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## **A Guide to Illinois Medicaid**

What it is, How to get it How to use it, How to Keep it!

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## ***WHAT IS MEDICAID?***

Medicaid is a name for health insurance from the State of Illinois. It also has other names depending on what type of Medicaid Coverage Group you fit into. For example, the different Coverage Groups are called Moms and Babies, All Kids, Aid to the Aged, Blind and Disabled (AABD), and ACA Adult. Some people also call Medicaid the Medical Card.

Medicaid is used for doctor visits, hospital stays and much more. Medicaid is meant for people with limited income. Each state has its own rules about who can get Medicaid, though all states have to meet federal requirements.

This guide discusses the Illinois Medicaid program.

Information in this guide is current as of June 2019.



## How to Get Medicaid

The first step to getting Medicaid is to check your eligibility. Eligibility is based upon your monthly income and your household size. You must also be an Illinois resident. There are special rules for persons with disability, children, and pregnant women. The income limits are different for each Medicaid Coverage Group. The state looks at gross monthly income for each group. This means they look at your income before taxes or other paycheck deductions. Income limits may increase each year.

### 2019 Income Limits for Adults age 19-64

Number in Household	Max Monthly Income	Other Requirements:
1	\$1,436	You Must be a U.S. citizen or a "quaified alien" to get Medicaid as an adult.
2	\$1,945	
3	\$2,453	
4	\$2,961	
Each additional person	+\$508	

### 2019 Income Limits for Pregnant Women

Number in Household	Max Monthly Income	Other Requirements:
1	-----	No citizen or immigration status required.
2	\$3,002	
3	\$3,786	
4	\$4,571	
Each additional person	+\$785	

Medicaid for children is provided through the **All Kids** program. There are four different levels of All Kids. This means there are different income limits and out-of-pocket costs for families. Some families will have to pay a monthly premium and may have office visit co-pays.

2019 Income Limits (monthly) for All Kids				
# in Household	All Kids Assist	All Kids Share	All Kids Level 1	All Kids Level 2
1	\$1,530	\$1,634	\$2,175	\$3,310
2	\$2,071	\$2,212	\$2,945	\$4,481
3	\$2,613	\$2,791	\$3,715	\$5,652
4	\$3,154	\$3,369	\$4,485	\$6,824
Each additional person	+\$541	+\$578	+\$770	+\$1,171
Monthly Premium	\$0	\$0	\$15 (1 child) \$25 (2 children) \$5 (each 3-4) \$40 (5 or more)	\$40 (one child) \$80 (2+ children)
Office Visit Co-Pay	\$0	\$3.90	\$5.00	\$10.00
Additional Requirements	N/A	N/A	N/A	Must be uninsured for 3 months unless meet certain requirements

For more information about All Kids, visit the Illinois Department of Healthcare and Family Services website at <https://www.illinois.gov/hfs/MedicalPrograms/AllKids/Pages/about.aspx>

## Applying for Medicaid

It is recommended to apply online. You may also apply by paper application, phone or in-person at a local DHS office. If submitting a paper application or applying by phone, turn to page 12. If you need in-person help, turn to resources on page 16.

ABE, Application for Benefit Eligibility, is the online application for medical, food or cash assistance in the State of Illinois – [www.abe.illinois.gov](http://www.abe.illinois.gov) The ABE system is available in English or Spanish only.

After applying online, you will receive an electronic application tracking number and have proof of application. Manage My Case is an online system to manage your State of Illinois benefits like SNAP and Medicaid. Access to Manage My Case is given after your benefits are approved.

The Illinois Department of Human Services (DHS) processes the applications submitted through ABE. DHS refers to applicants and people with benefits as customers.

## Creating an ABE User Account

Refer to the complete ABE User Guide for step-by-step instructions to create an account. The **ABE User Guide** and other resources are available online at: [www.dhs.state.il.us/abe](http://www.dhs.state.il.us/abe).

NOTE: This account is the customer's account, not the provider's account. The user name and password should be something that you, the customer, will remember.

The User Name must be 5 to 20 letters and/or numbers.

The Password must be changed or reset every six months and must be a minimum of 8 characters and contain at least three of the following:

- one capital letter,
- lower case letter,
- one special character (! @ # \$ % & \*), and
- one number.

