



State of Illinois
Department of Human Services
Department of Healthcare and Family Services

Date of Notice: April 27, 2023
Case Number: 526182315
Client Name: LISA JACKSON-POPE
Individual ID: 1005321626
Office Name: SOUTH LOOP FCRC
Office Address: 1112 S WABASH AVE
CHICAGO, IL 60605
Phone: 312-793-7500
TTY: 866-217-8037
Fax: 844-736-3563



LISA JACKSON-POPE
8147 S SPAULDING AVE
CHICAGO, IL 60652

You can manage your case online at abe.illinois.gov

Esta notificación está disponible en Español. Usted puede solicitarla por Internet en abe.illinois.gov o llame al 1-800-843-6154 (TTY 1-866-324-5553)

Notice of Decision

We reviewed your application for SNAP and Medical benefits. This notice explains our decision. The notice also tells you how you can appeal if you think our decision is wrong.

Your application for **Supplemental Nutrition Assistance Program (SNAP)** benefits filed on Apr 25, 2023 is **approved**. For information about who is approved and the amount of SNAP benefits you will get, read the SNAP Benefits section of this notice.

Your application for **Medical Benefits** filed on April 25, 2023 is **approved** for at least one person. For information about who is approved, and the benefits and months covered, read the Medical Benefits section of this notice.

How To Use Your Benefits

Cash and SNAP Benefits are available on the Illinois Link Card. Unless you received a card at the office where you applied one will be mailed to you. To choose your PIN or request a replacement card contact the Illinois LINK Help Line at 1-800-678-LINK (5465) TTY 1-877-765-3459 or go to the Illinois LINK card website at www.link.illinois.gov

The last page of this notice is your Medical Card. That page also tells you how to use your medical benefits. Be sure to keep that page.

You can manage your case online through ABE (www.abe.illinois.gov). To learn how, read the **Manage My Case Online** section in this notice.

This notice contains important information. If you cannot read this notice, please call us at 1-800-843-6154 (TTY 1-866-324-5553) for help. Please stay on the line while you are connected with an interpreter.

Turn this page over to read more information on the back.



Medical Benefits

The person(s) listed in the table below have been **approved** for ongoing Medical benefits.

Name	Birth Date	Medical ID (RIN)	Medical Group	Start of Ongoing Coverage
LISA JACKSON-POPE	May 31, 1967	179158712	ACA Adult	Jun 01, 2023

The person(s) listed in the table below have been **approved** for coverage for earlier dates.

Name	Birth Date	Medical ID (RIN)	Medical Group	Coverage Dates
LISA JACKSON-POPE	May 31, 1967	179158712	ACA Adult	Apr 01, 2023 - May 31, 2023

The last page of this notice is your Medical Card. This page also tells you how to use your medical benefits. Be sure to keep that page.

Did any of the people approved for medical benefits on this notice get medical care on or after the Coverage Dates shown above? If the answer is yes and you have medical bills for the care they got, the state may pay your bills. Contact the doctor, pharmacy, hospital or other medical provider and tell them the date coverage began and the Medical ID# (RIN) listed on this notice for the person. The medical provider can check to find out if the Department will pay the medical bills for you.

