



Cases

Profile

Agency

Reports

Help

Logout



**SAVE Offers FREE Training and Resources!**

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Agency: U.S. Department of Health and Human Services, Centers for Medicare and Medicaid Services (NEW) (HMD1) | Department: Exchange One V37 (01)

### PROGRAM ANNOUNCEMENTS

#### Elimination of Form N-560AB Certificate of Citizenship

04/23/2020

U.S. Citizenship and Immigration Services (USCIS) is no longer issuing Form N-560AB, Certificate of Citizenship, effective Friday, April 10, 2020. USCIS is now issuing Form N-560A for all Certificates of Citizenship associated with Forms N-600, N-600K and Child Citizenship Act adopted children.

... [Read more](#)

### QUICK LINKS

[Initial Verification](#) ▶

[Search Cases](#) ▶

[Resources](#) ▶

[Contact Us](#) ▶

### SYSTEM ANNOUNCEMENTS

#### Tip: Searching Cases

07/22/2019

Use Case Filters to shorten the amount of time it takes to receive results from the Search Cases...

[Read more](#)

[View All](#)



## Applicant Information

\*First Name

Barry

Given Name

\*Last Name

Bison

Family Name or Surname

Middle Name

ex. Rose

\*Date of Birth

01/01/2001

Please fill out as many enumerators as are available to you. At least one enumerator is required. The more information provided, the higher the chance of returning a verification result on initial verification. For more information, please see the [Guide on Immigration Documents Commonly Used by Benefit Applicants](#).

Alien Number

889781526

SEVIS Identifier

ex. 1234567890

I-94 Number (I-94#)

ex. 12345678911

Passport Number

ex. 12EJ8456789

Naturalization/Citizenship Number

ex. S1234567

Card Number

ex. LKJ1234567899

Visa Number

ex. 12345678

SAVE verifies benefit applicant citizenship and immigration status for user agencies. In addition, when a user agency submits a SAVE case for a benefit and also needs, and is approved to receive, the employment authorization history (EADs), immigration status grant date, and/or financial sponsor information, SAVE automatically requests and retrieves/ provides that information as well.

Some SAVE user agencies need one or more additional pieces of information for certain cases. These user agencies can request this additional information by clicking a button for each piece of information they need.

The screenshot displays a vertical progress bar on the left with the following steps: Case Creation (active), Photo Match, Additional Verification, Case Result, Sponsorship Compliance, and Case Closure. The main content area is divided into three sections:

- Section 1:** "Please select all of the benefits that the applicant is requesting from your agency. You must select at least one." It features five buttons: CHIP, Medicaid (selected with a checkmark), SNAP, T16, and TANF.
- Section 2:** "In addition to the applicant's immigration status, your agency has asked that we provide you with the following information (if available) in order to determine the applicant's eligibility." It features three buttons: EADS, Grant Date, and Sponsors/Household Members.
- Section 3:** "Please select any of the following additional pieces of information if you need them to determine the applicant's eligibility (or press continue if you don't need anything else)." It features six buttons: Cuban/Haitian Entrant, Cuban/Haitian Immigration Details, Immigration Status Details, Immigration Status as of 8/22/1996, VAWA, Fraud, and Citizenship Status.

A green "Continue" button is located at the bottom of the screen.

SAVE provides employment authorization history (EADs), immigration status grant date, financial sponsor information, and other additional functionality and information only to some user agencies, specifically those that need and are approved to receive it. This screen shot has been updated to reflect this functionality that only these agencies see.

→  
Case  
Creation

○  
Photo  
Match

○  
Additional  
Verification

○  
Case  
Result

○  
Sponsorship  
Compliance

○  
Case  
Closure

## Review Case Details

Please review case information for accuracy. If there are any errors, it may prolong the verification process.

### Full Name

Barry Bison

### Date of Birth

01/01/2001

### Alien Number

889781526

### Point of Contact Name

Tim Benz

### Point of Contact Phone Number

2025555555

### Requested Benefits

✓ Medicaid

### Agency Requests

🔒 EADS

🔒 Grant Date

🔒 Sponsors/Household Members

### Attached Document

None

Initiate Verification

Go Back

Photo Match is an optional tool made available on request to SAVE user agencies as a security/anti-fraud measure. Users indicate whether the photo on a USCIS-issued Form I-551, Permanent Resident Card, or Form I-766, Employment Authorization Document, presented by the benefit applicant matches the USCIS photograph returned by SAVE.

**Photo Match**

Does the photo match the photo displayed on Barry Bison's document?

Yes, this photo matches

No, this photo does not match

No photo available

Continue

Photo Match is part of the current SAVE information collection for only some agencies, specifically those that request it. This existing screen is added here to reflect what these agencies see.

Case Creation


Photo Match

Additional Verification

Case Result

Case Closure

## Photo Match



Does the photo match the photo displayed on Barry Bison's document?

