



# ABE 101: Completing an Application

Document Submission and Manage My Case


April 29<sup>th</sup>, 2025

# Document Submission



# Submission Summary

**Keep Track of Your Application**  
Your tracking number for this application is **T10012188**.  
Be sure to write this number down or print this page for your records.  
  
If you are applying because you have a disability, you will get a notice about medical benefits within 60 days of your application date. If you do not have a disability, you will get a notice within 45 days.  
  
You will get an answer about your SNAP application within 30 days.  
  
If you have a question about your application or need to report new information you may contact the office listed at the top of this page. It will be helpful to have your tracking number.

**Print Your Application**  
DO NOT MAIL THIS APPLICATION. Print or save it for your own records only.  
  
To print, click on the Print My Application button below. If you decide to print or save a copy keep in mind this application has your private and personal information on it.  
  
[Print My Application](#)  
  
You will need to have a program called Adobe Acrobat Reader to see and print this application. If you do not have this program on your computer, you may install it for free by clicking on the icon below.  
  


**Your Next Steps**  
Based on the application you submitted, there are some steps that you may take to help us process your application. Click Next to continue.

[Back to ABE](#) [Next](#)

After viewing the submission summary, click 'Next' to submit documents.



# Select Type of Proof

People often misconstrue this to be a list of required documents. It is not.

Scroll through this list and click all the types of proof you have that are relevant to the case.

If you forget to list something, there will be opportunities to add documents later.

Who	Proof That May Be Needed	Examples of Documents That May Serve as Proof													
		Provide one of the following documents: US Passport, Certificate of Naturalization, Certificate of US Citizenship (N-560 or N-561) or a document from a federally recognized Indian tribe.  If these are not available provide one item from each column for each U.S. citizen:													
	<input type="checkbox"/> Proof of Citizenship	<table><thead><tr><th>Place of birth</th><th>Identity</th></tr></thead><tbody><tr><td rowspan="2">Certified copy of a birth certificate from the state or county where the person was born</td><td>Driver's License</td></tr><tr><td>State issued ID card</td></tr><tr><td>Final adoption decree</td><td>School ID</td></tr><tr><td rowspan="2">Official military record that shows a place of birth</td><td>U.S. Military ID</td></tr><tr><td>U.S. military dependent card</td></tr><tr><td rowspan="2">Papers showing the person was employed by the U.S. government before 1976.</td><td>Other government ID (city, county or state issued)</td></tr><tr><td>For children under age 16, school or daycare records, or a parent or guardian's signature on this application</td></tr></tbody></table>	Place of birth	Identity	Certified copy of a birth certificate from the state or county where the person was born	Driver's License	State issued ID card	Final adoption decree	School ID	Official military record that shows a place of birth	U.S. Military ID	U.S. military dependent card	Papers showing the person was employed by the U.S. government before 1976.	Other government ID (city, county or state issued)	For children under age 16, school or daycare records, or a parent or guardian's signature on this application
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	For children under age 16, school or daycare records, or a parent or guardian's signature on this application														
	<input type="checkbox"/> Proof of Illinois Residency	Illinois driver's License, rent/ lease/ mortgage receipt, utility bill, document from U.S. Department of Homeland Security, medical records/ clinic cards, home owners insurance, statement from homeless shelter, property tax bill, employment records, school enrollment records, mail document showing postmark within last 30 days with Illinois address, other ID with a name and address.													
	<input type="checkbox"/> Proof of SSN	Social Security Card													
	<input type="checkbox"/> Proof of living with	Proof of a child living with a parent or caretaker relative													



# Submitting Documents

## Upload Documents

You can use this screen to upload your documents by following these 3 easy steps.

### Step 1

First, you'll need to choose the household member who the document is for. Once you have done that, please let us know what type of document you are uploading by selecting the correct Type of Proof and Document Type from the menus below.

**It's important to add only one document type at a time, and to select only the correct person for each document type.**

[View a list of documents currently needed for your case.](#) You may also enter comments into the box below.

\* Household Member:

▼

\* Type of Proof

▼

\* Document Type

▼

Comment (Optional)

### Step 2

Next, you'll need to add the file that you plan on uploading. To do so, click Browse and then select the file from your computer. After you have selected the file, make sure to click the ADD button. the file should then appear in the chart below.

