

The People's Guide

Information about opportunities to help you get through hard times



to Welfare Health & other Services



Hunger Action LA

39th Edition **2020**
Los Angeles County

Introduction

The People's Guide gives practical information about how to get food, money, housing, health care and other help from government programs and community services if you live in Los Angeles County and need help in hard times. You do not have to read the entire book, just find the topic you need in the table of contents. However, people who are eligible for one kind of help often qualify for other programs as well, so read the entire booklet.

The People's Guide also gives advice on what to do if you are treated unfairly or do not receive what you are entitled to by law.

Lately, massive government budget cuts have meant less help for low income families, seniors, and homeless people. There are other problems with obtaining assistance: rumors and false information that discourage eligible people from even trying to get help their family desperately needs, people not knowing what the application steps are, language barriers, people being made to feel embarrassed for asking for needed help.

The People's Guide is dedicated to helping all people overcome barriers when they try to get help. Every person has the right to enough food, housing, and health care. You help when you share this information with other people who need help.

There is another important way to help. In Sacramento, Washington DC and in County and local governments, the programs and services described in the People's Guide are always being debated.

39th Edition. The People's Guide to Welfare, Health & Other Services
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In 2020, the President and Congress are discussing even more huge budget cuts that would greatly reduce cash and food assistance, our rights to health care, workers' rights, immigrant rights, and our right to a clean environment.

Your voices are needed in those debates. Tell politicians how the programs help or don't help and what your problems are. Government officials need to be reminded of the tragic crises and pain that happen in people's lives when they can't get food, housing, or health care.

To get names and addresses of your local, state and federal lawmakers, call (800) 481-8683 or visit: <https://www.lavote.net/apps/precinctsmaps>. **Call Congress directly at (202) 224-3121.**

Politicians often want to use money for other things than health, welfare and social services. But when the rich get too much richer and the poor get too much poorer, the gap has very bad effects on the whole society. You can help close that gap. You don't have to be an expert. Simply let those in authority know how a budget cut affects you or your neighbors.

Hunger Action Los Angeles and our members struggle for policies that save and improve the safety net.

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DISCLAIMER: Hunger Action Los Angeles (HALA) and other contributors to this book are not responsible for the action, conduct, treatment you receive, and/or quality of service of any private (non-government) agencies listed in this book and their staff. Government agencies have their own complaint procedures (see pg. 67) Also, phone numbers and other important information change: this information was accurate as of December 2019.

For further assistance:

► **211 LA County**
On the internet: www.211la.org

211 is a 24 hour per day, 7 day a week telephone information and referral service. Operators are available in many languages. They can help you find emergency food and shelter, legal and financial assistance, counseling and many other resources.
Phone: 211
(800) 660-4026 (TTY)

► **LA County Office of Immigrant Affairs** oia.lacounty.gov Updated information on immigration issues
► **LA County Consumer & Business Affairs** dcba.lacounty.gov Help for workers, renters & consumers

► www.mypublicbenefits.org outlines how low income families can qualify for multiple programs, especially working families

► **Public Policy Organizations**
Get involved with these organizations to learn about policies affecting you.

ACCE (213)863-4548
www.acceaction.org/
California Food Policy Advocates (213) 482-8200 www.cfpa.net
California Partnership www.california-partnership.org
Coalition for Humane Immigrant Rights of Los Angeles (213)353-1333
www.chirla.org
Community Coalition (323) 750-9087
www.cocosouthla.org
Community Health Councils (323) 295-9372 www.chc-inc.org
Health Access (818) 480-3262
www.health-access.org
L.A. Alliance for a New Economy (213) 977-9400 www.laane.org
L.A. Community Action Network (213) 228-0024 www.cangress.org
L.A. Food Policy Council www.goodfoodla.org
Legal Aid Foundation of Los Angeles (800) 399-4LAW
Maternal & Child Health Access (213) 749-4261 www.mchaccess.org
Neighborhood Legal Services of Los Angeles (800) 433-6251
Social Justice Learning Institute (323) 952-7363 www.sjli.org

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LA FAMILY SOURCE CENTERS

The City of Los Angeles has Family Source Centers (FSC) where you can apply for programs such as the ones in this book and get other help including child care service, job placement and tutoring, mentoring and arts instruction for youth:

Boyle Heights: El Centro de Ayuda Corporation 2130 E. 1st Street, Suite 110, LA, CA 90033 (323) 526-9301
Echo Park: El Centro del Pueblo 1157 Lemoyne Street .LA, CA 90026 (213) 483-6335
El Sereno/Lincoln Heights: Barrio Action Youth and Family Center 4927 Huntington Dr., Suite 200 LA, CA 90032 (323) 221-0779
North Valley: New Economics for Women 21400 Satcoy St. Canoga Park, CA 91304 (818) 887-3872
Pacoima: El Nido Family Centers 11243 Glenoaks Blvd., Suite 2 Pacoima 91331 (818) 896-7776
Southeast: All People's Community Center 822 E. 20th StreetLA, CA 90011 (213) 747-6357
Southeast/Watts: Watts Labor Community Action Committee (WLCAC) 1212 E. 108 Street LA, CA 90059(323) 357-6262
Southwest: El Nido Family Center 2069 W. Slauson Avenue LA, CA 90047 (323) 998-0093
Southwest/Florence: The Children's Collective 915 W. Manchester LA, CA 90044 (323)789-4717
Van Nuys: New Economics for Women 6946 Van Nuys Blvd., Ste. 220 Van Nuys, CA 91406 (818) 786-4098
West Adams: 1736 Family Crisis Center 2116 Arlington Ave., Suite 220 Los Angeles, CA 90018 (323) 737-3900
West Los Angeles: Latino Resource Organization, Inc. 610 California Avenue Venice, CA 90291 (310) 578-6069
Westlake/Pico Union: Central City Neighborhood Partners 501 S. Bixel St. LA, CA 90017(213) 482-8618
Wilmington/San Pedro: Toberman Neighborhood Center 131 N. Grand Ave. San Pedro, CA 90731 (310) 832-1145 ext.106
Wilshire: Bresee Foundation 184 Bimini Place LA, CA 90004 (213) 387-2822

Housing

Unfortunately, if you are homeless in Los Angeles, there is no guarantee of housing or shelter, and the existing shelters are often full.

► 1. If You Are Homeless

Winter Shelters : These shelters are usually operated by the City and County of Los Angeles from the beginning of November until the end of March. LAHSA (LA Homeless Services Authority) Hotline: (800) 548-6047 TDD: 1-(800)660-4026 (for the deaf and hearing disabled) for shelter locations and pick-up points for free transportation to shelter. Winter Shelters are not able to serve families.

General Shelter Information:

211: Call (211) or visit 211la.org for shelter information. More specific information is at <https://www.211la.org/homeless-services/housing-info-options>

When searching for shelter, be aware that many shelters fill up quickly during the day. Most also have restrictions on age and gender. Some agencies and shelters are able to offer hotel or motel vouchers if there is no other shelter option available, or if the shelter is full for the night.

Singles: If you are applying for General Relief, you can get emergency shelter vouchers or eviction prevention money. See General Relief section (pg. 33). If you are an individual seeking shelter, your options include Winter Shelter: Emergency Shelter; and specific shelters for Youth, Veterans, people with substance use disorder, pregnant women, people just leaving prison, and the LGBTQ community. Call (800) 548-6047 or visit lahsa.org/get-help. Let the people operating the shelter know if you have mobility needs, if you need a bottom bunk, or have trouble with stairs. Crisis Housing is available for those over age 18 experiencing homelessness: "Bridge Housing" is available for those leaving an institution such as prison, a hospital or board and care, or foster care.

Families: If you are homeless or at risk of becoming homeless and receive or qualify

for CalWORKs, you may be able to receive Homeless Assistance Money, money to help prevent eviction, or help with your rent. See CalWORKs section of the Guide for more information (pg.23-25).

Families seeking assistance can also contact the **Coordinated Entry System for Families (CES)** by calling: 211 LA County (2-1-1). In order to be eligible, families must meet the three following criteria:

1. Homeless or at-risk of homelessness
2. Have at least one minor child under 17 years old or pregnant woman in the 2nd trimester or high risk
3. Reside in Los Angeles County

The CES provides access through 211, to services from a network of homeless services providers countywide also known as Family Solutions Centers (FSCs). This helps families save time and eliminates the need to make unnecessary phone calls to multiple shelters and agencies. FSCs can help families find financial assistance for rapid rehousing, including a security deposit for an apartment; partial rent for three months or a motel voucher and utilities, etc. 211 LA can also assist homeless parents provided with court orders with securing the housing they need in order to be reunified with their children.

Youth Aged 12 to 25: WIN:What I Need by Our Children LA is a free mobile and web app helping homeless or needy youth aged 12 to 25 locate essential services including shelter.

In the Hospital: It is illegal for the hospital to drop you off in the street after your treatment if you are homeless. The hospital discharge staff must work with you to find a safe place to go. Ask to speak to a social worker prior to your discharge.

Housing for Health is an LA County program providing permanent supportive housing, recuperative care, and specialized primary care to homeless people with complex physical and behavioral health conditions. If you or your whole family is homeless and you get medical care at one of the participating locations, ask for a staff person at the Social Work department. Tell them

you are homeless and ask about the Housing for Health program:

Housing for Health Locations

- LAC USC Medical Center
- Harbor UCLA Medical Center
- Olive View Medical Center
- DHS Multi-Ambulatory Care Center
- MLK MACC High Desert Health System

The Homeless Help Desk at 200 N. Los Angeles St. is open Monday through Friday 8 am to 4 pm and Saturday from 8 am to noon. They can help you locate shelters, hygiene stations, medical help, food, or bathrooms. On certain "Connect Days" you can meet with workers there to help you get an ID card or find housing solutions.

► 2. Shelters

Emergency Shelter: There are over 300 privately run agencies in Los Angeles offering shelter, so we cannot list them all here. You can find many at la-hop.org, where you can also contact an outreach team if you are concerned about a homeless individual near you. More listings are at 211la.org. Here are some major shelters in LA:

Angels Flight (Youth) (800) 833-2499

Long Beach Rescue Mission
1335 Pacific Ave LB (562) 591-1292

Bell Shelter 5600 Rickenbacker Road,
Bell 90201 (323) 263-1206

Los Angeles Mission 303 E. 5th Street
Los Angeles (213) 629-1227

Cardinal Manning Ctr. 231 Winston St.
Los Angeles (213) 229-9963

Midnight Mission 601 S. San Pedro St.
Los Angeles (213) 624-9258

Dolores Mission 171 S. Gless Street
Los Angeles (323) 881-0032

San Fernando Rescue Mission 13422 Saticoy,
N. Hollywood, (818) 785-4476

Jovenes, Inc. (Youth) 1208 Pleasant Ave.
Los Angeles (323) 260-8035

Samoshel 505 Olympic, Santa Monica
(310) 450-4050 or (310) 581-9825

Shawl House 936 S. Centre St., San Pedro
(310) 521-9310

YR Shelter Program 3804 Broadway Pl.
Los Angeles (323) 231-1711

Union Rescue Mission 545 S. San Pedro St.
Los Angeles (213) 347-6300

Union Station
412 S. Raymond Ave, Pasadena CA
(626) 337-0140

Housing

► 2. "Just Cause" Eviction Protection

California tenants (except those in the "Excluded Housing" list below) now have "Just Cause" protections from eviction. The owner needs a valid reason to evict you. This protection begins to apply after 12 months of being a tenant, or 24 months if a new tenant is added. If the valid reason that the owner evicts you is considered a "No Fault" reason, the owner must pay relocation. "At fault" reasons for eviction include:

- Non-payment of rent
- Breach of material lease term
- Nuisance or Waste
- Failure to execute similar new lease
- Criminal activity
- Subletting in violation of the lease
- Denying entry to the landlord
- Using the unit for an unlawful purpose
- Employee, agent, or licensee's failure to vacate after termination as employee, agent or licensee;
- Failure to vacate after providing owner written notice of intent to terminate tenancy, or after making a written offer to terminate tenancy which is accepted by landlord.

"No-fault" reasons for eviction include:

- Owner (or their spouse, domestic partner, children, grandchildren, parents, or grandparents) intend to occupy the unit
- Withdrawal of the unit from the rental market ("Ellis" act)
- Compliance with a government order, court order, or local ordinance that requires vacancy
- Intent to demolish or substantially remodel the unit

Excluded housing includes:

- Housing with a Certificate of Occupancy within the past 15 years (rolling)
- Affordable housing or housing restricted by recorded documents
- Single family homes or condos with no corporate ownership
- Owner-occupied single family homes
- Duplexes (if the owner lies in the other unit)
- Hotels, motels, and hostels used only for short-term use
- Nonprofit hospitals, religious facilities, extended care facilities for the elderly, and adult residential facilities
- Tenants who share bathroom and kitchen facilities with the owner at the owner's primary place of residence
- K-12 or college dorms

Shelters can generally make their own rules about who can stay and how long they can stay. At the shelters which are funded by the government, such as the Winter Shelters, there has to be a written grievance procedure you can go through if you feel you have been treated unfairly, or that conditions are not safe or healthy there. You can file these grievances with: Los Angeles Homeless Services Authority . For information call (213) 225-8442 or visit www.lahsa.org/contact-us.

Legal Issues If You're On the Street

► 1. If You Are Living in Your Car

If you are homeless and living in your vehicle, be aware that the City of Los Angeles is considering an ordinance that would ban sleeping overnight in vehicles in residential areas. The law also forbids living in a vehicle within a block of a park, school or day care. Tickets for violating the rules start at \$25 for a first offense, \$50 the second time and \$75 after that. You can be allowed to sleep in your vehicle in a commercial or industrial area - not, however, in these areas where there are existing parking restrictions.

Safe Parking (213) 793-8493 can find you a place where you can park your car and stay overnight, with security and access to bathroom.

► 2. Homeless Citation Defense Clinics

Through two monthly citation defense clinics (one in Downtown LA and another on Venice Beach), homeless residents can receive legal assistance and defense for all quality-of-life infraction citations - including tickets related to sleeping/living in a tent or on the streets, jay walking, riding your bicycle on the wrong side of the street, etc. Tickets that cannot receive assistance include moving violations, MTA fare evasion tickets, and all misdemeanors and felonies.

The Downtown LA Skid Row Citation Defense Clinic is open every 3rd Wednesday of the month at 5:30pm at the Los Angeles Community Action Network - 838 E. 6th Street 90021. Individuals must bring their citation or a copy of their citation with them. For

more information call (213) 228-0024. **The Venice Homeless Citation Clinic** is first Sunday of the month at 1 pm at 720 Rose Ave, Venice, CA 90291 (second Sunday in February). Call (310) 365-0985 or email humanrights@freevenice.org

New State Rent Control Law

► 1. Limits on Rent Increases

Beginning January 1, 2020, most tenants in California will have a limit on the amount that their rent can increase, and will also have protections from "just cause" evictions. The exceptions are tenants in these kinds of housing:

- Housing with a Certificate of Occupancy within the past 15 years (rolling)
- Housing with local rent control where the annual allowable increase is lower than 8.3%
- Affordable housing or housing restricted by recorded documents
- Single family homes or condos with no corporate ownership
- Owner-occupied single family homes
- Duplexes (if the owner lies in the other unit)
- College dorms

The limit on rent each year is 5% , plus a "Consumer Price Index" OR 10% , whichever is lower. The "Consumer Price Index" changes each year. Rent cannot be raised more than two times in one year, and the total amount of rent increase over 12 months cannot exceed the annual Rent Cap

If your rent increased more than 8.3% between March 15, 2019 and January 1, 2020, you are entitled to have your rent "rolled back" to whatever you were paying on March 15, 2019 plus 8.3%.

If your rent increased less than 8.3% between March 15, 2019 and January 1, 2020, your rent on January 1 stays the same. You can get up to 2 more increases before March 15, 2020, but they can't exceed more than 8.3% above your March 15, 2019 rent.

If your city or county also has Rent Stabilization, then those rules apply. In Los Angeles City, rents are limited on buildings built before October 1, 1978.

► 3. Relocation

- Relocation payment is equal to one month's rent. It must be paid within 15 days of the no-fault eviction notice. Local jurisdictions may require greater relocation amounts, so check local laws.
- If a tenant receives a relocation payment but does not vacate, the owner can recover the payment in an eviction.
- Instead of making a relocation payment, an owner can waive the last month's rent in writing.

If a property is subject to Just Cause protections, owners must give tenants written notice:

- If a tenancy starts or renews on or after July 1, 2020, the notice must be an addendum to the lease OR a notice signed by tenants, who receive a copy.
- If a tenancy exist prior to July 1, 2020, notice must be given no later than August 1, 2020 OR as an addendum to the lease
- The notice must be in 12 point font (larger than this text you are reading) and in the language the lease was negotiated in.
- Owners must also notify tenants if they are NOT covered by Just Cause.

► 4. Local Rent Control

If you live in the city of Los Angeles in a rental unit that has two or more units on the lot, and was built on or before October 1, 1978, your unit might be under rent control. This gives you even more protections than state law. Your landlord can only evict you for a very limited number of reasons. Your rent can only be increased by a set percentage, which the city decides.

For more information contact

Los Angeles Housing and Community Investment Department (866) 557-RENT (866) 557-7368 www.lacity.org/lahd

The County of Los Angeles is also considering a rent control ordinance for unincorporated areas of the county. See <https://dcba.lacounty.gov/rentstabilization-ordinance/>

You can also call the **Housing and Community Investment Department** to make a complaint if you think your landlord violated the rent control rules.

If you are not in a rent control unit, your rent may be increased by any amount with a written notice. If it is increased by 10% or less, then you should get a 30-day notice. If it is more than 10%, then you should get at least a 60-day notice.

Other Rent Control Information:

Santa Monica (310) 458-8751

West Hollywood (323) 848-6450

Other Cities: Call your city hall or the city website on the Internet

What Are My Rights As A Renter?

Here are some groups in Los Angeles that deal with landlord/tenant issues that may be able to provide free help, workshops you can attend, and advice:

Bet Tzedek (323) 939-0506

Coalition for Economic Survival

(213) 252-4411

County Department of Consumer and Business Affairs <http://dcba.lacounty.gov/consumer-protection/>

Eviction Defense Network (213) 385-8112

Housing Rights Center LA (800) 477-5977

Inner City Law Center (213) 891-2880

Inquilinos Unidos (213) 483-7497

Legal Aid Foundation of Los Angeles

(800) 399-4529

L.A. CAN (213) 228-0024

Neighborhood Legal Services of L.A. County (818) 896-5211

Public Counsel (213) 385-2977

Union de Vecinos (323) 908-3454

California Department of Consumer Affairs Booklets and resources regarding landlord/tenant law. (800) 952-5210 or visit www.dca.ca.gov/publications/landlordbook/index.shtml.

► 1. Bad Conditions

You have the right to live in a place without bad conditions, which are things like:

- Holes in the wall
- Broken or faulty plumbing
- Electricity doesn't work
- Broken or faulty heating
- Rats, roaches, or other pests
- Inadequate hot water

If your unit has problems, you should tell your landlord about them and request that

they be fixed. You should make your request in writing and keep a copy of your written request for yourself. Take pictures to document bad conditions. If your landlord does not fix the problems, there are a few things you can do or agencies you can contact:

Los Angeles County Department of Consumer Affairs (888) 700-9995 For problems like vermin, rats, roaches, bedbugs; peeling paint or lack of screens. Also, for questions regarding withholding rent, repair and deduct, and abandonment remedies.

Los Angeles Housing and Community Investment Department (HCID) Systematic Code Enforcement Program (SCEP)

(866) 557-RENT (866) 557-7368

For complaints regarding plumbing and electrical; lack of water or heat; illegal utility shutoff, in the city of Los Angeles.

For other cities, check the Internet. If you think the conditions pose an imminent threat to your health or safety, you can ask the housing inspector to refer your case to the Urgent Repair Program (in LA.)

► 2. Getting Your Landlord to Fix the Problem

If your landlord will not fix problems, you should give written notice of the problem, wait 30 days, and have proof of the problem. Then you have the right to repair the problem yourself and deduct the cost from your rent. It must be a problem affecting your health or safety, not just something you want to change in the apartment. If you withhold your rent, your landlord may try to evict you. It is very important that you keep copies of everything relating to the problem. You should get legal advice or support before withholding any rent. If you do not want to withhold rent, you can also go to Small Claims Court to try to get the money back. If your landlord has been cited by the Department of Building and Safety, Housing Department, or Health Department, and repairs have not been made within 60 days, you can go to Small Claims Court on your own without an attorney. The small claims judge can order the landlord to make the repairs. Ask the judge about Civil Code Section 942.4 in cases like this.

If you are looking to recover money for damaged personal property, repairs that you made, or bad conditions, you can file a case in Small Claims Court for up to \$10,000.

► 3. Evictions

If you are not in a rent controlled unit, you must be given a 30-day notice if you have lived in the unit for less than a year or a 60-day notice if you have lived in your unit for a year or more. If you are evicted from a unit without "good cause" you must be paid relocation (see pg. 6)

Subsidized units (like Section 8 or project-based units) may have different notice periods. To best assure that you do not lose your housing, it is important to seek legal advice about your notice before the notice period has run out (expired).

When you have received a 30/60 day notice to vacate, you are still responsible for paying the rent on time. If you do not pay the rent, the landlord may proceed with a much shorter notice against you, usually a 3-day notice. Additionally, security deposits may not be used in place of last month's rent, unless the landlord agrees to do so, in writing. For questions about these issues contact: Legal Aid Foundation of Los Angeles (800) 399-4529.

Eviction Process

1. Written Notice: in most cases, you must receive a notice in writing. The most common notices are a 3-day notice to pay rent or quit, a 3 Day Notice to Perform (or Cure) Covenant or Quit, or a 30- or 60-day notice to vacate.

2. Summons & Complaint: This is the lawsuit, or Unlawful Detainer (UD). You have five days to answer it.

3. Sheriff's 5-Day Notice to Vacate: If you don't answer your summons and complaint or you lose in court, you will get a 5-day notice to vacate. If you do not move out, you will be locked out by the sheriff sometime after the five days.

If your case is filed in another courthouse, there may be a Self-Help Center where you can get help preparing your answer.

If you are being evicted and your case was filed at the downtown Stanley Mosk Courthouse, visit:

Eviction Assistance Center (EAC)

111 North Hill St., Room 115, LA, 90011. EAC staff can assist you with filing an answer, and provide full representation in some cases, free of charge.

You may also contact the following organizations for assistance with an eviction:

Legal Aid Foundation (800) 399-4529

Bet Tzedek (323) 939-0506

Neighborhood Legal Services of Los Angeles County (818) 896-5211

Organizations that offer low-cost assistance.

BASTA (213) 736-5050

Eviction Defense Network (213) 385-8112

4. Illegal Lockout

Landlords cannot lock you out without first going to court, even if you are late on paying rent. If your landlord locks you out without using the eviction process, you should immediately call your local police department or LA Sherriff's Department. When the police respond to your call, you should show them some proof that you are a tenant (receipts, ID, etc.). Ask them to tell your landlord to let you back in. If the police officer does not respond, you should call the police or sherriffs and ask to speak to the watch commander.

► 5. 28 Day Shuffle

If you have lived in a residential hotel for over 30 days, you are a tenant and can only be evicted through a legal eviction. You should not be asked to move rooms or leave for a few days every 28 (or 21) days. If this happens, you should file a complaint with the Los Angeles Housing Community and Investment Department (866) 557-RENT. (866) 557-7368. If you are locked out, you should call the police and show them your receipts. If you leave voluntarily, it is not a shuffle.

► 6. Housing Discrimination

If you are discriminated against in trying to buy or rent property, or use services provided to other tenants, because of your race, color, religion, sex, nationality, disability, or because you are married or unmarried, or have children, call:

Southern California Housing Rights Center

(213) 387-8400

California Department of Fair Employment and Housing (800) 884-1684

(800) 700-2320 (TDD Line)

► 7. Service or Assistance Animals

The Fair Housing Act requires landlords to provide reasonable accommodations to persons with disabilities who have assistance animals. There is an exception if the specific animal in question poses a threat to others' health or safety, or would cause substantial physical damage. If you are being discriminated against due to having a service or assistance animal, contact:

Disability Rights Legal Center

www.disabilityrightslegalcenter.org

800 S. Figueroa St., #1120, L.A. 90017 (213) 736-1334

213-736-8310 TTD

Can I Get Low Cost Housing?

The federal government has a few subsidized housing programs. Each of these programs has various income and resource requirements and require you to provide information regarding your family income and makeup. It is important to document all your attempts to comply with the program requirements because you can be terminated from the program if you do not comply.

In general, there are two types of programs: project-based and voucher-based. Project-based programs are ones where the housing benefit is connected to a specific unit. Voucher-based programs are ones where the housing benefit is connected to a specific household.

► 1. Project-Based Programs

There are many types of project-based subsidized housing. Many of these projects advertise their availability and you can apply directly at the building or at a leasing office. Most of the time, the best way to get into this kind of housing is to go through special programs offered by community agencies that will help you get into housing when you finish the program. There is not enough project based housing for everyone who needs it, so there are wait lists. We have listed three of the most common programs on the next page. For more information about what type(s) of programs you may qualify for, you can ask a caseworker at one of the agencies.

Conventional Public Housing

The buildings that are part of this program are owned and operated by local Public Housing Authorities. These are often very large buildings or complexes and the people who work at them are government employees. Rent is usually between 30-40% of the household's income. To apply for conventional public housing, you should contact the housing complex directly.

Project-Based Section 8

For project-based Section 8, private landlords have agreed to reserve certain units for Section 8. Project-based Section 8 means that you must live in one of these assigned units to get the benefit. Unlike conventional public housing, your landlord is a private owner, not a Housing Authority.

Shelter Plus Care

Shelter Plus Care provides affordable housing and supportive services. You are required to participate in the supportive services to be part of this program. You may be eligible for this program if you are homeless; have a mental illness and/or AIDS; or have a substance abuse problem. If you are a client of a Department of Mental Health directly-operated clinic or contract agency, please discuss your housing needs with your case manager.

2. Voucher-Based Programs

Section 8 Vouchers

Section 8 vouchers are offered by the local government (the Housing Authority). They allow you to stay in any apartment or house where the landlord will accept them. You pay a limited portion of the rent (usually between 30-40% of your income). The Housing Authority pays the rest directly to your landlord.

You have the same rights as other tenants renting from private landlords, including any local rent control laws. You also have additional special protections. Your landlord cannot evict you without a reason. Your landlord also has to give at least 90 days written notice if they want to stop accepting Section 8 Vouchers.

When you receive a Section 8 Voucher you will have a limited time to find a landlord who will accept it, or you will have to return the

voucher. Once you find a place, the Housing Authority must inspect the unit to make sure that it is up to their standards. The entire process may take up to several months.

The Section 8 Voucher waiting lists are currently closed for the city of Los Angeles, county of Los Angeles, and city of Long Beach. To find out if the waiting list is open in other cities, contact their local Housing Authority directly. You can also ask a caseworker at a shelter or resource agency about any special program that can provide you a Section 8 Voucher when you complete the program.

3. Housing Authorities

Housing Authority of the County of Los Angeles (HACoLA) (626) 262-4510

Housing Authority of the City of Los Angeles (HACLA) (213) 252-2500.

Long Beach Housing Authority: (562) 570-6985

Other cities: Check in the City Government pages in the phone book or online

The LA County Housing Resource Center can assist residents in locating housing resources for affordable, special needs, and emergency housing. To access their rental listings and assistance visit www.housing.lacounty.gov or call (877) 428-8844.

4. Low-Income Housing Tax Credit

Some private owners participate in the Low-Income Housing Tax Credit (LIHTC). In this program, private landlords reserve some of their units to offer at affordable rates. Eligibility for the units is based on income, and each unit has a set rent amount. For more information about this program, you should contact the individual owners or

Foreclosures

1. Help for Homeowners in Danger of Foreclosure

Many people who are in danger of losing their homes due to foreclosure have turned to loan modification or foreclosure "rescue" companies for help – only to realize they've been scammed. Anyone can become a victim of a loan modification scam. Don't sign any papers from groups you are not sure about. If

you are facing foreclosure and want assistance, you can contact a housing counselor for advice at: (888) 995-HOPE [4673] or www.makinghomeaffordable.gov

Following is a list of some of the groups in Los Angeles the government has approved to provide advice. For information for another city, visit the Department of Housing and Urban Development's website at www.hud.gov.

East LA Community Corporation (ELACC)

(323) 269-4214 www.elacc.org

Korean Churches for Community Development (213) 985-1500 www.kccd.org

Korean Resource Center (323) 937-3718 www.krcla.org

Los Angeles Neighborhood Housing Services, Inc. (888) 895-2647 www.nhslacounty.org

New Economics for Women (213) 483-2060 www.neweconomicsforwomen.org

NID-HCA Reeves (323) 299-4067 www.nidonline.org

Operation Hope, Inc. (213) 891-2900 or (213) 891-2900 www.operationhope.org

Shalom Center for T.R.E.E. of Life (213) 380-3700 www.shalomcenter.net

Thai Community Development Corporation (323) 468-2555 www.thaicdc.org

Watts Century Latino Organization (323) 564-9140 www.wattcenturylatino.org

West Angeles Community Development Corporation (323) 751-3440 www.westangelescdc.org

2. Renters Living in Buildings that were Foreclosed

If you are living in a building that was foreclosed, you still have rights. The new owner must give you a 90-day notice to move in most situations. If you have a lease, you may be able to stay until the term of your lease ends. Some cities may have local rules that provide additional protection. In the City of Los Angeles, for example, you cannot be evicted from a building solely because it was foreclosed upon and there is a new owner. You should contact a local renter's rights group for more information. (See "What Are My Rights As A Renter " pg.6).

Tax Credits

Tax credits are benefits you can get only by filling out state and federal income tax forms. They can be received in a check, or can be used to reduce the amount of tax you owe. You should file federal and state taxes even if your income is so low that you do not owe taxes, or if you get paid in cash, because that is the only way you can get these credits.

The federal tax credits require that you file the "long form." You can get help by calling (800) TAX-1040 or (800) 829-1040.

1. Earned Income Credit (EITC)

"The Earned Income Tax Credit" (EITC) is a check that low-income working people can get from the government by filing a federal income tax return (it has to be form 1040 or 1040A) or filling out a W-5 form during the year, even if your income is so low that you do not owe federal taxes. You need a valid social security number to get this money (you cannot use an ITIN.)

You qualify for earned income credit if your yearly income in 2019 is below the level in the chart at the bottom of the page.

If you are receiving CalWORKs, or CalFresh (Food Stamps), the DPSS cannot count the EITC payment as part of your income if you spend the money in the month received or the month after. For the General Relief program, this money is counted as income.

You can also file for "retroactive" payments from the past three years. If you do not owe taxes, there is no penalty for filing for the credit late (after April 15th).

You can claim EIC on the tax form (1040 or 1040A) or you can fill out just the first side of "Schedule EIC" instead and the IRS will figure it out for you.

For help getting the credit you can call the **EIC hotline** at (800) 601-5552.

To get a 1040 or 1040A form for this year and past years, and to receive free tax assistance call the IRS at (800) 829-

3676 and ask for VITA-Volunteer Income Tax Assistance. Forms are also available in libraries, post offices and other public places.

If you choose, you can receive this payment spread out during the year in lower payroll tax deductions instead of getting it all at once at the end of the year. To do this, ask your employer to fill out a W-5 form.

2. CA Earned Income Credit

To qualify for the California Earned Income Credit, you must complete a 540 or 540 EZ form, and have income that is reported on a W2. For tax year 2019, a household can earn up to \$30,000 to receive the credit. A family without children can qualify for a benefit of \$240 . A family with one child can qualify for up to \$1,605 . A family with 2 children can qualify for up to \$2,651. A family with 3 or more children can qualify for up to \$2,982

More information and help for both the federal and state Earned Income Credit and the new Young Child Tax Credit can be found at <https://caleitc4me.org> including calculators that can help you figure out how much you'll receive for each credit.

3. Young Child Tax Credit

California families with at least one child under 6 years old as of December 31, 2019 who are also eligible for CalEITC can qualify for up to \$1,000 in the new Young Child Tax Credit. You can begin earning this credit as soon as you have \$1 of income. Find information at <https://caleitc4me.org>

4. Child Tax Credit and Child and Dependent Care Tax Credit

The federal Child Tax Credit offers up to \$2,000 per qualifying dependent child 16 or younger. To qualify your gross income must be under \$400,000 if married filing jointly, or \$200,000 for everyone else. You can also get up to \$500 taken off

your taxes for other qualifying dependents besides children.

The federal and state governments both offer a Child and Dependent Care Credit which can reduce your taxes by up to \$3,000. The amount is based of the cost you paid for care for a child under 13, an incapacitated spouse or parent, or another dependent, if paying for the care allows you to work. You can get up to \$6,000 for two or more dependents. The state credit uses form 3506 and is limited to families with under \$100,000 income per year. The federal credit uses form 2441 and has no income limit but is reduced as your income goes up. You must provide the care provider's name, address and Social Security number or Employer Identification Number. The caretaker can't be your spouse, a parent, or your child 18 or younger.

See <https://www.ftb.ca.gov/file/personal/credits/> for more state tax credit info and <https://www.irs.gov/credits-deductions-for-individuals> for information on federal tax credits.

5. Renter's Tax Credit

The Renter's Tax Credit is not a payment that you can receive, but a deduction that renters can make on their California state income tax forms. Renters who owe no tax will get no benefit. Single renters with incomes up to \$41,641 are eligible for \$60 renters' tax credit and families with incomes up to \$83,282 are eligible for \$120 renters' tax credit (2019). Those numbers go up each year. Other rules apply:

- You had to pay rent in California at least half the year;
- You had to be a California resident for the entire year
- The property you rented was not exempt from California property tax
- You didn't live with another person for more than half the year (such as a parent) who claimed you as a dependent
- You or your spouse were not granted a homeowner's property tax exemption during the year



FEDERAL EARNED INCOME CREDIT INCOME LIMITS AND BENEFITS

	Single, Head of Household or Widowed	Married Filing Jointly	Maximum Credit
	Income Limit	Income Limit	
0 Children	\$15,570	\$21,370	\$529
1 Child	\$41,094	\$46,884	\$3,526
2 Children	\$46,703	\$52,493	\$5,828
3 or more Children	\$50,162	\$55,952	\$6,557

Job and Career Training

Hundreds of organizations in LA County offer help in job training. Beware of private employment agencies that charge you fees for finding a job. Many encourage you to pay the tuition with expensive student loans that can ruin your credit. Use free or low cost services instead.

3. If You Have a Criminal Record

Sometimes a criminal record can keep you from getting a job. An expungement can you help you by changing your criminal conviction to a dismissal. When you get an expungement, they cannot use your conviction against you in private background check, and it also helps with license certification and government employment. Be aware though that the expungement does not take the conviction off your record.

You are eligible for an expungment if you are not on probation or parole, not currently serving a sentence for any offense, or not currently charged with an offense, and if your conviction is also eligible. Most misdemeanor and infraction convictions are eligible. Felony convictions are eligible in limited circumstances.

The first step is to get your court case information. You can go to any criminal courthouse in the county where you were convicted and ask for your criminal docket. A criminal docket contains information on a specific case. There may be a fee for copies of your docket. You can also request your complete criminal history, or RAP sheet, for a fee, from the California Department of Justice. To get a RAP sheet you need to go to a Livescan service provider and get your fingerprints taken.

If you think you are eligible for an expungement and have your case information, contact the following organizations for help:

Legal Aid Foundation of Los Angeles (800) 399-4529;

A New Way of Life Reentry Project (323)563-3575

Los Angeles County Public Defender <https://pubdef.lacounty.gov/> or (213) 974-2811: TDD: (800) 801-5551. Spanish: (213) 974-2828

4. Other Job Training

Los Angeles County Regional Occupational Program offers education and job training in technical and occupational programs. (562) 922-6850 www.lacorop.org

Adult schools can help you get your high school diploma or GED, learn English as a second language (ESL), provide you with computer training, job readiness classes & more

L.A. Unified School District (213) 62-LEARN (213-625-3276)

L.A. County Office of Education (562) 922-6111

More options:

AmeriCorps (800) 942-2677 www.americorps.org

Job Corps (ages 16-24) (800) 733-5627

Homeboy Industries (323) 526-1254

Goodwill provides a variety of training and employment tools (800) GOODWILL contactus@goodwill.org

Los Angeles Conservation Corps (youth) (213) 362-9000

<https://lacorps.org/sites-contact-info/>

St. Joseph Center training for working poor & homeless families (310) 396-6468 ext 301 <https://stjosephctr.org>

Chrysalis can help low income individuals including those who are homeless or have just come out of prison find temporary and permanent work opportunities

- **Los Angeles** (213) 806-6300
- **Santa Monica** (310) 401-9400
- **Pacoima** (818) 794-4200

www.changelives.org

5. Department of Rehabilitation

The state Department of Rehabilitation provides a wide range of services for people with physical, mental, or emotional disabilities (including substance abuse problems) who want to become more independent and/or self-supporting. Many services are free for those who qualify.

Services available include vocational counseling and training; job placement; medical treatment; money for tuition and books; necessary tools; car modifications; money for transportation; reader and interpreter services; and services for family members.

If you experience problems with Department of Rehabilitation contact the Disability Rights California Client Assistance Program at (800) 776-5746/ TTY line (800) 719-5798. Or, visit: www.disabilityrightsca.org/pubs/PublicationsClientAssistanceProgram.htm

Job Training

Department of Rehabilitation Offices:

Antelope Valley: (661) 945-3502

(661) 942-6694 (TTY)

Van Nuys / Foothill: (818) 901-5024

(818) 901-5086 (TTY)

Glendale: (818) 551-2141

Santa Clarita: (661) 799-1020

(661) 799-1024 (TTY)

West Valley: (818) 596-4302 (818)

596-0196 (TTY)

El Monte: (626) 572-2336 (626) 572-2481 (TTY)

Pasadena: (626) 304-8300

(626) 304-8324 (TTY)

West Covina: (626) 813-7662 (626) 939-9122 (TTY)

Greater Los Angeles: (213) 736-3904

(213) 736-3960 (TTY)

Bell: (323) 771-0866

Mid Cities Branch (323) 565-1860

(323) 565-1874 (TTY)

Culver City: (310) 559-6140

Westchester: (323) 298-2500 (323) 298-2521 (TTY)

Long Beach & South Bay: (562) 422-8325; (562) 422-9276 (TTY)

Compton Branch: (310) 637-1151 (310) 637-6526 (TTY)

Long Beach Branch: (562) 422-8325

(562) 422-9276 (TTY)

Pacific Gateway: (310) 217-6955

City of Commerce: (323) 720-4073

(323) 721-5142 (TTY)

Norwalk: (562) 864-8521

Worker's Rights and Unemployment

Unemployment Benefits

1. How to Apply

You may be eligible to receive unemployment insurance (UI) benefits from the Employment Development Department (EDD) if you lose your job or have your hours cut at work, and you are actively looking for work and ready, willing, and able to accept work when you find it. EDD also sometimes approves training courses that allow you to gain skills while you are unemployed.

