

## ABE Partner Portal

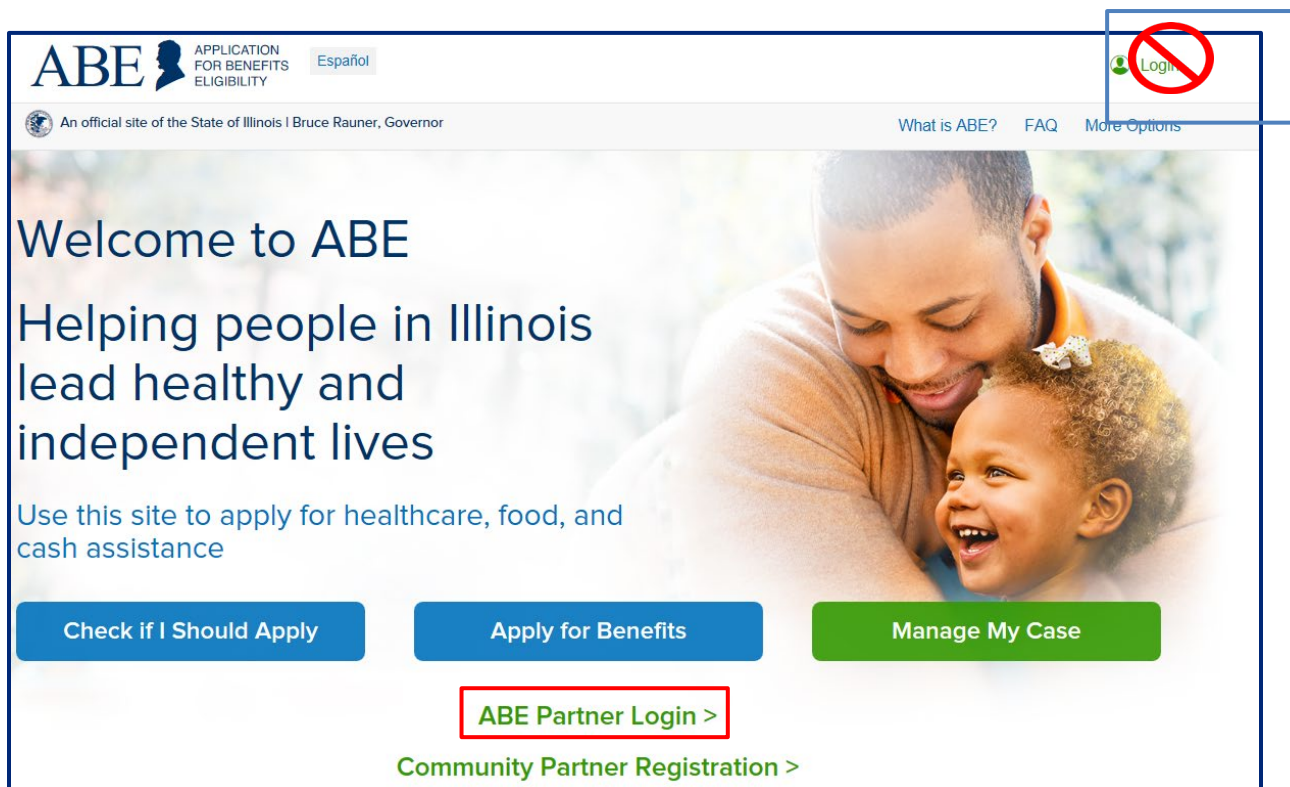


This Job Aid is designed to help you understand how to create a Partner Portal Account in ABE.



## Creating an Account in the ABE Partner Portal

1. From the **ABE Homepage** at [ABE.illinois.gov](http://ABE.illinois.gov) click on the **ABE Partner Login** link. You will use this link each time you return to ABE. Do NOT use the Login button in the upper right corner of the homepage.