**The types of files supported for upload are: jpg, jpeg, tif, tiff, png and pdf.**

No file chosen

To add more than one document, please return to Step1 before continuing to Step 3. You may add up to 10 documents before moving on to step 3 and submitting your upload.

**We strongly advise you upload documents within 24 hours of the application.**

If a caseworker opens the application before you submit documents, you may lose your ability to upload them online.



**Step 1:** Select the household member the document is relevant to, the type of proof, and document type. (e.g. Johnny Appleseed, Proof of Residency, Drivers License)

**Step 2:** Attach the file. Please note that uploads are limited to 2MB. Each document should have their own upload. Do not submit multiple documents at once.

**Step 3:** Add document.

# Documents to always submit, if applicable

Type of Proof	Document Needed
Pension Income	Most recent 1099R
Self Employed Income	1099 and/or self employment ledger listing work related expenses
Unemployment	Unemployment Statement
Alien Registration Number	Copy of the front <b>and</b> back of green card for all Legal Permanent Residents in the household
Work Income	Last 30 days of paystubs and/ or written letter from employer that includes a date, amount earned, and frequency paid. Employer should type the letter and use business letter head if possible.



# Recommended Documents (not required, but encouraged)

Type of Proof	Document Needed	Why do we recommend?
Identification	Illinois State ID/ Drivers License	All information on ID if you want to complete identity proofing.
Social Security Income	Social Security Award Letter	Allows benefit counselor to confirm gross income and verify eligibility
Medical Expenses	Bills or receipts for Medicare premium, supplemental premium, medical supplies, doctor co-pays, medical transportation, hospital visits, dental or vision care, and prescriptions	Can be used as deductions for SNAP benefits



# Verification Checklist

When IDHS is unable to verify a piece of information they will send a Verification Checklist.

The checklist states who the verification is for, what type of proof is needed, and the documents they can accept.

Often, the deadlines are short so action needs to be taken immediately.

## Verification Checklist

We need the items listed below to determine your eligibility. If you have an office interview **BRING** the items with you. If you have a phone interview or are applying for medical only, return these items as described in the instructions on the last page of this document.

**What you need to give us** - Give us the information that is marked below by the due dates listed below.

Please return at least one of the requested examples for each verification and person listed below **by no later than August 29, 2016**. If you do not respond by **August 29, 2016** your SNAP, Cash and/or Medical benefits could be reduced, cancelled or denied.

Please include the last 60 months of bank statements from INB Bank for Mary.

Name of Person	What is Needed	Examples	Required For
Mary Mary	See the statement above	Provide the information listed above	Cash, Medical

If you need more time or help in getting information, notify your Family Community Resource Center listed above before the interview date or due date.





