



**ASSIST Self-Service
Citizen**

User Guide

ASSIST Overview

ASSIST is Delaware's fast and easy way to apply online for social services. With the click of a button, you will learn about benefits, see if you may qualify, apply for benefits, and re-apply when it is time for renewal.

- The [Do I Qualify?](#) questionnaire lets you find out which social services your household may be eligible to receive
- [Applying for Benefits](#) lets you submit an online application for social services offered by the State of Delaware
- [Renew Your Benefits](#) lets you provide the information needed to determine if you are still eligible for benefits
- [My Account/Change Reporting](#) lets you view a summary of your current benefit details

ASSIST serves as a single access point for the following benefits:

- Long Term Care (Nursing Home Services, Home and Community Based Services, and Children's Community Alternative Disability Program)
- Health Care Coverage (Medicaid, Delaware Healthy Children Program / CHIP, and Qualified Medicare Beneficiary)
- Food Supplement Program
- Cash Assistance (TANF, General Assistance, and Refugee Cash Assistance)
- Child Care Assistance
- National School Lunch Program
- Low Income Home Energy Assistance Program (LIHEAP)
- Food Bank

Who to call for log in questions: Please contact the DHSS Helpdesk at 302-255-9150 between 8:00 AM and 4:30 PM, Monday through Friday.

This User Guide is designed to help you use ASSIST online services. In ASSIST, you will find help and instructions that will guide you through the entry of information.

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Welcome to ASSIST

About ASSIST

ASSIST is the fast and easy way to apply online for benefits for many social services programs anytime and anywhere.

Use ASSIST to find out if you qualify for services, to apply for new benefits, to finish an application, or to check an application's status.

By using ASSIST you can apply at any time during the day or night from home, a library, or any location with Internet access.

ASSIST Security

ASSIST is secure, private, and confidential. Information entered into ASSIST is protected through an encryption process.



IMPORTANT:

- **An e-Application number ensures confidentiality once the application or renewal is received. Individuals can use their unique e-Application number to check on the status of their application after it is submitted or to save their application for up to 180 days from the last date that it was updated in order to gather additional information.**

The first time an individual applies for benefits, they are prompted to create an Identity Access Management (IAM) account with a user name and password.

Basic Navigation Tips

Before you get started, here is some useful information that will help you become familiar with the look and feel of ASSIST.

Buttons

The most frequently used page elements in ASSIST are buttons.

NEXT

Frequently used BUTTONS include:

- **[NEXT] / [CONTINUE]** – Saves information entered on the page or takes you to the next step in the application process
- **[PREVIOUS]** – Saves information entered on the page. Takes you back to the previous page or tab.

- **[+ADD ANOTHER]** – Adds a section to the page for an additional person, employer, income, expense, insurance policy, or insurance
- **[REMOVE]** – Removes a section from the page
- **[HELP]** – Provides more information about the question being asked
- **[VIEW / PRINT MY e-APPLICATION]** – Creates a printable version of the application
- **[CANCEL e-APPLICATION]** – Erases the application
- **[SAVE e-APPLICATION & FINISH LATER]** – Saves the unsubmitted application for up to 180 days from the last date that it was updated
 - **[KEEP WORKING]** – If you decide you do not want to stop and save the application you can choose to continue and keep working



IMPORTANT:

- **You have 180 days from the last date that it was updated to complete and submit your saved application before it is erased. You must have your e-Application number to access your saved application.**

Links

Links allow you to move directly to a page within ASSIST. Clicking a link opens the page described by that link in a new window or tab in the browser.

Most links are identified by underlined text. Once a link is clicked, it will change color to indicate that the page has been accessed. Common links are:

- **Back to ASSIST Homepage** – Takes you back to homepage without saving information in the application
- **Do I Qualify?** – Takes you to the *Do I Qualify?* page

Radio Buttons

Radio buttons allow you to choose only one of the given options.

Please choose one of the following:

- I am applying for myself, for a family member, for someone in my household, and/or for a non-family member.
- I am a community based organization, applying on behalf of a client.

