## ALABAMA

**SNAP Participation:** Email contact preferred to: fs@dhr.alabama.gov

For other participation questions:
Betty S. White, Program Supervisor  
Alabama Dept. of Human Resources  
50 Ripley St, S. Gordon Persons Bldg.  
Montgomery, AL 36130-4000  
Email: Betty.White@dhr.alabama.gov  
PIDParis@medicaid.alabama.gov  
Phone: 334-242-1745; Fax: 334-353-1963

**Medical Benefits:** Phone (334) 242-5010  
TANF/FIP: (334) 242-1773

Claims: Email contact preferred to: Geraldine Turner:  
Geraldine.turner@dhr.alabama.gov  
Same address as above  
Phone: 251-450-7544; Fax: 251-450-7544

WEB: www.dhr.alabama.gov

## ALASKA

Alaska Dept of Health & Social Services  
Division of Public Assistance  
Contact the office from which the client last received benefits. A list of offices can be found at: http://dhss.alaska.gov/dpa/Pages/features/org/dpado.aspx

If location of office is unknown, contact Director's Office/Policy Section at DPAPolicy@alaska.gov  
Phone: (907) 465-3347  
Address: PO Box 110640, Juneau, AK 99811-0640

WEB: http://www.hss.state.ak.us/dpa/

The State would prefer a FAX sent to (907) 465-5254.

## ARIZONA

Dept. of Economic Security Communication Center  
Emails are preferred over faxing requests.

Email requests to: Azstateinquiries@Azdes.gov  
FAX: 602-353-5746  
Phone number for request messages can be left at: (602) 771-2047

WEB: www.azdes.gov

## ARKANSAS

Beverly Stewart-Coleman  
DHS Program Manager, Customer Assistance Unit  
PO Box 1437, Slot S-341  
Little Rock, Arkansas 72203-1437  
Phone: (501) 682-8993  
Toll Free: 1-800-482-8988  
If neither of the above work: 501-682-8290  
Email: beverly.stewart-coleman@dhs.arkansas.gov

WEB: www.arkansas.gov/dhhs

## CALIFORNIA

California Department of Social Services  
744 P Street, MS 8-4-23  
Sacramento, CA 95814-6400

OUT OF STATE INQUIRIES  
The city and/or county in which the client resided in California must be provided in order to provide a referral to one of the 58 counties for verification of benefits.

Telephone number: (916)651-8848; press 1, then press 7 OR  
FAX number: (916)651-8866 OR  
http://www.cdss.ca.gov/cdssweb/entres/pdf/CountyCentralIndexListing.pdf to get a Central County Index Listing.

## COLORADO

Prefered method of contact is email:  
Outofstateinquiries@state.co.us

Contact phone number: 303-866-3122

Colorado Department of Human Services  
1575 Sherman St. 3rd Fl  
Denver, CO 80203

Fraud Hotline: 1-877-934-6361 recording

WEB: www.cdhs.state.co.us
### CONNECTICUT

**For SNAP:**
FAX Request on your AGENCY’S LETTERHEAD to 860-566-2022.

Allow 3 to 5 working days for a response.

**For TANF:**
Contact Elaine Davis
Telephone: 1-860-566-2022 or
Email: Elaine.Davis@ct.gov

### DELAWARE

**FOR SNAP**
Yvonne Smith-Rahama
Delaware Division of Social Services
Po Box 906, New Castle, DE 19720
Phone: 302-255-9659
Email: DHSS_DSS_Outofstate@state.de.us

Web: [http://www.dhss.delaware.gov/dhss/dss](http://www.dhss.delaware.gov/dhss/dss)

**FOR ALL OTHER PROGRAMS**
Delaware Department of Health and Social Services
Audit & Recovery Management Services (ARMS)
1901 N. DuPont Highway, New Castle, DE 19720

Effective May 1, 2012, Delaware will no longer respond to fax requests for PARIS matches. To verify public assistance benefit status in Delaware for dual participation alerts & investigations, PARIS matches, etc., please send an email from your STATE or COUNTY email account to:

DE_PARIS-ARMS@state.de.us with the following information*:

1. Your Name, Title, Agency Name, Address, phone number and fax number in the body of the email
2. Name(s) and date(s) of birth for the household member(s) applying for, or receiving, benefits in your State
3. The last four digits of each member(s) Social Security Number
4. A current address for the household member(s) and the date it was reported to your state so that request for contact letter(s) and/or closure notice(s) can be sent to the client

(*if your email address is not recognized as a State or County agency you may be required to verify your identity in another manner)

Responses to your request will be sent via email within 5 business days.