# Manage My Case



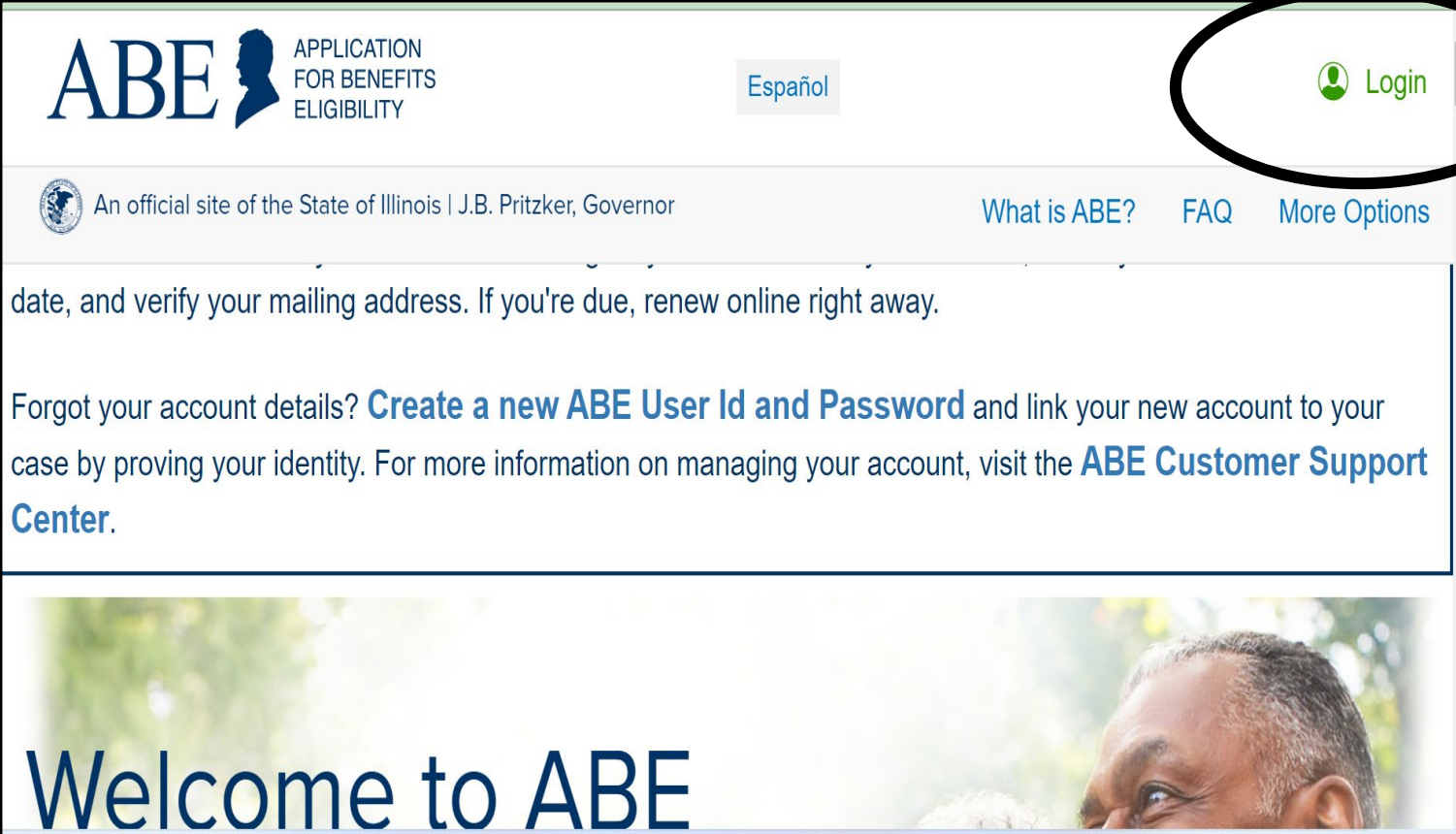
# What is Manage My Case?

- Manage my Case is a Portal that allows you to:
  - File Redeterminations
  - Apply for new benefit programs
  - View the status of any existing benefit cases
  - View important decision notices issued by IDHS
  - Report Changes
  - Upload documents



# Accessing Manage My Case

Step One: Log in using the person's ILogin and ABE accounts



The screenshot shows the ABE website header with the logo "ABE APPLICATION FOR BENEFITS ELIGIBILITY" and a "Español" language toggle. The "Login" button, featuring a person icon, is circled in black. Below the header, a banner states "An official site of the State of Illinois | J.B. Pritzker, Governor" with links for "What is ABE?", "FAQ", and "More Options". The main content area includes a paragraph about verifying mailing addresses and a link to "Create a new ABE User Id and Password". A "Welcome to ABE" banner at the bottom features a photo of a man.



# Log in screen

## ABE Access

All users of abe.illinois.gov are required to create an ILogin account with State of Illinois **and** an ABE profile.

- ☐ **Create an ILogin Account** I do not have an ILogin account with state of Illinois.
- ☐ **Connect an ABE Profile** I am a first-time or existing ABE user and I have an ILogin Account.
- ☐ **ABE Sign In** I have an ILogin account and connected my ABE profile

An ILogin Account allows you to apply for and manage your SNAP, Cash and Medical Benefits.

- ✓ Apply for more benefits or renew benefits
- ✓ Update your contact or household information
- ✓ Sign up for electronic notification
- ✓ File and manage appeals
- ✓ Review notices about your case

[Apply for benefits without an Account](#)

To access Manage My Case you will need to either create an ILogin and/or ABE account or sign in to their current account.



# Creating an ILogin account

**ILogin**

**Sign up**

Fields are required unless marked optional.

