



State of Illinois
Department of Human Services

Supplemental Nutrition Assistance Program



Effective October 2024

Maximum Monthly Income Allowable

The guidelines below show the highest gross income your household can have in a month and still receive Supplemental Nutrition Assistance Program (SNAP) benefits. Gross income is your total monthly income from all sources before any deductions. These amounts are only guidelines and do not apply to all households.

Number of People in Your Household	Maximum Gross Monthly Income	Maximum Gross Monthly Income (Age 60 and Over or Disabled)
1	\$2,071	\$2,510
2	\$2,811	\$3,406
3	\$3,551	\$4,303
4	\$4,290	\$5,200
5	\$5,030	\$6,096
6	\$5,770	\$6,993
7	\$6,510	\$7,890
8	\$7,249	\$8,786
9	\$7,989	\$9,683
10	\$8,729	\$10,580
Each additional person add	\$740	\$897

Supplemental Nutrition Assistance Program



Effective October 2024

Maximum Monthly SNAP Amounts

The chart below shows the maximum dollar amount of SNAP benefits your household can receive each month. This dollar amount is based on the number of people in your household, your income and your expenses. You could receive any amount up to or including these amounts.

Number of People in Your Household	Maximum \$ Amount of SNAP Benefits
1	\$292
2	\$536
3	\$768
4	\$975
5	\$1,158
6	\$1,390
7	\$1,536
8	\$1,756
9	\$1,976
10	\$2,196

For households with more than 10 persons, add \$220 for each additional person.
Apply on-line at: www.abe.illinois.gov



IDHS 124 (R-10-24) SNAP Card
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40,000 copies P.O.#25-0712

Supplemental Nutrition Assistance Program (SNAP)



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To file a complaint of discrimination, write USDA, Director, Office of Civil Rights, 1400 Independence Avenue, S.W., Washington, D.C. 20250-9410 or call (800) 795-3272 (voice) or (202) 720-6382 (TTY). USDA is an equal opportunity provider and employer.



Supplemental Nutrition Assistance Program (SNAP)

SNAP is a federal nutrition program run by the Illinois Department of Human Services (IDHS). This program is for people who need help buying food for themselves and their children.

SNAP benefits are delivered electronically through the Illinois Link card to help buy food.

How to apply for SNAP benefits

If you do not have enough money to buy food for yourself and your family and want to apply for the SNAP program, you can file or print an application on-line at <www.dhs.state.il.us>. You can take, mail or fax the application to your IDHS office. The web site can tell which office serves your area.

You can also go to your local IDHS office and apply for SNAP benefits. At your interview, an employee will ask you questions and enter your answers into a computer. You will be given a computer printout with your answers on it to sign. This is your SNAP application. If you are physically unable to come into the local IDHS office, an application will be mailed to you upon request.

If IDHS finds you eligible for SNAP benefits, you will be covered from the date your signed application is received.

Anyone can apply. You do not have to be receiving help from other IDHS programs to apply for SNAP benefits.

If you have questions or do not know where your local IDHS office is, call us toll free at 1-800-843-6154 (voice) or (866) 324-5553 TTY/Nextalk or 711 TTY Relay. An IDHS representative will give you the address and telephone number of your local office. If you are physically unable to go to the office, a caseworker will call you on the telephone and interview you.

Information to take with you when you apply

When you apply for SNAP benefits, your caseworker will ask to see:

- Proof of the identity of the person making application
- Social Security numbers for you and your household members
- Paycheck stubs if you work, or proof of any other income or payments you receive.

If you need help getting this information, your caseworker will help you. This information will help your caseworker understand your family situation better and figure out how much money you have available.

IDHS will review your SNAP application and all the information you give your caseworker. This may take up to 30 days. If your application is approved, you will receive SNAP benefits each month.

Eligibility for SNAP benefits

You may be able to get SNAP benefits in Illinois for you and your family if you:

- Are a United States citizen or meet certain nonresident requirements (ask your caseworker about these requirements) and
- Live in Illinois.

The Illinois Department of Human Services will decide if your household is eligible. Your household usually includes just you and your family. However, if other people live with you, they may also be included. Your caseworker will tell you who IDHS considers to be part of your household.

If you are homeless

You may receive SNAP benefits even if you don't have an address but live in Illinois. If you are eligible, IDHS will make sure you get your benefits.

Your rights in the SNAP program

When you apply for and receive SNAP benefits, you have the right to:

- Be given or mailed an application the same day of your request
- Have your signed SNAP application accepted immediately
- Be issued SNAP benefits within a few days if you are in immediate need and are qualified for faster service
- Be notified in writing before your SNAP benefits are reduced or terminated
- Appeal any decisions made by IDHS
- Receive SNAP materials in Spanish and have an agency employee interpret for you if the adults in your family are fluent in Spanish but not in English, and you live in Cook, DuPage, Kane, Lake, McHenry, Rock Island, Will or Winnebago Counties or you are a migrant farm worker in a county with a sufficient number of migrants.

What SNAP benefits will buy

You can use SNAP to buy most food items. You can also buy plants and seeds to grow food. You cannot use your SNAP to buy hot prepared foods or non-food items. For more information about what you can and cannot buy with your SNAP benefits, ask the store where you buy your groceries or call IDHS toll free at 1-800-843-6154 (voice) or (866) 324-5553 TTY/Nextalk or 711 TTY Relay.

SNAP and other IDHS benefits

If you receive SNAP benefits, you will not lose the money you receive from other IDHS programs.

How to stay eligible for SNAP benefits

Tell IDHS when you move

Tell your caseworker when you move so we can send important information to your new address. If you are homeless, tell your caseworker where you can be reached. If your caseworker cannot find you, your SNAP benefits will stop.

Keep your appointments with your caseworker

Try to keep all your appointments with your caseworker. If you cannot keep an appointment, tell your caseworker right away. Your caseworker will work with you to set up another appointment.

Report changes in your family situation

Tell your caseworker if there are any changes in your family size or the amount of money you receive (income). A change may affect your SNAP benefits.

The law states that you must tell the department the truth about your family situation so that you get the right amount of SNAP benefits. You may face penalties if you break this law or help others to break it.

Other food and nutrition programs

Women, Infants and Children (WIC) Program

The WIC program is a special food program for pregnant and breast-feeding mothers and for infants and children up to age 5. The program can provide you with extra food that is good for you and information about eating right. It can help you stay healthy and help your child grow and develop properly by providing foods that contain vitamins and other important things the body needs.

For more information about WIC, call 1-800-323-4769, (voice and TTY).

The Emergency Food Program

The Emergency Food Program provides food to food pantries and soup kitchens for people who have run out of food or have an emergency need for food. For the location of the nearest food pantry and/or soup kitchen in your area, call IDHS toll free at 1-800-843-6154 (voice) or (866) 324-5553 TTY/Nextalk or 711 TTY Relay.



For more information:

Call or visit your Illinois Department of Human Services’ Family Community Resource Center (FCRC).

If you have questions about any Illinois Department of Human Services (IDHS) program, call or visit your FCRC. We will answer your questions. If you do not know where your FCRC is or if you are unable to go there, you may call the automated helpline 24 hours a day at:

1-800-843-6154

1-866-324-5553 TTY/Nextalk, 711 TTY Relay

You may speak to a representative between:

8:00 a.m. - 5:00 p.m.

Monday - Friday (except state holidays)

For answers to your questions, you may also write:

Illinois Department of Human Services

Office of Customer and Support Services

600 East Ash, Building 500-5th Floor

Springfield, IL 62703 Or email us:

<http://www.dhs.state.il.us/contactus>

Visit our website at:

www.dhs.state.il.us

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IDHS 377 (R-12-18) Appeals and Fair Hearings

Printed by the Authority of the State of Illinois

10,000 copies P.O. #19-0731



How will I know if my

application is approved or denied?

IDHS will mail you a written notice of the decision on your application. If your application is approved, the notice will tell you about your benefits. If it is denied, the notice will tell you why. For cash and/or medical assistance, the notice will be sent within 45 days (30 days for TANF). If your application was based on disability, the notice will be sent within 60 days. For SNAP benefits, the notice will be sent within 30 days. You can appeal the decision if you think it is wrong.

How will I know if my benefits

have been stopped or cut back?

IDHS will mail you a written notice at least 10 days before your benefits are cut back or stopped.

If you get a notice that you don’t understand, contact your local IDHS office or the Helpline number on the back of this brochure to clarify why IDHS is making the change. If you think IDHS is wrong, you can appeal the change.

What decisions made by

IDHS can I appeal?

If you receive or have applied to receive benefits from IDHS, you can appeal any decision IDHS makes about your case that you think is wrong. You can appeal if:

- Your application is turned down.
- The amount of your benefits is cut back or stopped.
- You think a decision IDHS made is wrong.
- You think IDHS’ failure to make a decision or delay in making a decision is wrong.
- IDHS takes any action that directly affects you.

However, you must appeal within a certain time from the Date of Notice. The Date of Notice is printed on the top of all IDHS notices. If you are appealing a decision about cash assistance or Medicaid, you must appeal within 60 days. If you are appealing a decision about SNAP benefits, you must appeal within 90 days. If you are appealing a delay or failure to make a decision, there is no time limit.

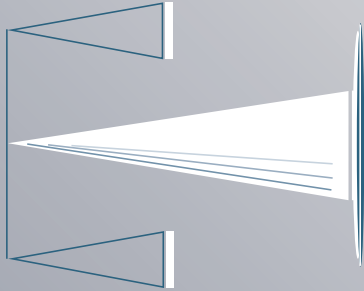
How do I ask for an appeal?

If you want to appeal, you or your Approved Representative can:

1. Appeal Online: Go to <https://abe.illinois.gov/abe/access/appeals>. If you have an ABE account, login. If you do NOT have an ABE account, create one and follow the prompts to link your ABE account to your IES Case information and then file the appeal. If you have a Manage My Case Account, log into that account and click on File and Appeal.
2. Write a letter requesting a hearing or fill out a Notice of Appeal Form from the local IDHS office. Submit the letter or Appeal form through any of the following:
 - Email the completed letter or appeal form to: DHS.BAH@Illinois.gov
 - Fax the completed letter or appeal form to 312-793-3387
 - Mail your letter or appeal form to the address below:
Illinois Department of Human Services
Bureau of Hearings
69 W. Washington, 4th Floor
Chicago, Illinois 60602
 - Call toll free 1-800-435-0774 (voice) or 1-877-734-7429 (TTY), Monday through Friday, between 8:30 am and 4:45 pm.
 - Take your letter or appeal form to the local IDHS office. If you need help filling it out, your local office staff will help you.
3. If your appeal is only about SNAP benefits, you can also appeal by just letting your local IDHS office know that you want to appeal.

appeals & fair hearings

For Those Receiving Cash, SNAP,
or Medical Assistance



Your Right to Appeal and Receive
a Fair Hearing

This brochure explains the Illinois Department of Human Services’ appeal and hearing process for clients receiving cash, SNAP or medical assistance. If you have any questions about what you read or want more information, go to your local IDHS office. A IDHS representative will help you with your questions.