- Apply online at: www.eapply4ui.edd.ca.gov
- Or call: (800) 300-5616

A recorded message about general unemployment insurance benefit information is available 24 hours a day, 7 days a week, including holidays. You can file claims at the same number Monday through Friday: 8:00 a.m. to 5:00 p.m. On the EDD website www.edd.ca.gov you can also manage extensions, certify for benefits online, and get useful information.

An individual who files for unemployment insurance benefits must meet specific eligibility requirements before benefits can be paid. Individuals must:

- Have received enough wages during the “base period” to establish a claim
- Be totally or partially unemployed
- Be unemployed through no fault of their own (Laid off or fired, but not fired for “misconduct,” or quit for a very compelling reason)
- Be physically able to work
- Be available for work which means to be ready and willing to immediately accept suitable work
- Be actively looking for work
- Meet eligibility requirements each week benefits are claimed

If you are seeking training benefits, you must be approved for training before training benefits can be paid

The minimum weekly benefit amount is \$50 and the maximum weekly benefit amount is \$450.00. The normal maximum benefit period is 26 weeks. During bad economic times or when there are high unemployment rates, the maximum benefit period is usually extended. Check the EDD website www.edd.ca.gov for updated information.

Employers report wages to the state for each employee. The state uses this information to decide whether you earned enough wages in a “base period” to establish a UI claim, and how much will be paid. The “base period” is a 12-month period, starting 12-18 months before you filed your claim.

Always tell the truth to the EDD about why you are no longer working for your last employer. When in doubt as to whether you were fired or laid off, tell EDD you think you were fired. Even if you were fired, you may still be eligible for benefits.

After you apply and are approved, EDD will give you a debit card and give you payments through it.

You are required to file a Continued Claim Certification form, DE 4581, every two weeks. You file this form by mailing it to EDD every two weeks, or you can complete it online through EDD Web-Cert (that's recommended as the better way), on the EDD website www.edd.ca.gov. You can also call (800) 300-5616. Keep copies of your continued claim forms.

If you are denied benefits and decide to appeal, you must keep filing your continued claim forms with EDD so that if you win the

appeal, EDD can give you back benefits.

Your UI application process will usually include a telephone interview. After the phone interview, EDD will mail you a notice indicating whether or not they think you qualify for benefits.

2. Appeal Your Denial

If you disagree with the EDD decision, you should appeal and ask for a hearing before the appeal deadline. Your past employer also has a right to appeal a decision by EDD. You can appeal by filling out the appeal form that is included with the Notice of Determination denying your benefits. The appeal deadline is 30 days from the mailing date of the Notice of Determination.

At the hearing, an administrative law judge will consider the evidence, including your testimony, and decide whether you should get benefits.

Even if you are fired or if you quit, you may be eligible for benefits. If EDD says that you were fired for misconduct or that you quit without a good reason, you can appeal it. Misconduct means that you did something bad that could harm the employer, and you either did it on purpose or you completely disregarded the employer's interests. To show that your actions were not misconduct, you can argue that the employer's accusations are false, or that you simply made a mistake, or you could not do the job, or that the action was an isolated occurrence. Also if you can show you had a very compelling reason to quit a job, and you did everything possible to preserve the job before you quit, then you can get UI benefits. Call legal services for help. If you appeal, make sure to keep filing your forms with EDD! If you win the appeal, you can get back benefits.

Besides unemployment benefits and State Disability Insurance (SDI), the EDD offers **California Training Benefits (CTB)** which allows qualified persons to receive unemployment benefits while in approved training.

If You Are Working

1. Dealing with Problems

If you have a problem at work and are a member of a union, contact your union representative. He or she can advise you about dealing with your employer or about contacting the right government office. To find out about unions, or to get in touch with an organizer, call the L.A. County Federation of Labor (AFL-CIO) (213) 381-5611. www.launionaflcio.org, or contact one of the groups listed on pg. 13 under "Groups That Can Help."

2. Wage Claims

You can file a wage claim with the Labor Commissioner for any amount owed to you (or in Small Claims Court for up to \$10,000) if your employer does any of the following:

- Pays less than the minimum wage, which increases to \$13 per hour in California on January 1, 2020 for businesses with 26 or more employees (\$12 for other businesses.), On July 1, 2020, the minimum wage in the City of Los Angeles, and in the unincorporated areas of Los Angeles County, will increase to \$15 per hour (for businesses with 26 or more employees. More information is at dcba.lacounty.gov/minimum-wage-laws/ and wagesla.lacity.org/.)
- Does not pay overtime. Overtime means time-and-a-half of your hourly rate if you work more than 40 hours in a week OR more than 8 hours a day. Overtime means double-your hourly rate if you work more than 12 hours in a day OR more than 8 hours on the 7th day of a work in a row.
- Takes improper deductions from your pay.
- Does not pay you all wages owed immediately upon discharge or within 72 hours if you quit and don't give 3 days' notice.
- After you lose your job, does not pay vacation time that you were promised and have earned.
- Does not pay wages owed, or pays you with a check that bounces
- Does not give you one 10 minute

rest break for every 4 hours worked or a meal break of at least a half hour without interruptions, which can be unpaid, if you work at least a 5-hour shift. You may be entitled to a wage premium for each meal and rest period violation per day.

You may also claim waiting time penalties. These penalties consist of your daily pay for each day after separation from work that you must wait to receive all wages owed to you, up to 30 days. Wages include regular pay, overtime, vacation pay, and pay for not getting rest or meal breaks.

You must bring your claim within three years of the date you should have been paid the wages you are claiming. Find the wage claim form at: **California Labor Commissioner:** <https://www.dir.ca.gov/dlse/HowToFileWageClaim.htm>

Free Wage Claim Assistance:
Legal Aid Foundation of Los Angeles (800) 399-4529
Neighborhood Legal Services (800) 433-6251

To reach the Labor Commissioner's office about wage claims:

State Industrial Relations Department, Labor Standards Enforcement,
320 W. 4th Street, Suite 450. LA, 90012. (213) 620-6330.
Long Beach: 300 Oceangate, Suite 302 Long Beach, CA 90802 (562) 590-5048
Van Nuys: 6150 Van Nuys Blvd. # 206 Van Nuys, 91401 (818) 901-5315. www.dir.ca.gov/DLSE

The federal **Department of Labor** has an office that also helps people with similar problems. Its services are more limited. However, you can file an anonymous complaint with them to avoid retaliation by your employer.

Department of Labor,
915 Wilshire Blvd., Ste 960, LA, 90017 (866) 487-9243.

3. Discrimination

It is illegal to discriminate against workers because of their race/color, sex, religion, national origin, citizenship, age, disability, political affiliation, ethnicity (including hairstyle and texture), or sexual orientation. The law also prohibits harassment in the workplace because of these protected categories, including sexual harassment.

You can file a complaint, even if you do not have an attorney, with either:

The California Department of Fair Employment Housing, 320 W 4th St. 10th Floor, Los Angeles CA 90013, (800) 884-1684, www.dfeh.ca.gov:Or:

Federal Equal Employment Opportunity Commission 255 E. Temple, Fourth Floor, LA, CA 90012. (213) 894-1000 www.eeoc.gov

They will investigate your complaint and may be able to help solve your problem. If your case requires court action, you will be given a letter authorizing you to file a lawsuit. You have to file a claim with these agencies within six months (EEOC) or one year (DFEH) of the discriminatory act. You may also wish to consult a lawyer to help you evaluate the strengths and weaknesses of your discrimination case.

Breastfeeding Mothers: Employers are required to provide lactation accommodation for breastfeeding mothers, including break time (which can run concurrently with a scheduled break, or can be unpaid additional time) and a nearby private space (not a toilet stall). See https://www.dir.ca.gov/dlse/Lactation_Accommodation.htm for more details on the rules. Information on filing a complaint is at <http://www.dir.ca.gov/dlse/HowToReportViolationtoBOFE.htm>.

4. Work Safety

Employers are required to provide safe, healthy work areas. If you are asked to work under unsafe or unhealthy conditions, a state agency can investigate your complaint, and your employer may be fined for violating the law. Contact the California Occupational Health and Safety Administration (Cal/OSHA) office nearest your work. Visit www.dir.ca.gov/dosh/DistrictOffices.htm.

5. Sick Leave

California law requires employers to provide employees with one hour of paid sick leave for every 30 hours they work. The law applies to employees who have worked for at least 30 days within a year from the time they began their employment.

You can begin using sick leave on the 90th day of employment, and any paid sick leave not used within the year carries over to the next year. An employer can limit you to 24 hours (three full days) of sick leave in any one-year period.

You can use sick leave for yourself or for family members, and can use it for reasons other than illness, including preventative

care, issues related to domestic violence, sexual assault and stalking. An employer cannot require you to find a replacement worker as a condition of using paid sick leave.

In cases where you can foresee that you will need to use sick leave, you are required to provide reasonable notice. Otherwise you can just provide notice as soon as it is practical.

6. Paid Family Leave

Workers who have a loss of wages when they need to take time off work to care for a seriously ill child, parent, parent-in-law, grandparent, grandchild, sibling, spouse, registered domestic partner, or to bond with a new child entering the family through birth, adoption, or foster care placement, may be eligible for Paid Family Leave (PFL) benefits. In order to be eligible for PFL benefits, you must:

- Be unable to do your regular or customary work due to the need to provide care for a seriously ill family member or to bond with a new child.
- Be employed or actively looking for work at the time your family leave begins.
- Have lost wages because you were caring for a seriously ill family member or bonding with a new child.
- Have earned at least \$300 from which State Disability Insurance (SDI) deductions were withheld during your base period.
- Complete and submit your claim form no earlier than the first day your family leave begins, but no later than 41 days after your family leave begins or you may lose benefits.
- Provide a medical certificate on your care claim for the seriously ill family member. The certificate must be completed by the care recipient's physician/practitioner.
- Certain rules apply if you use a nurse practitioner, physician assistance, or religious practitioner

Your employer will be notified that you have submitted a PFL claim. However, the care recipient's medical information is confidential and will not be shared with your employer.

For more information, including what counts as a "serious health condition", please see http://edd.ca.gov/DisabilityFAQ_PFL_Eligibility.htm

7. Groups That Can Help

These organizations and websites can help you learn more about your rights in the workplace

www.smartlaw.org--Research attorneys who can help with work related issues
LA County Consumer & Business Affairs dcba.lacounty.gov
Asian Americans Advancing Justice 1145 Wilshire Blvd. (213) 977-7500
Bet Tzedek Legal Services (323) 939-0506
Black Worker Center 5350 S. Crenshaw (323) 752-7287
CHIRLA 2533 W. 3rd Street # 101 (888) 624-4752
CLEAN Carwash Campaign 516 W. Vernon Ave (323) 644-1630 www.cleancarwashcampaign.org
Garment Workers Center (213) 748-5866
Koreatown Immigrant Workers Alliance (KIWA) 3465 W. 8th St. (213) 738-9050
Legal Aid Foundation of Los Angeles (800) 399-4529
Maintenance Cooperation Trust Fund (janitors) 1247 W. 7th St., #103 (213) 284-7758
Neighborhood Legal Services (800) 433-6251
9 to 5 Los Angeles Working Women provides free counseling and resources (213) 201-7029
Pilipino Workers Center 153 Glendale Blvd. (213) 250-4353
Restaurant Opportunities Center 1730 W Olympic Blvd # 300, Los Angeles, CA 90015 (213) 380-1020
Rideshare Drivers United <https://drivers-united.org>

If You Become Disabled

1. State Disability Insurance

If you cannot work for a temporary period because of an illness, injury, or pregnancy, you may be able to get state disability insurance benefits (SDI). These benefits range from \$50 to \$1075.00 per week depending on your earnings in a prior quarter, and can last up to one year (39 weeks for employers and self-employed people who elected SDI coverage).

You must be unable to do your regular or customary work for at least eight consecutive days. You must have lost wages because of your disability or, if unemployed, have been actively looking for work. You must have earned at least \$300 from which SDI deductions were withheld during a previous period. You

must be under the care and treatment of a doctor during the first eight days of your disability. (The beginning date of a claim can be adjusted to meet this requirement.) You must remain under care and treatment to continue receiving benefits.

You must apply within 49 days of the date you became disabled or you may lose benefits. You do not need to apply in person to receive benefits.

If your disability prevents you from completing the claim form, or you are filing for benefits on behalf of a disabled claimant, call (800) 480-3287 for required forms and instructions.

You must also ask your doctor to complete and sign the "Physician Practitioner's Certificate." If your doctor will mail your completed certificate to EDD provide him/her with an envelope addressed to the SDI office listed below.

Mail your claim no earlier than 9 days - but no later than 49 days -after the first day you became disabled. Mail the completed, signed "Claim Statement of Employee" together with the completed, signed "Physician Practitioner's Certificate" to:

- **State Disability Insurance**
P.O. Box 10402
Van Nuys, CA 91410-0402 **OR**
- **State Disability Insurance**
P. O. Box 513096
Los Angeles, CA 90051-1096
- File online: www.edd.ca.gov

You may not be eligible for SDI benefits if you:

- Are not suffering a loss of wages:
- Are claiming or receiving Unemployment Insurance.
- Became disabled while committing a crime resulting in a felony conviction.
- Are receiving workers' compensation benefits at a weekly rate equal to or greater than the SDI rate.
- Are in jail or prison because you were convicted of a crime.
- Are a resident in an alcoholic recovery home or drug-free home, unless it is licensed and certified by the state
- Fail to submit to an independent medical examination when requested to do so.

If you do not have sufficient base period wages and you remain disabled, you may be able to establish a valid claim by using a later beginning date.

If you do not have enough base period wages and you were actively seeking work for 60 days or more in any quarter of the

base period, you may be able to substitute wages paid in prior quarters.

Additionally, you may be entitled to substitute wages paid in prior quarters either to make your claim valid or to increase your benefit amount if during your base period you were in the military service, received workers' compensation benefits, or did not work because of a labor dispute.

You have the right to appeal, and should appeal any disqualification, overpayment, or penalty that you do not agree with. Specific instructions on how to appeal will be provided on the state forms you receive. If you file an appeal and you remain disabled, you must continue to complete and return continued claim certifications.

For residents in a state-approved alcoholic recovery home or drug-free residential facility, the maximum payable period is 90 days. (However, disabilities related to or caused by acute or chronic alcoholism or drug abuse which are being medically treated do not have this limitation).

When your claim is received, the SDI office will notify you of your weekly benefit amount and request any additional information needed to determine your eligibility. If you meet all requirements, EDD will provide you with a debit card for your disability payments. The first seven days of your claim is a waiting period for which no benefits are paid.

If you are eligible for further benefits, either additional payments will be sent automatically or a continued claim certification form for the next two weeks will be sent. You must report income you receive, even though sometimes it does not reduce your SDI payments.

Coordination with Worker's Comp

If you also have a worker comp. claim and the insurance carrier delays or refuses payments, SDI may pay you benefits while your case is pending. However, SDI will pay benefits only for the period you are disabled and will file a lien to recover benefits paid.

SDI and Workers' Compensation are two separate programs. You cannot legally be paid full benefits from both programs for the same period. However, if your workers' comp benefit rate is less than your SDI rate, SDI may pay you the difference between the two rates.

Long-term or Permanent Disability: If you expect your disability to be long-term or permanent, apply for SSDI from Social Security well before your year of SDI is over. (see page 29 Social Security).

2. Workers' Comp Benefits

If you are disabled because of an injury that occurred on the job, or because of unhealthy, unsafe, or stressful conditions at work, you should apply for Workers' Compensation benefits. You are entitled to most types of Workers' Compensation benefits regardless of your immigration status or the length of time you worked for your employer. There are six basic types of Workers' Compensation benefits:

A. Medical Benefits: The employer pays for certain medical care expenses resulting from the work-related injury up to \$10,000 while your claim is still being considered by the insurance company. You may be treated by the employer's physician or company clinic, or by your own doctor if you have previously notified your employer in writing of your request to select, or "pre-designate" your own doctor.

B. Temporary Disability Benefits: These benefits are paid every two weeks if you are unable to return to work within three days, or are hospitalized overnight. The benefits are intended to partially replace two-thirds of the wages lost because of the injury.. These benefits are paid until you can return to work, or until the disability becomes "permanent and stationary", which means a doctor determines that your medical condition has stabilized and you are not expected to have a significant change in condition for a period of one year, with or without medical treatment.

C. Permanent Total Disability: If you have a permanent total disability you may receive weekly payments for life. The rate of payment depends on the date you were injured.

D. Permanent Partial Disability: The percentage of disability is based on one or more medical evaluations by doctors selected either by agreement of the parties or by a random list of names provided by the state. You receive benefits every two weeks for a period that increases with the percentage of disability and will vary depending upon your average weekly wage at the time of your injury.

E. Supplemental Job Displacement Vouchers: Employees who are injured and are permanently unable to do their usual

job, and whose employer does not offer other work, may qualify for the supplemental job displacement benefits (SJDB). SJDB comes in the form of a non-transferable voucher that can be used to pay for educational retraining or skill enhancement, or both, at state-approved or state-accredited schools.

F. Death Benefits: Death benefits are payments to a spouse, children or other dependents if an employee dies from a work-related injury or illness. This includes reasonable burial expenses. Death benefits are paid at the total temporary disability rate, but not less than \$224.00 per week.

Filing a Workers' Comp Claim: <http://www.dir.ca.gov/dwc/iwguides/IWGuide01.pdf> For help filing a claim or if your employer does not provide you with a Claim Form, contact the Workers' Compensation Appeals Board District Office (WCAB) closest to you:

WCAB Los Angeles District Office:

320 W. 4th St., 9th floor
LA, CA 90013 (213) 576-7335.

WCAB Pomona District Office:

732 Corporate Center Drive
Pomona, CA 91768 (909) 623-4301

WCAB Van Nuys District Office:

6150 Van Nuys Boulevard, Suite 105
Van Nuys, CA 91401 (818) 901-5367

Visit this web page for more information:
<http://www.dir.ca.gov/dwc>

You can obtain free information from an "Information and Assistance Officer" of the State Division of Workers' Compensation at your closest District Office, or you can hear recorded information and a list of local offices by calling (800) 736-7401. These Officers cannot represent you or act as your attorney, but they can provide basic guidance as you navigate the Workers' Compensation system.

You may also want to hire a private attorney to help you with your claim. Many Workers' Compensation attorneys offer a free consultation, which allows you to discuss your case with a professional. If you receive nothing, your attorney will not charge you for any work done on your behalf.

It is illegal for your employer to punish or fire you for having a job injury or illness, for filing a claim, or testifying in another person's Workers' Compensation case (Labor Code 132a). If proven, you may receive lost wages, job reinstatement, increased benefits, and costs and expenses up to limits set by the state.

CalWorks

CalWORKs (California Work, Opportunity and Responsibility to Kids) provides monthly financial assistance for low income families who have children under 18 years old (19 in certain circumstances.) Most adults can only get CalWORKs for 48 months in a lifetime, and, unless exempt, will be required to work or go to training in order to receive the cash assistance. If you get CalWORKs you may also be eligible to Medi-Cal for health care and CalFresh to help you buy food.

Children age 18 and under and the eligible adult relatives who care for them can get cash aid. Both one- parent and two-parent families can get cash aid. In two-parent families, one of the parents (or the primary wage earner) must be disabled or have worked less than 100 hours in the last four weeks before applying for cash aid.

How Do I Apply?

You apply for CalWORKs at the nearest DPSS (Department of Public Social Services) office. (see page 71 Welfare Offices.) You can also apply online through YourBenefitsNow! website at: <https://yourbenefits.laclrs.org>. If you have an emergency, you should apply at the office (see pg. 71), not online.

When you apply, you have a right to be treated with courtesy and without discrimination for any reason. The DPSS workers will try to get you all the cash aid, food aid and other benefits for which you are eligible.

At times, eligible people who urgently need the aid don't get correct information, or don't understand or get discouraged. If that is happening to you, be strong. Insist on talking to a supervisor, or the supervisor's manager. Seek out the help of someone who will advocate for you. Insist on speaking to someone fluent in your language (DPSS must provide a free interpreter) or call a Legal Aid office. (see page 67 Hearings and Complaints.)

What To Bring When You Apply

When applying for CalWORKs, bring the following documents with you (top of next column.)If you lack some of them, go ahead and apply. The worker will give you a list of documents to be brought in later. If you can't get the verification that is requested, ask the worker to help you.

- All adult applicants must provide a photo ID in person at Intake and when there is a report of a new adult member
- Social Security Number or Card (or proof of application for the cards)
- Proof of income (like check stubs) and resources (like a bank statement)
- Proof that you live in the county (a document that has your name and an address on it)
- Proof of citizenship, alien or immigration status for each person on the application
- Proof of your housing situation (rent receipts, lease agreement, etc.)
- Auto payment papers and registration
- Letters from a doctor if anyone in the household is pregnant, disabled, has a special medical need or has a special diet
- Any documents having to do with marriage, divorce, child support, or other circumstances that apply to your family.

How Do I Qualify?

To qualify for CalWORKs, your monthly income must be less than the amount shown on the table below for your family size. Once you begin getting cash aid, you can make more money and may still get cash assistance from CalWORKs.

Monthly Income Limits	
Effective 7/1/19 through 6/30/2020	
# of people	Gross Income Limit
1	\$714
2	\$1,117
3	\$1,453
4	\$1,724
5	\$1,967
6	\$2,213
7	\$2,432
8	\$2,646
9	\$2,871
10	\$3,116
Over 10 Add \$28 for each extra person.	

Money you make from working and unemployment counts as income. SSI payments, most student loans, tax refunds and Earned Income Credit don't count. If your child is under age 19, your child's income may not count if the student exemption rules are met. Loans from friends may be counted if there is no repayment agreement on file.

To qualify your resources must be less than \$2,250. But if someone in the family on aid is disabled or 60 years or older, the limit is \$3,500. Cash on hand, savings, some cars, and most other property count as resources. A home you live in, personal items like furniture and a computer, tools, and some retirement accounts don't count. The income and resources of a spouse or partner can be disregarded if someone applying for CalWORKs is fleeing because of domestic violence. Please be sure to ask about these rules.

Disabled individuals who meet certain criteria can open a savings account for Qualified Disability Expenses (QDE) known as CalABLE, without losing eligibility to CalWORKs. For CalWORKs purposes, the designated beneficiary of a CalABLE account may save up to \$100,000 and a maximum yearly contribution of \$15,000. Visit www.CalABLE.ca.gov for more information

While on cash aid, you can have a written agreement with DPSS to have a special "restricted" savings account for education, training, starting a business or buying a house, and it will not count. You can have as much as you want in this "restricted" account but you have to make a written agreement with DPSS on a form, and give them the bank account information.

“Transfer of Assets.”

If you give away or sell a property or resource for less than its fair market value while you are on cash aid, you might lose cash aid for one or more months. If you and the DPSS disagree about this, you need to consult with an attorney or legal services office. (pg 69 Good Advice).

Rules about Cars

If you're applying for or already receiving CalWORKs, you can own cars that have an "equity value" less than \$9,500. Any value in excess of that counts against the family's resource limit. The "equity value" is the difference between what the car is worth and what you might still owe on it. A car you live in, a car used to go to work, a

car used to make money like a gardener's truck, or a car used to transport a physically disabled person in your home doesn't count. Any vehicle for which ownership has been transferred to you as a gift, donation or family transfer, as defined by Department of Motor Vehicles, won't count against your family's maximum resource limit, but you must show the paperwork to prove it. For other cars, anything over the \$9,500 will count toward your \$2,250 resource limit.

What Can I Get?

CalWORKs divides people who get cash aid into "exempt" and "nonexempt" recipients. You are considered "exempt" if you are getting disability payments such as In-Home Supportive Services, SSI/SSP, State Disability Insurance, SSDI, Workers'Comp and Temporary Disability Indemnity.

The chart below shows the "Maximum Aid Payment" for these two groups. This maximum grant is cut dollar for dollar by any "unearned" income you have, such as social security survivor's benefits, interest (like on a bank account), or unemployment money. Earned income, wages from work, or income based on a disability is not counted dollar for dollar. Make sure you are getting the correct earned income deductions.

Maximum Aid Payments (Effective October 1, 2019)		
# of people	"Nonexempt" Grant	"Exempt" Grant
1	\$ 550	\$ 606
2	\$ 696	\$ 778
3	\$ 878	\$ 983
4	\$ 1060	\$ 1181
5	\$ 1242	\$ 1385
6	\$ 1424	\$ 1589
7	\$ 1606	\$ 1792
8	\$ 1788	\$ 1998
9	\$ 1970	\$ 2199
10 or more	\$ 2152	\$ 2406

1. Think About Time Limits Before You Take Cash Aid

You may not want to get cash aid if you have other income. Any month you get cash aid counts against the adult's 48-month time limit, even if you are entitled only to a few dollars a month. You can get Medi-Cal, Cal-Fresh and child care money even when you do not get cash aid. Is the cash aid you will get worth "using up" a month of eligibility? Should you "save" the month in case you need it more later

in your life? Call legal services to discuss your options. Remember, children do not have a 48-month time limit.

2. What Else Is Available?

When you are eligible for CalWORKs, you may also qualify for the following programs:

- **Medi-Cal** to pay for health care
- **CalFresh** (food stamps) in most cases
- **Immediate Need:** an advance of up to \$200 of your CalWORKs grant, which is provided 24 hours or the next business day from the date of the request, or your whole CalWORKs grant within 3 days if you have an eviction notice. You can only request Immediate Need during your initial application for CalWORKs
- **Homeless and Housing Assistance** including eviction prevention, temporary shelter, move-in costs, rent subsidy, and help with cost of moving (see pages 23 to 25 for several programs offered.)
- **Non-Recurring Special Needs:** You can get up to \$600 each time if you have to replace clothing, household items, and appliances because of a fire, disaster, theft or other event beyond your control. You can also get this money for shelter if your home is so damaged or unlivable you can't stay there, and you are not eligible for the Homeless Assistance program. You must have less than \$100 to get this money.
- **Special Needs:** You can get an extra \$9 to \$15 if you have special needs such as higher food costs because of a necessary special diet, or higher transportation or utility costs due to a medical condition. Breast-feeding mothers can add \$15 to their grant to help with their dietary needs. Tell your worker if you have these special needs.
- **Child Support:** You can get \$50 extra each month if the other parent pays at least \$50 of child support to the County's Department of Child Support Services on time. The Department should give you a list that shows when the other parent paid (an "accounting"). Check it to make sure you got \$50 extra cash aid for every month the other parent paid on time. To get an accounting call (866) 901-3212.

3. Money for Pregnant Women

If you are pregnant, aged 19 or over, and have no other children on CalWORKs, you may get a grant for one person after reaching the beginning of the second trimester of pregnancy plus an additional \$47 (Pregnancy Special Need.) You get this money from the time your pregnancy is verified until the baby is born. Here are some other rules for the \$47:

- Pregnant teens 18 or younger, who have graduated from high school or equivalent and with no other children can get cash aid from the date of application with proof of pregnancy, but must participate in WtW (Welfare to Work, or in the Cal Learn Program if they have not graduated from high school.)
- If there are no other children, the father cannot get CalWORKs until the child is born, but he can get General Relief for himself, if eligible (see pg 33).
- If you are undocumented, or receive SSI, and have no other children on CalWORKs, you must wait until the child is born to get benefits for the baby. Bring in proof of the baby's birth such as hospital records or birth certificate.

4. Diversion Payments

Instead of receiving monthly cash aid you can apply for a large amount of money called a "diversion payment" to help you get or keep a job. To get it, you must be apparently eligible for CalWORKs, have a job or immediate job opportunity, and have an unexpected one-time need. For example, you could pay for car repairs or insurance, work tools or clothing, rent or utilities, license fees, or childcare expenses. If you get a diversion payment you may also get Medi-Cal, Cal-Fresh and supportive services. (see page 20 "Services to Help You.")

The usual payment is up to the grant amount for your family size for three months or \$2,000, whichever is larger. For a "compelling need," you can get up to \$4,000 or the maximum grant amount for 6 months, whichever is greater. The diversion payment counts as months of cash aid against the 48 month life-time limit (amount of payment divided by monthly grant=months used up) After you get a diversion payment, you can still get cash aid if you need it. But if you reapply for CalWORKs within the time period that the Diversion covers, the DPSS must

recollect the payment by either counting the diversion months against your 48 month life time limit, or decreasing your monthly payment by 10%.

Diversion payments must be paid to you within 5 days after the application for a non-urgent need, or within 3 days in an emergency. Starting a new job the next day is an example of an emergency.

5. Foster Care (Someone Else's Children)

If you are caring for someone else's children, the child or children may qualify for Foster Care or Approved Relative Caregiver payments even if you are related to the children. Foster Care and Approved Relative Caregiver payments are higher than CalWORKs cash aid. (see page 27 Foster Care.) If a relative's children live with you but do not get Foster Care or Approved Relative Caregiver payments, you should be able to get cash aid for them.

6. Domestic Violence

If you are a victim of domestic violence, or suffering effects of past domestic violence tell the worker right away, as there are specially trained workers available to assist you with the problems you or your children may have. Also, you may be excused from GAIN or have other eligibility rules waived.

Let DPSS know if you need emergency or homeless assistance. DPSS staff must act quickly to help you.

7. Special Help for the Disabled

If you have a physical or mental disability that makes it hard for you to go through the regular application process, DPSS must help you. When you tell DPSS staff they will make arrangements to assist you. This might include: taking an application at your home, helping you fill out forms, or reading all forms to you. If you need assistance, you may request a Reasonable Modification by:

- verbal request to any employee at a DPSS office;
 - calling the ADA hotline at (844) 586-5550; OR
 - submitting a written request or ADA PUB 2, Request for Reasonable Modification to any DPSS employee.
- You can download the ADA PUB 2 form from the DPSS ADA website located at: dpss.lacounty.gov/wps/portal/dpss/main/programs-and-services/civilrights/ada and

mail it to:

DPSS ADA Title II Coordinator
12860 Crossroads Parkway South
City of Industry, CA 91746

Ask your worker for this help. If they won't give it to you, call Legal Services for help.

8. Photo ID

All applicants, regardless of citizenship or legal status for living in the United States (U.S.), must provide a photo ID, in person, at the time of the application or when an adult is added to the case.

9. Next Steps

Keep in touch with your DPSS eligibility worker and write down his or her name, phone number, and phone hours. If you are asked to mail additional papers to the DPSS, ask the worker for a stamped envelope addressed to him or her.

If you take in papers, get a receipt. Keep your own copy of all the paperwork. If you need help and your worker is not available, the duty worker or supervisor must help you. You can also call the Customer Service Center at (866) 613-3777.

Within 45 days of when you turn in your application, you must either receive your first payment, or a notice that you have been denied aid. If the DPSS denies your aid, they must send you a letter explaining the reason. Do not sign a "withdrawal" of your application unless you understand and agree with the written reason provided.

10. Electronic Benefits Transfer "EBT" Card

DPSS will give you an EBT "electronic benefits transfer card" (Golden State ADVANTAGE) to use at banks, ATM machines and stores. If you are also getting CalFresh (food stamps), those benefits are accessed using the same card.

For CalWORKs, if the last digit of your case number is 1 to 3, the money goes on your card the first day of the month; 4 to 7, the second day of the month; and 8 to 0, the third day of the month. You can now make unlimited withdrawals and balance inquiries with no vendor fees, but some ATMs may have a surcharge. Ask your worker for a list of banks and ATMs near you that will not charge you a fee or go to <http://ebtnearme.org> for a list of surcharge free ATMs near you. You can also go to www.ebt.ca.gov for locations of ATMs.

GAIN participants may choose to have their payments for transportation issued through their EBT card or through a mailed check.

Call (877) 328-9677 right away if the card is stolen, lost, or destroyed. You will not be charged for stolen aid after reporting the loss.

What Are The Requirements?

1. Reporting Every Six Months

Every six months you must report changes in income, property or the number of people in your household. You will also report once a year on a Semi-Annual Eligibility Income Report (SAR 7). It says "Eligibility Status Report" on the top of the form. Also once a year, you will fill out what is called a "redetermination", which is an annual renewal for CalWORKs. DPSS will mail you a SAR 7 report form. The form also asks you to report any changes you expect in the next six months.

You must turn in the SAR-7 even if there is no change to report. If you don't get the SAR-7 in the mail go to DPSS to get another form and fill it out.

The completed, signed form is due back to DPSS on the fifth day of the last month of the six-month period

There are some things that need to be reported to the county before your next income report is due. This is called "mandatory mid-period reporting." You must report these things within 10 days:

- Address changes
- fleeing felons
- parole or probation violations,
- and if your income goes over the "Income Reporting Threshold ("IRT")."

The IRT is the amount of income that would reduce your aid or make your household ineligible for aid. DPSS will give you a form telling you your IRT limit. DPSS counts the family's earned and unearned income to see if you are at this limit. For example a family of three (non-exempt) has an IRT of \$1,982.00 per month. The family doesn't have to report any change in income until the next report is due, unless it adds up to more than \$1,982.00 .

You can either drop your SAR-7 off at the DPSS office, and get a dated receipt to prove that you turned it in on time; or you can mail it in the postage-paid envelope. You can also safely submit your SAR 7

online through YourBenefitsNow! You can upload copies of pay stubs, bills, and receipts, and get a receipt right after you submit your report online.

If you mail in your SAR-7, be sure to attach copies of pay stubs, bills and receipts to prove your information. It is wise to keep a copy of every piece of paper you give to DPSS. If the SAR-7 you turn in is incomplete, DPSS treats it as if it was not turned in at all.

If you do not turn in a SAR-7 report by the eleventh day of the reporting month, you will get a notice that your cash aid will stop. DPSS must also try to phone you to let you know they don't have the SAR-7.

If you get a notice that you are being terminated (your aid stopped) for not filling out a SAR-7, call your worker, go to the DPSS office immediately or visit the Your Benefits Now website and fill out a new SAR-7 (or take in your receipt if you already submitted the SAR-7).

If you submit a complete SAR-7 within the month following the discontinuance, you will not have to reapply but your eligibility and benefits will be determined by the date you turn in a complete SAR-7 unless you had a good reason (good cause).

If you can show "good cause" your cash benefits will be restored back to the beginning of the month. Good cause for turning the SAR-7 in late includes:

- errors by DPSS,
- a physical or mental condition that prevented you from being on time,
- or not being able to provide all the necessary information.

If you haven't been able to work it out or haven't heard from your worker, be sure to file for a fair hearing before the date your check is supposed to stop. This way you will not lose your cash aid (see pg. 67).

When you first apply, the amount of cash aid you get depends on how much your other income is at that time. What you report on your application will be used to determine what you get the next few months until your first SAR-7 is turned in. If your income goes down, report it right away, so your cash aid will go up. You can do this by calling your worker. DPSS may ask you for proof that it has dropped.

You won't get aid if you're in jail or out of the state for 30 days, but you should still report it, or they will charge you with an overpayment.

2. Rules for Families in Which Only Children Get Money

In some CalWORKs families, the children are receiving money but the adults are not. These are called "child only cases." If this is the case, you don't have to complete any written mid-period/mid-year reports, such as the SAR 7, You will still have to fill a written redetermination once a year. You may still have to complete reports every six months for CalFresh (food stamps.)

The following are CalWORKs cases that are considered "child only" cases:

- All adults that have reached the CalWORKs 48-month time limit;
- The adult(s) is not eligible because of a fleeing felon status, or has been found by a court to be in violation of probation or parole;
- The adult(s) is not eligible for CalWORKs due to immigration status;
- The adult(s) is not eligible because of failure to provide a Social Security Number;
- The adult(s) is a CalWORKs non-needy caretaker relative (did not request CalWORKs assistance);
- The adult(s) is receiving Supplemental Security Income; or
- The adult(s) is CalWORKs sanctioned due to refusal to assign child/spousal support rights.

If there is no adult receiving money because he/she chooses not to participate in WtW requirements, the case is not a "child only" case. These families follow the same rules listed under "Reporting Every Six Months" on page 17.

There are some things that need to be reported to the county for child only cases within 10 days:

- When income exceeds the Income Reporting Threshold (IRT)
- Address changes
- Fleeing felon status
- Violation of conditions of parole
- Changes in family composition

3. Report All Your Income And Gifts

You should be careful to report all income you get or changes in your family. DPSS will check bank, employer, and tax records to check your income, and accepts tips of suspected "welfare fraud" from the public.

There are serious penalties for individuals who either are convicted of fraud in court

or found to have committed fraud at an administrative hearing. You may have to pay penalties and be disqualified from CalWORKs for six months, twelve months, or longer, depending on the seriousness of the fraud. You can also be arrested and face jail time.

4. Cooperate with Child Support Collection

Unless it could put you or your children in danger to do so, parents on cash aid must help ("cooperate with") the Child Support Agency ("CSA") to collect child support from any absent parent. You must provide information you have about the other parent such as name, an address or social security number, and/or place of employment.

The County keeps most of the child support it collects, up to the amount of the family's cash aid. You will get your CalWORKs grant plus an extra \$50 per month for every month the other parent pays on time. Every quarter the CSA should give you an accounting of the child support they collected. Call (866) 901-3212 to ask for this information. Parents will lose their share of cash aid if they refuse to sign over the child support to the county.

If you sign over your child support, but the Child Support Agency says you are not cooperating with them, your family's aid can be cut 25%.

Many people have good cause for not cooperating. Good cause includes:

- You don't know where the absent parent is, or have no other information about the other parent
- You are afraid of the absent parent, you or your children may be in danger, or you are a victim of domestic violence.
- Rape or incest has occurred
- You are planning to place the child for adoption.

If your worker at DPSS agrees that you have good cause, you will not have your cash aid cut. If you get a notice in writing that you are "not cooperating" and you think you have a good reason not to, and cannot resolve the issue by talking with your worker, ask for a fair hearing. (See Page 67 Hearings And Complaints.)

5. Get Immunizations ("Shots") For Your Children

When you apply for CalWORKs or at your annual redetermination, you must show proof that your children under age 6 have had their shots. You have 30 days from the approval of your Medi-Cal, if applying for CalWORKs and Medi-Cal; or 45 days from the approval of CalWORKs and already receiving Medi-Cal benefits. If you do not prove your children are immunized and do not have good cause (for example, lack of access, you are a victim of domestic abuse, or a sworn statement that immunization is against your religious or other beliefs), all cash aid to adults will be cut off until you provide the proof. You can call 211 to find locations providing free shots.

6. Children Age 16 to 19 Must Attend School or Participate in Welfare-to-Work

If your child is over 16 and not attending school (reported as "chronic truant" by the School Attendance Review Board), or is not participating in welfare to work activities without good cause, only that child's cash aid will be cut. The cash grant will be restored when proof is provided to DPSS that the child is attending school regularly or has good cause.

Work Requirements

As a CalWORKs recipient, you are required to participate in "Welfare-to-Work" (WtW) activities in order to stay on cash aid. Participation in WtW is mandatory for all CalWORKs participants unless you are exempt or have a "good cause" for non-participation.

- Exemptions and "good cause" require verification
- Exempt participants may volunteer to participate in WtW activities.

The WtW programs in Los Angeles County are called GAIN ("Greater Avenues for Independence") and REP (Refugee Employment Program). If you have been in the U.S. less than 5 years and have legal immigrant status as a refugee or granted asylum, you are assigned to the Refugee Employment Program ("REP").

