The People's Guide
Information about opportunities to help you get through hard times

to Welfare Health & other Services

Hunger Action LA

36th Edition 2015
Los Angeles County
Introduction

The People’s Guide gives practical information about how to get food, money, housing, health care and other help from government programs and community services if you live in Los Angeles County and need help in hard times. You do not have to read the entire book, just find the topic you need in the table of contents. However, people who are eligible for one kind of help often qualify for other programs as well, so read the entire booklet.

The People’s Guide also gives advice on what to do if you are treated unfairly or do not receive what you are entitled to by law.

Lately, massive government budget cuts have meant less help for low income families, seniors, and homeless people: fewer workers at agencies, clinics and hospitals closing, tighter rules for getting help, reduced benefits, as well as waiting lists for many programs.

There are other problems with obtaining assistance: rumors and false information that discourage eligible people from trying to get help their family desperately needs, people not knowing what the application steps are, language barriers, people being made to feel embarrassed for asking for needed help.

The People’s Guide is dedicated to helping all people overcome barriers when they try to get help. Every person has the right to enough food, housing, and health care. You help when you share this information with other people who need help.

There is another important way to help. In Sacramento, Washington DC and in County and local governments, the programs and services described in the People’s Guide are always being debated. There is a huge conflict about the money for these services.

Your voices are needed in those debates. Tell politicians how the programs help or don’t help and what your problems are. Government officials need to be reminded of the tragic crises and pain that happen in people’s lives when they can’t get food, housing, or health care.

To get names and addresses of your local, state and federal lawmakers: call (800) 481-8683 - County Registrar. or visit: www.lavote.net

Politicians often want to use money for other things than health, welfare and social services. But when the rich get too much richer and the poor get too much poorer, the gap has very bad effects on the whole society.

You can help close that gap. You don’t have to be an expert. Simply let those in authority know how a budget cut affects you or your neighbors.

Hunger Action Los Angeles and our members struggle for policies that save and improve the safety net.

Hunger Action Los Angeles (HALA) 961 S. Mariposa Los Angeles, CA 90006 Tel: 213-388 8228 www.hungeractionla.org

For more information on getting help:

211 LA County
On the internet: www.211la.org
211 is a 24 hour per day, 7 day a week telephone information and referral service. Operators are available in many languages. They can help you find emergency food and shelter, legal and financial assistance, counseling and many other resources.
Phone: 211 or (800) 339-6996 (800) 660-4026 (TTY)

Healthy City
California’s information and action resource for service referrals and social change. Visit them at http://www.healthycity.org

Public Policy Organizations
You can call these groups or attend their meetings to learn about policies affecting you.

Bus Riders Union
(213) 387-2800

California Food Policy Advocates
(213) 482-8200

California Partnership
(213) 385-8010

Coalition for Humane Immigrant Rights of Los Angeles
(213)353-1333.

Community Coalition
(323) 750-9087

Community Health Councils
(323) 295-9372

L.A. Alliance for a New Economy
(213) 977-9400

L.A. Community Action Network
(213) 228-0024

Legal Aid Foundation of Los Angeles
(800) 399-4LAW

Maternal & Child Health Access
(213) 749-4261

Neighborhood Legal Services of Los Angeles
(800) 433-6251.

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LA FAMILY SOURCE CENTERS

The City of Los Angeles has Family Source Centers (FSC) where you can apply for programs such as the ones in this book and get other help including child care service, job placement and tutoring, mentoring and arts instruction for youth:

Boyle Heights:
- Lucille Becerra Roybal FSC
  (323) 526-3033
  TDD/TTY (323) 526-3822
- El Centro de Ayuda Corporation
  (323) 265-9228

Cypress Park:
- Cypress Park FSC
  (323) 226-1682
  TDD/TTY (323) 276-3017

Echo Park:
- El Centro del Pueblo (213) 483-6335

Hollywood:
- Youth Policy Institute (323) 836-0055

Lincoln Heights:
- Barrio Action Youth & Family Center
  (323) 221-0779

San Fernando Valley:
- New Economics for Women
  Canoga Park(818) 887-3872
  Van Nuys(818) 786-4098
- El Nido Family Centers
  Picoima (818) 896-7779
  Pacoima FSC Picoima(818) 896-7776
  TDD/TTY (818) 834-2639

South LA:
- Tom Bradley FSC (323) 692-0669
  The Children’s Collective, Inc.
  (213) 747-4046
- Coalition of Mental Health Professionals, Inc. (323) 777-3120

Southwest LA:
- 1736 Family Crisis Center
  (323) 737-3900
- Community Build (323) 789-9950
- Watts:Bradley Milken FSC
  (213) 473-3607
- Watts Labor Community Action Committee (WLCAC)
  (323) 249-7552

West LA:
- Latino Resource Org., Inc.
  (310) 391-3457
- Westlake/Pico Union:
  Central City Neighborhood Partners
  (213) 482-8618
- Wilshire:
  Children’s Bureau
  San Pedro (310) 832-1145 x106
  Wilmington/San Pedro:
  Toberman Neighborhood Center
  San Pedro (310) 832-1145 x106

The People’s Guide 2015
CalWORKs is California’s welfare program for people who have children under 19 years old. It provides monthly financial assistance for low income families. Most adults can only get CalWORKs cash assistance for 48 months in a lifetime, and will be required to work or go to training in order to receive the cash assistance. If you get CalWORKs you are also entitled to Medi-Cal for health care and CalFresh to help you buy food.

Children age 18 and under and the adult relatives who care for them can get cash aid. Both one- parent and two-parent families can get cash aid. In two-parent families, one of the parents must be disabled or have worked less than 100 hours in the last four weeks before applying for cash aid.

How Do I Apply?

You apply for CalWORKs at the nearest DPSS (Department of Public Social Services) office. (see page 70 Welfare Offices.)

You can also apply online through YourBenefitsNow! website at: www.dpss.lacounty.gov

YourBenefitsNow! is a web site for Los Angeles County residents to apply for and to view their benefits online. If you have an emergency, do not apply online.

When you apply, you have a right to be treated with courtesy and without discrimination for any reason. The DPSS workers must try to get you all the cash aid, food aid and other benefits for which you are eligible.

Often, eligible people who urgently need the aid don’t get correct information, or don’t understand or get discouraged. If that is happening to you, be strong. Insist on talking to a supervisor, or the supervisor’s manager, seek out the help of someone who will advocate for you, or insist on speaking to someone fluent in your language (DPSS must provide a free interpreter) or call a Legal Aid office. (see page 66 Hearings and Complaints.)

How Do I Qualify?

To be qualified to get CalWORKs, your income must be under the amount shown on table for your family size. Once you begin getting cash aid, you can make more money and still get cash assistance from CalWORKs.

<table>
<thead>
<tr>
<th># of people</th>
<th>Gross Income Limit</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>$604</td>
</tr>
<tr>
<td>2</td>
<td>$989</td>
</tr>
<tr>
<td>3</td>
<td>$1,226</td>
</tr>
<tr>
<td>4</td>
<td>$1,455</td>
</tr>
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<tr>
<td>8</td>
<td>$2,234</td>
</tr>
<tr>
<td>9</td>
<td>$2,423</td>
</tr>
<tr>
<td>10</td>
<td>$2,663</td>
</tr>
</tbody>
</table>

Over 10 Add $23 for each extra person.

Money you make from working and unemployment counts as income. SSI payments, loans from friends, most student loans, tax refunds and Earned Income Credit don’t count. If your child is under age 19, your child’s income also doesn’t count.

To be qualified your resources must be less than $2,000. But if someone in the family on aid is disabled or 60 years or older, the limit is $3,250. Cash on hand, savings, some cars, and most other property count as resources. A home you live in, personal items like furniture and a computer, tools, and some retirement accounts don’t count.

While on cash aid, you can have a written agreement with DPSS to have a special "restricted" savings account for education, training, starting a business or buying a house, and it will not count. You can have as much as you want in this "restricted" account but you have to make a written agreement with DPSS on a form, and give them the bank account information.

"Transfer of Assets." If you give away or sell a property or resource for less than its fair market value while you are on cash aid, you might lose cash aid for one or more months. If you and the DPSS disagree about this, you need to consult with an attorney or legal services office. (pg 68 Good Advice.)
Rules about Cars

If you’re applying for CalWORKs or getting it, you can own cars that are worth under $9,500. That’s the “equity value”—the difference between what the car is worth and what you might still owe on it. A car you live in, a car used to go to work, a car used to make money like a gardener’s truck, or a car used to transport a physically disabled person in your home doesn’t count. For other cars, anything over the $9,500 will count toward your $2,000 resource limit.

What Can I Get?

CalWORKs divides people who get aid into “exempt” and “non exempt” recipients. You are considered “exempt” if you are getting disability payments such as SSDI, SSI, State Disability or Workers’Comp.

The chart below shows the “Maximum Aid Payment” for these two groups. This maximum grant is cut dollar for dollar by any “unearned” income you have, such as social security survivor’s benefits, interest (like on a bank account), or unemployment money. Earned income, wages from work, or income based on a disability is not counted dollar for dollar.

### Maximum Aid Payments

<table>
<thead>
<tr>
<th># of people</th>
<th>&quot;Nonexempt&quot; Grant</th>
<th>&quot;Exempt&quot; Grant</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>$333</td>
<td>$369</td>
</tr>
<tr>
<td>2</td>
<td>$542</td>
<td>$606</td>
</tr>
<tr>
<td>3</td>
<td>$670</td>
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<td>4</td>
<td>$800</td>
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<td>5</td>
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</tr>
<tr>
<td>6</td>
<td>$1021</td>
<td>$1140</td>
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<tr>
<td>7</td>
<td>$1122</td>
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<tr>
<td>8</td>
<td>$1222</td>
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</tr>
<tr>
<td>9</td>
<td>$1321</td>
<td>$1586</td>
</tr>
<tr>
<td>10</td>
<td>$1419</td>
<td>$1586</td>
</tr>
</tbody>
</table>

You will not get more cash aid for children born while your family is getting CalWORKs unless you weren’t getting cash aid for two consecutive months in the ten months previous to the birth or the child was born as result of failed contraception.

### 1. Think About Time Limits

Before You Take Cash Aid

You may not want to get cash aid if you have other income. Any month you get cash aid counts against the 48-month time limit, even if you are entitled only to a few dollars a month. You can get Medi-Cal, Cal-Fresh and child care money even when you do not get cash aid. Is the cash aid you will get worth “using up” a month of eligibility? Should you “save” the month in case you need it more at a later time in your life? Call legal services to discuss your options.

### 2. What Else Is Available?

When you get Calworks, you can also get

- Medi-Cal to pay for health care
- CalFresh (food stamps) in most cases
- Immediate Needs: an advance of up to $200 at the time you apply, or your whole check within 3 days if you have an eviction notice
- Homeless and Housing Assistance including eviction prevention, temporary shelter, move-in costs, rent subsidy, and help with cost of moving
- Non-Recurring Special Needs: You can get up to $600 each time if you have to replace clothing, household items, and appliances because of a fire, disaster, theft or other event beyond your control. You can also get this money for shelter if your home is so damaged or unlivable you can’t stay there and you are not eligible for the Homeless Assistance program. You must have less than $100 to get this money.
- Special Needs: You can get an extra $9 to $15 if you have special needs such as higher food costs because of a necessary special diet, or higher transportation or utility costs due to a medical condition. Breast-feeding mothers can add $15 to their grant to help with their dietary needs. Tell your worker if you have these special needs.
- Child Support: You can get $50 extra each month if the other parent pays at least $50 of child support to the County’s Department of Child Support Services on time. The Department should give you a list that shows when the other parent paid (an “accounting”). Check it to make sure you got $50 extra cash aid for every month the other parent paid on time. To get an accounting call 323-890-9800.

### 3. Money for Pregnant Women

After 6 months of pregnancy if you have no other children on CalWORKs, you may get a grant for one person plus an additional $47. You get this money from the time your pregnancy is verified until the baby is born. Here are some other rules for the $47:

- Pregnant teens with no other children can get cash aid from the date of application with proof of pregnancy, but must go to Cal Learns.
- If there are no other children, the father cannot get CalWORKs until the child is born, but he can get General Relief for himself, if eligible.
- If you are undocumented, or receive SSI, and have no other children on CalWORKs, you must wait until the child is born to get benefits for the baby. Bring in proof of the baby’s birth such as a hospital certificate or a wristband.

### 4. Diversion Payments

Instead of receiving monthly cash aid you can apply for a large amount of money called a “diversion payment” to help you get or keep a job. To get it, you must be apparently eligible for CalWORKs, have a job or immediate job opportunity, and have an unexpected one-time need. For example, you could pay for car repairs or insurance, work tools or clothing, rent or utilities, license fees, or childcare expenses. If you get a diversion payment you may also get Medi-Cal, Cal-Fresh and supportive services. (see page 9 “Services To Help You.”)

The usual payment is up to the grant amount for your size family for three months or $2,000, whichever is larger. For a “compelling need,” you can get up to $4,000. The diversion payment counts as months of cash against the 48 month life-time limit (amount of payment divided by monthly grant—months used up) After you get a diversion payment, you can still get cash aid if you need it.

Diversion payments must be paid to you within 5 days after the application, or 1 day in an emergency. Starting work the next day is an example of an emergency.
5. Foster Care (Someone Else’s Children)

If you are caring for someone else’s children, the child or children may qualify for Foster Care payments even if you are related to the children. Foster Care payments are higher than CalWORKs cash aid. (see page 22 Foster Care.) If a relative’s children live with you but do not get foster care, you should be able to get cash aid for them.

6. Domestic Violence

If you are a victim of domestic violence, or suffering effects of past domestic violence tell the worker right away, because there are specially trained workers available to assist you with the problems you or your children may have. Also, you may be excused from GAIN or have other eligibility rules waived such as the Maximum Family Grant rule.

Let DPSS know if you need emergency or homeless assistance. DPSS staff must act quickly to help you.

7. Special Help for the Disabled

If you have a physical or mental disability that makes it hard for you to go through the regular application process, DPSS must give you special help. This might include: taking an application at your home, helping you fill out forms or reading all forms to you. Ask your worker for this help. If they won’t give it to you, call Legal Services for help.

8. Fingerprints

All adults (age 18 and over) and teen parents must be fingerprinted in order to apply for and get CalWORKs. If you refuse to be fingerprinted, your cash aid will be cut, but your children can get their cash aid. If you are scheduled for fingerprinting at a day that will not work for you, ask to reschedule.

There is no longer a fingerprint requirement for CalFresh. If you have a joint application for CalWORKs and CalFresh, a refusal to comply with the CalWORKs fingerprint requirement cannot result in a denial of CalFresh benefits.

9. Next Steps

Keep in touch with your DPSS eligibility worker and write down his or her name, phone number, and phone hours. If you are asked to mail additional papers to the welfare office, ask the worker for a stamped envelope addressed to him or her.

If you take in papers, get a receipt. Keep your own copy of all the paperwork. If you need help and your worker is not available, the duty worker or supervisor must help you. You can also call the Help Line for your DPSS office. (see page 70)

Within 45 days of when you turn in your application, you must either receive your first check, or a notice that you have been denied aid. If the DPSS denies your aid, they must send you a letter explaining the reason. Do not sign a “withdrawal” of your application unless you understand and agree with the written reason you are given.

10. Electronic Benefits Transfer “EBT” Card

DPSS will give you an EBT “electronic benefits transfer card” (Golden State ADVANTAGE) to use at banks, ATM machines and stores. If you are also getting CalFresh (food stamps), those benefits are accessed using the same card.

For CalWORKs, if the last digit of your case number is 1 to 3, the money goes on your card the first day of the month; 4 to 7, the second day of the month; and 8 to 0, the third day of the month. There is no charge for the first four “swipes” of the card each month, after that there is a $0.85 charge for each use. Some ATM machines will charge a fee of $1 or more to use the card.

MoneyPass locations do not charge a fee. Ask your worker for a list of banks and ATMs near you that will not charge you a fee. You can also go to www.ebt.ca.gov for locations of ATMs.

GAIN participants may choose to have their payments for transportation issued through their EBT card or through a mailed check.

Call (877) 328-9677 right away if the card is stolen, lost, or destroyed. You will not be charged for stolen aid after reporting the loss.

What Are The Requirements?

1. Reporting Every Six Months

Every six months you must report changes in income, property or the number of people in your household. You will also report once a year on a “SAR 7”. Also once a year, you will fill out what is called a “re-determination”. DPSS will mail you a SAR 7 report form. The form also asks you to report any changes you expect in the next six months.

You must turn in the SAR-7 even if there is no change to report. If you don’t get the SAR-7 in the mail, go to DPSS to get another form and fill it out.

The completed, signed form is due back to DPSS on the fifth day of the last month of the six month period.

Some things need to be reported to the county before your next income report is due. This is called “mid-period reporting.” You must report these things within 10 days:

- Address changes,
- fleeing felons
- drug convictions,
- parole or probation violations,
- and if your income goes over the “income reporting threshold (“IRT”).”

The IRT is the amount of income that would reduce your aid or make your household ineligible for aid. DPSS will give you a form telling you your IRT limit. DPSS counts the family’s earned and unearned income to see if you are at this limit. For example a family of three has an IRT of $1,861.00 per month. The family doesn’t have to report any change in income until the next report is due, unless it adds up to more than $1,861.00.

It is safest to drop your SAR-7 off at the DPSS office, and get a dated receipt to prove that you turned it in on time. But you can mail it in the postage-paid envelope. You can safely submit your SAR 7 online through YourBenefitsNow! You can upload copies of pay stubs, bills, and receipts, and get a receipt right after you submit your report online.
If you mail in your SAR-7, be sure to attach copies of pay stubs, bills and receipts to prove your information. It is wise to keep a copy of every piece of paper you give to DPSS. If the SAR-7 you turn in is incomplete, DPSS treats it as if it was not turned in at all.

If you do not turn in a SAR-7 report by the eleventh day of the reporting month, you will get a notice that your cash aid will stop. DPSS must also try to phone you to let you know they don’t have the SAR-7.

If you get a notice that you are being terminated (your aid stopped) for not filling out a SAR-7, call your worker, go to the DPSS immediately, and fill out a new SAR-7 (or take in your receipt if you already submitted the SAR-7).

If you submit a SAR-7 within the month following the discontinuance, you will not have to reapply but your eligibility and benefits will be determined by the date you turn in a complete SAR-7 unless you had a good reason (good cause).

If you can show “good cause” your cash benefits will be restored back to the beginning of the month. Good cause for turning the SAR-7 in late includes:
- errors by DPSS,
- a physical or mental condition that prevented you from being on time,
- or not being able to provide all the necessary information.

If you haven’t been able to work it out or haven’t heard from your worker, be sure to file for a fair hearing before the date your check is supposed to stop. This way you will not lose your cash aid (see pg. 66).

When you first apply, the amount of cash aid you get depends on how much your other income is at that time. What you report on your application will be used to determine what you get the next few months until your first SAR-7 is turned in. If your income goes down, report it right away, so your cash aid will go up. You can do this by calling your worker. DPSS may ask you for proof that it has dropped.

You won’t get aid if you’re in jail or out of the state for 30 days, but you should still report it, or they will charge you with an overpayment.

2. Rules for Families In Which Only Children Get Money

In some CalWORKs families, the children are receiving money but the adults are not. These are called “child only cases”. If this is the case, you don’t have to complete any written mid-period/mid-year reports, such as the SAR 7. You will still have to fill a written redetermination once a year. You may still have to complete reports every six months until your first SAR-7 is turned in.

The following are CalWORKs cases that are considered “child only” cases:
- All adults that have reached the CalWORKs 48-month time limit;
- The adult(s) is not eligible because of a fleeing felon status, or has been found by a court to be in violation of probation or parole;
- The adult(s) is not eligible for CalWORKs due to immigration status;
- The adult(s) is not eligible because of failure to provide a Social Security Number;
- The adult(s) is a CalWORKs non-needy relative (did not request CalWORKs assistance);
- The adult(s) is receiving Supplemental Security Income; or
- The adult(s) is CalWORKs sanctioned due to refusal to assign child/spousal support rights.

If there is no adult receiving money because he/she chooses not to participate in welfare-to-work requirements, the case is not a “child only” case.