Check boxes

Check boxes allow you to select and deselect multiple options.

- Food Supplement Program**
Enables low-income families to buy a variety of food that is the basis for better nutrition.
- Cash Assistance (General Assistance, TANF and Refugee Cash Assistance)**
Series of programs that provide cash to individuals or families in need.

Drop-down Menus

Drop-down menus allow you to select only one option from an expandable list.

Drop-down menus are identified by a down arrow to the right of the box.

What is the best way to contact you if we need to ask any extra questions?

--Please Select-- 

Date Fields

Date fields allow you to choose a date by clicking the calendar icon to the right of the field or manually entering a date in the format of MM/DD/YYYY.

Birth Date: *

MM/DD/YYYY 

Get Started Now

Do I Qualify?

Click the [Do I Qualify?](#) on the ASSIST home page to fill out a short questionnaire. You will be asked to answer several confidential questions about yourself and the members of your household. Based on your answers, you will be able to view the benefits for which you or a household member may qualify.

Based on your answers, you will be able to view the benefits for which you or a household member may qualify for. This will save you time before completing an entire application.

1. **Getting Started** – Explains the process of screening for benefits.
2. **Household**– Add yourself and all members of your household and answer the questions about the household.
3. **Individual Details** – Answer questions about each individual household member.
4. **Next Steps?** – Review the benefits that you or someone in your household may qualify for.

You may now apply for the benefits that you or a household member may qualify for.

Apply for Benefits

Click the [Apply for Benefits](#) link on the ASSIST home page to start a new application.

1. **Getting Started**
 - a. **General Information** – Lists the benefits for which you are able to apply.
 - b. **What to Expect** – Explains how long the application will take to complete and what information you will need prior to completing your application.



IMPORTANT:

You will need the following information to complete your application:

- Household income from jobs, child support, and other income sources
 - Social Security Numbers and birth dates of household members
 - Current or recent health insurance information
 - Housing and utility expense information
 - Child care or disabled expense information, including day care and medical expenses
 - Resource information, such as bank accounts, vehicles, homes, property, life insurance, etc. **Please Note: Some social services do not need resource information. Resource questions will only be asked if this information is needed to determine potential eligibility.**
 - If you are a U.S. citizen, proof of citizenship and identity (for example: birth certificate, driver's license, or state ID)
 - Non-U.S. citizens must provide original documentation indicating lawful residence in the U.S.
 - For Food Benefits, you must include all individuals who eat with you, including children under the age of 22
 - For Healthcare benefits, you must include your tax dependents
- c. **Terms** – Defines several terms that will be used frequently during the application process.
 - d. **Set Up** – Choose I am applying for myself, for a family member, for someone in my household, and/or for a non-family member radio button and click [NEXT].



IMPORTANT:

- Be sure to write down your e-Application number and keep it in a safe place
- If your application times out, you will be asked to enter your e-Application number

2. **Household** – Enter the head of household information. Click [ADD ANOTHER PERSON] to add each additional household member. Be sure to include members of the household who are currently away from home (for example: students). After adding all the household members, confirm the head of household and enter your mailing address. ASSIST will then validate your submitted address in real time through a US Postal Service database. **Please Note:** Address validation does not verify that an applicant actually resides at the mailing address.
3. **Benefits** – Select all the benefits for which you or someone in your household is applying. Then select each household member who is applying for each benefit. Benefits include:
 - a. Long Term Care
 - b. Health Care Coverage
 - c. Food Supplement Program
 - d. Cash Assistance
 - e. Child Care Assistance
 - f. National School Lunch Program
 - g. Low-Income Home Energy Assistance Program (LIHEAP)
 - h. Food Bank
4. **Individual Details** – Answer questions about the household and each individual household member.
5. **Income** – Answer income questions about the household. Depending on your answer to these questions, you may have to answer income questions about individual household members.
6. **Expenses** - Answer expense questions about the household. Depending on your answer to these questions, you may have to answer expense questions about individual household members.
7. **Tax Deduction** – Answer questions about the household’s tax deductions. Depending on the answer to this question, you may have to provide details for each deduction.
8. **Insurance** - Answer insurance questions about the household. Depending on your answer to these questions, you may have to answer insurance questions about individual household members.
9. **APTC / CSR** – Answer advanced premium tax credit and cost sharing reduction questions for the household.
10. **Resources** – Provide resource information for all household members such as bank accounts, vehicles, homes, property and life insurance.
11. **Summary**
 - a. **Completion Check** -Answer all required questions in order to move forward in the application process.
 - b. **Review Application** – It will ask the user to write down any comments (optional). Review your entire application by viewing a printable version of the application.