The GAIN program is a work-first program that provides employment-related services to help you find employment, stay

employed, and move to higher paying jobs which lead to self-sufficiency and independence.

There is a WtW 24-Month Time Clock (within the CalWORKs 48-month time limit). The WtW 24-Month Time Clock gives you more flexibility in activity options and requires fewer participation hours for single-adult families.

During this 24 month period you can participate in several activities to keep getting cash aid including:

- subsidized or unsubsidized employment
- education and/or training
- mental health, substance abuse, and/or domestic abuse services.

Your county office will send you a notice before you reach the end of your WtW 24-Month Time Clock. They will also send you an appointment to review your WtW 24-Month Time Clock with you. After you use up all your months from your WtW 24-Month Time Clock, they will provide you with a shorter list of activities to choose from, and instructions on what you will need to do next in order to continue receiving the same level of cash aid. The shorter list may include employment, work experience, and community service. Vocational education and training may also be allowed for up to one year after your WTW 24-Month Time Clock ends.

The months on your WtW 24 Month Time Clock may not be months that come in a row, but months added up over all the time you are getting aid. Months in which the families meet the federal participation requirements do not count towards the WTW 24-Month Time Clock.

Once your WTW 24-Month Time Clock ends, if you do not meet your new participation requirements, your cash aid may be lowered and it may affect your supportive services.

Your WTW 24-Month Time Clock Stops When:

- You are in Appraisal, Job Search, Vocational Assessment, or in the process of developing a new WtW plan.
- You are meeting the required number of participation hours in certain activities.
- You are exempt from participating.
- You have a "good cause" reason for at least half the month.
- You are sanctioned.
- You are a past or current victim of domestic violence which is preventing you from working or attending your GAIN activities.

You do not need to participate in GAIN since the other parent in your Assistance Unit is meeting the GAIN participation requirements.

1. Weekly Participation Hours

Currently, the required hours of participation are as follows:

#of Adults in Family	Average Weekly Hours of Participation
Single-adult with a child under 6 years old.....	20
Single-adult with no children under 6 years old.....	30
Two-parent families (hours may be combined between both parents).....	35

2. Getting Excused from GAIN/REP ("Exempt" or "Good Cause")

You may be eligible to be exempt from GAIN or REP if you are:

- A youth under 16 years old
- A youth from 16 to 18 years old and in school full time
- 60 years old or older
- Disabled
- Aided non-parent relative caring for a child who is a dependent or ward of the court, receiving Kin-GAP benefits, or at risk of placement in foster care
- Caring for an ill or disabled household member
- Caring for a first child 12 months old and under (available one time) or any later child 6 months old and under
- Caring for a child under 2 years old (available one time)
- Pregnant, and your pregnancy prevents you from working or participating in GAIN or REP;
- DPSS decides that work or training is not the right thing to do based on the medical verification
- A full time volunteer in the Volunteers in Service to America (VISTA) program.

Any months exempted for the following reasons do not count against the CalWORKs 48-month time clock:

- Disabled due to a physical or mental reason for 30 days or more
- 60 years or older
- Taking care of an ill or disabled household member, if DPSS agrees that this prevents you from participating in GAIN/REP or working.

- An aided non-parent relative caring for a child who is a dependent, or a ward of the court, receiving Kin-GAP benefits, or at risk of being placed in foster care. DPSS must agree that this prevents you from participating in GAIN/REP or working.
- One time only, you can use the exemption of caring for a child under 2 years old.

If you do not qualify for an exemption, you may have good cause that excuses you from doing something GAIN asks you to do. The 48-month time limit is not stopped by good cause (see section below on domestic violence for exceptions).

Good cause includes:

- Not getting supportive services you need (such as child care and transportation) to work or go to a GAIN or REP activity
- Child sick at home from school
- No transportation (for example your car broke down)
- You are homeless

Domestic Violence Waiver:

DPSS can waive some of the CalWORKs rules for victims of domestic violence. For example they can stop the 48 month time clock, excuse you from going to GAIN, or stop child support collections. The domestic violence incident can be something that happened in the past or in the present.

Exempt people can volunteer and get help. You do not have to participate in GAIN or REP if you are excused or exempt. But you may volunteer to participate. As an exempt volunteer, you do not have to do the full 20 hours each week, but you are subject to other requirements of GAIN participants. You can do as many or as few hours as you are able. DPSS must also pay you for services, like child care and money for transportation, tools, and books.

► **3. Learning Disabilities**

All GAIN and REP participants must be offered a Learning Disability (LD) screening. You can say you do not want the LD screening, but if you change your mind, you can ask for LD screening and evaluation anytime.

If the evaluation shows you have a learning disability, your WtW plan must have activities that help you deal with your learning disability, such as tutoring or extra study time. DPSS must decide whether job search will be useful for you, or if your time limits should be extended.

If you have already been to assessment, went through GAIN or REP and failed to make satisfactory progress, you may have the clock stopped on your time limits and changes must be made in your plan with special help offered to you.

Services To Help You

In addition to cash aid you get from CalWORKs, if you participate in GAIN or REP, you can get help with transportation and work-related expenses both before and after you reach the CalWORKs 48-month Time Clock. If you are excused from participating in GAIN or REP but wish to volunteer or are currently attending school, you might be eligible to get work-related and transportation services.

Services you may be eligible for are:

- **Diapers:** CalWORKs recipients participating in welfare-to-work who need diapers for their infants and toddlers can get a \$30.00 per month diaper benefit for each child who is under 36 months of age effective January 1, 2020.
- **Child care** (see pg. 25)
- **Transportation:** includes bus fare, mileage payment, and payment for alternative methods of transportation such as shuttle, vanpool, carpool, MetroLink, and taxi.

How transportation funds are determined:

To find out the right mode of transportation, your GAIN/REP worker must determine the lowest cost to the county, while finding the best combination of transportation modes that will keep the round trip travel time less than two hours using public transportation. If it takes you more than two hours round trip by public transportation to travel from your home to your WtW activity, including walking time, then DPSS can pay you mileage. The current rate is 55¢ a mile for the first 500 miles per month, and 15¢ per mile for mileage over 500 miles per month. The mileage rate, however, can change from time to time. Parking expenses can be reimbursed when the parking expense is necessary to allow you to attend a WtW activity and/or employment.

Transportation for Children:

Transportation for children under 13 years of age is provided when it is necessary and will help you continue in your WtW activity, and/or obtain or retain employment even if you are not being aided but remain in the household.

A child over 13 years of age is eligible when:

- The parents are receiving specialized supportive services (mental health, domestic violence, substance use disorder)
- A child is not able to provide self-care.

Ancillary Supportive Services include help to pay for tools, books, supplies, fees, clothing, uniforms, car seat/booster, tattoo removal services, and other necessary costs specifically required to participate in an approved WtW activity or to accept a job or keep a job.

In addition, Ancillary Supportive Services are extended to participants who need reasonable accommodations due to a disability which limits their ability to participate in his/her approved WtW activity and/or employment.

Tuition is not considered ancillary expenses.

To request Ancillary/Work-Related Expenses you must provide written verification from your provider or employer. If written verification is not available, your worker can assist by contacting the provider/ employer, with your authorization, to obtain verification.

You must provide receipts within 10 days from the date the payment was issued.

Domestic Violence Counseling and Protection: Survivors of domestic violence can get special help through programs including emergency housing and safety planning, counseling, parenting classes, and legal services that provide help with restraining orders and divorces. You do not need a police report or other documents. Your sworn statement is enough proof. Everything you tell the DPSS eligibility worker or GAIN worker will be kept secret to the extent of the law.

Mental Health Services: You should receive a mental health screening during Appraisal.

Also, a DPSS worker can suggest to you that you go to a mental health evaluation if they think you have a mental health barrier to finding or keeping a job. You can also ask for a mental health evaluation anytime by calling your eligibility worker or GAIN worker.

After the evaluation, you can be referred to a mental health provider for treatment. The GAIN worker must develop your welfare-to-work plan based on what your treatment provider recommends.

Stand Alone Assessment: Stand Alone Assessment is for participants who, during their appraisal interview or after Job Club are:

- Employed full or part time
- In a Self Initiated Program (SIP) and need a second activity
- In need of a clinical assessment: or
- Post Employment Career Assessment for participants who are working 20/30/35 hours or more per week and request Post-Employment Services.

► **5. Your WtW Plan and Activities**

After the assessment you will meet with your Worker, to sign a WtW plan in which you agree to go to WtW activities. The plan must be based on the assessment of your needs and skills. Your plan can include:

- Counseling
- Education and training at adult schools or community colleges, Subsidized employment
- ESL, math or GED classes,
- or other work activities that will help you reach your employment goal.

All WtW participants are required to sign a WtW Plan, including those who are employed full-time.

► **6. Make Job Training Part of Your Welfare to Work Plan**

You can request that your Employment Plan includes any work experience or job skills training offered by DPSS or other private or public agencies. You can request the Transitional Subsidized Employment (TSE) program if you are interested in working. There are TSE services available even if you are homeless. In the TSE Program you are paid minimum wage to work at a government or non-profit agency or you could be placed to work at for-profit businesses, which might or might not pay more than minimum wage. DPSS, the community colleges, and adult schools may also offer special job training programs for people with limited English-speaking skills.

If earnings from the TSE Program cause your cash aid case to be stopped because you make too much money, you may be eligible to remain in the TSE program for the remainder of the activity to continue to earn wages even if your CalWORKs case is closed. You may also be eligible to continue to receive transportation and child care services. If you voluntarily request to close your CalWORKs case or you fail to provide information on your CalWORKs case as requested by your CalWORKs office, you

You have the right to refuse any mental health treatment, but if you do, you can't use mental health problems as a reason to not work or not participate in GAIN or REP.

Substance Use Disorder Services: You can ask for help with substance use disorder treatment at any time by calling your eligibility worker or GAIN worker. If you find it difficult to obtain or keep a job because of problems with alcohol or drugs, the DPSS worker can refer you to a substance use disorder clinical assessment. You may receive help through residential or day treatment: individual, group or family counseling; rehabilitation services: and health care information and referrals. You can continue getting these services as part of your Welfare-to-Work requirements while receiving cash aid.

You can go to a substance use disorder treatment program as the WtW activity. You have the right to refuse any substance use disorder treatment program as the WtW activity; however, if you do not go to a treatment program, you cannot use substance use disorder as a reason to not work or not participate in GAIN or REP.

Homeless Assistance, Moving Assistance, Rental Assistance, and Housing Relocation: see pages 23-25.

GAIN and REP Activities

► **1. Appraisal**

Soon after you apply for CalWORKs, you will receive an appointment letter to go to an Appraisal appointment. This will most likely take longer than one hour. The Online CalWORKs Appraisal Tool (OCAT) will also be conducted at this time if it has never been completed. You will meet with your GAIN or REP worker in a one-on-one meeting where you will talk to your worker about your work and educational history and what kind of services you need to get back to work. If you have problems due to mental health, substance abuse, or domestic violence, tell your worker at this time so that you can get services immediately.

Tell your worker if you are already enrolled in an education or training program. It might qualify as what they call a Self-Initiated Program. This will let you do

the education and training as your WtW activity instead of going through Job Club and the rest of the GAIN process.

► **2. Job Club & Job Search**

The first day of Job Club is called Orientation. You will get an overview of the GAIN Program and help in recognizing the skills you have that will help you get a job.

The first four weeks of GAIN are spent in Job Club and Job Search. Most people will participate in Job Search unless the welfare department determines that the first activity should be mental health, substance use disorder, domestic violence, or if for another reason you are exempt from Job Search. You are also exempt if you completed Job Club/Job Search in the last 12 months. You don't have to do job search if:

- It would interfere with a full time job or approved training you already have, or
- You are in the Cal-Learn program or
- Doing a job search would not help you (example-you need basic English or literacy training first)
- You are exempt but are requesting to participate as an exempt volunteer

► **3. Remedial Education (REM/ High School Diploma (HSD) or Equivalent**

If you don't have a high school diploma or equivalent and you wish to attain one, tell your worker so that you can be assigned to REM/HSD or equivalent as your first WtW activity. If REM/HSD or equivalent is assigned as your first activity, you don't have to complete a vocational assessment at this stage.

► **4. Assessment**

When unsubsidized employment is not found within the first three weeks of Job Club you will attend Vocational Assessment at mid-week of the fourth week. A Vocational Assessment will help identify your interests and strengths as well as determine if you have any barriers to finding and/or keeping employment. This information will help the Vocational Assessor develop a personalized Employment Plan.

Your personalized Employment Plan will identify the training, subsidized employment, on-the-job training, and other WtW activities needed to reach your employment goal.

will become ineligible to continue with the TSE Program and will be removed from the activity immediately.

7. If You Don't Agree With The Employment or your WtW Plan

If you and the assessor can't agree on the employment plan, you can request an independent "third party assessment" by another agency. DPSS must let you know about the third party assessor when you disagree and must help you with the request. You and DPSS will be bound by what this independent assessor decides. If you disagree with the result of the third party assessment, you may request a fair hearing (see pg.67).

If you still think your WtW plan will not work for you, you have these options:

- Ask for a change within the first three days from the date you signed the plan.
- If you have already begun an activity, you have 30 days to request a change to another activity. Your worker must grant your request if the other activity is consistent with your plan and likely to lead to employment. You can request this grace period only once.

8. Self-Initiated Programs (SIP) For Students

Self-Initiated Programs (SIP) is a college or vocational program you chose and began on your own before your first GAIN appointment (appraisal). If on the date of your GAIN appraisal you have already enrolled in either an undergraduate degree or certificate program for school or training, your education or training may count as your GAIN activity. If you already have a 4-year college degree, you cannot do a SIP unless it is for a teaching credential.

To continue in a SIP you must be making satisfactory progress toward a degree or certificate that leads to employment.

If your approved SIP is interrupted because of a good reason, such as illness, you can go back to that program later, as long as you were in good standing when you left. If your SIP activity weekly hours of participation are less than the number of hours (for example 20, 30 or 35) you are required to participate, you will have to participate in other welfare to work activities to get to the total required number of weekly participation hours. Study time counts toward hours of participation.

9. If You Are Working, What's Next?

Post-Employment Services (PES) is available to employed GAIN/REP participants with an open CalWORKs case during their entire CalWORKs 48-month eligibility if they are meeting the required hours of participation of 20/30/35 hours per week. PES is also available to CalWORKs terminated participants if employed for the minimum participation requirements (20/30/35 hours per week) for up to 3 months from their CalWORKs termination date.

PES will help you get information, resources, and tools you need to keep your job, improve career possibilities, and become financially independent while earning a good living before reaching your CalWORKs 48-month Time Limit.

Types of services offered through PES:

- Career assessment
- Job retention services
- Educational development
- Job skills training
- Earned Income Tax Credit (EITC) counseling
- Supportive services for the education/ training or WtW activities (childcare, transportation, and ancillary/work-related expenses)
- Rapid re-employment services
- Mental Health, Domestic Violence, Substance Use Disorder
- PES continued case management
- Referrals to homeless assistance programs and services

To continue receiving PES, you will be required to provide ongoing verification of employment to your case manager.

After the CalWORKs case ends: GAIN/ REP participants who remain employed (20/30/35 hours per week) can continue receiving PES for up to 3 months from the CalWORKs termination date. PES for former CalWORKs participants include supportive services for the educational/ training activity.

To get more information on PES, contact your GAIN or REP case manager as soon as you find employment. or you can call toll free (877) 292-4246.

Transitional CalFresh & Medi-Cal: You can continue to get Medi-Cal and CalFresh when you leave CalWORKs, without having to show that you are eligible for CalFresh, again. You can get these transitional benefits for up to 5 months after leaving CalWORKs. If your CalWORKs case did not close or was closed due to an ineligible cause, you cannot get the transitional CalFresh benefits.

Time Limit Rules

Most adults can only receive 48 months (4 years) of cash aid from CalWORKs for their whole life unless they qualify for a 48-month time clock extender. This does not have to be 48 months in a row. After the adult has been aided 48 months, their part of the grant is cut, but their children can still get aid.

You should apply for an exemption to "stop the clock" for any months which should not have been counted in your 48-month limit, which include the reasons listed below under "Clock Stoppers." Your request should be in writing, but can also be verbal. You can also contact your worker to find out if you qualify for a CalWORKs 48-Month Time Clock extender.

DPSS has to send you a written decision within 15 days of the request (unless something happens that is beyond the control of DPSS). If you disagree with the decision you may request a state fair hearing. DPSS is required to research your available case records before asking you to provide information or documentation which they already have in the files.

Clock Stoppers or Exemptions

- **Sanctioned or No Check**—Any month you do not get a CalWORKs cash aid payment for yourself including if you are sanctioned that month, or you are caring for an aided child but not aided yourself
- Any month that you have been granted an exemption from participation and the cash aid time limit based on **caring for a child under 2 years old** (This exemption is only available once).
- **Age 60 or over**—Any month the parent or caretaker relative is 60 years or older.
- **Disabled**—Any month you are sick, disabled, or injured for 30 days or more and it interferes with going to work or GAIN. You may be required to provide a doctor's report. This includes mental and physical illness.
- **Domestic Violence**—Any month you cannot participate in GAIN as a result of domestic abuse. You do not have to currently be in an abuse situation. You also qualify if you are suffering from the effects of past abuse and the effects limit your ability to go to GAIN or work. You only need to tell your worker ("self-declare") to qualify; no other proof, not even a police report, is required. Your time will be extended for as long as you continue to suffer from the effects of the abuse or are in danger of more violence.

- **Foster Child Placement or Risk of Placement**—Any month you are a non-parent relative taking care of a child who is a dependent ward of the court or "at risk of foster care placement" and that responsibility interfered with working or participation in GAIN activities. This can exempt, for example, a grandparent under age 60 who could not both be regularly employed and care for the child.

- **Caring For a Sick Family Member**—Any month you are caring for an ill or disabled person living in the home and that caretaking interfered with regular employment or participation in GAIN activities.

- **Child Support Repaid**—Any month that your grant is fully repaid by child support collected by the County does not count against you. Ask the County Child Support Division (866) 901-3212 to provide you with an accounting of the amount of child support they have collected on your behalf during the 48-month period.

- **Teen Parent**—Any month you are a teen parent or pregnant, under age 19, do not yet have a GED or high school diploma, and either participate in or are excused from Cal-Learn or another teen parent program approved by the DPSS. You can't use Cal Learn as a clock-stopper after you get the GED or diploma.

- **Native American**—You are a Native American who lives in "Indian Country," or on a reservation if 50% or more of the adults there are unemployed.

What Are The Penalties If I Don't Follow the Rules?

If you don't follow the GAIN or REP requirements and don't have a good reason ("good cause,") DPSS will cut your cash aid. Your children's cash aid will not be cut. In some cases both parents can have their cash aid cut. DPSS can cut your part of the CalWORKs grant if they can show that you have:

- Failed or refused to participate in your assigned activity
- Failed to make good progress in your assigned activity
- Failed or refused to accept a job
- Failed or refused to keep a job
- Failed to keep the same amount of earnings

DPSS must try to contact you and give you a chance to comply. If you fail to comply, DPSS will send you a "Notice of Action" no sooner than 30 days before the cut in aid will take place. They will give you an appointment within 20 days to discuss the problem with your worker.

It is very important for you to go to this meeting or call your worker to explain your situation. You also have the right to ask for a fair hearing if you can't work it out with your worker.

Your part of the grant will be cut until DPSS agrees that you are complying with the rules. Your cash aid cannot be cut if you have good cause for refusing to comply.

"Good cause" includes:

- You are homeless
- You are a victim of domestic violence
- You were ill, or caring for a sick member of the family
- Your mental illness prevented you from doing what was asked of you
- You need child care for a child 12 years or younger and none is available
- Transportation is not available to get to your job or GAIN activity
- There was discrimination at the job or training offered in terms of age, sex, race, religion, national origin, or physical or mental disability
- The job or job offer exceeded the daily or weekly hours of work customary for that job
- You can only get to the activity by walking and you have to walk more than two miles round trip, not counting the distance needed to take children to school or child care
- The job or activity violates health and safety standards or does not provide worker's compensation
- Accepting the job or work activity would interrupt an approved job or training program that you have in progress
- The job or community service would result in regular employees being fired, laid off, or having their hours or pay cut.
- Any other good reason.

During a sanction you continue to get childcare for the hours that you work. Your Medi-Cal must also continue.

Teen Parents

If you are a teen under 18 who is pregnant or who already has a child, and has never been married, in order to qualify for CalWORKs you must live with your own parent or parents, a guardian, another adult relative, or in an adult-supervised arrangement.

There are exceptions, if:

- You have no living parent or guardian, or their whereabouts are unknown
- Your parents will not allow you to live with them,
- You lived apart from your parents or legal guardian for at least 12 months before your youngest dependent child was born, or before you applied for CalWORKs
- You are legally emancipated
- You believe your child's or your physical or emotional health or safety would be in danger if you lived with these adults. In this situation DPSS should refer your case to the Minor Parent Program of the Department of Children and Family Services (DCFS). A DCFS social worker will visit your current home and decide if it is appropriate for you and your child.

If you live at home, your parents' income will be counted against you and your child when you apply.

Housing Assistance

If your family is homeless, or has received a notice to pay rent or quit, the DPSS can give you money for temporary shelter and to help with move-in costs to a permanent home or to avoid being evicted. The money is in addition to your CalWORKs cash aid and does not have to be paid back. To apply for Homeless Assistance (HA) you must :

- be homeless or have received a notice to pay rent or quit
- be eligible for CalWORKs
- not have more than \$100
- be looking for permanent housing

You are "homeless" if you have no regular, permanent place to live for any reason. You do not have to stay in a shelter to prove that you are homeless. You may be asked to prove that you are homeless, but money cannot be denied or delayed if you do not have proof. It is against the law for any government agency to take children away from parents for being homeless unless there is evidence of abuse or neglect. Homelessness by itself is not child abuse or neglect.

You can receive this aid once every 12 months if you qualify. However, a family can get help more than once in the same 12-month period if their need for assistance again is due to :

- Domestic violence by a spouse, partner, or roommate
- A physical or mental illness (but not including drug addiction or alcoholism) and you have a written doctor's note.
- Your home is uninhabitable (for example, because of a fire) or
- A State or Federally declared natural disaster

► 1. Temporary HA (Homeless Assistance)

You can get money for up to 16 consecutive days to stay at a commercial establishment such as a hotel, motel, or paid shelter. You cannot use this money to pay to stay with a friend. You will get \$85 to \$145 per day to pay for temporary shelter, depending on your family size. If you find some a place for less money than they give you, you can keep the extra money.

You must show receipts to prove that you have used the money given to you to pay for temporary shelter. If you cannot show receipts, you can still get Temporary HA benefits but it will be paid directly to the hotel, motel, or paid shelter. You will also have to fill out a form showing that you have looked for a permanent place to live for each day that you received Temporary HA benefits for shelter.

If eligible, DPSS should help you the same day you apply by giving you Temporary HA benefits the same day.

You should ask for Temporary HA benefits for as many nights as you need shelter, but your request has to be made during the 16-day period that begins the day you apply and receive your first payment of Temporary HA benefits. For example, you cannot get a week now and another week two months from now. If you did not receive all 16 days of Temporary HA benefits you requested, you may request a hearing to have your Temporary HA application reviewed.

Even if you decide not to go to the shelter, you should ask for money for as many nights as you need, but it has to be during a single 16-day period. (For example, you cannot get a week now and another week two months from now.) If you needed but did not receive all 16 days of temporary homeless assistance, request a hearing to collect it retroactively. After the 16 days are over, make sure to provide your worker with a mailing address (even if only temporary) within 10 days.

Additional 14 Days: If you are homeless and have used up the 16 consecutive days of Temporary HA, you may be able to get an additional 14 days of temporary shelter payments if you are receiving CalWORKs and are working full-time or part-time and participating in GAIN or unemployed and participating in GAIN. Depending on your family size, you will get \$85 to \$145 per day to pay for temporary shelter. To get this money, you must not have more than \$100 in liquid resources and obtain temporary

shelter from a commercial establishment such as a hotel, motel, or paid shelter. You must also provide receipts to continue to receive this money.

Expanded Temporary HA: CalWORKs applicants who provide a sworn statement of past or present domestic abuse and are fleeing their abuser are deemed homeless and can receive a lump sum payment equal to 16 days of Temporary HA benefits (regardless of their abuser's income or assets) on the first day of their application and are granted Good Cause for not looking for permanent housing. If the CalWORKs application has not been approved or denied, these applicants can receive an additional lump sum payment for 16 additional days immediately following the initial 16-day period, equaling 32 days of Temporary HA payments. Expanded Temporary HA benefits are allowed only once-in-a-lifetime and are in addition to regular HA (temporary and/or permanent) benefits and do not count against the once-a-year HA exception.

► 2. Permanent HA

You can also get money to cover the actual cost of security and utility deposits including last month's rent and any legal payment, fee, deposit, or charge that is required by a landlord as a condition of assuming occupancy, and gas, electricity, and water deposits. Permanent HA does not pay for the first month's rent or past due utility bills. The Permanent HA payment amount for security deposits cannot exceed two times your total monthly rent amount (before subsidies).

You must find a place where your share of the monthly rent is not more than 80% of your Total Monthly Household Income. If you plan to share your housing, the landlord must agree to the rent-share plan and your name must be on the lease.

If you are a CalWORKs participant now, and have applied for Permanent HA benefits, you must be given Permanent HA benefits within one working day of showing that you have found a place and provided all the necessary documents to get the assistance. If you are not yet receiving CalWORKs benefits, you must first bring in the documents you need to prove you are eligible for CalWORKs, and proof that you have found a place (like a note from the landlord or a proposed rental agreement).

When you receive Permanent HA benefits, make sure to pay your landlord and/or utility companies and get receipts to give to your

worker within 30 days. If you later move, the landlord and/or the utility companies should return the security deposits to you, not to the County, to use at your next residence.

You can also get Permanent (HA) Arrearages to receive up to 2 months of back due rent to prevent an eviction if you have received a "pay rent or quit" notice due to a financial hardship (not for any other lease or contract violation). Your rent must be within 80% of your Total Monthly Household Income. Call Legal Aid for details (pg. 69)

► 3. Emergency Assistance to Prevent Eviction (EAPE) Program

If you are at risk of becoming homeless because you didn't pay the rent due to a financial hardship (not for any other lease or contract violation), EAPE can give you money to pay up to two months of back due rent and/or utilities so that you can continue living in your home. To be eligible for EAPE, you must:

- Be approved for CalWORKs,
- Have exhausted or not be eligible to the Permanent HA Arrearages (unless you need to access EAPE in conjunction with Permanent HA Arrearages to pay for past due utilities only);
- Be working full-time or part-time and participating in GAIN, or CalWORKs or Post-Time Limited Services, or unemployed and participating in GAIN or Post-Time Limited Service
- Be at-risk of homelessness and/or at risk of having your utilities turned off due to nonpayment of rent and/or utilities, as a result of a financial hardship;
- Provide proof of the financial hardship
- Provide proof of back due rent and/or utilities;
- Provide a rental/lease agreement; and
- Agree to pay part of the past due rent and/or utilities.

Once the worker verifies you are eligible, you can get up to \$3,000 to pay up to two months of past due rent and/or utilities. EAPE does not pay for the present month rent and utilities, unless you have received a "pay rent or quit" or an eviction notice for the current month's rent. EAPE benefits are once-in-a-lifetime with no exceptions.

► 4. Moving Assistance (MA)

MA can give you money to secure a permanent place to live. To qualify, you must:

- be approved for CalWORKs;
- have exhausted or not be eligible to the HA Program (unless you need to access the MA Program in conjunction with the Permanent HA payment);
- be Working full-time or part-time and participating in GAIN or Post-Time Limited Services, or unemployed and participating in GAIN or Post-Time Limited Services;
- be homeless, at risk of homelessness or a first-time recipient of a Section 8 voucher;
- secure permanent housing where your share of the rent amount does not exceed 80 % of your Total Monthly Household Income; and
- provide evidence of property availability and cost.

Once the worker verifies you are eligible, you can get up to \$2,500 for move-in costs like security deposits (e.g. last month's rent cleaning fees, key deposits, etc.), utility deposits, truck rental, and up to \$405 for the purchase of a stove and/or refrigerator if the new place doesn't have one. MA is once-in-a-lifetime with exceptions. .

► 5. 4-Month Rental Assistance (RA) Program

If you just found a permanent place to live with the help of Homeless Assistance or EAPE, RA can help you get up to \$500 per month (based on family size) for four consecutive months to help pay your rent. RA is for families who have secured unsubsidized permanent housing. If you are participating in the GAIN Family Stabilization Program, you may receive up to eight consecutive months of RA benefits. The payments are made out to the landlord. To be eligible, you must meet these rules:

- Be CalWORKs approved;
- Be working full-time or part-time and participating in GAIN or Post-Time Limited Services or unemployed and participating in GAIN or Post-Time Limited Services;
- Have received the Permanent HA and/or MA Program payment to secure permanent housing after being homeless or secured non-subsidized permanent housing on your own (but meet the Permanent HA and/or MA rules) or have received the Permanent HA arrearages or EAPE payment to prevent eviction; and
- Have signed a rental/lease agreement to

secure non-subsidized permanent housing within the past 30 calendar days of the request for RA (you must provide a rental/lease agreement); and

- Agree to receive RA payments; and
 - Provide a rent receipt for each month an RA payment is issued before another RA payment is issued.
- RA is once-in-a-lifetime without exceptions. To reach the once-in-a-lifetime limit, you can receive RA one time (for up to four consecutive months) when you secure non-subsidized permanent housing through Permanent HA or MA (or on your own but you met the eligibility requirements for Permanent HA or MA) and one time (for up to four consecutive months) when you receive Permanent HA Arrearages or EAPE for back due rent.

► 6. Coordinated Entry System for Families (CESF)

If you are not eligible or have exhausted any of the DPSS homeless programs and are homeless or at risk of becoming homeless, a DPSS Homeless Case Manager can refer you to the CESF to receive rapid rehousing and prevention services to address your needs.

Child Care and Education

► 1. Preschool and Afterschool Programs

The L.A. County Office of Education offers numerous programs for all family members, including:

- Literacy programs for students and parents
- Computer training and job readiness for parents
- Early Advantage programs for children under age 3
- Head Start and State Preschool

Call your local school district or call (562)922-6111 County-wide to find out about preschool programs and family literacy programs.

After School Enrichment programs provide supervised afterschool fun, growth, snacks, and learning for children from first through sixth grade. Children must be attending the school where the program is offered. For information about programs in the Los Angeles Unified School District (LAUSD), call (213) 745-1900. Call your local district for information on programs in other cities.

► 2. Homeless Children's Rights

Homeless children:

- Do not need a permanent address to enroll in school
- May remain at the same school they attended before becoming homeless, or enroll at the school serving the place they are living temporarily
- Cannot be denied enrollment just because any documents are not immediately available
- Have the right to participate in school meals, special education, Title I and any other federal, state or local programs for which they are eligible
- Must be provided transportation if other children get transportation
- Cannot be isolated or separated from the main school environment just because they are homeless.

These special rights under federal McKinney-Vento law apply to all children and teens without a fixed, regular adequate residence including if you are staying with friends or relatives because you

lost your housing, you are waiting for foster placement, or you are living in any kind of shelter, car, motel, campground, abandoned building, garage, or similar place.

CalWORKs Child Care

CalWORKs may reimburse for child care for children who are 10 years old or younger, up to age 12 if the county has funds available or if other exceptions are met, and up to age 18 if the child is disabled and needs special care. You may be eligible for child care even if you are under a CalWORKs sanction, and for up to two years after you leave CalWORKs.

If you are low income, working, but do not get CalWORKs cash aid, you may still qualify for subsidized child care: for information call (800) 543-7793.

If you or someone you know would like to provide child care, call Community Care Licensing Division (323) 981-3350 or a Child Care Agency for licensing, training and other information.

▶ 1. How Do I Get Child Care?

To determine whether you may be eligible for subsidized child care, you will have to talk to a child care “agency.” These agencies are called Resource and Referral (R&R) or Alternative Payment Programs (APP). They will:

- Help any family find child care
- Provide information to parents on how to choose quality child care
- Issue child care reimbursements to child care providers

You can get information about how to request CalWORKs child care over the phone (877) 244-5399 or in person. You can request child care at DPSS, or at an R&R or APP agency. Your child care request will be approved or denied within 4 business days of the APP agency receiving and verifying required documents, including a completed Stage 1 Child Care Services Application which provides the agency with all the necessary information about you, your child care needs, and your provider

Call the child care hotline (877) 244-5399 or Legal Aid (800) 399-4529 for help if it takes a long time to get your child care approved. You will get written notice telling you whether you and your provider have been approved or denied. If you disagree with the decision you can ask for a fair hearing.

▶ 2. How Reimbursements to Child Care Providers are Made

A Provider Payment Request will be mailed each month to your child care provider. Both you and the child care provider must sign the request and mail it to the child care agency at the address on the form. Reimbursements are then made directly to your child care provider. If the reimbursement is missing or incorrect, you or your provider may contact the agency for assistance.

▶ 3. Choosing Quality Child Care

It is your right as a parent to choose the child care you think is best for your child. The APP agency will give you referrals and information on what to look for when choosing a provider. If you decide the referrals are not good choices, you may ask for more referrals. Choose the child care that's best for you:

- Licensed child care centers, Preschools, or Family child care homes.

- License-exempt child care can be provided by family, friends, or neighbors. If you use license-exempt care, you will need to sign a statement that your provider meets minimal health and safety requirements. The child care agency will not reimburse for child care provided to you by someone on your CalWORKs case.
- If the provider is caring for children from more than one family (besides their own) they may need a license.

Most providers will have to be fingerprinted and go through a criminal background check. Your relatives may not have to go through this process.

▶ 4. CalWORKs Child Care Stages

There are three “Stages” of child care. You should not have any problems as you move from one “Stage” to another. You may be eligible for child care while you are participating in an approved welfare-to- work activity (work, school, training, appointments with GAIN, or specialized supportive services like domestic violence counseling, mental health or substance use disorder treatment appointments).

Stage One

Effective October 1, 2019, DPSS will authorize immediate and continuous Stage One child care for CalWORKs recipients the same day CalWORKs cash aid is approved.

If you are getting CalWORKs you will get Stage One care for 12 months or until you are transferred to Stage Two . Child care will be authorized full-time (meaning 30 or more hours per week) unless you specifically ask for part- time care (less than 30 hours per week.) Once child care is authorized, the county should connect you to a child care education specialist.

The following exceptions apply:

- Families with no aided adults including adults receiving SSI; ineligible noncitizen adults; and non-needy caretaker relatives
- Timed out adult(s) (Note: timed out adults who have received cash aid within the past 24 months are to be referred to Stage Two)
- At application, newly approved recipients who are determined to have a WtW (Welfare to Work) exemption and who do not indicate a desire to volunteer for any program activity. Exempt WTW participants who intend to participate in program activities in the future and sign a WtW plan will be eligible for immediate and continuous child care.

If you are getting Stage One Child Care, you do not need to recertify child care eligibility more frequently than once every 12 months unless:

- you inform the County that your child care needs have increased;
- you have a new child that needs care;
- you have changed child care providers;
- the child you were getting child care for becomes ineligible.

If you are sanctioned after being authorized for 12 months of immediate and continuous child care, Stage One child care shall continue until the 12-month period has concluded or until you are transferred to Stage Two.

Call the Child Care hotline at (877) 244-5399 for more information.

Stage Two

After both your welfare- to- work activity and child care are stable, the child care agency will move you to Stage Two. You may stay in Stage Two while you are receiving CalWORKs and are in an approved welfare- to- work activity. You may be eligible for Stage Two Child Care for up to 24 months after you have been terminated from CalWORKs cash aid.

Stage Three

“Stage Three” Child Care is subject to budget cuts in Sacramento and applicants may be placed on waiting lists. Stage Three Child Care is available for low income working parents who do not receive CalWORKs. You may qualify for Stage Three Child Care if your income is below the levels in the following chart:

Family Size	Monthly Income Limit
1 or 2	\$5,343
3	\$5,802
4	\$6,719
5	\$7,794
6	\$8,869
7	\$9,070
8 or more	\$9,272

You may still qualify for low cost child care if you're over the income limit. Call one of the agencies listed on the next page for details.

What Are My Rights?

▶ 1. Lack of Child Care

You can be temporarily excused from participating in work requirements of CalWORKs if child care is not reasonably available. Your case manager will evaluate each case individually and periodically. Child care is not reasonably available if:

- You are not satisfied with the child care
- There is no child care close enough
- You have no transportation to the child care
- There are no providers operating during the hours you need child care
- The provider’s license is under investigation
- The provider cannot commit to providing care for your child
- The child care is not appropriate for your child’s needs.

▶ 2. Complaints about Providers

You should complain about your child care if there are bad conditions, or you suspect abuse or mistreatment. You can complain at the following places:

- The DPSS child care coordinator
- The R&R or APP Agency
- Child Care Hotline (877) 244-5399, Monday through Friday, 8 am to 5 pm

- Community Care Licensing (310) 337-4333 or (323) 981-3350
- Legal Aid (see p. 69 for list).

▶ 3. Brokers

If you are requesting child care, you do not need to pay anyone to help you with your request (these people are often called “brokers”). The child care agency must provide you with a worker who speaks your language to help you with this process. You can also get free help from community organizations

If you use a broker, be very careful about signing a “representative payee” form, which gives the broker direct control of your child care payments. If you have any problems with brokers, complain to the agencies listed in the left column of this page under "Complaints About Providers."

▶ 4. Hearings

You have a right to a fair hearing if you disagree with decisions made by DPSS or the child care agency. You can ask for a hearing by following the instructions on the back of any child care “Notice of Action”. You should file for a hearing within 14 days or before the action/termination happens.

Help Finding Child Care

Child Care Resource Center (818) 717-1000 San Fernando Valley & Antelope Valley
Connections for Children (310) 452-3325 Santa Monica, Beach Cities, Culver City
Crystal Stairs, Inc. (888) 543-7247 South Los Angeles, Inglewood, Hawthorne, Gardena, Watts, Long Beach, San Pedro, Bellflower, Cerritos, Norwalk
Mexican-American Opportunity Foundation (323) 890-9600 East L.A., Monterey Park, Bell, Santa Fe Springs, Montebello, Boyle Heights
Options for Learning (626) 856-5900 South San Gabriel Valley (Baldwin Park, El Monte, Whittier), Pasadena, Monrovia, La Cañada
Pathways (213) 427-2700 Hollywood, Downtown, Silver Lake
Pomona USD Development Program (800) 822-5777 or (909) 397-4740 Pomona Area
The below Alternative Payment Program Agencies do not offer Resource and Referral Services:
City of Norwalk (562) 462-1713
Drew Child Development Corporation
CalWORKs (310) 609-3885 Gardena
International Institute of Los Angeles (323) 224-3800- Boyle Heights
For general child care information, you may contact the California Child Care Resource and Referral (R&R) Network at (800) 543-7793 or visit the R&R Network website at www.rrnetwork.org

Foster Care

Children who are abused or neglected, or whose families are unable or unwilling to care for them, may become the responsibility of the Department of Children and Family Services (DCFS) in Los Angeles County. Report child abuse at (800) 540-4000 /TDD (800) 272-6699.

