

DEPARTMENT OF SOCIAL SERVICES
744 P Street, Sacramento, CA 95814



May 24, 2005

ALL-COUNTY INFORMATION NOTICE NO I-27-05

TO: ALL COUNTY WELFARE DIRECTORS
ALL FOOD STAMP COORDINATORS

REASON FOR THIS TRANSMITTAL

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

SUBJECT: FOOD STAMP PROGRAM POLICY IMPLEMENTATION UNIT
ASSIGNMENTS AND GUIDELINES FOR REQUESTING POLICY
INTERPRETATIONS

Attached for your information is a current list of the Food Stamp Program (FSP) Policy Implementation Unit's (PIU) staff assignments by regulation/subject. This will enable you to identify the appropriate staff person to assist you in resolving a FSP policy issue or question you have not been able to resolve within your own organization. If you have policy questions regarding Work Requirements for Able-Bodied Adults Without Dependents and for the annual Food Stamp Employment and Training plan, please contact Lisa Lacy at Lisa.Lacy@dss.ca.gov. Please submit requests for changes to any forms or Notices of Action, including a rationale for the proposed changes, in writing to the Food Stamp Forms Coordinator.

As a reminder to counties, due to a permanent reduction in PIU staffing, we are still observing the guidelines provided in ACIN I-83-03 which limit policy questions to Quality Control (QC) errors, consortia programming, state Administrative Law Judges and those submitted from the California Welfare Directors Association (CWDA) Food Stamp Committee Food Stamp Review and Advisory Team (FRAT). In addition, we are reissuing the protocols below for requesting policy clarification. We have attached a County Request for Regulation Interpretation (CRRRI) forms, which we recommend be used in submitting e-mail policy questions. An electronic version of both forms CRRRI (FS 24) and the QC CRRRI (FS 25) is now accessible via the internet.

Requesting Policy Interpretations

While we are still unable to respond to routine policy questions, questions with statewide implications may still be submitted by county Food Stamp Program Specialists through the California Welfare Directors Food Stamp Committee Food Stamp Review and Advisory Team (FRAT). If the committee determines that the question has statewide implications, it is forwarded to the state for clarification. The question and policy clarification is then included in the Quarterly Question and Answer All County Information Notice. Attached is a schedule of FRAT members to whom the questions may be submitted.

Question Format:

To assist us in responding to your inquiries, we are requesting that counties follow the guidelines below:

Complete the CRRI form (copy attached) or use the FS 24 or FS 25 on line.

- Indicate the reason for the question e.g., ALJ, QC error, etc.,
- Include the date by which you would like a response,
- Include the specific regulation citation(s) that pertains to your question, and any additional references you have checked such as All County Information Notices, All County Letters, Food Stamps Question and Answer Distribution System, etc.,
- Include all relevant details, as questions are responded to based on the information provided. No assumptions are made in responding to policy questions, and
- Provide your proposed answer and information supporting your conclusion.

Submit questions by e-mail directly to the analyst assigned the regulations area. If the county does not have e-mail access, please FAX your question to (916) 657-1806 to the attention of the appropriate analyst. Following these guidelines will assist PIU in responding to your inquiries. If we are unable to respond within a reasonable timeframe, you will be contacted pending a reply to your inquiry.

If you have any questions regarding this letter, please contact Varaniece Hall, Policy Implementation Unit Manager at (916) 657-3500.

Sincerely,

Original Document Signed By:

RIGHTON YEE, Chief
Food Stamp Branch

Attachments

**CWDA FOOD STAMP ADVISORY AND REVIEW TEAM
POLICY QUESTION ROTATION SCHEDULE**

Food Stamp Advisory and Review Team rotation list for submitting policy questions with statewide application. The rotation will be each quarter and based on alphabetical order by county and started with the questions submitted for May 2005.