If I appeal a decision that cut back or stopped my benefits, will I continue to receive them?

You will continue to receive your benefits if you request a hearing on or before the date your benefits are to be cut back or stopped. The notice telling you about IDHS' decision will give you the date by which you must appeal to have your benefits continued. If you appeal in time, you can request that your benefits continue until the appeal is decided, unless you tell IDHS that you do not want to continue your benefits.

However, if IDHS decides at your hearing that the decision to cut back or stop your cash and/or SNAP benefits was correct, you will owe IDHS the difference between what you received during the appeal and what you should have gotten.

What will happen after I appeal?

After you appeal, someone from your local IDHS office will review the reasons that caused you to appeal and ask you to attend an informal meeting to talk about your appeal. At the meeting, IDHS will explain why your benefits changed and answer all questions.

You and your representative, if you have designated one in writing, will be sent a notice telling you when this meeting will take place. Often this meeting is held by telephone. You do not have to attend the meeting.

This meeting is not a hearing. No hearing officer will be present, and it will not be tape recorded. No matter what is said at this meeting, unless you sign a Request to Withdraw Appeal, you still have the right to a hearing before a hearing officer.

If you *now agree with IDHS*

At the informal meeting, IDHS may make a change in your case that you agree with or you may decide that IDHS was right. If so, IDHS will ask you to sign a Request to Withdraw Appeal. Only you or your representative can sign this form. If you sign it, your appeal is over.

If you *still do not agree with IDHS*

If you still do not agree with IDHS and you want to continue with your appeal, you must appear for your hearing. You will get a notice in the mail stating the date and time for your hearing. You will also receive a Statement of Facts which lists the reasons why IDHS made its decision.

Where will my hearing be held?

Usually, the hearing is held in the local IDHS office that handles your case. However, the Hearing Officer will not be at the local IDHS office. If you have a disability and are physically unable to come to your local office or need another accommodation so that you may participate in the hearing, immediately contact the Bureau of Hearings, 69 W. Washington, 4th Flr., Chicago IL 60602 or at DHS.BAH@illinois.gov, so that an accommodation can be arranged. BAH may arrange for you to participate in the hearing by telephone.

Also, if you do not live in Illinois, you may present your position with written information submitted in advance of the hearing, or have someone present your position for you, or request to participate in the hearing by telephone.

What should I bring to the hearing?

You should bring all records or receipts or papers that might help you prove IDHS is wrong, such as written proof of living expenses, income, medical bills, tax receipts and savings or bank account books. You or your representative will have the opportunity, before and during the hearing, to examine and obtain copies of all records and papers that are part of your IDHS

case record, this includes the right to take notes. Copies of the parts of the case record relevant to the hearing shall be provided free, if requested. This copy will be for your own use; you do not need it for the hearing. You may also bring witnesses to testify on your behalf at the hearing.

How much will the hearing cost?

Your hearing will not cost you any money. IDHS may pay you back for the child care costs you had to pay to be able to come to your hearing if you ask to be paid back within 30 days after the hearing.

Who will be at my hearing?

Hearings are not open to the public. To keep the information confidential, the only people who will be at the hearing are you and/or a representative who you have authorized in writing to represent you, the people you need to help present your case, a member of the local office staff directly responsible for the action for appeal, the necessary witnesses for the local office and a hearing officer.

What happens during the hearing?

The hearing officer is impartial and will be in charge of your hearing. Witnesses at the hearing are asked questions under oath. You and the department will each have a chance to explain why you think you are right. The hearing is tape recorded.

What happens after my hearing?

After the hearing, the Secretary of the Department of Human Services issues a final decision that either changes or does not change the decision you appealed.

You will receive a copy of the final decision, as well as a letter notifying you of your right to have a judge review the decision. In an appeal where the only issue is SNAP benefits, the final decision must be made within 60 days after your request for a hearing is received by IDHS.

When the decision results in your getting SNAP benefits, the SNAP benefits must be issued within 10 days after your local office receives the decision. In cash and medical assistance appeals, the decision must be made within 90 days.*

(*If you are unable to attend a hearing or ask for and are granted a postponement or continuance, the time limit will be extended by the number of days delay caused by your postponement.)

What if I need to postpone or reschedule my hearing?

If you need to postpone your hearing, you should follow the instructions on the notice you receive that states when your hearing will be held.

If you do not come to your hearing and do not ask for a postponement, IDHS will consider the appeal ended. IDHS will send you a written notice of this decision, but may reschedule the appeal if, within 10 days of the notice, you provide us with good cause, in writing, why you couldn't come. When your benefits have continued unchanged as a result of your request for a hearing and you do not come to your hearing and do not request a postponement, IDHS will make the proposed change in your benefits.

Can I see a copy of the official report?

The official report of the hearing consists of the documents filed in the case, along with the facts and the decision. At any time within three years after the hearing decision, you or your representative may arrange to review the official report in your local office.



Department Policy

It is the policy of the Illinois Department of Human Services that all individuals requesting services from the Department shall be free from discrimination or harassment* without regard to:

- ◆ Race
- ◆ Color
- ◆ Religion
- ◆ Sex
- ◆ National Origin
- ◆ Age
- ◆ Disability
- ◆ Political Beliefs

The Illinois Department of Human Services' Pledge

As part of our commitment to serve you, we will see to it that you:

- ◆ Receive benefits for which you are eligible in a timely and uninterrupted manner.
- ◆ Are treated fairly, with dignity, courtesy, and respect.
- ◆ Have your questions answered in a way that you understand.
- ◆ Receive referrals for agency supportive services and community resources.
- ◆ Have your complaints and disagreements with agency actions or treatment reviewed and addressed.

In accordance with Federal law and U.S. Department of Agriculture policy, this institution is prohibited from discriminating on the basis of race, color, national origin, sex, age, religion, political beliefs, or disability.

To file a complaint of discrimination, write USDA, Director, Office of Civil Rights, 1400 Independence Avenue, S.W., Washington, D.C. 20250-9410 or call (800) 795-3272 (voice) or (202) 720-6382 (TTY). USDA is an equal opportunity provider and employer.



Your Civil Rights

No Discrimination...
No Harassment...
No Excuses



IDHS Cannot Take Any Of The Following Actions:

- ◆ Deny you money, care, services or other benefits you are eligible to receive.
- ◆ Provide other eligible people with money, care, services or other benefits that are different from yours or provide them in a different way from the way we provide them to you if you are eligible to receive them.
- ◆ Treat you differently from other eligible people in the way you get your money, care, services or other benefits.
- ◆ Prohibit you from having the same advantages or privileges as other eligible people who receive help from the Illinois Department of Human Services.
- ◆ Treat you differently from other people in the way the Illinois Department of Human Services determines if you are eligible to receive money, care, services or other benefits.
- ◆ Deny or offer to other eligible people an opportunity that is different from the opportunities offered to you (if you are eligible) through the Illinois Department of Human Services. This includes the opportunity to take part in education, job training, community work programs and the opportunity to receive a hearing.

What Can I Do If I Think I Have Been Discriminated Against?

If you feel that you have been discriminated against, you have the right to file a charge with the Bureau of Civil Affairs. A written complaint must be filed within 180 days of the alleged action:

- ◆ Fill out a ***Customer/Applicant Discrimination Claim Form*** (IL 444-4026), which can be obtained at your local IDHS office, hospital, school or facility;
- ◆ Send a written complaint to one of the following addresses:

Central Office/Chicago
401 S. Clinton, 6th Floor
Chicago, IL 60607
312-793-0210 (V) or

Central Office/Springfield
100 South Grand Avenue East, 3rd Floor
Springfield, IL 62762
217-524-7068 (V)
217-557-4191 (Fax)
DHS.CivilAffairsComplaint@illinois.gov (Email)

- ◆ SNAP-related discrimination complaints: refer to USDA nondiscrimination statement on the back page for procedures on how to file a complaint directly with USDA.

Under the ADA and Section 504 of the Rehabilitation Act of 1973, you are protected against discrimination based on disability. You have the right to file a grievance and may obtain a copy of the grievance form, ***Americans With Disabilities Act/Section 504 Grievance Request*** (IL 444-4715) to do so. Grievances must be submitted within 30 days of the alleged violation to:

IDHS – ADA Coordinator
Bureau of Accessibility and Job Accommodation
401 S. Clinton, 3rd Floor
Chicago, IL 60607

A determination will be made and written notification sent to you within 45 business days after receipt of the grievance. If you disagree with the decision, you may appeal to the Secretary of the Department within 10 business days after receipt of the determination.

What Happens After a Charge is Filed?

An EEO/AA Officer will review your complaint immediately to determine whether there is substantial evidence to support the charge. You will receive a written notification at the conclusion of the investigation. If you are not in agreement with the findings of the investigator, you may appeal directly to the Chief of the Bureau of Civil Affairs in writing at one of the above listed addresses. In addition, you may file a discrimination complaint with one of the following regulatory agencies:

Illinois Department of Human Rights
100 W. Randolph St., Suite 10-100
Chicago, IL 60601
312-814-6200 (V) or 866-740-3453 (Nextalk)

222 S. College St., 1st Floor
Springfield, IL 62704
217-785-5100 (V) or 866-740-3453 (Nextalk)

U.S. Equal Employment Opportunity Commission
500 W. Madison, Room 2800
Chicago, IL 60661
312-869-8000 (V) or 312-869-8220 (Fax)
312-869-8001 (TTY)

United States Department of Health and Human Services
Office of Civil Rights
233 North Michigan Avenue, Suite 240
Chicago, IL 60601
312-886-2359 (V) or 312-353-5693 (TTY)



APPLYING FOR BENEFITS

Cash Assistance, Medical Benefits and SNAP

Apply Online

If you live in Illinois you can apply for cash, medical and SNAP benefits online at www.abe.illinois.gov.