How Are Children Placed in Foster Care?

DCFS may file a petition with the Dependency Court to have the child removed from the parent(s)' custody and placed with a relative or in a licensed foster home. If the child was already taken from the parents, the petition must be filed within 48 hours. The court will usually approve or deny the petition the same day it is filed. If approved, the DCFS worker must immediately prepare an application for foster care benefits. Ask the worker if this was done.

Is There Help for Caregivers?

If you are caring for a child in your home who is not related to you, and was placed with you by DCFS, the child may be eligible for foster care benefits. You must either 1) Be the child’s legal guardian or

2) Have a state licensed foster home.

If you are caring for a related child (grandchild, cousin, niece, etc.) you may be eligible for either federal foster care “Youakim” or state foster care “Approved Relative Caregiver (ARC)” benefits. For both Youakim or ARC benefits, your home must be licensed by the state under the Resource Family Approval Program. Both Youakim and ARC benefits include specialized care rates.

▶ 1. What are the Benefits?

Foster care benefits are only for the child (not the adults). The child also gets one clothing allowance when placed and one yearly while in school.

The amount children receive is called a "Level of Care" based on how much help

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the child needs for their age, and how much support the family can provide.

Level of Care	Basic Monthly Cash
1	\$923
2	\$1027
3	\$1131
4	\$1235

In Los Angeles County, there is a higher “specialized rate” for children with severe medical and/or psychological needs. If you think your foster child qualifies for this, ask the social worker to arrange an evaluation. If the child uses services from the Regional Center, they should receive the “Dual Agency Rate” automatically.

Children in foster care are eligible for Medi-Cal. If the child is living with a relative, but is not eligible for foster care benefits, the child should be eligible for CalWORKs without considering your income.

If you are related to the foster child, and low-income, you may be able to get CalWORKs and Medi-Cal for yourself. You may also be eligible for CalFresh, depending on your income. If you apply for CalFresh, you get to choose whether or not you want to include the foster child in your household. The foster child cannot receive CalFresh unless they are included in your household. Ask your worker to explain other services available to foster children and their caregivers.

County foster care: L.A. County also has its own foster care program, primarily for undocumented children who are dependents of the court. They may be placed with relatives.

2. What Are My Rights?

Call DCFS's Foster Care and Adoptions Assistance Hotline at (800) 697-4444 if you have questions or problems with foster care eligibility or payment, to report a change of address, or for general questions.

If you think you should be getting any of these benefits and are not, you can ask for a state hearing, even if you did not get a notice denying benefits. Call Legal Aid Foundation of Los Angeles, at (800) 399-4529, or The Alliance for Children's Rights at (213) 368-6010 for help.

As a foster parent, you can go to all court hearings involving your foster child, but you cannot speak unless the judge says

you can. Every child in dependency has an attorney. You can call the attorney with any questions or concerns about the child's needs. You can ask the worker or the attorney to let you know when a court hearing is scheduled.

If you have reason to believe a child related to you is in the Foster Care system, and you are willing to provide a home for that child, call the Child Abuse Hotline and give your name and information. You may or may not be contacted.

What Are Other Options?

1. Legal Guardianship

If you are an unrelated legal guardian, you may get State Foster Care benefits. The child does not have to be a dependent of the court. As soon as you get your temporary guardianship papers, call DCFS's hotline at (800) 540-4000 and ask for a “Permanency Planning Worker.” Note the date and time you called and the name of the person you spoke to. A worker should visit your home within 5 days. Have a copy of your guardianship papers to give the worker. Benefits begin as of the date of your call - at the same rate as federal foster care.

2. Kin-GAP

To get Kin-GAP, the relative must become the child's legal guardian through the Dependency Court. The Dependency Court case is then closed and DCFS is no longer involved. The child must have lived with a relative for at least 6 consecutive months to be eligible for Kin-Gap. The relative can choose to go into Kin-GAP or not. Kin-GAP pays the same rate the child received in foster care, including specialized care rates and clothing allowances. The child did not have to receive any benefits to be eligible to receive Kin-GAP benefits. If DCFS recommends that you become the legal guardian, ask how this will affect the child's benefits.

3. Adoption Assistance

The Adoption Assistance Program provides benefits to help families adopt children who are less likely to be adopted without this assistance, like sibling groups, children with disabilities, mixed backgrounds, or older children. The benefits can be up to the foster care amount, including higher “specialized rates”. Benefits must be renegotiated at least every two years. You

may also get help with the costs of the adoption process. The adoptive family becomes legally responsible for the child's support. If you have problems with the Adoption Assistance Program, you can contact Public Counsel's Children's Rights Project at (213) 385-2977 ext. 500.

4. Long Term Foster Care

If you are a relative and do not wish to adopt the child, or become the child's legal guardian, you cannot be required to do so, and DCFS should not threaten to remove the child from you if you choose not to adopt. The child's permanent plan can be long-term foster care with you, but you will need to pursue this with DCFS and the Dependency Court.

Is There Help for Foster Youth Turning 18?

If you are a foster youth who is turning 18, or recently turned 18, you may be eligible for extended foster care. Extended foster care is optional. If you choose to stay in extended foster care, you will have to agree to live in an approved home and meet with a social worker every month. If you are eligible for extended foster care when you turn 18, but choose to close your case, you may re-enter foster care any time before you turn 21. For more information about extended foster care: visit: www.childsworld.ca.gov or call: (877) 846-1602..

If you are in the foster care system now, or were in the system between your 16th and 19th birthdays, there are several housing options available to you. Even if you were in the juvenile probation system, but were placed by the court somewhere other than with your parents between the ages of 16 or 19 – you might be able to get housing at least for a while. The system is complicated but you can call these numbers for help and advice:

Youth Development Services

(877) 694-5741 or (877) MY ILP 411
www.ilponline.org

The Alliance for Children's Rights

(213) 368-6010 kids-alliance.org
“Know Before You Go” mobile app that Search the app store on your phone for “Know Before You Go”.

- Public Counsel "My Life My Rights" website: <http://www.mylifemyrights.org>

Housing options including the "Transitional Housing Program" and "Transitional Housing Program Plus" may be available to you if:

- You are 16 or 17 and still in care

- You are no longer in foster care or probation, but you lived in a foster home, group home or with a relative sometime between your 16th and 19th birthday)
- You aged out of foster care or probation systems after your 18th birthday,

All of these options come with conditions. Call the Alliance for Children's Rights at (213) 368-6010 or Department of Children and Family Services (213) 351-0100.

Social Security, SSI & CAPI

Social Security is a federal insurance program which provides benefits for eligible workers and their families regardless of income. Social Security covers both employees and the self-employed, if the worker has earned enough quarters of credit. A quarter is credited to your account for each \$1410 earned in 2020. This amount changes every year. You cannot earn more than 4 quarters in a year.

Social Security provides four main kinds of benefits: retirement, disability, survivor, and health (called Medicare). (see page 57 Medicare for description of who qualifies for Medicare). There are no resource limits to these programs.

1. Retirement Benefits

Monthly retirement payments are made to workers and their eligible dependents. The amount you get depends on how much money you have earned, how many years you worked in a job covered by Social Security, and whether or not you were full retirement age when you began receiving payments. Covered workers pay for Social Security (FICA) by being taxed on the money they earn, and employers must match this amount.

The age at which you can get full retirement benefits depends on what year you were born. If you were born after 1960, the full retirement age is 67. If you were born before that, the age ranges from 65-67. You can contact Social Security to find out your exact retirement age. You can retire before your full retirement age, however the amount of money you receive each month will be permanently reduced. Early retirement benefits are also reduced for earned income above certain annual limits, until full retirement age is reached. You can find out how much your benefits will be reduced on the social security website www.ssa.gov under “early or late

retirement”. Ask your Social Security office for more details. You must be at least 62 to even get reduced retirement benefits.

Once you have reached full retirement age, you can earn money while receiving retirement benefits. However, if you are still able to work, you may want to consider delaying your retirement. You may be able to get delayed retirement credits, which increase the monthly amount you receive. Contact your local SSA office for more information about this. Present law prevents Social Security benefits going to any non-citizen who is not “lawfully present” in the U.S. (see page 64 Guide for Non-Citizens).

2. Survivor Benefits

When a covered worker dies, monthly payments are made to eligible family members who apply for benefits including:

- A spouse over age 60 or disabled and over age 50 or caring for the worker's child who is under 16 years old or disabled.
- A divorced spouse of the deceased worker can get the survivor's benefits if the marriage lasted at least 10 years, the ex spouse is unmarried, or remarried after age 60 (age 50 if disabled) and they are entitled to more benefits on their dead ex-spouses' account than on their own account
- A child under age 18, or age 19 if s/he is still in high school;
- An adult child who became disabled before age 22, never married, and has not worked what is considered “substantial gainful employment;”
- A parent of the worker over age 62 if s/he was at least 50% dependent on the worker's support when the worker was alive.

If members of any of the above groups were receiving benefits on the worker's record when the wage earner/worker

started receiving retirement benefits, those benefits will increase when the worker dies. For more information about Social Security Survivor's benefits, go to <https://www.ssa.gov/planners/survivors/ifyou.html>

3. Disability Benefits

Monthly Social Security Disability Insurance (SSDI) payments are made to you and to eligible family members, including a spouse, unmarried ex-spouse (if they meet marriage duration requirement), minor child, or adult disabled child. To qualify, you must be a covered employee who is unable to work (engage in substantial gainful employment) because of severe physical or mental medically determinable illness or impairment that has lasted or is expected to last at least 12 months or to end in death. Requirements for eligible family members to receive benefits under SSDI are the same as for Retirement benefits.

The number of credits needed to qualify for SSDI depends on your age and how recently you worked. Generally an applicant must have worked 40 quarters with at least 20 of them (5 years of quarters or work credits) earned in the 10 years immediately before the date the disability began. Different rules apply for the blind. Those under age 24 and those under 31 have reduced earning requirements, with those between age 31 and 61 having progressively increasing earning requirements in order to qualify for disability benefits. See Social Security website under the “Number of Credits Needed for Disability Benefits” for the various rules depending on age.

Those who do not have sufficient work quarters should apply for SSI (see below.) SSDI provides Medicare benefits after 24 months, starting from the date your disability began plus a 5-month waiting period. Those with end-stage renal disease or ALS can get Medicare faster.

Foster Care



What Is SSI?

Can I Get SSI?

SSI ("Supplemental Security Income") is a cash benefit program for low-income persons 65 and over and for blind and disabled persons of any age, including infants and children. You must be a U.S. citizen or a qualified immigrant living in the country legally to get SSI. (See page 32 for "What is CAPI", a program for immigrants who are ineligible for SSI.) SSI has no work history requirements.

The Social Security Administration provides a good description of SSI at www.ssa.gov/notices/supplemental-security-income/index.htm

SSI may be your entire income, or it may add to other income you already get (including Social Security benefits or SSDI.) To qualify for SSI, however, your total countable income cannot be more than the SSI maximum benefit. Earned and unearned income are counted differently.(See column to the right.) SSI grant amounts differ depending on whether the recipient is blind, a child, or is homeless.

You may also want to apply for SSI if you are disabled or over 65 years of age and are poor. SSDI does not require low family income, but SSI does. Also, SSDI provides Medicare benefits (after a waiting period), while SSI automatically qualifies the person for Medi-Cal (no waiting period). Unlike SSDI, the SSI program has no work history requirement. Because the disability review process for both SSI and SSDI can take many months from the application to approval, while waiting you can also apply for Medi-Cal (see pg. 45.)

If you are currently receiving state disability benefits do not wait until your state disability benefits have run out before applying for federal disability benefits and Medi-Cal. Applying for SSI and/or SSDI can take many months before a decision is made whether you are disabled. If you have not yet received your SSI or SSDI by the time your state disability benefits have run out, you should apply for General Relief (see pg. 33) but General Relief benefits are very low and you have to be down to your last \$100 to be eligible.

For those over age 65, the SSI application process is usually much faster because there is no disability review process, only a review of your income, assets, and living situation."

To get SSI, at least one of the following must apply:

- You are age 65 or older;
- You are blind; the vision in your best eye is no better than 20/200 with glasses or your tunnel vision is 20% or less;
- You are unable to work because of a severe mental or physical illness or impairment that has lasted for 12 months or is expected to last 12 months or is expected to result in death;
- You are a child under 18 who has a medically proven "marked and severe" physical or mental disability that would keep you from working if you were an adult or significantly interfere with your daily activities.

You can't get SSI if the disability is based on alcohol or drug dependency, but you may qualify based on another disability such as mental illness or kidney or liver disease.

You can't get SSI any month in which you're in prison or jail, have an outstanding warrant for a violation of a parole or probation order, or are a fleeing felon. Only certain types of outstanding felony warrants can cause you to be denied benefits. Seek help from legal aid if you are denied benefits for this reason.

You also cannot get SSI after you are outside the country for more than 30 days. SSI will also stop or be reduced if you begin residing in certain institutions for a long time such as a nursing home, hospital, or rehab facility.

1. Income

Your "countable income" may not be above the maximum benefit level. Subtract the following from your "gross" income to get your countable income:

- \$20 per month of your total income;
- \$65 per month of any earned income and half of your remaining earned income;
- All work expenses if you are blind;
- Any impairment-related work expenses if you are disabled
- All tax refunds;
- Any portion of scholarships or grants that is for tuition, fees, and school expenses;
- Federal undergraduate grants and loans (totally exempt)
- Foster care payments
- A third of all child support payments from an absentee parent if you are caring for a child

- If you are blind or disabled, any income that has been set aside as part of a "PASS" (Plan to Achieve Self-Support) approved by the Social Security office
- Federal housing and relocation assistance payments;
- Earnings of a blind or disabled student under age 22 up to \$1,870 a month, maximum \$7,550 a year;
- Payments from FEMA, Red Cross and others for disaster-related losses
- Money you receive to pay to replace or repair a lost, damaged or stolen resource;
- Reverse annuity mortgage payments made to the recipient (counts as a resource, but not as income.)

2. Resources or Assets

Your countable resources may not be more than \$2000 for one person and \$3000 for a married couple, (even if only one member of the couple is eligible.) Some resources are not counted:

- The home you live in;
- One car you use for transportation only (only one car is excluded, even for a married couple.);
- Payments from agencies for disaster-related losses;
- Property used for self-support including farm land, equipment, storage building, inventory, business bank accounts;
- Special needs trusts;
- Retirement accounts (IRAs, tax deferred annuities) belonging to the spouse or parent of an SSI beneficiary or applicant. However, the "cash-in" value of retirement accounts owned by the SSI beneficiary or applicant will count.
- All household goods and personal effects (including things you own and personal belongings but not items that you own only for value or investment, like jewelry with no personal or family significance
- There are many other resources not counted: you should consult Legal Aid if you have a specific situation or question.

If you have too much money or other resources that puts you over the resource limit for SSI, you can spend money/resources down to below the resource limit and qualify for SSI. You could buy things you need for your personal use (as long as whatever you buy does not make you go over another limit), or you can pay off debts. If you give away resources or sell them for a price below fair market value, you can be ineligible for SSI for up to 36 months.

If a child eligible for SSI lives with a parent (or parents) not eligible for SSI, a portion of the parent's income and resources may be used to figure the child's SSI cash aid. If a person eligible for SSI lives with a spouse not eligible for SSI, a portion of the spouse's income and resources may be used to figure the SSI cash aid. This is called deeming.

What Do I Get ?

Maximum Aid

Type of Person	Max.Benefit
Single person 65 or older	\$943
Disabled person 18 or over	\$943
Single blind person any age	\$1,000
Couple, both disabled or aged	\$1,582
Couple, both blind	\$1,733
Disabled person under 18	\$848
One person living in a licensed Board & Care facility(\$137 to the recipient)	\$1,206
Effective as of January 2020: rates change each year	

Food: SSI recipients are potentially eligible for CalFresh since June 1, 2019 (see pg. 37 CalFresh or call (866) 613-3777 to apply.) If you live where meals cannot be prepared you can get an additional \$87 (single person) to \$172 (couple) per month (ask Social Security for the Restaurant Meals Allowance.)

Health Care: If you get SSI, you automatically qualify for Medi-Cal. You may also qualify for In-Home Supportive Services (See pg 53.)

Special Telephone Equipment: If your disability makes it difficult to use the phone you may qualify for special equipment to help. Call (800)806-1191 (voice) or (800) 806-4474 (TTY line.)

Rent and Household Expenses: You can qualify for the maximum SSI grant even if you live with someone else or live in someone else's household as long as you pay your fair share for your own food and shelter costs. If you live in someone else's household and pay none or only part of your food and shelter costs, your SSI grant will be reduced by up to one third of the federal SSI benefit rate.

If you were getting some help in paying for your food and shelter when you applied for SSI but later begin paying your share for food and shelter, tell your social security worker so your benefits will increase to the maximum benefit. Also tell Social Security if you move/lose housing or if you no longer have access to cooking facilities.

If you are living with someone else, who is paying all or a part of the expenses for your food or shelter, and you have an agreement to pay them back once you begin receiving SSI, be sure to tell Social Security (at the time you apply for SSI benefits.) This signed written agreement should say that you will pay your share of the food and shelter expenses for each month you receive back SSI payments. If you have this written agreement any retroactive SSI benefits should not be reduced for the reason that you are living in the home of another and are not paying your share of the food and shelter expenses. You can contact legal aid for help writing this agreement so your back SSI benefits are not reduced.

A single person can get a \$940 (as of 2020) board & care rate called "Non-medical Out of Home Care," if you do not receive In Home Supportive Services, are not staying in your own home, and a relative who does not get SSI is providing you room, food, and personal care. The county must certify the private residence.

You may be able to get an immediate payment from the Social Security office if either your SSI or your Social Security check is late and you need money right away. If you are denied immediate payment contact the office of your Congressperson and ask for a staff person who can help.

How Do I Apply?

See page 32, "Where to Apply for Social Security or SSI." Come in, or call (800) 772-1213 to make an appointment. Even if the process from application to first check takes months, when you are approved the benefits will be paid beginning with the date you started the application. Do not accept a verbal denial. Insist on filing at least a partial application. If you do not have all the necessary information, you can give additional or corrected information later.

If you have difficulty with English or with hearing, the Social Security Office is re-

quired to provide you with an interpreter without cost. You may have help from a friend, family member or advocate at any appointment. If your condition makes getting to the office difficult, you may ask for a telephone interview or a home visit. If you have problems with any of this call Legal Aid right away

If you want to sign a form allowing someone else to serve as your representative, ask by phone for form SSA-1696 to be mailed to you. You can also get this form in the office or on the Internet. Parents or guardians can apply for a child under age 18 who is blind or who has a disability.

It's helpful to have the following information with you when applying:

- Social Security card or record of number
 - Birth certificate or other proof of age
 - Information about the home of residence, such as mortgage or lease and landlord's name
 - Payroll slips, bank books, insurance policies, car registration, burial fund records and other information about income and resources
 - Names, addresses and telephone numbers of doctors, hospitals and clinics that have treated you (if applying for SSI or SSDI because of disability or blindness)
 - Proof of U.S. citizenship or eligible non-citizen status
- You should apply even if you don't have all the things listed. If you are applying for SSI based on disability, your financial eligibility will be determined first. The Social Security Office is required to help you get needed documents and information.

If you apply for SSDI or SSI based on a disability, your case will be sent to a state agency under contract with SSI to collect your medical records and decide whether you meet the medical requirements for disability benefits (in California, this agency is called the Disability Determination Service or DDS.) In general, people who are blind or have very obvious disabilities which keep them from working are approved more quickly than those who must have their disabilities more extensively verified. In limited circumstances, you may qualify for presumptive disability and start to receive benefits even before the final disability determination is made.

What Are My Rights?

You can apply for General Relief while you wait for SSI approval. If you ask, the county will help you get SSI while you are on General Relief. If you have worked in the last year and a half, you should apply for state disability benefits. If you receive GR while waiting for your SSI to be approved, your retroactive SSI check will be reduced by the amount of GR you received.

After receiving benefits if you get a notice that you have been overpaid, and you believe it is not your fault, insist on immediately submitting a "Request for Waiver of Overpayment." If you do not believe you were overpaid, you should submit a "Request for Reconsideration."

If you believe the amount of your SSI check is incorrect or any notice that you get is wrong, insist on immediately submitting a "Request for Reconsideration" (See page 67 "Hearings & Complaints").

Where to Apply for Social Security or SSI

For SSI, Medicare and Social Security benefits, it is best to apply in person at one of the Social Security offices listed below (L.A. area). For appointments and information about Social Security, Medicare or SSI: call: (800) 772-1213 (7 A.M. to 7 P.M. during the week) (800) 325-0778 (TTY)

When you call the 800 number you are talking to someone in a national call center, not someone in your local office. If you are dealing with a specific representative in a local social security office, be sure to get and keep that person's name and direct phone number so you can reach him/her again.

Alhambra, 900 S. Garfield, Ste. 102
Boyle Heights, 215 N. Soto St.
Burbank, 1420 W. Olive
Chatsworth, 20439 Nordhoff St
Compton, 171 E. Compton Blvd.
Crenshaw, 3840 Crenshaw Blvd.
El Monte, 9351 Flair Dr.
Glendale, 225 W Broadway Ste. 600
Glendora, 1165 E Route 66
Hollywood, 1122 N Vine St.
Huntington Park, 6303 Rugby Ave.
Inglewood, 230 E. Spruce Ave.
Lakewood, 4957 Paramount Blvd.
Lancaster, 44451 N 20th St W
Long Beach, 2005 Long Beach Blvd
LA-Wilshire Center 4000 Wilshire Blvd
Montebello, 2216 W. Beverly Blvd.

Also, most Congressional district offices have case workers who deal with Social Security problems. Call your Congress person's office and ask for help or make a complaint.

What Is CAPI?

Cash Assistance Program for Immigrants ("CAPI") is a cash benefit program for low-income people who are aged 65 and older, are blind, or who have a disability that meet the general eligibility requirements for SSI but are not eligible for SSI because of their immigration status (See pg. 64 "Which Immigrants can get CAPI?" and pg. 65 "What If I Have a Sponsor" for important information about "deeming")

CAPI benefit amounts are the same as for SSI. Like SSI, benefits are lower if you share housing or don't pay your full share of the food and shelter expenses. If you are eligible for CAPI you will be eligible for Medi-Cal, and possibly In Home Supportive Services (IHSS, see pg. 56) and CalFresh/Food Stamps (see

pg. 37.) You will have to apply for these benefits separately.

1. How to Apply

To apply for CAPI in person, go to the Metro North DPSS Office at 2601 Wilshire Blvd., Los Angeles 90057, or to any DPSS public contact offices (see page 71). To apply for CAPI by telephone or to receive a CAPI application by mail, call the Customer Service Center at (866) 613-3777-option 7.

You must apply for SSI as a requirement of CAPI eligibility. You will have to show proof that you have applied for SSI and your SSI application is on a pending status OR has been denied due to your immigration status. DPSS can give you a referral sheet to take to Social Security explaining that you are required to apply for SSI before receiving CAPI. You may apply for SSI on your own or you can ask for help from the County worker.

The County has 30 days from receipt of your application to make a decision on eligibility to CAPI benefits. If approved, your benefits will begin the month after your CAPI application date. Be sure to get a written receipt with a date showing that you applied or tried to apply for SSI. At the time you apply for CAPI, you will choose between two methods of receiving your monthly benefits, Electronic Benefit Transfer (EBT) or direct deposit.

2. Be Careful: Brokers

If you are applying for CAPI you do not need to pay anyone to help you fill out the application and turn it in to the county (these individuals are often called "brokers"). DPSS workers are required to help you fill out your application, and provide you with an interpreter to help you fill out the papers.

Norwalk, 12440 E Imperial Hwy
Panorama City 14500 Roscoe Blvd
Pasadena, 104 N. Mentor
Pomona, 960 W Mission Blvd
San Fernando, 456 San Fernando Mission Blvd.
Santa Clarita, 27200 Tourney Rd. Ste 320
Torrance, 22600 Crenshaw Blvd.
University Village, 1122 W Washington Blvd. Suite 201
Watts, 12429 S Avalon Blvd
West Covina, 501 S. Vincent Ave
Westwood, 11500 W Olympic Blvd
Whittier, 7200 Greenleaf Ave. Ste. 200

Veterans

Veterans and their family members may be eligible for income, health care, housing, and other services. Ask at the VA about programs for veterans and their families, like Education, Vocational Rehabilitation, Life Insurance, Burial Assistance, Survivors Benefits, and more. VetsGo511.com is a helpful website with many resources for veterans.

Can Vets Get Cash Aid?

The Department of Veterans Affairs (VA) has two income benefits for veterans. Veterans with an Other Than Honorable or Bad Conduct Discharge, may still be eligible for VA Benefits.

- 1. Service-Connected Compensation** provides a monthly income to veterans with a physical or mental health condition that is related to their military service. The basic amount of Compensation depends on the severity of the medical condition.
- 2. Non-Service-Connected Pension** provides a monthly income to wartime veterans who are low-income and either 65 years or older or totally disabled.

Veterans with dependents can get more Compensation and Pension.

You can apply for a veteran's pension at <https://www.va.gov/pension/how-to-apply/>

Health Care for Vets

If you served in the military, you may qualify for VA health care benefits. Certain veterans receive prioritized health care from VA Medical Facilities and Vet Centers. Low-income veterans may receive free or low-cost VA health care.

Call (877) 222-8387 for information on a full range of medical benefits available to veterans, regardless of your income and even if the health problem is not related to military service.

Housing for Vets

The VA's "**Welcome Center**" offers housing resources and emergency housing for veterans. The Welcome Center is located on the VA Campus at 11301 Wilshire Blvd, Building 257, in West Los Angeles.

Subsidized Permanent Housing - The VA has limited HUD-VASH subsidized housing vouchers for homeless veterans. In order to get HUD-VASH, a veteran must be eligible for VA Healthcare. If you are not VA Healthcare Eligible, you may be eligible for a special Section 8 Housing Choice Voucher for veterans. Visit a VA Medical Center or the VA Welcome Center to apply.

Rental Assistance – If you are facing eviction or are homeless and need helping moving into permanent housing, the Supportive Services for Veteran Families Program (SSVF) may help. SSVF provides financial assistance and supportive services to low-income veterans and their families. Call "211" or visit the VA Welcome Center for the SSVF Program nearest you.

Temporary Housing – There are many VA Grant Per Diem Programs (GPD) that offer temporary housing for veterans. Many programs have social and health services. Call "211" or visit the VA Welcome Center for the GPD Program nearest you.

More Information

For more information, visit or contact the VA Los Angeles Regional Office Intake Site or the VA Welcome Center at:

Federal Building,
 11000 Wilshire Blvd., 5th Floor, LA, CA 90024 Phone: (800) 827-1000
VA Welcome Center
 11301 Wilshire Blvd, Building 257, Los Angeles, CA 90073
LA County Department of Military Veterans Affairs Call (877) 4 LA VETS (8387)
www.VetsGo511.com



General Relief

General Relief (GR) is a cash assistance program provided by the County of Los Angeles for individuals who are not eligible for other federal or State cash assistance programs, such as CalWORKs, Supplemental Security Income (SSI), and Disability Insurance Benefits (DIB). The GR Program is managed by Los Angeles County Department of Public Social Services (DPSS).

Can I Get GR Cash Aid?

1. Basic Requirements

To get GR, you must live in L.A. County for at least 15 days and intend to remain here permanently.

You cannot have more than \$100 total in cash or in a bank account when you apply.

You can own:

- One car worth less than \$4,500 (if you are homeless and live in your car, the limit is \$11,500)
- Necessary household furnishings
- House you live in if the market value is less than \$34,000.

If you live with your spouse, his/her income will be considered as income in determining your eligibility to receive GR benefits. If your spouse's income is SSI, his/her income will not be used to determine your GR eligibility. If you have been a victim of domestic violence, DPSS may not have to consider your spouse's income. (See page 70, Domestic Violence.)

2. Time Limits

If you are able to work, DPSS will classify you as "employable." "Employable" people can only get GR for 9 months in any 12 month period.

If you cannot work due to health problems, DPSS will send you for a medical exam. The doctor decides if you are too ill or disabled to work. If so, DPSS will call you "unemployable." "Unemployable" people can get cash aid year round. You may have to go for medical exams more than once a year to stay "unemployable." DPSS can change you back to "employable" and the 9 month time limit on aid will apply to you.



What Do I Get in GR?

► 1. Basic Benefits

The most you can get in cash aid per month is \$221.

In addition to the cash aid, you can get:

- Metropolitan Transit Authority (MTA) Transit Access Pass (TAP) cards to all required appointments related to keeping benefits including medical appointments, crisis housing/vendor lodging and meal voucher locations (when the one-way distance is one mile or more or you are unable to walk a mile)
- A personal care kit (DPSS will deduct \$5 from your GR benefit)
- Sanitary napkins
- Housing repairs if there is a lien on your house (Homeowner's Special Needs)
- Supplements for medically required diets
- A referral to a county-paid drug or alcohol recovery program
- You can also get Medi-Cal (health insurance, pg. 45) and CalFresh (food benefits, pg. 37)

► 2. Emergency Benefits

When you apply for GR, you may be eligible to receive the following emergency benefits:

- **Emergency Housing** - If you are homeless and need emergency housing, tell the person who interviews you at the DPSS office and you will be referred to one of the crisis housing shelters. If there are no vacancies in any of the crisis housing shelters, you may receive hotel vouchers. A small portion of the cost of the voucher (\$4.35 per night) will be deducted from the first month of GR benefits issued. If you take the vouchers but do not use them, DPSS will still take the money out of your first GR benefits issued. To stop that you must ask in writing to cancel the voucher.
- **Emergency Food** - You may be entitled to CalFresh or food vouchers the day you apply (see page 37 CalFresh). If you do not get CalFresh, and no voucher restaurant is open or in your area, you should get cash (\$2.17 per meal). Ask for as many meals (up to 3 a day) as you will need. Remember, any meal vouchers or cash issued to you will be deducted from your first GR benefits issued.
- **Aid to Prevent Eviction** - You can get up to \$272 when you first apply to stop

an eviction. You need a letter from your landlord that says: 1) You did not pay your rent this month or last month and 2) He/she will not evict you if DPSS pays the \$272. The money will be paid directly to your landlord.

- **Aid for Utilities** - You can get cash aid to turn your utilities back on or to stop a shut-off. This money will be paid directly to the utility company. You need to show DPSS proof from the utility company that the cash aid will stop the shut-off.

► 3. Earned Income Disregard

Any earnings in the 30 days before your application will reduce how much you can get in GR the first month. Once you are on GR cash aid, you can earn up to \$200 a month with no cut in your cash aid. If you earn between \$201 and \$620, your cash aid may be less or be cut. Once on GR, you can also save up to \$1,500. Always report your earned income to your worker.

How Do I Apply?

► 1. Regular Application

You may apply for GR benefits by going to a district office, by mail, fax, or online through the Your Benefits Now (YBN) self-service portal available on the DPSS website: <http://dpss.lacounty.gov>

- To apply in person, go to the closest DPSS office to complete a GR application (see page 71 for a list of Welfare Offices).
- To apply by mail or fax, you may download and print the Application for General Relief (ABP 898-1) General Relief Application (GR 20) by visiting the Department's Your Benefits Now (YBN) website at: [dpssbenefits.lacounty.gov](https://www.yourbenefits.laclrs.org/ybn/GRDownloads.html) <https://www.yourbenefits.laclrs.org/ybn/GRDownloads.html>

Once you have filled out your application and forms, you may fax it to (310) 215-8220 or mail to:

Department of Public Social Services
P.O. Box 1580
Inglewood, CA 90308-1580
ATTN: GR APPLICATION

A worker will contact you to schedule an appointment at a GR office within

five business days of receipt of your application. You may also bring your completed application to your nearest GR District Office.

If you visit a GR District Office, remember that you have the right to apply that same day. Bring with you identification and papers like pay stubs, bank accounts, and car title that prove your income and resources.

A law-enforcement agency may request information about someone wanted on an arrest warrant, DPSS must give them their name, address, and physical description. DPSS may inform law-enforcement officials of your presence in the DPSS office if you are a fleeing felon. If you are denied GR because you are a fleeing felon, contact legal services (see Good Advice p. 69) and the Public Defender's Office: (213) 974- 7075).

You must provide photo ID to verify identity at the time of application. If you don't have photo ID when you apply, you may get GR for up to 60 days. You must get a photo ID during the 60 days.

Make sure that you give your worker a reliable address and telephone/message number for you. Your home address and mailing address do not have to be the same. If you are homeless, you can use the DPSS address to receive and pick up your mail. If you use the DPSS address you must check for your mail at least once a week. Some community organizations and shelters provide free mail service. Having a correct address and telephone/message number is important so DPSS can get in touch with you and you can get notices from them.

You must be helped that same day if you are in the office before it closes. If you need help immediately, you should get it. If anyone does not let you apply or tells you to come back the next day, insist on speaking to a worker, and then a supervisor, and then the Deputy District Director, if necessary.

The county has 30 calendar days to approve or deny your case and issue GR cash aid. Your cash aid will be given to you on an Electronic Benefits Transfer ("EBT") card. When your EBT card is given to you, you will also select a personal identification number ("PIN"). Using your EBT card and your PIN, you can get your GR Cash Aid at any ATM. Your DPSS worker should provide you with a list of ATMs in the area.

Be careful as some ATMs charge a fee. Grocery stores usually do not.

► 2. If You Think You Are Unable to Work

If you have a disability, you may want to apply for SSI first. (See page 30 SSI). You may apply for GR while you wait on SSI. Ask help at the GR office if you need assistance with the SSI application process, and they should refer you to the "CBEST" team.

Due to a Physical Disability or Condition

If you have a physical disability or condition that prevents you from working, tell your worker when you apply for GR. You will need to be evaluated by a medical health professional to determine if you are unable to work. You may provide verification of a physical health evaluation in either one of two ways:

- Providing a statement from a private doctor on the clinic/health center letterhead is acceptable as long as it provides the duration of the disability and whether the condition prevents you from working full-time in sedentary work related activities.
- Or, if you are currently receiving treatment from your own physician or medical provider, you can have him/her complete a Physical Health Assessment for General Relief form (ABP 1676-1) to verify your disability or condition. You may request these forms from your worker or download them from the YBN website at

<https://www.yourbenefits.laclrs.org/ybn/GRDownloads.html>

The doctor will evaluate your physical health to determine if you have an impairment that prevents you from participating in sedentary work-related activities. If you are determined to be unable to work, the GR Program will consider you "Unemployable." Your "Unemployable" designation will exempt you from some sanctions, work and other program requirements.

If you are determined to be able to work, see right of this page "GR Requirements."

Due to a Mental Health Disability or Condition

If you have a mental health disability or condition that prevents you from working, tell your worker when you apply for GR. You will need to be evaluated by a mental health professional to determine if you are unable to work. You may provide verification of a mental health evaluation by either:

- Providing a statement from a private doctor on the clinic/health center letterhead is also acceptable as long as it provides the duration of the disability and whether the condition prevents you from working full-time in sedentary work-related activities..

OR

- If you do not have a mental health provider, let your worker know. Your worker will refer you to a Department of Mental Health (DMH) Clinician located at GR district offices for an assessment. Take any medications, prescriptions, or other proof about your disability to your disability assessment appointment.

If you are determined to be unable to work due to your mental health disability, the GR Program will consider you as "Needs Special Assistance" (NSA). NSA applicants are approved for GR promptly and are given priority service. "NSA" participants are exempt from work requirements and some program requirements.

- If you are currently receiving treatment from your own mental health provider, you can have him/her complete a Mental Health Assessment for General Relief form (ABP 1676-3). You may request these forms from your worker or download them from the YBN website at [dpssbenefits.lacounty.gov](https://www.yourbenefits.laclrs.org/ybn/GRDownloads.html) <https://www.yourbenefits.laclrs.org/ybn/GRDownloads.html>

► 3. If You Need Assistance

You can request assistance at any time during the GR application process or if you are unable to meet GR Program requirements. If you need a modification or accommodation due to a disability, DPSS will provide you a reasonable accommodation. For example, if you cannot read or write, DPSS will help you complete any necessary forms.

If you need help applying, during the GR application process or meeting GR Program requirements due to a disability, you may request a Reasonable Modification:

- From any employee at a DPSS office; OR
- By calling the ADA hotline at (844) 586-5550 or 562-908-8374; OR
- Writing a letter asking for a Reasonable Modification or filling out the Request for Reasonable Modification form (ADA PUB 2). You can download the ADA PUB 2 form from the DPSS ADA website located at:

dpss.lacounty.gov/wps/portal/dpss/main/programs-and-services/civilrights/ada and mail it to:

DPSS ADA Title II Coordinator
12860 Crossroads Parkway South
City of Industry, CA 91746

GR Requirements

1. If You Are Able to Work

If you are able to work, DPSS will consider you an "Employable" individual. An Employable individual may receive GR cash aid for 9 months in any 12-month period. If you are employable, you will be required to:

- Apply for unemployment benefits if you appear eligible for these benefits.
- Participate in GROW program 20 hours per week in activities leading to a job

The County will send you a notice to come to a GROW Orientation or give you a notice at application. If you do not attend the GROW orientation, your application for GR will be denied. But, if you have "Good Cause" or a good reason for not attending the GROW Orientation, your application will not be denied and you will be scheduled for another date and time. Also, you are exempt if you have completed the GROW orientation within the past 12 months. Make sure to contact your eligibility worker.

GROW provides services including job search activity, job-related training, counseling, and work experience. If needed, you may also get assistance with transportation, books, supplies, uniforms and tools related to your trade. GROW can also provide referrals to domestic violence, substance abuse, or mental health supportive services.

If you are 60 years old or older, you will not have to participate in GROW, and you will not have a time limit.

NOTE: If you are terminated from GR for not meeting GROW requirements, your CalFresh benefits should still continue.

2. If You Are "Unemployable" or "Needs Special Assistance"

If you have already been determined "Unemployable" or "Needs Special Assistance" you will be sent a notice to comply with GROW requirements when your disability period expires. If you still cannot work, call your worker right away and schedule a follow-up visit with your primary care doctor or request an appointment with

General Relief

a DMH Clinician. You must sign a release (ABP 1676-2 or ABP 1676-4 GRMH) that gives your doctor permission to release your medical/mental health information to DPSS. You may request these forms from your worker or download them from the YBN website at <https://www.yourbenefits.lacirs.org/ybn/GRDownloads.html>

NOTE: If you are Unemployable or designated NSA status, and wish to volunteer without any penalties in the GROW Program contact your Eligibility Worker.

3. Drug and Alcohol Program

If you tell your DPSS worker that you have a drug or alcohol problem, or if your worker believes you have such a problem, you must have a professional assessment from Department of Public Health.

If you are assessed to be chemically dependent you must enroll in a treatment program (Mandatory Substance Use Disorder Recovery Program) in order to receive GR. If you fail to comply with the Mandatory Substance Use Disorder Recovery Program requirements, your application will be denied. You are entitled to a “good cause evaluation” when you reapply and the penalty will be removed if you had “good cause” for missing the appointment.