12. **Next Steps**

- a. **Routing and Provider Information** – Describes where your application has been routed to and the benefits for which you have applied.
- b. **Managed Care Organizations** – Information on managed care organizations to enroll if you are receiving Medicaid.

13. **Identity Proofing** – In order to have an immediate determination made regarding the potential Medicaid eligibility for the household, the identity of the head of household must be verified. Answer identity questions about the head of household.

14. **Verification** – In order to finish processing your application, you must drop off at a local office, mail, fax, or email the documents listed on this page to the designated office. Click [PRINT] to print the verification page. **Please Note:** A notice with detailed information about the eligibility determination on your application will be mailed to you within 3 days. You can see this detailed notice online at the *My Account* page within 24 hours.

15. **Submit e-Application**

- a. **Signature Options** – Choose one of the following options:
 - **Yes I would like to e-Sign**
 - **No, I do not want to e-Sign my application**
 - **I am an emancipated minor**



IMPORTANT:

- **If you choose to e-Sign your application you agree to provide your signature electronically. If you choose not to e-Sign your application you will have to print, sign, and submit your application at your local social service office.**
- b. **Rights & Responsibilities** – Check the box at the bottom of the page after reading and understanding the rights and responsibilities.
 - c. **Certification/Authorization** – Select the **I AGREE that...** check box to e-sign the Certification Statement and Rights and Responsibilities. Fill in the name of the adult Household Member who is e-Signing this application.
 - d. **Submit** – Choose **I want to view and/or print the whole e-Application for my records** or **I do not want to view and/or print the whole e-Application for my records** at this time.
 - e. **Confirmation** – Congratulations, your application has been completed and submitted to the appropriate agency for review. You can view a summary or review your verification documents. There are also instructions for mailing copies of verification documents. Medical Assistance applicants may be able to view their application

status in the Eligibility Results section of the Confirmation page.

STOP IMPORTANT:

- Do not forget to submit the verification documents
- Do not forget to write the e-Application number and the name of the Head of Household on all of the documents that you send
- In order to review those documents click [REVIEW DOCUMENTS]

Returning Users

Renew Your Benefits

When your benefits need to be renewed, you will receive a renewal letter. Click the [Renew Your Benefits](#) link on the ASSIST home page to renew your benefits. You are required to renew your benefits to determine if you are still eligible to receive those benefits.

STOP IMPORTANT:

- For all Medicaid applications, the renewal of the Medicaid portion begins automatically. If your existing information passes the online verifications, no further action is required on your part. You will receive a continuation of benefits letter. If the information does not pass online verifications, you will receive a renewal letter that indicates what actions will need to be taken to complete your renewal.
- All other benefit programs follow the renewal process listed below.
- You can only renew benefits received through Division of Social Services or Division of Medicaid & Medical Assistance. The following benefits cannot be renewed through ASSIST because they are handled by outside providers: National School Lunch Program, LIHEAP, and Food Bank.

Log in to Renew Your Benefits

Before renewing your benefits, you must accept the terms and conditions of the website. Once you have accepted, click [CONTINUE] to log into your account.

1. Enter your Social Security Number or MCI Number, your Case Number, and your Renewal Due Date, then click [FIND]. Your Case Number and Renewal Due Date are found on your renewal notice.
2. **Getting Started**
 - a. **General Information** – Lists the benefits you are eligible to renew.