3. Report All Your Income And Gifts

You should be careful to report all income you get or changes in your family. The welfare department will check bank, employer, and tax records to check your income, and accepts tips of suspected “welfare fraud” from the public.

There are serious penalties for individuals who either are convicted of fraud in court or found to have committed fraud at an administrative hearing. You may have to pay penalties and be disqualified from CalWORKs for six months or even a lifetime, depending on the seriousness of the fraud. You can also be arrested and face jail time.

4. Cooperate with Child Support Collection

Unless it could put you or your children in danger to do so, parents on cash aid must help (“cooperate with”) the Child Support Agency (“CSA”) to collect child support from any absent parent. You must provide information you have about the other parent such as name, an address or social security number, or place of employment.

The County keeps most of the child support it collects, up to the amount of the family’s cash aid. You will get your CalWORKs grant plus an extra $50 per month for every month the other parent pays on time. Every quarter the CSA should give you an accounting of the child support they collected. Call (323) 890-9800 to ask for this information. Parents will lose their share of cash aid if they refuse to sign over the child support to the county.

If you sign over your child support, but the Child Support Agency says you are not cooperating with them, your family’s aid can be cut 25%.

Many people have good cause for not cooperating. Good cause includes:
- You don’t know where the absent parent is, or have no other information about the other parent
- You are afraid of the absent parent, you or your children may be in danger, or you are a victim of domestic violence.
- Rape or incest has occurred
- You are planning to place the child for adoption.

If your worker at DPSS agrees that you have good cause, you will not have your cash aid cut. If you get a notice in writing that you are “not cooperating” and you think you have a good reason not to, and cannot resolve the issue by talking with your worker, ask for a fair hearing. (See Page 66 Hearings And Complaints.)
CalWORKs

5 Get Immunizations (“Shots”) For Your Children

When you apply for CalWORKs or at your annual redetermination, you must show proof that your children under age 6 have had their shots. You have 30 days from the approval of your Medi-Cal application (done at the same time as your CalWORKs application) or 45 days from your redetermination to submit the immunization record or doctor’s statement.

If you do not prove your children are immunized and do not have good cause (either lack of access or a sworn statement that immunization is against your religious or other beliefs), all cash aid to adults will be cut off until you provide the proof. The DPSS will extend the time period by 30 days if you have not been able to find shots for free. You can call the County Health Department at (800) 427-8700 to find free shots.

6. Keep School-Age Children in School

If your child is under 16 and not attending school regularly without good cause, the adult’s cash aid will be cut off. If your child is over 16 and not attending school, or welfare to work activities, without good cause, only that child’s aid will be cut. In either case, the cash grant will be restored when you prove to DPSS that the child is in school or has good cause.

Work Requirements

As a CalWORKs recipient, you are required to participate in “Welfare-to-Work” (WTW) activities in order to stay on cash aid. Participation in WTW is mandatory for all CalWORKs participants unless you are exempt or have a “good cause” for non-participation.

- Exemptions and “good cause” require documentation, verification, and approval of the Welfare-to-Work case manager.
- Exempt participants may volunteer to participate in WTW program services.

The welfare-to-work programs in Los Angeles County are called GAIN and REP. “GAIN” (“Greater Avenues to Independence”) is the main program for English and Spanish speaking participants. If your primary language is not English or Spanish your welfare to work case will be handled by a program case manager, or a GAIN Services Worker (GSW). If you have been in the U.S. less than 5 years and have legal immigrant status as a refugee or granted asylum, you are assigned to the Refugee Employment Program titled “REP”.

The GAIN program is a work-first program that provides employment-related services to help you find employment, stay employed, and move to higher paying jobs which lead to self-sufficiency and independence.

There is a Welfare To Work 24-Month Time Clock (within the CalWORKs 48-month time limit). The WTW 24-Month gives you more activity options and requires fewer participation hours for single-adult families.

During this 24 month period you can participate in several activities to keep getting cash aid including:

- work
- education
- training
- mental health, substance abuse, and/or domestic abuse services.

When your WTW 24-Month Time Clock runs out, you will have a shorter list of activities to choose to participate in to continue receiving the same amount of cash aid.

The shorter list may include employment, work experience, and community service. Vocational education and training may also be allowed for up to one year after your WTW 24-Month Time Clock ends. Your county office will send you a notice before you reach the end of your WTW 24-Month Time Clock. They will provide you with the shorter list of activities to choose from, and instructions on what you will need to do next in order to continue receiving the same level of cash aid.

The months on your WTW 24 Month Time Clock may not be months that come in a row, but months added up over all the time you are getting aid. Months in which the families meet the federal participation requirements do not count towards the WTW 24-Month Time Clock.

Once your WTW 24-Month Time Clock ends, if you do not meet your new participation requirements, your cash aid may be lowered and it may affect your supportive services.

Your WTW 24-Month Time Clock Stops When:

- You are in appraisal, job search, assessment, or in the process of developing a new WTW plan.
- You are meeting the required number of participation hours in certain activities.
- You are in Cal-Learn.
- You are exempt from participating.
- The county determines that you have a good reason for not participating (called good cause).
- You are sanctioned.

1. Weekly Participation Hours

As of July 2014, the hours of participation are as follows:

<table>
<thead>
<tr>
<th>#of Adults in Family</th>
<th>Average Weekly Hours of Participation</th>
</tr>
</thead>
<tbody>
<tr>
<td>Single-adult with a child under 6 years old ............. 20</td>
<td></td>
</tr>
<tr>
<td>Single-adult with no children under 6 years old ........... 30</td>
<td></td>
</tr>
<tr>
<td>Two-parent families (hours may be combined between both parents) .......... 35</td>
<td></td>
</tr>
</tbody>
</table>

2. Getting Excused from GAIN (“Exempt” or “Good Cause”)

You may be eligible to be exempt from GAIN or REP if you are:

- A youth under 16 years old
- A youth from 16 to 18 in school full time
- Caring for a first child under 12 months old, or any later child under 6 months old
- Pregnant, and have medical verification that being pregnant harms your ability to participate or work
- Pregnant, and DPSS decides that work or training is not the right thing to do based on the medical verification
- A full time volunteer in the Volunteer in Service to America (VISTA) program.

Any months exempted for the following reasons do not count against the 48 month CalWORKs time clock:

- Disabled due to a physical or mental reason for 30 days or more
- 60 years or older
- Taking care of an ill or disabled household member, only if DPSS agrees that this prevents you from participating in the program or working.
3. Learning Disabilities

All GAIN participants must be offered a learning disability (LD) screening. You can say you do not want the LD screening, but if you change your mind, you can ask for LD screening and evaluation anytime. If the evaluation shows you have a learning disability, your welfare-to-work plan must have activities that help you deal with your learning disability, such as tutoring or extra study time. DPSS must decide whether job search will be useful for you, or if your time limits should be extended.

If you have already been to assessment, went through GAIN or REP and failed to make satisfactory progress, you may have the clock stopped on your time limits and changes must be made in your plan with special help offered to you.

After the evaluation, you can be referred to a mental health provider for treatment. The GAIN worker must develop your welfare-to-work plan based on what your treatment provider recommends.

You have the right to refuse any mental health treatment, but if you do, you can’t use mental health problems as a reason to not work or not participate in GAIN or REP.

Separate from cash aid (CalWORKs checks), CalWORKs can help you pay for work-related and training-related costs both before and after the 48-month limit. It is sometimes wise to volunteer to participate in GAIN or REP after being excused in order to receive this money.

Good cause includes:
- Not getting supportive services you need (such as child care and transportation) to work or go to a GAIN or REP activity
- Child sick at home from school
- No transportation (for example your car broke down)
- You are homeless

Domestic Violence Waiver:
DPSS can waive some of the CalWORKs rules for victims of domestic violence. For example they can stop the 48 month time clock, excuse you from going to GAIN, stop child support collections, or waive the maximum family grant rule. The violence can be something that happened in the past or in the present.

Exempt people can volunteer and get help. You do not have to participate in GAIN or REP if you are excused or exempt. But you may volunteer to participate. As an exempt volunteer, you do not have to do the full 20 hours each week, but you are subject to other requirements of GAIN participants. You can do as many or as few hours as you are able. DPSS must also pay you for services, like child care and money for transportation, tools, and books.

You can also get up to $405 for a refrigerator or stove if you need one because of the move, so the total can be $1,905.
GAIN and REP Activities

1. Appraisal

Soon after you apply for CalWORKs, you will receive an appointment letter to go to an Appraisal appointment. This will most likely take one hour or longer. You will meet with your GAIN or REP worker in a one-on-one meeting where you will talk to your worker about your work and educational history and what kind of services you need to get back to work. If you have problems due to mental health, substance abuse, or domestic violence, tell your worker at this time so that you can get services immediately.

Tell your worker if you are already enrolled in an education or training program. It might qualify as what they call a Self-Initiated Program. This will let you do the education and training as your welfare-to-work activity instead of going through Job Club and the rest of the GAIN process.

2. Job Club & Search

The first day of Job Club is called Orientation, during this day you will learn about the rules and regulations of the GAIN Program and they will try to give you motivation to find employment.

The first four weeks of GAIN are spent in Job Club and Job Search. You don’t have to do job search if:
- It would interfere with a full time job or approved training you already have, or
- You are in the Cal-Learn program or
- Doing a job search would not help you (example-you need basic English or literacy training first)
- You need other help with domestic violence, mental health, or substance abuse.

3. Assessment

When unsubsidized employment is not found within the first three weeks of Job Club you will attend Vocational Assessment at mid-week of the fourth week. A Vocational Assessment will help identify your interests and strengths as well as determine if you have any barriers to finding and/or keeping employment. This information will help the Vocational Assessor develop a personalized Employment Plan.

Your personalized Employment Plan will identify the training, subsidized employment, on-the-job training, and other welfare-to-work activities needed to reach your employment goal.

Stand Alone Assessment: Stand Alone Assessment is for participants who, during their appraisal interview or after Job Club are:
- Employed full or part time
- In a Self Initiated Program (SIP)
- In need of a clinical assessment: or
- Post Employment Career Assessment for participants who find a full-time job of 32/35 hours or more per week and request Post-Employment Services.

4. Your Welfare to Work Plan and Activities

After the assessment you will meet with your Worker, to sign a “welfare to work” plan in which you agree to go to welfare to work activities. The plan must be based on the assessment of your needs and skills. Your plan can include:
- Counseling
- education and training at adult schools or community colleges,
- ESL, math or GED classes,
- or other work activities that will help you reach your employment goal.
All WTW participants are required to sign a Welfare-to-Work Plan, including those who are employed full-time.

5. Make Job Training Part of Your Welfare to Work Plan

You can request that your Employment Plan includes any job skills training offered by DPSS or other private or public agencies. You can request the Transitional Subsidized Employment program, in which you are paid to work at a non-profit agency (called Paid Work Experience) or you recieve On-the-Job Training at a for-profit business.DPSS, the community colleges, and adult schools may offer special job training programs for people with limited English-speaking skills.

6. If You Don’t Agree On The Welfare to Work Plan

If you and the assessor can’t agree on the employment plan, you can request an independent “third party assessment” by another agency. DPSS must let you know about the third party assessor when you disagree and must help you with the request. You and DPSS will be bound by what this independent assessor decides. If you disagree with the result of the third party assessment, you may request a fair hearing (see pg.66).

If you still think your welfare to work plan will not work for you, you have these options:
- Ask for a change within the first three days from the date you signed the plan.
- If you have already begun an activity, you have 30 days to request a change to another activity. Your worker must grant your request if the other activity is consistent with your plan and likely to lead to employment. You can request for this grace period only once.

7. Self-Initiated Programs (SIP) For Students

Self-Initiated Programs (SIP) is a college or vocational program you chose and began on your own before your first GAIN appointment (appraisal). If on the date of your GAIN appraisal you have already enrolled in either an undergraduate degree or certificate program for school or training, your education or training may count as your GAIN activity. If you already have a 4-year college degree, you cannot do a SIP unless it is for a teaching credential.

To continue in a SIP you must be making satisfactory progress toward a degree or certificate that leads to employment.

If your approved SIP is interrupted because of a good reason, such as illness, you can go back to that program later, so long as you were in good standing when you left. If your self initiated program takes less than the required number of hours a week, you must also participate in other welfare to work activities to get to the total required number of weekly participation hours.(See pg. 8)

8. Help To Keep The Job—Post Employment Services

Once you have found a job, GAIN can still help you with money for transportation, training, tools, uniforms, and similar costs. Also you may be eligible to get two years of child care payments. You must ask for this money to get it.

Transitional CalFresh and Medi-Cal: You can continue to get Medi-Cal and CalFresh (food stamps) when you leave CalWORKs. DPSS should send you a notice explaining how this works.
Clock Stoppers or Exemptions

Apply for an exemption to “stop the clock” for any months which should not have been counted in your 48-month limit. Your request should be in writing, but can be verbal.

DPSS has to send you a written decision within 15 days of the request (unless something happens that is beyond the DPSS’s control). If you disagree with the decision you may request a state fair hearing. DPSS is required to research your available case records before asking you to provide information or documentation which they already have in the files.

Clock stoppers include:
- **Sanctioned or No Check**—Any month you do not get a CalWORKs cash aid payment for yourself including if you are sanctioned that month, or you are caring for an aided child but not aided yourself.
- **Disabled**—Any month you are sick, disabled, or injured for 30 days or more and it interferes with going to work or GAIN. You may be required to provide a doctor’s report. This includes mental and physical illness.
- **Caring For a Sick Family Member**—Any month you are caring for an ill or disabled person living in the home and that caretaking interfered with regular employment or participation in GAIN activities.
- **Foster Child Placement or Risk of Placement**—Any month you are a non-parent relative taking care of a child who is a dependent ward of the court or “at risk of foster care placement” and that responsibility interfered with regular employment or participation in GAIN activities. This can exempt, for example, a grandparent under age 60 who could not both be regularly employed and care for the child.
- **Domestic Violence**—Any month you cannot participate in CalWORKs as a result of domestic abuse. You do not have to currently be in a domestic abuse situation. You also qualify if you are suffering from the effects of past abuse. You only need to tell your worker (“self-declare”) to qualify; no other proof, not even a police report, is required.
- **Age 60 or over**—Any month the parent or caretaker relative is 60 years or older.
- **Child Support Repaid**—All child support paid to the County by an absent parent takes time off your clock. Ask the County Child Support Division (800) 615-8858 to provide you with an accounting of the amount of child support they have collected on your behalf during the 48-month period. Then ask your GAIN worker or fill out and submit an exemption form to find out how many months of credit you get for the child support that was paid.
- **Teen Parent**—Any month you are a teen parent or pregnant, under age 19, do not have a GED or high school diploma, and either participate in or are excused from Cal Learn or another teen parent program approved by the DPSS. You can be excused from Cal Learn in any month in which you can show the DPSS you do not have necessary childcare or transportation, you are sick, disabled, or expelled and an alternative school program is not available. You can’t use Cal Learn as a clock-stopper after you get the GED or diploma.
- **Native American**—You are a Native American who lives in “Indian Country,” or on a reservation if 50% or more of the adults there are unemployed.

In a family with two aided parents, both adults must meet one of the above clock stoppers for the month not to count.
If you don’t follow the GAIN or REP requirements and don’t have a good reason (“good cause,”) DPSS will cut your cash aid. Your children’s cash aid will not be cut. In some cases both parents can have their cash aid cut.

DPSS can cut your part of the CalWORKs grant if they can show that you have:
- Failed or refused to participate in your assigned activity
- Failed to make good progress in your assigned activity
- Failed or refused to accept a job
- Failed or refused to keep a job
- Failed to keep the same amount of earnings
- Transportation is not available to your job or GAIN activity
- You were ill, or caring for a sick member of the family
- Your mental illness prevented you from doing what was asked of you
- You need child care for a child 12 years or younger and none is available
- The job or activity violates health and safety standards or does not provide worker’s compensation
- Accepting the job or work activity would interrupt an approved job or training program that you have in progress
- The job or community service would result in regular employees being fired, laid off, or having their hours or pay cut.
- Any other good reason.

During a sanction you continue to get childcare for the hours that you work. Your Medi-Cal must also continue.

Teen Parents

If you are a teenager under 18 who is pregnant or who already has a child, has never been married, and you apply for CalWORKs, you must live with your own parent or parents, a guardian, another adult relative, or in an adult-supervised arrangement in order to qualify.

There are exceptions, if:
- You have no living parent or guardian, or their whereabouts are unknown
- Your parents will not allow you to live with them,
- You lived apart from your parents for at least 12 months before your child was born, or before you applied for CalWORKs
- You believe your child’s or your physical or emotional health or safety would be in danger if you lived with these adults.

In this situation DPSS should refer your case to the Minor Parent Program of the Department of Children and Family Services (DCFS). A DCFS social worker will visit your current home and decide if it is appropriate for you and your child.

If you live at home, your parents’ income will be counted against you and your child when you apply.

Is There Help for Homeless Families?

If your family is homeless, or has received a notice to pay or quit, the DPSS can give you money for temporary shelter and to help with move-in costs to a permanent home or to avoid being evicted. The money is in addition to your CalWORKs cash aid and does not have to be paid back. To apply you must be
- homeless or have received a notice to pay rent or quit
- eligible for CalWORKs
- and not have more than $100.

You are “homeless” if you have no regular, permanent place to live for any reason. You do not have to stay in a shelter to prove that you are homeless. You may be asked to prove that you are homeless, but money cannot be denied or delayed if you do not have proof. It is against the law for any government agency to take children away from parents for being homeless unless there is evidence of abuse or neglect. Homelessness by itself is not child abuse or neglect.

Usually you can get this homeless assistance aid only once in a lifetime. However, a family can get help more than once if the cause is:
- Domestic violence by a spouse, partner, or roommate
- A physical or mental illness (not including drug addiction or alcoholism) and you have a written doctor’s note.
- A fire or natural disaster or your home was condemned, or some other unusual circumstance beyond your control.

1. Temporary Shelter Money

You can get money for up to 16 consecutive days to stay in a hotel or shelter. You cannot use this money to pay to stay with a friend. You will get $65 to $125 per day to pay for shelter, depending on your family size. If you find some place for less money than they give you, you can keep the extra money.

You must show receipts to prove that you have paid something for shelter. (If you cannot show receipts, you can still get homeless aid money but it will be paid directly to the shelter.) You will also have to fill out a form showing that you have looked for a permanent place to live for each day that you received the shelter. If eligible, DPSS should help you the
same day you apply, either by giving you a referral to a specific shelter with room for you or by giving you cash that day. If they refer you to a shelter, they must give you temporary shelter money by the next day.

Even if you decide not to go to the shelter, you should ask for money for as many nights as you need, but it has to be during a single 16-day period. (For example, you cannot get a week now and another week two months from now.) If you needed but did not receive all 16 days of temporary homeless assistance, request a hearing to collect it retroactively. After the 16 days are over, make sure to provide your worker with a mailing address (even if only temporary) within 10 days.

2. Money to Get and Keep Permanent Housing

You can also get money to cover the actual cost of security and utility deposits including the “last month’s rent” deposit, and gas, electricity, and water deposits. The DPSS will not pay for the first month’s rent, though, or old overdue utility bills because you must pay that from your CalWORKs cash aid.

The DPSS will not pay unless you find a place where your share of the monthly rent is not more than 80% of your total monthly household income.

If you plan to share your housing, the landlord must agree to the rent-share plan. DPSS will question the housing unless your name is on the lease.

If you are a CalWORKs participant now you must be given this permanent housing assistance within one working day of showing that you have found a place and provided all the necessary documents to get the assistance. If you are not yet receiving CalWORKs benefits, you must first bring in the documents you need to prove you are eligible for CalWORKs, and proof that you have found a place (like a note from the landlord or a proposed rental agreement). When you pay your landlord, get a receipt to give to your worker within 30 days. If you later move, the landlord and/or the utility companies should return the security deposits to you, not to the County, to use at your next residence.

You can also get Permanent Housing Assistance to receive up to 2 months of back rent to prevent eviction. Each month of this back rent cannot be more than 80% of the total monthly household income. Call Legal Aid for details (pg. 68).