### DISTRICT OF COLUMBIA

Alicia Porter, Program Analyst
Office of Quality Assurance and Analysis/Eligibility Review and Investigations
District of Columbia Department of Human Services
Economic Security Administration
64 New York Ave. N.E., 5th Fl.
Washington, DC 20002
Office: (202) 535-1441
Fax: (202) 535-1455
Email: Alicia.Porter@DC.Gov

WEB: [www.dhs.dc.gov](http://www.dhs.dc.gov)

### FLORIDA

**Out of State inquiries:**
Miami Call Center
PREFERRED METHOD: Email to: D11.SFL.CallCenter@myflfamilies.com
(You should hear back from them within 5 business days)

**Dept. of Children & Families**
1317 Winewood Blvd., Bldg. 3, Room 435
Tallahassee, FL 32399-0700
Phone: 866-762-2237
Fax: 1-866 658 4135

WEB: [www.dcf.state.fl.us/ess/](http://www.dcf.state.fl.us/ess/)
### GEORGIA
DFCS Customer Service Operations  
2 Peachtree Street, Suite 8-268  
Atlanta, Georgia 30303  
Phone: 1-877-423-4746; Fax: 1-888-740-9355.

**Email inquiry is the preferred method:**  
Send requests for out-of-State verification to:  
- DHS-OIG Out-of-State Inquiry mailbox: ga.paris@dhs.ga.gov

### GUAM
Annie Gozum-Soto, Administrator  
Bureau of Economic Security, Division of Public Welfare  
Department of Public Health and Social Services  
123 Chalan Kareda  
Mangilao, Guam 96913-6304  
Email: annie.soto@dphss.guam.gov  
Contact number: 671-735-7354  
FAX: (671) 734-5910  
WEB: http://dphss.guam.gov

### HAWAII
Department of Human Services  
State Office Administrative Assistant (FSP & TANF)  
Benefit, Employment & Support Services Division  
820 Mililani Street, Suite 606  
Honolulu, HI 96813  
Phone: (808) 586-5720 (SNAP)  
Phone: (808) 586-5732 (TANF)  
If unable to get through, please call (808) 586-5735 for both SNAP/TANF.  
WEB: http://hawaii.gov/dhs

### IDAHO
Idaho Department of Health & Welfare  
Division of Welfare, 2nd Floor  
P.O. Box 83720  
Boise, ID 83720-0036  
Contact information to verify benefit status for [applicants](#) in your state coming from Idaho:  
Phone: (208) 334-5815  
Fax: (208) 334-5817 or 1-866-434-8278  
Email: mybenefits@dhw.idaho.gov

**To verify benefit status in Idaho for clients already active on benefits in your state (dual participation alerts & investigations, PARIS matches, etc.), please contact the Fraud Unit via e-mail at:**  
[walfraud@dhw.idaho.gov](mailto:walfraud@dhw.idaho.gov).

**WEB:** http://www.healthandwelfare.idaho.gov/

### ILLINOIS
Illinois Department of Human Services  
Bureau of Customer Support and Services  
2nd Floor Harris I, 100 South Grand Ave E  
Springfield, IL 62762  
Email: DHS_webbits@illinois.gov  
(Please note "Out of State Inquiry" in the subject line of all emails.)  
Phone: (217) 524-4174  
Fax 217-557-1370  
WEB: www.dhs.state.il.us

### INDIANA
Indiana Family & Social Services Administration  
P.O. Box 1810  
Marion, IN 46952  
To request client participation only, email:  
LaRhonda.Forbes@fssa.in.gov  
CALL CENTER: (Note: The numbers are intended to be the same)  
Phone: 1-800-403-0864  
Fax: 1-800-403-0864  
(Include SSN, DOB and full name)  
WEB: www.in.gov/fssa/

### IOWA
Integrated Claims Recovery Unit  
PO Box 36570  
Des Moines, IA 50315  
**To verify benefits and/or TANF months:**  
Call Integrated Claims Recovery Unit at:  
Phone: 1-877-855-0021; OR Fax: 515-564-4095  
Email: ICRU@dhs.state.ia.us

**To have an active Iowa case closed:**  
Clients can call Customer Service Call Center at 1-877-347-5678  
OR Email: IMCustomerSC@dhs.state.ia.us  
Website: www.dhs.state.ia.us