If you prefer a paper form, you can print and fill out a paper application which you can submit to your local office by mail, fax, or in person.

- * You may apply for cash, medical, and SNAP the first day you contact the Illinois Department of Human Services (DHS).
- * Applications are taken online or at DHS local offices. These local offices are also called Family Community Resource Centers (FCRC).
- * When you come into an FCRC:
 - * You should be treated with respect by DHS staff.
 - * You should be signed into the computer to keep your place in line.
 - * You should be able to apply for all benefits that same day.
- * Some offices are busy and you might have to wait.

What if I can't wait at the office?

You have a right to apply for benefits the first day you go to the office. If you can't wait to talk to a caseworker, you have some choices.

- * You can get an application and fill out as many questions as you can. Return the application to the receptionist. We will accept your application even if it only has your name, address and signature.
OR
- * You can take the application home, fill it out, sign it, and return it to the local office in person.
OR
- * You can take the application home, fill it out, sign it, and send it back to the local office by mail or fax.
OR
- * If you decide to wait and we cannot interview you before the end of the day, we will give you an application. We will give you our expedited/emergency screening form for SNAP. We will also make a copy of your identification. You only need to fill in your name and address and sign the application. Turn the application in to the receptionist.

Once your application is filled out and turned in at the FCRC, there are a few more steps. The receptionist will stamp the application with a date. We will start to process your application that day. We will make an appointment for you to return for an interview. If you are applying for medical benefits only, you do not need an interview.

What if I need emergency benefits?

EXPEDITED/EMERGENCY SNAP

Expedited/Emergency SNAP are benefits that are ready in 5 days or less from the date you apply.

You may be able to get Expedited SNAP if:

- * Your monthly income, cash and bank accounts are less than your rent or mortgage plus your utility costs, OR
- * Your monthly income is less than \$150 and your cash and bank accounts are not more than \$100, OR
- * At least one person in your household is a migrant farm worker and your cash and bank accounts are not more than \$100.

If you cannot wait to speak to a caseworker, the receptionist will make an appointment for you for the next day. If the office cannot complete the application on the same day, then the receptionist will make appointment for you for the next day. This appointment is to see if you are eligible for Expedited/Emergency SNAP.

To receive Expedited/Emergency SNAP, you must have valid identification. We prefer photo identification. We will also take other kinds of identification.

When will I find out if I can get benefits?

You have the right to get a written decision about whether you can get benefits. You have a right to get this decision within certain time limits. The time limits are different depending on which benefits you apply for.

The time limits are:

- * 30 days for a decision about SNAP.
- * 45 days for a decision about cash assistance.
- * 45 days for a decision about medical benefits because of age or blindness.
- * 60 days for a decision about medical benefits because of being disabled.
- * 45 days for all other medical benefits (children, parents, families.)

If you are eligible and the decision takes longer than the time limit, you may be able to get \$100 and a temporary medical card.



APPLYING FOR BENEFITS

USDA Nondiscrimination Statement

In accordance with Federal civil rights law and U.S. Department of Agriculture (USDA) civil rights regulations and policies, the USDA, its Agencies, offices, and employees, and institutions participating in or administering USDA programs are prohibited from discriminating based on race, color, national origin, sex, religious creed, disability, age, political beliefs, or reprisal or retaliation for prior civil rights activity in any program or activity conducted or funded by USDA.

Persons with disabilities who require alternative means of communication for program information (e.g. Braille, large print, audiotope, American Sign Language, etc.), should contact the Agency (State of Illinois Department of Human Services) where they applied for benefits. Individuals who are deaf, hard of hearing or have speech disabilities may contact USDA through the Federal Relay Service at (800) 877-8339. Additionally, program information may be made available in languages other than English.

To file a program complaint of discrimination, [complete the USDA Program Discrimination Complaint Form, \(AD-3027\)](#) found online at: http://www.ascr.usda.gov/complaint_filing_cust.html , and at any USDA office, or write a letter addressed to USDA and provide in the letter all of the information requested in the form. To request a copy of the complaint form, call (866) 632-9992. Submit your completed form or letter to USDA by:

- (1) Mail: U.S. Department of Agriculture
Office of the Assistant Secretary for Civil Rights
1400 Independence Avenue, SW
Washington, D.C. 20250-9410;
- (2) Fax: (202) 690-7442; or
- (3) Email: program.intake@usda.gov.

This institution is an equal opportunity provider.

This is an equal opportunity employer.

Additional Illinois Nondiscrimination Information

You may also write the Department of Human Services (IDHS) at Department of Human Services, Bureau of Civil Affairs, 401 South Clinton St., 6th Floor, Chicago, Illinois, 60607 or call the IDHS Helpline Number at 1-800-843-6154 or 866-324-5553 TTY/ Nextalk or 711 Relay.

DHS, HHS, and USDA are equal opportunity providers and employers.

The State of Illinois provides reasonable accommodations according to Section 504 of the Rehabilitation Act of 1973 and the Americans with Disabilities Act of 1990.

Manage your Medical, SNAP and Cash Benefits Online

The State of Illinois' Application for Benefits Eligibility (ABE) website now offers Manage My Case (MMC) to help you manage your benefits online, anytime.

Use MMC to:

- Check the status of an application
- Learn when you redetermination is due
- Renew benefits
- Report changes; income, expenses, household members or new address
- Upload documents
- View notices
- View and reschedule upcoming appointments
- File and manage appeals

What you Need to Set-up MMC:

- Social Security Number or Individual ID Number
- Valid State Driver's License or ID or an Established Credit History

How to Set-up MMC:

Step 1: Go to <http://ABE.Illinois.gov>

Step 2: Click on the green "Manage My Case" button

- Enter your ABE User ID and Password
- If you don't have an ABE User ID, click 'Create a new ABE User ID and Password'

Step 3: After logging in select, "Link your account"

- Enter your Date of Birth and Individual ID **or** your Date of Birth and Social Security Number
- This one-time process will link your ABE profile to your benefit case information

Step 4: Verify your identity by entering information from your Illinois Driver's License or State ID **or** by responding to questions only you can answer. If successful you will go right to MMC.

That's it, you're set! Login using your ABE User ID and Password to manage your benefits with MMC!



What if I get locked out of my account?

If you try to login to your account **three times** but are not successful, you will be “locked out” for 1 hour. You can try again after one hour. If you are not sure of your password, you can change it.

What if I get a message that says my session has timed out or ended?

After 30 minutes of inactivity in ABE, you will be logged out. If you are on a public computer this will happen more quickly. This is for your security. Before you log back in, be sure that you are using a browser that works well with ABE. We recommend using EDGE. Using an old browser may cause unexpected errors. If you are using EDGE, then close the browser, reopen it and try again.

What if I forget my password?

The State cannot reset your ABE Password. However, you can reset your password using "Forgot Password" on the ABE login panel:

1. Go to abe.illinois.gov
2. In the upper right corner click "Login"
3. Enter your User ID on the login panel
4. Click "Forgot Password"
5. Answer your secret questions.

Remember, the answers to your secret questions are case sensitive, enter your answers EXACTLY as you did when you first set them up.

What if I forget the answers to my secret questions?

If you forget the answers to your secret questions you will need to create a new ABE User ID and Password, link your case, and verify your identity again. The State cannot help you with your secret questions and answers. Be sure to write down your ABE User ID, password, secret questions and answers for your new account and keep them in a safe place. Do not share your ABE User ID, password or secret questions and answers with anyone.

What if I forget my ABE User ID?

Unfortunately, if you forgot your ABE User ID, you will need to follow the process to create a new User ID and Password. The State is unable to recover or reset your ABE User ID.

What if I can't get past the Identity Proofing?

If you cannot pass the electronic Identity Proofing, use the Manual ID Proofing form. [IL444-3610 State Identity Proofing Request Form \(pdf\)](#), or [IL444-3610 S Formulario De Solicitud De Prueba De Identidad Del Estado \(pdf\)](#). and proof documents (listed on page 3 of the form).

Note: If you are required to submit information by a certain date and you are not able to use MMC, go to the [DHS Manage Your Benefits](#) page for other ways to submit information.



GUIDE TO YOUR SUPPLEMENTAL NUTRITION ASSISTANCE PROGRAM (SNAP) (RELATING TO CASH AND MEDICAL PROGRAMS)

SNAP benefits can help you buy food. You can apply for SNAP benefits at your local DHS office or online at abe.illinois.gov. To find your local DHS office, call the toll-free DHS Help-line: **1-800-843-6154 (Voice) or 1-866-324-5553 TTY/Nextalk, 711 TTY Relay or visit our website at: www.dhs.state.il.us.**

HOW TO APPLY FOR SNAP BENEFITS

Apply for SNAP benefits at your local DHS office or online at www.abe.illinois.gov. If it is a hardship to come to the local DHS office for an interview, it may be possible to conduct the interview by phone. You may be eligible for a phone interview if you have problems getting to the office because of hours of work or school, lack of child care, transportation or health. If eligible, benefits start on the date the application is received in the local office.

YOU SHOULD KNOW THESE FACTS

- * You have the right to apply for SNAP benefits when you apply for cash or medical benefits. You don't have to apply for SNAP benefits separately.
- * The TANF Cash 60-month time limit does not apply SNAP. If your TANF Cash is canceled due to the 60-month time limit, your SNAP benefits will not be canceled for this reason.
- * Other requirements that apply only to cash or medical benefits do not affect SNAP benefits.
- * You may still qualify for SNAP benefits, if your cash or medical benefits are canceled due to working or for other reasons.
- * Receipt of SNAP benefits does not affect your eligibility for any other program.

Get Information About The Supplemental Nutrition Assistance Program At Our Web Site: www.dhs.state.il.us

USDA Nondiscrimination Statement

In accordance with Federal civil rights law and U.S. Department of Agriculture (USDA) civil rights regulations and policies, the USDA, its Agencies, offices, and employees, and institutions participating in or administering USDA programs are prohibited from discriminating based on race, color, national origin, sex, religious creed, disability, age, political beliefs, or reprisal or retaliation for prior civil rights activity in any program or activity conducted or funded by USDA.

Persons with disabilities who require alternative means of communication for program information (e.g. Braille, large print, audiotape, American Sign Language, etc.), should contact the Agency (State of Illinois Department of Human Services) where they applied for benefits. Individuals who are deaf, hard of hearing or have speech disabilities may contact USDA through the Federal Relay Service at (800) 877-8339. Additionally, program information may be made available in languages other than English.