You also need to select **Secret Questions** and enter answers to those questions. These secret questions are used if you forget your password or if your password has expired. If a date or phone number is used as an answer to one of the secret questions, make sure you remember how it is entered. For example, did you write out the month or use the number abbreviation? Answers to the secret questions must be at least 5 characters.

## Completing the Online Application

Step-by-step instructions for completing the application, along with screen shots, are available in the ABE User Guide.

You select which benefits are needed. Check the box for all benefits you are requesting even if not needed for each person in your home.

You will need to enter the number of people in your home.

- If applying for SNAP or Cash, include yourself and everyone who lives with you.
- If applying for Medicaid, include people that live in your home AND include anyone you claim as a dependent on your federal tax return (even if they don't live with you).
- If you are age 19 or over and only applying for Medicaid, always include yourself and your spouse and children if they live with you. ONLY include your parents and others in the home IF they will claim you or you will claim them on your taxes.

You will enter information about each person in the **People in Your Home Section**. It is helpful to gather your family information before you start the application. Be ready to provide the following information on your application:

- Names and birthdays
- Information about income (pay stubs for past 30 days, possibly tax returns)
- Social Security Numbers\*
- Immigration information for non-citizens
- Child/Spousal Support Paid and Names of Absent Parents
- Amount of Housing Costs (rent/mortgage, property taxes)
- Cost of Monthly Utility bills
- Cost of Day Care

\*In this section, you will be asked for Social Security Numbers (SSN) and citizenship status.

There are times you need to provide information about people in the home who are not eligible for and/or are not requesting benefits.

**You are not required to give a SSN for people who are not requesting benefits for themselves.**

## More about Citizenship/Immigration Status

Persons who have a lawful immigration status or are documented non-citizens should be prepared to enter their USICS number (or A#) and document numbers.

**Citizenship Information**

Is this person a U.S. citizen?  Yes  No  
Anyone applying for benefits has to provide information on their immigration status.

Is this a request for emergency medical for a non-citizen?  Yes  No

Does this person have a sponsor?  Yes  No

Is this person a documented alien?  Yes  No

Document Type:

Document Number:

What is this person's alien registration number?

What was their date of entry?   
Ex: mm/dd/yyyy

### Document Types:

- I-551 (Permanent Resident Card)
- I-94 (Arrival/Departure Record)
- I-766 (Employment & Authorization)
- And more.

## Language

The application asks what language you speak and what language the State should use when mailing you notices.

**Where You Live**

\* Street Address:

\* City:  \* State:  \* Zip Code:

How many days each month does this person stay at this address?

What language should we use when we mail you notices?  English  Spanish

I am homeless right now. If you are homeless fill out a mailing address instead of this address.

The only language options for written notices are English and Spanish.

**Personal Information**

\* First Name:  Middle Initial:  \* Last Name:  Suffix:

\* Gender:  Male  Female

\* Date of Birth: MM/DD/YYYY  /  /

\* Please Confirm Date of Birth: MM/DD/YYYY  /  /

\* What is this person's marital status?

What language should we use when we contact you?

If you do not speak English well, it is important to select your language from the drop down menu.

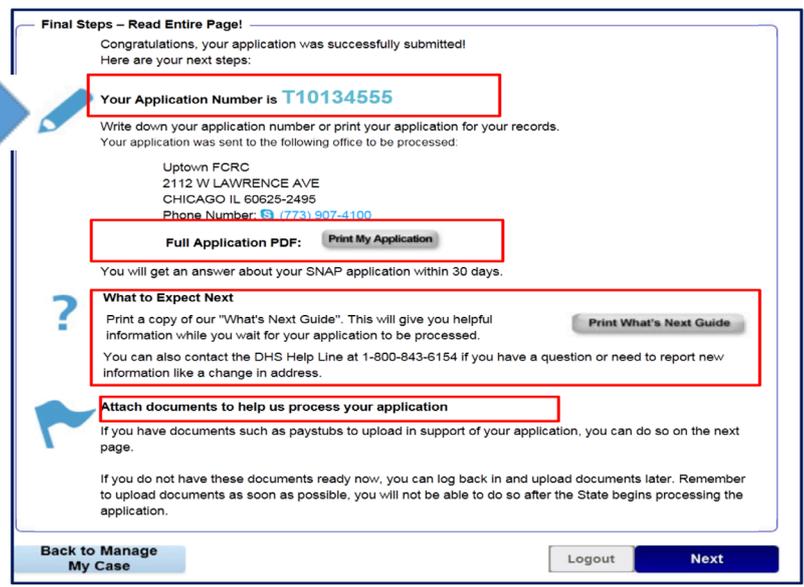
If your primary language is neither English nor Spanish, note what language is preferred in the Comments section and that an interpreter is needed. Written notifications will still be sent in English, but the State is required to accommodate other interactions by providing an interpreter. The State is required to provide interpreters at no cost. The process to access interpreters may vary by local office. It is best to note the need for an interpreter as part of the application so appointments may be scheduled.