Schedule for the remainder of calendar year 2005 and for 2006:

<u>Quarter</u>	<u>Contact</u>	<u>E-Mail Address</u>	<u>FAX</u>
April - June 2005	LaTanya Lee	LaTanyaLee@ladpss.org	(562) 695-0423
July - Sept. 2005	Jerry Kulper	kulperjp@co.monterey.ca.us	(831) 755-8408
Oct. - Dec. 2005	Laura Fuller	lfuller@riversidedpss.org	(951) 358-3990
Jan. - March 2006	Rachel Brinton	rbrinton@hss.sbcounty.gov	(909) 383-9714
April - June 2006	William Vaughn	William.Vaughn@sfgov.org	(415) 558-1184
July - Oct. 2006	April James	Ajames@co.sutter.ca.us	(530) 822-7230
Oct. - Dec. 2006	Julie Martinez	JHMartinez@co.alameda.ca.us	(510) 259-3880

FOOD STAMP POLICY IMPLEMENTATION UNIT

ANALYST ASSIGNMENTS

April 2005

Bureau Main Phone Number (916) 654-1896

ANALYSTS

Rosie Avena

Sharon Brown

Frederick Hodges III

LeAnne Torres

PHONE

654-1514

654-0737

653-7973

654-2135

E-MAIL

Rosie.Avena@dss.ca.gov

Sharon.Brown@dss.ca.gov

Frederick.HodgesIII@dss.ca.gov

LeAnne.Torres@dss.ca.gov

Pat Sutherland

Varaniece Hall

Bureau Chief

Unit Manager

Pat.Sutherland@dss.ca.gov

Varaniece.Hall@dss.ca.gov

Prefix Code - Public/CALNET

653=453

654=464

657=437

FAX 916 657-1806

<u>63-100</u>	General Provisions/Definitions	Rosie Avena
<u>63-200</u>		
63-201	Program Requirements	Rosie Avena
thru 206	(Confidentiality/CWD Liabilities)	Rosie Avena
63-207	Program Informational Activities	
	Food Stamp Forms/NOAs	Frederick Hodges, III
<u>63-300</u>		
63-300	Application Process	Rosie Avena
63-301	Application Processing Time Standards	Rosie Avena
<u>63-400</u>		
63-401	Residency	Sharon Brown
63-402	Household Concept	Sharon Brown
63-403	California Food Assistance Program (State/Federal Eligibility)	Sharon Brown
63-404	Social Security Numbers	Sharon Brown
63-405	Citizenship or Eligible Non-Citizen Status	Sharon Brown
63-406	Student Eligibility	Sharon Brown
63-407	Work Registration	FSET Unit
63-408	Voluntary Quit	FSET Unit
63-409	Income and Resource Maximums	LeAnne Torres
63-410	Work Requirements for Able-Bodied Adults Without Dependents	FSET Unit
63-411	CFAP Work Requirements	FSET Unit
<u>63-500</u>		
63-501	Resource Determinations	Frederick Hodges, III
63-502.1	Income Definition	LeAnne Torres
63-502.2	Income Exclusions	LeAnne Torres
63-502.3	Income Deductions	LeAnne Torres
63-503.1	Month of Application	Rosie Avena
63-503.2	Budgeting	LeAnne Torres