The screenshot shows the ABE homepage with the following elements:

- Top left: ABE logo and "APPLICATION FOR BENEFITS ELIGIBILITY" text.
- Top right: "Español" link and a "Login" button with a red "no" symbol over it.
- Navigation: "What is ABE?", "FAQ", and "More Options" links.
- Header: "An official site of the State of Illinois | Bruce Rauner, Governor".
- Main content: "Welcome to ABE" and "Helping people in Illinois lead healthy and independent lives".
- Text: "Use this site to apply for healthcare, food, and cash assistance".
- Buttons: "Check if I Should Apply", "Apply for Benefits", and "Manage My Case".
- Bottom: "ABE Partner Login >" (highlighted with a red box) and "Community Partner Registration >".

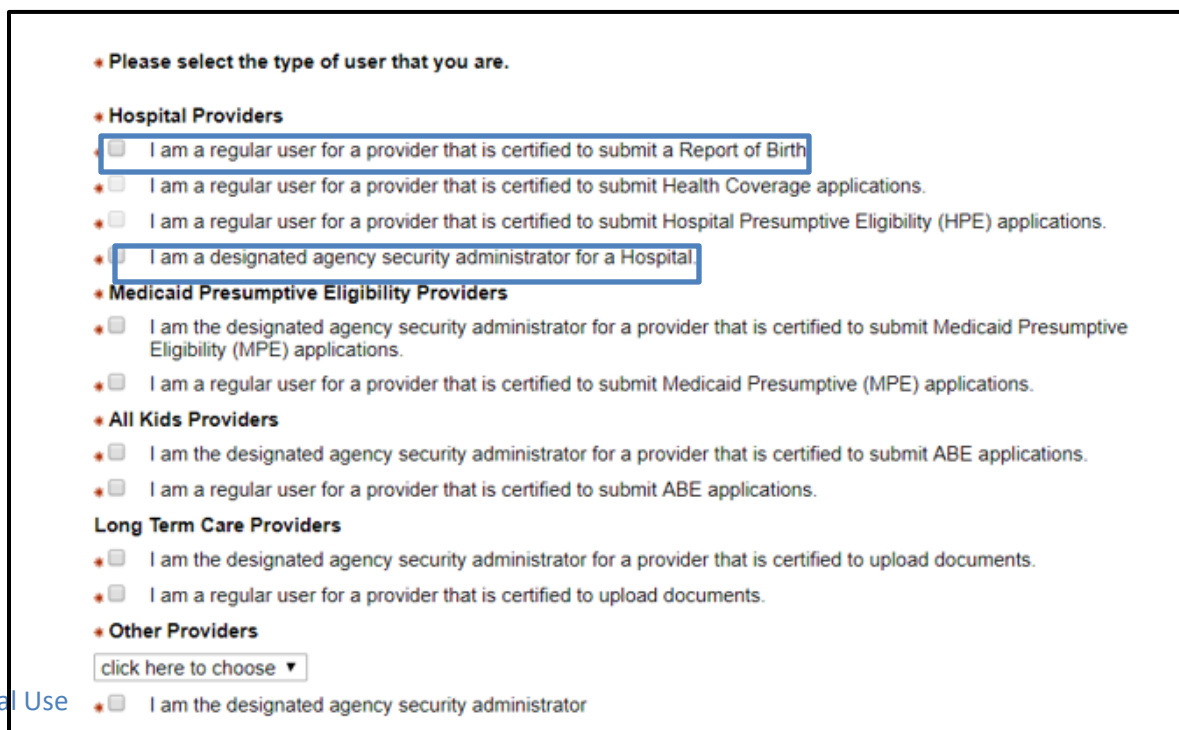
2. Click the **Create a new ABE User ID and Password** link to create your account.

Click Here Create a new ABE User ID and Password'." data-bbox="57 132 895 405"/>

3. Complete the questions in **Section 1 – User Information**. You will be asked to enter an e-mail address. For security purposes your work email should be used. This e-mail will be used to verify your identity through Multifactor Authentication (MFA). More about MFA below. Each organization’s Primary ASA will set-up the organization’s initial registration, indicating that they are the designated ASA in Section 1. Regular users follow the same User Account Setup procedure and indicate that they are a regular user by selecting the appropriate check box under **Please select the type of user that you are**.

