



CDSS

JOHN A. WAGNER
DIRECTOR

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

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



ARNOLD SCHWARZENEGGER
GOVERNOR

May 1, 2009

ALL COUNTY INFORMATION NOTICE NO. I-29-09

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 FOOD STAMP PROGRAM COORDINATORS
ALL CONSORTIUM PROJECT MANAGERS

SUBJECT: MASS CHANGE NOTICE DUE TO CHANGES IN THE FOOD
CONSERVATION AND ENERGY ACT OF 2008 (P.L. 110-246)

REFERENCE: FOOD AND NUTRITION SERVICE (FNS), ADMINISTRATIVE
NOTICE 08-32; ALL COUNTY LETTER (ACL) 08-37; ALL
COUNTY INFORMATION NOTICE (ACIN) I-55-08.

The purpose of this letter is to provide the FS 11B (ENG/SP) mass change notice which details information regarding changes to the Food Stamp Program resulting from the Food Conservation and Energy Act of 2008, also known as the Farm Bill of 2008 (P. L. 110-246). The mass change notice includes information about the elimination of the child care cap of \$175/\$200; exclusion of tax preferred savings for education and retirement accounts; loss of benefits in an inactive Electronic Benefit Transfer (EBT) account and usage of paper coupons ending on June 18, 2009.

Prior to duplication, County Welfare Departments (CWDs) must ensure that the FS 11B (ENG/SP) notice contains the county-specific address that clients should use to send written state hearing requests. CWDs may opt to use the mass change notice or may notify households via the news media or may post this information in certification offices, issuance locations or other sites frequented by certified households.

Camera-Ready Copies and Translations

For a camera-ready copy of English and Spanish forms, contact the Forms Management Unit at (916) 657-1907. If your office has Internet access, you may obtain these forms from the CDSS web page at:

www.dss.cahwnet.gov/cdssweb/FormsandPu_271.htm.

Per MPP section 21-115.2, all other translations will be posted on our website on an ongoing basis. Copies of the translated forms and publications in all other required languages can be obtained at:

www.dss.cahwnet.gov/cdssweb/FormsandPu_274.htm.

For questions on translated materials, please contact Language Services at (916) 651-8876.

If you have any questions regarding this letter, please contact Alicia Thomason of the Food Stamp Policy Implementation Unit at (916) 657-2630 or via email at alicia.thomason@dss.ca.gov.

Sincerely,

Original Document Signed By:

CHRISTINE WEBB-CURTIS, Chief
Food Stamp Branch

Attachment

NOTICE TO ALL FOOD STAMP RECIPIENTS IMPORTANT — PLEASE READ Things You Need to Know

Effective October 1, 2008:

- All of the money you pay for someone to take care of your children or dependent person, while you work or go to school, is now used to lower your income. Before, only \$175 or \$200 (for each dependent) could be used to lower your income. Overall, your benefits will increase if child care/dependent care costs you pay are more than \$175/\$200 for each child or dependent.
- All “tax-preferred” savings for education (e.g. 529s) and retirement accounts (e.g. IRAs) are not used to decide if your resources are over \$2,000 or (\$3,000 if you are elderly or disabled).
- If you do not use your EBT card for 180 days your benefits will be put into an inactive account. After 365 days, you will lose the benefits in the inactive account.
- If you have any paper food stamps, you need to contact the county to have them changed and put onto an EBT card no later than June 17, 2009. Paper stamps will not be accepted anywhere starting June 18, 2009.

You will get a notice about these changes and any other changes to your household status that makes your food stamp benefit different than it was before.

If you think we made a mistake in figuring your October benefits due to the new amounts, you may ask for a state hearing **within 90 days of when you got this letter** by writing to:

or you may call toll free: 1-800-952-5253. If you are deaf and use TDD, call 1-800-952-8349. When you ask for a state hearing, you must tell us why you think we made a mistake. You can speak for yourself at the hearing or you can have a friend, attorney, or other person speak for you, but you must get these people to help you. You may ask for free legal aid at a legal aid office in your area.

AVISO A TODAS LAS PERSONAS QUE RECIBEN ESTAMPILLAS PARA COMIDA IMPORTANTE — FAVOR DE LEER Cosas que usted necesita saber

A partir del 1º de octubre de 2008:

- Para reducir sus ingresos, ahora se usa todo el dinero que usted paga para que otra persona cuide a sus niños o a una persona dependiente, mientras usted trabaja o asiste a la escuela. Anteriormente, solamente se podía usar \$175 ó \$200 (por cada dependiente) para reducir sus ingresos. Por lo general, sus beneficios aumentarán si los gastos que usted paga por el cuidado de niños/dependientes exceden de \$175/\$200 por cada niño o dependiente.
- Todas las cuentas de ahorros que ofrecen ventajas en los impuestos (*tax-preferred savings*) destinadas para la educación (por ejemplo, las 529) y jubilación (por ejemplo, las cuentas individuales de jubilación conocidos como IRA) no se contarán cuando se decide si sus recursos exceden del límite de \$2,000 (o \$3,000 si usted es una persona de edad avanzada o discapacitada).
- Si no usa su tarjeta del Programa de Transferencia Electrónica de Beneficios (EBT) durante 180 días, sus beneficios se depositarán en una cuenta inactiva. Después de 365 días, usted perderá los beneficios de estampillas para comida en su cuenta inactiva.
- Si tiene estampillas para comida en papel, tiene que comunicarse con el condado a más tardar el 17 de junio de 2009, para que se las cambien y depositen en una tarjeta de EBT. Las estampillas para comida en papel no se aceptarán en ningún lugar comenzando el 18 de junio de 2009.

Usted recibirá una notificación sobre estos cambios y cualquier otro cambio en el estado de su grupo para fines de estampillas para comida que haga que sus beneficios de estampillas para comida sean diferentes de como eran antes.

Si cree que cometimos un error al calcular la cantidad de sus beneficios correspondientes al mes de octubre, debido a las nuevas cantidades, puede pedir una audiencia con el Estado **antes de que pasen 90 días a partir de la fecha en que recibió esta carta**, escribiendo a:

o llamando gratuitamente al 1-800-952-5253. Si usted es una persona sorda y usa un aparato de telecomunicaciones para las personas sordas (TDD), llame al 1-800-952-8349. Cuando pida una audiencia con el Estado, tendrá que decirnos por qué cree que cometimos un error. Puede representarse a sí mismo en la audiencia o lo puede representar un amigo, abogado, u otra persona, pero usted tiene que pedirles a esas personas que le ayuden. Puede pedir asistencia legal gratuita en una oficina de asesoramiento legal (*legal aid office*) en el área donde usted vive.