3. Emergency Assistance to Prevent Eviction (EAPE) Program

If you are at risk of losing your home because you didn’t pay the rent due to a financial hardship (not for any other lease or contract violation), EAPE can give you money to pay back rent and/or utilities up to two months behind so that you can continue living there. To be eligible for EAPE you must be approved for CalWORKs and working full-time or enrolled and actively participating in GAIN, or “timed off” CalWORKs and participating in GAIN Post-Time Limit Services, AND show that you are going through a financial hardship that could result in homelessness if help is not given. Once the worker verifies you are eligible you can get up to $2,000 to pay past due rent and/or utilities for up to two months. You must agree to pay a portion of the past due rent and/or utilities. EAPE money does not pay for the present month rent and utilities—unless you have received a pay or quit notice for the current month’s rent.

4. Moving Assistance (MA) Program

MA can give you money to help you secure a permanent place to live. To qualify you must be approved for CalWORKs, working full-time, or enrolled and actively participating in GAIN, or timed out from CalWORKs and participating in GAIN Post-Time Limit Services, AND: be homeless or be at risk of being homeless (you already got an eviction notice or 3-day notice), or you can show that you have a financial hardship that will result in your being homeless if you don’t get help.

If you are already homeless, you must have used up all other assistance such as Homeless Assistance to get MA. Once the worker verifies you are eligible you can get up to $2,000 as a once in a lifetime payment for move-in costs like deposits, last month’s rent, truck rental, and a stove and/or refrigerator if the new place doesn’t have one. Like Homeless Assistance, you must find a place where your family’s share of the rent is not more than 80% of the total monthly household income. Timed-out families can also get two months of the adult portion of the reduced grant (included within the $2,000).

5. 4-Month Rental Assistance (RA) Program

If you just found a permanent place to live with the help of Homeless Assistance or Moving Assistance, RA can help you get up to $300 per month (based on family size) for four consecutive months to help pay your rent. RA is for families who cannot get subsidized housing (e.g., a Section 8 voucher). The payments are made out to the landlord.

To qualify you must be eligible for Permanent Move-In Money from Homeless Assistance and/or Moving Assistance and have a signed rental agreement securing non-subsidized permanent housing within the past 30 days of the time you request RA; or you found non-subsidized permanent housing and have requested Permanent Housing/Moving Assistance.

To be eligible, you must be one of the following:
- Be CalWORKs approved and working full-time or enrolled and actively participating in GAIN; or
- Be timed out from CalWORKs and enrolled and actively participating in GAIN Post-Time Limit Services
Hundreds of organizations in LA County offer help in job training. Beware of private employment agencies that charge you fees for finding a job. Many encourage you to pay the tuition with expensive student loans that can ruin your credit. Use free or low cost services instead.

1. Workforce Investment Boards

Workforce Investment Board (WIB) offices use government money to help you with job training and placement. Local WIB offices, also called One-Stop WorkSource Centers, are located at different places across the city and provide computers, faxes, copiers, and job listings to help you look for work. The law requires that they also provide you with career counseling, money for transportation and childcare, as well as possibly paying for quality job training that leads to a job. Call Legal Aid (see “Good Advice”, pg. 68) if you have any troubles getting these services.

City-wide: (213) 744-7164
TTY 213 744-9395
lacitywb@lacity.org
County-wide: (213) 738-2598
www.worksourcecalifornia.com

2. Community Colleges

Community colleges offer an opportunity to anyone who wants to obtain a career or transfer to a 4 year university.

Cerritos: 11110 Alondra Blvd., 90650 562-860-2451 www.cerritos.edu
Compton: 1111 E. Artesia Blvd,90221 310-900-1600 district.compton.edu
El Camino: 16007 Crenshaw Blvd 310-532-3670 www.elcamino.edu
Glendale: 1500 N. Verdugo Rd, 91208 818-240-1000 www.glendale.edu
Long Beach: 4901 E. Carson St. 562-938-4111 www.lbcc.edu
Los Angeles (9 districts) 770 Wilshire Blvd 213-891-2000 www.laccd.edu
Mt. San Antonio: 1100 N. Grand Ave, 909-274-7500 www.mtsac.edu
Pasadena: 1570 E. Colorado Blvd. 626-585-7123 www.pasadena.edu
Rio Hondo: 3600 Workman Mill Rd. 562-692-0921 www.riohondo.edu
Santa Clarita: 26455 Rockwell Cyn Rd. 661-259-7800 www.canyons.edu
Santa Monica: 1900 Pico Blvd., 90405 310-434-4000 www.smc.edu

3. Occupational Programs

Offers education and job training in technical and occupational programs. Contact Los Angeles County Regional Occupational Program, (562) 922-6850 or visit www.lacorop.org

4. Adult Schools

Adult schools can help you get your high school diploma or GED, learn English as a second language (ESL), provide you with computer training and job readiness classes, and many other certificate courses. For information:

- L.A. Unified School District
  (213) 62-LEARN (213-625-3276),
- L.A. County Office of Education
  (562) 922-6111

5. Other Job Training

- AmeriCorps (800) 942-2677
  www.americorps.org
- Job Corps (ages 16-24)
  (800) 733-5627
- Homeboy Industries
  (323) 526-1254

Chrysalis helps low income individuals including those who are homeless or have just come out of prison find temporary and permanent work opportunities. For more information:

- Los Angeles (213) 806-6300
- Santa Monica (310) 401-9400
- Pacoima (818) 794-4200
  www.changelives.org

6. Department of Rehabilitation

The state Department of Rehabilitation provides a wide range of services for people with physical, mental, or emotional disabilities (including substance abuse problems) who want to become more independent and/or self-supporting. Many services are free for those who qualify.

Services available include vocational counseling and training; job placement; medical treatment; money for tuition and books; necessary tools; car modifications; money for transportation; reader and interpreter services; and services for family members (such as driving lessons or counseling.)

If you experience problems with Department of Rehabilitation contact the Disability Rights California Client Assistance Program at (800) 776-5746/TTY line (800) 719-5798. You can also visit: www.disabilityrightsc.ca/pubs/PublicationsClientAssistanceProgram.htm

Antelope Valley: (661) 945-3502
(661) 942-6694 (TTY)
Van Nuys / Foothill: (818) 901-5024
(818) 901-5086 (TTY)
Glendale: (818) 551-2141
Santa Clarita: (661) 799-1020
(661) 799-1024 (TTY)
West Valley: (818) 596-4302
(818) 596-0196 (TTY)
El Monte: (626) 572-2336
(626) 572-2481 (TTY)
Pasadena: (626) 304-8300
(626) 304-8324 (TTY)
West Covina: (626) 813-7662
(626) 939-9122 (TTY)
Greater Los Angeles: (213) 736-3904
(213) 736-3960 (TTY)
Bell: (323) 771-0866
Mid Cities Branch
(323) 565-1860
(323) 565-1874 (TTY)
Culver City: (310) 559-6140
Westchester: (323) 298-2500
(323) 298-2521 (TTY)
South Bay: (562) 422-8325
(562) 422-9276 (TTY)
Bay Cities: (310) 793-1157
(310) 793-8610 (TTY)
Compton Branch: (310) 637-1157
(310) 637-6526 (TTY)
Long Beach Branch: (562) 422-8325
(562) 422-9276 (TTY)
Pacific Gateway: (310) 217-6955
City of Commerce: (323) 720-4073
(323) 721-5142 (TTY)
East Los Angeles: (323) 223-2315
(323) 224-6068 (TTY)
Norwalk: (562) 864-8521
### Unemployment Benefits

#### 1. How to Apply

You may be eligible to receive unemployment insurance (UI) benefits from the Employment Development Department (EDD) if you are unemployed, working less than full time, and are actively looking for work. If you are attending an approved training course you are not required to look for work, or accept work while in training.

- **Apply online at:**
  - www.eapply4ui.edd.ca.gov
- **Or call:** (800) 300-5616

A recorded message about general unemployment insurance benefit information is available 24 hours a day, 7 days a week, including holidays. You can file claims at the same number Monday through Friday: 8:00 a.m. to 5:00 p.m. On the EDD website www.edd.ca.gov you can also manage extensions, certify for benefits online, and get useful information.

An individual who files for unemployment insurance benefits must meet specific eligibility requirements before benefits can be paid. Individuals must:

- Have received enough wages during the “base period” to establish a claim
- Be totally or partially unemployed
- Be unemployed through no fault of their own (Laid off, not fired for “misconduct” or having quit for a good reason)
- Be physically able to work
- Be available for work which means to be ready and willing to immediately accept suitable work
- Be actively looking for work
- Meet eligibility requirements each week benefits are claimed
- If you are seeking training benefits, you must be approved for training before training benefits can be paid

The minimum weekly benefit amount is $50 and the maximum weekly benefit amount is $450.00. The normal maximum benefit period is 26 weeks.

During bad economic times or when there are high unemployment rates, the maximum benefit period is usually extended. Check the EDD website www.edd.ca.gov for updated information. Employers report wages to the state for each employee. The state uses this information to decide if you earned enough wages in a “base period” to establish a UI claim, and how much will be paid.

Always tell the truth to the EDD about why you are no longer working for your last employer. When in doubt as to whether you were fired or laid off, tell EDD you think you were fired. Even if you were fired, you may still be eligible for benefits.

After you apply and are approved, EDD will give you a debit card and give you payments through it. You are required to file a Continued Claim Certification form, DE 4581, every two weeks. You file this form by mailing it to EDD every two weeks, or you can complete it online through EDD Web-Cert (that’s recommended as the better way), on the EDD website www.edd.ca.gov. You can also call (866) 433-4606.

If you are denied benefits and decide to appeal, you must keep filing your forms with EDD so that if you win the appeal, EDD can give you back benefits.

If the state thinks you did not meet eligibility requirements, they will schedule a telephone interview. After the phone interview, EDD will mail you a notice indicating whether or not you qualify for benefits.

At the hearing, an administrative law judge will consider the evidence, including your testimony, and decide whether you should get benefits.

Even if you are fired or if you quit, you may be eligible for benefits. If EDD says that you were fired for misconduct or that you quit without a good reason, you can appeal it. To show that your actions were not misconduct, you can argue that you made a mistake, simply could not do the job, or that the action was an isolated occurrence. Also if you can show you had a good reason to quit a job you can get UIB. Call legal services for help. If you appeal keep filing your forms with EDD! If you win the appeal, you can get back benefits.

Besides unemployment benefits and State Disability Insurance (SDI), the EDD offers **California Training Benefits (CTB)** which allows qualified persons to receive unemployment benefits while in approved training.

#### If You Are Employed

### 1. Dealing with Problems

If you have a problem at work and are a member of a union, contact your union representative. He or she can advise you about dealing with your employer or about contacting the right government office. To find out about unions, or to get in touch with an organizer, call the L.A. County Federation of Labor (AFL-CIO) (213) 381-5611. www.launionaflcio.org

### 2. Appeal Your Denial

If you disagree with the EDD decision, you should appeal and ask for a hearing in writing before the appeal deadline. Your past employer also has a right to appeal a decision by EDD to grant you benefits.
2. Wage Claims

You can file a wage claim with the Labor Commissioner for any amount owed to you (or in Small Claims Court for up to $10,000) if your employer does any of the following:

- Pays less than the minimum wage, which is $9.00 per hour. (It will increase to $10 per hour on January 1, 2016). Some workers do not have to be paid minimum wage, including minors.
- Does not pay overtime. Overtime means time-and-a-half of your hourly rate if you work more than 40 hours in a week OR more than 8 hours a day. Overtime means double-your hourly rate if you work more than 12 hours in a day OR more than 8 hours on the 7th day of a work in a row.
- Takes improper deductions from your pay.
- Does not pay you all wages owed immediately upon discharge or within 72 hours if you quit and don’t give 3 days notice.
- After you lose your job, does not pay vacation time that you were promised and have earned.
- Does not pay wages owed or pays you with a check that bounces.
- Does not give you at least 10 minutes rest break for every 4 hours work or a meal break of at least a half hour without interruptions, which can be unpaid, if you work at least a 5 hour shift. You may be entitled to “one additional hour of pay” for each meal and rest period violation per day.

You may also claim waiting time penalties. These penalties consist of your daily pay for each day after separation from work that you have to wait to receive all wages owed to you, up to 30 days. Wages include regular pay, overtime, vacation pay, and pay for not getting rest or meal breaks.

Free Wage Claim Clinics (for assistance with your case):
Legal Aid Foundation of Los Angeles
(800) 399-4529
Neighborhood Legal Services
(800) 433-6251

To reach the Labor Commissioner’s office about wage claims:
State Industrial Relations Department,
Labor Standards Enforcement,
320 W. 4th Street, Suite 450.
LA, 90012. (213) 620-6330.
Van Nuys: 6150 Van Nuys Blvd. # 206
Van Nuys, 91401 (818) 901-5315.
www.dir.ca.gov/DLSE

The federal Department of Labor has an office that also helps people with similar problems. Its services are more limited. However, you can file an anonymous complaint with them to avoid retaliation by your employer.

Department of Labor,
915 Wilshire Blvd., Ste 960, LA, 90017
(866) 487-9243.

3. Discrimination

It is illegal to discriminate against workers because of their race/color, sex, religion, national origin, citizenship, age, disability, political affiliation, or sexual orientation. It is also illegal to require sexual favors from an employee (sexual harassment). If you believe you have been discriminated against, you should first try to talk with an attorney who specializes in these cases.

You can file a complaint, even if you do not have an attorney, with either:
The California Department of Fair Employment Housing, 320 W 4th St. 10th Floor, Los Angeles CA 90013, (800) 884-1684, www.dfeh.ca.gov: Or:

They will investigate your complaint and may be able to help solve your problem. If your case requires court action, you will be given a letter authorizing you to file a lawsuit.

4. Work Safety

Employers are required to provide safe, healthy work areas. If you are asked to work under unsafe or unhealthy conditions, a state agency can investigate your complaint, and your employer may be fined for violating the law. Contact the California Occupational Health and Safety Administration (Cal/OSHA) office nearest your work. Visit www.dir.ca.gov/dosh/DistrictOffices.htm.

5. Sick Leave

A new California law provides that employees can accrue one hour of paid sick leave for every 30 hours they work. The law begins July 1, 2015 and applies to employees who have worked for at least 30 days within a year from the time they began their employment.

You can begin using sick leave on the 90th day of employment, and any paid sick leave not used within the year carries over to the next year. An employer can limit you to 24 hours (three full days) of sick leave in any one year period.

Sick leave can be used to care for yourself, but also family members, and can be used for reasons other than illness, including preventative care, and issues related to domestic violence, sexual assault and stalking. An employer cannot require you to find a replacement worker as a condition of using paid sick leave.

In cases where you can foresee that you will need to use sick leave, you are required to provide reasonable advance notice. Otherwise you can just provide notice as soon as it is practical.

6. Groups That Can Help

These organizations and websites can help you learn more about your rights in the workplace:

9 to 5 Los Angeles Working Women
provides free counseling and resources
(213) 201-7029
National Helpline (800) 522-0925

www.martindale.com—Research attorneys who can help with work related issues
www.canmybossdothat.org

www.canmybossdothat.org
If You Are Disabled

1. State Disability Insurance

If you cannot work for a temporary period because of an illness, injury, or pregnancy, you may be able to get state disability insurance benefits (SDI). These benefits range from $50 to $1075.00 per week depending on your earnings in a prior quarter, and can last up to one year (39 weeks for employers and self-employed people who elected SDI coverage).

You must be unable to do your regular or customary work for at least eight consecutive days. You must have lost wages because of your disability or, if unemployed, have been actively looking for work. You must have earned at least $300 from which SDI deductions were withheld during a previous period. You must be under the care and treatment of a doctor during the first eight days of your disability. (The beginning date of a claim can be adjusted to meet this requirement.) You must remain under care and treatment to continue receiving benefits.

You must apply within 49 days of the date you became disabled or you may lose benefits. You do not need to apply in person to receive benefits.

If your disability prevents you from completing the claim form, or you are filing for benefits on behalf of a disabled claimant, call (800) 480-3287 for required forms and instructions.

If you are eligible for further benefits, either additional payments will be sent automatically or a continued claim certification form for the next two weeks will be sent. You must report income you receive, even though sometimes it does not reduce your SDI payments.

Coordination with Worker’s Comp
If you also have a worker comp. claim and the insurance carrier delays or refuses payments, SDI may pay you benefits while your case is pending. However, SDI will pay benefits only for the period you are disabled and will file a lien to recover benefits paid. SDI and Workers’ Compensation are two separate programs. You cannot legally be paid full benefits from both programs for the same period.

However, if your workers’ comp benefit rate is less than your SDI rate, SDI may pay you the difference between the two rates.

Long-term or Permanent Disability: If you expect your disability to be long-term or permanent, apply for SSDI from Social Security well before your year of SDI is over. (see page 23 Social Security).

You may not be eligible for SDI benefits if you:
- Are not suffering a loss of wages.
- Are claiming or receiving Unemployment Insurance.
- Became disabled while committing a crime resulting in a felony conviction.
- Are receiving workers’ compensation benefits at a weekly rate equal to or greater than the SDI rate.
- Are in jail or prison because you were convicted of a crime.
- Are a resident in an alcoholic recovery home or drug-free home, unless it is licensed and certified by the state.
- Fail to submit to an independent medical examination when requested to do so.

If you do not have sufficient base period wages and you remain disabled, you may be able to establish a valid claim by using a later beginning date.

If you do not have enough base period wages and you were actively seeking work for 60 days or more in any quarter of the base period, you may be able to substitute wages paid in prior quarters.

Additionally, you may be entitled to substitute wages paid in prior quarters either to make your claim valid or to increase your benefit amount if during your base period you were in the military service, received workers’ compensation benefits, or did not work because of a labor dispute.

You have the right to appeal, and should appeal any disqualification, overpayment, or penalty that you do not agree with. Specific instructions on how to appeal will be provided on the state forms you receive. If you file an appeal and you remain disabled, you must continue to complete and return continued claim certifications.

For residents in a state-approved alcoholic recovery home or drug-free residential facility, the maximum payable period is 90 days. (However, disabilities related to or caused by acute or chronic alcoholism or drug abuse which are being medically treated do not have this limitation).
2. Workers' Compensation Benefits

Workers' Compensation benefits are designed to provide you with the medical treatment you need to recover from your work related injury or illness, to partially replace the wages you lose while you are recovering, to provide compensation for injuries sustained at work, and to help you return to work.

If you are disabled because of a work injury or as a result of unhealthy, unsafe, or stressful conditions at work, you should apply for Workers' Compensation benefits. If the injury occurred on the job or as a result of the job, you have a right to file a claim. You are entitled to most types of Workers' Compensation benefits regardless of your immigration status or the length of time you worked for your employer.

There are six basic types of Workers’ Compensation benefits:

A. Medical Benefits: The employer pays for the medical care resulting from the work-related injury up to $10,000 while your claim is still being considered by the insurance company. This can include physician services, hospitalization, prescriptions, and other necessary and reasonable care. You may be treated by the employer's physician or company clinic, or by your own doctor if you have previously notified your employer in writing of your request to select, or “pre-designate” your own doctor.

B. Temporary Disability Benefits: These benefits are paid every two weeks if you are unable to return to work within three days, or are hospitalized overnight. The benefits are intended to partially replace two-thirds of the wages lost as a result of the injury, up to a maximum weekly amount that is determined based upon the date your injury occurred and based on your average weekly wage at the time of injury. These benefits are paid until you are able to return to work, or until the disability becomes permanent and stationary. You will be considered “Permanent and Stationary” if a doctor determines that your medical condition has stabilized and you are not expected to have a significant change in condition for a period of one year, with or without medical treatment.

C. Permanent Total Disability: If you have a permanent total disability you may receive up to payments every week for life. The rate of payment depends on the date you were injured.

D. Permanent Partial Disability: This benefit is far more common than Permanent Total Disability, discussed above. For Permanent Partial Disability, the percentage of disability is based on a medical evaluation or multiple medical evaluations by a neutral doctor or doctors selected either by agreement of the parties or by a random list of names provided by the state. You receive weekly benefits for a period that increases with the percentage of disability and will vary depending upon your average weekly wage at the time of your injury. These benefits are paid every two weeks.

E. Supplemental Job Displacement Vouchers: Employees injured on or after Jan. 1, 2004, who are permanently unable to do their usual job, and whose employer does not offer other work, may qualify for the supplemental job displacement benefits (SJDB). SJDB comes in the form of a non-transferable voucher that can be used to pay for educational retraining or skill enhancement, or both, at state-approved or state-accredited schools.