### KANSAS
Kansas Department for Children and Families  
Economic and Employment Services  
555 S Kansas Avenue  
Topeka, KS 66603  
Kansas no longer accepts faxed inquiries. All SNAP and TANF out-of-state inquiries must be emailed to: ebtmail@dfc.ks.gov

**For all Medical inquiries, contact Kansas Department of Health and Environment at:**  
800-792-4884  
**WEB:** www.def.ks.gov
<table>
<thead>
<tr>
<th>State</th>
<th>Contact Information</th>
</tr>
</thead>
<tbody>
<tr>
<td>Kentucky</td>
<td>Send OUT OF STATE INQUIRIES For SNAP, MEDICAID and TANF - Email: <a href="mailto:Outofstateinquiries@ky.gov">Outofstateinquiries@ky.gov</a></td>
</tr>
<tr>
<td></td>
<td>Phone: (502) 564-3440</td>
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<tr>
<td></td>
<td>WEB: <a href="http://cfkc.ky.gov">http://cfkc.ky.gov</a></td>
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<tr>
<td>Louisiana</td>
<td>Cara (Yvette) Shields, Program Specialist</td>
</tr>
<tr>
<td></td>
<td>Louisiana Department of Children and Family Services</td>
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<tr>
<td></td>
<td>Bureau of Communications &amp; Governmental Affairs</td>
</tr>
<tr>
<td></td>
<td>627 North 4th Street, 8th Floor</td>
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<td></td>
<td>Baton Rouge, Louisiana 70802</td>
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<tr>
<td></td>
<td>Phone: (225) 342-2342; FAX: (225) 342-9833</td>
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<tr>
<td></td>
<td>Email: <a href="mailto:cara.shields@la.gov">cara.shields@la.gov</a></td>
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<td>WEB: <a href="http://www.dcrs.louisiana.gov">www.dcrs.louisiana.gov</a></td>
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<tr>
<td>Maine</td>
<td>A signed release is required to obtain the verification</td>
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<tr>
<td></td>
<td>Out-of-State Inquiries</td>
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<tr>
<td></td>
<td>ACES Help Desk – Eligibility Specialists</td>
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<tr>
<td></td>
<td>Department of Health and Human Services Office for Family Independence</td>
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<tr>
<td></td>
<td>19 Union Street, SHS#11</td>
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<tr>
<td></td>
<td>Augusta, ME 04333 Phone: (207)-624-4130 Fax: (207) 287-3455</td>
</tr>
<tr>
<td></td>
<td>E-Mail: <a href="mailto:DESK.ACESHELP@Maine.gov">DESK.ACESHELP@Maine.gov</a></td>
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<tr>
<td>Maryland</td>
<td>Maryland Department of Human Resources</td>
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<tr>
<td></td>
<td>311 W. Saratoga St. Baltimore, MD 21201</td>
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<tr>
<td></td>
<td>For out of state inquiries for all programs or PARIS matches, forward your request to:</td>
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<tr>
<td></td>
<td>Email: <a href="mailto:dhr.outofstateinquiry@maryland.gov">dhr.outofstateinquiry@maryland.gov</a></td>
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<tr>
<td>Massachusetts</td>
<td>MA Department of Transitional Assistance Data Matching Unit</td>
</tr>
<tr>
<td></td>
<td>600 Washington Street, 5th Floor</td>
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<tr>
<td></td>
<td>Boston, MA 02111</td>
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<td></td>
<td>MAIL or FAX REQUEST ON AGENCY LETTERHEAD: FAX # 617-889-7847</td>
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<tr>
<td></td>
<td>WEB: <a href="http://www.state.ma.us/DTA">www.state.ma.us/DTA</a></td>
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<tr>
<td>Minnesota</td>
<td>Minnesota Department of Human Services</td>
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<tr>
<td></td>
<td>Economic Assistance and Employment Services Division</td>
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<tr>
<td></td>
<td>PO Box 64951</td>
</tr>
<tr>
<td></td>
<td>St. Paul, MN 55164-0951</td>
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<tr>
<td></td>
<td>Out of State Inquiries for case status of SNAP and TANF programs and the number of TANF months expended are provided through an automated web service. Go to the website by clicking on this link: Minnesota SNAP and TANF Verification Web Site Or type the web site address into your browser address bar: <a href="https://mn.gov/snap-tanf-benefit-verification/">https://mn.gov/snap-tanf-benefit-verification/</a> At the web site home page, complete the required fields for self-registration. In the code field, enter the word guest. After accepting the Oath, click the Next button which brings up the client information page. When all the client information has been entered, click the submit button which generates the request. A secure email response will be sent to the requestor with the results of the benefit verification. No other means for requesting this information is offered.</td>
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<tr>
<td>Mississippi</td>
<td>Department of Human Services</td>
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<td></td>
<td>Division of Field Operations</td>
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<tr>
<td></td>
<td>P.O. Box 352</td>
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<tr>
<td></td>
<td>Jackson, MS 39205</td>
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<tr>
<td></td>
<td>Phone: 1-800-948-3050</td>
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<td></td>
<td>OUT OF STATE INQUIRIES:</td>
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<tr>
<td></td>
<td>Email: <a href="mailto:ea.CustomerService@mdhs.ms.gov">ea.CustomerService@mdhs.ms.gov</a></td>
</tr>
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<td></td>
<td>This is preferred method for requests: Please include email address, agency telephone number and mailing address. Also include case member’s name, date of birth, SSN, current mailing address and brief description of verification that is needed.</td>
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<tr>
<td></td>
<td>FAX: 601-359-4550 (Not preferred)</td>
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<tr>
<td></td>
<td>WEB: <a href="http://www.mdhs.state.ms.us">www.mdhs.state.ms.us</a></td>
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<tr>
<td>MISSOURI</td>
<td>MONTANA</td>
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</table>
| **Correspondence and Information Unit**  
Family Support Division  
Department of Social Services  
P.O. Box 2320,  
Jefferson City, MO 65102-2320  
Interactive Voice Response: 1-800-392-1261  
Email: Cole.CoXIX@dss.mo.gov  
WEB: [http://www.dss.mo.gov](http://www.dss.mo.gov)  
**OR**  
Out-of-State line: The Family Support Division  
Information Center at 855-FSD-INFO or 855-373-4636,  
Option 3. | **Mollye Gauer**  
Department of Public Health & Human Services  
Human & Community Services Division  
PO Box 202925, Helena, MT 59620-2925  
Phone: (406) 444-9401;  
Email: mgauer@mt.gov  
**For TANF months verification ONLY:**  
Pam Barragato, TANF Program Officer  
111 N. Jackson, Helena, MT 59601  
Phone: (406)444-4139; FAX: (406)444-0617 **OR**  
Email: PBarragato@mt.gov |

