

Medical Insurance Coverage for Immigrant Seniors in Illinois FAQ

These Frequently Asked Questions (FAQs) will be updated periodically to reflect common questions from consumers and enrollment assisters. For your reference, here are various official resources about the new Health Benefits for Immigrant Seniors program: [HFS Provider Notice](#) and [DHS Policy Memo](#).

1. Is this program strictly for age 65 and older?
A: The program is only for Illinois residents 65 years of age and older.
2. Will this be included as a separate program in ABE?
A: Applicants should apply for healthcare coverage. There is not a separate program listed in ABE for the new coverage. Based on the answers to the age and citizenship questions, the State will approve eligibility for Health Benefits for Immigrant Seniors.
3. What immigration statuses are eligible for Health Benefit for Immigrant Seniors Program?
A: An individual eligible for this new program will have an immigration status that makes them ineligible "for medical assistance receiving federal financial participation other than emergency medical for certain non-citizens".
4. Do all undocumented immigrants 65+ qualify for the medical insurance program?
A: All documented and undocumented immigrants 65+ who do not qualify for Medicaid are eligible for the new medical insurance program as long as they meet the income and resource requirements and they live in Illinois. Note: there are no resource requirements during the Public Health Emergency.
5. What are the public charge implications of this program?
A: Remember that many immigration statuses are not subject to the public charge rule. For a list of immigration statuses that are not subject to the rule please see the [fact sheets in multiple languages from Protecting Immigrant Families-Illinois](#). Enrollment in this program will not harm the senior subject to the public charge test.
6. Since the ABE asks for a Social Security Number, will they get approved even if a Social Security Number is not entered?
A: A social security number is not required in order to enroll in this program.
7. The ABE application asks whether someone is a citizen or not. Do applicants need to fill that out?
A: Yes, please have applicants indicate that they are a citizen or a non-citizen in the application. They should not leave it blank because they may be denied if they have not indicated that they are a non-citizen.

8. What services are covered?

A: The new medical program will offer a benefit package with \$0 premiums and \$0 co-payments. Covered services include all medical services covered under the current AABD program including: doctor and hospital care, lab tests, rehabilitative services such as physical and occupational therapy, home health, mental health and substance use disorder services, dental and vision services, and prescription drugs, and kidney transplants (except as provided in Section 118.750). Covered services are those described in [the HFS Provider Handbook, Chapter 100, Topic 103.1](#)

| Benefit/Service | Yes, Covered | No, Not Covered |
|--|--------------|-----------------|
| Durable Medical Equipment | X | |
| In-Home / Adult Day Care | | X |
| Transportation Services | X | |
| Mental Health Services | X | |
| Homemaker Services | | X |
| Home Health when medically necessary | X | |
| Skilled Nursing Facility | | X |
| Speech, physical and occupational therapy services | X | |
| Short-term rehabilitation (under medical benefit) | X | |
| Vision Care | X | |
| Dental Care | X | |
| Post-Transplant Medication Coverage | X | |
| Hospice/Palliative Care (in home) | X | |

9. Kidney Transplant – will this be a covered procedure?

A: Kidney Transplants are covered; however, transplants always need to meet medical necessity criteria and have prior approval through HFS.

10. Do you have to be living in Illinois for a certain period of time in order to qualify?

A: There is no minimum time frame to establish residency. The applicant must be able to prove they live in IL and intend to remain in IL.

11. What proof of residence do you need to submit on ABE for this program?

A: ABE will attempt to verify residence through electronic matches or by documents already provided before requesting the applicant or client to provide proof. If proof is needed, here are the types of documents requested to prove residency:

| | | |
|--------------------|-------------------------|------------------------------|
| Rent Receipts | Leases | Utility Bills |
| Employment Records | Voter Registration Card | Driver’s License or State ID |



| | | |
|------------------------------|---|---|
| Medical Records/Clinic Cards | A document issued by a foreign consular showing an Illinois address (including expired IDs) | Mail postmarked within the last 30 days that includes first & last name and address of residence (no P.O. Box). |
|------------------------------|---|---|

- 12. If a 65 year old does not have an IL ID, how do we prove age?
 A: [If the age cannot be verified electronically, HFS will accept self-attestation.](#)

- 13. Would this program ask for tax information if client's complete taxes using an ITIN #?
 A: [An ITIN is used for tax filing purposes only. It is not needed as part of an ABE application.](#)

- 14. Can someone apply if they have a tourist visa?
 A: [A person who is visiting the U.S. with a travel / tourist visa is eligible for the medical program, but the usage of this program could impact their future immigration applications. We recommend the individual consult with an immigration attorney before submitting an application.](#)

- 15. If income is slightly higher than 100% FPL, will Spend Down play a part in this new coverage?
 A: [Yes, if the applicant's income is over the AABD limits but they have medical expenses they can use them to spenddown their income. For more information about how Spenddown works please see: HFS 591SP Medicaid Spend Down.](#)

- 16. Can more information be provided about assets?
 A: [The asset limit for a single person is \\$2,000, for 2 persons is \\$3,000. Assets include cash, investments, property, vehicles and other resources. Some assets do not count \(or are exempt\), like the home a person lives in. During the COVID-19 emergency, the state is not counting assets for Medicaid eligibility. This will continue until the end of the public health emergency.](#)

- 17. Does the \$25 income disregard apply to this program?
 A: [Yes. If it applies to AABD eligibility, it applies to this program as well. More information about the \\$25 income disregard may be found here.](#)

- 18. Is there an official income statement form from IDHS to fill out or can people write their own letter?
 A: [The application will ask for monthly income. When the application is submitted, applicants can upload a copy of whatever they have to show their monthly income. For example, paystub, bank statement, or a letter explaining where they get income \(including if they get income from a family member\). A document should be uploaded for each adult listed on the case that says they have income, even if it's the same document.](#)

- 19. Would you look at the past 30 days for income qualifications?