- b. **What to Expect** – Explains how long the renewal application will take to complete and what information is required prior to completion.

STOP IMPORTANT:

You will need the following information to complete your renewal:

- Household income from jobs, child support, and other income sources
- Current or recent health insurance information
- Housing and utility expense information
- Child care or disabled adult care expense information including all day care and medical expenses
- Resource information, such as bank accounts, vehicles, homes, property, life insurance, etc. **Please Note: Some social services do not need resource information. Resource questions will only be asked if this information is needed to determine potential eligibility.**
- Non-U.S. citizens must provide original documentation indicating lawful residence in the U.S. if there is a change in status
- For Food Benefits, you must include all individuals who eat with you including children under the age of 22

- c. **Terms** – Defines several terms that will be used frequently during the renewal process.

STOP IMPORTANT:

- Be sure to write down your e-Application number and keep it in a safe place
- If your application times out, you will be asked to enter your e-Application number

3. **Household** – Review and update all household and mailing address information.
4. **Benefits** – Select the benefits for which you or someone in your household is renewing. Then select each household member who is renewing each benefit.
5. **Individual Details** – Review and update all household and individual household member information.
6. **Income** – Review and update all income information.
7. **Expenses** – Review and update all expense information.
8. **Tax Deduction** – Review and update all tax deduction information.
9. **Insurance** – Review and update all insurance information.
10. **APTC / CSR** – Review and update all APTC / CSR information.

11. **Resources** – Review and update all resource information.
12. **Summary**
 - a. **Completion Check** - Answer all required questions in order to move forward in the renewal process.
 - b. **Review Application** - Review your entire application by viewing a printable version of the application. You can include comments on your application.
13. **Next Steps:**
 - a. **Routing and Provider Information** – Describes where your renewal application has been routed to and the benefits that you are renewing.
 - b. **Additional Information** – Optional to provide additional information, such as language preference. The answers to these questions will not affect your potential eligibility.
14. **Verification** – In order to finish processing your application you must drop off at a local office, fax, mail, or email the documents listed on this page to the designated office. Click [PRINT] to print the verification page.
15. **Submit e-Application**
 - a. **Signature Options** – Choose one of the following options:
 - **Yes I would like to e-Sign**
 - **No, I do not want to e-Sign my application**
 - **I am an emancipated minor**

 **IMPORTANT:**

- **If you choose to e-Sign your application you agree to provide your signature electronically. If you choose not to e-Sign your application you will have to print, sign, and submit your application at your local social service office.**

- b. **Rights and Responsibilities** – Check the box at the bottom of the page after reading and understanding the rights and responsibilities.
- c. **Certification/Authorization** – Check the box agreeing with the e-Signing Certification Statement and the Rights and Responsibilities. Fill in the name of the Adult Household Member who is e-Signing this application.
- d. **Review and Print** – Choose **I want to view and/or print the whole e-Application for my records** or **I do not want to view and/or print the whole e-Application for my records** at this time.

 **IMPORTANT:**

- **Do not forget to submit the verification documents**

- **Do not forget to write the e-Application number and the name of the Head of Household on all of the documents that you send**
- **In order to review those documents, click [REVIEW DOCUMENTS]**

My Account/Change Reporting

Click the [My Account/Change Reporting](#) link on the ASSIST home page to access your ASSIST account, which lets you view a summary of your current benefit details.

 **IMPORTANT:**

- **The following benefits cannot be viewed because they are handled by outside providers: National School Lunch Program, LIHEAP, and Food Bank**

Log in to your ASSIST Account

Before accessing your ASSIST Account, you must accept the terms and conditions of the website. Once you have accepted, click [CONTINUE] to log into your account.

1. Enter your Social Security Number or MCI Number, your Case Number and click [FIND].
2. You may now view your household and your benefit information. This includes Case Information, Member Information, and information on your benefits.
3. If you would like to report a change in your information, including requesting a new benefit, household information, or income, please enter the information you would like to change in the appropriate box, provide your contact information and submit the changes.