To file a program complaint of discrimination, [complete the USDA Program Discrimination Complaint Form, \(AD-3027\)](http://www.ascr.usda.gov/complaint_filing_cust.html) found online at: http://www.ascr.usda.gov/complaint_filing_cust.html, and at any USDA office, or write a letter addressed to USDA and provide in the letter all of the information requested in the form. To request a copy of the complaint form, call (866) 632-9992. Submit your completed form or letter to USDA by:

- (1) Mail: U.S. Department of Agriculture
Office of the Assistant Secretary for Civil Rights
1400 Independence Avenue, SW
Washington, D.C. 20250-9410;
- (2) Fax: (202) 690-7442; or
- (3) Email: program.intake@usda.gov.

This institution is an equal opportunity provider.

This is an equal opportunity employer.

Additional Illinois Nondiscrimination Information

You may also write the Department of Human Services (IDHS) at Department of Human Services, Bureau of Civil Affairs, 401 South Clinton St., 2nd Floor, Chicago, Illinois, 60607 or call the IDHS Helpline Number at 1-800-843-6154 or (866)-324-5553 TTY/Nextalk, 711 TTY Relay.

DHS, HHS, and USDA are equal opportunity providers and employers.

The State of Illinois provides reasonable accommodations according to Section 504 of the Rehabilitation Act of 1973 and the Americans with Disabilities Act of 1990.



State of Illinois
Department of Human Services

GUIDE TO IDHS SERVICES

A TANF Funded Information & Referral Service

The Illinois Department of Human Services (IDHS) provides many services to help people in Illinois have better lives, including information and referrals to services provided by other agencies and community partners. Listed below are services available to meet your individual and family needs.

- ☐ **Medical Benefits**
- ☐ **SNAP Benefits**
- ☐ **Cash Assistance**
- ☐ **Employment and Training Services**
- ☐ **Alcohol and Substance Abuse Services**
- ☐ **Domestic Violence Services**
- ☐ **Mental Health Services**
- ☐ **Services for Pregnant Women**
- ☐ **Child Care Services**
- ☐ **Women, Infants and Children (WIC)**
- ☐ **Services for Teen Parents**
- ☐ **Child Support**
- ☐ **Services for People with Disabilities**
- ☐ **Group Care - Nursing Homes**
- ☐ **Services for Senior Citizens**
- ☐ **LIHEAP**
- ☐ **Earned Income Tax Credit (EITC)**
- ☐ **Crisis Nursery**
- ☐ **Food Pantries**
- ☐ **Healthy Families Illinois**
- ☐ **Homeless Services**

How Can I Apply for Services?

You can apply for services by going to your local IDHS office, or you can call the office and ask them to mail you an application. In some cases, you can apply for services over the phone or online.



To contact IDHS, visit our website at:

www.dhs.state.il.us

or call the automated Helpline for
Information and Referral Services.

To find the address and phone number
of your local IDHS office, call:

1-800-843-6154 (Voice)

1-866-324-5553 TTY/Nextalk, 711 TTY Relay

Representatives are available between:

8:00 a.m. - 5:00 p.m.

Monday - Friday (except state holidays)

For answers to your questions, please e-mail:

DHS.WebBits@Illinois.gov

or write:

Illinois Department of Human Services

Customer Support and Services

600 E Ash, 500 Bldg - 5th floor

Springfield, Illinois 62703

USDA Nondiscrimination Statement

SNAP and FDPIR State or local agencies, and their sub recipients, must post the following Nondiscrimination Statement: In accordance with Federal civil rights law and U.S. Department of Agriculture (USDA) civil rights regulations and policies, the USDA, its Agencies, offices, and employees, and institutions participating in or administering USDA programs are prohibited from discriminating based on race, color, national origin, sex, religious creed, disability, age, political beliefs, or reprisal or retaliation for prior civil rights activity in any program or activity conducted or funded by USDA. Persons with disabilities who require alternative means of communication for program information (e.g. Braille, large print, audiotape, American Sign Language, etc.), should contact the Agency (State of Illinois Department of Human Services) where they applied for benefits. Individuals who are deaf, hard of hearing or have speech disabilities may contact USDA through the Federal Relay Service at (800) 877-8339. Additionally, program information may be made available in languages other than English. To file a program complaint of discrimination, complete the USDA Program Discrimination Complaint Form, (AD-3027) found online at: http://www.ascr.usda.gov/complaint_filing_cust.html, and at any USDA office, or write a letter addressed to USDA and provide in the letter all of the information requested in the form. To request a copy of the complaint form, call (866) 632-9992. Submit your completed form or letter to USDA by:

(1) Mail: U.S. Department of Agriculture, Office of the Assistant Secretary for Civil Rights, 1400 Independence Avenue, SW, Washington, D.C. 20250-9410;

(2) Fax: (202) 690-7442; or (3) Email: program.intake@usda.gov.

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DHS 4474 (R-09-17)

Guide To Services

Printed by authority of the State of Illinois
with funds from the TANF Program

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For more information:

Call or visit your Illinois Department of Human Services' Family Community Resource Center (FCRC).

If you have questions about any Illinois Department of Human Services (IDHS) program, call or visit your FCRC. We will answer your questions. If you do not know where your FCRC is or if you are unable to go there, you may call the automated helpline 24 hours a day at:

1-800-843-6154

1-866-324-5553 TTY/Nextalk, 711 TTY Relay

You may speak to a representative between:

8:00 a.m. - 5:30 p.m.

Monday - Friday (except state holidays)

For answers to your questions, you may also write:

Illinois Department of Human Services

Bureau of Customer Support and Services

600 E. Ash, Building 500, 5th Floor

Springfield, Illinois 62703

Visit our web site at:

www.dhs.state.il.us



In accordance with Federal law and U.S. Department of Agriculture policy, this institution is prohibited from discriminating on the basis of race, color, national origin, sex, age, religion, political beliefs, or disability.

To file a complaint of discrimination, write USDA, Director, Office of Civil Rights, 1400 Independence Avenue, S.W., Washington, D.C. 20250-9410 or call (800) 795-3272 (voice) or (202) 720-6382 (TTY). USDA is an equal opportunity provider and employer.

IDHS 4538 (R-12-18) SNAP Employment and Training Program

Printed by the Authority of the State of Illinois.
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State of Illinois
Department of Human Services

SNAP Employment and Training Program

Helping you find and
keep the right job

*The SNAP
Employment &
Training Program's
(SNAP E&T) goal is to
help you improve your
work skills and assist you
in finding a job through
short-term training and
work assignments as
well as GED,
resume-writing
and interviewing
classes.*



SNAP Employment and Training Program

*Helping you find and
keep the right job*

Supportive Service Payments

You may qualify for supportive service payments when you take part in SNAP E&T program activities. SNAP E&T program activities will work to enhance your job skills and help you search for employment. Supportive service payments will help you with work related expenses such as transportation or special clothing expenses.

Getting Started

In order to match you with the right services, each applicant will meet with program staff and be assigned to a SNAP E&T program activity. The activities you are expected to do will be explained by program staff. To receive the full SNAP benefits and supportive service payments that you are entitled to, make sure that you do not miss any meetings and that you complete all assigned activities.

Sanction for Not Complying

If you miss a meeting or fail to complete an assigned activity, a meeting will be scheduled with you to find out why. If meetings and activities are missed or you do not comply with an activity assignment, your SNAP benefits may be reduced or stopped. Reasons for not complying, such as illness or unexpected emergencies, may be excused and will prompt a rescheduling of the activities that have not been completed. Contact program staff as soon as you know that you will be unable to fulfill a meeting or assigned activity.

Who Does Not Have to Participate in the SNAP E&T Program?

If you meet any one of the following conditions, you do not have to take part in the SNAP E&T program, but we encourage you to volunteer:

- ☐ you are under age 18 or are age 50 or older;
- ☐ you are a student, enrolled at least half-time;
- ☐ you participate in a drug addiction or alcohol treatment and rehabilitation program;
- ☐ you receive Unemployment Insurance;
- ☐ you are responsible for the care of an incapacitated person;
- ☐ you are pregnant or physically or mentally unable to work;
- ☐ you are residing in a SNAP household and the household includes a; (child)ren under age 18;
- ☐ you are employed or self-employed, working at least 30 hours per week or receiving weekly wages of 30 times the federal minimum wage;
- ☐ you live in an exempt area where SNAP E&T provider slots are not available for active participation.



Welcome to the Illinois Link program

You are on your way to enjoying a safe and easy way to get and use your benefits. The Illinois Link program lets you use the Illinois Link card, similar to a bankcard, to spend your benefits. You will select a secret Personal Identification Number (PIN) by calling the toll-free Help Line (1-800-678-LINK) or by going to the web site at www.Link.Illinois.gov. Your Illinois Link card and PIN let you use your benefits that the Illinois Department of Human Services (DHS) deposits into an account – just for you. Once your benefits are deposited in your account and you have selected your PIN, you can begin using those benefits with your Link card.

Information you should know

- You will receive your Illinois Link card through the mail at the address you gave to your local DHS office. Please allow seven (7) days for mail delivery.
- If you were approved for benefits but have not received your card within 10 days, contact your caseworker.
- You must have a PIN before you can use your benefits. You can either call the toll-free Help Line number or use a computer and go to the web site www.Link.Illinois.gov to select your PIN. The Help Line number and the web site are printed on the back of your Illinois Link card and in this pamphlet.
- The first time you call to select your PIN, you will need the 16-digit number on the front of your Link card.
- You must keep your card and PIN safe and private. If you think someone else has your Illinois Link card or PIN, you must call the Help Line or go to the web site right away to report your Illinois Link card as lost or stolen.
- If you give your card and PIN to someone else and they use your benefits—your benefits will NOT be replaced.** Remember: Never tell anyone your PIN. Do not write your PIN on your card. Do not carry it with you in your purse, wallet, or billfold or where someone could find it. Keep your card away from electronic equipment (like TVs, microwaves) and magnets. Keep your card out of direct sunlight, like a car dashboard.
- You are responsible for using your benefits and taking care of your Illinois Link card and PIN.