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<thead>
<tr>
<th>NEBRASKA</th>
<th>NEVADA</th>
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</table>
| **Customer Service Center**  
Economic Assistance Customer Service Center  
Toll-free: 1-800-383-4278  
WEB: [www.accessnebraska.ne.gov](http://www.accessnebraska.ne.gov) | **Out of State Inquiries:**  
Email: WELFOOSINQUIRIES@DWSS.NV.GOV (Prefer)  
**OR**  
Fax: 775-684-0680  
Nevada requires requests to be sent on agency letterhead. Please include clients; Name, Date of Birth; the SSN or the last 4 of the SSN; and a listing of all household members who are applying for assistance in your state. Also be sure to include the return information (your name, phone, and fax #’s). Please allow 3 – 5 business days for a response.  
WEB: [http://dwss.nv.gov](http://dwss.nv.gov) |

<table>
<thead>
<tr>
<th>NEW HAMPSHIRE</th>
<th>NEW JERSEY</th>
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</thead>
</table>
| **Client Services/SOP_Brown**  
Department of Health & Human Services  
Division of Client Services  
129 Pleasant St, Concord, NH 03301  
Contact: Holly Hodge  
Tel: 603-271-9725  
Email: outofstateinquiries@dhhs.state.nh.us  
Client Services #: 603-271-9700.  
In-state 800#: 1-800-852-3345 x 9700  
FAX: (603)-271-4230  
WEB: [http://www.dhhs.nh.gov/](http://www.dhhs.nh.gov/) | **State Eligibility Policy Liaison for Medicaid:** Stephen Myers; Phone: (609)588-7758; Email address: Stephen.myers@dhs.state.nj.us  
WEB: [www.state.nj.us/humanservices/dfd/index.html](http://www.state.nj.us/humanservices/dfd/index.html)  
NJ no longer accepts faxed requests. The request must be e-mailed to dfd.pain@dhs.state.nj.us. It is also required that the individual’s name, DOB and last 4 numbers of their SSN be included.  
NJ is unable to accept secured email. If a State only has a secured email system, call (609)588-2283 to be referred to the appropriate local county welfare agency (you will need to know the county the household received benefits in NJ) which will provide them with the information. Contact Kristin Dillon, Program Support Specialist, by phone at (609) 631-4957; FAX: (609) 631-4507, if you need any assistance. |
<table>
<thead>
<tr>
<th>State</th>
<th>Contact Information</th>
</tr>
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<tbody>
<tr>
<td>NEW MEXICO</td>
<td><strong>FOR OUT-OF-STATE BENEFIT INQUIRIES,</strong> PLEASE: FAX your request (on Agency’s letterhead or with Client’s signed Release) to: (505) 827-7203 Or you may CALL: (505) 827-7250 EMAIL: <a href="mailto:marcus.ramos-silva@state.nm.us">marcus.ramos-silva@state.nm.us</a> New Mexico Human Services Department Income Support Division P.O. Box 2348 Santa Fe, NM 87504-2348 Desk: (505) 827-7250</td>
</tr>
<tr>
<td>NEW YORK</td>
<td><strong>TO VERIFY CURRENT STATUS/CLOSING DATE OF MEDICAID, SNAP BENEFITS OR TANF</strong> ASSISTANCE OR TANF MONTHS: FAX Request on your AGENCY’S LETTERHEAD to the OUT-OF-STATE INQUIRY UNIT at 518-474-8090. Be sure to include correct return FAX number. No Email/Phone. Include customer’s full name, DOB and last 4 digits of SS# - Please include customer’s new address. If names of all household members are not included response may not be completely accurate. If you have not received a response in 5 business days please direct an email to: <a href="mailto:wendy.buell@otda.ny.gov">wendy.buell@otda.ny.gov</a> or call 518-486-3460 WEB: <a href="http://www.dfa.state.ny.us">http://www.dfa.state.ny.us</a></td>
</tr>
<tr>
<td>NORTH CAROLINA</td>