Email  
elio@gmail.com

First name  
Eli

Last name  
Olio

Honorific suffix Optional

Middle name Optional

Password requirements:

- ✓ At least 8 characters
- ✓ A lowercase letter
- ✓ An uppercase letter
- ✓ A number
- ✓ A symbol
- ✓ No parts of your username
- ✓ Does not include your first name
- ✓ Does not include your last name

Password  
.....

**Sign Up**

Already have an account? [Sign In](#)

Enter the client's email, name, and create a password.

Note: Do not enter your email or someone else's who may use ILogin in the future (also used for SSA.gov). Only one account can be attached to an email.



# Select “Set up” under email

Select Email if shown PLUS at least one other security method to access your State of Illinois - ILogin account



## Email

Verify with a link or code sent to your email

Used for recovery

[Set up →](#)



## Google Authenticator

Enter a temporary code generated from the Google Authenticator app.

Used for access

[Set up →](#)



## Okta Verify

Okta Verify is an authenticator app,



## Sign In

Email or Username

elio@gmail.com

☐ Keep me signed in

[Next](#)



[Elio@gmail.com](#)

## Verify with your password

Password



[Verify](#)

[Forgot password?](#)

[Back to sign in](#)

Next you will be directed to select a security method. All accounts will be required to set up an email. After clicking “Set up” you may enter the client’s email and password.

# Enter code sent to email

iLogin

2.



Verification email sent

To finish signing in, check your email.

[Back to sign in](#)

## State of Illinois

Hi John,

An iLogin account has been created. Your username is **abeuser111deloitte@mailinator.com**

You will need to complete the activation and configuration of your account via the activation link below.

When requested to setup your Multi-Factor Authentication (MFA), it is suggested you setup at least two authentication methods. If one is not available, you have the option to switch to another method without contacting the support team. Okta Verify is a preferred method.

Click the following link to activate your account:

[Activate iLogin Account](#)

This link expires in 7 days.

3.

An email will be sent to the client's email address that will include a code. Enter the code on your screen.

iLogin



iAuthentication

(8) test@gmail.com

A code was sent to your phone. Enter the code below to verify.  
Carrier messaging charges may apply

Enter Code


000000

Verify

[Return to authenticator list](#)

[Back to sign in](#)



 susiesnowflake@mailinator.com

## Set up security methods

Security methods help protect your iLogin-Dev - State of Illinois account by ensuring only you have access.

### Set up required



#### Google Authenticator

Enter a temporary code generated from the Google Authenticator app.  
Used for access

[Set up →](#)



#### Okta Verify

Okta Verify is an authenticator app, installed on your phone or computer, used to prove your identity  
Used for access or recovery

[Set up →](#)



#### Phone

Verify with a code sent to your phone  
Used for access or recovery

[Set up →](#)



#### Security Question

Choose a security question and answer that will be used for signing in  
Used for access

[Set up →](#)



#### Phone

Verify with a code sent to your phone  
Used for access or recovery

[Set up →](#)



#### Security Question

Choose a security question and answer that will be used for signing in  
Used for access

[Set up →](#)

# Set up second security method

The client can opt to set up a second security method by phone, security questions, or authenticator apps.

As caseworkers, it can be helpful to use security questions to avoid having to contact the client each time we access their account.





# Connect the ABE Profile

Once both security methods are verified, you will be directed back to the log in screen to connect an ABE profile.

## ABE Access

All users of [abe.illinois.gov](http://abe.illinois.gov) are required to create an ILogin account with State of Illinois **and** an ABE profile.

- ☒ **Connect an ABE Profile** I am a first-time or existing ABE user and I have an ILogin Account.

An ILogin Account allows you to apply for and manage your SNAP, Cash and Medical Benefits.

- ✓ Apply for more benefits or renew benefits
- ✓ Update your contact or household information
- ✓ Sign up for electronic notification
- ✓ File and manage appeals
- ✓ Review notices about your case

Exit

Next



# Connect the ABE Profile

## Connect an ABE Profile

Enter your current ABE user ID and password :

• User ID

• Password

**Next**

[I have never had or cannot remember my ABE login information](#)

If the client has a previous ABE profile you may enter their User ID and password.

If the client does not have a previous account, click the blue hyperlink at the bottom to create the profile.