## Supporting Documents (Proofs)

Continue with each section of the application, entering information about income and household. Before you sign and submit the application, review the rights and responsibilities section.

Once you submit the application, you may attach supporting documents (proofs) electronically. Scan and save documents on a computer and then upload them into the ABE application system. If you do not upload proofs at the time of application, DHS will send you a notice telling you to mail or fax the documents.

Proof of income is one of the most important items to upload. The state will attempt to electronically verify information through tax and employment information. It is very helpful to attach pay stubs or other proof of income, especially if you have had a recent change in income. Include your income for the past 30 days.



**Final Steps – Read Entire Page!**

Congratulations, your application was successfully submitted!  
Here are your next steps:

**Your Application Number is T10134555**

Write down your application number or print your application for your records.  
Your application was sent to the following office to be processed:

Uptown FCRC  
2112 W LAWRENCE AVE  
CHICAGO IL 60625-2485  
Phone Number: (773) 907-4100

**Full Application PDF:** [Print My Application](#)

You will get an answer about your SNAP application within 30 days.

**What to Expect Next**

Print a copy of our "What's Next Guide". This will give you helpful information while you wait for your application to be processed. [Print What's Next Guide](#)

You can also contact the DHS Help Line at 1-800-843-6154 if you have a question or need to report new information like a change in address.

**Attach documents to help us process your application**

If you have documents such as paystubs to upload in support of your application, you can do so on the next page.

If you do not have these documents ready now, you can log back in and upload documents later. Remember to upload documents as soon as possible, you will not be able to do so after the State begins processing the application.

[Back to Manage My Case](#) [Logout](#) [Next](#)

After you submit your application on-line, you will receive an Application Tracking Number. It is important to make a note of that tracking number, in case you need to follow up with DHS.

You may want to print a copy of the application. You will also see which local office your application was sent to and information about what to expect next.