F. Death Benefits: If a worker is fatally injured, the worker's family may receive burial expenses up to $10,000. Death Benefits may also be paid as support payments for dependents of the deceased worker. The amount of death benefits varies based on when the injury occurred and varies depending on the extent to which an eligible beneficiary was “dependent” on the deceased worker.

Filing a Workers’ Comp Claim: http://www.dir.ca.gov/dwc/IWguides/IW-Guide01.pdf

For help filing a claim or if your employer does not provide you with a Claim Form, contact the Workers’ Compensation Appeals Board District Office closest to you:

Workers’ Compensation Appeals Board
Los Angeles District Office:
320 W. 4th St., 9th floor
Los Angeles, CA 90013
(213) 576-7335.

Workers’ Compensation Appeals Board
Pomona District Office:
732 Corporate Center Drive
Pomona, CA 91768
(909) 623-4301

Workers’ Compensation Appeals Board
Van Nuys District Office:
6150 Van Nuys Boulevard, Suite 105
Van Nuys, CA 91401
(818) 901-5367

Visit these web pages for more information:

http://www.dir.ca.gov/InjuredWorker-Guidebook/InjuredWorkerGuidebook.html

http://www.dir.ca.gov/dwc/FactSheets/Employee_FactSheet.pdf

You may also want to hire a private attorney to help you with your claim. Many Workers’ Compensation attorneys offer a free consultation, which allows you to discuss your case with a professional free of charge. Workers’ Compensation attorneys handle this type of case even if you cannot afford to pay in advance because their fees for Workers’ compensation cases are set by law and are paid when your case is resolved. If you receive nothing, your attorney will not charge you for any work done on your behalf.

It is illegal for your employer to punish or fire you for having a job injury or illness, for filing a claim, or testifying in another person's Workers' Compensation case (Labor Code 132a). If proven, you may receive lost wages, job reinstatement, increased benefits, and costs and expenses up to limits set by the state.
Tax Credits

What Are Tax Credits?

Tax credits are benefits you can get only by filing out state and federal income tax forms. They can be received in a check, or can be used to reduce the amount of tax you owe. You should file federal and state taxes even if your income is so low that you do not owe taxes, or if you get paid in cash, because that is the only way you can get these credits.

The federal tax credits require that you file the "long form." You can get help by calling (800) TAX-1040 or (800) 829-1040.

1. Earned Income Credit (EITC)

“The Earned Income Tax Credit” (EITC) is a check that low-income working people can get from the government by filing a federal income tax return or filling out a W-5 form during the year, even if your income is so low that you do not owe federal taxes. You need a valid social security number to get this money.

You qualify for earned income credit if your yearly income in 2014 is below the level in the chart below.

<table>
<thead>
<tr>
<th>Family Size</th>
<th>Income Limit</th>
<th>Max Amount You Can Get</th>
</tr>
</thead>
<tbody>
<tr>
<td>Married with 3 + children</td>
<td>$52,427</td>
<td>$6,143</td>
</tr>
<tr>
<td>Unmarried with 3 + children</td>
<td>$46,997</td>
<td>$6,143</td>
</tr>
<tr>
<td>Married with 2 children</td>
<td>$49,186</td>
<td>$5,460</td>
</tr>
<tr>
<td>Unmarried with 2 children</td>
<td>$43,756</td>
<td>$5,460</td>
</tr>
<tr>
<td>Married with one child</td>
<td>$43,941</td>
<td>$3,305</td>
</tr>
<tr>
<td>Unmarried with 1 child</td>
<td>$38,511</td>
<td>$3,305</td>
</tr>
<tr>
<td>Married couple no children</td>
<td>$20,020</td>
<td>$496</td>
</tr>
<tr>
<td>Single workers (aged 25 - 64) with no children</td>
<td>$14,590</td>
<td>$496</td>
</tr>
</tbody>
</table>

If you are receiving CalWORKs, or CalFresh (Food Stamps), the DPSS cannot count the EITC payment as part of your income if you spend the money in the month received or the month after. For the General Relief program, this money is counted as income.

You can also file for "retroactive" payments from the past three years. If you do not owe taxes, there is no penalty for filing for the credit late (after April 15th).

You can claim EIC on the tax form (1040 or 1040A) or you can fill out just the first side of “Schedule EIC” instead and the IRS will figure it out for you. However, you may not use the 1040EZ form (the shortest form) to claim your EIC.

For help getting the credit you can call the EIC hotline at 1-800-601-5552. To get a 1040 or 1040A form for this year and past years, and to receive free tax assistance call the IRS at (800) 829-3676 and ask for VITA-Volunteer Income Tax Assistance. Forms are also available in libraries, post offices and other public places.

If you choose, you can receive this payment spread out during the year in lower payroll tax deductions instead of getting it all at once at the end of the year. To do this, ask your employer to fill out a W-5 form.

2. Child and Dependent Care Tax Credit

Families who pay for child or dependent care in order to work or look for work may be eligible for money or reduced taxes from both the federal and state governments. The dependent can be a child under the age of 13 or a dependent of any age who is unable to care for him or herself, including a disabled spouse.

The benefits are up to $1,050 from the state and $2,100 from the federal government for families with two or more children or dependents. Families with one child or dependent may qualify for up to $525 from the state and up to $1,050 from the federal government. The amount you get is generally higher if your expenses are higher.

The state credit is limited to families with under $100,000 income per year. There is no income limit for the federal credit.

3. Renter's Tax Credit

The Renter’s Tax Credit is not a payment that you can receive, but a deduction that renters can make on their California state income tax forms. Renters who owe no tax will get no benefit. Single renters with incomes up to $36,955 are eligible for $60 renters’ tax credit and families with incomes up to $73,910 are eligible for $120 renters’ tax credit.

Other rules apply:
- You had to be a California resident for the entire year
- You had to pay rent for at least half the year on a California property that was your main residence
- The property you rented was not exempt from California property tax
- You didn’t live with another person for more than half the year (such as a parent) who claimed you as a dependent
- You were not a minor living with and under the care of a parent, foster parent or guardian
- You or your spouse were not granted a homeowner’s property tax exemption during the year

4. Health Care Tax Credit

The new health care law requires that everyone be covered by health insurance or they may have to pay a fine. If you are low income and apply for health care through Covered California, ask if you can qualify for tax credits that will help make up for some of the money you have to pay for health insurance.
Every child in California has the right to a free public education, whether they are citizens, legal residents, have no documents, or are homeless. There is government money available to pay for child care when kids are not at school, for families who are in CalWORKs or working.

### Education

Children between the ages of 6 and 18 are required by California law to attend school. The L.A. County Office of Education offers numerous programs for all family members, including:
- Literacy programs to help students and parents learn to read, and to train parents to help their children learn
- Computer training and job readiness for parents
- Early Advantage programs for children under age 3
- Head Start and State Preschool programs for children

Call your local school district or call (562)922-6111 County-wide to find out about preschool programs and family literacy programs.

#### 1. After School Enrichment

Especially if you are in CalWORKs, call your local elementary school to see if it has an after-school enrichment program. This program provides supervised afterschool fun, growth, snacks, and learning for children from first through sixth grade. Children must be attending the school where the program is offered. If your children attend school in the Los Angeles Unified School District (LAUSD), call (213) 745-1900 for information on enrollment in afterschool programs. If your children attend school in a different school district, call the local district.

#### 2. Homeless Children's Rights

Homeless children:
- Do not need a permanent address to enroll in school
- May remain at the same school they attended before becoming homeless, or enroll at the school serving the place they are living temporarily
- Cannot be denied enrollment just because any documents are not immediately available

- Have the right to participate in school meals, special education, Title I and any other federal, state or local programs for which they are eligible
- Must be provided transportation if other children get transportation
- Cannot be isolated or separated from the main school environment just because they are homeless.

These special rights under federal McKinney-Vento law apply to all children and teens without a fixed, regular adequate residence including if you are staying with friends or relatives because you lost your housing, you are waiting for foster placement, or you are living in any kind of shelter, car, motel, campground, abandoned building, garage, or similar place.

### CalWORKs Child Care

CalWORKs may pay for child care for children who are 10 years old or younger, up to age 12 if the county has funds available or if other exceptions are met, and up to age 18 if the child is disabled and needs special care. You may be eligible for child care even if you are under a CalWORKs sanction, and after you leave CalWORKs for up to two years.

If you are low income, working, but do not get CalWORKs cash aid, you may still qualify for subsidized child care: for information call (800) 543-7793.

If you or someone you know would like to provide child care, call Community Care Licensing Division (323) 981-3350 or a Child Care Agency for licensing, training and other information.

#### 1. How Do I Get Child Care?

To get money for child care, you will have to talk to a child care “agency.” These agencies are called Resource and Referral (R&R) or Alternative Payment Programs (APP). They will
- Help any family find child care;
- Provide information to parents on how to choose good child care;
- Make child care payments

You can get information about how to request CalWORKs child care over the phone (877) 244-5399 or in person. You can request child care at DPSS, or at the R&R or APP agency. Your child care request will be approved or denied in within 4 business days of receiving and verifying required documents, including a completed Stage 1 Child Care Services Application which provides the agency with all the necessary information about you, your child care needs, and your provider

Call the child care hotline (877) 244-5399 or Legal Aid (800) 399-4529 for help if it takes a long time to get your child care approved. You will get written notice telling you whether you and your provider have been approved or denied. If you disagree with the decision you can ask for a fair hearing.

#### 2. How Payment is Made

A Provider Payment Request will be mailed each month to you and to your child care provider. Both you and the child care provider must sign the request and mail it to the child care agency at the address on the form. Payments are then made directly to your child care provider. If the payment is missing or incorrect, you or your provider may contact the agency for assistance.

#### 3. Choosing Quality Child Care

It is your right as a parent to choose the child care you think is best for your child. The agency will give you referrals and information on what to look for when choosing a provider. If you decide the referrals are not good choices, ask for more referrals. Choose the child care that’s best for you:
- Licensed child care centers, Preschools, or Family child care homes.
- License-exempt child care can be provided by family, friends, or neighbors. If you use license-exempt care, you will need to sign a statement that your provider meets minimal health and safety requirements. The child care agency will not pay for child care provided to you by someone on your CalWORKs case.
- If the provider is caring for children from more than one family (besides their own) they may need a license.

Most providers will have to be fingerprinted and go through a criminal background check. Your relatives may not have to go through this process.
There are three “Stages” of child care.

1. Lack of Child Care
   - You can be temporarily excused from participating in work requirements of CalWORKs if child care is not reasonably available. Your case manager will evaluate each case individually and periodically.
   - Child care is not reasonably available if:
     - You are not satisfied with the child care
     - There is no child care close enough
     - You have no transportation to the child care
     - There are no providers operating during the hours you need child care
     - The provider’s license is under investigation
     - The provider cannot commit to providing care for your child
   - The child care is not appropriate for your child’s needs.

2. Complaints about Providers
   - You should complain about your child care if there are bad conditions, or you suspect abuse or mistreatment. You can complain at the following places:
     - The DPSS child care coordinator
     - The R&R or APP Agency
     - Child Care Hotline (877) 244-5399, Monday through Friday, 8 am to 5 pm
     - Community Care Licensing (310) 337-4333 or (323) 981-3350
     - Legal Aid (see p. 68 for list).

3. Brokers
   - If you are requesting child care, you do not need to pay anyone to help you with your request (these people are often called “brokers”). The child care agency must provide you with a worker who speaks your language to help you with this process. You can also get help from community organizations who will not charge to help you request child care.
   - If you use a broker, be very careful about signing a “representative payee” form, which gives the broker direct control of your child care payments. If you have any problems with brokers, complain to the agencies listed in the section above.

<table>
<thead>
<tr>
<th>Family Size</th>
<th>Monthly Income Limit</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 or 2</td>
<td>$3,283</td>
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<tr>
<td>3</td>
<td>$3,518</td>
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<td>4</td>
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<td>9</td>
<td>$5,511</td>
</tr>
<tr>
<td>10</td>
<td>$5,628</td>
</tr>
</tbody>
</table>

You may still qualify for low cost child care if you're over the income limit. Call one of the agencies listed on the right side of the page for details.

Help Finding Child Care

If you need help locating a licensed child care provider, you may contact the local Resource and Referral Agency in your area, shown below:

- Child Care Resource Center (818) 717-1000
  San Fernando Valley & Antelope Valley

- Pomona USD Development Program
  (800) 822-5777 or (909) 397-4740
  Pomona Area

- Pathways (213) 427-2700
  Hollywood, Downtown, Silver Lake
  Connections for Children (310) 452-3325
  Santa Monica, Beach Cities, Culver City

- Mexican-American Opportunity Foundation (323) 890-9600
  East L.A., Monterey Park, Bell, Santa Fe Springs, Montebello, Boyle Heights

- Options (626) 856-5900
  South San Gabriel Valley (Baldwin Park, El Monte, Whittier), Pasadena, Monrovia, La Cañada

- Crystal Stairs, Inc. (323) 299-8998
  South Los Angeles, Inglewood, Hawthorne, Gardena, Watts, Long Beach, San Pedro, Bellflower, Cerritos, Norwalk

The below Alternative Payment Program Agencies do not offer Resource and Referral Services:

- International Institute of Los Angeles (323) 224-3800- Boyle Heights
- Drew Child Development Corporation
  CalWORKs (310) 638-8108- Gardena
- City of Norwalk (562) 462-1713

Child Care Information & Resources Directory for L.A. County listing hundreds of licensed providers is available at DPSS website:

www.lacounty.gov/dpss/childcare
Foster Care

Children who are abused or neglected, or whose families are unable or unwilling to care for them, may become the responsibility of the Department of Children and Family Services (DCFS) in Los Angeles County. Report child abuse at (800) 540-4000 /TDD (800) 272-6699.

How Are Children Placed in Foster Care?

DCFS may file a petition with the Dependency Court to have the child removed from the parent(s)’ custody and placed with a relative or in a licensed foster home. If the child was already taken from the parents, the petition must be filed within 48 hours. The court will usually approve or deny the petition the same day it is filed. If approved, the DCFS worker must immediately prepare an application for foster care benefits. Ask the worker if this was done.

In some situations, DCFS and the child’s parents may agree that the child should be taken from the home for a limited amount of time while the parent complies with a case plan to reunify with the child. In these cases, the parent and DCFS will complete a document called a Voluntary Placement Agreement which is good for only 180 days. After that, DCFS must either return the child to the parent or file a petition in dependency court.

Is There Help for Caregivers?

If you are caring for a child in your home who is not related to you, and was placed with you by DCFS, the child may be eligible for foster care benefits. You must either:
1) Be the child’s legal guardian or
2) Have a state licensed foster home. (There are different rules for children placed through a Foster Family Agency (FFA).)

If you are caring for a related child (grandchild, cousin, niece, etc.) it can be difficult to get foster care benefits. These are often called “Youakim” cases. Your home does not have to be licensed by the state, but it must meet the same standards as for licensing. The child may be eligible if:
• The child was removed from the parent(s) and placed with you by an order of the Dependency Court or Voluntary Placement Agreement.
• DCFS is responsible for the child’s placement and care; and
• The child received or was eligible to receive CalWORKs while with the parent(s) in the month that DCFS filed the petition to have the court remove the child from the parent(s) or within the six months prior to that. Not all children who received CalWORKs will be eligible for foster care.

1. What are the Benefits?

Foster care benefits are only for the child (not the adults). The child also gets one clothing allowance when placed and one yearly while in school.

<table>
<thead>
<tr>
<th>Age of child</th>
<th>Basic Monthly Cash</th>
</tr>
</thead>
<tbody>
<tr>
<td>0-4</td>
<td>$671</td>
</tr>
<tr>
<td>5-8</td>
<td>$726</td>
</tr>
<tr>
<td>9-11</td>
<td>$764</td>
</tr>
<tr>
<td>12-14</td>
<td>$800</td>
</tr>
<tr>
<td>15 &amp; older</td>
<td>$838</td>
</tr>
</tbody>
</table>

Aid in L.A. County as of 07/01/14

In Los Angeles County, there is a higher “specialized rate” for children with severe medical and/or psychological needs. If you think your foster child qualifies for this, ask the social worker to arrange an evaluation. If the child uses services from the Regional Center, they should receive the "Dual Agency Rate" automatically.

All children in foster care are eligible for Medi-Cal. If the child is living with a relative, but is not eligible for foster care benefits, the child should be eligible for CalWORKs without considering your income.

If you are related to the foster child, and low-income, you may be able to get CalWORKs and Medi-Cal for yourself. You may also be eligible for CalFresh/food stamps, depending on your income. If you apply for CalFresh, you get to choose whether or not you want to include the foster child in your household. The foster child cannot receive CalFresh/food stamps unless they are included in your household. Ask your worker to explain other services available to foster children and their caregivers.

2. What Are My Rights?

Call DCFS’s Foster Care and Adoptions Assistance Hotline at (800) 697-4444 if you have questions or problems with foster care eligibility or payment, to report a change of address, or for general questions.

If you think you should be getting any of these benefits and are not, you can ask for a state hearing, even if you did not get a notice denying benefits. Call Legal Aid Foundation of Los Angeles, at (800) 399-4529, or The Alliance for Children’s Rights at (213) 368-6010 for help.

As a foster parent, you can go to all court hearings involving your foster child, but you cannot speak unless the judge says you can. Every child in dependency has an attorney. You can call the attorney with any questions or concerns about the child’s needs. You can ask the worker or the attorney to let you know when a court hearing is scheduled.

If you have reason to believe a child related to you is in the Foster Care system, and you are willing to provide a home for that child, call the Child Abuse Hotline and give your name and information. You may or may not be contacted.

Is There Help for Foster Youth Turning 18?

If you are a foster youth who is turning 18, or recently turned 18, you may be eligible for extended foster care. Extended foster care is optional. If you choose to stay in extended foster care, you will have to agree to live in an approved home and meet with a social worker every month. If you are eligible for extended foster care when you turn 18, but choose to close your case, you may re-enter foster care any time before you turn 21. For more information about extended foster care: visit: www.after18ca.org or call: (877) 846-1602

If you are going out of care you can check out Housing options on page 60.

What Are Other Options?

1. Legal Guardianship

If you are an unrelated legal guardian, you may get State Foster Care benefits. The child does not have to be a dependent of the court. As soon as you get your temporary guardianship papers, call DCFS’s
hotline at (800) 540-4000 and ask for a “Permanency Planning Worker.” Note the date and time you called and the name of the person you spoke to. A worker should visit your home within 5 days. Have a copy of your guardianship papers to give the worker. Benefits begin as of the date of your call - at the same rate as federal foster care.

2. Kin-GAP

To get Kin-GAP, the relative must become the child’s legal guardian through the Dependency Court. The Dependency Court case is then closed and DCFS is no longer involved. The child must have lived with a relative for at least 6 consecutive months to be eligible for Kin-Gap. The relative can choose to go into Kin-GAP or not. Kin-GAP pays the same rate the child received in foster care, including specialized care rates and clothing allowances. The child did not have to receive any benefits to be eligible to receive Kin-GAP benefits. If DCFS recommends that you become the legal guardian, ask how this will affect the child’s benefits.

3. Adoption Assistance

The Adoption Assistance Program provides benefits to help families adopt children who are less likely to be adopted without this assistance, like sibling groups, children with disabilities, mixed ethnic backgrounds, or older children.

The benefits can be up to the foster care amount, including higher “specialized rates”. Benefits must be renegotiated at least every two years. You may also get help with the costs of the adoption process. The adoptive family becomes legally responsible for the child’s support.

If you have problems with the Adoption Assistance Program, you can contact Public Counsel’s Children’s Rights Project at (213) 385-2977 ext. 500.

4. Long Term Foster Care

If you are a relative and do not wish to adopt the child, or become the child’s legal guardian, you cannot be required to do so, and DCFS should not threaten to remove the child from you if you choose not to adopt. The child’s permanent plan can be long-term foster care with you, but you will need to pursue this with DCFS and the Dependency Court.

5. County Foster Care

L.A. County also has its own foster care program, primarily for undocumented children who are dependents of the court. They may be placed with relatives.

Social Security, SSI & CAPI

What is Social Security?

Social Security is a federal insurance program which provides benefits for eligible workers and their families regardless of income. SSI and CAPI are programs for disabled or seniors.