If you are in the Mandatory Substance Use Disorder Recovery Program but are considered “employable” , you still have to meet GROW requirements. You can to this by participating in substance abuse treatment 20 hours per week. You will still be subject to the 9 month time limit, unless you are judged “unable to work” for reasons other than substance abuse.

4. Quarterly Reports

You must fill out a QR-7 LA form every three months. This Is Very, Very, Very IMPORTANT! On the QR-7 LA, you will be asked to report your income, property and household members. You also must report any changes you expect in the next three months. Your GR cash aid for the next three months will be based on the information you list on your QR-7 LA. If you do not report income on your QR-7 LA when you received income, you will be charged an overpayment. An overpayment is when you receive GR when you were not eligible to receive it. If an overpayment occurs, you will have to pay back the GR

cash aid that was overpaid to you. If this happens, call legal services for help (see pg. 69)

You must also report new income from a job of \$203 or more per month per person or unearned income of \$25 or more per month per person to your GR worker within five days.

What Are My Rights?

1. Good Cause

If you are not able to comply with the GR program requirement, and you have “Good Cause,” you should contact your DPSS worker immediately and explain your situation.

Unless you have “Good Cause,” you will be penalized for not participating in GROW, quitting a job, not accepting a job paying at least minimum wage, not complying with substance abuse requirements, or getting fired for misconduct. “Good Cause” can be any illness, accident, difficulty understanding instructions, conflicting appointments, confusion, transportation problems, or any physical or mental disability, which affects your ability to work. “Good Cause” covers anything short of willfully not complying with program requirements.

2. "Extended Suspend"

If DPSS says you have not complied with your GR requirements your benefits will be stopped. If you comply with your GR requirements by the third Thursday of the following month, your benefits should be started again. The DPSS calls this “Extended Suspend.” Make sure you show them proof that you have complied with the rules.

3. Hearings

If your case is going to be terminated or your benefits are reduced, you have a right to a GR hearing. The county must mail you a “Notice of Action” nine days before a hearing. The date and time of the hearing will be listed on the notice. You can take documents or witnesses to support your case to your hearing appointment if you want. If you have “Good Cause,” you have a good chance of winning the hearing. Your benefits cannot be cut off or reduced without a hearing unless you do not go to the hearing.

4. Penalties or "Sanctions"

If you do not go to your GR hearing, or it is determined you willfully did not comply with a GR requirement, your case will be terminated discontinued or your benefits will be reduced. If you are employable you will not be discontinued or sanctioned during the first three months of receiving GR benefits in a 12-month period. But if you willfully did not comply with an employment requirement your first sanction will make you ineligible for 0 days. You can re-apply right away. If this is the second sanction in a year, you can re-apply in 30 days. After the third penalty in a year, you have to wait 60 days to re-apply.

5. GR Time Limits

If your General Relief is stopped due to the 9 month time limits, you can continue to get CalFresh/Food Stamps and Medi-Cal. You can reapply for GR in three months. Your notice will tell you when you can reapply.

If you become sick or hurt and cannot work while you are timed off of GR, reapply for GR right away. Let your worker know that you are unemployable and request a verification form (ABP 1676-1 or ABP 1676-3) so your primary care doctor or mental health provider can verify. If you are unemployable. If you are determined to be unemployable, you will be able to get GR cash aid without any time limit. You may also download the forms from the YBN website at <https://www.yourbenefits.lacirs.org/ybn/GRDownloads.html>.

6. If You Begin to Get SSI

The County considers GR to be a “loan” for those applying for SSI. If you start getting SSI, the amount of GR cash aid you got will be taken out of your first SSI check. If you think DPSS made a mistake and took too much money from your first SSI check, you can ask for a case review or fair hearing (see Hearings and Complaints pg. 67.)

CalFresh

CalFresh is also known as SNAP Supplemental Nutrition Assistance Program. It provides monthly benefits on a plastic EBT (Electronic Benefits Transfer) card which you can use to buy food at grocery stores, farmers markets and other locations. .

Many people don't realize they are eligible for CalFresh. If you or someone in your home needs food, you should apply: everyone deserves to have enough to eat

How Do I Get CalFresh?

There are different ways to apply for CalFresh:

- By calling your local DPSS Customer Service Center at (866) 613-3777 , or at (626) 569-1399, (310) 258-7400, (818) 701-8200
- Online at www.dpss.benefits.lacounty.gov;
- Online or by phone app www.getcalfresh.org
- In person at any Department of Public Social Services (DPSS Office, see pg. 71);
- At any Community and Faith Based organizations listed online at www.dpss.benefits.lacounty.gov.

CalFresh applications must be processed within 30 days following the date of application. In emergency situations, a household may receive CalFresh benefits on the same day or within three days from the date of their CalFresh application filing date. Your household must meet certain conditions that are considered an emergency (for example, your gross income is less than \$150 and you have less than \$100 on hand).

To apply for CalFresh you only need to sign and date the application and statement of facts. The worker will ask for your proof of identity, residence, income, and resources. You will be allowed time to get the documents you need before your case is approved or denied. You will need to submit them before your application can be approved. Although your cash on hand and other liquid resources may not count for general CalFresh eligibility, they do count if you are asking DPSS to give you emergency or same-day CalFresh.

These are some examples of forms of proof of identity:

- Driver's license
- Work or school identification card;
- An identification card for health benefits or another assistance program;
- Voter registration card;
- Wage stub;
- Birth certificate;
- Sworn statement; or
- A letter addressed to you

Interview: CalFresh applicants can complete the required interview by phone. There are a few exceptions, such as if you apply for CalFresh benefits and also apply for cash aid, such as CalWORKs, General Relief, CAPI, or if you requested Expedited Services. If so, you will still be required to complete a face-to-face interview in the District Office. At the interview - in person or over the phone - you will go over the application you filled out and will be asked for additional information if needed. You may bring someone along to help you as your “authorized representative”.

Documents: You will be given a list of mandatory verification needed to complete the application process. You may be given a due date to provide necessary information.

The eligibility worker should help you understand what documents are required and what you can bring instead, if you don't have it or can't find it.

If everyone in your household is disabled or 65 years of age or over, you may request either that an eligibility worker be sent to your home at a time you agree to or that you be interviewed by phone. A worker may also visit or phone you if no adult in your household can go to the office for good reasons such as illness or disability.

Next steps: Write down your worker's name, and your case number. If you are asked to mail additional papers to the DPSS office, ask the worker for a stamped envelope. If you take in any documents, make sure to get a receipt to prove that you dropped off the documents requested.

Keep your own copy of all the paperwork you submitted. If you need help and your worker is not available, a supervisor must help you.

Within 30 days of your applying, the DPSS office will send you a notice of action explaining if your case was approved or denied with a reason for denial. If your case is approved, you will receive your EBT card and PIN number by mail. Each item is sent separately. Contact your county office if you do not receive any of these items. The notice of approval will tell you how long you are eligible (usually a “certification period” is 12 months) and the amount of benefits that you will receive and information about your reporting requirements.

If your CalFresh case is denied and you believe you qualify for benefits, request a hearing or call a legal aid organization for assistance. (See pg 69 the “Good Advice” and the pg 67 “Hearings and Complaints” Sections for additional information).

Be sure to comply with all reporting requirements. You must submit reports to DPSS every 6 months in either a SAR7 or recertification form. Some things such as changes to income must be reported when they happen, even if it's before the 6 month report is due." If you don't understand the reporting requirements ask your eligibility worker or contact Legal Aid. (See pg 39 "What are the Requirements.")

What Can I Buy With CalFresh?

You can use the CalFresh card to buy nearly any food item at most grocery stores, supermarkets, farmers markets and other locations.

- You can also buy seeds to grow your own food.
- Most recipients cannot buy hot foods ready to eat with CalFresh. Homeless, disabled, or elderly households can use CalFresh to buy hot prepared foods, at certain restaurants participating in the Restaurant Meals Program
- CalFresh cannot be used for alcoholic beverages or for non-food products such as soap, tobacco, or diapers.

Can I Get CalFresh?

Individuals or households whose income is low enough and meet other eligibility factors, can get CalFresh benefits. U.S. citizens, legal residents, and some qualified immigrants may receive CalFresh benefits. Beginning June 1, 2019, SSI recipients are also potentially eligible for CalFresh.

If there are this many people in your Household	And you make less than this per month (Gross Income Limit)	Net income limit	This is the maximum CalFresh you can get per month
1	\$2082	\$1041	\$194
2	\$2820	\$1410	\$355
3	\$3556	\$1778	\$509
4	\$4292	\$2146	\$646
5	\$5030	\$2515	\$768
6	\$5766	\$2883	\$921
7	\$6502	\$3251	\$1018
8	\$7240	\$3620	\$1164
For each additional person, add	\$738	\$369	\$148
(Accurate until Sept. 30, 2020)			
The gross income limit is not used to determine eligibility for households that contain an elderly and/or disabled member. Instead, the net monthly limit (gross income minus applicable deductions) is used to determine eligibility.			

Who Can Get CalFresh?

1. CalFresh Income Limits

See the chart at the top of the page for gross income limits for receiving CalFresh benefits. Unless your household has an elderly or disabled member, your income must be under those limits to potentially qualify for CalFresh benefits. The county will then make deductions from your gross income, based on certain household expenses: the result must be under the "Net" income in order for you to receive CalFresh. There are some exceptions; ask your worker for more information.

2. Special Rules for Students

Students between age 18 and 49 attending school at least half-time may qualify if they meet any of the conditions listed below:

- Being disabled;
- If they are enrolled in CalWORKs;
- Applying for or receiving General Relief and also complying with a GROW Program education/training requirement, including orientation;
- Working and getting paid at least 80 hours per month. If the students are self-employed, they must work at least 80 hours per month and receive weekly earnings equivalent to at least federal minimum wage X 80 hours.

- Receiving a federal or state work-study grant;
- Is enrolled full-time and is a single parent responsible for the care of a dependent child under age 12;
- Are taking care of a child at least 6 and under 12 years old and adequate child-care services are not available, preventing them from attending class and working 80 hours per month or participating in a work study program during the school year;
- Is assigned or placed in school under the CalFresh Employment and Training Program, or a state or local government training program;
- Participating in Extended Opportunities Program Services (EOPS);
- Participating in the Workforce Innovation Opportunity Act (WIOA);
- Participating in Job Opportunities and Basic Skills (JOBS) program under the Title IV of the Social Security Act;
- Participating in a state or county employment and training program determined by an Eligibility Worker; and/or
- Is awarded with a Cal Grant A or B and meeting the required TANF requirements
- There are over a dozen other programs through which students may qualify: ask your eligibility worker

If the student doesn't meet any one of the requirements, other people in the home may still qualify for CalFresh benefits

3. If You Get Free Meals

If you do not pay for any of your meals, you may not be able to get CalFresh. Even if you don't prepare your own meals you may be able to get CalFresh if you live in:

- A non-profit shelter for domestic violence or homeless people
- A drug or alcohol treatment facility
- Federally-funded housing for the elderly; or
- A group home for the disabled or blind

Some facilities can collect your CalFresh benefits from you if they use them to feed you.

4. "Households"

"Households" receive CalFresh. A household is defined as an individual living alone or a group of individuals who live together and customarily purchase food and/or prepare meals together for home consumption. A household can be one person who lives alone, or it can be a group of persons, related or unrelated, who live in the same place. There is no limit to the number of "households" that can be in the same home. If each "household" buys and prepares their own food separately from the other households, they are a "separate household."

What Are The Requirements?

Some relatives who live together must be included in the same household, even if they do prepare their meals separately. These are:

- Your immediate family—you, your spouse, your children age 21 and under;
- Your parents and you (unless you are over 21);
- Those who are acting as parents for a child under 18, unless the child is in foster care; or
- An individual living with the household who is a spouse of a household member.

Some relatives can be considered separate households, even if they live in the same place, including:

- Parents living with their adult children (over 21);
- Adult brothers and sisters; or
- Seniors and people with disabilities.

Teen parents who reach the age of 19 and are taken out of their own parents' CalWORKs case are still eligible for CalFresh. The parents' income must be counted, but the CalFresh should not just be cut automatically—call Legal Aid if this happens.

5. Resource and Property Limits

Resources such as money and property are no longer counted when determining CalFresh eligibility (unless the household has intentionally violated program requirements or has failed to comply with the work requirements.) Resources will be counted for cash aid or health care programs.

1.Semi-Annual Reports

You must fill out and return a form called SAR-7 every six or twelve months, depending on your type of household. THIS IS EXTREMELY IMPORTANT! On the SAR-7, you will be asked to report your income, property and household information. You will also be required to report any changes in your income, property or household that you anticipate in the next six months. Your eligibility and benefits for the next six or twelve months will be based on the information you provide on your SAR-7. Under certain circumstances, you must report changes before your required reporting month.

You will be assigned to a Semi-Annual Reporting cycle based on the last digit of your case number. Your eligibility worker should let you know the months you are required to submit a SAR-7.

If you get the form in the mail, you must fill it out and return it to the DPSS office by the fifth day of your reporting month indicated on the SAR-7. You should receive your SAR-7 about one week before it is due.

If you don't get it in the mail, you must go to the DPSS office to complete the form or access it online at <https://dpssbenefits.lacounty.gov/vbn>. Make sure to get a receipt showing the time and date you submitted the form. If your SAR-7 gets lost, or you do not turn it in, your case will be discontinued at the end of that month, even if you did not receive the SAR-7 in the mail.

Contact your worker, the DPSS Customer Service Center, or a community agency if you need assistance with filling out the report.

2. Recertification

Your case must be recertified for benefits each year before the end of your certification period or your CalFresh will be terminated. You will receive a recertification (RC) packet and a letter saying that you need to renew your case if you want to continue receiving CalFresh benefits, along with a date by when you need to return it. You will need to send it back with copies of income, and other verification. You need to include other receipts of services you are paying for such as child care or medical expenses.

Be sure to complete this on time so you can continue to receive without a break in benefits. RC interviews are done over the phone unless you want an in-person/face-to-face interview with your worker.

Households in which all adults are elderly or disabled, and households residing on Indian Reservations with or without children under 18 have been granted a 24-month recertification (RC) period. The RC process is the same as households with 12-month RC period.

CalFresh households not receiving any cash benefits from the county and in which all members are elderly and/or permanently disabled with no earned income :

- Will have a 36 month recertification period
- Only have to submit a SAR 7 at the 12th and 24th month during the 36 month recertification period and
- Do not have to complete an interview at the recertification, unless the County is going to end their benefits based on the recertification or unless there is a question about the information that was provided.
- These households can also request an interview if they want one.

3. CalFresh Work Registration

Currently Los Angeles County is under a waiver for CalFresh work requirements. This may change in 2020. The usual regulations are as follows: All CalFresh household members age 16 through age 59 are required to be registered for work (exceptions are described below).

As a work registrant, you must do the following to remain eligible to CalFresh:

- Keep appointment if called in for an employment assessment interview.

- Respond to a request for supplemental information regarding your employment status or availability for work.
- Report to an employer if you are referred to one by your employment counselor.
- Accept an offer of suitable employment.
- Comply with the requirements of the CalFresh Employment and Training (FSET) Program if assigned to it.

- Comply with the requirements of Greater Avenues for Independence (GAIN) or a substitute program, e.g., Refugee Resettlement Program.

You will be exempt from work registration if you are earning at least 30 hours times the federal minimum wage, or working at least 30 hours per week, or any one of the following:

- Under age 16 or age 60 or over;
- A student in school or training program at least half time;
- Caring for a disabled person or child under age 6;
- Receiving or applied for unemployment benefits;
- Participating in certain drug or alcohol treatment and rehabilitation program;
- Determined by DPSS to be unemployable, due to a physical and/or mental disability; or
- Participating in GAIN or a CalWORKs program.
- Participating in an Office of Refugee Resettlement training program

Under CalFresh law, certain kinds of employment are considered “unsuitable,” so you do not have to accept these jobs to qualify or remain eligible for CalFresh/Food Stamps. A job is unsuitable if one of the following applies:

- It does not pay the federal or state minimum wage;
- It is harmful to your health or unsafe;
- It is beyond your mental or physical capacity, as documented by medical evidence or information from other sources;
- The daily commute is over 2 hours;
- It forces you to resign from a union or prohibits you from joining a union;
- It forces you to break a strike or lockout;
- Adequate transportation is unavailable;
- If within the first 30 days of registration, the job offer is not within the member’s major field of experience; or
- The working hours or nature of the employment interferes with the member’s religious observances or beliefs, for example, working on a religious holiday.

What Are The Penalties?

When the work requirements are in effect, if you quit a job without good cause, you can be cut off from CalFresh- until you correct the problem. The penalties get worse each time:

- The first time DPSS says you have not complied, you can be denied CalFresh for at least one month;
- The second time, you can be denied CalFresh for at least three months;
- The third time and after, you can be denied CalFresh-for at least six months.

Only the person breaking the rules will be excluded from CalFresh, not the whole household. If you are penalized for any reason, you can get back on the program if you become exempt from having to comply with the requirement for any of the reasons listed above.

“Good Cause”

“Good cause” for quitting a job or not doing a work project includes events beyond your control, including but not limited to:

- Illness of yourself or a household member who needs your care;
- Injury;
- Transportation problems;
- Inability to speak or write English;
- A household emergency; or
- Lack of adequate childcare for a child age 6 to 11.

What Are My Rights?

You have the right to:

- Be treated with courtesy, consideration, and respect, and not to be discriminated against;
- Get help filling out your application or any other form, and to have an interpreter if needed at no cost to you;
- Be interviewed in a reasonable amount of time by the County when you apply and to have your eligibility determined within 30 days;
- Get a written notice when your application is approved, or denied, or when your benefits change or stop;
- Apply for and get benefits for eligible family members, even if your family includes

other members who are not eligible because of immigration status (you do not have to provide information about family members who are not applying for CalFresh but you must report their income);

- Get CalFresh benefits within 3 calendar days if you qualify for Expedited Services.
- To get help filling out your application or any other form

If you need assistance, you may request a Reasonable Modification by:

- verbally to any employee at a DPSS office;
- calling the ADA hotline at (844) 586-5550; OR
- submitting a written request or ADA PUB 2, Request for Reasonable Modification to any DPSS employee. The form and the mailing address are at <http://dpss.lacounty.gov/wps/portal/dpss/main/programs-and-services/civilrights/ada>

1. Fair Hearing

You have a right to a “fair hearing” if you feel you were unfairly denied benefits or unable to correct any mistakes with your benefits. If you appeal within 10 days or before the action takes effect (whichever period of time is longer), in most cases your benefits will continue until the matter is resolved. You have a right to look at your own case file and read a copy of the CalFresh program rules if you have a dispute with the county. If you need help, contact the Legal Aid Foundation of Los Angeles at (800) 399-4529, Neighborhood Legal Services at (800) 433-6251.

2. Lost or Stolen EBT Card

You must report a lost, stolen or demagnetized card immediately to the EBT 24-hour Customer Service Center (877) 328-9677. Once reported, the card will be deactivated right away. This will prevent anyone else from accessing the benefits on the card. A new EBT card should be issued right away and may receive it by mail within three business days. You can also visit any DPSS district office to request a replacement card. You can ask to speak to a supervisor if the DPSS district office denies you a replacement EBT card. If your benefits are stolen, report it to DPSS right away and contact the Legal Aid Foundation of Los Angeles at (800) 399-4529.

Farmer's Markets That Accept CalFresh in LA County

This is a partial list of farmers markets that accept CalFresh in LA County. Markets with a * offer the Market Match program, where low income customers can get \$5- \$10 bonus dollars for fresh fruits and vegetables, while supplies last. More markets: www.fmfinder.org

* **Adams & Vermont** Wed. 2-6 pm
1432 W. Adams & Vermont (St. Agnes)
Alhambra Sun. 8:30 am-1 pm
100 S. Monterey & E. Bay
***Altadena** Wed. 3-7pm
600 W. Palm
***Atwater Village** Sun. 10 am-2pm
3250 Glendale Blvd., Wells Fargo lot
***Baldwin Hills/Crenshaw** Sat. 10am-3pm
3650 M.L.K. Jr. Blvd
Bellflower Mon. 9 am-1 pm Simms Park
***Boyle Heights: Livingwell Farmers Market** Thurs 10 am-2:30 pm @ White Memorial, 1720 E Cesar E Chavez Ave
Burbank Sat. 8 am-12:30 pm
3rd St./Orange Grove Ave.,
***Carson (at Kaiser Permanente)** Wed 9 am-1 pm
18600 S Figueroa St
***Central Avenue (LA)** Thur. 12pm-5pm
4401 Central Ave.
Cerritos Sat 8 am-12 noon
17870 Park Plaza Dr. @ Performing Arts Center
***Dominguez Hills** Tues 9 am-2 pm
1000 E Victoria (Cal State DH campus)
***East Hollywood** Mon 3:30-7:30pm & Thurs. 3:30-7:30pm,
Western & Hollywood Red Line Station
***East LA** Sat. 9 am-2 pm, 4801 E. 3rd
***Echo Park** Fri. 3-7:30 pm
1125 Logan St.
El Sereno Fri. 4pm-8pm
Huntington Drive/ Maycrest
***Encino** Sun. 8 am-1 pm
17400 Victory Blvd Van Nuys

***Gardena** Sat. 8 am-1 pm.
13000 South Van Ness.
***Gardena(at Kaiser Permanente)** Mon 9 am-2 pm
15446 S Western Gardena
Glendale Thurs. 9:30am-1:30pm
100 Block North Brand Blvd.
***Harbor City @Kaiser Permanente** Wed. 8 am-2 pm
25825 S Vermont Ave
***Historic Downtown LA** Sunday 9 am-2 pm,
5th St. & Spring
***Hollywood** Sun. 8 am-1 pm
Ivar between Selma & Hollywood
***Huntington Park** Wed. 9:30am-1:30pm
Salt Lake Park, Bissell/Florence Ave
La Puente Thurs. 3-8 pm,
Martin Park
* **Long Beach** (Bixby Knolls) Thurs. 3-6:30pm
46th St and Atlantic Ave
* **Long Beach (Downtown)** Fri. 10 am-4 pm,
5th st. on Promenade
***La Cienega** Thurs. 2-7:30 pm
1835 S. La Cienega Blvd
Lincoln Heights Wed. 3-8 pm
N.Broadway & Daly
***Mar Vista** Sun. 9am-2pm
Grandview/Venice Blvd
***MLK Campus** Wed. 9 am-2 pm
680 E 120th St
***Monterey Park** Thurs. 4 pm-9 pm
1950 Wilcox Ave.
Motor Ave Sun 1- am-3pm,
National & Motor
***Newhall** Saturday 8:30 am-12:30 pm,
Lyons & Railroad
***North Hollywood** Saturday 10 am-2 pm,
5255 Bakman Ave

Norwalk Tue. 9am-1pm
Alondra/Pioneer
Old L.A. (Highland Park) Tue. 3 pm-8 pm
North Figueroa St. / Avenue 58
Paramount Fri. 9:30 am-1:30 pm
Progress Park, 15550 Downey Ave.
***Pasadena** Tue. 8:30am-12:30pm
E. Villa & Garfield:
Pasadena Sat. 8:30 am-12:30 pm
Sierra Madre & Paloma
Pershing Square Wed. 9 am-1 pm
***Pomona** Sat. 7:30-11:30 am
Garey Ave. & Pearl
***Rosemead** Mon. 4 pm-8 pm
8838 E. Valley Blvd (April-Sept)
***San Dimas** Wed. 4pm-8pm
245 E. Bonita Ave.
***Santa Monica** Sat. 8 am-1 pm
Cloverfield & Pico
Sun. 9:30 am-1 pm
2640 Main Street
***South Gate** Mon. 10am-3pm
4855 Tweedy Blvd. (inside parking lot at South Gate City Park)
Studio City Sun. 8am-1pm
Between Laurel Cyn. Blvd./ Ventura Blvd
Torrance Tues & Sat. 8 am-1 pm
2200 Crenshaw Blvd
***Wellington Square** Sun. 9am-1pm
4394 Washington Blvd.
***West Covina** 195 S. Glendora Ave
Sat. 8 am-1 pm
***West LA @ Kaiser** WEd. 9 am-2:30 pm
6041 Cadillac Ave.
Whittier Uptown Fri. 8am-1pm
Philadelphia/ Bright (SW Corner)
***Wilmington** Tues 8 am-2 pm,
470 Hawaiian Ave

Free and Low Cost Food

Food Pantries and Free Meal Programs

Food pantries are places that give food to people in need. Most food pantries are volunteer private organizations that can make their own rules about who can be served. Most of them are limited to serving people in certain areas and for one to four times a month. They may require some kind of identification and proof that you are low income. Generally, food pantries never have as much as is needed. Foods

distributed most often include canned foods, rice, beans, bread, cereal, and fresh fruits and vegetables.

LA Regional Food Bank works with over 600 agencies in LA County and operates programs including food boxes for seniors, distribution of fruits and vegetables, mobile food pantries, and backpacks of food for children. Learn more and find programs near you:

- www.lafoodbank.org/get-help/pantry-locator
- www.lafoodbank.org/programs

Food Finders collect leftover food from grocery stores and restaurants for redistribution to over 400 agencies: <https://www.foodfinders.org/food-pantry-locator/>

Westside Food Bank serves locations on the West side of LA County: westsidefoodbankca.org click on "Need Food Assistance"

Other websites for food resources:

- 211 referral line or 211la.org
- www.1degree.org
- www.foodoasis.la

Free meals including hot meals, soup, sandwiches and other prepared foods are offered by many private volunteer groups and churches. The frequency of the meals varies from daily in some places to once a month. To find out more about getting



Food

meals or volunteering, contact 211 or some of these agencies:

The Burrito Project

www.theburritoproject.org

Food on Foot (Hollywood)

www.foodonfoot.org

Hollywood Food Coalition

www.hofoco.org

Hope-Net

(Wilshire area churches, mosques and synagogues) www.hopenetla.org

Monday Night Mission

www.facebook.com/mondaynightmission

Community Gardens

You can grow some of your own nutritious vegetables. You can garden in your yard, in containers, in school-yard projects, and in community gardens. There are over 85 community gardens in Los Angeles County. To find out where community garden space is available, or to get materials, seeds, and advice on gardening, contact:

LACC Green Bank

(213) 362-9000 x 201.

LA Community Garden Council

<http://lagardencouncil.org/>

Common Ground

(626) 586-1981

Community Services Unlimited

www.csuinc.org

Composting: LA Compost

www.lacompost.org/

LA City Sanitation Department:

lacitysan.org/compostworkshops

Fresh Fruits and Vegetables at Low Cost

Food Forward Produce Pick-Ups provide fresh fruits and vegetables, free of charge, to families, individuals, and communities facing challenges in getting fresh produce. See foodforward.org/about/produce-pick-ups/ for an updated list. Currently (January 2020) the program operates:

WLCAC, 10950 S Central Ave, Los Angeles, CA 90059 Every 1st and 3rd Wednesday of the month at 12:00 pm

John C. Fremont High School, Towne Ave at 79th St, Los Angeles, CA 90003

Every 2nd and 4th Wednesday of the month 12:00-4:30 pm

Morningside High School, 10500 Yukon Ave, Inglewood, CA 90303 Every 3rd Friday of the month at 3:00 pm

Simi Valley Community Garden, 1636 Sinaloa Rd, Simi Valley, CA 93065

Every 4th Tuesday of the month 2:00-4:00 pm

Farmers Markets That Accept CalFresh

Benefits: See previous page for partial list or use www.fmfinder.org. Many of these markets also participate in the Market Match program (see following)

The Market Match Program

(operated in LA County by Hunger Action LA, SEE-LA, Model Neighborhood Program, and Social Justice Learning Institute) offers people who receive CalFresh and at some markets WIC up to \$10 in bonus money weekly when they spend \$5 to \$10 of their own money or benefits at the participating market. The program will continue as long as funding lasts. Markets offering the program are indicated in the chart on the previous page. Please call for more info: (213) 388-8228 or visit fmfinder.org to see more markets or new markets that have been added.

The Senior Farmers' Market Nutrition

Program provides low-income seniors with vouchers that can be used to purchase fresh fruits, vegetables, honey and herbs at Certified Farmers' Markets (CFM). Some Senior Centers sites offer and distribute these vouchers, usually beginning in May or June. Call (213) 738-4004 for a list of locations. **WIC** offers similar vouchers to families with children age 5 and under once per year.

Revolutionary Autonomous Communities

(RAC) distribute fruits and vegetables free at MacArthur Park on Sundays from 10 am to 5 pm, SW corner of Wilshire Blvd and Park View Ave

LA Community Action Network Organic

Stand & Community Marketplace: LA CAN, 838 E. 6th St Thursdays 10 AM-2 PM. Very low cost organic fruits and vegetables. Free delivery in Skid Row.

Village Market Place operated by Community Services Unlimited has produce for 50% off for EBT shoppers: 6569 South Vermont Avenue, Los Angeles, CA 90044. www.csuinc.org

Everytable: prepares healthy, balanced meals at low cost. www.everytable.com

Locations:

Baldwin Hills 3650 W MLK Blvd LA

South LA 1101 W. 23rd St. LA

Cal State LA 5151 State University Drive

Compton 253 E. Compton Blvd

Watts 1633 E. 103rd St.

Senior Group Meals

Anyone age 60 and over can participate in **congregate meal programs**, regardless of income. Spouses of participants can also get meals, no matter what their age.

There are about 200 sites for congregate meals throughout L.A. County. Some programs are able to provide transportation to the meal site or can send meals home for people who are temporarily ill or homebound.

You can get help to locate a program by calling (213) 738-4004 if you live anywhere in the City or County of Los Angeles. Participants cannot be required to pay for meals. However, a contribution to help support the program is often suggested. Some group meal programs are authorized to accept food stamps.

Meals for Homebound Persons

Meals on Wheels groups deliver meals regularly to those who are homebound. Each group sets its own rules about how many meals will be served and about the days and times that meals are available. Most programs require some evidence that participants are unable to cook or shop due to illness, frailty, or disability. Some programs can provide for special diets. You cannot be required to pay for meals if the program is federally funded, but sponsoring groups will ask for a small contribution. Some meals-on-wheels programs are authorized to accept food stamps. To find out about meals-on-wheels anywhere in Los Angeles County, call (213) 738-4004.

Project Angel Food is a private agency that delivers free hot meals to homebound people with AIDS and other illnesses. They have same day service in Venice, East Los Angeles, Pasadena, North Hollywood, Silver Lake, and South Central. Call (323) 845-1800 for meals.

Project Chicken Soup (PCS) prepares and delivers free, nutritious, kosher meals to people in the greater Los Angeles area living with HIV/AIDS, cancer and other serious illnesses, and who are unable to prepare or access their own meals due to their health status. Anyone living outside the service delivery area may come to the kitchen to pick up meals. To apply visit: www.projectchickensoup.org or call: (310) 836-5402.

WIC

WIC (officially called the Special Supplemental Nutrition Program for Women, Infants and Children) is a nutrition program that helps pregnant women, new mothers, infants and young children under 5 years of age to eat well and stay healthy. **WIC IS FREE** - you will never have to pay for any WIC services.

Who Can Get WIC?

- Women who are pregnant, breastfeeding or just had a baby
- Women who have lost a pregnancy, or suffered the loss of a newborn, or stillbirth
- Children under 5 years old (including foster children and children raised by others)
- Low to moderate income – meaning that your “gross income” (your income before taxes and deductions) is below the following:

Household Size	Income Annually	Income Monthly
1	23,107	1,926
2	31,284	2,607
3	39,461	3,289
4	47,630	3,970
5	55,815	4,652
6	63,992	5,333
7	72,169	6,015
8	80,346	6,696
For each additional household member, add:		
	+8,177	+682
This chart is accurate until June 30, 2020. If you are pregnant, add 1 to the number of people in your household.		

You also qualify for WIC if your household receives CalFresh, CalWORKs or full Medi-Cal.

What Are The Benefits?

- An EBT card to buy healthy foods such as low-fat milk, fruits and vegetables, whole grain foods, juice, eggs, cheese, cereal, dry beans and peanut butter.

- Information about nutrition and health to help you and your family eat well and stay healthy. WIC participants are regularly scheduled to attend meetings and talk with WIC counselors about healthy weight, good snacks, smart food shopping, physical activity and how to feed their families.

- Support and information about breastfeeding. You can share your concerns with WIC counselors and other mothers. In some WIC programs, breastfeeding women can visit WIC any time they have a question, a problem or need support. Some WIC sites also have Breastfeeding Peer Counselors and Breastfeeding clinics that can help mothers with extra breastfeeding support.

- Extra food for women who fully breastfeed their babies for a whole year.

- Help in finding health care and other community services.

- Checks for iron-fortified infant formula and cereals for babies.

- Vouchers to buy fruits and vegetables at farmer markets. Coupons are limited. Ask about the Farmers' Market Nutrition Program (FMNP) vouchers.

Where Can I Find WIC?

WIC has over 100 local offices in Los Angeles County located in neighborhood shopping areas, health clinics, hospitals and community centers. Some doctors or clinics may refer you to WIC but even if they do not, you should call WIC. WIC staff will work with you to see if you are eligible to be on WIC.

Call the toll-free number below for more information and to find the WIC office closest to your home.

(888) WIC-WORKS

(888) 942-9675

Or visit: www.cdph.ca.gov/programs/wicworks

The New WIC Card

WIC is changing from a paper voucher system to an EBT card, similar to the CalFresh program. This will happen in 2020 in Los Angeles County.

- The WIC card is a different card from the CalFresh card.
- Download the WIC app on your smart-phone's app store. Search for “California WIC”. This will enable you to log in and use more of the app's feature.
- The WIC Card Video will show you how to use your new WIC card at the store, check your balance and more. Go to www.myfamily.wic.ca.gov to play the video.

Child Nutrition

Can My Child Get Free or Low Cost School Meals?

All low-income students are eligible for free or very low-cost school meals, regardless of immigration status. Children who eat breakfast and lunch at school learn better and are usually sick less than other children. All public schools and some private and parochial schools offer subsidized breakfast and lunch programs.

Some schools offer free meals to all students, regardless of family income.

Many schools offer breakfasts in the classroom, at recess, or on the bus.

Your child qualifies for free or reduced-price meals if your gross family income per month (income before taxes or deductions) is below these levels:

Family Size	Free Meals	Reduced Price Meals
1	\$1,354	\$1,926
2	\$1,832	\$2,607
3	\$2,311	\$3,289
4	\$2,790	\$3,970
5	\$3,269	\$4,652
6	\$3,748	\$5,333
7	\$4,227	\$6,015
8	\$4,705	\$6,696

(Accurate until June 30, 2020)

1. How Do I Apply?

If you receive CalWORKs, CalFresh, or the Food Distribution Program on Indian Reservations, the only information you need is your County case number, and all children in your household automatically qualify for free meals. Additionally, all children certified as homeless or in foster care qualify for free meals.

You should receive an application for the meal program in your own language at the beginning of the school year or whenever your child transfers. You can also ask for one at any time from the school office, because if your income goes down during the year, your child may become eligible. You will have to list the total income of your household, the names of household members, and the Social Security number

of the adult signing the application. If you do not have a Social Security Number, just write "none". You are not required to have a Social Security Number or apply for a number or give a reason for not having one.

Sometimes the school asks for proof of your income. All information gathered is confidential and cannot be shared with other government agencies. If the information you give on the application shows that you qualify, your child can begin receiving free or reduced-price meals immediately. Reduced-prices are set by the school district, but the law states that breakfast cannot cost more than 30 cents and lunch not more than 40 cents for reduced price meals. The district can charge whatever it wants for full price meals.

Recent changes in the law require schools to offer free drinking water and to increase the amount of vegetables and fruits available.

Parents can improve the cafeteria programs in many ways. Eat at school with your child, encourage your child to eat breakfast and lunch at school, talk with your school's principal about moving breakfast in the classroom, and ask the food services administrators to participate in developing the menus.

2. Extra Food for Pregnant Students

At many schools, pregnant and breastfeeding students can get extra food at breakfast or lunch, or an extra snack. To be eligible, the student must provide some written verification that she is pregnant or breastfeeding from a doctor, nurse, midwife, clinic, WIC or Cal-Learn program.

3. After School Snacks and Supper Program

After school snacks are available at after school programs for free at many schools, where more than half the students would qualify for free or reduced price meals.

The After School Supper Program is offered to students under age 18 and is available at 600 schools in the LA Unified School District. Students do not have to be enrolled in either the school or in the

afterschool program to receive supper. For more information see cafe-la.lausd.net or call (213) 241-6422.

Free Summer Lunch for Kids

All children and teens ages 18 and under can eat free, nutritious meals during the summer or any time when school is out through the **Summer Lunch Program**. No application or other kind of paperwork is required. Meals and snacks are served at schools, parks, and recreation centers. Some parks operate year-round and can feed your children when they are "off-track" from year-round schools. The Summer Lunch Program is located in areas where at least half the children qualify for free- or reduced price-meals in school. However, any child under 19 can eat there free regardless of where they live or their family's income. If the child is physically handicapped, the age limit is 21.

Some residential or day camps and homeless shelters offer the program, but you may have to fill out an application.

To find out where your children can eat free when they are not in school: call **211, Los Angeles County Infoline**.

If you want to learn to start a free site in your area, call the **California Food Policy Advocates** at (213) 482-8200.

What Are My Rights?

The law says that children who get free or reduced-price meals cannot be treated differently than those who get full-price meals. No separate lines, different meals or meal tickets, required work, or other types of discrimination are allowed.

Ask the school, child-care sponsor, or summer recreation program sponsor for a "fair hearing" if you apply and are unfairly denied. Also request the hearing if you receive notice that your benefits will be cut. By doing so within 10 days, your child's benefits will continue until the hearing takes place.

Medi-Cal

Medi-Cal is California's program that offers free or low-cost health coverage for California residents who meet eligibility requirements. The federal name for the program is Medicaid. Medi-Cal covers low-income children and adults, families, pregnant women, seniors, and people with disabilities.

MEDI-CAL INFORMATION: (877) 597-4777

The state and federal government fund Medi-Cal. There are many Medi-Cal programs with different rules. Depending on which program you qualify for and how much money you make, Medi-Cal may pay for all your medical expenses or you might have to pay a share of the cost when you access health care services in a particular month. If you have Medi-Cal with a share of cost, you may qualify for reduced cost insurance through Covered California.

Can I Get Medi-Cal?

You can get free Medi-Cal if you have low income and are a California resident (which means live in California.) Adults aged 19 to 64 who have income below 138% of poverty (see chart on page 52) qualify for free Medi-Cal. Your immigration status will determine if you get full Medi-Cal or restricted Medi-Cal. Pregnant women and people with a diagnosis of breast or cervical cancer may qualify for Medi-Cal at a higher income level.

Medi-Cal is divided into "MAGI" and "Non-MAGI" Medi-Cal. In general, MAGI Medi-Cal includes: childless adults between the ages of 19 and 64 who are not blind or disabled; pregnant women; parents/caretaker relatives; and children up to age 19. Eligibility for these individuals is based on reported income. Property and resources are not counted under MAGI Medi-Cal. Other individuals who are aged, disabled, or in a skilled nursing facility may be eligible under Non-MAGI Medi-Cal. Property and resources are counted under Non-MAGI. All other groups of people who get Medi-Cal qualify for a "Non-MAGI" program and will have resources counted.

