



CDSS

WILL LIGHTBOURNE
DIRECTOR

STATE OF CALIFORNIA—HEALTH AND HUMAN SERVICES AGENCY
DEPARTMENT OF SOCIAL SERVICES

744 P Street • Sacramento, CA 95814 • www.cdss.ca.gov



EDMUND G. BROWN JR.
GOVERNOR

October 21, 2015

ALL COUNTY LETTER NO. 15-84

REASON FOR THIS TRANSMITTAL

- State Law Change
- Federal Law or Regulation Change
- Court Order
- Clarification Requested by One or More Counties
- Initiated by CDSS

TO: ALL COUNTY WELFARE DIRECTORS
 ALL CalWORKs PROGRAM SPECIALISTS
 ALL CALFRESH PROGRAM SPECIALISTS
 ALL CONSORTIA REPRESENTATIVES
 ALL QUALITY CONTROL PROGRAM COORDINATORS
 ALL COUNTY SPECIAL INVESTIGATIVE UNIT CHIEFS
 ALL COUNTY REFUGEE PROGRAM COORDINATORS

SUBJECT: THE USE OF THE INITIAL APPLICATION FOR CALFRESH, CASH AID, AND/OR MEDI-CAL/HEALTH CARE PROGRAMS (SAWS 1) FOR CALFRESH ONLY HOUSEHOLDS

REFERENCES: AFFORDABLE CARE ACT (ACA) OF 2010 (PUBLIC LAW 111-148); WELFARE AND INSTITUTIONS CODE SECTION 15926(d) [enacted BY AB X 11 (Statutes of 2013, chapter 3)]; ALL COUNTY INFORMATION NOTICES I- 37-13, AND I-53-13; ALL COUNTY LETTERS 13-61; 13-75, 13-96, 14-101, AND 14-101E; 7 CFR 273.2(c)(1), 7 CFR 273.2(c)(1)(2), 7 CFR 273.2(C)(3), AND MANUAL OF POLICIES AND PROCEDURES SECTION 63-300.34

The purpose of this letter is to transmit and provide instructions to County Welfare Departments (CWDs) regarding the use of the *Initial Application for CalFresh, Cash Aid, and/or Medi-Cal/Health Care Programs (SAWS 1)* for CalFresh only households.

USE OF THE SEPARATE SAWS 1 FOR CALFRESH

The CWDs are encouraged to use the *Application For CalFresh and Benefits (CF 285)* for the CalFresh only applicant households, per below. However, if the SAWS 1 is

completed by the applicant household rather than the CF 285, the CWDs will accept the SAWS 1 as a single signature application to begin the application process and set the beginning date of aid at intake. Therefore, when the applicant's signature has been obtained on the SAWS 1 to initiate the application process, the CF 285 or the Application SAWS 2 PLUS will be completed during the interview but it is not necessary to get a signature on the CF 285 or the *Application for CalFresh, Cash Aid, and/or Medi-Cal/Health Care Programs* (SAWS 2 PLUS). Per federal rules, upon completion of the interactive interview, the CWD must provide a copy of the application to the applicant and give the opportunity to review the information and maintain for their records.

Initial Intake

The CWDs are encouraged to use the CF 285 form for all CalFresh only households. The CF 285 is a "Required Form—No Substitutes Permitted." Because the CF 285 application was designed to help with outreach activities, we strongly encourage CWDs to ensure that the CF 285 applications are readily available in all local offices.

As a reminder, CWDs shall encourage households to file an application the same day the household or its authorized representative contacts the CalFresh office. The CWDs are reminded to encourage the applicants to complete the application as much as possible before filing it with the county. The more complete the application is when submitted to the county, the faster it may be for the CWD to determine entitlement for expedited service processing, eligibility, and benefit levels. However, applications submitted with only name, address and signature shall be accepted.

The CWDs must use the SAWS 1 and the SAWS 2 PLUS forms accordingly when applicants are applying for both CalWORKs and CalFresh, or for one of these programs along with Medi-Cal or other health coverage. However, if an applicant mistakenly submits other application combinations, the CWD will accept and process accordingly. Both forms are "Required Forms-No Substitutes Permitted."

Recertification

As a reminder, the CWDs are to use the *Recertification for CalFresh Benefits* (CF 37) form for recertification of Non-Assistance CalFresh (NACF) households in which no member receives a CalWORKs grant. The CF 37 replaces the CF 285 as the form for completing a recertification. The CF 37 must be utilized by the CWDs as soon as the form is programmed in the county's respective consortia, but no later than October 1, 2015. The CWD will not refuse an inadvertent submission of the CF 285, SAWS 1, or SAWS 2 PLUS and will follow recertification protocol using submitted application.

All County Letter No. 15-84
Page three

This ACL and other CDSS Letters and Notices are available on the internet at:
<http://www.dss.cahwnet.gov/lettersnotices/default.htm>.

If you have any questions regarding the contents of this letter, please contact your county consultant in the CalFresh Policy Bureau, at (916) 654-1896.

Sincerely,

Original Document Signed By:

TODD R. BLAND
Deputy Director
Welfare to Work Division