ No ☐

- Participate in a work and training program activity for 80 hours per month? Yes ☐ No ☐

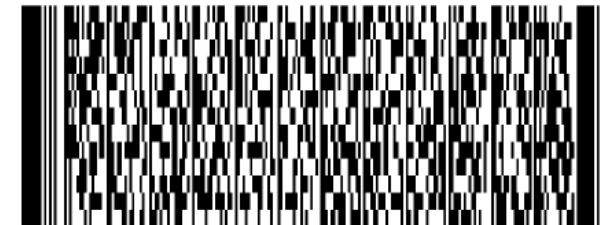
- Is this person pregnant? Yes ☐ No ☐

IL444-2340 SNAP Work Requirement Request – Unable to Work Determination Form



State of Illinois - Department of Human Services

SNAP WORK RULES - UNABLE TO WORK DETERMINATION



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To be completed by Staff/Social Worker at a Drug and Alcohol Treatment Program**

This person is participating in a program that reduces their ability to:

- Work a job 20 hours per week? Yes ☐ No ☐
- Participate in a work and training program activity for 80 hours per month? Yes ☐ No ☐

To be completed by Staff/Social Worker at a Homelessness Services Provider or Shelter**

This person is experiencing chronic homelessness that reduces their ability to:

- Work a job 20 hours per week? Yes ☐ No ☐
- Participate in a work and training program activity for 80 hours per month? Yes ☐ No ☐

To be completed by Staff/Social Worker at a Domestic Violence Services Provider or Shelter**

This person is a survivor of domestic violence and therefore has a reduced ability to:

- Work a job 20 hours per week? Yes ☐ No ☐
- Participate in a work and training program activity for 80 hours per month? Yes ☐ No ☐

****REQUIRED****

SIGNATURE AND CONTACT INFORMATION

I certify that the information provided above is true and accurate.

Meeting the Work Requirement

Who must fulfill the work requirement?

- Individuals ages 18-64
- Fit for employment
- Do not live in a SNAP household with a child under age 14
- Not pregnant
- Not already exempt from work rules
- Not covered by time limit waiver or discretionary exemption

ABAWDs are required to spend at least 80 hours a month*:

Working

(Paid, unpaid, in-kind, community service)

Participating in a Qualifying Work Program

(SNAP E&T, WIOA Title 1, other approved federal, state, or local programs)

Combination of
working and
participating in a
**qualifying work
program**

**ABAWDs can also meet the SNAP work requirement by participating in workfare for the assigned number of hours each month, which may total less than 80. In Illinois, only SNAP E&T providers can offer the workfare activity at this time.*

A Coordinated Workforce Approach to Supporting ABAWDs

IDHS is Preparing for the Return of the ABAWD Time Limit

- 1. Educating and engaging participants and community partners** on all exemption pathways (e.g., physical and mental barriers to work) and ways to meet with work requirement through a comprehensive communications and outreach plan and trainings for community partners.
- 2. Expanding our voluntary SNAP Employment and Training (E&T) program** to help ABAWDs meet the work requirement and ensure statewide coverage. SNAP E&T will remain voluntary.
- 3. Strengthening and aligning our existing workforce system** (outside of SNAP E&T) and to help ABAWDs meet the work requirement and regain eligibility.

Our efforts to support ABAWDs with the return of the time limit will be leveraged as a foundation for implementing Medicaid work requirements.

Verification of Exemption for Half-Time Enrollment / Work Program Participation

- IDHS is working on sharing additional tools with customers and workforce stakeholders for verification of work program participation.
- In the meantime, we recommend that you help ABAWDs by submitting documentation upfront and at renewal that shows:
 - Customer name
 - Customer contact information
 - Work program name and brief description
 - Start date
 - Anticipated end date (if applicable)
 - Number of assigned monthly hours / half-time status
 - Work program contact information

Building the Foundation

Phase I will create immediate, scalable access to work requirement pathways through the SNAP Workforce Initiative, launched in partnership with the Department of Commerce and Economic Opportunity (DCEO), the Illinois Department of Employment Security (IDES), and the Illinois Community College Board (ICCB).



Create an "on-ramp" that allows ABAWD customers to start meeting hours immediately through the Illinois workNet platform.



Align pathways so customers can move from self-directed services to more intensive workforce services as needed.



Reinforce clear messaging about how to meet requirements and where to go first.

Q&A

Stay Engaged



Community partners can help minimize customers losing SNAP benefits.



Help **communicate SNAP changes** to customers



Help customers **navigate changes to eligibility** requirements



Help **test new wording in application or other materials** to ensure it's easy to understand



Help IDHS **learn more about challenges** customers are facing



Help customers **understand changes to application and work** requirements

SNAP Impact Webpage



[IDHS](#) > [About IDHS](#) > [Divisions](#) > [Division of Family & Community Services](#) >

SNAP Federal Impact Center

Thank you!