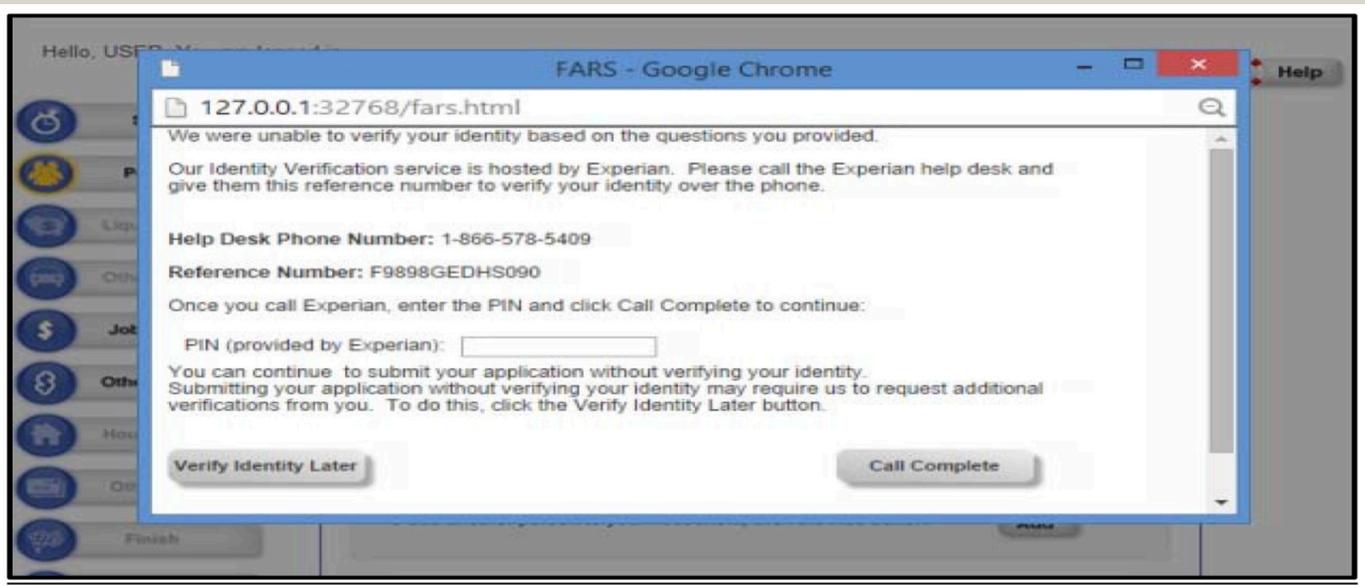
## Identity (ID) Proofing

When applying for benefits, the ABE system will launch the electronic ID proofing process to verify your identity. You will see a screen that asks questions only you would know, such as past addresses, family member names and more.

This ID proofing process is based on a person's credit history. You may not be able to complete the electronic ID proofing process if you do not have a credit history or if you do not know the answers to the questions. Examples of persons who may not have sufficient credit history to complete the electronic ID proofing include:

- Immigrants who have recently moved to the United States
- Children under age 18
- Persons without bank accounts

It is recommended that everyone try the electronic process first. If unable to answer the online questions, you will see a reference number and a message to call the Experian Help Desk to verify your identity over the phone. If successful, you will be given a PIN number.



***You may still submit an application online even if you cannot complete the ID proofing process online or over the phone. Click [Verify Identity Later] to proceed with the application.***

## Manual ID Proofing

ID proofing must be done for you to use Manage My Case. As of January 2019, there is a way to request State Manual Identity Proofing. Go to the DHS webpage at <http://www.dhs.state.il.us/page.aspx?item=76721> and locate the State Identity Proofing Request Form.

You must have an ABE User Account before returning this form. Every section of the form must be completed or it will not be processed. Send copies of your proof documents to the ID Proofing Unit. Page 3 of the form lists the types of documents that will be accepted. You may send a copy of one (1) document from Column A or two (2) documents from Column B to the ID Proofing Unit. Allow 6-8 weeks to hear back from the state.

**Illinois Department of Healthcare and Family Services  
ATTN: ID Proofing Unit  
P.O. Box 19122  
Springfield, IL 62794-9122**

Once the State processes the request, you will receive notice that says whether the request was approved or denied. If successful, log into ABE with the user name you provided on the request form and enter your personal information to link the account to your case.

The personal information to enter includes Date of Birth and Individual ID. If you do not know your Individual ID, you should be able to enter a Social Security number instead. Once you link your account, you will be able to use the Manage My Case part of ABE.

The State Identity Proofing Request is a new process. There are plans to allow for uploading the form and documents at time of the ABE application. As of Spring 2019, that process is not yet available. You will also be able to request ID Proofing at local DHS offices. The State is currently pilot testing this process at several Family Community Resource Center offices.

## **Tips for Applying by Phone, In-Person, or by Mail/Fax:**

### **Phone Applications**

Call 1-800-843-6154 to apply by phone. There may be long hold times, especially mornings and over the lunch hour. Try calling at off-peak hours.

You may ask for the name of the caseworker who takes your call. Make a note of their name, day and time of your call on a calendar. This documentation may be important if there is an issue with your application.

You may still have to mail proofs before DHS can process the application.

### **In-Person at Local DHS office/FCRC**

You may apply in person at your local FCRC. Each office handles walk-in customers differently.

Some offices will have you wait and be seen by a caseworker who will do an application in real-time. Ask for the name of the caseworker and note the day/time you met with the person.

Many offices will give you a paper application and tell you to fill it out and leave it in a box at the front desk in the office. There should also be a log book. It is important to write your name in the log book and note that you dropped off an application. This will help protect your original application date if your application is lost.

Bring copies of any proofs you need to include. *Never* leave original proofs with your application.

### **Paper Applications**

You may complete a paper application and return it by mail or fax. If returning by mail, you should ask for delivery confirmation or even send via certified mail. This way you will have proof that the application was received if the office loses the paperwork. Include copies of proofs - never send original documents.

If returning by fax, be sure to keep a copy of the fax confirmation sheet. This may be used to prove that the fax went through and the date you sent the application.