<td><strong>Out of State Inquiries for SNAP and TANF:</strong> Mail: DHHS (EBT) Call Center P. O. Box 190 Everetts, NC 27829 Fax: (252) 789-5395 Phone: 1-866-719-0141 Email: <a href="mailto:ebt.csc.leads@dhhs.nc.gov">ebt.csc.leads@dhhs.nc.gov</a> NOTE: When forwarding request to the DHHS Call Center, include your agency’s name, mailing address, telephone number, and fax number if not already indicated in your request. Due to NC security requirements with SSNs, if your original e-mail contained a full SSN, it will be edited so that only the last four digits remain. WEB: <a href="http://www.ncdhhs.gov/dss">www.ncdhhs.gov/dss</a></td>
</tr>
<tr>
<td>NORTH DAKOTA</td>
<td><strong>Out of State Inquiries for SNAP and TANF:</strong> Fax or send a secure E-mail request with client’s name, SSN, and DOB on your Agency’s Letterhead to: Fax: 701-328-1060 Email: <a href="mailto:dhseap@nd.gov">dhseap@nd.gov</a> Phone: Nadine Philp (701) 328-2332 Stephanie Hauge (701) 328-3513 Please allow 1 to 3 business days for a response <strong>Out of State Inquiries for Medicaid:</strong> Fax or send a secure E-mail request with client’s name, SSN, and DOB on your Agency’s Letterhead to: Fax: 701-328-5406 Email: <a href="mailto:hccpolicy@nd.gov">hccpolicy@nd.gov</a> Website: <a href="http://www.nd.gov/dhs/services">www.nd.gov/dhs/services</a></td>
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<tr>
<td>OHIO</td>
<td><strong>Office of Family Assistance</strong> Ohio Department of Job &amp; Family Services P.O. Box 183204, Columbus, Ohio 43218-3204 Phone: 614-466-4815 option 2, 1 FAX: 614-466-1767 Food Assistance/TANF Out of State Inquiries Our Staff cannot provide benefit information. Because Ohio is a state supervised, county administered state, any eligibility information must be provided by the county agency. Please FAX request with clients name, SSN, DOB, &amp; the County they lived in Ohio on your Agency letterhead. To receive direct contact information for each county agency, see attached. WEB: <a href="http://www.jfs.ohio.gov/">www.jfs.ohio.gov/</a></td>
</tr>
<tr>
<td>OKLAHOMA</td>
<td><strong>Out-of-State Inquiry contact information:</strong> SNAP inquiries: <a href="mailto:SNAP@okdhs.org">SNAP@okdhs.org</a> LIHEAP inquiries: <a href="mailto:liheap2@okdhs.org">liheap2@okdhs.org</a> Phone: 405-521-3444 <strong>Kathie Wright</strong> Program Manager, Adult and Family Services Oklahoma Department of Human Services Sequoyah Memorial Office Building, 2400 N. Lincoln Blvd., Oklahoma City, OK 73105 P.O. Box 25352, Oklahoma City, OK 73125 Phone: (405) 521-3444 Fax: (405) 521-4158 Email: <a href="mailto:Kathie.wright@okdhs.org">Kathie.wright@okdhs.org</a> WEB: <a href="http://www.okdhs.org">www.okdhs.org</a></td>
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<tr>
<td>OREGON</td>
<td>PENNSYLVANIA</td>
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<tr>
<td><strong>Oregon requires States to fax their request:</strong></td>
<td><strong>Use this contact first:</strong></td>
</tr>
<tr>
<td><strong>TO VERIFY RECEIPT OF SNAP, MEDICAL, AND/OR TANF BENEFITS:</strong></td>
<td>Division of Hotline and Correspondence</td>
</tr>
<tr>
<td>FAX request w/ <strong>client's name, SSN &amp; DOB</strong> on your Agency's Letterhead to <strong>(503) 373-7032</strong>.</td>
<td>Pennsylvania Department of Human Services</td>
</tr>
<tr>
<td>Oregon Department of Human Services</td>
<td></td>
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<tr>
<td>500 Summer St. NE, E-48</td>
<td></td>
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<tr>
<td>Salem, OR 97301-1066</td>
<td></td>
