

DEPARTMENT OF SOCIAL SERVICES

744 P Street, Sacramento, CA 95814



February 18, 1981

ALL-COUNTY INFORMATION NOTICE I-15-81

TO: ALL COUNTY WELFARE DIRECTORS  
COUNTY FORMS COORDINATORS

SUBJECT: AVAILABILITY OF FORM NA 290, AFDC GENERAL NOTICE (OF ACTION)

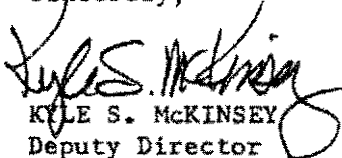
REFERENCE: ACIN I-86-80 DATED AUGUST 15, 1980;  
NOTICE OF FORM CHANGE 81-3 DATED JANUARY 30, 1981.

Form NA 290, AFDC General Notice, is now available in the DSS Warehouse. This is the first form of the new NA series of notice of action forms to be issued. The message portion of the form is entirely blank, so that the form can be used for any AFDC, Refugee, or Entrant Program notification situation not covered by an existing notice of action. Counties can use the new form only for these situations--that is, where there is no other currently authorized and available notice of action to cover a notification situation.

Refer to the attached instructions for more specific information on how to use the new form. Although we plan to issue instructions for the use of this and future NA forms as a part of Appendix 2 of the EAS Manual, the enclosed copy is provided for immediate use since it will be several months before the instructions are issued as a part of the EAS Appendix.

If you have any questions, contact your AFDC Management Consultant at (916) 445-4458 or your Refugee Program Consultant at (916) 322-3141.

Sincerely,

  
KYLE S. McKINSEY  
Deputy Director

Attachments

cc: CWDA

# Your Right to Appeal This Action

If you are dissatisfied with the action described on the other side, or any other county action, you may request a state hearing before a Hearing Officer of the State Department of Social Services. This hearing will be conducted in an informal manner to assure that everyone present is able to speak freely. Your county worker can help you request a hearing. If you decide to request a hearing you must do so **WITHIN 90 DAYS OF THE DATE OF THIS NOTICE.**

**AFDC:** If your AFDC is being reduced or stopped and you ask for a hearing within 10 days of the mailing date of this notice, you can continue to receive AFDC until the hearing.

**FOOD STAMPS:** If your food stamps are being reduced or stopped and you ask for a hearing within 10 days of the mailing date of this notice, your food stamps may continue until the hearing or until the end of your current period of eligibility, whichever comes first, unless you check the box at the bottom of the page.

## Authorized Representative

You can represent yourself at the state hearing. You can also be represented by a friend, attorney or any other person, but you are expected to arrange for the representative yourself. You can get help in locating free legal assistance by calling the toll-free number of Public Inquiry and Response.

## How to Request a State Hearing

The best way to request a hearing is to fill in and send this entire notice to:

**Office of Chief Referee  
State Department of Social Services  
744 P Street, Mail Station 19-36  
Sacramento, CA 95814**

You may also request a hearing by calling the toll-free number of Public Inquiry and Response.

## Public Inquiry and Response (Public Information)

**Toll-Free Number: (800) 952-5253 \***

Teletypewriter (TTY) only: (800) 952-5434 \*

\*You may have to dial "1" first.

The State Public Inquiry and Response Unit can provide you with further information about your hearing rights or files or other welfare-related matters. Assistance is also available in some languages other than English, including Spanish. You may phone, write, or come in.

**Public Inquiry and Response  
State Department of Social Services  
744 P Street, Mail Station 16-23  
Sacramento, CA 95814**

## Request for a State Hearing

Name	Phone number		
( )			
Address	City	State	Zip code

I am requesting a state hearing because of an action by the welfare department of \_\_\_\_\_ county related to

☐ AFDC    ☐ Food Stamps    ☐ Medi-Cal

Reasons for my request:

I speak a language other than English and need an interpreter for my hearing. (The state will provide the interpreter at no cost to you.)

Language	Dialect
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**Food Stamps:** If any portion of food stamps provided to you while awaiting the hearing decision is determined to be an overissuance, the county may recover the value of the overissuance. If you want to avoid the possibility of such an overissuance, you may check the box below:

☐ I want my food stamps terminated or reduced to the new amount determined by the county until the hearing decision. If the hearing decision is in my favor, the county will make up the food stamps I lose as a result of checking this box.

Signature

Date

The information you provide on this form is needed to process your request for a hearing, and processing may be delayed if your request is incomplete. A case file will be set up by the Chief Referee. You have a right to examine the materials that make up the file and may do so by

contacting Public Inquiry and Response. Any information you provide may be shared with the county welfare department, with the U.S. Department of Health, Education, and Welfare, or the U.S. Department of Agriculture. Authority: W&IC 10950.

# Notice of Action

If you have questions or want more information about this notice, please contact your worker.

Case Name :  
Case Number :  
Worker :  
Phone :  
Date :

Description  
of Action  
and Effective  
Date

Reason and  
Applicable  
State  
Regulations

Comments

State welfare regulations are available for review at the local office of the county welfare department.

If you are dissatisfied with this action, read the back for important information. If you are now receiving aid, it may be continued if you request a State Hearing within 10 days of the mailing date of this notice.

NA 290 Notice of Action--AFDC General Notice

NA 290

Authorization

This form is authorized for use in the following cash grant programs: AFDC, Refugee Resettlement (RRP), and Cuban/Haitian Entrant (CHEP) Programs.

Purpose

The NA 290 is a non-specific notice of action. Its purpose is to provide cash grant notice in all situations not covered by the other forms in the NA 200 or NA 900 Series--all of which are limited to specific types of notification.

Usage

The NA 290 should be used in the cash grant programs when no other currently authorized and available notice of action (ABCD 239 or NA series) provides adequate notice for a given situation. These situations can occur as the result of legislation or court decisions, because of inadequate space on a more specific notice, and for a variety of other infrequently occurring situations.

To provide adequate notice, the completed form must contain as a minimum a description of the county action, the reasons for the action, a citation of specific applicable state regulations requiring the action, and when appropriate, a statement of what information or action is needed to reestablish eligibility or determine a correct amount of aid. (MPP 22-001.1). Adequate notice requirements regarding aid pending and the right to a state hearing are included as a part of the form.

To provide timely notice, the notice must be issued as specified in Manual of Policies and Procedures Section 22-001.16.