

# Pro-Tips: Securing Qualifying Documentation



Log into your child's Medicaid, SNAP, or WIC online account/app and take a screenshot or picture of your child's current enrollment.



Use your child's current enrollment document or letter.



Reach out to your local SNAP, WIC, or Medicaid provider to request an active enrollment document for your child.

Always ensure your child's qualification document, letter, screenshot or picture includes:

- the child's name
- eligibility dates within past 12 months

**Proof of Eligibility**  
State Form 53049 (R2 / 6-20) FI 2430 / ED05

Mailing Date: JUNE 25, 2021

**Agency Information**  
Family and Social Services Administration Document Center  
PO Box 1810  
Marion, Indiana 46952  
Telephone: 1-800-403-0864

**Case Information**  
Full Name: [REDACTED] Date of Birth: [REDACTED]  
Case Number: [REDACTED] Mailing Address: [REDACTED]  
Home Address: [REDACTED]

**Scheduled Appointment**  
Appointment Type: [REDACTED] Appointment Date: [REDACTED] Scheduled Time: [REDACTED] Office Location: [REDACTED]

**Programs Applied For**  
Programs Applied For: [REDACTED] Case Number: [REDACTED]

**Assistance Groups**  
Type of Assistance: 11 Healthy Indiana Plus  
Add Category: MARP  
Emergency Services Only: No

**Details**  
Status: Approved  
Case Number: [REDACTED] EBT Card Benefit Available Date: [REDACTED]  
AG Number: [REDACTED] Current Month Amount: [REDACTED]  
Effective Date: MAY 01, 2018 Next Month Amount: [REDACTED]  
End Date: [REDACTED] Redetermination Month: FEBRUARY 2022  
Monthly Liability (Health Coverage): [REDACTED]

**Previous Months Benefit Amount: N/A**

**Assistance Group Clients**

Names	Participation Status	Effective Date	End Date
[REDACTED]	Eligible	MAY 01, 2018	
[REDACTED]	Ineligible	MAY 01, 2018	

**Authorized Representative**  
Primary Name: [REDACTED] Primary Address: [REDACTED]

9:52

**General Details**  
Type of Assistance: Hoosier Healthwise  
Redetermination Month: 09/2022

Payee: [REDACTED]  
Category: Hoosier Healthwise

Status: You are currently receiving benefits.  
Monthly Premium/ POWER Account Contribution: [REDACTED]

Start Date: 12/01/2018  
Current Month Amount: [REDACTED]

End Date: [REDACTED]  
Next Redetermination Month: [REDACTED]

**Benefits Amount History**  
The information below pertains to this specific Assistance Group. Up to three previous amounts are provided

Show 10 entries

Search: [REDACTED]

Date	Amount
No data available in table	

Showing 0 to 0 of 0 entries

Previous Next

Indiana Family and Social Services Administration

ifssabenefits.in.gov

"The application process is way faster than I thought it would be. You just have to enter basic information and the debit card works great. So many parents are looking for financial assistance, and once they understand how easy it is to sign in to SNAP or Medicaid to get the proper documentation, the rest is easy."

- Teandra Pitts, mom, team manager, Pasadena Giants Youth Football League