*Each organization must designate an ABE Agency Security Administrator(s) before any staff can use the Partner Portal functionality (see the ASA Guide for further instructions). If you are not that person, please do not choose this selection. Use ‘Regular User’.*

**NOTE: Hospital ASAs will need to choose ASA and the functionality they are using!**



**\* Please select the type of user that you are.**

**\* Hospital Providers**

- I am a regular user for a provider that is certified to submit a Report of Birth
- I am a regular user for a provider that is certified to submit Health Coverage applications.
- I am a regular user for a provider that is certified to submit Hospital Presumptive Eligibility (HPE) applications.
- I am a designated agency security administrator for a Hospital

**\* Medicaid Presumptive Eligibility Providers**

- I am the designated agency security administrator for a provider that is certified to submit Medicaid Presumptive Eligibility (MPE) applications.
- I am a regular user for a provider that is certified to submit Medicaid Presumptive (MPE) applications.

**\* All Kids Providers**

- I am the designated agency security administrator for a provider that is certified to submit ABE applications.
- I am a regular user for a provider that is certified to submit ABE applications.

**Long Term Care Providers**

- I am the designated agency security administrator for a provider that is certified to upload documents.
- I am a regular user for a provider that is certified to upload documents.

**\* Other Providers**

I am the designated agency security administrator

**IMPORTANT INFORMATION! In Section 1, as part of the account set up process, you must check a box, indicating that you understand the laws regarding confidentiality of client data. Please be sure to read this paragraph and understand your responsibilities.**



I understand that state and federal laws require that information regarding persons applying for Medicaid Presumptive Eligibility or ABE programs be safeguarded from unauthorized use or disclosure.

Throughout the course of conducting Medicaid Presumptive Eligibility and ABE applications, confidential personal and demographic data from clients will be collected. I understand that I may not use personal, medical, or demographic client data for any purpose that is not directly related to the fulfillment of my agency's outreach and enrollment responsibilities.

I also understand that I may not disclose personal, medical or demographic client information to any person not direct responsible for ensuring the processing of Medicaid Presumptive Eligibility and ABE applications and/or the delivery of healthcare services to members.

4. In **Section 2 – Provider User ID and Password**, create a personal User ID and Password that you will use to login to ABE on an ongoing basis. The secret questions and responses you choose will be used as a security check if you need to recover your password. It is important to write down your User ID and answers to your chosen security questions and store them in a secure location. Passwords cannot be reset without correct answers. User IDs **CANNOT** be recovered! **If you forget your ID or are not able to reset your password, you will need to go through the User Account set up process again.**

You will be required to change your ABE password every six (6) months. If you forget to change your password, you will be blocked from using ABE until it has been updated. Each user must create their own unique User ID and Password. **User IDs and Passwords should NEVER be shared or stored! Always answer [Not for this site] if the below banner pops up on the bottom of your screen!**



## Section 2 - ABE User ID and Password

To log in into your provider account, you will need to create a ABE User ID and password. You will need your ABE User ID and password to login to the provider portal.

\* ABE User ID :

This must be 5 to 20 letters and/or numbers.

\* Password :

This must be 8 to 16 characters long. To create a secure password, you must use letters, one capital letter, and at least one number. Password is case sensitive.

\* Please re-type your Password :

To log in into your provider account, you will need to create a ABE User ID and password. You will need your ABE User ID and password to login to the provider portal.

\* Secret Question 1 :

\* Answer to Secret Question 1 :

\* Secret Question 2 :

\* Answer to Secret Question 2 :

5. **Section 3 – Organization Information.** Enter your organization’s **Provider ID** issued by the State of Illinois through the IMPACT system. Click **[Submit]**. If you do not know your HFS Provider ID, contact your office administrator or billing office.