### **Community Agencies**

There are a number of community based agencies that help with Medicaid applications. Community health centers, local health departments, food pantries and other social service agencies may have staff that can help you apply. See the resources section for more information (page 16).

## How long before I hear back?

State policy is to process Medicaid applications within 45 days. However, there have been times when there are processing delays. If you have been waiting past 45 days, you may have the right to receive a Temporary Medical Card. You may request a Temporary Card and use until DHS processes your application.

Once a decision is made, you will receive a written notice from DHS. If approved, you will also receive an HFS Medical Card. If your application is denied and you disagree with the decision, you have 60 days to appeal the decision.

For more information about how to file an appeal, visit <http://www.dhs.state.il.us/page.aspx?item=44946>

## How to Use Medicaid

Once you are approved for Medicaid, you will receive a Paper Medical Card.



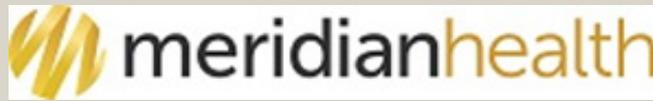
Soon after, you will also receive a letter about picking a HealthChoice Illinois plan. The HealthChoice Illinois Program is a managed care system. This means you will pick a health plan (like an insurance plan) with a group of doctors, hospitals and other providers who will manage your care. You must pick a primary care provider in a health plan and see providers that are in your plan's network. You may change doctors at any time as long as you pick a doctor within your plan's network.

To learn more about the HealthChoice Illinois plans in your area and to pick a plan and a provider, visit <https://enrollhfs.illinois.gov/> or call 1-877-912-8880.

If you do not pick a plan or a provider, you will be assigned to one. Once your plan begins, you may change plans only one time in the first 90 days. If your plan begins June 1 and you learn your doctor does not accept the plan, you have until August 31 to switch plans. After that, you will be locked into the plan for one year. About 60 days before your one-year anniversary with the plan, you will have an open enrollment period. During that time, you may change plans or keep the same plan.

Until you pick a plan, you will use the paper Medical Card when you see a provider for your care. One your plan's coverage begins, you will use the insurance card from the plan.

The HealthChoice Illinois plans are currently managed by the following companies:



**Note:** *If you have Medicare, you do not enroll in Health Choice Illinois. There are other plans for you in the MMAI Program (Medicare-Medicaid Alignment Initiative).*

## Getting Care

Once you have Medicaid, it is important to schedule a checkup at the doctor. This is important especially if you are a new patient.

You may need to bring:

- Photo ID
- Medical Card
- Any current medication you are taking

Medicaid covers transportation to medical appointments. Call your Health Plan for help with transportation.

All Illinois Medicaid plans include the following services:

- 24/7 Nurse line
- Behavioral health services
- Dental care services
- Doctor services
- Eye care services
- Hearing services
- Home health care
- Hospice care
- Hospital services
- Lab tests and x-rays
- Medical supplies
- Prescriptions
- Therapy
- Transportation

The health plans also have Care Coordinators who will help you find the providers and services you need. Care Coordinators help with referrals, appointments, transportation to appointments and more. Call your plan's Member Services number to ask for a Care Coordinator.

Some plans offer extra benefits. Check with your plan to see if you qualify for these benefits. Examples of extra benefits include: free car seats, gift cards, gym memberships, Weight Watchers membership and more.

## How to Keep Medicaid

Once a year, you need to renew your Medicaid. This process is known as Redetermination (or REDE for short).

About 10 months to 1 year after you apply for Medicaid, you may get a REDE letter in the mail to check if you are still eligible for Medicaid. If you have a Manage My Case (MMC) account, you can see your letter and renew your Medicaid online.

To keep Medicaid, you need to follow the directions on the REDE letter. If you do not have a MMC account, return the paperwork to the address listed.

**You must return the form even if all of your personal information is the same.**

If you don't get this letter in the mail or you have questions, call the DHS Helpline at (800) 843-6154. However, at this time, the DHS Helpline is unable to help you renew your Medicaid over the phone.

You will NOT get a new medical card at this time. If you lose your medical card at any time, call the DHS Helpline to get a new card, or log into your MMC account to print a copy.

Around the same time, you will also get paperwork to keep or change your health plan or doctor. Follow the directions on this paperwork. If you do nothing, you will keep your current health plan for the next year. If you want to change to a different health plan, this is the time to do so.