Note: When entering a previous profile you may encounter an error. Click the blue hyperlink to bypass the error.

## Connect an ABE Profile

Success! Your ILogin Account **Testy12@mailinator.com** is connected to ABE.

**Next**

# Select “Manage My Case”

Click here to go to Manage My Case

## Apply For Benefits

Welcome! Please click one of the buttons to tell us what you would like to do. Then click the Next button at the bottom of the page.

- ☐ **Start a new application for Health care coverage, SNAP, Cash Assistance, and/or Medicare Savings Program.**  
For most people, it will take approximately 30 minutes to fill out the application.
- ☐ **Keep working on an application that you have already started.**
- ☐ **Check the status or view an application that you have already submitted.**
- ☐ **Manage My Case.**
- ☐ **File or Manage Appeal.**

As you apply for benefits, **please do not use the Forward, Back or Stop buttons on your web browser** to move from page to page. Instead, use the buttons on this website.

**Note:** You will be logged out after 15 minutes of inactivity.  
If you have technical difficulties using this website, please [Report Technical Difficulties](#)

Exit

Next



# Link Your Account

Hello, Sarah. You are logged in.

**Link Your Account**

**Case Summary**

Welcome. This page gives you a quick look at the status of your application for SNAP, Cash Assistance and Healthcare Coverage.  
If you are ready to end your ABE session, be sure to Logout.

**What is the status of my Application?**  
Here is a summary of the application:

Application Number
T00101511

**ABE** APPLICATION FOR BENEFITS ELIGIBILITY

Help | Print | Logged in: happymee | Logout

Am I Eligible? | Apply For Benefits | Appeals

Hello, Kim. You are logged in.

**Welcome**  
Are you trying to link your account or apply for benefits?

☐ Apply for benefits (or view submitted applications)

☒ **Link your account**

Exit | Link Your Account

Official Site of The State of Illinois

Privacy Statement | HFS Home | DHS Home | HFS Brochures and Forms | DHS Forms | DHS Resources | Frequently Asked questions (FAQ)

### Linking your ABE Account to your case

This page should be used by individuals who have already applied or who have an existing SNAP/TANF/Medical/MSP case. If you would like to start a new application, please [click here](#)

If you have technical difficulties using this website please [click here](#)

Some items have a star (\*) next to them. You must fill these items in before you can go on to the next page.

Please follow the steps below to link your ABE Account to your case so that you can see if you are eligible for benefits and handle your account. ABE is a secure website run by the State of Illinois. By law, we must keep your information private and secure

### Personal Information

First, please enter your date of birth and your Individual ID from your case. You can find your Individual ID on any letter you've received about your case. If you don't have your Individual ID, you can give us your Social Security number instead. **(You only need to give your SSN if you do not have your Individual ID)**

If you cannot locate your Individual ID and do not have your Social Security Number, please contact the Call Center at: (800) 843-6154

\*Date of Birth:

If your birthday is March 31, 1960, type 03/31/1960.

MM	DD	YYYY
<input type="text"/>	<input type="text"/>	<input type="text"/>

\*Please Confirm Date of Birth:

If your birthday is March 31, 1960, type 03/31/1960.

MM	DD	YYYY
<input type="text"/>	<input type="text"/>	<input type="text"/>

\*Individual ID (10 digits):

You can find your individual ID on any letter you've received about your case. If you don't have your Individual ID, you can give us your Social Security number in the box below.

If you cannot find your Individual ID, please provide your Social Security Number

\*Social Security number:

<input type="text"/>	-	<input type="text"/>	-	<input type="text"/>
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\*Please Confirm Social Security number:

<input type="text"/>	-	<input type="text"/>	-	<input type="text"/>
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**IMPORTANT!** Although there is a red asterisk marked by 'Individual ID' it is not actually a required field.

If the client has a social security number, **do not** put anything in this box. It can cause glitches.



# Verify the client's identity

You only need to verify identity once – either at the time of application or when accessing Manage My Case for the first time.

Hello, USER. You are logged in.

## Verify Identity

We can verify your identity using your Illinois Driver's License or State ID Card. If you do not have an Illinois Driver's License or State ID Card, we will attempt to verify your identity using another method.

\* Do you have an Illinois Driver's License or State ID Card?