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<tr>
<td>Phone: (503) 945-5600</td>
<td></td>
</tr>
<tr>
<td>Fax: (503) 373-7032 or 503-581-6198</td>
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<tr>
<td>Web: <a href="http://www.oregon.gov/DHS/assistance/index.shtml">http://www.oregon.gov/DHS/assistance/index.shtml</a></td>
<td>P.O. Box 2675</td>
</tr>
<tr>
<td>Harrisburg, PA 17105-2675</td>
<td></td>
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<tr>
<td>Phone: (717) 787-3119</td>
<td></td>
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<tr>
<td>Fax: (717) 705-0040</td>
<td></td>
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<tr>
<td>Email: <a href="mailto:ra-dpwoimnet@pa.gov">ra-dpwoimnet@pa.gov</a></td>
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<tr>
<td>Web: <a href="http://www.DHS.state.pa.us">www.DHS.state.pa.us</a></td>
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<tr>
<td>Please send out-of-state requests by fax or secure e-mail on your state's letterhead and include the following:</td>
<td></td>
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<tr>
<td>(1) Name of the household members who are applying for benefits</td>
<td></td>
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<tr>
<td>(2) Each members date of birth and last 4 of their social security number</td>
<td></td>
</tr>
<tr>
<td>(3) The client's new address.</td>
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<tr>
<td>Allow 3 to 5 business days for a response.</td>
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<thead>
<tr>
<th>RHODE ISLAND</th>
<th>SOUTH CAROLINA</th>
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<tbody>
<tr>
<td><strong>Rhode Island</strong></td>
<td><strong>South Carolina</strong></td>
</tr>
<tr>
<td><strong>Requests for verification must be in writing and faxed to:</strong></td>
<td><strong>South Carolina Department of Social Services</strong></td>
</tr>
<tr>
<td>Rhode Island IEVS Unit</td>
<td>Office of Economic Services</td>
</tr>
<tr>
<td>Fax: 401-415-8563</td>
<td>P.O. Box 1520</td>
</tr>
<tr>
<td>Unit will respond to you by FAX. Please provide your fax number when submitting your request.</td>
<td>Columbia, SC 29202-1520</td>
</tr>
<tr>
<td><strong>For PARIS Match:</strong></td>
<td><strong>Please email all out of state inquiries for SNAP and/or TANF to:</strong> <a href="mailto:ClientServices@dss.sc.gov">ClientServices@dss.sc.gov</a></td>
</tr>
<tr>
<td>Fax: 401-462-2175</td>
<td>Subject line should read: ‘Out of State Inquiry from ‘name of state’.</td>
</tr>
<tr>
<td>WEB: <a href="http://www.dhs.ri.gov/">http://www.dhs.ri.gov/</a></td>
<td>We will be unable to process your request without the following information:</td>
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<tr>
<td></td>
<td>1. Individual’s name, SS#, and current address</td>
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<tr>
<td></td>
<td>OR</td>
</tr>
<tr>
<td></td>
<td>2. Individual’s name, last four digits of the SS#, date of birth, and current address.</td>
</tr>
<tr>
<td></td>
<td>If unable to email, please fax inquiries to 803-898-1222, ATTN: Client Services.</td>
</tr>
<tr>
<td></td>
<td><strong>Fraud and PARIS matches:</strong> Send to Mrs. Angela Clark at <a href="mailto:angela.clark@dss.sc.gov">angela.clark@dss.sc.gov</a>.</td>
</tr>
<tr>
<td></td>
<td><strong>Medicaid Inquiries:</strong> Contact SC Dept. of Health and Human Services at <strong>888-549-0820</strong>. Press #1 for English, #1 for caseworker feedback and #2 to speak with a rep.</td>
</tr>
</tbody>
</table>
SOUTH DAKOTA