Social Security covers both employees and the self-employed, if the worker has earned enough quarters of credit. A quarter is credited to your account for each $1200 earned in 2014 or $1220 earned in 2015. This amount changes every year. You cannot earn more than 4 quarters in a year.

Social Security provides four main kinds of benefits: retirement, disability, survivor, and health (called Medicare). (see page 54 Medicare for description of who qualifies for Medicare). There are no resource limits to these programs.

1. Retirement Benefits

Monthly retirement payments are made to workers and their eligible dependents. The amount you get depends on how much money you have earned and how many years you worked in a job covered by Social Security. Covered workers pay for Social Security (FICA) by being taxed on the money they earn, and employers must match this amount.

Present law prevents Social Security benefits going to any non-citizen who is not “lawfully present” in the U.S. (see page 62 Guide for Non-Citizens). The age at which you can get full retirement benefit depends on what year you were born. For those born between 1938 through 1959, the full retirement age increases to 67. You must be at least 62 to even get reduced retirement benefits.

You can earn money and still get retirement benefits without restrictions if you have reached full retirement age, (depending on your year of birth) before you start receiving benefits. Your retirement benefit is reduced for each month before the full retirement age up to 36 months. You can find out how much your benefits will be reduced on the social security website www.ssa.gov under “early or late retirement”. Ask your Social Security office for more details.

2. Disability Benefits

Monthly Social Security Disability Insurance (SSDI) payments are made to you and to eligible family members, such as a spouse, unmarried ex-spouse (if they meet marriage duration requirement), child, or adult disabled child, if you are a covered employee who is unable to work (engage in substantial gainful employment) because of severe physical or mental medically determinable illness or impairment that has lasted or is expected to last at least 12 months or to end in death. Benefits are available to family members on the same terms as for Retirement benefits.

You may also want to apply for SSI if you are disabled or over 65 years of age and are poor. SSDI does not require low family income, but SSI does. Also, SSDI provides Medicare benefits after 24 months, while SSI qualifies the person for Medi-Cal. SSDI generally requires that the applicant must have worked 40 quarters with at least 20 of them (5 years of quarters or work credits) earned in the 10 years immediately before the date the disability began. Different rules apply for the blind. Those under age 31 and those under 24 have reduced earning requirements in order to obtain benefits and those over 43 have increased earning requirements in order to qualify for disability benefits. See social security website under the “Number of Credits Needed For Disability Benefits” for the various rules depending on age.
SSI has no work history requirement. Because both SSI and SSDI can take several months from application to approval, while waiting you can also apply for "Medical Assistance Only" and "MAGI" Medi-Cal at the welfare office. MAGI Medi-Cal does not require that you be found disabled to receive benefits.

If you are currently receiving state disability benefits do not wait until your state disability benefits have run out before applying for federal disability benefits and Medi-Cal. Applying for SSI and/or SSDI can take many months before a decision is made whether you are disabled. If you have not yet received your SSI or SSDI by the time your state disability benefits have run out, you should apply for General Relief (see pg. 27) but General Relief benefits are very low and you have to be down to your last $50 to be eligible.

3. Survivor Benefits

When a covered worker dies, monthly payments are made to eligible family members including:

- A spouse over age 60 or disabled and over age 50 or caring for the worker’s child who is under 16 or 16 years or older and disabled.
- The spouse above can be divorced from the worker but can get benefits only if the marriage lasted at least 10 years, the ex-spouse is unmarried and s/he is entitled to more benefits on his/her dead ex-spouses account than on his/her own account.
- A disabled adult unmarried child who became disabled before age 22 and has never worked at a job that was considered substantial gainful employment.
- A parent of the worker over age 62 if s/he was at least 50% dependent on the worker’s support when the worker was alive.
- If members of any of the above groups were receiving benefits when the wage earner/worker started receiving retirement benefits, those benefits will increase when the worker dies.

What Is SSI?

SSI ("Supplemental Security Income") is a cash benefit program for low-income persons 65 and over and for blind and disabled persons of any age, including infants and children. You must be a U.S. citizen or a qualified immigrant living in the country legally to get SSI. (See page 26 for "What is CAPI", a program for immigrants ineligible for SSI.)

The Social Security Administration provides a good description of the SSI program at www.ssa.gov/notices/supplemental-security-income/index.htm

SSI may be your entire income, or it may add to other income you already get. But to qualify for SSI your total income cannot more than $20 over the SSI maximum benefit. SSI grant amounts differ depending on several factors including whether the recipient is blind, a child, or is homeless.

Can I Get SSI?

To get SSI, at least one of the following must apply:

- You are age 65 or older;
- You are blind; the vision in your best eye is no better than 20/200 with glasses or your tunnel vision is 20% or less;
- You are unable to work because of a severe mental or physical illness or impairment that has lasted for 12 months or is expected to last 12 months or is expected to result in death;
- You are a child under 18 who has a medically proven “marked and severe” physical or mental disability that would keep you from working if you were an adult or significantly interfere with your daily activities.

You can’t get SSI if the disability is based on alcohol or drug dependency, but you may qualify based on another disability such as mental illness or kidney or liver disease.

You can’t get SSI any month in which you’re in prison or jail, have an outstanding warrant for a violation of a parole or probation order, or are a fleeing felon. Only certain types of outstanding felony warrants can cause you to be denied benefits. Seek help from legal aid if you are denied benefits.

1. Income

Your “countable income” may not be above the maximum benefit level. Subtract the following from your “gross” income to get your countable income:

- $20 per month of your total income;
- $65 per month of any earned income and half of your remaining earned income;
- All work expenses if you are blind;
- Any impairment-related work expenses if you are disabled;
- All tax refunds;
- Any portion of scholarships or grants that is for tuition, fees, and school expenses;
- Federal undergraduate grants and loans (totally exempt);
- Foster care payments
- A third of all child support payments from an absentee parent if you are caring for a child
- Any income, if you are blind or disabled, that has been set aside as part of a “PASS” (Plan to Achieve Self-Support) approved by the Social Security office
- Federal housing and relocation assistance payments;
- Earnings of a blind or disabled student under age 22 up to $1,620 a month, maximum $5,200 a year;
- Payments from FEMA, Red Cross and others for disaster-related losses
- Money you receive to pay to replace or repair a lost, damaged or stolen resource;
- Reverse annuity mortgage payments made to the recipient (counts as a resource, but not as income.)

2. Resources or Assets

Your countable resources may not be more than $2000 for one person and $3000 for a couple, (even if only one member of the couple is eligible.) Some resources are not counted:

- The home you live in;
- One car if you use it for work or medical treatment at least four times a year or if it is specially-equipped for a disabled person;
- Payments from agencies for disaster-related losses;
- Property used for self-support including farm land, equipment, storage building, inventory, business bank accounts;
- Retirement accounts (IRAs, tax deferred annuities) belonging to the spouse or parent of an SSI beneficiary or applicant. However, the “cashed-in” value of retirement accounts owned by the SSI beneficiary or applicant will count.

If you have too much money or other resources that put you over the resource limit for SSI, you can spend money/ resources down to below the resource limit and qualify for SSI. You could buy things you need for your personal use as long as whatever you buy does not make you go over another limit, or you can pay off debts. If you give away resources or sell them for a price below fair market value, you can be ineligible for SSI for up to 36 months.

If a child eligible for SSI lives with a parent (or parents) not eligible for SSI, a portion of the parent's income and resources may be used to figure the child's SSI cash aid. If a person eligible for SSI lives with a spouse not eligible for SSI, a portion of the spouse's income and resources may be used to figure the SSI cash aid. This is called deeming.

### What Do I Get?

#### 1. Maximum Aid

<table>
<thead>
<tr>
<th>Type of Person</th>
<th>Max. Benefit</th>
</tr>
</thead>
<tbody>
<tr>
<td>Single person 65 or older</td>
<td>$866</td>
</tr>
<tr>
<td>Disabled person 18 or over</td>
<td>$866</td>
</tr>
<tr>
<td>Single blind person any age</td>
<td>$921</td>
</tr>
<tr>
<td>Couple, both disabled or aged</td>
<td>$1,462</td>
</tr>
<tr>
<td>Couple, both blind</td>
<td>$1,609</td>
</tr>
<tr>
<td>Disabled person under 18</td>
<td>$773</td>
</tr>
<tr>
<td>One person living in a licensed Board &amp; Care facility($121 for that person's private use)</td>
<td>$1,122</td>
</tr>
</tbody>
</table>

Food: If you get SSI in California, you cannot get CalFresh/Food Stamps. However, if you live where meals cannot be prepared you can get an additional $90 to $100 per month (ask for the Restaurant Meals Allowance.)

Health Care: If you get SSI, you automatically qualify for Medi-Cal. You may also qualify for In-Home Supportive Services (See pg 53.)

Special Telephone Equipment: If your disability makes it difficult to use the phone you may qualify for special equipment to help. Call (800) 806-1191 (voice) or (800) 806-4474 (TTY line.)

Rent and Household Expenses: You can qualify for the maximum SSI grant even if you live with someone else or live in someone else's household as long as you pay for your own food and shelter costs. If you live in someone else's household and pay none or only part of your food and shelter costs, your SSI grant will be reduced by one third of the federal SSI benefit rate. Homeless people receive the same SSI cash aid as persons with homes, except that you can only get SSI 6 months out of 9 if you are living in a “public shelter.”

If you were getting some help in paying for your food and shelter when you applied for SSI but later begin paying your share for food and shelter, tell your social security worker so your benefits will increase to the maximum benefit.

If you are living with someone else, when you apply for SSI benefits, who is paying all or a part of the expenses for your food or shelter, tell your Social Security worker if you have an agreement to pay your share of the food and shelter expenses for each month you receive retroactive SSI payments for the months before you receive your first monthly SSI check. You need to have a signed written agreement that says you will pay your share of the food and shelter expenses for each month you receive back SSI payments. You can contact legal aid for help writing this agreement so your back SSI benefits are not reduced.If you have this written agreement any retroactive SSI benefits should not be reduced for the reason that you are living in the home of another and are not paying your share of the food and shelter expenses.

A single person can get a $1,133.00 (as of 2014) board & care rate called “Non-Medical Out of Home Care,” if you do not receive In Home Supportive Services, are not staying in your own home, and a relative who does not get SSI is providing you room, food, and personal care. The county must certify the private residence.

You may be able to get a $400 immediate payment from the Social Security office if either your SSI or your Social Security check is late and you need money right away. If you are denied immediate payment contact the office of your congress person and ask for a staff person who can help.

### How Do I Apply?

See page 26 Social Security Offices. Come in, or (800) 772-1213 to make an appointment. Even if the process from application to first check takes months, when you are approved the benefits will be paid beginning with the date you started the application. Do not accept a verbal denial. Insist on filing at least a partial application. If you do not have all the necessary information, you can give additional or corrected information later.

If you have difficulty with English or with hearing, the Social Security Office is required to provide you with an interpreter without cost. You may have help from a friend, family member or advocate at any appointment. If your condition makes getting to the office difficult, you may ask for a telephone interview or a home visit.

If you want to sign a form allowing someone else to serve as your representative, ask by phone for form SSA-1696 to be mailed to you. Parents or guardians can apply for a child under age 18 who is blind or who has a disability.

It’s helpful to have the following information with you when applying:

- Social Security card or record of number
- Birth certificate or other proof of age
- Information about the home of residence, such as mortgage or lease and landlord’s name
- Payroll slips, bank books, insurance policies, car registration, burial fund records and other information about income and resources
- Names, addresses and telephone numbers of doctors hospitals and clinics that have treated you (if applying for SSI because of disability or blindness)
- Proof of U.S. citizenship or eligible non-citizen status

You should apply even if you don’t have all the things listed. If you are applying for disability, you have to prove you are financially eligible for SSI after you have a favorable disability determination.

The Social Security Office is required to help you get needed documents and information.
If you are applying for Social Security or SSI Disability, your case will be sent to a state agency under contract with SSA to collect your medical records and decide whether you meet the medical requirements for disability benefits. In general, people who are blind or have very obvious disabilities which preclude them from working are approved more quickly than those who must have their disabilities more extensively verified. In limited circumstances you may qualify for presumptive disability and start to receive benefits even before the final disability determination is made.

**What Are My Rights?**

Current and past medical records need to be obtained in all cases where disability is an issue. In many cases, you will be given an appointment for a doctor chosen by the state to examine you. These consultative exams are brief and will generally not prove your disability. It is important that you get your medical records from existing and previous doctors which show that you are disabled. Do not rely on the state disability evaluation agency to get all your records. If the state disability evaluation unit decides that you are not disabled enough to get SSI, you can appeal.

Those who appeal a decision that they are “not disabled enough” by requesting a reconsideration and then a hearing before an administrative law judge often win and are able to receive benefits back to the date of application. (See page 66 Hearings and Complaints.)

You can apply for General Relief while you wait for SSI approval. If you ask, the county will help you get SSI while you are on General Relief. If you have worked in the last year and a half, you should apply for state disability benefits.

After receiving benefits if you get a notice that you have been overpaid, and you believe it is not your fault, insist on immediately submitting a “Request for Waiver of Overpayment.” If you do not believe you were overpaid, you should request a reconsideration.

If you believe the amount of your SSI check is incorrect or any notice that you get is wrong, insist on immediately submitting a “Request for Reconsideration” (See page 66 “Hearings & Complaints”).

Also, most Congressional district offices have case workers who deal with Social Security problems. Call your Congress person’s office and ask for help or make a complaint.

**Cash Assistance Program for Immigrants (CAPI)** is a cash benefit program for low-income people who are aged 65 and older, are blind, or who have a disability that meet the general eligibility requirements for SSI but are not eligible for SSI because of their immigration status. If you believe the amount of your SSI is wrong, insist on immediately submitting a “Request for Reconsideration.”

Capi benefit amounts are similar to SSI ($10 less for one person, $20 less for a couple). Like SSI, benefits are lower if you share housing or don’t pay your full share of the food and shelter expenses. If you are eligible for CAPI you will be eligible for Medi-Cal, and In Home Supportive Services (IHSS) and in most cases will be eligible for CalFresh/Food Stamps (see pg. 32) but you will have to apply for these benefits separately.

See pg. 65 "What If I Have a Sponsor" for important information about "deeming".

**1. How to Apply**

To apply for CAPI, go to the Wilshire Special DPSS Office or any office that handles GR (see page 70) or call (877) 481-1044 to file an application over the phone. You must apply for SSI as a requirement of CAPI eligibility. You will have to show proof that you have applied for SSI and your SSI application is on a pending status OR has been denied due to your immigration status. You may apply for SSI on your own or you can ask for help from the County worker.

Your benefits will begin the month after you apply for, or try to apply for CAPI. So you should apply to CAPI as soon as possible. Be sure to get a written receipt with a date showing that you applied or tried to apply for SSI. At the time you apply for CAPI, you will choose between two methods of receiving your monthly benefits, Electronic Benefit Transfer (EBT) or direct deposit.

**2. Be Careful: Brokers**

If you are applying for CAPI you do not need to pay anyone to help you fill out the application and turn it in to the county (these individuals are often called “brokers”). DPSS workers are required to help you fill out your application, and provide you with a county worker who speaks your language to help you fill out the papers. You can also get help from a non-profit community organization, which will not charge you to help you apply.

**Where to Apply for Social Security or SSI**

For SSI, Medicare and Social Security benefits, it is best to apply in person at one of the Social Security offices listed below (L.A. area). For appointments and information about Social Security, Medicare or SSI, call toll-free: (800) 772-1213, from 7 A.M. to 7 P.M. during the week. The TTY Number for hearing impaired is (800) 325-0778. When you call the 800 number you are talking to someone in a national call center, not someone in your local office.

- Alhambra, 900 S. Garfield, Ste. 102
- Boyle Heights, 215 N. Soto St.
- Burbank, 1420 W. Olive
- Chatsworth, 20439 Nordhoff St
- Compton, 171 E. Compton Blvd.
- Crenshaw, 3840 Crenshaw Blvd.
- El Monte, 9351 Flair Dr.
- Glendale, 225 W Broadway Ste. 600
- Glendora, 1165 E Route 66
- Hollywood, 1122 N Vine St.
- Huntington Park, 6303 Rugby Ave.
- Inglewood, 230 E. Spruce Ave.
- Lakewood, 4957 Paramount Blvd.
- Lancaster, 44451 N 20th St W
- Long Beach, 2005 Long Beach Blvd
- LA-Wilshire Center 4000 Wilshire Blvd
- Montebello, 2216 W. Beverly Blvd.
- Norwalk, 12440 E Imperial Hwy
- Panorama City 14500 Roscoe Blvd
- Pasadena, 104 N. Mentor
- Pomona, 960 W Mission Blvd
- San Fernando, 456 San Fernando Mission Blvd.
- Santa Clarita, 27200 Tourney Rd. Ste 320
- Torrance, 22600 Crenshaw Blvd.
- University Village, 1122 W Washington Blvd. Suite 201
- Watts, 12429 S Avalon Blvd
- West Covina, 501 S. Vincent Ave
- Westwood, 11500 W Olympic Blvd
- Whittier, 7200 Greenleaf Ave. Ste. 200
Veterans

Veterans and their family members may be eligible for income, health care, housing, and other services. Ask at the VA about programs for veterans and their families, like Education, Vocational Rehabilitation, Life Insurance, Burial Assistance, Survivors Benefits, and more.

Can Vets Get Cash Aid?

The Department of Veterans Affairs (VA) has two income benefits for veterans.

1. Service-Connected Compensation provides a monthly income to veterans with a physical or mental health condition that is related to their military service. The amount of Compensation depends on the severity of the medical condition, and ranges from $130 to $3,536 per month.

2. Non-Service-Connected Pension provides a monthly income to wartime veterans who are low-income and either 65 years or older or totally disabled. The amount of Pension is $1,038. Veterans with dependents can get more Compensation and Pension.

NOTE: If you served during wartime and are receiving less than $1,038 in Social Security or SSI benefits, you should apply for Non-Service-Connected Pension benefits.

Is There Health Care for Vets?

If you served in the military, you may qualify for VA health care benefits. Certain veterans receive prioritized health care from VA Medical Facilities and Vet Centers. Low-income veterans may receive free or low-cost VA health care.

Call (877) 222-8387 for information on a full range of medical benefits available to veterans, regardless of your income and even if the health problem is not related to military service.

Is There Housing for Vets?

Permanent Housing - The VA has limited HUD- VASH vouchers for homeless veterans. If you have a VASH voucher, you can move into permanent housing and the VA will pay a portion of your rent.

Rental Assistance – If you are facing eviction or are homeless and need helping moving into permanent housing, the Supportive Services for Veteran Families Program (SSVF) may help. SSVF provides financial assistance and supportive services to low-income veterans and their families. Call “211” for the SSVF nearest you.

Temporary Housing – There are many Grant Per Diem Programs (GPD) that offer free, temporary housing for veterans. Many programs have social and health services. Call “211” for the GPD Program nearest you.

More Information

For more information, visit or contact the VA Los Angeles Regional Office Intake Site at:

Federal Building,
11000 Wilshire Blvd., LA, CA 90024
Phone: 800-827-1000

Veteran Service Organizations:

Disabled American Veterans- Department of California
13733 E. Rosecreans Ave.
Santa Fe Springs, CA 90670
Phone: 562-404-1266

Jewish War Veterans
2615 S. Grand Ave., Rm. 100
LA, CA 90007
(888) 489-2778

General Relief

General Relief ("GR") is a Los Angeles County program that helps people who can’t get cash aid from any other welfare programs and have almost no money. GR is a very limited program with many rules. The Los Angeles County Department of Public Social Services ("DPSS") runs the GR program.

Can I Get GR Cash Aid?

1. Residence
   To get GR, you must live in L.A. County for at least 15 days and intend to remain here permanently.

2. If you are stranded
   If you are stranded here and want to go home, DPSS can help you. Someone must confirm that you live in the other county or state. DPSS will give you money to go home. You can also get housing and meal vouchers while you wait for transportation home. You can’t get this help more than once a year.

3. Cash and Resource Limits
   You cannot have more than $50 total in cash or in a bank account when you apply. You can own:
   • One car worth less than $4,500
   • Necessary household furnishings
   • House you live in if the market value is less than $34,000.