FS SECTION	SUBJECT	ANALYST
63-503.3	Net Income/Benefit Calculation	LeAnne Torres
63-503.41	Self-Employment Income	LeAnne Torres
63-503.42	Households with Boarders	Sharon Brown
63-503.43	Destitute Households	Frederick Hodges III
63-503.44	Income & Resources of Excluded Members	LeAnne Torres
63-503.45	Income & Resources of Nonhousehold Members	LeAnne Torres
63-503.46	Residents of Shelters for Battered Women	Frederick Hodges III
63-503.47	Residents of Drug/Alcoholic Trmt & Rehab Programs	Frederick Hodges III
63-503.48	Disabled or Blind Residents of Group Living Arrangements	Frederick Hodges III
63-503.49	Sponsored Aliens	Sharon Brown
63-503.5	Decrease in Income due to Failure to Comply	LeAnne Torres
63-503.6	Homeless FS Households/Prepared Meals	Frederick Hodges III
63-503.7	Certifying MRRB Household in New County	Sharon Brown
63-504.1	Certification Periods	Sharon Brown
63-504.2	Notices of Action (regs.only)	Frederick Hodges III
63-504.3	Monthly Reporting	
63-504.4	Effecting Changes for Nonmonthly Reporting Hsholds	Sharon Brown
63-504.5	Households Changing their Reporting & Budgeting Status	Sharon Brown
63-504.6	Recertification	Rosie Avena
63-504.7	ID Cards	
63-504.8	Photo ID Cards	
63-505	Household Responsibilities	Sharon Brown
63-506	Excluded Resources and/or Income of Native Americans or Alaska Natives	Frederick Hodges III
63-507	Resources and/or Income Excluded by Other Federal Laws	Frederick Hodges III
63-508 & 63-509	Quarterly Reporting	LeAnne Torres
<u>63-600</u>	Food Stamp Benefits, Use and Replacement	Frederick Hodges III
<u>63-700</u>	Coupon and Authorization Document Ordering, Storage and Accountability	
<u>63-800</u>		
63-801.1 thru 801.3	Determination of Overissuances and Establishment of Claims	Rosie Avena Rosie Avena
63-801.4 thru 801.9	Claims Collections	
63-802	Restoration of Benefits	Rosie Avena
63-804	State Hearings	Frederick Hodges III
63-805	Intentional Program Violation Disqualification	Rosie Avena
<u>63-900</u>	Emergency Food Stamp Assistance	Frederick Hodges, III

FS SECTION	SUBJECT	ANALYST
<u>63-1100</u>		
63-1101	Tables of Coupon Issuance	LeAnne Torres
63-1101.1	Maximum Resource Eligibility Standards	LeAnne Torres
thru 1101.3	Income Deductions, Income Eligibility Standards	LeAnne Torres
63-1101.4	Prorating Initial Month's Benefits	Rosie Avena
63-1102.1	Coupon Book Determination	
thru 1102.3		

*Note: A strike through indicates regulations which are no longer in use due to EBT and or due to the implementation of Quarterly Reporting.

FOOD STAMP PROGRAM COUNTY REQUEST FOR REGULATION INTERPRETATION

INSTRUCTIONS: Complete items 1 -10 of the form. Use a separate form for each policy interpretation request. Retain a copy of the FS 24 for your records and submit the original to the Food Stamp Policy Implementation Unit, 744 P Street, M.S. 16-32, Sacramento, CA 95814.

1. REQUESTOR NAME:	5. COUNTY:
2. PHONE NO.:	6. SUBJECT:
3. REGULATIONS CITE(S):	7. REFERENCES:
4. DATE OF REQUEST:	8. DATE RESPONSE NEEDED:

(Include ACL/ACIN, FSQUADS, court cases, etc. in references)

9. QUESTION:

10. PROPOSED ANSWER:

11. STATE POLICY RESPONSE (FSPIU USE ONLY):

CONSULT:	ANALYST:	DATE:
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**FOOD STAMP PROGRAM
QC REGULATION INTERPRETATION REQUEST**

INSTRUCTIONS: Complete items 1 -11 of the form. In item 10 include reason for the QC error. Use a separate form for each policy interpretation request. Retain a copy of the FS 25 for your records and submit the original to the Food Stamp Policy Implementation Unit, 744 P Street, M.S. 16-32, Sacramento, CA 95814.

1. REQUESTOR NAME:	5. COUNTY:
2. PHONE NO.:	6. SUBJECT:
3. REGULATIONS CITE(S):	7. REFERENCES:
4. DATE OF REQUEST:	8. DATE RESPONSE NEEDED:

9. CASE SCENARIO:

10. QUESTION:

11. PROPOSED COUNTY RESPONSE:

12. CDSS FSP POLICY RESPONSE (FSPIU USE ONLY):

CONSULT:	ANALYST:	DATE:
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