People who receive Supplemental Security Income/State Supplementary Payment (SSI/SSP), Foster Care, and CalWORKs are automatically eligible for Medi-Cal benefits and don't have to apply separately.

Immigration Status

California children under 19 can get full-scope Medi-Cal regardless of their immigration status. Most legal immigrants can get Medi-Cal to cover all their medical and health care needs. Survivors of domestic violence or those in the process of adjusting their legal status might also be able to receive Medi-Cal. (See page 64 Guide for Non-Citizens).

If you are in the U.S. and have Deferred Action for Childhood Arrivals (DACA) status, you can qualify to receive full Medi-Cal benefits.

If you are undocumented, and a California resident, and meet other Medi-Cal requirements, you may qualify to get restricted Medi-Cal benefits. Restricted Medi-Cal means that you can get Medi-Cal to pay for emergency services, pregnancy-related care, family planning, kidney dialysis, and long term care services.

How Do I Apply?

1. Get an Application Form

- You can get an application form mailed to you by calling the DPSS toll-free number at (877) 597-4777.
- You can get a Medi-Cal application at a DPSS Office. (See page 71 "Welfare Offices.") or at many hospitals and clinics, whether they are private or county-run.
- A few schools and clinics in Los Angeles County help children and their families apply for Medi-Cal.
- Visit a Certified Enrollment Counselor (CEC). These counselors work for community organizations or insurance brokers and can help you apply on line or by mail. All CECs are certified by Covered California to help consumers in person. Visit www.coveredca.com/enrollment-assistance to find an enrollment counselor near you or see the list of agencies on page 51.

2. Apply Online

You can apply online using Your Benefits Now!, or Covered California. Your Benefits Now! is a website for Los Angeles County residents to apply for and view their benefits online. Visit: www.dpssbenefits.lacounty.gov Covered California is a statewide marketplace where you can shop online or over the telephone for insurance coverage. Visit: www.coveredca.com or call (888) 975-1142.

3. Child Health and Disability Program (CHDP) "Gateway"

Children who receive a CHDP visit are screened for temporary eligibility for Medi-Cal. If a child is eligible, he/she is pre-enrolled in temporary, full-scope Medi-Cal at no cost for up to 60 days (for the month of the visit and the month after) See pg. 52, "Child Health and Disability Program".

4. Deemed Eligibility for Infants

Infants who are born to mothers who were receiving Medi-Cal at the time of birth can get Medi-Cal benefits up until the age of one, regardless of any increase in income for their family. At age one, an eligibility evaluation form must be completed. However, you must contact DPSS when your baby is born or use a "Newborn Referral Form" or go to a clinic with CHDP to start your child's Medi-Cal benefits (see #11 "If you are pregnant", page 46). For questions or problems you may contact MCH Access (213) 749-4261 or the Health Consumer Center of Neighborhood Legal Services at (800) 896-3203.

5. Complete the Form

Help is available if you need it to complete your application. The Medi-Cal office must provide interpretive translation services and assistance if you have a disability that makes it hard for you to complete the application. Ask any employee for a "Reasonable Modification" or call the ADA hotline at (844) 586-5550. If the worker needs more information, you will be given a list of necessary documents and a due date to mail it back. A "return appointment" is not necessary.

If you do not have all the necessary documents, you or someone you know may sign a statement explaining why not. You may be able to receive benefits while you continue to gather the required information. The Eligibility Worker should help you get some of your missing papers.

Give DPSS copies, not originals, of any documents. Make a copy of the application for yourself! Then hand in or mail in the form. Get a receipt if you hand in the form. If you mail the form it is a good idea to send it by certified mail.

► 6. Provide Documentation

DPSS Medi-Cal offices are now able to electronically verify required information to determine if you can get Medi-Cal. If they are not able to verify some or all of the required information, then you will have to provide physical documentation to them. The following items are required to determine if you are eligible. If you are eligible for MAGI Medi-Cal, you may not have to show documentation of cars, property or bank accounts if you are under the age of 64.

- Identification with your name and current address on it. If you lack ID, you can also fill out a form called “PA 853” and swear that you are who you say you are, or documents to verify income or disability status may also serve as proof of identity.
- Social Security Number or Card (or proof of application for the card) only for those requesting "full-scope" benefits.
- Proof of income (like check stubs, a copy of your tax return, or monthly bank statements if you have direct deposit or a self-affidavit (statement of income if you are paid in cash or do not have any other way to prove income))
- Proof that you live in Los Angeles County (a document that has your name and an address on it) for each adult on the application.
- Proof of citizenship or acceptable immigration status for each person on the application who has declared acceptable immigration status. If you are a parent applying for children only, you do not need to submit proof of your immigration status.
- Vehicle registration (for non-MAGI Medi-Cal only, if you are over age 65 or have Medicare, and if ownership of more than one vehicle is declared.)
- Bank Statement if you are over age 65, disabled, eligible for non-MAGI Medi-Cal, or have Medicare

► 7. Cooperate with Child Support Services

If one parent is absent, most people will have to cooperate with DPSS and a county agency called the Department of Child Support Services (DCSS.) You must

provide information you have about the other parent such as an address or Social Security Number, to establish who your child’s absent father or mother is and whether that parent can provide the child with medical insurance.

If you do not cooperate with DCSS, you will be denied Medi-Cal (except under certain conditions described below), but your children do not lose coverage. Cooperation is not required if applying only for the children. Pregnant women do not have to give information to DCSS until 60 days after the birth of the baby.

Under some circumstances you have good cause for not cooperating. For example:

- You are cooperating in good faith, but are unable to identify or assist in locating the other parent
- You are afraid of the absent parent, you or your children may be in danger, or you are a victim of domestic violence
- Rape or incest has occurred
- You are planning to place the child for adoption

► 8. Wait for Approval

Normally, the Medi-Cal office will approve or deny your application within 45 days of receiving it, except for the faster processes for infants and children, described on pg. 45. If the state must evaluate a disability, the approval or denial can be delayed up to 90 days. Call (877) 597-4777 or a legal aid office for help if you are not contacted within 45 days about your Medi-Cal application. If a caseworker determines that you are not eligible, or you get a Notice of Action that you do not qualify, you can appeal the denial of benefits (see pg. 67 Hearings and Complaints).

► 9. The Medi-Cal Card

Once you have been “approved,” your permanent plastic Medi-Cal card is mailed to your address. It is called a “Benefits Identification Card” or BIC. Each person listed on your application will get one, even if they aren’t eligible for Medi-Cal, because if the family must pay a monthly Share of Cost, the medical expenses of every person listed on the application can be used to meet the Share of Cost. If you don’t get your plastic card by the end of the month, or if you lose your card, contact the Medi-Cal office. If you have received a Medi-Cal card in the past, do not throw it away; you can use the previous card.

► 10. Authorization for Service under “Regular” Medi-Cal

When you are not in a health plan, before some medical services can be performed for you the state has to give an authorization for the service. This does NOT apply to emergency care, office visits, and most drugs. It is the job of the doctor, pharmacist, or other service provider, not the patient, to get this state authorization. However, if the state denies or changes the authorization, the state will notify you and your doctor. You can appeal any unreasonable delay, denial, reduction, or termination of care. (See pg. 67 "Hearings and Complaints") for information about grievances and complaints.

► 11. If You Are Pregnant

Any pregnant woman can be “presumed eligible” at certain clinics and doctors’ offices and given limited pregnancy-related Medi-Cal immediately called “PE Medi-Cal” without proving pregnancy or providing information on property, car, or resources. PE Medi-Cal will cover pregnancy loss or abortion, or will help you get early prenatal care, lab tests and medication. You still have to apply for Medi-Cal if you want to continue your Medi-Cal benefits. Even to get full-scope Medi-Cal you have 60 days to provide the expected date of delivery of the baby.

When you apply for Medi-Cal during pregnancy, you should add your spouse or any other eligible children to your case. If a pregnant woman has too much income to be eligible for free Medi-Cal, she may be eligible for a program called MediCal Access Program (MCAP). MCAP also covers pregnancy, pregnancy loss or abortion, and dental care. Call MCAP at (800) 433-2611, or apply at www.coveredca.com or with one of the agencies listed on page 51.

If you are pregnant and have Restricted Medi-Cal, sometimes called Pregnancy Medi-Cal, you have the right to receive all medically necessary medical and dental benefits. If you have questions or problems with your coverage contact Maternal and Child Health Access at (844) 868-0252

As soon as the baby is born call the DPSS customer service center at (866) 613-3777 to report the name and birthdate to add the new baby to your family case record. The baby needs his or her own card by the end of the month after birth. But, you should not have to fill out a new Medi-Cal application for your baby. If you

have trouble reaching your worker to tell the worker about the birth of your baby, some WIC offices and clinics have “Newborn Referral Forms” you can fax to DPSS. Or you can get one yourself on the computer at <http://dhcs.ca.gov/formsandpubs/forms/Forms/mc330.pdf> and download the form called, “Newborn Referral.” It is form number MC 330.

You don’t have to provide a birth certificate or Social Security number until the baby’s first birthday.

If you take your baby to a CHDP provider, your baby can also get a card issued through the “CHDP Gateway”(see pg. 52 Child Health and Disability Program.)

► 12. If You Are Disabled

If you are disabled you may apply for regular Medi-Cal as an adult with income below 138% of the Federal Poverty Level. If you want to be evaluated for the Seniors and Persons with Disabilities Medi-Cal program you will need a disability determination. To find out which program would be best for you call: MCH Access (213) 749-4261 or the Health Consumer Center of Neighborhood Legal Services at (800) 896-3202.

► 13. If you are Diagnosed With Breast or Cervical Cancer

If you are a man or woman diagnosed with breast cancer or a woman diagnosed with cervical cancer, you can get free Medi-Cal immediately, and during the entire time you are receiving cancer treatment, if your monthly income is at or below 200% of the Federal Poverty Level through the Breast and Cervical Cancer Treatment Program (BCCTP). There are no resource limits for this program. One of the requirements for BCCTP is that you have no other health insurance including full-scope no share-of-cost Medi-Cal or Medicare. Please refer to DHCS website for information about the BCCTP: <http://www.dhcs.ca.gov/services/medi-cal/Pages/BCCTP.aspx>

To get on Medi-Cal right away (called “Accelerated Eligibility”), you must go to a provider who participates in this program to file an internet application. You should state that you want the internet application to serve as a Medi-Cal application so you will be eligible for the program for a longer period of time. To find a health facility near you that participates in this program or who will screen you for cancer, call the State Office

of Women's Health at (800) 824-0088. Depending on your age or immigration status, you may get “full scope” (regular) Medi-Cal or you may get time limited Medi-Cal for cancer-related services only 18 months for breast cancer and 24 months for cervical cancer.

An additional 18-month or 24-month period of coverage with a recurring breast or cervical cancer diagnosis, regardless of cancer location, is available to State-funded BCCTP recipients whose original period of coverage has expired. Individuals with a recurrence must meet all applicable eligibility requirements to receive an additional period of coverage. Individuals with a break in services may have to reapply. Call (800) 824-0088 for more information.

► 14. Retroactive Benefits

If you had medical, dental or pharmacy services from a Medi-Cal provider in the three months before you applied for Medi-Cal, ask your worker for a form to apply for “retroactive benefits.” You can request coverage for the 3 retro months during the application or you have up to 12 months from the retro month to apply for coverage. Both the paper and on-line application sites will ask you if you had medical expenses in the last three months. If you did, check Yes. If you were eligible for Medi-Cal during those three months, Medi-Cal may pay those bills. If you’ve already paid the bills and Medi-Cal covers the services, your clinic, doctor, dentist, or pharmacist must provide the refund to you. If you have trouble getting a refund, call The Health Consumer Center at (800) 896-3203 or (800) 896-3202.

Income Limits

Your countable income determines whether or not you can get Medi-Cal for free or whether you have to pay a “Share of Cost.” (You only pay a "share of cost" in months when you actually use services.) The different Medi-Cal programs have different rules for how income is counted and which deductions to allow. In general, adults under age 64 and children may qualify for what is called a "MAGI" Medi-Cal program. The rules for these programs count the income of the person filing taxes in the house and some dependents. For information call Legal Aid (pg. 69) or the Health Consumer Center (800) 896-3202.

Adults aged 65 and older and some disabled people may qualify for "Non-MAGI" Medi-Cal. Under some programs, only the income of the family unit being given the Medi-Cal counts, not of others who may live in the house but aren't part of the application.

Elderly (65 and older), blind or disabled persons can deduct:

- \$20 from any income
- \$65 from earned income
- Half of any remaining earned income
- Any health insurance premiums paid by you.

Some elderly or disabled people, even though not receiving SSI, may get free Medi-Cal if the countable monthly income is less than \$1249 (an individual) or \$1691 (a married couple, both disabled or elderly). This is called the “Aged and Disabled Federal Poverty Level Medi-Cal program.” You cannot get free Medi-Cal if your income is even a dollar over these limits. Special income deductions and exemptions apply, so even if you think your income may be too high, you can apply and check with Health Consumer Center at 800-896-3203 or Legal Aid (800) 399-4LAW.

Special low-cost Medi-Cal for working disabled persons:

If you are a disabled person with share of cost Medi-Cal you may be able to get cheaper Medi-Cal with a low monthly premium if you are working. Your job can be any job that pays you income, no matter how small. This program is called the “250% Working Disabled Medi-Cal” program. If you qualify, you will have to pay a monthly premium that goes up the more "countable earned income" that you have. These monthly premiums range from \$20 to \$250 for an individual and \$30 to \$375 for a couple (both receiving 250% benefits). Again, special income deductions and exemptions apply, so apply even if you think your income may be too high and check with the Health Consumer Center (800) 896-3203 or Legal Aid (see pg 69).

Share of Cost

Household members that do not qualify for a free Medi-Cal program must pay, or agree to pay, a "Share of Cost" for each month that they have a medical expense. Medi-Cal will then pay the rest of the bill for covered services that month.

You do not have a Share of Cost if:

- You are in one of the groups that receive free Medi-Cal (such as those getting CalWORKs, SSI, foster care, adoption assistance, or MAGI Medi-Cal)
- Your countable income is below the limit in the chart on page 52.

If you have Medi-Cal with a Share of Cost, your Share of Cost starts over every month. You don't have to pay anything in months that you have no medical expense. You can use your past medical bills and the medical bills of family members listed on your application to meet your Share of Cost, including unpaid bills that medical providers are trying to collect from you. You cannot count the same billed item or service twice, but you can carry the balance of an unpaid bill over to later months if a bill is for more than your Share of Cost. If your income goes down, tell your worker so that your "Share of Cost" will go down.

▶ 1. Share of Cost for Children

Some children whose family income is too high for free Medi-Cal can get Medi-Cal with a Share of Cost. (These families may qualify for an Advanced Premium Tax Credit under Covered California: see "Health Care Law" page 53.)

An increase in income is not counted for children up to age 19 who are on no-cost Medi-Cal until their next scheduled annual redetermination. So, even if the child's parents start making more money and the parents have to start immediately paying a Share of Cost as a result, the child still receives Medi-Cal for free until their next annual redetermination. Children whose family income is over the Medi-Cal limit should be screened for Covered California. Many children with share of cost have it by mistake. If your child has a Share of Cost call Health Consumer Center (800) 896-3202 to find out if it is a mistake.

▶ 2. Share of Cost if you have "Non-MAGI" Medi-Cal

To find out your monthly Share of Cost, start with your gross monthly income.

Include spouse or parent income, but not other people living in your house. Then subtract the need level for your family size on the chart on page 52. The balance is your monthly Share of Cost. For more information contact Legal Aid (Pg. 69). Adults under age 65 not receiving Medicare, whose family income is over the Medi-Cal limit, should be screened for Covered California. Many adults under age 65 with share of cost have it by mistake. If you have a share of cost call the Health Consumer Center (800) 896-3202 to find out if it is a mistake.

▶ 3. Share of Cost if you are over 65, blind or disabled

To find out your monthly Share of Cost, start by adding your earned and unearned income, and subtract \$20. Then subtract the need level amount for your family size in the chart on page 52. For more information contact Legal Aid (Pg. 69)

Resource Limits

Resources and property are not considered in the eligibility determination for MAGI Medical, but they are counted for Non-MAGI, and must not exceed the limits, based on family size, as shown below:

# in Family	Resource Limit
1	\$2,000
2	\$3,000
3	\$3,150
4	\$3,300
5	\$3,450
6	\$3,600
7	\$3,750
8	\$3,900
9	\$4,050
10 or more	\$4,200

The home you live in, furnishings, personal items, and some non-term life insurance policies don't count. For "Non-MAGI" Medi-Cal, one car does not count. There are other exemptions if a vehicle is used as part of employment and for transporting a family member with a disability.

Staying On Medi-Cal

▶ 1. Once a Year Eligibility Form

People receiving Medi-Cal need to renew their Medi-Cal every 12 months. If you have MAGI Medi-Cal DPSS will try to automatically renew your Medi-Cal. If they can't they will send you a form in the mail

that needs to be completed to redetermine eligibility. This is called the Annual Medi-Cal Renewal. If you have Non-MAGI Medi-Cal DPSS will send you the form.

DPSS must give you at least 20 days to complete and return the form. If you don't return the completed form, DPSS will send you a written notice of action that they will reduce or stop your Medi-Cal benefits. If your form is incomplete, DPSS must first try to contact you by telephone and writing to get missing information before it stops or reduces your benefits. The form and verification requested must be provided within 30 days. If you send in your form within 90 days of being cut from Medi-Cal (due to failure to complete redetermination or provide verification) and that information show you were still eligible, DPSS must restore Medi-Cal benefits without making you reapply.

▶ 2. Reporting Changes for Adults

Adults must report to DPSS any significant changes that may affect their eligibility within 10 days after the change. You must quickly report to your worker if you move, begin making more money (or less money), someone moves in or out of your home or you are pregnant. Even if you report a change that hurts your eligibility, you have important rights before the DPSS cuts your Medi-Cal.

3. Losing Welfare Does Not Mean That You Lose Medi-Cal

If you leave CalWORKs due to a sanction, time limit, or make too much money, you do not lose Medi-Cal. If you lose your Medi-Cal after you leave welfare, contact your worker to find out how to get back on Medi-Cal. If you need further help, call the Health Consumer Center at (800) 896-3203 or Legal Aid for help and advice.

▶ 4. Transitional Medi-Cal (TMC)

You might be eligible for up to one year of free (no Share of Cost) Medi-Cal (called Transitional Medi-Cal or TMC) if you lost CalWORKs or MAGI Medi-Cal for Parents and Caretaker Relatives because you started to work and are earning too much money.

If you are eligible, during the first six months of TMC you and your family qualify for free Medi-Cal no matter how much income you have. After that, you remain eligible for TMC for the remaining six months if your income is not more than the limits in the TMC chart and if you comply with the reporting requirements.

Adults and children can get TMC for up to one year. You can receive TMC more than once in your lifetime, if you are receiving CalWORKs. If your income goes down you can qualify again for regular Medi-Cal. When children are no longer eligible for TMC they should be screened for the Medi-Cal Targeted Low-Income Health Program.

There are no "resource" or property limits for TMC. TMC requires regular status reports to be submitted. The report form is MC 176 TMC.

Income Limit for Transitional Medi-Cal	
# in Family	Gross Income Limit
1	\$1,926
2	\$2,607
3	\$3,289
4	\$3,970
5	\$4,652
6	\$5,333
7	\$6,015
(Accurate until May 31, 2020)	

▶ 5. Four Month Continuing Medi-Cal

If an adult loses CalWORKs because he or she starts receiving more child or spousal support, he or she can be eligible for free Continuing Medi-Cal, regardless of income, but just for four months. It is important that you submit a change reporting form explaining why you are no longer eligible for CalWORKs to help make sure you get Transitional or Continuing Medi-Cal. The children's free Medi-Cal continues until their next scheduled annual redetermination.

▶ 6. Former Foster Children

If you were in Foster Care on your 18th birthday, you may be automatically eligible for free Medi-Cal until you turn 26. To enroll, you can contact the Former Foster Youth Unit at (626) 313-5503 and (626) 313-5505. If you lose Medi-Cal, call the Alliance for Children's Rights (213) 368-6010 or the Health Consumer Center at (800) 896-3203 for assistance.

▶ 7. Keep Medi-Cal until DPSS Proves You Are No Longer Eligible

DPSS must send you a written Notice of Action at least 10 days before it discontinues, denies, delays or reduces your Medi-Cal benefits. (See pg. 67 Hearings and Complaints).

If a change occurs that impacts your ability to get Medi-Cal, DPSS must determine if you are eligible for any other type of Medi-Cal, before sending you a notice of action cutting off your benefits. They have to review your record for any missing necessary information. DPSS can send you a form that only asks for the information it needs; it cannot ask for information it already has or does not need to determine whether you are still eligible for Medi-Cal.

▶ 8. If You Move

Be sure to report your change of address to your eligibility worker. Keep using your Medi-Cal card. If you move to a new county, report the change to DPSS and also to the welfare office in the new county within 10 days. The counties should manage the transfer of your case. If you move to another county you may also have to change your managed care plan. To change your plan call Health Care Options at (800) 430-4263.

▶ 9. If You Were Billed Twice for a Medi-Cal Covered Service

The doctor or health service provider cannot bill both you and Medi-Cal for the same care. If you think your doctor has billed you unfairly, you should contact the Health Consumer Center at (800) 896-3203 or Legal Aid (800) 399-4529.

▶ 10. Lost or Stolen Cards

Notify your worker and a replacement card will be sent to you. If there is a medical emergency, you may receive a written notice of eligibility at your welfare office. The doctor can also look up your eligibility using your social security number and birthdate.

How Do I Choose My Care?

There are two ways to receive your medical care under Medi-Cal: "Fee for service" (regular Medi-Cal), or Managed Care (Health Plan). These are also called HMOs (Health Maintenance Organizations). Most Medi-Cal participants must enroll in a Health Plan. Health Plans must provide all the same benefits provided by fee-for-service Medi-Cal.

Medi-Cal recipients who may, but do not have to, enroll in an Health Plan include:

- Children in foster care or the Adoption

Assistance Program

- Children who receive Medi-Cal through the SSI Program AND are enrolled in California Children's Services (CCS)
 - People in an Indian Health Service Program.
 - Pregnant women during their Presumptive Eligibility period, or after they enroll in Medi-Cal, depending on their income level.
- Medi-Cal recipients who cannot enroll in a Medi-Cal Managed Care Health Plan :
- People who get Medi-Cal only for emergency and pregnancy related services (restricted Medi-Cal)
 - Recipients with a Share of Cost, restricted Medi-Cal or who also have one of the following; private insurance, or CHAMPUS PRIME HMO.

▶ 1. Fee-for-Service (Regular Medi-Cal)

In regular Medi-Cal you can use any doctor, clinic, hospital, pharmacy or other provider willing to accept Medi-Cal. If your doctor or clinic takes Medi-Cal they cannot bill you for any Medi-Cal covered services as long as you have Medi-Cal coverage. If your doctor or clinic does not take Medi-Cal, you must tell them that you have Medi-Cal before you get care. A provider cannot accept your Medi-Cal for some part of your care and then charge you money and refuse to bill Medi-Cal for other parts of your care, unless that provider does not provide that service under Medi-Cal. For example, a doctor cannot accept your Medi-Cal for your prenatal care but then refuse to bill Medi-Cal for your blood tests and try to charge you.

▶ 2. Managed Care ("Health Plan")

Medi-Cal requires that persons eligible to Medi-Cal with no share of cost join a managed care plan. Some exceptions apply. When you join a health plan, you must see the doctors, pharmacists and hospitals that are part of your plan. You must select a health plan and a primary care provider that is in the health plan. Unless you have an emergency, you must get approval for most of your care from your primary care provider. The health plan will receive money each month for your health care even if you don't get services. The health plan is responsible for providing or making arrangements for you to get all Medi-Cal covered services. You should be contacted for an appointment to see your doctor within four months of joining the health plan. You can contact Health Care Options (HCO) at (800) 430-4263 to enroll or change plans.

After you are in a health plan, you may still use your Benefits Identification Card (BIC) to get family planning, dental, and mental health services outside of the health plan. For questions contact Legal Aid (pg. 69) or the Health Consumer Center (800) 896-3202.

3.Dental Care

Dental care comes with Medi-Cal and is fee-for-service in Los Angeles unless you choose to join a dental plan. You don't get a separate dental card. In fee-for-service, you must get all your dental services from a dental provider willing to accept Medi-Cal. If you are in fee-for-service you can find a dentist by calling (800) 322-6384 Monday through Friday 8 am to 5 pm, or online at www.denti-cal.ca.gov. If you enroll in a dental plan, you will receive primary care from the dentist you selected. If you are in a dental plan and want to switch to fee for service dental care call Health Care Options at (800)430-4263 for help. All pregnant women on any kind of Medi-Cal are eligible for dental care, during pregnancy and the postpartum period.

4. How to Choose a Health Plan

When you first enroll in Medi-Cal you will get a packet in the mail from the state. The packet will contain a "Medi-Cal Choice Form" that must be filled out with the doctor and your health plan choice for each person in the family who is required to choose a health plan. Your packet will include a directory with some of the doctors, doctor groups, medical groups and health plan choices in your area. If you don't see your doctor you can call Health Care Options and ask for a county or other area directory, or just call your clinic and ask which plans they take.

Fill out the "choice form" and send it back to Health Care Options within 30 days. Keep the pink copy of the form for your records. Mail the form in the postage paid envelope provided, or send the form by certified mail. If you don't complete the form and return it within 30 days, the state will choose a health plan for you that may not be convenient for you.

To get a packet or more information, call Health Care Options at (800) 430-4263 or (800) 430-9009. The TDD line for hearing impaired is (800) 430-7077. If you have questions or problems call the Health Consumer Center at (800) 896-3203 for assistance. You may also get assistance in some DPSS offices.

It is very important to consult with any health care provider you already have and want to keep seeing before choosing a plan. You should also ask if you can keep going to the clinic, pharmacy and hospital that you want.

You and your other family members may choose to join the same health plan and chose the same doctor, called a "Primary Care Provider" (PCP), or you can choose different health plans and PCPs.

Once you select a health plan, you will be mailed a plastic health plan membership card to use when you need medical services. Enrollment usually takes 30-45 days. If you or your family need medical care before you receive the health plan card, you may use the regular State Medi-Cal Benefits Identification Card (BIC), or if you are already in an health plan and are just switching plans, use your current health plan until you are told you are enrolled in the new one.

People in the groups that may, but do not have to, enroll in a health plan will automatically get a packet in the mail even though they do not have to join a plan. You should not be asked to make a choice of a health plan when you apply or at your renewal. People who are already in a health plan when they apply for Medi-Cal should not get a packet in the mail. You may be asked to attend a "Health Care Options" talk. You do not have to go. If you go, you do not have to choose a plan that day unless you want to.

You will also receive a packet in the mail about dental managed care. Enrolling in a dental plan is optional; you don't have to enroll. If you choose not to enroll, you can still use your Medi-Cal card with any dentist who accepts Denti-Cal to get dental services.

5. Medical Exemptions and Continuity of Care

Most participants must enroll in a health plan; unless you apply for and receive a "Medical Exemption" in order to keep regular fee for service Medi-Cal. You may be able to get an exemption if you have a "complex medical condition" such as pregnancy, kidney disease, diabetes, HIV/AIDS, cancer, asthma, or multiple sclerosis, or receive skilled nursing services at your home, AND if the doctor or clinic that treats you is not part of any available offered health plan and you would lose them if you joined a plan .

The state is now making it very difficult to get medical exemptions . The state will instead ask the plan to offer the doctor a "Continuity of Care" contract with them for at least a year. Even if your doctor does not want to work with the plan, they may sign a contract to work just with you. You may need an advocate to assist you and your doctor. See "Good Advice" (pg. 69) for advocate listing.

You and your doctor must fill out a form called "Request for Medical Exemption From Plan Enrollment" (which is in the packet that you get in the mail) and send it to the state. Do this before the date you would have choose a health plan. If the state denies your exemption, file an appeal. You should be able to stay in regular Medi-Cal while a decision is made on your appeal.

The exemption is good for up to 12 months. After the 12 months, you will get another packet in the mail to complete, or you must request another Medical Exemption. You may call Heath Care Options if you have questions, or you can call the Health Consumer Center at (800) 896-3203.

6.Hearings, Grievances, and Leaving a Health Plan

If your health plan denies services or you are not satisfied with the services, you have many options. You can file a grievance with your health plan. Your health plan must tell you how to file a grievance. The health plan must resolve your grievance within 30 days, or less if you have an emergency. If you are still not satisfied complain in writing to the Department of Managed Health Care HMO Help Center, IMR Unit, 980 Ninth Street, Suite 500, Sacramento, CA 95814-2725. Their phone number is (888) 460-2219, TDD (877) 688-9891. Or you can go to their website at www.hmohelp.ca.gov. Mandatory participants in health plans can change to a different plan for any reason. Voluntary participants can change plans or can go back to regular Medi-Cal for any reason. To change or leave a health plan, call Health Care Options at (800) 430-4263 and request a "choice form."

If you want help with complaints and grievances call:
Health Care Consumer Center
(800) 896-3203
Managed Care Ombudsman
(888) 452-8609
Department of Managed Care
(888) HMO-2219

You can also find information online at <http://www.dmh.ca.gov/> You can call (800) 400-0815 if your health plan gives you problems. If your health plan is denying you care because it does not think it is medically necessary, but you disagree, you can ask for an independent medical review which is done by a group of doctors and professionals who do not work for your health plan.

You have the right to ask for a fair hearing. (see page 67 "Hearings and Complaints.") While waiting for a state hearing, the health plan must continue to provide medical services to you, if you request the hearing before the effective date of the intended action.

7. Mental Health Managed Care

Mental Health services for Medi-Cal recipients are provided through the Los Angeles County Department of Mental Health. See page 55 "Mental Health."

Medi-Cal for Teens

If you are between 12 and 21 years old, you can apply for "Minor Consent Services" to get free and confidential medical treatment without parental consent related to:

- Drug or alcohol abuse (except methadone treatment)
 - Sexually transmitted infections and the medications for them
 - Pregnancy and abortion
 - Family planning
 - Outpatient mental health (not overnight in a hospital)
 - Sexual abuse
- If you are under 21 and living with your parents, or temporarily away such as in school, you may apply for Minor Consent Medi-Cal to cover these specific services without your parents' consent or knowledge. If you are a minor who is living on your own you may complete a regular Medi-Cal application.

Your parents won't be required to give information about their income or resources or pay toward the medical services, unless you want Medi-Cal for services other than those listed above.

DPSS won't tell your parents or send letters to your home without your permission. "Minor Consent Services" are available regardless of your immigration status and cover more services than restricted Medi-Cal.

To apply, go to a DPSS office and tell them you want Minor Consent, or there may be a DPSS Worker at the site where you are receiving care. You will have to fill out a new short form each month you need treatment, except for mental health services. For that, you need a letter from a mental health professional explaining that you meet certain conditions for getting mental health services and how long you will need treatment. You will still have to complete the short form each month to update your eligibility.

If you already get Medi-Cal through your parents' case, you may already have a plastic Medi-Cal card, but do not use it for Minor Consent services.

How Do I Get Help on My Case?

The Customer Service Center currently provides services to 33 District offices with services in multiple languages.
CSC Local Telephone Numbers
• (626) 569-1399 • (310) 258-7400
• (818) 701-8200
Toll Free Number: (866) 613-3777
Hours of Operation Monday through Friday, excluding holidays, 7:30 a.m. to 5:30 p.m.

A representative from Customer service can access your case instead of calling the workers directly. They will help you with small changes and issues like
• Report change of address
• Telephone number changed
• Send replacement benefits cards
• Change in income (making more or less)
• Need to contact or schedule an appointment with worker
• Add a newborn to an existing case

You will need your case number or your client ID number for them to look up your case. The Client ID# is located on any Medi-Cal notice of action in the upper right hand corner of the notice (the last line of information after your name, case number, etc. In some cases, the customer service representative may be able to look up your case info with your name and date of birth.

To look up your case online you will need the Client ID # and a PIN number. You should have received a PIN number on a separate notice. If not you can look it up with your case number and date of birth. Online, you will have updated information on the status of your case. The website is <https://yourbenefits.laclrs.org>

You can also call the Central Help Line / Customer Service Line (877) 597-4777 They will help you with things like:
• General information on Medi-Cal
• Direct number of worker
• Case number (if caller is on the case)
• Card number (if caller is on the case)
If caller has moved and needs to get Medi-Cal in another state, city or county – they can tell you if you have an active case in LA.

Where Can I Apply?

Individuals can apply online at Your Benefits Now at www.yourbenefits.laclrs.org

You can apply at county offices on page 71 and/or at any of the following agencies.

Lancaster, Northern LA, Palmdale:
Tarzana Treatment Center (661) 726-2630
Burbank, Glendale, San Fernando Valley, Santa Clarita, Northridge: Asian Pacific Health Care Venture
(323) 644-3880 (Also East LA/Metro LA)
Tarzana Treatment Center (818) 342-5897
Child and Family Guidance Center (818) 882-3147
Northeast Valley Health Corp.
(800) 696 -3842
Valley Community Clinic (818) 763-8836
El Monte, Monrovia, San Gabriel Valley, Pomona: Citrus Valley Health Partners
(626) 851-2748

East LA, Metro LA: California Hospital Medical Center (213-) 42-5537
Chinatown Service Center (213) 808-1700
KHEIR (213) 637-1080
West Side: Venice Family Clinic
(310) 664-7509
South LA: California Hospital Medical Center (213) 742-5537
Community Health Councils (Also East LA/ Metro LA) (323) 295-5500

Southeast LA County:
AltaMed (877) 462-2582
South Asian Network (562) 403-0488
Human Services Assn. (562) 806-5400
St. Francis Medical Center (800) 603-9355
Carson, Hawthorne, Inglewood, Lawndale, Lomita: Crystal Stairs 323-299-9295
Long Beach: Dept. Health 562-570-7979
Pasadena, Altadena, Sierra Madre: Pasadena Public Health Department 626-744-6086
Health Consumer Center of Los Angeles (800) 896-3202

LAUSD – CHAMP Helpline (866) 742-2273 \ **Countywide Assistance: Health Consumer Center** (800) 896-3202

MCH Access (Training and Troubleshooting, enrollment (213) 749-4261

Go Online to Find Help Near You:
www.chigla.org

MediCal Income Limits

# of Persons	Medically Needy Medi-Cal & Maintenance Need Level	100% FPL Federal Poverty Level	109% MAGI Medi-Cal: Parents & Caretaker Relatives	138% FPL MAGI Medi-Cal Adults 19-64	213% FPL Pregnant women	266% FPL Children 0-19
1	\$600	\$1041	\$1135	\$1437	\$2217	\$2769
2	\$934 (2 adults) \$750 pregnant woman or adult/child	\$1410	\$1536	\$1945	\$3002	\$3749
3	\$934	\$1778	\$1938	\$2453	\$3782	\$4729
4	\$1100	\$2146	\$2339	\$2692	\$4571	\$5708
5	\$1259	\$2515	\$2741	\$3470	\$535	\$6688
6	\$1417	\$2883	\$3142	\$3978	\$6140	\$7668

Health Care for Children

1. Medi-Cal For Children

Children from birth up to 19 years of age may be eligible to full-scope Medi-Cal regardless of immigration status.

Children under 19 years of age with family's income below 160% of the Federal Poverty Level may be eligible to free or no cost Medi-Cal.

Children under 19 years of age with family's income between 161% and 266% of the Federal Poverty Level may need to pay a monthly premium of \$13 a month per child, with a maximum payment of \$39 per family with three or more children. (See chart above.)

Children under 19 years of age with family's income above 266% of the Federal Poverty Level may be eligible to Medi-Cal with a Share of Cost. (See page 48- Share of Cost for children for income limits.)

For information on immigration status and how to apply please see page 45 in the Medi-Cal section. All children with family income less than 266% FPL (see chart above) are eligible for full scope Medi-Cal regardless of immigration status.

2. Child Health and Disability Program (CHDP)

CHDP provides free early and regular health exams for many low-income children up to 19 years of age; Medi-Cal eligible children up to 21 years of age; and Head Start and State preschool children. There are no immigration requirements, however, visits are allowed based on a timetable or "periodicity schedule", with some exceptions for physical exams needed for school, for children in foster care and for problems that might occur between screenings. Children in Medi-Cal Managed Care can get more screenings than the state's schedule allows. CHDP offers physical exams, immunizations, vision and hearing testing, lead poisoning testing, nutritional check, teeth and gum check, and some lab tests including sickle cell. For more information call (800) 993-2437.

3. California Children's Services

Children's Medical Services (or California Children's Services) case manages and provides health services for children up to age 21 with eligible major medical conditions caused by accidents, diseases, and congenital disabilities, whether or not the children also have Medi-Cal. Undocumented children may qualify if their parents live in Los Angeles County. For eligibility information, call (800) 288-4584. Service providers are available throughout the county.

Family income must be less than \$40,000 per year or may be greater if the child has free Medi-Cal or their CCS related medical expenses are expected to be more than 20% of the family's income.

There is no family income limit for children who need services to confirm a CCS-eligible medical condition; or were adopted with a known CCS-eligible medical condition; or are applying only for services through the Medical Therapy Program; or if they are Medi-Cal beneficiaries with no share of cost.

Free and Low Cost Health Care

In an emergency, it is a legal and ethical duty for every clinic or hospital emergency room to provide emergency care, regardless of immigration status or ability to pay. Know your rights and ask for the help you need (Veterans see pg 33). Non-citizens with restricted Medi-Cal coverage who live in L.A. County can apply for ATP or MHLA to cover non-emergency care (see pg 54).

Health Care Law

The Affordable Care Act (also called Obamacare) passed in 2010 :

- Prohibits insurers from denying insurance to anyone with serious illnesses, including pre-existing conditions such as asthma and diabetes
- Prevents insurance companies from imposing lifetime dollar limits
- Allows young adults to be covered through their parents' insurance until the age of 26.
- Requires that many people purchase health insurance if they are not covered by their employer, Medicare, Medi-Cal or another insurance plan.
- Some parts of the law have been struck down; some of the information about it may change in 2020. Please call (800) 300-1506 for updated information.

If you feel like you are still being denied coverage, call one of the agencies listed in Good Advice (pg. 69.)

-If you do not qualify for Medi-Cal and do not receive health care from your employer, you can sign up for a health care program through Covered California. The website is www.coveredca.com.

If you are already getting insurance through your employer you do not have to change it unless you want to. Beginning in 2020 California residents must either have qualifying health insurance coverage, pay a penalty when filing a state tax return, or obtain an exemption from the requirement to have coverage. Generally speaking the penalty will be \$695 or more when you file your 2020 state income tax return in 2021. The penalty for a depending child is half what it would be for an adult. A typical family of four that goes uninsured for the whole year would pay a penalty of at least \$2,000.