   If you live with your spouse, his or her income will be counted against you. A spouse's income is not counted if they are on SSI. If your spouse abuses you, DPSS may not have to count your spouse's income. If a worker tells you you must go to court to file for a divorce, call legal aid for help (see page 68.)
4. Time Limits

If you are able to work, DPSS will classify you as "employable." "Unemployable" people can only get GR for 9 months in any 12 month period.

If you cannot work due to health problems, DPSS will send you for a medical exam. The doctor decides if you are too ill or disabled to work. If so, DPSS will call you "unemployable." "Unemployable" people can get cash aid year round. You may have to go for medical exams more than once a year to stay "unemployable." DPSS can change you back to "employable" and the 9 month time limit on aid will apply to you.

What Do I Get in GR?

1. Basic Benefits
The maximum monthly cash aid is $221. In addition to the cash aid, you can get:
- Automatic enrollment in MediCal, a free health insurance program for low-income LA County residents.
- Free health care from any county hospital or clinic (800)-427-8700
- Bus tokens to all required appointments related to keeping benefits including medical appointments, vendor lodging and meal voucher locations (when the one-way distance is one mile or more or you are unable to walk a mile), and EDD offices
- A personal care kit (DPSS will deduct $5 from your GR benefit)
- Sanitary napkins
- Housing repairs if there is a lien on your house (Homeowner's Special Needs)
- Supplements for medically required diets
- A referral to a county-paid drug or alcohol recovery program
- You will also get CalFresh (food stamps)

2. Emergency Benefits
When you apply for GR, you may be eligible to receive the following emergency benefits:
- Emergency Housing - If you are homeless, tell the person who interviews you at the DPSS office. If you can get GR and are homeless, DPSS will give you hotel vouchers for up to two weeks. However, $4.53 per night will be taken out of your first GR check for the hotel vouchers. You can refuse to take a hotel voucher. If you take the vouchers but don't use them, DPSS will still take the money out. To stop that you must ask in writing to cancel the voucher. You can ask that DPSS change the location of your voucher. You can also call (800) 255-0905 to complain about the conditions at the voucher hotel.
- Emergency Food - You may be entitled to CalFresh (formerly known as Food Stamps) or food vouchers the day you apply (see page 32 CalFresh/Food Stamps). If you do not get CalFresh/Food Stamps, and no voucher restaurant is open or in your area, you should get cash ($2.17 per meal). Ask for as many meals (up to 3 a day) as you will need. Remember, any meal vouchers or cash issued to you will be deducted from your first GR cash aid check.
- Aid to Prevent Eviction - You can get cash aid to turn your utilities back on or to stop a shut-off. This money will be paid directly to the utility company. You need to show DPSS proof of the utility company that the cash aid will stop the shut-off.
- Aid for Utilities - You can get cash aid to get GR and are homeless, DPSS will give you hotel vouchers for up to two weeks. However, $4.53 per night will be taken out of your first GR check for the hotel vouchers. You can refuse to take a hotel voucher. If you take the vouchers but don't use them, DPSS will still take the money out. To stop that you must ask in writing to cancel

3. Earned Income Disregard
Any earnings in the 30 days before your application will reduce how much you can get in GR the first month. Once you are on GR cash aid, you can earn up to $200 a month with no cut in your cash aid. If you earn between $201 and $620, your cash aid will be cut. Once on GR, you can also save up to $1,500. Always report your earned income to your worker.

How Do I Apply?

1. Regular Application
Go to the closest DPSS (Department of Public Social Services) office that takes GR applications to apply (see page 70 for a list of Welfare Offices). Be prepared for a long day. Remember that you have the right to apply that day. Tell the worker that you need GR. You will have to fill out a “screening” sheet and an application. Bring with you identification papers like pay stubs, bank accounts, and car title that prove your income and resources.

Every GR applicant has a right to request “Expedited CalFresh/Food Stamps”. In general, expedited service is available to individuals who have less than $150/month in gross income and less than $100 in available resources. You can get your food stamps that same day or no later than three days.

You will be fingerprinted and photographed when you apply for GR. If your fingerprints match those of another welfare recipient in the state, you will be denied GR pending investigation. You can appeal this decision.

Your fingerprints cannot be shared with any other agency; but if a law-enforcement agency requests information about someone wanted on an arrest warrant, DPSS must give them their name, address, and physical description. Also, DPSS may inform law-enforcement officials of your presence in the DPSS office if you are a fleeing felon. If you are denied GR because you are a fleeing felon, contact legal services (see Good Advice p. 68) and the Public Defender’s Office: (213)974-2811.

If you don’t have ID when you apply, you may get GR for up to 60 days. You must get ID during that 60 days.

Make sure that you give your worker a reliable address for you. Your home address and mailing address do not have to be the same. If you are homeless, you can use the DPSS address to pick up your mail. If you use the DPSS address you must check for your mail at least once a week. Some community organizations and shelters provide free mail service. Having a good address is important so DPSS can get in touch with you and you can get Notices from them. Soon, you may also be able to have them send notices by text message.

You must be helped that same day if you are in the office before it closes. If you need help immediately, you should get it. If anyone does not let you apply or tells you to come back the next day, insist on speaking to a worker, and then a supervisor, and then the deputy director, if necessary.

The county has 30 calendar days to approve or deny your case and issue GR cash aid. Your cash aid will be given to you on an Electronic Benefits Transfer (“EBT”) card. When your EBT card is given to you, you will also select a personal identification number (“PIN”). Using your EBT card and your PIN, you can get your GR Cash Aid at any ATM. Your DPSS worker should provide you with a list of ATMs in the area. Be careful as some ATMs charge a fee. Grocery stores usually do not.
2. If You Think You Are Unable to Work

If you are disabled you may want to apply for SSI first. (see page 24 SSI). You may apply for GR while you wait on SSI. Ask for an SSI Advocate at the GR office. Most people who apply on their own get denied, so you want to ask the county to help you apply for SSI.

If you are disabled, tell the worker when you apply for GR. You will be given an appointment for an “employability screening”. Be sure to tell the medical provider everything about your disability. Bring any medications, prescriptions, or other proof about your disability. If the medical provider determines that you are not able to work due to a disability, you will be deemed “unemployable.” If the medical provider believes that you have a disability, but may be able to work with some accommodations, the medical provider may classify you as “unemployable with accommodations” or “employable with accommodations.” If you are determined “unemployable with accommodations,” you may volunteer to be in GROW, but are not required to do so. If you are deemed “employable with accommodations,” you will be required to participate in GROW as long as DPSS can provide the accommodations.

If the medical provider decides that you are able to work, you can appeal to the medical provider at the time of the screening that you disagree with your employability screening. You will then be considered “temporarily unemployable” for 15 days until you receive the results of your appeal.

Make sure you go to your employability screening because you may be denied GR if you don’t.

County or VA doctors can verify your disability. Ask the doctor to fill out an “ABP 1676P” form to verify the disability. A statement from a private doctor does not replace the employability screening.

3. If You Need Special Assistance

DPSS must help you apply if you need it. If you cannot read or write, they must help you with their forms. If you have a mental disability, they must refer you to a mental health worker for evaluation. The evaluation can establish you as a Needs Special Assistance (“NSA”) recipient. NSA recipients are approved for GR promptly. “NSA” participants are protected from some sanctions, work and other program requirements, and denials of aid.

If you request an evaluation by a mental health worker, but do not get one, you may demand that you be classified as “medically unemployable” for 30 days. You will be exempt from GROW and other requirements until you get a mental health evaluation.

NOTE: If you are designated NSA status and wish to volunteer without any penalties in the GROW Program contact your Eligibility Worker.

What Are The Requirements?

1. If You Are Able to Work

If you are employable, you will be required to:
   • Complete 6 job searches at application
   • Register with the Employment Development Department ("EDD")
   • Participate in the GROW program
   • Spend 20 hours per week in activities leading to a job

The County will send you a notice to come to a GROW Orientation or give you a notice at application. If you do not attend the GROW orientation, your application for GR will be denied. But, if you have “Good Cause” or a good reason for not attending the GROW Orientation, your application will not be denied and you will be scheduled for another date and time. Make sure to contact your GROW worker. GROW provides a range of services including job search activity, job-related training, counseling, and work experience.

In GROW, if needed, you may also get assistance with transportation, books, supplies, uniforms and tools related to your trade. GROW can also provide referrals to domestic violence, substance abuse, or mental health supportive services.

If you are 60 years old or older, you will not have to participate in GROW, and you will not have a time limit.

NOTE: If you are terminated from GR for not meeting GROW requirements, your CalFresh/Food Stamps benefits should still continue. There currently are no work requirements for the CalFresh/Food Stamps program in LA County. (See page 32 “CalFresh/Food Stamps.”)

2. If You Are “Unemployable”

If the medical provider says you are disabled, you are exempt from many GR requirements. You do not have to participate in GROW, complete job searches, or register with the EDD, and cannot be penalized for not working.

You will only be classified as “unemployable” for a certain amount of time. When your disability period expires, you will be sent a notice to comply with GROW requirements. If you still cannot work, call your worker right away and have them schedule an appointment for you with the medical provider.

NOTE: If you are Unemployable and wish to volunteer without any penalties in the GROW Program contact your Eligibility Worker.

3. Drug and Alcohol Program

When you apply for GR your DPSS worker will screen you for drug or alcohol dependency. If you tell your DPSS worker that you have a drug or alcohol problem, or if your worker believes you have such a problem, you must have a professional assessment from Department of Health Services.

If you are assessed to be chemically dependent you must enroll in a treatment program (Mandatory Substance Abuse Recovery Program) in order to receive GR. If all the programs are filled you can get GR while you wait to enter a program.

If you fail to comply with the Mandatory Substance Abuse Recovery Program requirements, your application will be denied. You are entitled to a “good cause evaluation” when you reapply and the penalty will be removed if you had “good cause” for missing the appointment.

If you are in the Mandatory Substance Abuse Recovery Program but is considered “employable” and in a residential treatment program, you are not required to register for work or complete a job search. However, you still have to meet GROW requirements and you can meet this by participating in substance abuse treatment 20 hours per week. You will still be subject to the 9 month time limit, unless you are judged “unable to work” for reasons other than substance abuse.
4. Quarterly Reports
You must fill out a QR-7 form every three months. This is Very, Very, Very IMPORTANT! On the QR-7, you will be asked to report your income, property and household members. You also must report any changes you expect in the next three months. Your QR cash aid for the next three months will be based on the information you list on your QR-7. If you do not report income on your QR-7, you will be charged an overpayment. You will have to pay GR. They will take all of your cash aid for the month or longer until the overpayment is repaid. If this happens, call legal services for help (see pg. 68).

If your other income gets really high (over what DPSS calls "income reporting threshold") you have to report it right away, even if your report is not due yet.

You will get a notice telling you when you have to submit your QR 7 report form. When you get the form in the mail, you must fill it out and return it to the DPSS office by the fifth day of your "submit" month. You should get your QR-7 on the first of your "submit" month. If you don't get it in the mail, you must go to the DPSS office to fill out the form.

Make sure to get a receipt showing the time and date you submitted the form. If your QR-7 gets lost, or you do not turn it in, your case will be terminated at the end of the "submit" month. You have until the 3rd Thursday of the following month to turn it in without getting a penalty.

If your report is not due yet.

3. Hearings
If your case is going to be terminated or your benefits are reduced, you have a right to a GR hearing. The county must mail you a "Notice of Action" nine days before a GR hearing. The date and time of the hearing will be listed on the notice. If you have "Good Cause," you have a good chance of winning the hearing. Your benefits cannot be cut off or reduced without a hearing unless you do not go to the hearing.

4. Penalties or "Sanctions"
If you do not go to your GR hearing, or you lose your GR hearing, your case will be terminated or your benefits will be reduced. If you receive a sanction and you have not been sanctioned in the past 365 days, you can re-apply at once. If this is the second sanction in a year, you can re-apply in 30 days. After the third penalty in a year, you have to wait 60 days to re-apply.

5. GR Time Limits
If your General Relief is stopped due to the 9 month time limits, you can continue to get CalFresh/Food Stamps and Medi-Cal. You can reapply for GR in three months. Your notice will tell you when you can reapply.

If you receive a sanction and you have not been sanctioned in the past 365 days, you can re-apply in 30 days. After the third penalty in a year, you have to wait 60 days to re-apply.

6. If You Begin to Get SSI
The county considers GR to be a "loan" for those applying for SSI. If you start getting SSI, the amount of GR cash aid you got will be taken out of your first SSI check. If you think GR made a mistake and took too much money out you can ask for a fair hearing (see Hearings and Complaints pg. 66).

Transportation

Can I Get Help with Bus Fare?

1. If You Are Disabled
All Los Angeles County transit operators, including MTA, DASH, Foothill, Antelope Valley, and all the city bus lines, honor a "disabled identification card".

Call (213) 680-0054. All applicants must pay a non-refundable $2 application fee and bring a current 1" by 11/4" full face photo (no hats, sunglasses or bandannas.)

General Relief

What Are My Rights?

1. Good Cause
Unless you have "Good Cause," you will be penalized for not participating in GROW, quitting a job, not accepting a job paying at least minimum wage ($8 an hour), not complying with substance abuse requirements, or getting fired for misconduct. "Good Cause" can be any illness, accident, difficulty understanding instructions, conflicting appointments, confusion, transportation problems, or any physical or mental disability, which affects your ability to work. "Good Cause" covers anything short of willfully not complying with program requirements. If you are not able to comply with the GR program requirement, and you have "Good Cause," you should contact your DPSS worker immediately and explain your situation.

2. "Extended Suspend"
If DPSS says you have not complied with your GR requirements your benefits will be stopped. If you comply with your GR requirements by the third Thursday of the following month, your benefits should be started again. The DPSS calls this "Extended Suspend." Make sure you show them proof that you have complied with the rules.

3. Hearings
If your case is going to be terminated or your benefits are reduced, you have a right to a GR hearing. The county must mail you a “Notice of Action” nine days before a hearing. The date and time of the hearing will be listed on the notice. If you have "Good Cause," you have a good chance of winning the hearing. Your benefits cannot be cut off or reduced without a hearing unless you do not go to the hearing.

4. Penalties or "Sanctions"
If you do not go to your GR hearing, or you lose your GR hearing, your case will be terminated or your benefits will be reduced. If you receive a sanction and you have not been sanctioned in the past 365 days, you can re-apply at once. If this is the second sanction in a year, you can re-apply in 30 days. After the third penalty in a year, you have to wait 60 days to re-apply.

5. GR Time Limits
If your General Relief is stopped due to the 9 month time limits, you can continue to get CalFresh/Food Stamps and Medi-Cal. You can reapply for GR in three months. Your notice will tell you when you can reapply.

If you receive a sanction and you have not been sanctioned in the past 365 days, you can re-apply in 30 days. After the third penalty in a year, you have to wait 60 days to re-apply.

6. If You Begin to Get SSI
The county considers GR to be a “loan” for those applying for SSI. If you start getting SSI, the amount of GR cash aid you got will be taken out of your first SSI check. If you think GR made a mistake and took too much money out you can ask for a fair hearing (see Hearings and Complaints pg. 66).

To qualify you must show any one of the following:
- Medicare ID card (NOT Medi-Cal)
- California DMV disabled or disabled veteran placard certificate with a current “valid through” date
- Proof of receiving either SSI or SSDI from Social Security Administration
- A certification on school letterhead signed by a Special Education teacher that the applicant is a Special Education student in any LA County school
- Part III of the application form, which is a one-page certification signed by a health care professional.

2. CityRide and paratransit
For seniors 65+ or disabled, CityRide provides a book of coupons worth $72, every three months. The cost is $15 ($6 if you are receiving Medi-Cal or SSI). The script can be used to buy bus pass, taxi rides, or to partly pay for dial-a-ride service for medical appointments.

Los Angeles CityRide: (213) 808-RIDE (323) or (818) or (310) 808-7433
ACCESS (800) 827-0829 Shared ride service offering disabled persons curb-to-curb rides within 3/4 mile of most LA County bus or rail routes, using buses, mini-vans and taxis. Fares are distance-based and range from $1.80 to $2.70 for each one-way trip. Call to apply.
Dial-a-Ride (800) 439-0439 Shared rides for seniors 60+ and disabled in certain parts of the county. Costs vary but as low as 25 or 50 cents in some areas. Call to apply.

Charter Bus Program Assists seniors, youth, and disabled groups in the City of Los Angeles with free or subsidized charter bus services to attend educational, recreational, or cultural events in the region. To apply visit: http://www.lacitycb.com

3. Rider Relief Program

You can save up to $10 on your transit pass if your income qualifies you for Metro’s Rider Relief Program (RRTP). Rider Relief coupon booklets include six months of coupons.

The following transit agencies accept Rider Relief coupons: Antelope Valley Transit Agency, Big Blue Bus, Culver City Bus Lines, Torrance Transit, LADOT, Santa Clarita Transit, Foothill Transit, Long Beach Transit, Montebello Bus Lines, and Norwalk Transit.

Adult riders, Senior/Disabled/Medicare, K-12 grade students and full time College/Vocational students are eligible if their incomes are at or below:

<table>
<thead>
<tr>
<th># in household</th>
<th>Annual Income</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>$28,550</td>
</tr>
<tr>
<td>2</td>
<td>$32,600</td>
</tr>
<tr>
<td>3</td>
<td>$36,700</td>
</tr>
<tr>
<td>4</td>
<td>$40,750</td>
</tr>
<tr>
<td>5</td>
<td>$44,050</td>
</tr>
<tr>
<td>6</td>
<td>$47,300</td>
</tr>
</tbody>
</table>

Children over 5 years old whose parents qualify are automatically also eligible to receive Rider Relief coupons.

Residents of cities/county areas and students of schools that already offer transit subsidies will not be eligible to receive Rider Relief coupons. Please check with your City, County or school to see if they offer any discounts.

You must have a reduced rate TAP card to be able to use a senior, student or college coupon. Rider Relief coupons for seniors and students provide savings varying from $6 to $10 on top of those reduced rates.

Receive coupons by contacting the Rider Relief partner organization serving your area.

If you live in: Long Beach, Gateway Cities, or San Gabriel Valley, contact:

Human Services Association
Rider Relief Transportation Program
562.806.0250
rrtp-info@hsala.org

If you live anywhere else, contact:

FAME Assistance Corporation
323.730.7715
rrtpinfo@famecorporations.org

4. Other Transportation Help

1. Low Cost Car Insurance

Low income drivers in Los Angeles County can purchase special auto insurance for $347 a year. Call (800) 622-0954 to find the agent nearest you from the California Automobile Assigned Risk Plan (CAARP). You must verify your income with tax returns and also show a valid driver’s license, current vehicle registration, and proof of ownership of vehicle.

To be eligible

• you must live in LA County
• you must be at least 19 years old and have been driving for at least 3 years without losing your license
• the car insured must be worth less than $20,000; and your household must have a yearly income below:

<table>
<thead>
<tr>
<th># in household</th>
<th>Annual Income</th>
</tr>
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<tbody>
<tr>
<td>1</td>
<td>$27,925</td>
</tr>
<tr>
<td>2</td>
<td>$33,725</td>
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<tr>
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<td>7</td>
<td>$87,325</td>
</tr>
<tr>
<td>8</td>
<td>$97,225</td>
</tr>
</tbody>
</table>

Also, in the last 3 years you cannot have:

• Been responsible for an accident involving bodily injury or death
• Had more than one property damage accident in which you were at fault
• More than one point for a moving violation
• You also cannot be a college student claimed as a dependent on someone else’s taxes

2. Help With Smog Check

The State’s Consumer Assistance Program (CAP) provides financial assistance for low income consumers whose vehicles don’t pass smog check. If you qualify they can help pay for repairs that will allow your car to pass. You must pay a copayment. The program is limited to available funds. Don’t do any repairs until you are notified that you’ve been approved.

For information and to apply call
Dept. of Consumer Affairs (800) 952-5210
Or visit: www.bar.ca.gov
CalFresh (also known as Food Stamps or SNAP), is a government program that gives you benefits so that you and your family will not go hungry. You get an Electronic Benefit Transfer (EBT) card (with a Golden State Advantage logo) that you can use at supermarkets, farmers markets, and small stores.

Many people who qualify for CalFresh/Food Stamps don’t think they qualify or do not know how to apply. If you or someone in your home needs food, you should apply; everyone deserves to have enough to eat.