☐ Yes

☐ No

Back

Verify Identity Now



# Multiple Cases

**ABE** APPLICATION FOR BENEFITS ELIGIBILITY

Help | Print Logged in [redacted] | Logout

Am I Eligible? | Apply For Benefits | Manage My Case | A...

### Case Selection

Please click on the 'Click Here to Report Changes' link for the case you would like to report changes on through

Case #	Case Status	Report Changes?
123682891	Denied	Click Here To Report Changes
925425489	Approved	Click Here To Report Changes

Site of The State of Illinois

Note: If you ever need to contact a case manager, try to have the case ID # ready before you speak with them. Case IDs can also be found on the upper right-hand corner of paper notices.

If the client has a closed case in the system, you will see the case number and the word 'denied' or "terminated" under case status.

Click the '**Click Here to Report Changes**' button next to the '**Approved**' case to access the Manage My Case for their current benefits.



# Manage My Case Home Screen

The screenshot shows the 'Case Summary' tab selected. At the top are four tabs: 'Case Summary', 'Benefit Details', 'Contact Information', and 'Account Management'. Below the tabs are two buttons: 'Report My Changes' and 'Apply for Other Benefits'. A text box explains the purpose of the page. Another text box mentions privacy and security. A link to 'Control benefit information' is present. A section titled 'What is the status of my benefit programs?' contains a table of benefits. An arrow points from an orange callout box to the 'Cancel Your Case' link.

**Case Summary** | Benefit Details | Contact Information | Account Management

**Report My Changes** Click this button to report changes to your DHS or HFS Office.

**Apply for Other Benefits** Click this button to apply for additional benefits.

Welcome to the Case Summary Page. This page gives you a look at your benefits, and lets you know if there is anything you need to do to receive or continue benefits. From this page you can find information about your [benefit status](#), [verifications](#), [notices](#), [application](#) or [change report status](#).

We have taken a number of steps to keep your information private and secure. To learn more, [view your security and account management information](#).

As a head of household, you can [control benefit information displayed to other adults in your household](#).

**What is the status of my benefit programs?**

You have requested or are receiving the benefits mentioned below. Click on the "Click Here" link to view a summary of your benefits. This information is current as of **January 5, 2023 01:27 AM**.

Follow this link and select **Other Changes** to **Cancel Your Case**.

Benefit	Description	Summary
	Food Assistance Program	<a href="#">Food Assistance Program Details</a>
	Healthcare Coverage Program	<a href="#">Healthcare Coverage Program Details</a>

Each tab has a unique use relevant to the client's case

You can choose to cancel benefits here.

This section shows 'What verifications are due?' with buttons for 'View Upload History' and 'Upload Documents'. Below is 'What are my available notices?' with a 'View notices' link. At the bottom is 'What is the status of my ABE application, Redetermination, or Reported Change?' with a table of reported changes.

**What verifications are due?**

No documents have been requested at this time. You can still upload documents.

**View Upload History** Click this button to view documents that have been requested.

**Upload Documents** Click this button to upload verification documents.

**What are my available notices?**

To view the details about notices sent to you regarding your case, you can click on the "Click Here" link below. This information is current as of **June 29, 2016 02:01 PM**.

**Available**

[View notices](#) sent in the last 12 months.

**What is the status of my ABE application, Redetermination, or Reported Change?**

**Reported Changes**

Application Number	Date	Status	Details/Action
0000455601	July 13, 2016	Pending	<a href="#">Continue</a>

The options to view and upload requested verifications will appear here.

"View notices" will take you to a log of every letter sent to the client.

The status of previous change reports can be viewed in this section





# Manage My Case Tabs



# Case Summary Tab

On this tab you can view previous notices that were mailed to the client.

**What are my available notices?**

To view the details about notices sent to you regarding your case, you can click on the "Click Here" link below. This information is current as of **May 20, 2015 EST.**

**Available Notices**

Please [click here](#) to view the list of notices sent in the last 12 months.



**What is the status of my ABE application, Redetermination, or Reported Change?**

Application status.

Application Number	Date	Status	Details/Action
T00101294	May 20, 2015	Submitted	

If you would like to cancel your case, [click here](#) and select **Other Changes**.

Reported Changes.