- You can use the toll-free number (1-800-678-LINK) or the web site at www.Link.Illinois.gov to get a history of your card use, check your benefit balances, select a PIN, report a lost, stolen or damaged Illinois Link card or request a replacement card by mail. Please allow seven (7) days for mail delivery.
- SNAP benefits are to be used to purchase food for your household only.
- If the food you purchase with your SNAP benefits are destroyed in a disaster beyond your control, you may be eligible for replacement benefits. Contact your Caseworker within 10 days of the disaster to make this request.
- You should keep this pamphlet with you because it contains important information that you can read again later if you need to.
- If you would like to have your cash benefits deposited directly into your bank account instead of your Link card, contact your DHS office.
- To correct an error, the amount of benefits issued to your LINK account may be adjusted prior to becoming available to you.
- In the event of a system error, your account may be adjusted. If this happens, you will receive a written notice explaining the system error and the adjustment. If you request a hearing within 15 days of the notice, the adjustment will not be made until a hearing can be held. You have the right to request a review of any transaction and to request a fair hearing by calling 1-800-678-LINK (5465).

DO NOT THROW YOUR ILLINOIS LINK CARD AWAY. YOU WILL NOT RECEIVE A NEW CARD EACH MONTH.

How do I use my Illinois Link card at the store?

You may use your Illinois Link card at the grocery store to spend your SNAP or cash benefits. At some stores, you may also use your card to get cash from your cash benefits. Look for the Illinois Link sign in the windows or on the doors at the grocery store to make sure that the store accepts the Illinois Link card before you begin shopping. The steps below explain how to use your Illinois Link card to use your benefits.

- Food purchased with SNAP must be received at the time of purchase. (Exception: You may use SNAP to purchase shares in a CSA (Community Supported Agriculture) up to 14 days in advance of receiving the share of food.) You cannot use SNAP

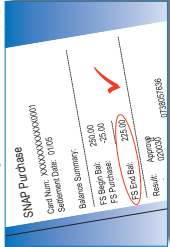
- to pay for food that was received at an earlier time
- At the checkout lane, tell the cashier that you are using your Illinois Link card and which account you want to use – your SNAP or cash account. If you want to get cash from your cash account, you can ask the cashier at the checkout lane or you may need to go to the customer service counter.

- You, or the cashier, will scan your card through the Illinois Link terminal. If your card cannot be scanned, the cashier can manually type in your card number on the terminal to complete your purchase. If you have too many manual entered transactions in a row then your card will automatically be replaced. You will be able to continue using your old card until you receive the new card. Upon receiving the new card, you may begin using it immediately.

- You, or the cashier, enter the amount of purchase or the amount of cash you want to withdraw.
- Enter your 4-digit PIN. No one should ever ask you for your PIN, not even the store clerk. You should enter your PIN yourself. Make sure you enter your PIN carefully and that no one sees you enter it. If you enter the wrong PIN four (4) times in a row, your benefit account is “frozen” and you will not be able to use your benefits. You will not be able to use your Illinois Link card until you get a new PIN.

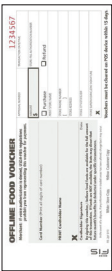
- When your purchase or withdrawal is complete, the terminal prints a receipt with the name and address of the store, type of transaction, date of transaction, the amount of your purchase or withdrawal, and the balance left in your account(s). You should save your receipt every time you use your Illinois Link card so you know your balance the next time you go shopping.

- There are no requirements for a minimum amount of a purchase or a maximum number of times you may use your card at the store.
- You cannot be charged an additional fee for using SNAP benefits.
- If you use coupons, the coupon amount is taxed and the tax cannot be paid with SNAP benefits.



What happens if a store’s Illinois Link terminal is not working?

Even if a store’s Illinois Link terminals are not working, you may still use your Illinois Link card, but the purchase must be for food items only using either your SNAP or cash benefits. The store cashier can use a manual voucher and call to get telephone approval for your purchase up to \$150.00 a day. Instead of getting a receipt for your purchase, the cashier fills out a paper voucher that shows the amount of your purchase. Before you sign the voucher, make sure your purchase is being made from the correct account (SNAP or cash) and that the amount on the voucher is correct. The cashier should give you a copy of the voucher for your records.



How do I use my card at an Automated Teller Machine (ATM)?

You can only withdraw money or check your cash account balance at an ATM. You cannot use your SNAP benefits at an ATM.

These are some of the ATM networks that accept the Illinois Link card.



Some ATMs may charge you a fee. To avoid paying any fees, it is best to withdraw your cash at stores that accept the Illinois Link card and provide cash back.

Before you use your Illinois Link card at an ATM, here are some things you need to know:

Amounts: You can only withdraw cash in the amounts that the ATM allows you to get. Some ATMs allow you to withdraw your cash in amounts of \$10.00, \$20.00, etc. If you do not have enough money in your account to withdraw your benefits and pay any fees that may be charged, your transaction is denied.

Fees: You can withdraw cash from your cash account at an ATM up to two (2) times per month. After your second cash withdrawal, or your second balance inquiry, you are charged a fee.

Surcharges: Illinois ATMs are not supposed to charge surcharges in addition to the fees described above. ATMs outside Illinois may add surcharges in addition to these fees.

TANF Assistance: It is against the law to access your TANF cash benefits with your Link card at casinos, liquor stores or establishments with adult entertainment involving disrobing or nudity.

WARNING: It is not legal to sell your Link card or allow others to use your card in return for cash. Doing so can result in loss of your benefits and/or criminal charges.

To use an ATM to withdraw cash or check your balance:

- Follow the ATM instructions for inserting or scanning your Illinois Link card. Some ATMs ask you to insert and remove your card, others ask you to insert the card that is held inside the machine until you complete or cancel the transaction.
- Enter your PIN. If the ATM charges a surcharge a screen appears and you have the option of accepting or cancelling the transaction. If you accept the transaction, the fee will be taken from your cash benefits.
- Choose either the “Cash Withdrawal” or “Balance Inquiry” option. (Remember, you cannot check your SNAP balance at an ATM.)
- Select the “Checking” option.
- Enter the amount of cash you want to withdraw.
- When your transaction is approved, the ATM gives you cash, a printed receipt and your card.
- Do not forget to take your receipt, card, and cash.

When using your card at an ATM, remember:

- Be careful. Only use ATMs in a well-lit area.
- Look out for suspicious people. If you feel you are in danger, cancel your transaction, get your card, and leave the area.
- Be prepared. Have your card ready to use.
- Keep your PIN safe. Do not write your PIN on your card.
- Enter your PIN carefully so no one else sees you enter it.
- Keep your last receipt.



How do I get a replacement card or PIN?

You have safe, secure 24/7 access to your Illinois Link information. Call the Help Line or use a computer to go to the web site. You can report your card as lost, stolen or damaged to protect your benefits, request a replacement card, select or change your PIN, and check your balances. Replacement cards are mailed to the address that you gave to your DHS office. If

you have moved, you can report your new address to the Help Desk operator when replacing your card and they will change your address. You will need to make sure the post office has your new address, too. Once you report a card lost, stolen or damaged, you will not be able to use your benefits until you receive the replacement card in the mail. Please allow seven (7) days for mail delivery. You can also call the Help Line to report a problem with an ATM or Link equipment in a store, or if you have a question about a purchase or withdrawal at a retailer, and receive training or help with your Illinois Link card.

How do I find out how much money is in my Illinois Link account?

- Look on your last receipt.
- Use a secure computer and go to the web site: www.Link.Illinois.gov.
- Get your balance at a store. Some stores can give you your balance without having to make a purchase.
- Call the Help Line at 1-800-678-LINK.
- Go to an ATM (for cash account balance only). You cannot get your SNAP balance at an ATM, only your cash balance. Remember, you may be charged a fee — even for a balance inquiry.

What information do I need when I want to call the Help Line or go to the web site?

You use the same information when you call the Help Line or use the web site. You must have your:

- Nine-digit Social Security Number
- Date of Birth and,
- PIN, OR
- 16-digit number on the front of your card.

If you receive benefits for your children, or other dependents, but not for yourself, you may need their information before calling the Help Line. If you call to replace your card, you need to know your PIN. If you forgot your PIN, you can choose the option to select a new PIN before ordering a replacement card.

What happens if I stop using my Illinois Link card?

If you do not use all your benefits each month, they stay in your account and are added to the next month's benefits. However, if you do not use your benefits to make a purchase or a cash withdrawal for 274 days (9-months), the benefits will no longer be available. Use of SNAP and cash benefits are counted separately.



The Safe and Easy

Link to you benefits



📞 1-800-678-LINK (5465)

24 hours a day, 7 days a week

www.Link.Illinois.gov

For questions on eligibility or to report fraud,
call 1-800-843-6154 (DHS)

1-866-324-5553 TTY/Nextalk, 711 TTY Relay

📞 1-800-678-LINK (5465)



24 hours a day, 7 days a week

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REPORTING CHANGES - SNAP

If you receive SNAP benefits, you must tell your caseworker about changes that happen to you or to any of the persons who live with you.

When a change occurs, you may qualify for a different amount of SNAP benefits. Your caseworker cannot increase your SNAP benefits until you report the change. If you are eligible for less SNAP benefits because you did not report a change, you may have to repay the amount that you received but were not entitled to receive.

If your household is not a Mid-Point Reporting Unit, you must report the following changes within 10 days of the date that the change happened. When:

- * CHANGES IN THE SOURCE OR TOTAL OF EARNED INCOME OF MORE THAN \$100 A MONTH, OR UNEARNED INCOME OF \$100.00 A MONTH, UP OR DOWN. (You DO NOT have to report changes in your cash benefits paid by DHS);
- * PEOPLE WHO MOVE IN OR OUT OF YOUR HOUSEHOLD, INCLUDING NEWBORNS;
- * IF YOU HAVE MOVED, YOUR NEW ADDRESS, TELEPHONE NUMBER AND CHANGES IN RENT OR MORTGAGE AND UTILITIES; and/or
- * IF YOU RECEIVE A DEDUCTION FOR CHILD SUPPORT PAYMENTS, REPORT WHEN THE SUPPORT ORDER CHANGES OR ENDS.

SNAP units in Mid-Point Reporting status are only required to report when their income exceeds their Gross Monthly Income Standard.

To report a change, contact your caseworker in person, by telephone, by mail or online at abe.illinois.gov. If you are mailing in a report of a change, you may use the Change Report Form given to you when you first applied for SNAP benefits. If you no longer have your Change Report Form, you can request an additional copy from your local office.