To get CalFresh/Food Stamps, you must be a U.S. citizen or a legal immigrant non-citizen (see page 62 Guide for Non-Citizens). You must also meet income requirements. You don’t have to have a home or a place to cook to get CalFresh/Food Stamps.

People receiving SSI do not qualify for CalFresh. There are restrictions also for students and people on strike from their jobs. Beginning April 2015, persons with past drug felonies may qualify if they are complying with parole and probation. (Some may qualify already: call Hunger Action LA (213) 388-8228.)

Persons getting CalWORKs or GR usually also get CalFresh. Persons leaving CalWORKs may get "Transitional CalFresh." Foster youth exiting foster care in California can continue getting CalFresh up to age 21 automatically (after that they can qualify using the regular rules.)

How Do I Get CalFresh?

There are different ways to apply.
- Call 1-(866) 613-3777 to have an application mailed to you
- You can also apply online by going to www.dpssbenefits.lacounty.gov
- In person (see map on pg. 71 for the nearest county office)
- Or apply at many other Community and Faith-Based organizations, health clinics, WIC centers, and food pantries approved by the county. Contact one of the Family Source Centers (pg. 3) to get referred to the nearest location.

You can complete the entire CalFresh application process without going into a DPSS district office, but if you go into a DPSS district office to apply, you have two options: emergency and non-emergency.

1. Emergency CalFresh/Food Stamps

You may be eligible to get CalFresh/Food Stamps the same day or at least within 3 days if one of the following applies:
- You are homeless;
- Your gross income is less than $150 per month and the money you have on hand or in the bank is less than $100;
- You are a poor migrant or seasonal farm worker;
- Your combined monthly gross income and available resources are less than your monthly rent, mortgage, and utilities.

To apply for emergency CalFresh/Food Stamps, you only need to sign and date the application and statement of facts. The worker will ask for your proof of identity, residence, income, and resources, but you cannot be denied for not having these documents with you. Although your cash on hand and other liquid resources do not count for general CalFresh/Food Stamps eligibility, they do count if you are asking DPSS to give you emergency or same-day CalFresh/Food Stamps.

These are acceptable forms of proof of identity:
- driver’s license
- work or school identification card
- an identification card for health benefits or another assistance program
- voter registration card,
- wage stub
- birth certificate
- sworn statement
- or a letter addressed to you

2. Non Emergency

You have the right to apply in your own language and to turn in a written application on the day you go in. DPSS must approve or deny your application within thirty days after the date you turn in the application. If someone tells you to come back without submitting the application, you may insist on filing an application.

1. Mail: To have an application mailed to you, call (866) 613-3777. Complete it out and return it by mail, or have someone else turn it in for you. Make copies of the application and documents you are mailing in case the application gets lost or it’s not received.

2. Online: You can apply online by visiting: www.dpssbenefits.lacounty.gov Make sure to fill out your personal information (name, address, phone number) so the eligibility worker can contact you for any questions. You will be given a confirmation number at the end of the application. Note down this number because you will need it to follow up on your application.

3. In person: If you apply at the DPSS office in person, fill out the application form as completely as you can, circling the numbers of the lines where you cannot answer or need help. Turn the application in and wait to be seen or make an appointment to see an eligibility worker. If you are not seen in a half-hour, go to the reception desk and ask for the Customer Service Representative Desk.

Interview: CalFresh applicants can complete the required interview by phone. There are a few exceptions, such as if you apply for CalFresh benefits and also apply for cash aid, such as CalWORKs, General Relief, CAPI, or if you requested Expedited Services. If so, you will still be required to complete a face-to-face interview in the District Office. At the interview - in person or over the phone - you will go over the application you filled out and will be asked for additional information. You may bring someone along to help you. You may be asked to sign a form making them your “authorized representative”.

Documents: You will be given a list of documents that you will need to complete the application process. You may be given a “return appointment” to turn in the documents. If you do not have
one of the necessary documents, you or someone you know may sign a statement explaining why not.

You may be able to receive benefits while you continue to gather the required information. The eligibility worker should help you understand what documents are required and what you can bring instead, if you don’t have it or can’t find it.

If everyone in your household is disabled or 65 years of age or over, you may request either that an eligibility worker be sent to your home at a time you agree to or that you be interviewed by phone. A worker may also visit or phone you if no adult in your household can go to the office for good reasons such as illness or disability.

Fingerprints: Fingerprints are no longer required for applicants for CalFresh/Food Stamps benefits only, but you still need to be fingerprinted if you are also applying for cash aid such as General Relief or CalWORKs.

Next steps: Write down your worker’s name, and your case number. If you are asked to mail additional papers to the DPSS office, ask the worker for a stamped envelope addressed to him or her. If you take in any documents, make sure to get a receipt to prove that you dropped off the documents requested.

Keep your own copy of all the paperwork you submitted. If you need help and your worker is not available, a supervisor must help you.

Within 30 days of your applying, the DPSS office will send you a notice of action explaining if your case was approved or denied with a reason for denial. If your case is approved, you will receive your EBT card and PIN number by mail. Each item is sent separately. Contact your county office if you do not receive any of these items. The notice of approval will tell you how long you get help to buy nutritious food. The highest (maximum) amount your household can get is listed on the chart in the next column. The amount you get depends on your income and expenses. You may qualify to receive up to the following amount of CalFresh/Food Stamps benefits:

### # in Household | Maximum Amount
--- | ---
1 | $194
2 | $357
3 | $511
4 | $649
5 | $771
6 | $925
7 | $1022
8 | $1169

For each additional person, add $146 (Accurate until Sept. 30, 2015)

Any time your income, expenses, or other circumstances change, report this on the form called “SAR 7.” (see pg. 34, “What Are the Requirements?”)

### Nutrition Education: The University of California Cooperative Extension has a free program to help CalFresh/Food Stamp participants purchase foods for a better diet through nutrition education. Visit www.fsnep.ucdavis.edu.

### Where Can I Use CalFresh?
- Almost every food store
- Many certified Farmer’s Markets. See Farmers Markets section on page 36 for more information
- Some Meals-on-Wheels programs
- Certain restaurants can accept CalFresh/food stamps from homeless, disabled or elderly participants
- Some shelters are authorized to take CalFresh/Food Stamps as payment from clients

### What Can I Buy With My Benefits?
- Any food item except hot foods that are meant to be eaten immediately (except at certain restaurants for the homeless, disabled or elderly)
- Non-alcoholic beverages
- Seeds to grow your own food.
- CalFresh/Food Stamps cannot be used for non-food products such as soap, tobacco, or diapers.

### How Much Do I Get?

Each month you get help to buy nutritious food. The highest (maximum) amount your household can get is listed on the chart in the next column. The amount you get depends on your income and expenses. You may qualify to receive up to the following amount of CalFresh/Food Stamps benefits:

### 1. Who Cannot Get CalFresh?
People getting even $1 of SSI cannot get CalFresh. SSI recipients in California who are placed on “pending status” by SSI may be eligible to receive CalFresh/ Food Stamps. Persons getting “regular” Social Security or Social Security Disability Insurance may qualify depending on their income and expenses.

You can be permanently disqualified from the program if you are caught selling CalFresh/Food Stamps worth over $500.

Strikers and their families are usually kept out of the program, unless they meet the income limits one day before the strike. Employees who honor a picket line of another union, who are laid off as a result of the strike, or who are locked out, are not considered strikers and may be more likely to qualify.

See page 63 for restrictions applying to immigrants.

### Can I Get CalFresh?

#### 2. Special Rules for Students
Most students can’t get CalFresh/Food Stamps. But students between the ages of 18 and 49 who are enrolled at least half-time in a program of higher education can get CalFresh/Food Stamps if they are doing any one of the following:

- Enrolled in CalWORKs
- Working and getting paid at least 80 hours per month
- Receiving a work-study grant
- Responsible for the care of a dependent child under age 12 if a full-time student
- Responsible for the care of a dependent child age 6 to 11 where no adequate child care is available
- Going to school through the Job Training Participation Act (JTPA)
- By October 2015, the State of California will have a system to identify more programs for college students that will qualify as employment training, and allow the student to receive CalFresh (see AB 1930.)

If the student doesn’t meet any one of these requirements, the other people in the home may still receive CalFresh even though the student can’t.
3. If You Get Free Meals
If you do not pay for any of your meals, you may not be able to get CalFresh/Food Stamps. Even if you don’t prepare your own meals you may be able to get CalFresh/Food Stamps if you live in:
• a non-profit shelter for domestic violence or homeless people
• a drug or alcohol treatment facility
• federally-funded housing for the elderly
• or a group home for the disabled or blind
Some facilities can collect your CalFresh/Food Stamps from you if they use them to feed you.

4. “Households”
The term “household” has special definition in this program: it means that you purchase and prepare food together. It does not mean you have a house. A household can be one person who lives alone, or it can be a group of persons, related or unrelated, who live in the same place. There is no limit to the number of “households” that can be in the same home. If each “household” buys and prepares their own food separately from the other households, they are a “separate household.”

Some relatives who live together must be included in the same household, even if they do prepare their meals separately. These are:
• Your immediate family—you, your spouse, your children age 21 and under
• Your parents and you (unless you are over 21)
• Those who are acting as parents for a child under 18, unless the child is in foster care
• An individual living with the household who is a spouse of a household member.
Some relatives can be considered separate households, even if they live in the same place, including:
• Parents living with their adult children (over 21)
• Adult brothers and sisters.

Teen parents who reach the age of 19 and are taken out of their own parents’ CalWORKs case are still eligible for CalFresh. The parents’ income must be counted, but the CalFresh/Food Stamps should not just be cut automatically—call Legal Aid if this happens.

5. Income Limits
Income test one: You can have income from a full- or part-time job, unemployment, General Relief, or CalWORKs and also get CalFresh/Food Stamps if the household’s “gross” or “total” monthly income is below the following limits.
If you are disabled or over the age of 60, this limit does not apply to you. Medi-Cal recipients may be eligible for CalFresh/Food Stamps even if they are over this income limit.
There is also a second “net income” test, but some of your income may not count for the second test. If you apply for CalFresh/Food Stamps and are denied based on income tests, contact a legal aid agency for assistance. (Good Advice Pg.68)

<table>
<thead>
<tr>
<th># in Household</th>
<th>GROSS Income</th>
<th>NET Limit</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
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</tr>
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<td>$1988</td>
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<td>$6006</td>
<td>$3033</td>
</tr>
<tr>
<td>8</td>
<td>$6682</td>
<td>$3341</td>
</tr>
</tbody>
</table>

For each additional person, add $ 678 to GROSS Income or add $339 to NET Income
(Accurate until Sept. 30, 2015)

6. Resource and Property Limits
You may qualify for CalFresh/Food Stamps even if you have cash on hand, money in the bank, own a car, home, or have other assets. If you apply for cash benefits (CAPI, GR, CalWORKs), your assets must be under certain limits, including cars.

1. Semi-Annual Reports
You must fill out and return a form called SAR-7 every six months. THIS IS EXTREMELY IMPORTANT! On the SAR-7, you will be asked to report your income, property and household information. You will also be required to report any changes in your income, property or household that you anticipate in the next six months. Your eligibility and benefits for the next three months will be based on the information you provide on your SAR-7. Under certain circumstances, you must report changes before your required reporting month.

You will be assigned to a Semi-Annual Reporting cycle based on the last digit of your case number. Your eligibility worker should let you know the months you are required to submit a SAR-7.

If you get the form in the mail, you must fill it out and return it to the DPSS office by the fifth day of your reporting month. You should receive your SAR-7 about one month before it is due. If you don’t get it in the mail, you must go to the DPSS office to complete the form. Make sure to get a receipt showing the time and date you submitted the form. If your SAR-7 gets lost, or you do not turn it in, your case will be suspended at the end of that month.

Contact your worker or a community agency if you need assistance with filling out the report.

2. Recertification
Your case must be reviewed for benefits each year before the end of your certification period or your CalFresh/Food Stamps will be terminated. You will receive a packet and a letter saying that you need to renew your case if you want to continue receiving benefits, along with a date by when you need to return it. You will need to send it back with copies of income, housing, and utility bills if you are paying for living expenses. Also include other receipts of services you are paying for such as child care. Be sure to complete this on time so you can continue to receive CalFresh/Food Stamps without a break. The recertification interviews are usually done over the phone.
3. CalFresh/Food Stamp Work Registration

NOTE: Workfare is suspended in Los Angeles County at least through Sept. 30, 2015.

Here are the usual rules:
All CalFresh/Food Stamp household members age 16 through age 59 are required to be registered for work (exceptions described below). That means you must agree to:
- Respond to a request of additional information regarding employment status or availability for employment
- Report to a suitable employer, if referred
- Accept an offer of suitable employment
- If working more than 30 hours per week, not voluntarily reduce work hours to less than 30 hours per week, without good cause
- Cooperate with the requirements of any welfare-to-work program you are assigned to.

You will be exempt from work registration if you are earning at least 30 hours times the federal minimum wage, or working at least 30 hours per week, or any one of the following:
- Under age 16 or age 60 or over
- A student in school or training program at least half time.
- Caring for a disabled person or child under age 6
- Receiving or applied for unemployment benefits
- Participating in a drug or alcohol treatment and rehabilitation program
- Determined by DPSS to be unemployable, due to a physical and/or mental disability
- Participating in GAIN or a CalWORKs program.

Under CalFresh/Food Stamp law, certain kinds of employment are considered “unsuitable,” so you do not have to accept these jobs to qualify or remain eligible for CalFresh/Food Stamps. A job is unsuitable if one of the following applies:
- It does not pay the federal or state minimum wage
- It is harmful to your health or unsafe
- It is beyond your mental or physical capacity, as documented by medical evidence or information from other sources
- The daily commute is over 2 hours
- It forces you to resign from a union or prohibits you from joining a union
- It forces you to break a strike or lockout
- Adequate transportation is unavailable
- If within the first 30 days of registration, the job offer is not within the member’s major field of experience
- The working hours or nature of the employment interferes with the member’s religious observances or beliefs, for example, working on a religious holiday.

What Are The Penalties?
If you quit a job without good cause, you can be cut off from CalFresh/Food Stamps until you correct the problem. The penalties get worse each time:
1. The first time DPSS says you have not complied, you can be denied CalFresh/Food Stamps for at least one month.
2. The second time, you can be denied CalFresh/Food Stamps for at least three months.
3. The third time and after, you can be denied CalFresh/Food Stamps for at least six months.

Only the person breaking the rules will be denied, not the whole household. If you are penalized for any reason, you can get back on the program if you become exempt from having to comply with the requirement for any of the reasons listed above.

“Good Cause”
“Good cause” for quitting a job or not doing a work project includes events beyond your control, such as:
- Illness of yourself or a household member who needs your care
- Injury
- Transportation problems
- Inability to speak or write English
- A household emergency
- Lack of adequate childcare for a child age 6 to 11.

1. Fair Hearing
You have a right to a “fair hearing” if you feel you were unfairly denied benefits or to correct any mistakes with your benefits (see pg 66). If you appeal within 10 days or before the action takes effect (whichever period of time is longer), in most cases your benefits will continue until the matter is resolved. You have a right to look at your own case file and read a copy of the CalFresh/Food Stamp program rules if you have a dispute with the county. If you have are in need of legal assistance, contact the Legal Aid Foundation of Los Angeles at (800) 399-4529, Neighborhood Legal Services at (800) 433-6251, or Public Counsel at (213) 385-2977.

2. Lost or Stolen Card
You must report a lost, stolen or demagnetized card immediately to the EBT 24 hour Customer Service Center (877)328-9677.) Once reported, the card will be deactivated so that the benefits cannot be used by anyone else using your card. A new card should be issued right away and may receive it by mail within three business days. You can also visit any DPSS district office to request a replacement card. Ask to speak to a supervisor if the DPSS district office denies you a replacement card.
Food Pantries and Free Meal Programs

Food pantries are places that give food to people in need. Most food pantries are volunteer private organizations that can make their own rules about who can be served. Most of them are limited to serving people in certain areas and for one to four times a month. They may require some kind of identification and proof that you are low income. Generally, food pantries never have as much as is needed. Foods distributed most often include canned foods, rice, beans, bread, cereal, and occasionally produce items.

Free hot meals are offered at many private volunteer agencies and churches. The frequency of the meals varies from daily in some places to once a month.

There are over 500 places in LA County that distribute food bags or hot meals for free so we cannot list them all. Here are some food or referral agencies. Bring someone with you that can help you carry boxes or bags of food and produce since sometimes they are very heavy.

- 211 (County phone referral line)
- Internet: www.healthycity.org
- Catholic Charities (213) 251-3400
- Christian Food Center (213) 741-0213
- Downtown Svc. Center (213) 749-0212
- East LA Svc. Center (323) 260-2801
- Eastmont Center (323) 726-7998
- The Hope of the Valley Rescue Mission 818-392-0020
- MEND - Meet Each Need with Dignity (818) 897-2443
- Pomona: Beta Center(909) 622-3806
- SOVA (818) 988-7682
- Union Rescue Mission (213) 347-6300
- Westside (310) 314-0071
Community Gardens
You can save money and have nutritious food by growing some of your own vegetables. You can garden in your yard, in containers, in school–yard projects, and in community gardens.

There are over 85 community gardens in Los Angeles County. To find out where community garden space is available, or to get materials, seeds, and advice on gardening, call

LACC Green Bank
(213) 362-9000 x 201.

Common Ground
(626) 586-1981

Fresh Fruits and Vegetables at Low Cost

The Market Match Program (operated in LA County by Hunger Action LA and SEE-LA) offers people who receive CalFresh/Food Stamps, WIC, Social Security, or SSI up to $10 in bonus money weekly when they spend $5 to $10 of their own money or benefits at the participating market. The program will continue as long as funding lasts. Markets offering the program are indicated in the chart on the previous page. Please call for more info: (213) 388-8228.

The Senior Farmers’ Market Nutrition Program provides low-income seniors with vouchers that can be used to purchase fresh fruits, vegetables, honey and herbs at Certified Farmers’ Markets (CFM). Some Senior Centers sites offer and distribute these vouchers, usually beginning in May or June. Call (213) 738-4004 for a list of locations. WIC offers similar vouchers to families with children age 5 and under once per year.

Community Services Unlimited (CSU) Farm Fresh Produce Bag Subscription Program
Each week subscribers to the Farm Fresh Produce Bag program receive a bag filled with seasonal fruits, vegetables & herbs sourced from CSU’s urban mini-farms and local farmers. Bags are picked up weekly at the Thursday Farm Stand at EXPO.
For more information call 213.746.1216 or visit: www.csuincc.org

Revolutionary Autonomous Communities (RAC) distribute fruits and vegetables free at MacArthur Park on Sundays from 10 am to 5 pm, SW corner of Wilshire Blvd and Park View Ave.

Senior Group Meals
Anyone age 60 and over can participate in congregate meal programs, regardless of income. Spouses of participants can also get meals, no matter what their age.

There are about 200 sites for congregate meals throughout L.A. County. Some programs are able to provide transportation to the meal site or can send meals home for people who are temporarily ill or homebound.

You can get help to locate a program by calling (213) 738-4004 if you live anywhere in the City or County of Los Angeles. Participants cannot be required to pay for meals. However, a contribution to help support the program is often suggested. Some group meal programs are authorized to accept food stamps.

Meals for Homebound Persons
Meals on Wheels groups deliver meals regularly to those who are homebound. Each group sets its own rules about how many meals will be served and about the days and times that meals are available. Most programs require some evidence that participants are unable to cook or shop due to illness, frailty, or disability. Some programs can provide for special diets. You cannot be required to pay for meals if the program is federally funded, but sponsoring groups will ask for a small contribution. Some meals-on-wheels programs are authorized to accept food stamps. To find out about meals-on-wheels anywhere in Los Angeles County, call (213) 738-4004.

Project Angel Food is a private agency that delivers free hot meals to homebound people with AIDS and other illnesses. They have same day service in Venice, East Los Angeles, Pasadena, North Hollywood, Silver Lake, and South Central. Call (323) 845-1800 for meals.

Project Chicken Soup (PCS) prepares and delivers free, nutritious, kosher meals to people in the greater Los Angeles area living with HIV/AIDS, cancer and other serious illnesses, and who are unable to prepare or access their own meals due to their health status. Anyone living outside the service delivery area may come to the kitchen to pick up meals.