The following people are exempt from this requirement :

- People who would have to pay more than 8.24% of their income for health insurance
- People with income below the state tax filing threshold
- A short coverage gap of three or fewer consecutive months
- People with incomes below the threshold required for filing taxes
- People who qualify for religious exemptions
- Undocumented immigrants
- People who are incarcerated
- Members of Native American tribes
- Members of a health care sharing ministry
- People who have experienced a severe hardship (homelessness, bankruptcy, domestic violence, and certain other situations count as "severe hardship")

If you buy insurance through Covered California you may be able to get financial assistance to pay your premiums, or tax credits to help you afford it. Beginning in 2020 you might get this assistance even if you did not qualify previously, or you can also possibly get more assistance if you did get it previously. You might get assistance if you are below the following income levels:

Family members	Income limit
1	\$74,940
2	\$101,460
3	\$127,980
4	\$154,500
5	\$181,020
6	\$207,540

For more information contact:
Covered CA www.coveredca.com
(800) 300-1506
(310) 393 7734 (TTD)

Free and Low Cost Hospitals and Clinics

1. County Hospitals and Clinics
County Health Dept. (Services, Referrals to Clinics, or Complaints) (800) 427-8700
On-line: www.ladhs.org, click on "clinics" and then click on "Patient Information."

County Hospitals:
Harbor-UCLA 1000 W. Carson St., Torrance 90509 (310) 222-2345
High Desert Health System (Out patient visits only) 44900 N. 60th St. W., Lancaster 93536 (661) 948-8581

Martin Luther King Hospital/Drew (Urgent care and out patient visits only)
1670 E 120th St.
(310) 338-1000
Los Angeles County/USC 1200 N. State St., LA 90033 (323) 226-2622
Olive View 14445 Olive View Dr., Sylmar 91342 (818) 364-1555
Rancho Los Amigos National Rehabilitation Center 7601 E. Imperial Highway, Downey 90242 (877) 726-2461

Comprehensive Health Centers:
Mid Valley 7515 Van Nuys Blvd. Van Nuys 91405 (818) 947-0230
El Monte 10953 Ramona Blvd., El Monte 91731 (626) 579-8463
H. Claude Hudson 2829 S. Grand Ave., LA 90007 (213) 744-4716
Hubert Humphrey 5850 S. Main Street, LA 90003 (323) 846-4104
Long Beach 1333 Chestnut, Long Beach 90813 (562) 599-2153
Edward R. Roybal 245 S. Fetterly Ave., LA 90022 (323) 780-2373

2. Free/Low Cost Health Clinics in Los Angeles County

Visit <http://www.ccalac.org>. Click on "Find a Clinic". You can also go to <https://www.californiahealthplus.org/> and click on "Find My Health+ Center". Or call (213) 201-6500, or (211).

3. Dental, Eye Care, and Hearing

Dental:
Eisner Pediatric and Family Medical Center (213) 747-5542
Harbor-UCLA Dental (310) 222-3493
LA Free Dental Clinic (323) 653-1990
USC School of Dentistry 1-888-USC-DENT (1-888-872-3368)
QueensCare Echo Park (213) 380-7298
Vision:
California Vision Foundation
1-800-877-5738
www.californiavision.org
Hearing
Agency on Deafness (323) 478-8000
Hearing Aid HotLine (800) 521-5247
Hear NOW (800) 648-4327
Community Health Alliance of Pasadena
330 W. Maple Ave., Pasadena, 91103 (626) 256-1600

How Do I Get Care if I Don't Qualify for Medi-Cal?

The County provides free or low-cost health services to people who can show proof that they live in L.A. County including low-income people who are not eligible for Medi-Cal or who have medical expenses that Medi-Cal, Medicare, and private insurance will not fully cover.

Many people qualify for free care under the "Ability To Pay" (ATP) plan or My Health LA (MHLA). County hospitals and clinics also offer a payment program called "Pre-Payment". The county contracts with over 100 community clinics called "Community Partners" who provide free clinic care for you if your income is low (see charts below.) If you qualify for free care, you should not be asked to pay any fee by a community clinic, county clinic or hospital. You should receive the same quality of care as those who pay.

1. Do I Qualify for Free Care under ATP or My Health LA?

You can get free hospital and clinic care through MHLA or ATP if your gross monthly income (after special deductions) is below the following chart:

# in Family	Income
1	\$1,437
2	\$1,945
3	\$2,453
4	\$2,962
5	\$3,470
6	\$3,978
(As of 2020)	

If your income is higher than these amounts and you receive care at a County facility you may have to pay a reduced rate for services, depending upon your income.

2. How Do I Apply for MHLA or ATP?

- You may be eligible for MHLA if:
- You are a Los Angeles County resident.
 - You are 19 years of age or older
 - You are not pregnant.
 - You have no health care coverage
 - You meet monthly income limits. (see above for income limits)

- Benefits at no cost to you include:
- Preventive and primary care services within 30 working days
 - Many clinics and health centers to choose from as your medical home
 - ID Card to let people know you are a member of MHLA
 - Toll free member information line 24 hours a day, 7 days a week, even on holidays
 - MHLA will automatically enroll you in ATP so you can get specialty care, hospital care, and emergency room visits at a LA County hospital or clinic
- For more information, please call My Health LA Member Services (844) 744-6452.

ATP : If you get your care, at a county clinic, it's best to use ATP. ATP pays for all clinic and hospital care, including medicines, tests and lab work. You must apply annually. If you don't qualify for free ATP you might qualify for low-cost ATP. The screener will figure out what you must pay, if anything, for each visit.

The application process is only one page asking about family size and income. However, you don't need to bring documents to show proof of the information; you just sign a form stating that what you say is true.

Later, random patients will be asked to provide documents to prove income. Be sure to save your income documents for at least one year after you apply. ATP is good for one year, and at the end of one year you will have to apply again.

To apply for ATP, you must make an appointment for a financial screening at a county hospital or clinic that has an ATP worker. Sometimes you will be able to be seen the same day, but you may have to wait. You do not have to wait for your financial screening to get care. If you appear to qualify for Medi-Cal, you will be asked to apply and either get a decision that you are not eligible or are only eligible for restricted benefits before an ATP application will be taken.

Be very firm about your right to apply for free care and be sure to ask for ATP at the county clinics. If it is your first visit to a county hospital or clinic, they should give you a written notice regarding available plans, including ATP, to reduce the cost of your medical care. If you do not receive this notice at your first visit, ask for one. If the worker or the clinic screener you see tells you that you do not qualify for ATP

or free care and you do not agree, ask to meet with the worker's supervisor within 10 working days. If you were found ineligible before, you may reapply. If you are unable to keep your screening appointment, call the worker immediately or you may be billed for the full cost of any treatment you have already received.

Even if you do not qualify for ATP, you still have a chance to pay a low-cost fee for the outpatient services within seven days.

3. Pre-Payment Plan

The Pre-Payment Plan is only available at County clinics and hospitals. It covers cost of care but often does not cover your prescriptions (however, you can get emergency prescriptions, public health medicines, and medicines provided in the clinic at no cost).

You do not have to prove your income, family size, or resources if you pay the following standard fees within seven days of treatment. But you do need to show proof that you live in L.A. County. If you do not pay these fees, you will be billed for the much higher full amount cost of care:

- \$80 at all County Comprehensive Care Centers, County Hospital Outpatient Clinics, and Public Health Centers; for prenatal visits, the first seven cost \$60 and remaining visits are free
- \$80 at County Comprehensive Health Center Urgent Care Centers
- \$140 at County Hospital Emergency Rooms
- \$500 at Hospital Outpatient Surgery Clinics

Most Community Partner clinics also offer a sliding scale for patients who don't qualify for free care.

4. What Else Should I Know?

If you have any questions about your care, need referrals, or have a complaint, call the County Health line: (800) 427-8700. You can also call the Health Consumer Hotline: (800) 896-3202.

- If you receive free or low cost medical care, your medicines are free.
- Non-citizens with restricted Medi-Cal coverage who live in L.A. County can apply for ATP or MHLA to cover non-emergency care.
- Before using ATP, you must use any other medical benefits you have such as private insurance, or outpatient Medicare. ATP will cover your deductible for private insurance,

- but will not cover inpatient Medicare deductibles and Medi-Cal "Share of Cost".
- Foreign visitors with a valid visa can receive emergency services at County hospitals and clinics, but are not entitled to ATP, Pre-Pay or MHLA for medical services. They may apply for the County's Out of County Discount Payment Plan.

5. Cancer Detection Program: Every Woman Counts (EWC)

EWC provides free mammograms for women age 40 and over and free pap smears for women over age 21. Your family income must be below 200% of poverty. The services are provided at doctors' offices, clinics and hospitals all over Los Angeles County. Call the Cancer Detection Program at (800) 511-2300.

Mental Health

If you believe you need mental health services, you should call the Local Mental Health Plan's 24-hour "Access Center," at (800) 854-7771, which can screen and evaluate your request for mental health services and can refer you to a mental health provider. County Mental Health authorizes and can provide treatment including Medi-Cal "specialty mental health services" for all Medi-Cal recipients.

County Mental Health also authorizes and provides Medi-Cal recipients with other services to help them live and function in the community, including "EPSDT" services for children on Medi-Cal.

If you do not have Medi-Cal or other health insurance, you can receive mental health services from County Mental Health. You are charged a fee based on a sliding scale, depending on your ability to pay. Therapists can request that the fee be waived if the fee will cause stress and hardship.

Developmental Services

Children and adults who are developmentally disabled due to Down's Syndrome cerebral palsy, epilepsy, autism, have other qualifying conditions, or who are high-risk children up to age 3, may qualify for services through Regional Centers.

California residents who are undocumented may be eligible. To apply call one of the listed Regional Centers and ask for "Intake." If you are found not eligible for these services, they must explain why.

- Eastern Los Angeles Regional Center**
(626) 299-4700
- Harbor Regional Center (Torrance)**
(310) 540-1711
- Frank D. Lanterman Regional Center (Mid-Wilshire area)** (213) 383-1300
- North Los Angeles County Regional Center (Chatsworth)** (818) 778-1900
- San Gabriel/Pomona Regional Center**
(909) 620-7722
- South Central L.A.** (213) 744-7000
- Westside Regional Center (Culver City)**
(310) 258-4000



In Home Supportive Services and Long Term Care

► 1. In-Home Supportive Services (IHSS)

The In-Home Supportive Services (IHSS) Program helps pay for services provided to eligible aged, blind or disabled individuals, including children, to enable them to remain safely in their own homes. IHSS is considered an alternative to out-of-home care such as nursing homes or board and care facilities. You may qualify if you:

- Are blind, disabled, 65 or older;
- Receive Medi-Cal or SSI;
- Live at home and need the services to remain there;
- Do not live in an acute care hospital, long-term care facility, or licensed community care facility; and
- Submit a completed Health Care Certification form.
- If you receive Medicare but not Medi-Cal, call Medicare to learn about similar services (800) 633-4227

Services which may be authorized include (but are not limited to) personal care (such as bowel and bladder care, bathing, grooming and paramedical services), meal preparation, laundry, grocery shopping, housecleaning, accompaniment to medical appointments and protective supervision for the mentally impaired. Services may sometimes be provided by a spouse or by the parent of a minor, with some restrictions.

IHSS applications are taken by telephone. You, or someone calling for you, may apply by calling toll free from anywhere in L.A. County at (888) 944-4477 or (213) 744-4477. If you do not currently receive SSI or Medi-Cal, you will be automatically referred to a Medi-Cal Office to be evaluated for Medi-Cal eligibility when your IHSS application is taken.

Once you apply for IHSS, a Social Worker will make an appointment to come to your home to determine if you are eligible and what services IHSS may provide for you. Based on your ability to safely perform certain tasks for yourself, the Social Worker

will assess the types of IHSS services you need and authorize an amount of time for each one. The assessment of need includes information given by you and, if appropriate, by your family, friends, physician or other health care practitioner.

You will be notified in writing, in a Notice of Action, if IHSS has been approved or denied. If denied, you will be notified of the reason for denial. If approved, you will be notified of the services and how many hours per month have been authorized for you.

If approved for IHSS, you must hire someone (your IHSS provider) to perform the authorized services. You, the IHSS consumer, are considered your provider's employer. It is your responsibility to hire, train, supervise, and if necessary, fire this individual. If you hire a provider prior to being approved for IHSS and are subsequently denied, you are responsible for paying the provider.

If you need assistance locating a provider, call the Personal Assistance Services Council (PASC). The PASC is the Public Authority for Los Angeles County. They operate a registry to provide referrals for IHSS consumers and providers. You may contact PASC at (877) 565-4477 for more information.

IHSS providers receive at least \$12.80 per hour effective July 2019. The State of California issues the checks for provider payments. You and your provider must complete, sign, date, and submit in the timesheets, to verify that the work was done. Timesheets can be accessed 24 hours a day/ 7 days a week on line at etimesheets.ihss.ca.gov or telephonic at (866) 376-7066.

Severely impaired persons may be eligible for an advance payment to pay a provider. Ask the IHSS Social Worker during the assessment for more information.

For help with problems or questions, call the IHSS Helpline at (888) 822-9622.

For information on how to request a Fair Hearing about the number of hours approved by the IHSS Social Worker, refer to the back of your Notice of Action. If you misplaced your Notice of Action, call the IHSS Helpline at (888) 822-9622 and ask them to provide you with a copy.

► 2. Long Term Care

If you are caring for someone that a doctor has recommended for 24-hour nursing care for a long period of time, call the Long Term Care District at (626) 854-4987 or (626) 854-4765.

The State Central Registry at (800) 777-7575 will give you three referrals to long term care facilities. www.californiaregistry.com

There is a difference between board and care facilities and nursing facilities. Medi-Cal will pay for long term care in a nursing facility but not in a board and care home. Before you send someone to any kind of long term care facility, you should visit the places and inspect them thoroughly. If you are not happy with the referrals you can call again for more. For assistance with finding a nursing facility or advocating for a client in a nursing facility contact California Advocate For Nursing Home Reform at (800) 474-1116.

Medicare

Medicare is a federal health insurance program. There are three parts to the program: "Part A" (hospital insurance), "Part B" (medical insurance), and "Part D" (prescription drug insurance). For general information call (800) 633-4227.

Can I Get Medicare?

► 1. Part A : Hospital Insurance

You are automatically eligible for Medicare Part A free of charge if you are one of the following:

- You are 65 or older and are eligible for Social Security retiree benefits based on your own or your spouse's employment
- You are a federal employee who retired after 1982 and have enough quarters of coverage
- You have been receiving Social Security Disability Income payments for 24 consecutive months
- You are age 50 or older and are a disabled widow or widower who has received Social Security through your spouse for at least 2 years
- You have end-stage kidney disease, regardless of your age (you still must have worked enough quarters, however, even though you don't need to be 65.)
- You have Lou Gehrig's disease (ALS). (You still must have worked enough quarters, even though you don't need to be 65.)

People who are not automatically eligible for Medicare Part A may enroll voluntarily if you meet all of the following three requirements:

- You are 65 or older
- You are a U.S. citizen, or a legal alien who has resided in the U.S. continuously for at least five years
- You purchase both Parts A and B of Medicare, or you purchase Part B only. You may not purchase Part A only.

If you meet these three requirements for voluntary Part A, the amount of monthly premiums you will pay will depend upon how many work quarters you have on record with Social Security. If you have between 30 and 39 quarters, your monthly Part A premium is \$232. If you have less than 30 quarters, your monthly Part A premium is \$422.

► 2. Part B : Medical Insurance

If you meet the eligibility guidelines for Part A, you will be eligible for Part B. The standard Part B monthly premium is \$121.80. The premium is lower for those enrolled prior to 2016. The premium is higher if your income is \$85,000 or more for an individual and \$170,000 or more for a married couple.

If you have a low income and low resources, the state may pay for your Medicare premiums under Medi-Cal or the Medicare Savings Program.

What is Covered?

Medicare does not cover all types of health care needs, nor is it free of cost. It does NOT cover custodial care in a nursing home or at home, dental care, eyeglasses, and hearing aids. For services that are covered by Medicare, you have to pay copayments.

1. Part A Coverage

Medicare will pay for hospital care if a doctor has decided that you need inpatient care and the hospital participates in Medicare

You will pay a first day hospital deductible of \$1,340 (in 2020) if you use days 1 through 60 in a benefit period.

If you remain in the hospital for days 61 to 90, you pay \$335 per day and Medicare pays the balance.

If you need hospital care after the 90th day, you draw on 60 extra "reserve" days which are not renewable and can be used only once. During that period you pay \$670 each day and Medicare pays the balance.

► 2. Skilled Nursing and Hospice Services

After a three day prior hospitalization, Medicare pays for daily (five to seven days per week) skilled nursing and therapy services in a Medicare certified skilled nursing facility. Medicare pays for the first 20 days in full and days 21-100 on a copayment basis of \$164.50 per day.

Medicare pays for skilled nursing and therapy services in the home if you are homebound and meet other requirements. There are no copayments for home health services.

Medicare hospice services are for persons who are terminally ill (patients must be recertified as "terminal" after 210 days of hospice care).

► 3. Part B Coverage

Part B pays 80% of "allowable" charges for a variety of outpatient care. You pay the

remaining 20%, an annual deductible of \$183 (in 2020) and a 15% excess charge if the provider does not take "Medicare assignment."

Doctors and other Part B providers who accept Medicare assignment agree to charge no more than the Medicare approved charge. This means that you can be charged only for the 20% co-payment and any unpaid portion of the annual Part B deductible. Ask your provider if he or she will accept assignment.

► 4. Part D Coverage

Part D pays for outpatient drug coverage. To obtain Part D coverage, you must enroll into a Medicare Part D drug plan. There are two types of Part D plans: PDPs that only provide Medicare drug coverage and Medicare Advantage Plans that provide Medicare Part A, B and D benefits. There is a standard Part D benefit package, however, not all Part D plans are the same. Each plan has its own drug formulary, cost sharing requirements and restrictions on coverage. If you are low income and need help paying for your Part D premium and drug co-pays contact Medicare and apply for Extra Help: 1-800-772-1213 or online at <https://secure.ssa.gov/i1020/start> or call the Center For Healthcare Rights at : (800) 824-0780

5. Medicare Advantage HMOs

A Medicare Advantage HMO is a health insurance plan that enrolls Medicare beneficiaries who have both Medi-care Parts A and B. Medicare HMOs must provide the same benefits as original Medicare. Persons who have Medicare end stage renal disease (kidney failure) cannot enroll into a Medicare HMO.

When you join a Medicare HMO, you must use the HMO for all of your medical care, except for emergencies or urgent care when you are out of the HMO's service area. Medicare pays the HMO a fixed monthly amount for each enrollee.

► 6. Other Information

Many people receive both Medicare and Medi-Cal. (see page 45 "Medi-Cal") People who have both programs do not have to pay Medicare's monthly premiums, deductibles, or co-payments when they see a provider that accepts Medi-Cal.

If you have both Medicare and Medi-Cal, you should see health care providers that take both Medicare and Medi-Cal to avoid being charged any cost sharing amounts. If possible, show your insurance cards before you receive services.



A new law requires people who have both Medicare and Medi-Cal to assign their Medi-Cal to a managed care plan. You will also be given the choice to assign both your Medicare and your Medi-Cal to a Cal Mediconnect plan. If you do, your Medicare and Medi-Cal will both be assigned to the same plan. If you don't want your Medicare assigned to a plan, you must NOT choose a Cal Mediconnect plan, but you still must choose a managed care plan for your Medi-Cal. If you do this you do not have to go to the Medi-Cal

managed care plan doctors. The Medi-Cal plan is only responsible for paying your Medicare cost sharing and providing you with non-Medicare covered benefits such as non-emergency transportation.

If your income is too high for free Medi-Cal you might qualify for a Medicare Savings Program to help pay your Part A or Part B premiums. Contact the Center for Health Care Rights(800) 824-0780

You should also know the following:

- Always carry Medicare card with you
- Contact the Social Security office immediately if you lose your card or don't get one
- Appeal any incorrect or unfair decision about your Medicare benefits (see page 68 "Hearings and Complaints")

For help with Medicare call
Center for Health Care Rights
(800) 824-0780
Outside Los Angeles County call:
(800) 434-0222.



Transportation

Help with Bus Fare

1. If You Are Disabled

All Los Angeles County transit operators, including MTA, DASH, Foothill, Antelope Valley, and all the city bus lines, honor a "disabled identification card".To apply, call (213)680-0054. All applicants must pay a non-refundable \$2 application fee and bring a current 1" by 1 1/4" full face photo (no hats, sunglasses or bandannas.)

To qualify you must show any one of the following:

- Medicare ID card (NOT Medi-Cal)
- California DMV disabled or disabled veteran placard certificate with a current "valid through" date
- Proof of receiving either SSI or SSDI from Social Security Administration
- A certification on school letterhead signed by a Special Education teacher that the applicant is a Special Education student in any LA County school
- Part III of the application form, which is a one-page certification signed by a health care professional.

2. CityRide and paratransit

For seniors 65+ or disabled. CityRide provides a book of coupons worth \$84, every three months. The cost is \$21 (\$9 if you are receiving Medi-Cal or SSI). The script can be used to buy bus pass, taxi rides, or to partly pay for dial-a-ride service for medical appointments.

Los Angeles CityRide: (213) 808-RIDE (323) or (818) or (310) (808-7433)

ACCESS (800) 827-0829 Shared ride service offering disabled persons curb-to-curb rides within 3/4 mile of most LA

County bus or rail routes, using buses, mini-vans and taxis. Fares are distance-based and range from \$1.80 to \$2.70 for each one-way trip. Call to apply.

Dial-a-Ride (800) 439-0439 Shared rides for seniors 60+ and disabled in certain parts of the county. Costs vary but as low as 25 or 50 cents in some areas. Call to apply.

3. LIFE (Low Income Fare is Easy) Program

You can save up to \$24 on a Metro 30-Day pass if your income qualifies you for Metro's LIFE (Low Income Fare is Easy) program. Seniors and disabled persons can save \$8, college and vocational students \$13, and K-12 students can save \$10 monthly using LIFE coupons.

LIFE coupons are accepted by:Antelope Valley Transit Agency Culver City Bus Lines, Foothill Transit, LADOT, Long Beach Transit, Metro, Montebello Bus Lines, Norwalk Transit System, MTA, Santa Clarita Transit, Santa Monica Big Blue Bus, and Torrance Transit.

Adult riders, Senior/Disabled/, K-12 grade students and full time College/Vocational students are eligible if their incomes are at or below (limits for 2020):

# in household	Annual Income
1	\$36,550
2	\$41,800
3	\$47,000
4	\$52,200
5	\$60,600

Children over 5 years old whose parents qualify are automatically also eligible to receive LIFE coupons.Residents of cities/ county areas and students of schools that already offer transit subsidies will not be

eligible to receive LIFE coupons. Please check with your City, County or school to see if they offer any discounts.

To apply for the LIFE program, first call one of the agencies that administers the program.If you live in: Long Beach, Harbor Area, Gateway Cities or San Gabriel Valley, contact:

Human Services Association
(562) 806-5400 life@hsala.org
If you live in other areas contact:
FAME Assistance Corporation
(323) 870-8567
LIFEinfo@famecorporations.org

Visit the agency in person to complete an application. You need a California ID, proof of income and a TAP card. Call 866 TAP TO GO or visit taptogo.net/vendors to find a vendor that redeems LIFE coupons. For more information or help call the LIFE hotline (213) 922-2378.

4. Other Transportation Help

Help for Stranded or Runaways to Get Home: Runaways (800) 786-2929
Also assistance with mediation between runaways and parents.

Air Travel Assistance for Patients Needing Medical Aid: Angel's Flight West (888) 426-2643

Can Cyclists Get Help?

1. Bicycle Repair

These organizations offer guidance and usage of their shop tools and parts to bike owners with broken bikes that do not have the tools or resource to fix them. There's a small donation for their help, but no one is turned away for lack of funds.

The Bicycle Kitchen
4429 Fountain Ave, LA CA 90029
(323) NO-CARRO or (323) 662-2776
<http://www.bicyclekitchen.com>

Other bicycle cooperatives can be found at **LA County Bicycle Coalition**
<https://la-bike.org/resources/bike-co-ops/>

2. Metro Bike Share

The Metro Bike Share system makes bikes available to rent for short trips 24 hours a day, 365 days a year in Downtown LA, Central LA, North Hollywood and the Westside. Reduced Fare TAP card holders are eligible for discounted Metro Bike Share 30-Day and 365-Day passes. Click here <https://bikeshare.metro.net/reduced-fares/> to apply for Reduced Fares. Once approved, discounts will apply automatically at checkout. Low-Income Fare is Easy (LIFE) patrons are not eligible for a Reduced Fare discount at this time. Reduced Fares are available for:

- Seniors (62+)
- Persons with Disabilities
- College / Vocational Student K-12 Student (must be 16+ to ride Metro Bike Share)

30-Day Pass \$5/month,
365-Day Pass for \$50/year. For both passes, All rides 30 minutes or less are free, \$1.75 for each 30 minutes after.

Can Drivers Get Help?

1. Low Cost Car Insurance

Low income drivers in Los Angeles County can purchase special auto insurance for \$637 a year. Call (800) 622-0954 or go to www.mylowcostauto.com to find the agent nearest you from the California Automobile Assigned Risk Plan (CAARP). You must verify your income with tax returns and also show a valid driver's license, current vehicle registration, and proof of ownership of vehicle.

To be eligible, you must live in LA County: you must be at least 19 years old; and have been driving for at least 3 years without losing your license; the car insured must be worth less than \$20,000; and your household (in 2020) must have a yearly income below:

# in household	Annual Income
1	\$31,225
2	\$42,275
3	\$53,325
4	\$64,375
5	\$75,425

Also, in the last 3 years you cannot have:been responsible for an accident involving bodily injury or death ; had more than one property damage accident in which you were at fault ; or had more than one point for a moving violation / You also cannot be a college student claimed as a dependent on someone else's taxes

2. Help With Smog Check

The State's Consumer Assistance Program (CAP) provides financial assistance for low income consumers whose vehicles don't pass smog check. If you qualify they can help pay for repairs that will allow your car to pass. You must pay a copayment. The program is limited to available funds. Don't do any repairs until you are notified that you've been approved. **For information and to apply call** (800) 952-5210
Or visit: www.bar.ca.gov

3. BlueLA Electric Car Share

BlueLA is an all-electric car sharing service expanding to 40 stations, 200 charging points, and 100 cars in Los Angeles. Members have access to a network of shared electric vehicles 24 hours a day, 7 days a week, at self-service locations in central LA.

How it works:
You have to enroll in BlueLA at <https://www.bluela.com/pay-less-and-drive-more-bluela-community-membership> .

The BlueLA Community Membership is available to qualifying low-income individuals for \$1 per month. You can qualify if you receive Tribal benefits, CalWORKs, CalFresh, WIC, SSI, Medi-Cal, LIHEAP, Section 8, or participate in GAIN or REP, or if your income is below the following levels:

# in household	Annual Income
1	\$31,550
2	\$36,050
3	\$40,550
4	\$45,050
5	\$48,700
6	\$52,300
7	\$55,900
8	\$59,500

To use the Bluecar:
Reserve a Bluecar in advance on the mobile app or website, or walk up to any BlueLA location to pick up an available car.

Tap your user card at any of the kiosks and follow the instructions. Unplug the car. Use the built-in GPS for directions and drive without having to worry about gas or parking.Park at a BlueLA location and plug the car to end your trip.

Rental Rate: \$0.15 per minute / \$9 per hour (+9.5% tax)
Rental period begins when you pick up a car, and ends when you plug in at a BlueLA station.
Minimum charge is 15 minutes (\$2.25).

Utilities and Phone

Utility Bill Assistance

If you are applying for CalWORKs, you may be able to get "immediate need" money to pay for your delinquent utility bills. (See CalWORKs "What Else is Available" pg. 16)

If you are low-income and have overdue gas or electric bills, call:

Low-Income Home Energy Assistance Program (HEAP) (866) 675-6623
<http://www.csd.ca.gov/Services/FindServicesinYourArea.aspx>

Catholic Charities (213) 251-3432
Energy HotLine (800) 342-5397
Legal Aid (utility cutoffs) (213) 640-3881
Maravilla Foundation (323) 869-4500
PACE Environmental Services: (213) 989-3250
SoCal Gas General Questions and Assistance: (800) 427-2200
So Cal Edison Low Income (800) 736-4777
Utility Tax Unit (senior discount) (213) 978-3050
West Angeles Center (323) 733-8300

1. Need Help With Your Gas Bill?

Eligible customers of SoCalGas may receive a 20 percent discount on their monthly gas bill at their primary residence through our California Alternate Rates for Energy (CARE) program. New customers who are approved within 90 days of starting new gas service may also receive a \$15 discount on their Service Establishment Charge. You will receive your discount once your completed application is approved by Southern California Gas Company (SoCal Gas.)

There are two ways to qualify.

1. You or another person in your household receives benefits from any of these programs; Medi-Cal, WIC, CalWORKs, Tribal TANF, Head Start Income Eligible-Tribal Only; Bureau of Indian Affairs General Assistance; CalFresh: School Lunch : Low Income Home Energy Assistance Program (LIHEAP): or SSI: OR

2. Total income for all persons in your household meets the following income guidelines:

Members in Household	Annual Income
1-2	\$ 33,820
3	\$ 42,660
4	\$ 51,500
5	\$ 60,340
6	\$ 69,180
7	\$ 78,020
8	\$ 86,860
Each additional add	\$8,840
* Includes current household income from all sources before deductions	

Income guidelines effective until May 31, 2020

2. Energy Saving Home Improvements

For qualified renters or homeowners who meet certain income requirements, SoCalGas provides no-cost, energy-saving home improvements like attic insulation, door weatherstripping and minor home repairs. Other terms and conditions may apply. For more information, visit socialgas.com (search "Energy Savings Assistance Program") or call (800) 331-7593.

3. Heating Assistance for People with Serious Medical Conditions

Regardless of income, a household with a member who requires more heat in winter due to serious health conditions can qualify for a Medical Baseline Allowance. This can provide additional heat without an increase in cost. For more information on this program, call (800) 427-2200.

4. Seasonal Bill Assistance

If you have difficulty paying your winter gas bills, you may qualify for a one time annual allowance through SoCal Gas Gas Assistance Fund (GAF). Assistance is available during the winter months on a first-come, first-served basis for qualifying customers who meet certain income requirements. For more information visit socialgas.com (search "Gas Fund") or call (877) 238-0092.

For a referral to a United Way agency serving your area, call (800) 427-2200.

5. Help with Electric Bill

If you are unable to pay your bill by its due date, contact LADWP before the bill becomes overdue. They will work with you in setting up a payment plan. If you visit one of their customer service centers and pay half of your bill, you will receive a two-week extension.

You can also arrange to pay in installments. Call the LADWP Special Collections Unit at (800) 244-4458 before the bill is due to make payment arrangements.

If you have a notice of termination from the Department of Water and Power (DWP), call 1-800-DIAL DWP (342-5397) and ask about Project Angel Fund. Priority is given to those not eligible for other aid or assistance. If you do not receive your water service from DWP, call your own water district and ask them if they provide any assistance for low-income customers.

The Los Angeles Department of Water and Power (LADWP) offers a residential **Low Income Discount Program (LIDP)** rate for customers within qualifying income levels. This rate reduces the cost of electricity, water, and sewer services for the participants' permanent, primary residence.

The rates are generally available for families and individuals with annual incomes below the following levels:

Members in Household	Annual Income
1-2	\$ 31,800
3	\$ 37,400
4	\$ 45,100
5	\$ 52,800
6	\$ 60,500
Each add'l	add \$ 7,700

Lifeline Discount Program applies a discount to the energy bills of income-qualified customers who are 62 years of age or older, or permanently disabled and can provide proof of disability. For questions call (213) 481-5411

Life Support Device Discount: Discounts on water and electric service are offered to customers who provide satisfactory proof that a member of the household regularly requires the use of an essential life-support device.

Physician Certified Allowance Discount: Discounts on water and electric bills are available to customers who provide verification by a state-licensed physician that a fulltime member of the household is being treated for certain life threatening illnesses. or has a compromised immune system and needs an additional heating and/or cooling allowance Call 1-800-DIAL DWP (342-5397).

Customers with a Teletype device hookup (TTY) may call LADWP at 1-800-HEAR-DWP (or 1-800-432-7397) to receive assistance regarding water or electric service.

For a listing of other agencies that provide information and referral services to customers in need, call 211.

6. Refrigerator Exchange Program

The LA Department of Water and Power offers certain customers the opportunity to replace their old, inefficient refrigerators with a new energy saving model.

- The customer must be a current participant in the LADWP residential Low Income Discount Rate
 - The customer's refrigerator must be at least 10 years old and be at least 14.0 cubic feet in volume.
 - The outlet to which the refrigerator is connected must be grounded (3-prong)
 - The customer must be willing to give up (exchange) their old refrigerator to be environmentally recycled
- Call the Appliance Recycling Centers of America (ARCA) at (800) 722-9340 to set up an inspection appointment. A representative will contact you to schedule an appointment to verify that your refrigerator outlet is properly grounded. If it is not properly grounded, you will be given time to correct the situation in order to

Can I Get Phone Help if I'm Disabled?

The California Telephone Access Program provides special equipment you can get if you are hard of hearing or have another disability that makes it difficult for you to use a telephone.
Call English **TTY line** (800) 806-4474 or **Voice:** (800) 806-1191

Can I Get Low Cost Phone Service?

California LifeLine is a state program that provides basic home phone service at a discount to eligible households.

To apply for California LifeLine you must call your home phone company and state you qualify for the program as either "Program-Based" or "Income-Based."

1. Program-Based:

You can qualify for California LifeLine if you or another person in your household is enrolled in any one of the following public-assistance programs: Medi-Cal, Low Income Home Energy Assistance Program (LIHEAP), SSI, Federal Public Housing Assistance or Section 8, CalFresh, WIC, National School Lunch Program, CalWORKs, Tribal TANF, Bureau of Indian Affairs, General Relief or Head Start Income Eligible (Tribal Only) .

2. Income-Based

You can qualify for California LifeLine if your total household income is at or less than these income maximums:

Household Size	Annual Income
1-2 members	\$27,500
3	\$31,900
4	\$38,800
Each additional	Add \$6,900

California LifeLine Call Center

Contact the LifeLine Call Center for general information about the California LifeLine

Utilities

program. Call Center's hours of operation are from 8 a.m. to 7 p.m. (Pacific Time) Monday through Friday.
English (866) 272-0349
Spanish (866) 272-0350
TTY (866) 272-0358

You can get much more information including how to get a low cost cell phone at:

www.californialifeline.com

Can I Get Low Cost Internet?

AT&T is offering low-cost wireline home Internet service to qualifying households:

- With at least one resident who participates in the U.S. Supplemental Nutrition Assistance Program (SNAP) (CalFresh) and
- With an address in AT&T's 21-state service area, where they offer wireline home Internet service, and
- Without outstanding debt for AT&T fixed Internet service within the last six months or outstanding debt incurred under this program.
- If you are a California resident and at least one member of your household receives Supplemental Security Income (SSI) benefits you also may qualify based on the same requirements that apply to SNAP (CalFresh) participants.
- Other eligibility requirements apply. Visit att.com/access for complete information and to apply. Or call 1-855-220-5211.

You must access the application on the website <https://att.com/access> and submit the form online or via email. You may also print the form and send via fax or mail. If you experience difficulties with the online form, you can contact an AT&T representative by phone at (855) 220.5211. (For help in Spanish, call (855) 220.5225.) Please send your application and supporting documentation to:

Access from AT&T
PO Box 5030
Charleston, IL 61920-5030

Qualifying households will pay as little as \$5 to \$10 per month for internet.

Guide for Non-Citizens

If you have questions about immigration or benefits for immigrants, or if the government has treated you differently just because you don't speak English, speak limited English, or of the way you look or because you are from a particular country, please call one of the agencies listed on page 66 ("Help with Immigration Questions").

Deferred Action

Child Arrivals

Beginning in 2012, certain young people who were generally under 31 years old as of June 15, 2012, who were brought into the United States by undocumented parents and met several other criteria, were able to receive a renewable two year period of deferred action on deportation and able to apply for work permits in the United States.

This law is called Deferred Action for Child Arrivals (DACA). About 200,000 persons in California have DACA.

The Trump administration has moved to end DACA. That action was challenged in court and three U.S. District Court orders remain in effect allowing DACA recipients to file renewal applications. However, USCIS stopped accepting "first-time" DACA applications as of October 6, 2017. A "first-time" DACA applicant is considered someone who did not already have DACA as of October 6, 2017.

If you have, or had, DACA, you can apply to renew it; but if you never had DACA, you cannot apply for it now.

In 2019, the U.S. Supreme Court agreed to consider the three District Court orders that are currently in effect. No one knows if the DACA program will be terminated, or what will happen with the information already submitted by those in DACA. You should consult an organization to help you decide whether to apply. See page 66 "Help with Immigration Questions" for groups that can provide advice or visit website:

County Office of Immigrant Affairs

<http://oia.lacounty.gov/>

National Immigration Law Center

<https://www.nilc.org/issues/daca/>

Can Immigrants Get Benefits?

Certain government programs are not available to all low income immigrants who are lawfully present in the U.S. However, even if you are undocumented, you can apply for CalFresh (Food Stamps) or CalWORKs for other family members who may be eligible (like for your children born in the U.S.-they are U.S. citizens). If you are an immigrant who has become a U.S. citizen through naturalization, you must be treated the same as other U.S. citizens when you apply for benefits.

Anyone, Even if Undocumented, Can Apply for These Programs:

- Prenatal Care
- Restricted Scope Medi-Cal
- Minor Consent Medi-Cal
- Regional Centers
- California Children's Services
- CHDP and CHDP Gateway
- Immunizations for kids
- My Health LA
- Women, Infants & Children (WIC)
- School Breakfast & Lunch
- Summer Food
- Public Education
- Help from Food Pantries
- Help from Shelters
- Services from many Non-Profit Agencies

These programs don't require satisfactory immigration status and if you are undocumented, you may still qualify. If anyone asks you about your immigration status, be careful. You do not need to tell anyone that you or anyone else who lives with you is undocumented. Your workers do not need to ask about your immigration status if you are not getting benefits for yourself. If they do ask you, simply tell them that you are a "not qualified" immigrant ("not qualified" is not the same as undocumented). That is all they need to know.

If a school or child care center requests your social security number on a form, you can write "none" on the form or leave it blank. They may not give the information on that form to a government agency.

Benefits for Victims of Trafficking, Domestic Violence, and Other Serious Crimes

California law provides eligible non-citizens who are victims of trafficking, domestic violence and other serious crimes access to benefits equal to those available for refugees.

- Victims of trafficking may qualify for up to one year before they are certified by the federal government as victims or obtain a "T Visa".
- Victims of domestic violence and other serious crimes may qualify once they have applied for U status. Other victims of domestic violence who are applying under the VAWA self-petition process may become eligible once they have a pending VAWA self-petition.
- You do not need a social security number to apply.

