

ADDITIONAL ELIGIBILITY STATEMENT:

In the following statement, the Specialist must verify that the consumer has a “significant disability” as defined by a severe physical or mental impairment that:

- 1. Substantially limits his/her ability to function independently in the family or community; or**
- 2. Substantially limits his/her ability to obtain, maintain, or advance in employment; and**
- 3. The delivery of independent living services will improve either**
 - a. His/her ability to function, to continue functioning or to move toward functioning independently in the family or community; or**
 - b. His/her ability to continue employment.**

Such verification will need to specify below where medical record, or other substantiating documentation exists that establishes the significance of the disabling condition. Verification can include that the consumer is receiving SSI or SSDI benefits or payments or has been determined eligible for other service programs for people with significant disabilities such as the Department of Rehabilitation Services).

Dr.’s Name & Phone #

Medicaid #

Medicare #

IL Specialists Signature

Date