**Section 2830.300 Requests for Reissuance of Checks Or Replacement of Electronic Payments**

a) With respect to benefit payments made by paper check:

1) If the claimant is filing an intrastate claim (see 56 Ill. Adm. Code 2714 for interstate claims) and is seeking the reissuance of a benefit payment check, the claimant shall contact the Department by calling Claimant Services, obtain a required form provided by the Department, provide the Department with Department-requested documents that prove the claimant’s identity, and, on the required Department form, request reissuance of the check. The documents required to prove the claimant's identity are a copy of both sides of the claimant's current and valid driver's license or State identification card and a copy of both sides of the claimant's valid Social Security card. The telephone number for Claimant Services is 800-244-5631 and is available on the Department’s website (ides.illinois.gov).

A) If the original check has been returned to the Department by either the claimant or the Post Office, the Department will promptly cause a replacement check to be issued to the claimant.

B) If the original check has not been processed by the payor financial institution and has not been returned, the Department will cause payment to not be issued on the check. After confirmation that the stop on the payment of the check has been processed, the Department will promptly cause a replacement check to be issued to the claimant.

C) If the original check has already been processed by the payor financial institution and has not been returned, the claimant will be sent instructions as outlined in Section 2830.305.

2) Requests by a second endorser for replacement of a benefit check that has not already been processed by the payor financial institution shall be made in writing to Accounting Services Division, Trust Fund Subdivision, 33 S. State St., Chicago, IL 60603.

A) If the original benefit check was lost, mutilated or stale-dated after receipt by the second endorser, and if proof of that action is provided to the Department, disbursement of the funds to cover the check will be made to the second endorser.

B) If the original benefit check was subject to a stop payment order initiated by the claimant pursuant to subsection (a)(1)(B), the matter will be sent to the Benefit Payment Control Division for an investigation pursuant to Section 2830.310.

b) With respect to benefit payments made by way of debit card or direct deposit:

1) Any issue concerning a benefit payment that, in the case of a debit card, was deposited into an account assigned to the claimant or, in the case of direct deposit, was deposited into an account designated by the claimant, must be resolved between the claimant and the financial institution at which the payment was deposited according to the terms and conditions of the cardholder or account agreement.

2) When the claimant alleges that a debit card was mailed to an address that the claimant did not authorize, that a benefit payment was not deposited into an account that the claimant authorized, or that a benefit payment was not credited to the debit card assigned to the claimant, the claimant may file a request for review of the payment at a local office, on a form provided by the Department, or by calling Claimant Services (see 56 Ill. Adm. Code 2714 for interstate claims). The telephone number for Claimant Services is 800-244-5631 and is available on the Department’s website (ides.illinois.gov). If a claimant's telephone inquiry cannot be resolved over the phone, the Department will provide the claimant with any forms needed to proceed. All requests for review of payment shall be submitted to the Department's Accounting Services Subdivision to determine if the issue can be resolved by the Department or if the claimant should be referred to the financial institution in which the payment was deposited. If the request is made in person at the local office, the forms needed to request review by the Department's Accounting Services Subdivision will be forwarded by local office staff. Forms submitted by the claimant directly must be mailed to the Department's address provided on the form. When identity theft has been alleged, the Department's Accounting Services Subdivision will refer the matter to the Department's Benefit Payment Control Subdivision for an investigation as provided in Section 2830.310.

(Source: Amended at 46 Ill. Reg. 5671, effective March 24, 2022)