Department of Social Services
700 Governors Drive
Pierre, South Dakota  57501-2291
Phone: 1-877-999-5612 (toll free) or
1-605-773-3493 (direct)
Email: SNAP@state.sd.us
WEB: http://dss.sd.gov/foodstamps/

TENNESSEE

Food Stamp Policy
Department of Human Services
Citizen Plaza Bldg, 8th Floor
400 Deaderick Street
Nashville, TN  37248-7200
For Out-of-State Inquiries and PARIS Matches :

Must send a Fax to: (615) 687-5535
ON STATE LETTERHEAD, PLEASE INCLUDE THE
FOLLOWING REQUESTED INFORMATION:

1. Your Name, Agency Name and Address, phone number and fax number

2. Names of household members applying for benefits in your State

3. Complete Social Security Numbers

4. A Current Address so that closure notices can be sent to the client

WEB:  www.state.tn.us/humanserv/

TEXAS

Texas Health and Human Services Commission
Fax: 1-877-447-2839 (Please submit one inquiry per page and fax each inquiry separately on agency letterhead.)

OR

Phone: 1-877-541-7905 , then select the following options from the Interactive Voice Response System:

• Option 1 for English;

• Option 2 for Your Texas benefit information;

• Option 1 for Medicaid, SNAP and TANF information;

• Option 1 to enter Social Security number for someone on your case –OR-

• Option 2 to enter your case number –OR-

• Option 3 if information is unknown or help with the YourTexasBenefits.com website; (caller will be routed to the next available agent)

Note: Inquiries regarding TANF countable months are required via Fax.