Application Number	Date	Status	Details/Action
2000265022	May 28, 2015	Submitted	
9000270499	June 8, 2015	Submitted	
8000272581	June 8, 2015	Pending	<a href="#">Continue</a>

Request for Additional Benefits status.

Application Number	Date	Status	Details/Action
270504	June 4, 2015	Pending	<a href="#">Continue</a>

Here, you can view all previous applications, redetermination, or change reports.

# Benefit 'Details' Tab

When you click to view the summary, you will find information about the case. For SNAP, this includes redetermination dates, benefit amounts, and how much they will receive in the following months (this is helpful when a client's benefits are being garnished for overpayment).  
\* We do not have a photo of this section.

## What is the status of my benefit programs?

You have requested or are receiving the benefits mentioned below. Click on the "Click Here" link for each program to view a summary of your benefits. This information is current as of **January 26, 2023 01:52 AM**.

Follow this link and select **Other Changes** to **Cancel Your Case**.

Benefit	Description	Summary
	Food Assistance Program	<a href="#">Food Assistance Program Details</a>
	Healthcare Coverage Program	<a href="#">Healthcare Coverage Program Details</a>

## Benefit Details



Medical ID (ID#):

You have ACA Adult coverage.

Your coverage started on August 2016.

Your next medical redetermination must be completed by **April 2023**. In the meantime, you must continue to [report changes](#).

[View or print your HFS Medical Card](#) in your available notices.

[View your approval notice](#) to see how your benefits were determined

### Actions you may need to take:

- Your Earned Income Payment is due on Friday, February 22, 2019.

MCO Plan Name: BLUE CROSS BLUE SHIELD IL MMCP

Your MCO Plan contact phone number is 877-860-2837. [Visit your MCO Plan website](#).

MCO Plan Anniversary Date: January 1, 2021 (You can switch plans 60 days before this date)

[View your notices](#) for more information about what was requested.

[Back to Summary](#)

# Contact Information Tab

**Case Summary** **Benefit Details** **Contact Information** **Account Management**

**Your Contact Information**

This page contains your contact information as well as your DHS or HFS local office information. If you have questions about using this website please call the DHS Help Line (800) 843-6154, Monday through Friday between 8:00 AM - 5:00 PM.

**Your Mailing Address and Phone Number**

This is the mailing address and phone number we have on file for you. If we have the wrong information, [report a change in address or phone](#).

612 W PATTERSON Avenue APT 9  
CHICAGO, IL  
60613  
Cook  
Phone:  
Email:

**Your DHS or HFS local office**

Adams County FCRC  
300 MAINE ST  
QUINCY, IL  
62301-3922  
Phone: 2172230550  
Fax: 2172234707

[Send an email to your office.](#)

**Your Case Number and Individual ID**

Your Case Number is: 778731787  
Your Individual ID is: 1200633683

Customer's current mailing address appears here. They are reminded to report any changes.

Customer's questions will appear in an email queue in IES for a caseworker to review.

However, we recommend contacting an LOA for a quicker response

# Account Management Tab

Case Summary	Benefit Details	Contact Information	Account Management				
<b>Manage Your Account</b> This page will help you manage your ABE account.  If you would like to change your password, go to the <a href="#">New Password Page</a> . To create a new password, you will need to provide your user ID, date of birth and Individual ID or Social Security number. You will also need the answers to the secret questions you answered when you first created your account. Your Individual ID Can be found on notices sent to you, or by clicking on the Contact Information Tab above.							
<b>Manage Your Communication Preferences</b> This page will help you manage your ABE communication preferences, such as going paperless with your notices and receiving email or text message alerts when new notices are sent to you.  If you would like to change your communication preferences, go to the <a href="#">Manage your Communication Preferences page</a> .							
<b>Household Member Account Access</b> We have listed all of the people who have created ABE accounts. As the primary account holder, you can grant or remove access to your case information for members of your household. If there are any household members who are not listed below and would like access to your case information, they must first create an ABE account. Once they have done so, the primary account holder will need to grant access. Click on the Manage Household Access button to do so.							
<table border="1"><thead><tr><th>Household Member Name</th><th>ABE User ID</th><th>Access Type</th><th>Manage Household Access</th></tr></thead><tbody></tbody></table>				Household Member Name	ABE User ID	Access Type	Manage Household Access
Household Member Name	ABE User ID	Access Type	Manage Household Access				

You have the option to set up a new password and change communication preferences.