If You Don't Speak English or Speak Limited English

If you do not speak English, or speak limited English and you need to apply for benefits such as CalWORKs, Medi-Cal, GR, CAPI or CalFresh, you have the right to receive interpretive services free of charge. The Department of Public Social Services (DPSS), the Department of Health Services (DHS), and the Social Security Administration must provide you with a worker who speaks your language or connect you to a telephone interpreter service, at no cost to you. You may also have the right to have written materials interpreted in your language.

DPSS now assigns a supervisor in every office to serve as the District Immigrant Liaison. You should call the District Immigrant Liaison if:

- you are denied assistance because you are not a citizen, even though you are eligible
- you do not receive a free interpreter
- there is a delay or any other problem because you speak limited English
- ask for the District Immigrant Liaison at the nearest welfare office, in person or by telephone (see pg. 71).

Discrimination Complaint: If you feel that the county has discriminated against you, you can make a discrimination complaint to the County's Civil Rights Coordinator. You may file a complaint by completing a Complaint of Discriminatory Treatment, PA 607 form or, verbally by calling the Civil Rights Hotline at (562) 908-8501. You must do this within 180 days of the discrimination.

If you do not speak English or speak limited English and you need to apply for SSI, SSDI, or a Social Security number, the Social Security Administration is required to give you an interpreter, no matter what language you speak, whether it is at the Social Security Office or at an appointment to determine a disability.

Prohibited Discrimination: Under State law, welfare agencies may not provide you aid, benefits or services that is different from aid provided to others on the basis of Race, Color, National Origin (including language), Ethnic Group Identification, Age, Disability, Religion, Sex, Sexual Orientation, Political Affiliation, Marital Status, or Domestic Partnership.

Revolution English is an online platform designed to help immigrants to learn English and keep up with news affecting immigrants in the United States. You can go to <https://revolutionenglish.org/join-now/> and click Start Now to receive free daily English lessons on Facebook Messenger. The lessons have 3 levels. To start learning you just click on the buttons.

Who Can Get Benefits?

1. Who are "Qualified" and "Non Qualified" Immigrants?

The government divides immigrants into "qualified" and "not qualified" immigrants. You have to check the guidelines for each program to see which immigrants are eligible. The names are misleading, because "Qualified" immigrants are not necessarily eligible for programs, and "Not qualified" immigrants may still be able to apply in different programs.

"Qualified" immigrants include:

- Lawful permanent residents ("green card")
- Refugees
- Asylees
- Persons granted withholding of deportation or removal
- Cuban and Haitian entrants
- Amerasian, Iraqi or Afghan special immigrants
- Persons paroled into the U.S. for at least one year
- Conditional entrants
- Victims of trafficking
- Certain spouses and children who are victims of domestic violence.
- Veterans, active duty military and their spouse or unremarried surviving spouse or children
- Certain American Indians born abroad

"Not Qualified" immigrants include:

- Undocumented immigrants
- Temporary Protected Status (TPS)
- Persons who are Permanently Residing Under Color of Law (PRUCOL), which means the authorities know you are here but do not plan to deport you

- Persons in the U.S. on a non-immigrant visa
- U Visa applicants and holders

2. Which Immigrants Can Get SSI?

If you are a low-income non-citizen in the U.S. who has a disability, is blind, or over 65 years old, you can get SSI if you meet all the usual requirements of the program, AND you meet these conditions:

- You are a refugee, Amerasian immigrant, Cuban or Haitian entrant, federally certified victim of trafficking or a T visa holder, asylee, or were granted withholding of deportation/removal, (but only during the seven years after getting this status. If it has been more than 7 years and you do not qualify for SSI based on any other grounds, you should apply for CAPI;
- You are a "qualified immigrant" who is a current or veteran U.S. military personnel (or Filipino veteran who served under U.S. command during WWII), or the spouse or dependent child (under 18 if unmarried or under 22 if a student) of one, or the unremarried widow or widower of one;
- You are a lawful permanent resident with credit for 40 quarters (about 10 years) of work in the U.S. You can add your work quarters with any work quarters earned by your spouse during the marriage, or that your parents earned before you were 18. However, if you entered the US on or after August 22, 1996 you cannot use your work quarters until 5 years after the date you became a "qualified" immigrant
- You are a "qualified" immigrant who was lawfully residing in the US on August 22, 1996 and are blind or disabled. However, unlike those in the above categories you cannot qualify solely on the basis of being over 65 years old.
- If you have a sponsor, see pg 65 "What If I Have a Sponsor" about "deeming" rules.



► 3. Which Immigrants Can Get CAPI?

If you are an immigrant who has a disability, is blind or 65 years old or older and you are not eligible for SSI because of your immigration status, you may be able to get CAPI (Cash Assistance Program for Immigrants, see pg. 32 for full details.)

To get CAPI you must be either

- a "Qualified Immigrant" (see page 63)
- a survivor of trafficking
- a "U" visa applicant or holder, or
- PRUCOL (Permanently Residing Under Color of Law), meaning that the immigration authorities know you are here and do not plan to deport or remove you from the country.

- If you have a sponsor, see pg 65 "What If I Have a Sponsor" about "deeming" rules.

► 4. Which Immigrants Can Get CalFresh ?

To get CalFresh you must be:

- A Qualified Immigrant (see page 63) OR
- You, your spouse or parent are a member of a Hmong or Lao tribe that provided assistance to the US during the Vietnam War era and you are lawfully present in the US.
- A survivor of trafficking (T-visa) or a U visa applicant or holder
- Lawful temporary resident (you have a green card but have not yet been here 5 years)
- Sponsored non-citizen who is indigent, or otherwise exempt from deeming

► 5. Which Immigrants Can Get CalWORKs and GR?

Qualified immigrants, noncitizen victims of trafficking, U visa applicants and holders, and immigrants who are PRUCOL may be eligible for CalWORKs pg. 15) and General Relief (pg. 33). You must also meet the income limit and other requirements. If you have a sponsor, see pg 65 "What If I Have a Sponsor" about "deeming" rules.

► 6. What is Refugee Cash Assistance?

Refugees who have been in the country less than 8 months and persons who were granted asylum less than 8 months before, may be eligible for Refugee Cash

Assistance (generally this is for able bodied adults without children.) Survivors of trafficking, noncitizen victims of domestic violence and other serious crimes, and U visa applicants and holders also may qualify for Refugee Cash Assistance. Call the local DPSS office listed on page 71.

► 7. What Health Care Programs Are Available for Immigrants?

All LA county residents, including documented and undocumented immigrants, may be able to get health care through county programs, private programs, and many Medi-Cal programs. See page 45, Medi-Cal--Immigration Status.

Under state law SB75 all children up to age 19 with family income less than 266% of federal poverty level (see chart on page 52) are now eligible for full scope Medi-Cal regardless of immigration status.

"Qualified" immigrants, survivors of trafficking, U visa applicants and holders, and PRUCOL immigrants may be eligible for In-Home Supportive Services. CAPI (Cash Assistance Program for Immigrants) recipients may also be eligible for In-Home Supportive Services. Sponsor "deeming" may apply (see "What If I Have a Sponsor", pg. 65)

► 8. Public Housing

Most "qualified" immigrants and victims of trafficking are eligible for housing assistance from the U.S. Department of Housing and Urban Development (HUD) if they meet the program's other rules. HUD is a federal program; different rules apply to state and local housing programs

You can apply for and receive HUD assistance even if one or more household members are not a citizen or "qualified" immigrant. Assistance may be calculated based on the number of citizens or eligible immigrants in the household.

In 2019, the Trump administration proposed a rule change that if adopted will strip many housing benefits away from households that have any household members who is a "non-qualified" immigrant. If adopted, the new rule will bar "mixed-status" families from public housing and Section 8 programs. If this rule goes into effect, HUD will also require all household members under age 62 to have their immigration status screened and will change the citizenship and immigration

verification requirements for U.S. citizens and noncitizens over age 62.

For updated information see <https://www.keep-families-together.org/>

Social Security

1. Social Security Benefits

If you have paid into the Social Security system as a worker or had money taken out of your paycheck for this program, you may qualify for Social Security disability, retirement or survivor benefits. [See pg. 29] To receive the benefits, you must be either lawfully present in the country now, or have been receiving benefits based on a claim filed before December 1, 1996.

You are not eligible for Social Security benefits if you have been deported, except if you have been readmitted as a lawful permanent resident. Your benefits may be suspended if you leave the U.S. for 6 months or more while still a non-citizen.

2. Social Security Numbers

To get a Social Security card that allows you to work, you must have papers showing that you are a:

- Lawful Permanent Resident ("green card holder")
- refugee, asylee, citizen of a "freely associated state" (Micronesia, Marshall Islands or Palau) or
- have an employment authorization document issued by the U.S. Citizenship and Immigration Services.

If you are lawfully in the U.S. but do not have work authorization, and need an SSN in order to get a benefit for which you are otherwise eligible, you can apply for a "non-work" SSN from a Social Security office that can be used for benefits purposes only. It is illegal to use this card for work-related purposes.

Worker's Rights

Regardless of your immigration status, you have the right to receive minimum wage, overtime and safe working conditions. You also have the right to be free from harassment and discrimination. If your rights as a worker are being violated, contact the state Labor Commissioner's Office at (213) 897-4037 to complain. If you have legal work papers, it is illegal for employers to commit on-the-job discrimination, or deny a job because a worker is from another country.

► 2. What If I Have A Sponsor?

have used cash welfare or long-term care (like a nursing home) paid for by Medi-Cal or other government funds.

There is a rule change that was proposed by the Trump administration in 2018 that would expand the number and type of programs that qualify as "public charge", and that would make it more difficult for immigrants who have used public benefits to become legal permanent residents. However, these proposed changes have been challenged in court and no final decision has been made as of the time this book was written. Even if new rules are adopted, the officials must look at many factors in addition to your use of public benefits to be able to deny you legal permanent residency. If your family is in need of food, health care, or housing, you should not let worry about Public Charge cause you to suffer needlessly. Consult one of the groups listed on page 66 for advice if you are worried about how "public charge" may affect you.

Persons applying for an immigrant visa through a US Consulate abroad are already being subjected to the new Department of State instructions that expand the definition of "public charge".

Even if new rules are adopted, you do not have to worry about public charge if you:

- Already have a green card (unless you leave the US for more than 6 months at a time and try to re-enter)
- Are applying for citizenship
- Are applying for asylum
- Are applying for a T visa
- Are applying for a green card based on:
- asylee or refugee status
- T or U visa status
- having lived in the US since before 1972

Victims of domestic violence who file a self-petition under the Violence Against Women Act (VAWA) are subject to the "public charge" test. However, they can use all benefits, including cash welfare, without affecting this decision. U visa applicants can get a public charge "waiver," and there is no public charge test when U visa holders apply for a green card.

The rules of Public Charge may change. Check with an agency you trust for updated information.

Can Using Benefits Affect My Immigration Status

► 1. What is Public Charge?

If you are applying to become a lawful permanent resident (green card holder), the government can deny a green card to you if they determine that you are likely to become a "public charge" (meaning someone likely to rely on cash welfare or long-term care.) Officials will look at many factors, including your age, your health, your entire family's income and resources (and if you have a sponsor, their income and resources) to determine whether in the future you will be likely to need to rely on cash welfare to live. They will look at "the totality of your circumstances" and no single factor will make you a public charge.

Under the traditional test, depending on your situation, past use of cash benefits may not count against you, if, for example, it was several years ago that you received the benefits or if it was only for a short period of time. Also, under the traditional test, if you are applying to become a lawful permanent resident (green card holder), using health care programs (such as Medi-Cal, In Home Supportive Services, or Healthy Families) or CalFresh/Food Stamps, will not hurt your chances of getting your green card by making you a "public charge". However, you might have a problem getting your green card if you

Help for Refugees

Each “official” or documented refugee who enters the United States is assigned to a Resettlement Agency (RA), usually before arrival. In addition to initial resettlement and sponsorship, these offices can provide some employment assistance and social service counseling. RAs can also give referrals to other services and often help refugees arrange for the entry of close family members. These organizations include the following:

International Institute of Los Angeles (American Council for Nationalities Service) (323) 224-3800
International Rescue Committee (818) 244-2550
Interfaith Refugee and Immigration Service (323) 661-8588
Catholic Charities Immigration & Refugee Dept. (U.S. Council of Catholic Bishops) (213) 251-3486

Immigration and Customs Enforcement (ICE)

1. If ICE Shows Up At Your Door

- Do not open the door. You do not have to let them in unless they show you a warrant signed by a judge.
- If they claim to have a warrant, tell them to show you the warrant through a window or to slip it under the door.
- If it is not a warrant signed by a judge, you should not allow them to enter; but if they force their way in, do not resist. Ask to speak with a lawyer, do not sign anything unless you have your lawyer with you, and do not speak with them except to say you want to speak with a lawyer and either remain silent or tell them you choose to use your right to remain silent. You do not have to answer their questions.

2. If You Are Arrested or Detained by ICE

If you are arrested by the Immigration and Customs Enforcement (ICE), you should

- Remain silent, or tell the ICE agent that you want to remain silent.

- Ask to speak with a lawyer
- Not carry false documents
- Find out the name and phone number of a reliable immigration attorney and keep this information with you at all times.
- Know your "A" number (alien registration number) if you have one, and write it down someplace at home where your family members know where to find it.
- Prepare a form or document that authorizes another adult to care for your minor children.
- Advise family members who do not want to be questioned by ICE to stay away from the place where you are being detained
- Not sign any documents without first speaking with a lawyer.

Help with Immigration Questions

Asian Americans Advancing Justice (213) 977-7500
Center for Human Rights & Constitutional Law (213) 388-8693
CARECEN (Central American Refugee Center) 2845 W. 7th St. 90005 (213) 385-7800
Center for Human Rights and Constitutional Law 256 S. Occidental Blvd., L.A. 90057 (213) 388-8693
CHIRLA (Coalition for Humane Immigrant Rights of Los Angeles)(213) 353-1333
El Rescate 1501 W 8th St., Suite 100 LA 90017 (213) 387-3284
Legal Aid Foundation of Los Angeles (213) 640-3883
Neighborhood Legal Services of Los Angeles County (818) 896 5211
13327 Van Nuys Blvd., Pacoima 91331
Los Angeles County Bar Immigration Project (213) 485-1872 www.lacba.org
LA Gay and Lesbian Center Legal Services Department (323)993-7670 www.lagaycenter.org
Immigration Center for Women and Children (213) 614-1165 www.icwclaw.org/

The National Immigration Law Center has resources on benefits for immigrants at: www.nilc.org/benefitsca.html

Hearings and Complaints

If your benefits have been denied or cut unfairly, you should fight it! Don't be intimidated. Request a State hearing immediately whenever your rights are threatened. Don't forget deadlines. Remember you only have ninety days to appeal a denial, reduction, or termination of a county benefits program such as CalWORKS and CalFRESH. However, if the county fails to send out a notice, or the notice is inadequate the ninety days to appeal do not begin to run out and you can file for a state hearing anytime.

In a State hearing, you will have a chance to explain your case, and after hearing your side and the county office's side, an impartial judge will decide who wins. Sometimes, just requesting a hearing will resolve your problem. If a county employee tells you that you don't have a case, insist on a hearing and seek out legal advice. [See Good Advice, p. 69]

If you are disabled, the Department of Public Social Services [DPSS] office, where you get your cash aid and food stamps, must help you to request a hearing and to understand your rights, so ask for help if you need it. For example, you may need help writing because you have arthritis. If you are disabled and cannot come to a hearing downtown you have a right to have a hearing in your home. However, you must request an in-home hearing and tell why you need it. Keep a copy of your hearing request. If you are treated unfairly because of a disability or health problem, you may, send a complaint letter or the ADA PUB 1, ADA Complaint form to the ADA Title II Coordinator DPSS Civil Rights Section, 12860 Crossroads Parkway South, City of Industry, CA 91746 or by calling the Civil Rights Hotline at (562) 908-8501. .

Seek advice and assistance. Talk to a legal worker or community worker about your situation (See Good Advice, p. 68).

Keep good records and save all papers that an agency gives or mails to you. Keep a copy of any documents that you send to a county office. Get a receipt for any papers you mail or hand in to a county office. Write down the name of anyone you speak with in person or over the phone and the date and time that you talked.

You have a right to see your case file and to copy anything you need in it, such as the documents you provided to the DPSS office, notices of action, requests for documents, and anything the DPSS office mailed or hand delivered to you.

You have a right to see any regulations or instructions that apply to your situation. The county must follow a legally-guaranteed

set of rights which apply to any of these programs.

For CalFresh, Medi-Cal, CalWORKs, and IHSS

1. Fixing Your Problem Without A Hearing

The most reliable way to fix a problem with your benefits is to ask for a hearing (see below).

Below are some tips that may allow you to fix your benefits problem without going to hearing. However, please remember the following two things: (1) You only have ninety days to ask for a hearing once you receive notice of a county action and (2) None of the steps below are the same as actually requesting a hearing, so keep an eye on your deadline and remember to request a hearing if the steps below don't fix your problem.

If you are not satisfied with any decision made about your case, ask to speak to your worker's supervisor. You can also contact the Customer Service Center at (866) 613-3777

If this fails, ask to speak to the deputy director and, after that, the director of the DPSS office. However, you may file for a fair hearing to challenge an action (see below) at any time. If you need help, call an advocate, legal aid organization, your county supervisor, or a local legislator. If you act fast, and keep at it, you may win.

2. Asking For A Hearing

You must be sent a Notice of Action 10 days before any action is taken that will reduce or stop your benefits. The notice must explain clearly the reasons for the action and list the regulations that support this action. If you disagree with this action and you formally request a fair hearing before the date the action takes effect, then under most circumstances

your aid will not be cut until the hearing (unless it ends for another reason, like your certification period ended.) If you did not appeal on time because the notice was not clear and you did not understand what action was being taken until after the action became effective, you can ask the judge at the hearing for your benefits to continue at the unreduced rate. You should seek help if you want to make such a claim under Welfare and Institutions Code section 10967 and want to get your benefits reinstated.

If you do not ask for a fair hearing before the date the action takes place, your aid may be reduced or terminated but you still may fight the action if you ask for the hearing within 90 days of the date the notice was mailed. Save the envelope your notice came in and a copy of your fair hearing request so you will have proof that you met the required deadline.

To request the fair hearing, you may fill out and return the form on the back of the notice or write a letter doing so in your own words. Send your request to:
Appeals and State Hearing Section
P.O. Box 18890
Los Angeles, CA 90018.

Please keep a copy of your hearing request and, if possible, mail the request with a postal tracking number so you can prove that your hearing request was received on time.

You can also request a hearing by calling the toll-free number set up for this purpose, (800) 952-5253. You should call early: they open at 7:30 AM. The line is often busy, so keep trying. Remember to take the first and last name of the person you spoke with.

You can now also set up an e-filer account with the State's Appeals Case Management System (ACMS). Through ACMS, you can request an appeal, and you will also have access to the hearing documents and the County's position statement. You can create an ACMS account at <https://acms.dss.ca.gov> or learn more about the system at <http://www.cdss.ca.gov/inforesources/Appeals-Case-Management-System>.

You cannot make a hearing request with your worker or any other County staff. You must either call the 800 number or send the written request to the Appeals and State Hearing Section P.O. Box. But if you do mistakenly request a hearing from your worker or local county staff, they are



bound to forward your hearing request to the right place. Even if you made your hearing request to the wrong place like the county offices, if you did it on time, you are still entitled for your aid to continue at the same amount prior to the reduction or termination of benefits until the hearing.

▶3. Next Steps

The state will send you a notice with the date, time, and place of your hearing. Usually, this happens within 3 or 4 weeks. Currently, in the CalFresh program, any time before the hearing, you can request a delay (“postponement”) of the hearing in order to have more time to prepare or to get an attorney or advocate. In other aid programs, or to get a second postponement, you must have a very good reason (“good cause”).

You will also receive the name, telephone number and address of the Appeals Hearing Specialist (AHS) assigned to your case. The AHS will present the county's side at the hearing. Again, if you asked for a hearing early enough, your benefits are not supposed to be reduced or terminated before your hearing. This is called “Aid Paid Pending.” (The exception is if the program is CalFresh and your certification period has expired.) If you were supposed to get Aid Paid Pending, and you did not, tell your AHS. He or she is supposed to help you.

The AHS will also write up the county's side before the hearing in a "Statement of Position". You have the right to get a copy of the Statement of Position. If you ask the AHS for the Statement of Position you may get it up to two days before the hearing. Even if you don't ask for it, the AHS must have it ready on the day of the hearing for you to read. If the AHS does not have it ready for you to see before your hearing, you may ask the judge to postpone the hearing to give you more time to read the statement. This postponement does not count against you. You may have the statement of position faxed or emailed to you, or go to the Appeals and State Hearings Office and pick it up. It should also be available on ACMS if you created an account. It will tell you what the county's position and evidence are before the hearing so you can prepare your case. The Statement of Position will also be available online in the state's computer system, called the Appeals and Case Management System (ACMS). When you request the State hearing online with the State, you will receive a PIN Number. You

will be able to track your State hearing request, including the county's Statement of Position, which will be available two days before the State hearing.

▶4. What If I'm Disabled or Homebound?

If you are disabled, or homebound, hearings can be held by phone, at the county office or in your home, but you must ask for this in your hearing request. If you forget to request it on the hearing request, send a letter to the same P.O. Box address where you sent your hearing request as soon as possible.

You must also be provided with an interpreter for the hearing, at no cost, if English is not your first language or if you have a disability, such as a hearing impairment, that limits your ability to communicate with others.

▶5. After the Hearing

After your hearing, call the toll-free number and complain if the state takes longer than 60 days to give you a decision about CalFresh, or 90 days if the hearing was about CalWORKs, Medi-Cal or IHSS. These are usually the maximum amounts of time that are permitted to decide such cases (starting on the date of your request for hearing). If your hearing decision takes longer than 90 days and you have never continued it, the state can decide that you can get extra money for the delay.

If you do not win the hearing, you can request a rehearing. You may also appeal the ALJ's decision to the Superior Court. You should contact a lawyer experienced in this area to file such an appeal. You have one year from the date of the decision to file a case in court.

For Social Security and Medicare

The Social Security Administration must mail you a notice before they make any changes to your benefits. If you disagree with the proposed action, request a “Reconsideration” immediately by going to the Social Security office and filling out a “Request for Reconsideration” form. You can also request a Reconsideration online at <https://www.ssa.gov/benefits/disability/appeal.html>.

Make sure that you get a copy of the form stamped by Social Security with the date it was filed. If you requested a Reconsideration online, make sure to print or save a copy of the webpage confirming that your request was submitted. You may also download the form from Social Security's website ssa.gov and mailing in the form to your local Social Security office with a postal tracking number to prove when you mailed it. When requesting a Reconsideration in person, online, or via mail, make sure you check the box for an informal conference. If you do not check this box, you will just get a review of the paper work and the decision is not likely to change.

The county DPSS will help with reconsiderations and appeals if you are a GR recipient attempting to get on to SSI or Social Security.

If you request a Reconsideration within the time period given on the notice (usually 10 days but sometimes 30 days for an overpayment), your benefits can continue unchanged until you receive a reconsideration decision.

If Social Security paid you too much, and they want to take money out of your benefits check, you can request a waiver if it wasn't your fault and it would be hard for you to pay the money back. You can get the waiver form from your local Social Security office or online from ssa.gov. If you owe the money, you can also request that the money be collected back at a lower rate per month.

In SSDI cases, you must fill out a separate form asking for your aid to continue. If you miss the deadline given in the notice, the aid will be cut or reduced, but you still have 60 days from the date you received the notice to request a Reconsideration. After 60 days, if you have “Good Cause” for missing the deadline, you may be allowed to file a Reconsideration. If you win the Reconsideration, your lost benefits will be paid back to you.

There are three types of Reconsideration: **case review, informal, or formal conference.** It is best to ask for an informal conference. However, if your application for SSDI or SSI is denied for medical reasons, you can usually only get a case review. Some SSA offices require that you file for a hearing with a judge to appeal any decision related to disability. Check with your local SSA office before appealing.

your disability is at issue. The ALJ who holds the hearing may ask you questions. He or she will write a decision based on the hearing record. If you waive your right to appear at the hearing, the ALJ will make a decision based on the evidence that is already in the file. It is never a good idea to let the judge make a decision without hearing from you particularly if the issue is whether you are disabled.

▶If You Get SSI or SSDI and Begin Working

When you are receiving SSI or SSDI and then start working, your benefits could be cut if you are working and earning too much. (This is known as “Substantial

Gainful Activity” or “SGA”). Ten days after you get the tentative notice, a notice that your payments will stop will be sent to you. Request a reconsideration immediately. To protect yourself, it is best to make a new application at the same time you request a Reconsideration. In 2012 SGA is \$1260 a month (\$2110 if you are blind) . SGA for the blind does not apply to Supplemental Security Income (SSI) benefits, while SGA for the non-blind disabled applies to Social Security and SSI benefits

If you are considering going back to work, Call Disability Rights California at (800) 776-5746 and ask for their booklet, “Disability and Work.” You can get this online on the Social Security website, www.ssa.gov.



Good Advice

Legal Aid

You can get free legal help with problems involving all the programs in this guide or with such issues as divorce, separation, child support, custody, and consumer rights. To qualify for free legal services that are federally-funded, your income must be low (around the level of people who qualify for CalWORKs).

The following are some of the leading legal and casework services programs in our county:

Legal Aid Foundation of L.A.
800-399-4LAW (4529) www.lafila.org
TDD for deaf callers 310-393 7734
Central L.A.(213) 640-3881
1550 W. 8th St. at Union
East L.A.(213) 640-3883
5228 Whittier Blvd.
South L.A.(213) 640-3884
8601S. Broadway
West L.A.(323) 801-7989
1102 S. Crenshaw
Santa Monica (310) 899-6200
1640 5th St #124.
Long Beach (562) 435-3501
110 Pine Ave., Ste. 420.

Neighborhood Legal Services of Los Angeles County www.nls-la.org
(800) 433-6251.
Health Consumer Center,
(800) 896-3203
13327 Van Nuys Blvd. Pacoima (Multi-lingual. Covers all of San Fernando Valley, San Gabriel Valley, Pomona, Antelope Valley, Glendale and Burbank.)

American Civil Liberties Union—Southern California (213) 977-9500
www.aclu-sc.org.
Voice mail for intake (213) 977-5253

AIDS Project Los Angeles
(213) 201-1600. www.apla.org. 611 S. Kingsley Dr. ; 639 N. Fairfax Ave. (Benefits, insurance, counseling, case management, food distribution, home health care, dental clinic, housing, jobs)

Alliance for Children's Rights
(213) 368-6010. www.kids-alliance.org
3333 Wilshire Blvd #550 LA (legal and social services, foster care, adoption, guardianships, health access)
Asian Americans Advancing Justice
(213) 977-7500 advancingjustice-la.org
1145 Wilshire Blvd., L.A. (multi-lingual services: family law, domestic violence, government benefits, elder law, housing rights, consumer and debtor relief, garment worker rights, anti-discrimination county-wide)

Bet Tzedek Legal Service L.A.
(323) 939-0506 www.bettzedek.org
3250 Wilshire Blvd. 13th floor, L.A.90010 (multilingual service: seniors, nursing home advocacy, housing conditions)

Center for Health Care Rights
www.healthcarerights.org
(213) 383-4519.
520 S. Lafayette Park Place #214, L.A. (Medicare issues)

Coalition for Economic Survival (213) 252-4411. 5114 Shatto Pl. Ste. 270 (tenants organizing and rights) www.nkla.sppsr.ucla.edu/ces

Community Legal Services www.legal-aid.com (800) 834-5001. 725 W. Rosecrans Ave., Compton and 11834 E. Firestone, Norwalk (Orange County & Southeast L.A. County)

Harriett Buhai Center for Family Law
www.hbcfl.org (213) 388-7515. 4262 Wilshire Blvd #201 L.A.
Inner City Law Center (213) 891-2880
1325 E. 7th St. L.A. (homeless issues, veterans, housing conditions, GR)

Maternal and Child Health Access
(213) 749-4261.1111 W. 6th St. #400 L.A. (Medi-Cal & CalFresh)

Mental Health Advocacy Services
3255 Wilshire Blvd, LA, Ste. 902 90010 (213) 389-2077(SSI, discrimination, access)
Disability Rights California
www.disabilityrightscsa.org
350 S Bixel St, Suite 290, L.A. (800) 776-5746 (800) 781-4546 TTY (Human rights for people with disabilities, institutions and hospitals; abuse and neglect, government benefits)

Public Counsel www.publiccounsel.org
(213) 385-2977. 610 S. Ardmore Ave. (Child care provider support, children's rights, adoption of foster children, consumer scams, juvenile justice, homelessness, immigration asylum)

Disability Rights Legal Center
www.disabilityrightslegalcenter.org
 800 S. Figueroa St., #1120, L.A. 90017
 (213) 736-1334
 213-736-8310 TTD

Women Helping Women Services
 (323) 655-3807 (Counseling,
 information and referral for many
 problems)

Financial Help

Jewish Free Loan (interest free loans and
 flexible payback: serves all people)
 (323) 761-8830

Pregnancy and Adoption

Adoption HotLine (800) 697- 4444
Beverly Hills Birthing (323) 462-6423
Birth Control Helpline (800) 942-1054
El Nido Family Center (323) 971-7360
Pregnancy HotLine (800) 848-5683
St. Anne's Maternity (213) 381-2931

Suicide Prevention

Suicide Prevention
 (877) 727-4747 (310) 391-1253
 (24 hour nonprofit free center)

Slavery and Trafficking

**CAST—Coalition to Abolish Slavery and
 Trafficking.** (213) 385-5584
www.castla.org Client-centered case
 management for trafficked people.

Victims of Abuse and Violence

▶ 1. Victims of Violent Crime

The California Victim Compensation
 Program provides eligible victims with
 reimbursement for many crime related
 expenses, including funeral, medical,
 income loss, relocation and other. There
 are restrictions. See www.victims.ca.gov
 or call (800) 777-9229

▶ 2. Child and Elder Abuse

Child Abuse: (800) 540-4000 (Report
 abuse or exploitation of a child to the
 County)

Elder Abuse: (800) 992-1660 (Report
 abuse or exploitation of a disabled adult
 or elder to the County)

▶ 3. Domestic Violence and Rape

If you are a victim or a friend of yours is
 a victim of domestic violence (abuse) or
 rape you should call to get help. Protect
 yourself and your children, seek help
 and deal with violence. Most of the
 following hotlines are 24 hour and have
 multi-lingual capability.
 (800) 585-6231.

TDD for deaf callers (800) 787-3224
 (213) 626-3393 (310) 547-9343.
 (310) 392-8381 (323) 655-3807
 (562) 402-4888 (626) 793-3385
 (818) 886-0453 (909) 626-4357

Center for the Pacific-Asian Family (323)
 653-4042 or (800) 399-3940
“A Safe Way Out” (800) 978-3600

What is Abuse?

Abuse can be anything that hurts you:

- Physical abuse (hitting, punching,
 shoving, using weapons or threats of
 physical harm)
- Any kind of forced sexual activity with
 any adult or child
- Threats of assault or sexual assault
- Yelling at you
- Threatening to kidnap the children
- Keeping you from friends or relatives
- Making you account for all your time
- Denying or neglecting food or medical
 care
- Controlling the money
- Harassing you at your job
- Following you around wherever you go.

Restraining Orders

Legal aid agencies listed on the previous
 page can help you get a restraining
 order against the abuser. A restraining
 order can be obtained at the Superior
 Courthouse at 111 N. Hill St. in
 downtown LA or at your local court. If
 you file at the downtown courthouse,
 call the Domestic Violence Counseling
 Project (213) 624-3665. Local police
 or sheriff officers can issue 3-day
 emergency restraining orders if called to
 the scene of a battering incident.

Almost all of the courts in Los Angeles
 have domestic violence clinics where
 they will help anyone, regardless of
 income, to get a temporary restraining
 order against an abuser.

Immigrants

Low income immigrants who are victims
 of domestic violence may be able to

legalize their immigration status without
 relying on their abuser, and may be
 able to get government benefits to help
 them escape abusive situations. For free
 help, contact: **Asian Americans Advancing
 Justice** (213) 977-7500
Legal Aid (800) 399-4LAW (4529).

Hate Crimes

In California, a hate crime is any criminal
 act or attempted criminal act against a
 person or place based on the victim's
 actual or perceived race, nationality,
 religion, sexual orientation, disability,
 gender, or status as homeless. Hate
 crimes include threats of violence
 that look like they can be carried out
 and any act which results in injury.

If you or someone you know becomes a
 victim of a hate crime:

- Seek medical attention for any
 injuries, even if you consider them
 minor. Keep copies of all medical
 records.
- Contact the police as soon as possible.
 Tell them you have been a victim of a
 hate crime.
- Keep copies of all documents signed
 or received and write down the name of
 the police or sheriff's officer who took
 your report.
- Document the hate crime providing as
 much detail as possible.
- Take photos of any injuries sustained
 or damage to property. Contact a legal
 service agency (see previous page) or

**Center for Human Rights & Constitutional
 Law** (213) 388-8693

**Coalition for Humane Immigrant Rights of
 Los Angeles** (213) 53-1333

Los Angeles Gay & Lesbian Center (800)
 373-2227 or (323) 993-7677

Muslim Public Affairs Council
 (323) 258-6722

So. CA Indian Center (213) 387-5772

If You Just Left Prison

Friends Outside (626) 795-7607

Variety of services to families of jail and
 prison inmates.

Chrysalis (for jobs)

- Los Angeles (213) 895-7777
- Santa Monica (310) 392-4117

Information on Prop 47: Certain non-
 violent crimes are now classed as
 misdemeanors instead of felonies. Learn
 how to change your record
www.myprop47.org

REAL ID

A REAL ID is a driver license or
 identification card that is also a federally
 accepted form of identification. The new
 rules for REAL ID begin October 1, 2020.

A REAL ID is needed if:

1. You wish to continue to use your driver
 license or identification card to board
 domestic flights within the U.S.
2. Enter secure federal facilities.
 If you want to continue to use a U.S.
 passport, U.S. passport card, military ID,
 enhanced driver license, or other federally
 accepted identification to do those things,
 you do not need to get a REAL ID, however,
 it is recommended.

You do NOT need a REAL ID to:

- Apply for or receive federal benefits such
 as Social Security Administration,
 County CPSS programs, etc.
- Enter a post office, or other secure
 federal facility that does not require
 identification
- Visit a hospital or receive life-saving
 services
- Ride Amtrak or other public ground
 transportation

Because of high demand for REAL
 ID between now and October 1, 2020
 (when the new federal identification
 requirements begin), DMV recommends
 you wait to apply for a REAL ID at the
 time of your renewal cycle.

You must visit a DMV office in person
 when applying for a REAL ID for the first
 time. You will need to show documentation
 proving your identity, California residency,
 and that you have an SSN (if eligible).
 You will need to provide:

- ONE identity document that shows your
 date of birth and true full name, such
 as a valid U.S. passport, certified
 copy of U.S. birth certificate, valid
 Permanent Resident Card, etc.
- ONE document showing your name and
 full SSN, such as a Social Security
 card, W-2, paystub showing full SSN.
- TWO different documents proving
 California residency that include
 the first and last name and mailing
 address that will be shown on
 your REAL ID driver license or
 identification card. Examples include
 a mortgage bill, home utility or cell
 phone bill, vehicle registration card,
 and bank statement.

Learn what other documents are acceptable
 to get a REAL ID:
<https://realid.dmv.ca.gov/what-is-real-id-faq/>

Department of Public Social Services

At these Department of Public Social Services offices you can apply for these
 programs: CW=CalWORKs, CF=CalFresh, GR=General Relief, MC=Medi-Cal.
Call (866) 613-3777 to apply for benefits or get help on your case. You
 must have your ten (10) digit Customer ID number and six (6) digit Personal
 Identification Number (PIN). If you don't have the Customer ID/PIN, request one
 when you speak to a Customer Service Representative. **Here are the locations
 of the DPSS offices:**

BELVEDERE (CW,CF,MC)
 5445 Whittier Blvd. LA 90022

CIVIC CENTER (GR, CF, MC)
 813 E. Fourth Place. LA 90013

COMPTON (CW, CF, MC)
 211 E. Alondra Blvd. Compton 90220

CUDAHY (CW,FS, MC)
 8130 S. Atlantic Ave. Cudahy 90201

EAST VALLEY (CW,FS, MC)
 14545 Lanark St. Panorama City 91402

EL MONTE (CW,CF,MC)
 3350 Aerojet Ave. El Monte 91731

EXPOSITION PARK (CW,FS)
 3833 S. Vermont Ave. L.A. 90037

FLORENCE (CW,FS, MC)
 1740 E. Gage Ave. L.A. 90001

GLENDALE (CW,GR,CF,MC)
 4680 San Fernando Rd., Glendale 91204

LANCASTER (CW,FS,MC)
 349-B East Ave. K6, Lancaster 93535

LANCASTER (CW,FS,MC,GR)
 337 East Ave K10, Lancaster 93535

LANCASTER GENERAL (GR)
 337 East Ave K10, Lancaster 93535

LINCOLN HEIGHTS (CW,FS,MC) 4077 N.
 Mission Rd., L.A. 90032

METRO EAST (CW,GR,FS)
 2855 E. Olympic Blvd., L.A. 90023
 (323) 260-3718

METRO FAMILY (CW)
 2615 S. Grand Ave. L.A. 90007

METRO NORTH (CW,FS,MC)
 2601 Wilshire Blvd., L.A. 90057

METRO SPECIAL (GR, CF, MC)
 2707 S. Grand Ave., LA 90007

NORWALK (CW,FS,MC)
 12727 Norwalk Blvd., Norwalk 90650

PARAMOUNT (CW,FS,MC)
 2961 E. Victoria Ave.
 Rancho Dominguez 90221

PASADENA (CW,GR,CF,MC)
 955 N. Lake Ave., Pasadena 91104

POMONA (CW,GR,FS,MC)
 2040 W. Holt Ave., Pomona 91768

RANCHO PARK (GR,FS,MC)
 11110 W. Pico Blvd. L.A. 90064

SAN FERNANDO (GR,FS)
 9188 Glenoaks Blvd., Sun Valley 91342

SAN GABRIEL VALLEY (CW,GR,FS)
 3350 Aerojet Ave., El Monte 91731

SANTA CLARITA (CW,FS,MC)
 27233 Camp Plenty Rd, Canyon Country
 91351

SOUTH CENTRAL
 (CW, GR, CF, MC)
 10728 S. Central Ave., L.A. 90059

SOUTH FAMILY (CW, CF, MC)
 17600-A Santa Fe Ave., Rancho Domin-
 guez 90221

SOUTH SPECIAL (GR,FS)
 17600-B Santa Fe Ave., Rancho Domin-
 guez 90221

SOUTHWEST FAMILY (CW,FS)
 8300 S. Vermont Ave, LA 90044

SOUTHWEST SPECIAL
 (GR, CF, MC)
 1819 W. 120th St., LA 90047

WEST VALLEY (CW,FS,MC)
 21415 Plummer St.,
 Chatsworth 91311

WILSHIRE SPECIAL
 (GR, CF, MC, CAPI)
 2415 6th St. L.A. 90057

The People's Guide

to Welfare, Health and Other Services in Los Angeles County 2020

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WHAT'S NEW IN 2020?

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