

Illinois Early Intervention Family Fees: e PAY Instructions - Electronic Check

1. To begin, access the e PAY website at <https://magic.collectorsolutions.com/magic-ui/en-US/Login/ildhs>.
2. Click on **Make a one-time payment**

ILLINOIS ePAY Convenience and Security in Every Transaction

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Para la versión en español, haga clic en el enlace "Español" en la parte inferior de esta pantalla. ¡Gracias!

Illinois Department of Human Services (IDHS)

Look What I Can Do
Early Intervention

One-Time Payment

Make a one-time payment without creating an account. Click the button below and you will be redirected to the page where you can make a payment.

Make a one-time payment

Login

Username

Password

Login

I forgot my password.

I forgot my username.

Create an Account

3. Use the **Payment Category** drop down to select **e-Check**. **Payment Type** will fill automatically, and a new screen will appear.

Make A Payment - Cart Information - Illinois Department of Human Services (IDHS)

Cart Information Payment Information

Add Payment Items

Payment Category Please select a Payment Category

Payment Type Please select a Payment Type

Add Item Add Item and Checkout

Shopping Cart

Subtotal \$0.00

Cancel Transaction

Next Step: Payment Information

4. Type the requested information into the six fields below: **EI Account Number, Date of birth of oldest child actively enrolled, Zip code listed on account, Phone Number, Payment Amount (dollars), Payment Amount (cents)**. If your family no longer receives EI services, enter the DOB of any child in the household who received EI services. Be sure to double check your entries for accuracy.

Add Payment Items

Payment Category ▼
e-Check

Payment Type ▼
Early Intervention/Aprendizaje Infantil Family Participation Fe

ⓘ Please enter the following information to help us identify the payment. After the information has been entered, verify the accuracy of the information entered before clicking the [Add Item and Checkout] button. Inaccurate information may result in a misapplied payment. Español: Por favor ingrese la siguiente información para ayudarnos a identificar el pago. Después de ingresar la información, verifique que la información este correcta antes de presionar el botón [Añadir artículo y pagar]. Información incorrecta puede resultar en un pago mal aplicado.

Please enter the following information to identify the payment:

EI Account Number/Número de cuenta EI* ?

DOB of Oldest Child Actively Enrolled/Fecha de nacimiento del hijo mayor inscrito activamente* 📅
mm/dd/yyyy

Zip Code on Account/ Código postal en la cuenta* 📍

Phone Number/Número de teléfono* 📞

Payment

Payment Amount \$ 0 . 00

+ Add Item
+ Add Item and Checkout

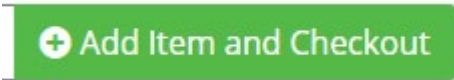
Next Step: Payment Information ▶

Note: Clicking on the **question mark** above shows how to find the EI Account Number. It is located on the Family Participation Fee Invoice and/or the Family Participation Fee Statement:

×EI Account Number

EI Child Name:	Johnny Testcase & siblings
EI Child #:	111111
EI Account Number:	000111111/01
IF-SP Dates:	07/15/10 – 07/14/11
Invoice Number:	CB220168

5. Click **Add Item and Checkout**



Note: Click **Add Item** if you would like to make a payment on a second EI Account. Review the family fee mail received. If multiple documents are received there may be a Family Participation Fee Invoice and a Family Participation Fee Statement. The last two digits at the end of the account numbers will be different. Please verify that payments are being made to the appropriate account.

6. Enter your family's **Email** address and click **Next Step: Add Payment Method**

Billing Contact Information	
Email	<input type="text" value="Test@gmail.com"/>
Back to Cart Information	Next Step: Add Payment Method

Shopping Cart	
Early Intervention Family Participation	
<input type="checkbox"/> 12345678911 - 2004-08-08 - 60001 - 3125478965	\$50.00
Subtotal	\$50.00
Projected eCheck Fee	\$0.00
Cancel Transaction	

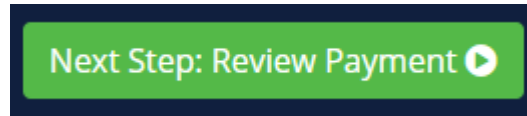
7. For an e-Check, enter the requested details from the account at your financial institution. Review your entries for accuracy.

Make A Payment - Payment Information - Illinois: Department of Human Services (DHS)

Payment Information	
Please select your Payment Method	
<input checked="" type="radio"/> eCheck	
Check Type	<input type="text" value="Personal"/>
Account Type	<input type="text" value="Checking"/>
Name on Check	<input type="text"/>
Routing Number	<input type="text"/>
Confirm Routing Number	<input type="text"/>
Account Number	<input type="text"/>
Confirm Account Number	<input type="text"/>
Amount Due	\$ 50.00
Payment	\$ 50 . 00
Back to Cart Information	Next Step: Review Payment

Shopping Cart	
Early Intervention Family Participation	
Fees e-Check <input type="checkbox"/> 12345678911 - 2004-08-08 - 60001 - 3125478965	\$50.00
Subtotal	\$50.00
Projected eCheck Fee	\$0.00
Cancel Transaction	

8. Click **Next Steps: Review Payment**.



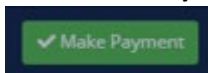
9. Review your payment information a final time. Under **Billing Contact Information**, check yes if you would like to receive email updates from the Office of the Illinois State Treasurer. Also, review the **Payment Terms of Service**. Click the box to agree with these terms. Agreeing to these terms of service is required to finalize the payment.

The screenshot shows a web interface for reviewing a payment. At the top, there are two tabs: "Cart Information" and "Payment Information". The main content is divided into two columns. The left column is titled "Review Payment" and contains a table with the following items:





Item	Amount
Early Intervention/Aprendizaje Infantil Family Participation Fee	\$50.00
Total Amount Due:	\$50.00
Checking ***** 9129 ✓ [trash] [edit]	(\$50.00)
Total Payment Method:	(\$50.00)

Below the table is a section titled "Billing Contact Information" with the email address "test@gmail.com" and a checkbox: " Yes, I would like to receive periodic updates and information from the Office of the Illinois State Treasurer via email." Below this is another checkbox: " I agree to the [Payment Terms of Service](#) and authorize this payment." A red arrow points to this checkbox. At the bottom of the left column are two buttons: "Back to Payment Method" and "Make Payment". The right column is titled "Shopping Cart" and shows a summary of the items: "Early Intervention/Aprendizaje Infantil Family Participation Fee" for \$50.00, with a subtotal of \$50.00. A "Cancel Transaction" button is located at the bottom of the right column.

10. Click **Make Payment**.



11. An electronic receipt will appear on your screen. A similar receipt will be sent to the email address provided once the payment is successfully completed.

Thank You for Your Payment
Approved
9/10/2021 4:31 PM Central Standard Time

Customer Name IDHS Test

Effective Date
9/10/2021

Approved 20000002

Item	Amount
Test Payment	\$50.00
Subtotal:	\$50.00
Total Charged to: Savings ***** 9128 ✓	\$50.00
Total Amount Paid:	\$50.00

Collection Mode: Web

Payment Details:
Test Payment
EI Account Number: 12345678911 - Date of Birth: 8/8/2004 - Zip Code: 60001 - Phone Number: 8475647896 - IDHS Test - \$50.00