# Redeterminations and Report Changes



# Completing Redeterminations

If the client needs to redetermine, the 'Renew My Benefits' button will appear on the home screen 60 business days before the redetermination is due.

The screenshot displays a web interface with a navigation bar at the top containing four tabs: 'Case Summary', 'Benefit Details', 'Contact Information', and 'Account Management'. The 'Benefit Details' tab is currently selected. Below the navigation bar, there is a large rounded rectangle containing three buttons stacked vertically. The top button, 'Renew My Benefits', is highlighted with a red rectangular border. To the right of each button is a descriptive text line. The 'Renew My Benefits' button is accompanied by the text: 'Your case is up for redetermination. Click this button to submit your redetermination for benefits.' The 'Report My Changes' button is accompanied by the text: 'Click this button to report changes to your DHS or HFS office.' The 'Apply for Additional Benefits' button is accompanied by the text: 'Click this button to apply for additional benefits.'

Tab	Button	Description
Benefit Details	Renew My Benefits	Your case is up for redetermination. Click this button to submit your redetermination for benefits.
	Report My Changes	Click this button to report changes to your DHS or HFS office.
	Apply for Additional Benefits	Click this button to apply for additional benefits.



### Redetermination Overview

It is time for your [[BENEFIT\_TYPES]] redetermination.

Please complete all screens and submit copies of all requested proofs by [[REDE\_DUEDATE]]

You may submit all requested proofs online or by mail. If you submit your documents online, your case will be processed more quickly. If you choose to submit documents in person or by mail, remember that original documents may not be returned. Include your name and case number on any proofs you submit to us.

Back

Save and  
Exit

Next

An overview screen will then review which benefits are up for Redetermination. Click NEXT.





# The Redetermination Form

- This form is typically auto-populated with the client's existing information.
- Confirm the information is correct with the client and make corrections when necessary.
- Submit!
- Upload required documents if necessary.

Redeterminations typically only take about 15 minutes to complete when using Manage My Case.



### Final Steps

Thank you! Your online Redetermination was successfully submitted!

Here are your next steps:



**Your Application Tracking Number is 6000272561**

Write down your tracking number or print your application for your records.  
Do NOT mail this Report My Changes.

[Print Your Redetermination](#)

Your Report My Changes was sent to the following office to be processed:

Adams County FCRC  
300 MAINE  
QUINCY IL 62301-3922  
Phone Number: (217) 223-0550



**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](#)

[Next](#)

Save the tracking number and a PDF of the Redetermination.

Click NEXT to submit any necessary documentation.

If the client receives a verification letter, you can upload documents on the home screen.



# Report Changes

Recipients must report changes within 10 days of the change occurring  
Depending on the change, the person's benefits may be impacted.

Benefit counselors should track change reports and follow up with IDHS if they haven't been processed in 30 days. Changes can also be reported through the IDHS Hotline.

Case Summary Benefit Data

Report My Changes Click th

Apply for Other Benefits Click th

Welcome to the Case Summary Pa

**Welcome to Report My Changes**

After you have told us what has changed below, we will let you know if the change requires verification and what to provide. You can upload your verification or you can mail, fax, or bring the proof to your DHS or HFS office. If you would like to withdraw your application, cancel your case, or request a case transfer, please select the "Any other change or changes not mentioned above" option under the other Changes Section.

**Reporting Changes Through ABE**

Please let us know what has changed. After answering yes to one or more of the categories below, an additional list of options will be shown. You may check all boxes that apply.

**Change in Contact Information** ☒ Yes ☐ No

☐ Name change or correction ☐ Address Change  
☐ E-mail address or phone number change ☐ Approved Representative add or cancel

**Change in Household** ☐ Yes ☒ No

**Change in Household Income** ☐ Yes ☒ No

**Expenses/Bills Have Changed** ☐ Yes ☒ No

**Resources Have Changed** ☐ Yes ☒ No

**Health Insurance Has Changed** ☐ Yes ☒ No

**Other Changes** ☒ Yes ☐ No

☒ Any other change or changes not mentioned above

Keep in mind that you should only report changes that have already happened.



# Thank you!