*\* This section will not display until you have entered a ‘user type’ in Section 1.*

**Section 3 - Organization Information**

You also told us that you're the designated agency security administrator for a Medicaid Presumptive Eligibility and/or an All Kids provider and/or Hospital Presumptive Eligibility provider. Please enter the associated Provider ID below. This request will be confirmed by the state before your access rights will be established.

Provider ID

**Delete**

**Add**

6. For Providers whose organization has multiple locations or offices, click the **[Add]** button and an additional **Provider ID** box will display. If you have clicked the [Add] button in error, simply click the [Delete] button.

*\*\*\* For Hospital ASAs, two Provider ID boxes will appear, enter your ID in both boxes.*



**Tip:** If you need to add multiple Provider numbers, add them before entering your password and security questions. As a security measure ABE wipes out these responses when the page is refreshed.

**Section 3 - Organization Information**

You have told us in Section 1 that you are a regular user for a Medicaid Presumptive Eligibility and/or an All Kids provider and/or Long Term Care provider and/or Hospital Presumptive Eligibility provider. Please enter the Provider ID and click the Add button to add multiple Provider IDs.

Provider ID

**Delete**

Provider ID


**Delete**

**Add**

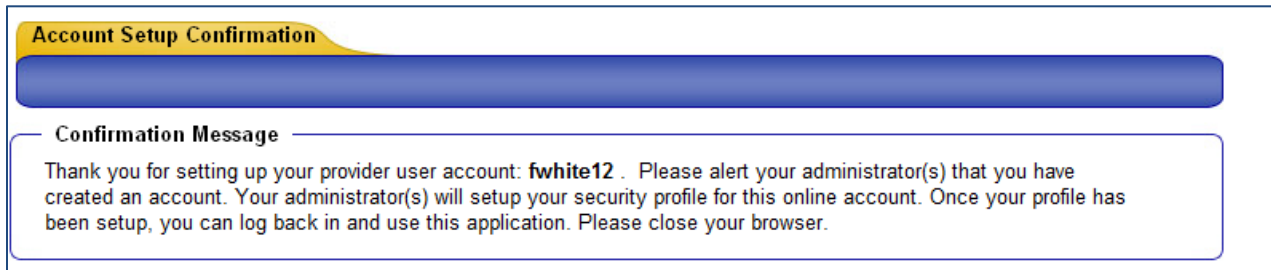
7. Once all required fields are complete on the page, click **[Submit]**.

*\*Sometimes there is a problem with the information you have entered on your User Account Setup. If you scroll to the top of the page there will be a message that lets you know what the problem is.*

Before you go to the next page:

 The user ID you have entered already exists. You must use a unique user ID to create an account. Please change your user ID and try again.

If there are no problems the **Account Set-up Confirmation** page will display.



**Account Setup Confirmation**

**Confirmation Message**

Thank you for setting up your provider user account: **fwhite12** . Please alert your administrator(s) that you have created an account. Your administrator(s) will setup your security profile for this online account. Once your profile has been setup, you can log back in and use this application. Please close your browser.

8. If you are the Primary Agency Security Administrator, you must go to [ABE ASA Request SharePoint](#) site and enter your account information as well as your agency/hospital information. Your ASA request will be reviewed by the HFS business and security offices before approval. You must be approved and granted access before you can approve others in your hospital, agency or organization to use the portal.
9. Once regular users have successfully created accounts in the ABE Partner Portal, they should submit the [ABE Registration Form 1706P](#) to the organization's Primary ASA for review. This form must also be kept for record keeping and audit purposes. The 1706P can be found under the Medical Providers tab on the Medical Forms page under Providers, labeled [Application for Benefits Eligibility \(ABE\) \(pdf\)](#) on the HFS Website.
10. After review, the Primary ASA will approve and grant Partner Portal access to the regular users.
11. Once granted access users are ready to begin using the Partner Portal.