A: IDHS looks at the past 30 days for income eligibility. If the applicant is requesting retroactive coverage (up to 3 month backdating), the applicant must also show income eligibility for the 30 days prior to those months as well.

20. What if a couple lives together but they aren't legally married?

A: If not legally married, the partner living in the home will not be included in the household for the eligibility determination for the medical assistance.

21. Can the same application include kids and grandparents or is this a different application?

A: Submit a separate application for children and include the children's parents or guardians. If **the grandparents are the guardians/financially responsible for the children**, then you can use the same application.

22. Does any extended family living in the home also need to be included in the application, even if they are not applying for benefits?

A: This program uses the same income counting rules as the AABD program. This program uses relationship rules (not tax filing status) to determine whose income counts for eligibility. That means the household includes the applicant and the spouse living at home. Include children under 18 living in the home only if the applicant senior is the financial guardian.

23. Are stamped envelopes showing the client's address acceptable for proof of residency?

A: A utility bill, lease or government issued correspondence can be used for proof of residency

24. If a person lives with a family member and does not have a lease or rental agreement, does a letter from the owner of the home stating that person lives there work as proof of address?

A: Yes

25. If a letter is provided by family for proof of IL residence, does it need to be provided in English?

A: Documents can also be provided in Spanish

26. Can someone receive rehabilitation services after a hospitalization in a skilled nursing facility?

A: No, care in any type of Nursing Facility is NOT covered, including short term rehabilitation. Medically necessary services (including rehabilitation services) are covered in a hospital or outpatient setting.

27. Can you turn in a regular paper app to local IDHS offices?

A: Applicants may apply online via www.abe.illinois.gov, by calling the IDHS Help Line at 1-800-843-6154, and by mailing, faxing or dropping off a paper application to a local IDHS office. However, it is strongly recommended that individuals apply online.

28. Regarding the consent for assistance form being submitted with the proofing forms, should the assister sign the proofing form for them?

A: Yes, the assister/navigator/CAC can sign the ID proofing request form - but they must also include the consent form to document verbal consent was provided by the client. The consent form has to be submitted **each time** the Assister/Navigator/CAC signs/submits something on behalf of the client. Find the [consent form here](#).

29. Once you fill out the ID proofing form, what happens next?

A: After submitting the form to the ID Proofing Unit, allow 6-8 weeks for processing. The client will receive a notice, or email, if requested on the form, when the ID proofing form has been processed and whether it was approved. Once approved, the applicant may then log into their account using the ABE account information submitted on the ID Proofing Request form.

30. Could that over the phone consent form be sent out after the meeting?

A: No, the form must be completed with the client on the phone: [Temporary Guidelines to allow designated Assisters to assist clients telephonically during the COVID-19 emergency](#).

31. Since a signature is required, does the verbal consent form work for ID proofing too?

A: Yes, the assister/ navigator/ CAC can sign the ID proofing request form - but they must also include the consent form to document verbal consent was provided by the client.

32. Can we email forms and if so, what email address should we use?

A: Email can ONLY be used if the documents can be sent securely. It is up to the sender to secure the transmission of the documents. Recommended email address is: DHS.WebBits@Illinois.gov or Fax # 217-557-1370.

33. What is the turnaround time for responses when the proofing form is emailed?

A: Staff are turning around forms within 2-3 weeks. At outset, allow 6-8 weeks. To expedite the processing: 1) securely email or fax the ID proofing request form and consent form (if required); and 2) indicate on the form that an email response is requested. Applicants can try logging into their account through the green Manage My Case (MMC) on ABE.Illinois.gov to see if access was granted. If granted, they will go right to the summary page.

34. Will someone who enrolls in this program have to submit a redetermination every year?

A: Yes, redeterminations will occur annually.

35. Can we still send requests to expedite applications for this program to HFS.ACA@Illinois.gov?

A: Yes, you can request expediting in an urgent situation after the application is submitted. As in all cases, please request expedited processing only in urgent situations in which the applicant is not able to get medically necessary care until approved.

36. Do applicants who are 65 who have spouses under 65 need to apply for PSI in the same way they would for Medicaid if they're applying for waiver services?

A: No, they do not need to apply for PSI since PSI is related to LTC services which are not covered under this program.

37. Under Emergent need applications – we needed to submit the applications when the patient was discharged from the hospital. Does this apply as well to the new Senior program?

A: No, this is not Emergency Medicaid for Non-Citizens. This is a new program which you can apply for anytime (not just in an emergency). If the recipient is enrolled in the program and has an emergency, they will be covered like any other Medicaid recipient. If the person never applied for the program, the hospital can refer them to apply or help them apply as they do now for uninsured residents.

38. Do you have any resources for VTTC applications?

A: As of January 1, 2018, individuals who intend to file or have filed a U-Visa, T-Visa, and/or an Asylum application qualify for state funded cash, food and medical benefits. A Special Unit processes these applications. After submitting an application, email DHS.FCS.VTTC@illinois.gov, provide the Application tracking number and report that it is a VTTC application.

39. Do you have a flyer in Spanish with all of this information? / Is there a marketing flyer to promote it?

A: The HFS brochure is available in multiple languages:
<https://www.illinois.gov/hfs/Pages/CoverageForImmigrantSeniors.aspx>.

40. Is there Presumptive Eligibility or temporary coverage pending processing of applications for the Senior Immigrant Program?

A: No, there is not.