If you return the REDE form late or do not send it back, your Medicaid case may be cancelled. You have 90 days (3 months) from the cancellation date to return the form and proofs and have the case reopened. If past 90 days, you will have to complete a new Medicaid application.

### **Medical Management Unit (MMU)**

Some Medicaid-only cases are managed by the Medical Management Unit located in Chicago or Homewood, Illinois. This unit is an electronic processing hub. This office does not see customers in person. Do not travel to visit this office. The DHS workers there manage the renewals and changes for Medicaid only cases. If your case is assigned to this office, you may try calling or emailing. The contact information for this unit is: Email: [DHS.MMU@illinois.gov](mailto:DHS.MMU@illinois.gov)

Medical Management Unit – Homewood: (708) 957-8352

Medical Management Unit – Chicago: (312) 793-2152

# Resources

## In-Person Assistance

Many community agencies and local health centers help with Medicaid applications. Here are just a few agencies that provide *in-person* help in the Western suburbs. Ask for a Benefits & Enrollment Specialist or Medicaid application assistance when calling or visiting.

### **Pillars Community Health**

Multiple Locations

708-745-5277

[pillarscommunityhealth.org](http://pillarscommunityhealth.org)

### **Hamdard Healthcare**

Multiple locations

630-835-1430

<http://www.hamdardcenter.org/>

### **Aunt Martha's Health & Wellness**

Multiple Locations

877-692-8686

<https://www.auntmarthas.org/>

### **Loaves & Fishes Community Services**

1871 High Grove Lane, Naperville

630-355-3663

<https://www.loaves-fishes.org/>

### **DuPage County Health Department**

Multiple locations

630-682-7400

[www.dupagefederation.org](http://www.dupagefederation.org)

### **PCC Community Wellness Center**

Multiple Locations

708-383-0113

<https://www.pccwellness.org/>

## Community Health Worker Network

Thanks to funding from Community Memorial Foundation and Healthy Communities Foundation, there is a new resource through a community health worker network in the Western Suburbs. Community Health Workers (CHWs) serve as a liaison between community members and local health and social service providers. CHWs can help you access services and help you apply for Medicaid and other benefits. Here are some of the local CHW agencies that are part of this network:

### **Aging Care Connections (serving seniors)**

111 West Harris Ave., LaGrange

708-354-1323

<http://www.agingcareconnections.org/>

### **Healthcare Alternative Systems**

1913 Roosevelt Road, Broadview

708-498-0200

[www.hascares.org](http://www.hascares.org)

### **Alivio Medical Center**

6447 Cermak Rd., Berwyn

773-254-1400

<https://www.aliviomedicalcenter.org/>

### **Mujeres Latinas en Acción**

7222 W. Cermak Road, North Riverside

773-890-7676

<https://mujereslatinasenaccion.org/>

### **BEDS Plus**

9601 Ogden Ave, LaGrange

708-354-0858

[www.beds-plus.org](http://www.beds-plus.org)

## Online Resources

For more information about Medicaid and Health Care:

[www.getcareillinois.org](http://www.getcareillinois.org)

For more information about Health Choice Illinois (Medicaid Managed Care):

[www.enrollhfs.illinois.gov](http://www.enrollhfs.illinois.gov) – to review and choose a plan and provider

### Health Choice Illinois – Managed Care Plan websites:

- Blue Cross Community Health Plan- <https://www.bcbsil.com/bcchp/>
- County Care- <http://www.countycare.com/>
- IlliniCare- <https://www.illicare.com/members/medicaid.html>
- Meridian -<https://corp.mhplan.com/en/member/illinois/meridianhealthplan>
- Molina Health Care - <https://www.molinahealthcare.com/members/il/en-US/Pages/home.aspx>
- Next Level - <https://nextlevelhealthil.com/>

TIP: Look for the benefits section on each website to learn more about what each plan can provide to you.

### Other Resources:

Application for Benefits Eligibility - <https://abe.illinois.gov>

Illinois Department of Healthcare and Family Services - <https://www.illinois.gov/hfs/MedicalClients>

All Kids (Healthcare for Kids) - <https://www.illinois.gov/hfs/MedicalPrograms/AllKids>

Illinois Department of Human Services - <http://www.dhs.state.il.us/>

Get Covered Illinois (Health Insurance Marketplace) - <https://getcovered.illinois.gov/en>

# Glossary

**AABD** - Aid to the Aged, Blind, Disabled. A Medicaid program for persons who are age 65 or older, or who are blind or disabled.