USDA Nondiscrimination Statement

In accordance with Federal civil rights law and U.S. Department of Agriculture (USDA) civil rights regulations and policies, the USDA, its Agencies, offices, and employees, and institutions participating in or administering USDA programs are prohibited from discriminating based on race, color, national origin, sex, religious creed, disability, age, political beliefs, or reprisal or retaliation for prior civil rights activity in any program or activity conducted or funded by USDA.

Persons with disabilities who require alternative means of communication for program information (e.g. Braille, large print, audiotape, American Sign Language, etc.), should contact the Agency (State of Illinois Department of Human Services) where they applied for benefits. Individuals who are deaf, hard of hearing or have speech disabilities may contact USDA through the Federal Relay Service at (800) 877-8339. Additionally, program information may be made available in languages other than English.

To file a program complaint of discrimination, [complete the USDA Program Discrimination Complaint Form, \(AD-3027\)](http://www.ascr.usda.gov/complaint_filing_cust.html) found online at: http://www.ascr.usda.gov/complaint_filing_cust.html, and at any USDA office, or write a letter addressed to USDA and provide in the letter all of the information requested in the form. To request a copy of the complaint form, call (866) 632-9992. Submit your completed form or letter to USDA by:

- (1) Mail: U.S. Department of Agriculture
Office of the Assistant Secretary for Civil Rights
1400 Independence Avenue, SW
Washington, D.C. 20250-9410;
- (2) Fax: (202) 690-7442; or
- (3) Email: program.intake@usda.gov.

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This is an equal opportunity employer.

Additional Illinois Nondiscrimination Information

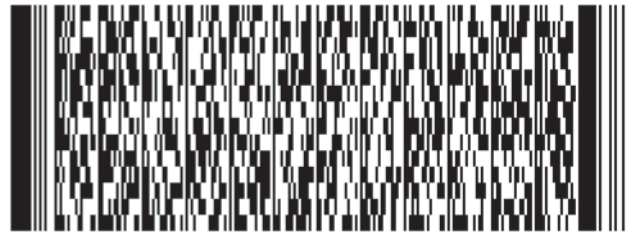
You may also write the Department of Human Services (IDHS) at Department of Human Services, Bureau of Civil Affairs, 401 South Clinton St., 6th Floor, Chicago, Illinois, 60607 or call the IDHS Helpline Number at 1-800-843-6154 or 866-324-5553 TTY/Nextalk or 711 Relay.

DHS, HHS, and USDA are equal opportunity providers and employers.

The State of Illinois provides reasonable accommodations according to Section 504 of the Rehabilitation Act of 1973 and the Americans with Disabilities Act of 1990.



State of Illinois Department of Human Services
**Supplemental Nutrition Assistance Program
(SNAP) CHANGE REPORT FORM**
(formerly the Food Stamp Program)



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THIS IS NOT AN APPLICATION. Use this form to report CHANGES ONLY.

Last Name: _____ First Name: _____ Case Number (If known): _____

Address: _____ City: _____ County: _____ State: _____ Zip: _____

You must report the following changes within TEN (10) days from the time you learn of the change if your household is not a Mid-Point Reporting Unit:

- * CHANGES IN THE SOURCE OR TOTAL OF EARNED INCOME OF MORE THAN \$100 A MONTH, OR UNEARNED INCOME OF \$100.00 A MONTH, UP OR DOWN. (You DO NOT have to report changes in your cash benefits paid by DHS);
- * PEOPLE WHO MOVE IN OR OUT OF YOUR HOUSEHOLD, INCLUDING NEWBORNS. (List names, birth dates, social security numbers and income.);
- * IF YOU HAVE MOVED, YOUR NEW ADDRESS, TELEPHONE NUMBER AND CHANGES IN RENT OR MORTGAGE AND UTILITIES; and/or
- * IF YOU RECEIVE A DEDUCTION FOR CHILD SUPPORT PAYMENTS, REPORT WHEN THE SUPPORT ORDER CHANGES OR ENDS.
- * IF YOU OR ANYONE IN YOUR HOUSEHOLD IS REQUIRED TO MEET WORK REQUIREMENTS, REPORT ANY CHANGES IN WORK HOURS THAT FALL BELOW 20 HOURS PER WEEK, AVERAGED MONTHLY.

Mid-Point Reporting Units

If you choose to report changes, you may use this Change Report Form to report your change to the local office.

LIST CHANGE(S) AND THE DATE OF THE CHANGE(S) BELOW: (Use an additional sheet, if necessary.)

1. _____

2. _____

3. _____

Do you expect the change(s) you are reporting to continue next month? ☐ YES ☐ No If "NO", please explain:

PLEASE READ THE FOLLOWING STATEMENT AND SIGN BELOW:

I understand the penalty for hiding information or giving false information. I also understand that I will owe the value of any extra SNAP benefits I receive if I do not fully report changes in my household. I agree to provide proof of any changes I report if asked. My answers on this form are correct and complete to the best of my knowledge.

YOUR SIGNATURE

DATE

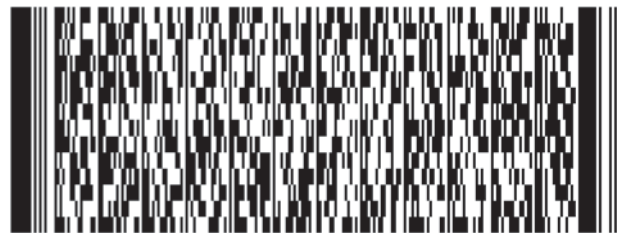
TELEPHONE



PLEASE TURN THE PAGE
FOR IMPORTANT INFORMATION.



State of Illinois Department of Human Services
**Supplemental Nutrition Assistance Program
(SNAP) CHANGE REPORT FORM**
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Last Name: _____ First Name: _____

CASE NUMBER (If known): _____

If you are interested in applying to register to vote, please go to www.elections.il.gov/ or call the Department of Human Services Help line at 1-800-843-6154, or 1-866-324-5553 TTY/Nextalk, 711 TTY Relay. If you would like assistance or need translation services, please contact your DHS Family Community Resource Center.

PENALTY WARNING

The information provided on this form is subject to verification by Federal, State and local officials. If any information is found to be inaccurate, you may be denied SNAP benefits and/or subject to criminal prosecution for knowingly providing false information.

Any member of your SNAP unit who intentionally breaks any of the following rules can be barred from the SNAP for:

- * TWELVE (12) MONTHS after the first violation;
- * TWENTY-FOUR (24) MONTHS after the second violation; and
- * PERMANENTLY for the third violation.

The individual can also be:

- * FINED UP TO \$250,000,
- * IMPRISONED FOR UP TO TWENTY (20) YEARS;
- * OR BOTH.

The individual may also be subject to further prosecution under other applicable Federal laws.

Individuals found guilty in a court of law for trading coupons for controlled substances will be barred from the SNAP participation.

- * TWENTY-FOUR (24) MONTHS for the first offense; and
- * PERMANENTLY for the second offense.

Individuals found guilty in a court of law of selling firearms, ammunition or explosives for coupons will be barred PERMANENTLY.

An individual found guilty of trafficking SNAP benefits of \$500 or more will be permanently barred from SNAP participation. An individual who is found to have made a fraudulent statement or representation about identity and residence to get multiple benefits at the same time will be barred for 10 years. Individuals who are fleeing felons or probation/parole violators are ineligible for SNAP benefits.

DO NOT GIVE FALSE INFORMATION OR HIDE INFORMATION TO GET OR CONTINUE TO GET SNAP BENEFITS. SNAP BENEFITS MAY NOT BE TRADED OR SOLD. SNAP BENEFITS MAY BE USED FOR FOOD PRODUCTS ONLY AND MAY NOT BE USED TO BUY INELIGIBLE ITEMS SUCH AS ALCOHOLIC DRINKS AND TOBACCO. YOUR HOUSEHOLD MAY NOT USE SOMEONE ELSE'S SNAP BENEFITS.

We will use the information you give us to compute your amount of benefits. Before we change your benefits, we will send you a notice. If you disagree with our decision, you can have a fair hearing upon request. A hearing official will decide if you are right.

You may also report changes to your caseworker in person by calling: _____ .





State of Illinois Department of Human Services
**Supplemental Nutrition Assistance Program
(SNAP) CHANGE REPORT FORM**
(formerly the Food Stamp Program)



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Last Name: _____ First Name: _____

CASE NUMBER (If known): _____

What does IDHS do with your Social Security Number?

The SSN will be used in the administration of the SNAP program to check the identity of household members, prevent duplicate participation, and to facilitate making mass changes. If you or any member of your household wants to apply for SNAP benefits, but does not have a SSN, we can help you apply for one. The SSN (or any other information in this application) may be used in computer matching and program reviews or audits and to make sure the household is eligible for SNAP benefits, other Federal assistance programs, and Federally assisted state programs, such as school lunch, TANF, and Medicaid. This may result in criminal or civil action or administrative claims against persons fraudulently participating in the SNAP program. We do not require a Social Security Number for any member of your household who is not eligible for the SNAP program or who does not wish to apply.

Why does IDHS collect your Social Security Number?

IDHS secures and uses information about all clients through the income and eligibility verification system. This includes such information as receipt of social security benefits, unemployment insurance, unearned income and wages from employment. When information does not match, we may contact a third party, such as employers, claims representatives, or financial institutions to verify the information. This information may affect your eligibility for assistance and the amount of assistance provided.

USDA Nondiscrimination Statement

In accordance with Federal civil rights law and U.S. Department of Agriculture (USDA) civil rights regulations and policies, the USDA, its Agencies, offices, and employees, and institutions participating in or administering USDA programs are prohibited from discriminating based on race, color, national origin, sex, religious creed, disability, age, political beliefs, or reprisal or retaliation for prior civil rights activity in any program or activity conducted or funded by USDA.

Persons with disabilities who require alternative means of communication for program information (e.g. Braille, large print, audiotope, American Sign Language, etc.), should contact the Agency (State of Illinois Department of Human Services) where they applied for benefits. Individuals who are deaf, hard of hearing or have speech disabilities may contact USDA through the Federal Relay Service at (800) 877-8339. Additionally, program information may be made available in languages other than English

To file a program complaint of discrimination, [complete the USDA Program Discrimination Complaint Form, \(AD-3027\)](http://www.ascr.usda.gov/complaint_filing_cust.html) found online at: http://www.ascr.usda.gov/complaint_filing_cust.html , and at any USDA office, or write a letter addressed to USDA and provide in the letter all of the information requested in the form. To request a copy of the complaint form, call (866) 632-9992. Submit your completed form or letter to USDA by:

- (1) Mail: U.S. Department of Agriculture
Office of the Assistant Secretary for Civil Rights
1400 Independence Avenue, SW
Washington, D.C. 20250-9410;
- (2) Fax: (202) 690-7442; or
- (3) Email: program.intake@usda.gov.