View the Form 1095-B

Form 1095-B is a health insurance tax form used to verify if you receive at least the Minimum Essential Coverage (MEC) as required by Law. Once you have viewed your case information, click [VIEW NOTICES].

4. Select the check box to give permission to view the form electronically.
5. Click the 1095-B Forms tab.
6. Click [1095-B Form 2015](#) to view the form.

Finish your Application

Click the [Finish Your Application/Renewal](#) link on the ASSIST home page to continue a saved application. You have up to 180 days from the last date that it was updated to complete and submit your saved application before it is erased.

1. Enter your e-Application number to access your e-Application and continue a saved application.
2. Choose from one of the follow options:

- a. **Start where I left off**
 - b. **Start by reviewing any questions I missed**
 - c. **Show me a summary**
 - d. **Go back to the beginning to add more benefits**
3. Click [SIGN IN].
 4. You will now be able to access your application.

Check Application Status

Click the [Check Application Status](#) link on the ASSIST home page to check the current status of your application.

1. Enter your e-Application number and click [CHECK STATUS] to view the current status of your benefits for which you have applied.



IMPORTANT:

- **You cannot check the status of the following benefits: National School Lunch Program, Low Income Home Energy Assistance Program, and Food Bank**

Frequently Asked Questions

Q: How long will it take me to apply for benefits using ASSIST?

A: It will take about 20 to 45 minutes to complete an application. The exact time will depend on the benefits selected and the number of people in the household.

Q: Which benefits may I apply for using ASSIST?

A: Citizens and Community Partners can apply for Long Term Care, Health Care Coverage, Food Supplemental Program, Cash Assistance, Child Care Assistance, National School Lunch Program, Low Income Home Energy Assistance Program, and Food Bank.

Q: How long will ASSIST save my application?

A: Individuals have up to 180 days from the last date that you updated it to complete the Application process. You can log in and out of the system as you please. You will need your e-Application number to access an incomplete Application.

Q: If I do not wish to e-Sign my Application, how can I submit it?

A: If you do not want to e-Sign your Application, you will have to print the Application and sign the Summary page. You will then have to submit your Application at a local Social Services office.

Q: Once I submit my application and receive the confirmation page, do I need to take any additional steps?

A: Yes, you must submit the household's required verification documents in order for the application to be processed.

Q: Can I renew my benefits online even if I initially did not use ASSIST to apply for services.

A: Yes, you will need your Social Security Number or MCI Number, your Case Number, and Renewal Due Date.

Q: Why is the information I entered during "Do I Qualify?" not carried over to my application?

A: The information you entered during [Do I Qualify?](#) is not carried over to your application because the questionnaire asks for general information to keep the [Do I Qualify?](#) process short and simple. Therefore the information is not specific enough for your application.

Q: Why am I receiving a renewal letter, if the renewal process begins automatically?

A: Medicaid only renewals are processed automatically; however, if you receive a renewal letter for your Medicaid only renewal, there are additional actions that are needed on your part to **complete the renewal**. All other renewals will still follow the manual process.

Q: How will the renewal process work if I have Food Benefits and Medicaid, if Medicaid only applications are processed automatically?

A: For your Medicaid portion of benefits, the renewal process begins automatically; however, the Food Benefit portion will still need to follow the manual renewal process.

Q: What is the Form 1095-B?

A: The Form 1095-B is a health insurance tax form used to verify if you receive at least the Minimum Essential Coverage (MEC) as required by Law. If there was a break in your health care coverage for the applicable tax year, you may have to pay a shared responsibility payment, also known as a tax penalty. State agencies responsible for administering Medicare Advantage (MA) and Children's Health Insurance (CHIP) programs are required to generate and send an annual Form 1095-B form to individuals enrolled in programs considered to be Minimum Essential Coverage (MEC) and send an electronic copy of the information to the IRS.

If there are issues or concerns pertaining to your Form, you can call 1-800-996-9969.