**ABE** - Application for Benefit Eligibility. This is the online application for Medicaid and other State of Illinois benefits like SNAP (Food Stamps) or Cash Assistance. Access via [www.abe.illinois.gov](http://www.abe.illinois.gov).

**ACA** - Affordable Care Act. Also referred to as Obamacare. This law expanded Medicaid coverage to low-income, non-disabled adults without dependent children. This law also provides access to financial help to pay for health insurance.

**DHS** - Illinois Department of Human Services. This is the State agency that processes applications for Medicaid and other state benefits.

**FCRC** - Family Community Resource Centers. The local DHS offices where you can go to get help if there is an issue with your case. This is where DHS caseworkers who process applications work.

**FPL**- Federal Poverty Level. This is an income measure is used to determine eligibility for public benefits.

**HFS** - Illinois Department of Healthcare and Family Services. This is the State agency that manages the Medicaid program in Illinois. This agency writes policy, pays medical providers, and oversees the Managed Care Organizations.

**MCO** - Managed Care Organization. Private insurance companies that coordinate your care through the Medicaid program.

**MMC** - Manage My Case. This is the online system to manage your State of Illinois benefits. Access MMC through the ABE website.

**SNAP** - Supplemental Nutrition Assistance Program. Also known as food stamps. Monthly food benefits from the state.

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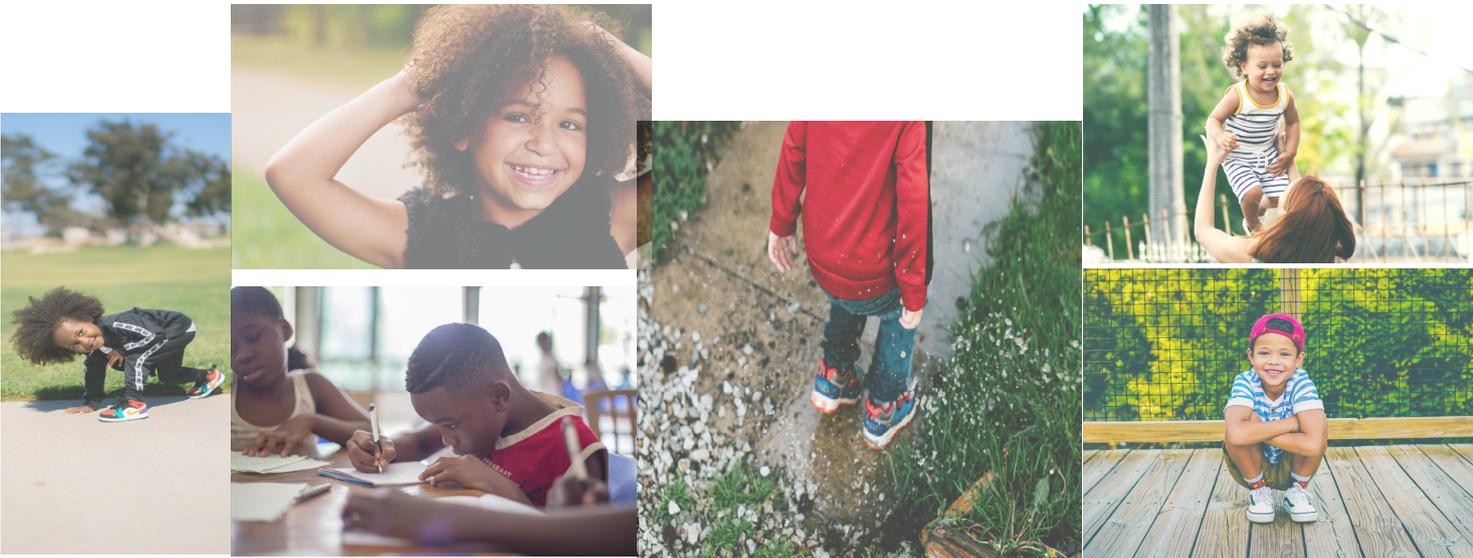
CHAT, formally Center for Speech & Language Disorders



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