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Last Name: _____ First Name: _____

CASE NUMBER (If known): _____

This institution is an equal opportunity provider.

This is an equal opportunity employer.

Additional Illinois Nondiscrimination Information

You may also write the Department of Human Services (IDHS) at Department of Human Services, Bureau of Civil Affairs, 401 South Clinton St., 6th Floor, Chicago, Illinois, 60607 or call the IDHS Helpline Number at 1-800-843-6154 or 866-324-5553 TTY/Nextalk or 711 Relay.

DHS, HHS, and USDA are equal opportunity providers and employers.

The State of Illinois provides reasonable accommodations according to Section 504 of the Rehabilitation Act of 1973 and the Americans with Disabilities Act of 1990.



SNAP Interview Checklist

All sections in **bold** must be read to the customer during the interview process.

[To print](#)

INTRODUCTION

I am here to assist you in your application for Cash, Medical, and/or Supplemental Nutrition Assistance Program (SNAP) benefits. As we go through this interview, I will be asking you a number of questions. The responses that you provide will help determine if you are eligible for Cash, Medical, or SNAP benefits. If at any time during this interview, you do not understand something, please do not hesitate to ask. We are here to help. We will work together to get your Cash, Medical SNAP benefits started as quickly as possible.

Click the link and read Rights and Responsibilities to client:

[IDHS OneNet: Rights & Responsibilities \(illinois.gov\)](#) (OneNet page 136662)

Confidentiality

([PM 01-01-04](#))

Customer records are confidential, information is used by the Department, contracted providers, and others strictly for the administration of the programs, with certain exceptions specified by law.

The FCRC must offer a SNAP household a copy of their completed SNAP application.

([PM 02-04-00](#)) ([PM 19-03-00](#))

Did you need a copy of the application you completed for this interview?

Inform clients about programs handled by other federal, state, or community agencies.

([PM 01-01-05](#))

The Illinois Department of Human Services (IDHS) provides many services to help people in Illinois have better lives, including information and referrals to services provided by other agencies and community partners. Some of the other services IDHS can offer are:

Medical Benefits	SNAP Benefits	Cash Assistance
Employment and Training Services	Alcohol and Substance Abuse Services	Child Support
Domestic Violence Services	Mental Health Services	Crisis Nursery
Services for Pregnant Women	Child Care Services	Homeless Services
	Services for Teen Parents	Food Pantries
		LIHEAP

Women, Infants and Children (WIC)	Group Care - Nursing Homes
Services for People with Disabilities	Earned Income Tax Credit (EITC)
Services for Senior Citizens	
Healthy Families Illinois	

Accessing benefits

During the eligibility interview, staff must give Cash and SNAP applicants the Link brochure in their language preference if available and discuss the use of the Link card and the client's rights and responsibilities regarding the card. ([PM 22-01-01-a](#))

The Illinois Link system issues cash and SNAP benefits electronically through your Illinois Link account. The Illinois Link account is connected to the Illinois Link card issued to you. You will access your benefits using the Illinois Link card that is like a bank card. If you are expedited, our office will issue you a Link card. If you are not expedited, your LINK card will be mailed to you within 7 to 10 days. You will need to activate your LINK card and select your own PIN Number. Do not tell anyone your PIN and do not write your PIN on your LINK card. If you give your card and PIN to someone else and they use your benefits - your benefits will NOT be replaced.

You will need to keep the card; you will not receive a new card each month. You can use the checking option to withdraw cash benefits at ATMs. You can only get cash if you receive cash assistance. You cannot get cash from an ATM if you only receive SNAP. You can use the toll-free number (1-800-678-LINK) or the web site at www.Link.Illinois.gov to get a history of your card use, check your benefit balances, select a PIN, report a lost, stolen or damaged Illinois Link card or request a replacement card by mail. Please allow seven (7) days for mail delivery.

If the customer is not in the office explain:

You will receive a brochure in the mail with the title, Illinois Link Program, this brochure will include all the information I just explained and additional information you may need.

SNAP Purchases

Inform the SNAP unit about the kinds of items they can purchase with SNAP benefits. ([PM I-05-01](#))

Only SNAP unit members, or other persons selected by them, may use SNAP benefits to purchase food for the unit.

- **SNAP benefits can be used:**
 - **to buy any food or food product for human consumption;**
 - **seeds and plants for use in home gardens to produce food;**
 - **to pay for meals-on-wheels;**
 - **or to pay for group community dining;**
 - **or at approved: shelters, restaurants, treatment centers, and group living homes.**

- the elderly (60 years and older) and/or disabled and their spouses and homeless households may use their LINK card to purchase meals from authorized restaurants in DeWitt County, Franklin County, and Cook County in zip codes 60619, 60620, 60628 and 60617 that display the Restaurant Meals Program (RMP) sign at their restaurant.
 - **SNAP benefits cannot be used:**
 - to buy hot foods ready to eat unless meeting criteria for Restaurant Meals Program discussed earlier;
 - to buy food intended to be heated in the store;
 - to buy lunch counter items or foods to be eaten in the store; to buy vitamins or medicines; to buy pet foods;
 - to buy non-food items such as alcohol, paper products, cleaning supplies or tobacco;
 - to pay old grocery bills.
 - **SNAP benefits are for you and those you are applying for and are not to be shared with anyone else.**
-

Benefit determination and availability:

- **The amount of SNAP benefits you will get each month is based on the size of your household, your income, and your allowable expenses. Your caseworker will decide your allowable expenses by adding up the amount you are charged each month for your rent or mortgage, property taxes, homeowners' insurance, utility bills, childcare, child support payments and in some cases the medical bills of anyone in your household who is elderly or has a disability. The SNAP benefits your household receives depend on the size of your household and the income you have left after your caseworker subtracts allowable deductions.**
- **Each benefit program requires the verification of certain financial and nonfinancial eligibility factors. In addition, verification must also be obtained for information which is questionable. You will receive a written notice that lists what is still needed. We will allow 10 calendar days to provide the verification. If you do not provide the requested verifications, your application may be denied. If you need more time or help in getting information, notify your Family Community Resource Center before the due date.**
- **Eligibility for Cash and SNAP benefits is determined from the date of application and will be prorated if not filed by the first day of the month. ([PM 13-02-05](#))**
- **If you are approved, the notice of decision will tell you the household members who are eligible/ineligible for benefits, how much you will receive and other important information such as your right to appeal if you disagree with the decision, reporting changes, and nondiscrimination.**
- **Additionally, your notice will provide the date you can expect to receive your initial benefit as well as when you can expect to receive your regular monthly benefit. Please read your notice carefully as your initial benefits may include the first month's benefits only or it may include both your first and second month's benefits on the LINK card**

when you receive it. Your notice will also inform you of your certification period, reporting requirements, and other important information about your case.

- If you are denied, the notice will inform you of the denial reason and other important information such as your right to appeal if you disagree with the decision and nondiscrimination.
 - The agency has up to 5 days from the date of application to make benefits available for household meeting expedited eligibility and up to 30 days from the date of application to make benefits available to the household when eligible at initial applications. [PM 02-08-02-b](#), [PM 17-01-01](#)
-

How to stay eligible:

Tell IDHS when you move so we can send important information to your new address. If you are homeless, tell your caseworker where you can be reached. If your caseworker cannot find you, your SNAP benefits will stop. Try to keep all your appointments with your caseworker. If you cannot keep an appointment, tell your caseworker right away. Your caseworker will work with you to set up another appointment.

Approximately 60 days prior to the end of the certification period, the Medical, Cash, and SNAP Redetermination notice will be mailed. This form must be completed and returned by the due date on the notice. If you do not recertify, Cash and/or SNAP benefits will end.

Manage My Case

The State of Illinois' Application for Benefits Eligibility (ABE) website now has features to help you manage your benefits online, anytime. You can use ABE Manage My Case to:

- Check the status of an application
- Renew benefits
- Report changes - income, household members, expenses, or new address
- Upload documents
- View notices
- View and reschedule upcoming appointments
- File and manage appeals

It's easy to set-up. Go to <http://ABE.Illinois.gov>, click on the green "Manage My Case" button, enter your ABE User ID and Password. If you don't have an ABE account, click 'Create an ABE account' to register. After logging in, select 'Link your account' and enter your date of birth and Social Security Number or Individual ID number. This one-time process will link your ABE account to your benefit case information. When you link your case to your ABE account, you will be asked to answer a few questions to confirm your identity. Once you are all set up, use your ABE user ID and password to login every time you want to use Manage My Case. If you have questions, you can email ABE.Questions@Illinois.gov.

Work Provisions, Work Requirement, & SNAP E&T

FNS requires that an oral explanation be provided to the SNAP household of the applicable work rule that applies to nonexempt person and the consequences of failing to comply. After discussing the exemptions with the SNAP household and determining that a person does not meet an exemption, Complete SNAP Work Rules ([Form IL444-5175/Form IL444-5175S](#)) for the nonexempt person and explain the work rule that the nonexempt person is required to comply with. Use the SNAP Work Rule notice as your guide to explaining the applicable sections.

SNAP recipients who are age 16 through 59 and do not meet an exemption in [PM 03-15-02](#) must comply with the Work Provisions work rules in [PM 03-15-02](#) and a subset of this population who are age 18 through 49 and did not meet a Work Provision exemption must meet the Work Requirement, unless one of the following additional exemptions are met.

- there is someone under the age of 18 in the SNAP household; or
- the person who would potentially be required to participate is pregnant.
 - Note: A person is not required to comply with the Work Requirement if they are exempt under the Work Provisions.