- Yes, this photo matches
- No, this photo does not match
- No photo available

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## SAVE Response

**Applicant Status:** Conditional Resident - Employment Authorized

Applicant is a non-national of the U.S. who has been granted permanent resident status on a conditional basis. They are allowed to live and work in the United States as a permanent resident, but they will need to apply to remove the conditions of their status within two years of issuance of their permanent resident status. See the Guide to Understanding SAVE Verification Responses for additional information. You will need to follow your agency's policy when determining whether this applicant is eligible for benefits..

Photo Match is part of the current SAVE information collection for only some agencies, specifically those that request it. This existing screen is added here to reflect what those agencies see.

# SAVE Response



**Applicant Status:** Conditional Resident - Employment Authorized

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## SAVE Response Details

**Case Verification Number**  
0020167154553XP

**COA Code**  
CR6

**Country**  
CHL - CHILE

**Date Admitted To**  
INDEFINITE

**Grant Date**  
09/08/1997

## Sponsors/Household Members

<b>Name</b> KOHOLI VIRAT	<b>SSN</b> 125-84-7896
<b>Address</b> 5 WAT RD TIO, NJ 97655 USA - UNITED STATES	

## Employment Authorization History

Not Applicable

[Answer Sponsorship Compliance Questions](#)

[Close Case](#)

[Close Case and Create New Case](#)

[Still not sure? Institute Additional Verification](#)

## Agency Submitted Details

**Full Name**  
Barry Bison

**Date of Birth**  
01/01/2001

**Alien Number**  
889781526

**Initiated On**  
06/15/2020

**Initiated By**  
TBEN1793

**Point of Contact Name**  
Tim Benz

**Point of Contact Phone Number**  
(202) 555-5555

### Requested Benefits

Medicaid

### Agency Requests

EADS

Grant Date

Sponsors/Household Members

### Attached Document

None

Case Creation

Photo Match

Additional Verification

Case Result

Case Closure

## SAVE Response



### Institute Additional Verification

SAVE was unable to verify the applicant's status on electronic initial verification. There may have been an issue electronically locating the records or additional verification may be required due to conflicting data or the nature of the applicant's status. This is not a final response and should not be used to determine benefit eligibility. Please institute Additional Verification so SAVE can conduct more research and return the correct status.

## Additional Information

### Case Verification Number

0020167154553XP

### Special Comments

Enter any additional comments here.

You may enter up to 400 characters.

### Upload a document

Drag file to upload

or

Upload File

## Agency Submitted Details

### Full Name

Barry Bison

### Date of Birth

01/01/2001

### Alien Number

8 89781 526

### Initiated On

06/15/2020

### Initiated By

TGEN1788

### Point of Contact Name

Tim Benz

### Point of Contact Phone Number

(202) 555-5555

### Requested Benefits

Medicaid

### Agency Requests

EADB

Grant Date

Sponsors/Household Members

### Attached Document

None

Institute Additional Verification

Close Case

Close and Start New Case



Case Creation

Photo Match

Additional Verification

Case Result

Case Closure

## SAVE Response



### Resubmit Doc

SAVE is unable to determine the person's status without seeing a copy of the person's most recent immigration document. Please submit via scan and upload a copy of the applicant's document (front and back) for third step verification. See the Guide to Understanding SAVE Verification Responses for additional information.

## Additional Information

### Case Verification Number

0020167154553XP

### DHS Response Comments

Please provide the most recently issued document that reflects current immigration status.

### Special Comments

Enter any additional comments here.

You may enter up to 400 characters.

### Upload a document

Uploading a document is required to escalate this case for additional verification.

Drag file to upload

or

Upload File

## Agency Submitted Details

### Full Name

Barry Blison

### Date of Birth

01/01/2001

### Alien Number

889781526

### Initiated On

06/15/2020

### Initiated By

TBEN1783

### Point of Contact Name

Tim Benz

### Point of Contact Phone Number

(202) 555-5555

### Requested Benefits

Medicaid

### Agency Requests

EAD/8

Grant Date

Sponsors/Household Members

### Attached Document

None

Institute Additional Verification

Close Case

Close and Start New Case

Case  
Creation



Photo  
Match



Additional  
Verification



Case  
Result



Case  
Closure

## SAVE Response



### Case Under Review

This case is currently under review by the Status Verification Office (SVO), and the status of this applicant has not yet been determined. This does not mean that the applicant is not eligible for benefits, but further research is needed. You will receive an email notification from SAVE when a response has been returned.

### Agency Submitted Details

#### Full Name

Barry Bison

#### Date of Birth

01/01/2001

#### Alien Number

889781526

#### Initiated On

06/15/2020

#### Initiated By

TBEN1783

#### Point of Contact Name

Tim Benz

#### Point of Contact Phone Number

(202) 555-5555

#### Requested Benefits

✓ Medicaid

#### Agency Requests

🔒 EADS

🔒 Grant Date

🔒 Sponsors/Household Members

#### Attached Document

None

Exit and Return Home