UTAH

Department of Workforce Services
Eligibility Services Division
P.O. Box 143245
Salt Lake City, UT 84114-3245
Phone: 866-435-7414
Press Option 5 for Out-of-State inquires.
WEB: www.jobs.utah.gov
<table>
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<tr>
<th>STATE</th>
<th>Address</th>
<th>Phone</th>
<th>Email</th>
<th>WEB</th>
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<tbody>
<tr>
<td>VERMONT</td>
<td>Call Center&lt;br&gt;Economic Services Benefits Service Center&lt;br&gt;103 South Main St&lt;br&gt;Waterbury, VT 05671-1201</td>
<td>Preferred: Toll-free: 1-800- 479-6151. If 800# is not working, call (802) 828-6896</td>
<td><a href="http://www.mybenefits.vt.gov">www.mybenefits.vt.gov</a></td>
<td></td>
</tr>
<tr>
<td>VIRGINIA</td>
<td>Virginia Department of Social Services&lt;br&gt;Division of Benefit Programs – 9th Floor&lt;br&gt;801 East Main Street&lt;br&gt;Richmond, VA 23219-2901</td>
<td><strong>PARIS Matches: PARIS matches must use the contact information provided in the match</strong>&lt;br&gt;EMAIL: <a href="mailto:VAoutofstateverifications@dss.virginia.gov">VAoutofstateverifications@dss.virginia.gov</a></td>
<td>Please Include the Following:&lt;br&gt;1. Subject Line: ‘Out of State Inquiry from ‘Requesting State Name’&lt;br&gt;2. Clients name, DOB, SSN (if last four only, you must provide entire DOB), and current address&lt;br&gt;3. All household members who are applying for assistance in your state&lt;br&gt;<strong>If your email address is not recognized as a State or County agency you will be required to verify your identity in another manner</strong>&lt;br&gt;OR&lt;br&gt;Fax to: (804) 726-7357 or Fax: (804) 726-7669</td>
<td></td>
</tr>
<tr>
<td>VIRGIN ISLANDS</td>
<td>Emmanuelleine Archer&lt;br&gt;Department of Human Services&lt;br&gt;Division of Family Assistance&lt;br&gt;1303 Hospital Ground, STE 1&lt;br&gt;St. Thomas, VI 00801-6722</td>
<td><a href="mailto:emmanuelleine.archer@dhs.vi.gov">emmanuelleine.archer@dhs.vi.gov</a></td>
<td><a href="http://www.dhhr.wv.gov">www.dhhr.wv.gov</a></td>
<td></td>
</tr>
<tr>
<td>WEST VIRGINA</td>
<td>Department of Health &amp; Human Resources&lt;br&gt;Division of Family Assistance&lt;br&gt;350 Capitol St., Room B-18&lt;br&gt;Charleston, WV 25301-3705</td>
<td>Request to speak to the Worker of the Day</td>
<td><a href="mailto:DHHHRbcbenefitver@wv.gov">DHHHRbcbenefitver@wv.gov</a></td>
<td><a href="http://www.dhhr.wv.gov">www.dhhr.wv.gov</a></td>
</tr>
<tr>
<td>WISCONSIN</td>
<td>Out-of-State Inquires should be directed to:&lt;br&gt;SNAP and HealthCare (MA):&lt;br&gt;WI Department of Health &amp; Family Services&lt;br&gt;1 W Wilson St, Madison, WI 53703&lt;br&gt;Phone: (608) 261-6378—Option 3&lt;br&gt;Fax: (608) 267-2269&lt;br&gt;Email: <a href="mailto:DHSCARESCallCenter@wisconsin.gov">DHSCARESCallCenter@wisconsin.gov</a>&lt;br&gt;Applicant/Members should contact the county agency. To get the phone number of the agency, call 1-800-362-3002 or go to dhs.wi.gov/em/customerhelp.&lt;br&gt;WEB: <a href="http://dhs.wisconsin.gov/">http://dhs.wisconsin.gov/</a>&lt;br&gt;TANF:&lt;br&gt;Phone: (608) 264-1656&lt;br&gt;Fax: (608) 327-6125&lt;br&gt;Email: <a href="mailto:DCFW2TANFVerify@wisconsin.gov">DCFW2TANFVerify@wisconsin.gov</a>&lt;br&gt;WEB: <a href="http://dfc.wisconsin.gov/w2/callcenter/default.htm">dfc.wisconsin.gov/w2/callcenter/default.htm</a>&lt;br&gt;PARIS-Related TANF inquiries for WI should be submitted to: 1. <a href="mailto:dcoig@wisconsin.gov">dcoig@wisconsin.gov</a> 2. 608-422-7100</td>
<td></td>
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</table>
See below for Puerto Rico information and an email address to send revisions to the directory. Thank you!

**Puerto Rico** – For SNAP - Removed from National Directory of Contacts because they run an entirely separate Program from SNAP, called Nutrition Assistance Program (NAP). Duplicate participation is not a concern if a household is still receiving NAP benefits from Puerto Rico, as NAP benefits cannot be accessed in the US. Although 25% of Puerto Rico’s NAP benefits are issued in a form readily converted to cash, the benefit cannot be converted to cash in mainland Automatic Teller Machines (ATMs). It is considered to be inaccessible for the SNAP eligibility process. Therefore, it is not necessary to verify NAP benefits or case closure for customers who were previously participating in Puerto Rico.

For TANF, contact Jeanette Rivera Escalera, 800 Ave. Ponce de León, Capitol Office Building, Miramar, PR 00907, PO Box 8000, San Juan, PR 00910-0800. Telephone: (787) 289-7600 Ext. 2408; FAX (787): 289-7614 or (787) 289-7621; email: communityrelations@adsef.pr.gov; or Jeanetterivera@adsef.pr.gov. Please include the physical address on all emails.

Web: www.adsef.gobierno.pr

Please send needed revisions to Kathie Herrman at Kathie.herrman@fns.usda.gov

Revisions are sent out quarterly