Work Provisions

- **A nonexempt person must comply with the Work Provisions to get benefits:**
 - **Register for work by receipt of the SNAP Work Rules ([IL444-5175](#)), at the time of application and every 12 months thereafter; and**
 - **Take a suitable job if offered; and**
 - **Not voluntarily quit a job or reduce your work hours below 30 hours a week without a good reason; and**
 - **Tell the FCRC about their job, rate of pay and the number of hours worked, if asked.**
- **When a nonexempt person fails to comply with the Work Provisions without good cause, they may be sanctioned for:**
 - **3 months the first time;**
 - **another 3 months the second time; and**
 - **6 months for the third or more times.**
 - **The nonexempt person must follow the Work Provision work rules before they can get SNAP benefits again.**

Work Requirement

- **If a nonexempt person fails to comply with the Work Requirement work rule, they can only get SNAP benefits for 3 months in a 3-year period. The current 3-year period began January 1, 2021 and ends December 31, 2023. However, the entire state is waived from implementing the policy through 10/31/2023.**
- **If the policy was in effect, each full month that the nonexempt person receives SNAP and did not meet the Work Requirement without good cause would be counted toward the 3-month limit. Once 3 full months have been counted, the nonexempt person's eligibility for SNAP would be lost until January 2024. You must comply with both the Work Provisions discussed previously and the Work Requirements.**

- **The Work Requirement can be met each month by doing one or a combination of the following:**
 - **Work at least 80 hours a month. Work can be for pay, for goods or services (for something other than money), unpaid, or as a volunteer;**
 - **Participate in a work program at least 80 hours a month. A work program could be SNAP Employment and Training or another federal, state, or local work program;**
 - **Participate in a combination of work and work program hours for a total of at least 80 hours a month;**
 - **Participate in workfare for the number of hours assigned to each month (the number of hours will depend on the SNAP benefit amount).**

Good Cause

Sometimes things happen that prevent a person from following the work rules like getting sick or lack of transportation to get to work. A nonexempt person may claim Good Cause for either work rule. If the nonexempt person has good cause for not complying the action to stop benefits will not be taken. The SNAP household must contact the FCRC to report that they have a good cause reason for not following the work rules.

SNAP Employment and Training Program (SNAP E&T)

The SNAP Employment and Training Program is a voluntary program that provides opportunities for SNAP recipients, (except those receiving TANF Cash), to acquire work skills and find employment. The program also helps with work-related expenses for the first 30 days of a job. Volunteers in the program cannot be sanctioned.

If yes, then the FCRC completes Page 1 of the Employment and Training Assessment (Form IL 444-5179), client and FCRC sign on Page 4 Email the form to the Office of Workforce Development through the respective region's email address below. Enter in the subject line of the email: SNAP E&T Referral and the case number. Do not put a customer's name in the email.

Region 1 send to: DHS.FCS.SNAPRegion1@illinois.gov

Region 2 send to: DHS.FCS.SNAPRegion2@illinois.gov

Region 3 send to: DHS.FCS.SNAPRegion3@illinois.gov

Region 4 send to: DHS.FCS.SNAPRegion4@illinois.gov

Region 5 send to: DHS.FCS.SNAPRegion5@illinois.gov

Tell the customer that the Office of Workforce Development will contact them within 30 days.

Substantial Lottery and Gambling Winnings

([PM 07-04-21](#))

You must report when a single substantial lottery or gambling winning of more than \$4,250 is received at the REDE and Mid-Point Report.

There are two separate types of reporting requirements, and your approval notice will indicate the reporting requirement for your household. For Change Reporting households, You must report within 10 calendar days of the date of receipt during the certification

period; or for Mid-Point Reporting households, You must report by the 10th calendar day of the month after the month that the income or winnings were received during the certification period. A Mid-Point Reporting household cannot wait until the Mid-Point Report or REDE to report the receipt of substantial lottery or gambling winnings.

The household must report even if the winnings are spent or reduced below the limit within the reporting timeframe . The SNAP case is still closed based on the receipt of the winnings.

Required Pamphlets

Along with the LINK form discussed earlier, you are also going to get several other forms and brochures in the mail. I will also be sending you some paperwork regarding other services offered through DHS, Information about our SNAP program which includes benefit amounts and income guidelines so you will know when to report income, and some brochures regarding information on your rights and the appeals process. Do you have any questions for me at this time?

- **Form 124, SNAP (rev. 9-22) - Form given or mailed to customer**
 - [Form 124 English](#)
 - [Form 124S Spanish](#)
- **Form 124D, Supplemental Nutrition Program (SNAP) (rev. 9-22) - Form given or mailed to customer**
 - [Form 124D English](#)
 - [Form 124DS Spanish](#)
- **Form 377, Appeals and Fair Hearings (rev. 9-22) - Form given or mailed to customer**
 - [Form 377 English](#)
 - [Form 377S Spanish](#)
- **Form 565N, Applying for Benefits (rev. 9-22) - Form given or mailed to customer**
 - [Form 565N English](#)
 - [Form 565NS Spanish](#)
- **Form 592, Your Civil Rights (rev. 9-22) - Form given or mailed to customer**
 - [Form 592 English](#)
 - [Form 592S Spanish](#)
- **Form 4474, Guide to DHS Services - Form given or mailed to customer**
 - [Form 4474 English](#)
 - [Form 4474S Spanish](#)

- **Form 4762 ES, Guide to Your Supplemental Nutrition Assistance Program (SNAP) (rev. 12-17) Form given or mailed to customer**
 - [Form 4762 ES](#)
- **Form 1978, SNAP Change Report Form - Form given or mailed to customer (rev. 04-22) (At the time of approval and each time it is returned by the customer send a new form.)**
 - [Form 1978](#) English
 - [Form 1978S](#) Spanish
- **Form 2777, Reporting Changes - SNAP (rev. 04-22) - Form given or mailed to customer**
 - [Form 2777 English](#)
 - [Form 2777S Spanish](#)
- **WCS 9203, LINK - Form given or mailed to customer**
 - [WCS 9203 English](#)
 - [WCS 9203 Spanish](#)
- **5175 SNAP Work Rules - This form has to be completed with the SNAP household and if not an in-person interview can be mailed after completion, but the oral explanation along with completion of the form must be done**
 - [Form 5175 English](#)
 - [Form 5175S Spanish](#)

Rights & Responsibilities

Please listen carefully to your Rights and Responsibilities. If you do not understand something that is read to you, please ask your caseworker to explain. A copy of will also be given to you in writing.

Appeal (Your Right)

You have the right to file an appeal if you disagree with decisions made on your application and/or actions taken on your case. Appeals should be filed within 60 days for cash or medical decisions and 90 days for decisions on SNAP benefits. If IDHS fails to make a timely decision, there is no time limit to file an appeal.

Non-Discrimination (Your Right)

IDHS will not discriminate against any person based on race, color, national origin, sex (including gender identity and sexual orientation), religious faiths, disability, age, political beliefs, or retaliation for prior civil rights activity in any program or activity conducted or funded by USDA.

Customer Grievance (Your Right)

Applicants and recipients of IDHS program benefits and services have the right to be treated with dignity and respect. If you feel that you were mistreated by an IDHS staff member for reasons other than discrimination, you have the right to file a written complaint within 60 days from the date of mistreatment.

Social Security Numbers (Your Responsibility)

SNAP, cash and medical programs require a Social Security Number for every member of your household applying for assistance. SSNs are used to verify identity and to prevent duplicate participation. If you do not have a SSN, we can help you apply for one.

Citizenship and Alien Status (Your Responsibility)

Under penalty of perjury, you are declaring citizenship or alien status of each person applying for assistance are true and correct. If information is found to be incorrect, you may be denied assistance or subject to criminal prosecution for providing false information

Reporting Changes (Your Responsibility)

You are responsible for reporting changes after this interview and BEFORE a notice of decision is sent within 10 calendar days unless otherwise notified.

If your case is approved, your approval notice will let you know the approval certification period.

During the approved certification, you will be required to report changes to the FCRC.

There are two separate types of reporting requirements, and **your approval notice will indicate the reporting requirement for your household.**

Mid-Point Reporting Households are required to report the following changes by the 10th calendar day following the month of the change:

- When total gross income exceeds the income standards for the household size;
- When a household member who is subject to work requirements works less than 20 hours per week; and
- When a household member receives substantial lottery or gambling winnings.

Mid-Point Reporting households will also be required to report and verify all other changes on the Mid-Point Report which will be mailed in the 5th month of approval. Failure to return the Mid-Point Report will result in case cancellation.

Change Reporting Households are responsible to report changes within 10 calendar days.

Additional Responsibilities

The following apply to SNAP:

- If you are approved for SNAP benefits and receive more benefits than you are entitled to, whether an error on your part or an agency error, the amount of overpaid benefits may be subtracted from monthly benefit amounts;
- Failure to report or verify expenses will be seen as a statement by your SNAP household that you do not want to receive a deduction for the unreported expenses. Child support payments are subject to verification by computer matching with the records of the Division of Child Support Enforcement
- Do not trade, steal or sell SNAP benefits, or resell food bought with SNAP benefits;
- Only purchase food items for your SNAP household with your SNAP benefits;
- Do not use someone else's SNAP benefits;
- Do not trade SNAP benefits for controlled substances;
- Do not trade SNAP benefits for firearms, ammunition or explosives;
- Do not give false information about who you are or where you live.

Failure to comply could result in losing SNAP benefits.

The following apply to Cash or Medical Assistance:

- Provide information that is true and accurate;
- If required, you must provide information and cooperate with establishment of paternity and child support enforcement if applying for yourself and your children;
- If you are approved for TANF, you agree to assign and give all your rights, title and interest of child support and medical support to HFS as long as you receive TANF/Medical assistance;
- Avoid intentional misuse of the Medicaid medical card;
- The State may release information concerning medical services you received for any reason which is authorized by law;
- Upon approval, you give the State the right to recover private or public health care coverage amounts you or your family may be eligible to receive;
- Upon approval, you will help obtain medical support payments and give the State the right to collect medical support payments;

- Upon approval, you authorize the State to obtain information on you from SSA which may be protected under the Privacy Act;
- If you or anyone you have applied for is not eligible for Medicaid or All Kids, the State will send your information to the Health Insurance Marketplace who may require additional information.
- For **Aid to the Aged, Blind, or Disabled**, DHS may have the right to place a lien on your home or other real estate property you own if receiving cash and/or medical assistance. The lien amount is the amount of assistance DHS has provided to you.
- You authorize release of your records from SSA to the staff of IDHS with respect to any claims for disability benefits and all related appeals and you understand that the records requested and received may be protected under the Privacy Act.

To decide if you qualify for assistance, DHS will use the information provided as well as information from other sources such as Social Security benefits, unemployment benefits, wages from employment, and unearned income. We may check any information you gave us. You must help us if we ask you to prove the information is correct.

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