To apply visit: www.projectchickensoup.org or call: 310-836-5402.
WIC

Who Can Get WIC?

• Women who are pregnant, breastfeeding or just had a baby
• Women who have lost a pregnancy, or suffered the loss of a newborn, or stillbirth
• Children under 5 years old (including foster children and children raised by others)
• Low to moderate income – meaning that your “gross income” (your income before taxes and deductions) is below the following:

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<thead>
<tr>
<th>Household Size</th>
<th>Annually</th>
<th>Monthly</th>
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<td>21,590</td>
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<td>66,656</td>
<td>5,555</td>
</tr>
<tr>
<td>8</td>
<td>74,167</td>
<td>6,181</td>
</tr>
</tbody>
</table>

For each additional household member, add:

+7,511 +626

This chart is accurate until June 30, 2015.

If you are pregnant, add 1 to the number of people in your household.

You also qualify for WIC if your household receives CalFresh, CalWORKs or full Medi-Cal.

What Are The Benefits?

• Special checks to buy healthy foods such as low-fat milk, fruits and vegetables, whole grain foods, juice, eggs, cheese, cereal, dry beans and peanut butter.
• Information about nutrition and health to help you and your family eat well and stay healthy. WIC participants are regularly scheduled to attend meetings and talk with WIC counselors about healthy weight, good snacks, smart food shopping, physical activity and how to feed their families.
• Support and information about breastfeeding. You can share your concerns with WIC counselors and other mothers. In some WIC programs, breastfeeding women can visit WIC any time they have a question, a problem or need support. Some WIC sites also have Breastfeeding Peer Counselors and Breastfeeding programs that can help mothers with extra breastfeeding support.
• Extra food for women who fully breastfeed their babies for a whole year.
• Help in finding health care and other community services.
• Checks for iron-fortified infant formula and cereals for babies.
• Vouchers to buy fruits and vegetables at farm markets. Coupons are limited. Ask about the Farmers’ Market Nutrition Program (FMNP) vouchers.

Where Can I Find WIC?

WIC has over 100 local offices in Los Angeles County located in neighborhood shopping areas, health clinics, hospitals and community centers. Some doctors or clinics may refer you to WIC but even if they do not, you should call WIC. WIC staff will work with you to see if you are eligible to be on WIC.

Call the toll-free number below for more information and to find the WIC office closest to your home.

(888) WIC-WORKS
(888) 942-9675

Or visit: www.cdph.ca.gov/programs/wicworks

WIC (officially called the Special Supplemental Nutrition Program for Women, Infants and Children) is a nutrition program that helps pregnant women, new mothers, infants and young children under 5 years of age to eat well and stay healthy. WIC IS FREE - you will never have to pay for any WIC services.
Can My Child Get Free or Low Cost School Meals?

All low-income students are eligible for free or very low-cost school meals, regardless of immigration status. Children who eat breakfast and lunch at school learn better and are usually sick less than other children. All public schools and some private and parochial schools offer subsidized breakfast and lunch programs.

Some schools offer free meals to all students, regardless of family income.

Many schools offer breakfasts in the classroom, at recess, or on the bus.

Your child qualifies for free or reduced-price meals if your gross family income per month (income before taxes or deductions) is below these levels:

<table>
<thead>
<tr>
<th>Family Size</th>
<th>Free Meals</th>
<th>Reduced Price Meals</th>
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<tr>
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<td>$1,265</td>
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<td>8</td>
<td>$4,344</td>
<td>$6,181</td>
</tr>
</tbody>
</table>

(Accurate until June 30, 2015)

1. How Do I Apply?

If you receive CalWORKs, CalFresh/food stamps, or the Food Distribution Program on Indian Reservations, the only information you need is your County case number, and all children in your household automatically qualify for free meals. Additionally, all children certified as homeless or in foster care qualify for free meals.

You should receive an application for the meal program in your own language at the beginning of the school year or whenever your child transfers. You can also ask for one at any time from the school office, because if your income goes down during the year, your child may become eligible. You will have to list the total income of your household, the names of household members, and the Social Security number of the adult signing the application. If you do not have a Social Security Number, just write “none”. You are not required to have a Social Security Number or apply for a number or give a reason for not having one.

Sometimes the school asks for proof of your income. All information gathered is confidential and cannot be shared with other government agencies.

If the information you give on the application shows that you qualify, your child can begin receiving free or reduced-price meals immediately.

Reduced-prices are set by the school district, but the law states that breakfast cannot cost more than 30 cents and lunch not more than 40 cents for reduced price meals. The district can charge whatever it wants for full price meals.

Recent changes in the law require schools to offer free drinking water, to increase the amount of vegetables and fruits available and to involve students and parents in planning the menus.

Parents can improve the cafeteria programs in many ways. Eat at school with your child, encourage your child to eat breakfast and lunch at school, talk with your school’s principal about moving breakfast in the classroom, and ask the food services administrators to participate in developing the menus.

2. Extra Food for Pregnant Students

At many schools, pregnant and breastfeeding students can get extra food at breakfast or lunch, or an extra snack. To be eligible, the student must provide some written verification that she is pregnant or breastfeeding from a doctor, nurse, midwife, clinic, WIC or Cal-Learn program.

Free Summer Lunch for Kids

All children and teens ages 18 and under can eat free, nutritious meals during the summer or any time when school is out through the Summer Lunch Program. No application or other kind of paperwork is required. Meals and snacks are served at schools, parks, and recreation centers. Some parks operate year-round and can feed your children when they are “off-track” from year-round schools.

The Summer Lunch Program is located in areas where at least half the children qualify for free- or reduced-price-meals in school. However, any child under 19 can eat there free regardless of where they live or their family’s income. If the child is physically handicapped, the age limit is 21.

Some residential or day camps and homeless shelters offer the program, but you may have to fill out an application.

To find out where your children can eat free when they are not in school: call 211, Los Angeles County Infoline.

If you want to learn to start a free site in your area, call the California Food Policy Advocates at (213) 482-8200.

2. Extra Food for Pregnant Students

The law says that children who get free or reduced-price meals cannot be treated differently than those who get full-price meals. No separate lines, different meals or meal tickets, required work, or other types of discrimination are allowed.

Ask the school, child-care sponsor, or summer recreation program sponsor for a “fair hearing” if you apply and are unfairly denied. Also request the hearing if you receive notice that your benefits will be cut. By doing so within 10 days, your child’s benefits will continue until the hearing takes place.

Child Care And After School Programs

Family day care homes, homeless shelters, after-school programs and child care centers should receive USDA funds to help pay for meals and snacks for infants, toddlers, children and teens. Call (800) 952-5609 to learn about starting a program or ask your child care provider.

What Are My Rights?

The law says that children who get free or reduced-price meals cannot be treated differently than those who get full-price meals. No separate lines, different meals or meal tickets, required work, or other types of discrimination are allowed.

Ask the school, child-care sponsor, or summer recreation program sponsor for a “fair hearing” if you apply and are unfairly denied. Also request the hearing if you receive notice that your benefits will be cut. By doing so within 10 days, your child’s benefits will continue until the hearing takes place.
The Affordable Health Care Act (also called Obamacare) is a law that allows many more people to get health insurance that they can afford. Some of the features of that law that can help you and your family are already in place. The Affordable Health Care Act:

- Prohibits insurers from denying insurance to anyone with serious illnesses, including pre-existing conditions such as asthma and diabetes.
- Provides free preventative services, including immunizations.
- Prevents insurance companies from imposing lifetime dollar limits. In the past, people with cancer or other serious illnesses in their childhood could run out of coverage later in life.
- Allows young adults to be covered through their parents’ insurance until the age of 26.

If you feel like you are still being denied coverage, call one of the agencies listed in Good Advice (pg. 68.)

There are also new services in the law that will help women and children including:
- Diabetes screening for pregnant women.
- Breastfeeding support, supplies, and counseling.
- Domestic violence screening and counseling.

The law makes changes in the Medi-Cal program that allow many more people to participate. In the past these people would have had very limited health coverage.

- If you are very low income and between 19 and 65 years old with no children you may now qualify for Medi-Cal.
- If you are working but do not receive health care from your employer, you can sign up for a health care program through Covered California. That is the name for the “exchange” which is a group of insurance companies who can offer you health coverage. You can select which company to get insurance from and you will have a chance to compare their rates. The website is www.coveredca.com. You can check it to either choose a private insurance program or even apply for Medi-Cal.

If you are an immigrant see p.64, “What Health Care Programs Are Available for Immigrants”.

The new health care law requires that everyone purchase some kind of health insurance. If you are already getting insurance through your employer you do not have to change it unless you want to: you can keep the plan that you are getting if you like it. If you are not getting insurance through an employer or through Medi-Cal or Medicare, you will be required to purchase it or you will receive a fine that you have to pay. If you buy insurance through Covered California you may be able to get tax credits that will help lower the cost of your health insurance.

For more information contact:

**Center for Health Care Rights**
520 S La Fayette Park Pl, LA90057
(213) 383-4519

**Maternal and Child Health Access**
1111 W. 6th St. #400 L.A. (Medi-Cal & CalFresh)
(213) 749-4261

**Neighborhood Legal Services-Health Consumer Center**
www.nls-la.org
(800) 896-3202.

**Legal Aid Foundation of L.A. (LAFLA)**
800-399-4LAW www.lafla.org
310-393 7734 (TTD)

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### MediCal Income Limits (See next chapter)

FPL (Federal Poverty Level) is the amount of income the Federal Government says a family needs to meet its basic needs.

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<th>138 % FPL HWLA &amp; Single adults</th>
<th>213 % FPL Pregnant women and children age 1</th>
<th>250 % FPL Working Disabled</th>
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Effective 4/1/14-3/31/15
Medi-Cal

Medi-Cal is California’s program to pay for medical care for many low-income people, including families, children, the elderly, and people with disabilities. Under the new health care law, many adults who could not get Medi-Cal before are now able to get Medi-Cal.

MEDI-CAL INFORMATION: (877)597-4777

If you are undocumented, and a California resident, and meet other Medi-Cal requirements, you may qualify to get restricted Medi-Cal benefits. Restricted Medi-Cal means that you can get Medi-Cal to pay for emergency services, pregnancy-related care, family planning, kidney dialysis, and long term care services.

How Do I Apply?

1. Get an Application Form
   - You can get an application form mailed to you by calling the DPSS toll-free number at (877) 597-4777.
   - You can get a Medi-Cal application at a DPSS Office. (See page 70 “Welfare Offices.”)
   - You can also get an application at many hospitals and clinics, whether they are private or county-run.
   - A few schools in Los Angeles County can have children apply for Medi-Cal at the same time they apply for the Free and Reduced-Cost Lunch program, using the same application.
   - Visit First 5-funded agencies that have applications and assist people with the application process. See page 47 for a complete list of agencies.
   - Visit a Certified Enrollment Counselor (CEC). These counselors work for community organizations or insurance brokers and can help you apply on line or by mail. All CECs are certified by Covered California to help consumers in person. Visit www.coveredca.com/enrollment-assistance to find an enrollment counselor near you.

2. Apply Online
   - You can apply online using Your Benefits Now!, or Covered California.

Your Benefits Now! is a website for Los Angeles County residents to apply for and view their benefits online. Visit: www.dpssbenefits.lacounty.gov

Covered California is a statewide marketplace where you can shop online or over the telephone for insurance coverage. Visit: www.coveredca.com or call (888) 975-1142.

3. CHDP “Gateway”

Children who receive a CHDP visit are screened for temporary eligibility for Medi-Cal. If a child is eligible, he/she is pre-enrolled in temporary, full-scope Medi-Cal at no cost for up to 60 days (for the month of the visit and the month after) See pg. 48, “CHDP.”

4. Deemed Eligibility for Infants

Infants who are born to mothers on Medi-Cal at the time of birth can get Medi-Cal benefits up until the age of one, regardless of any increase in income for their family. At age one, an annual redetermination form must be completed. However, you must contact DPSS when your baby is born or use a “Newborn Referral Form” to start your child’s Medi-Cal benefits (see #11 “If you are pregnant”, page 42).

For questions or problems you may contact MCH Access (213) 749-4261 or the Health Consumer Center of Neighborhood Legal Services at (800) 896-3203.

5. Complete the Form

Help is available if you need it to complete your application The Medi-Cal office must provide translation services and assistance if you have a disability that makes it hard for you to complete the application. If the worker needs more information, you will be given a list of necessary documents and a due date to mail it back. A “return appointment” is not necessary.

If you do not have all the necessary documents, you or someone you know may sign a statement explaining why not. You may be able to receive benefits while you continue to gather the required information. The eligibility worker should help you get some of your missing papers. Give DPSS copies, not originals, of any documents.

Make a copy of the application for yourself! Then hand in or mail in the form. Get a receipt if you hand in the form. If you mail the form it is a good idea to send it by certified mail.

Immigration Status

Most legal immigrants can get Medi-Cal to cover all their medical and health care needs. Victims of domestic violence or those in the process of adjusting their legal status might also be able to get Medi-Cal. (See page 62 Guide for Non-Citizens).

If you have a Deferred Action for Childhood Arrivals (DACA), you can qualify to get full Medi-Cal benefits.
6. Provide Documentation
DPSS Medi-Cal offices are now able to electronically verify required information to determine if you can get Medi-Cal. If they are not able to verify some or all of the required information, then you will have to provide physical documentation to them. The following items are required to determine if you are eligible. You may not have to show documentation of cars, property or bank accounts if you are under the age of 64.

- Identification with your name and current address on it. If you lack ID, you can also fill out a form called “PA 853” and swear that you are who you say you are, or documents to verify income or disability status may also serve as proof of identity.
- Social Security Number or Card (or proof of application for the card) only for those requesting “full-scope” benefits.
- Proof of income (like check stubs, a copy of your tax return, or monthly bank statements if you have direct deposit or a self-affidavit (statement of income if you are paid in cash or do not have any other way to prove income)
- Proof that you live in Los Angeles County (a document that has your name and an address on it) for each adult on the application.
- Proof of citizenship or acceptable immigration status for each person on the application who has declared acceptable immigration status. If you are a parent applying for children only, you do not need to submit proof of your immigration status.
- Vehicle registration if ownership of more than one vehicle is declared.
- Verification of child or dependent care, educational expenses and/or health insurance premiums or court ordered child support payments can be used as deductions, but are not needed to determine eligibility.

7. Cooperate with Child Support Services
If one parent is absent, most people will have to cooperate with DPSS and a county agency called the Department of Child Support Services (DCSS.) You must provide information you have about the other parent such as an address or Social Security Number, to establish who your other parent such as an address or Social Security Number is and whether that parent can provide the child with medical insurance.

8. Wait for Approval
Normally, the Medi-Cal office will approve or deny your application within 45 days of receiving it, except for the faster processes for infants and children, described above. If the state must evaluate a disability, the approval or denial can be delayed up to 90 days. If you are disabled you may apply for free Medi-Cal, she may be eligible for a program called Medical Access Program (MAP). MAP used to be called Access for Infants and Mothers (AIM). Call MAP at (800) 433-2611.

9. The Medi-Cal Card
Once you have been “approved”, your permanent white plastic Medi-Cal card is mailed to your address. It is called a “Benefits Identification Card” or BIC. Each person listed on your application will get one, even if they aren’t eligible for Medi-Cal, because if the family must pay a monthly Share of Cost, the medical expenses of every person listed on the application can be used to meet the Share of Cost. If you don’t get your plastic card by the end of the month, or if you lose your card, contact the Medi-Cal office.

10. Authorization for Service under “Regular” Medi-Cal
When you are not in a health plan, before some medical services can be performed for you the state has to give an authorization for the service. This does NOT apply to emergency care, office visits, and most drugs. It is the job of the doctor, pharmacist, or other service provider, not the patient, to get this authorization from the state. However, if the state denies or changes the authorization, the state will notify you and your doctor. You can appeal any unreasonable delay, denial, reduction, or termination of care. (See pg. 66 “Hearings and Complaints”) for information about grievances and complaints.

11. If You Are Pregnant
Any pregnant woman can be “presumed eligible” at certain clinics and given limited pregnancy-related Medi-Cal immediately called “PE”, without proving pregnancy or providing information on property, car, or resources. PE will help you get early prenatal care, lab tests and medication. You still have to apply for Medi-Cal if you want to continue your Medi-Cal benefits. Even to get full Medi-Cal you have 60 days to provide proof of pregnancy.

When you apply for Medi-Cal during pregnancy, you should add your spouse or any other eligible children to your case. If a woman is not more than 30 weeks pregnant and has too much income to be eligible for free Medi-Cal, she may be eligible for a program called Medical Access Program (MAP). MAP used to be called Access for Infants and Mothers (AIM). Call MAP at (800) 433-2611.

As soon as the baby is born call your worker to report the name and birthdate to add the new baby to your family case record. The baby needs his or her own card by the end of the month after birth. But, you should not have to fill out a new Medi-Cal application for your baby. If you have trouble reaching your worker to tell the worker about the birth of your baby, some WIC offices and clinics have “PE”, without proving pregnancy or providing information on property, car, or resources. You can contact your WIC worker to find out how to report the birth. If the state denies or changes the authorization you can appeal.

You don’t have to provide a birth certificate or Social Security number until the baby’s first birthday.

If you take your baby to a CHDP provider, your baby can also get a card issued through the “CHDP Gateway” (see pg. 48 CHDP).

12. If You Are Disabled
If you are disabled you may apply for regular Medi-Cal as an adult with income below 1 38% of the Federal Poverty Level. If you want to be evaluated for the Aged and Disabled Medi-Cal program you will need a disability determination. To find
13. If you are Diagnosed With Breast or Cervical Cancer

If you are a man or woman diagnosed with breast cancer or a woman diagnosed with cervical cancer, you can get free Medi-Cal immediately, and during the entire time you are receiving cancer treatment, if your monthly income is less than 200% of the Federal Poverty Level through the Breast and Cervical Cancer Treatment Program (BCCTP). There are no resource limits for this program. To get on Medi-Cal right away (called “Accelerated Eligibility”), you must go to a provider who participates in this program to file an internet application. You should state that you want the internet application to serve as a Medi-Cal application so you will be eligible for the program for a longer period of time.

To find a health facility near you that participates in this program or who will screen you for cancer, call the Los Angeles County Office of Women’s Health at (800) 793-8090 or the State Office of Women’s Health at (800) 824-0088. Depending on your age or immigration status, you may get “full scope” (regular) Medi-Cal or you may get time limited Medi-Cal for cancer-related services only 18 months for breast cancer and 24 months for cervical cancer. Call 1-800-824-0088 for more information.

14. Retroactive Benefits

If you had medical, dental or pharmacy services from a Medi-Cal provider in the three months before you applied for Medi-Cal, ask your worker for a form to apply for “retroactive benefits.” Both the paper and on-line application sites will ask you if you had medical expenses in the last three months. If you did, check Yes. If you were eligible for Medi-Cal during those three months, Medi-Cal may pay those bills. If you’ve already paid the bills and Medi-Cal covers the services, your clinic, doctor, dentist, or pharmacist must provide the refund to you. If you have trouble getting a refund, call The Health Consumer Center at (800) 896-3203.

Income Limits

Your countable income determines whether or not you can get Medi-Cal for free or whether you have to pay a “Share of Cost.” (You only pay a “share of cost” in months when you actually use services.)

The different Medi-Cal programs have different rules for how income is counted and which deductions to allow.

In general, adults under age 64 and children may qualify for what is called a *MAGI* Medi-Cal program. The rules for these programs count the income of the person filing taxes in the house and some dependents. For information call: Legal Aid (pg. 68) or the Health Consumer Center (800) 896-3202.

Adults aged 65 and older and some disabled people may qualify for a "Non-MAGI" Medi-Cal program. In these programs, only the income of the family unit being given the Medi-Cal amounts, not of others who may live in the house but aren’t part of the application.

Elderly (65 and older), blind or disabled persons can deduct:

- $20 from any income
- $65 from earned income
- Half of any remaining earned income
- Any health insurance premiums paid by you.

Some elderly or disabled people, even though not receiving SSI, may get free Medi-Cal if the countable monthly income is less than $1203 (an individual) or $1621 (a married couple, both disabled or elderly). This is called the “Aged and Disabled Federal Poverty Level Medi-Cal program. You cannot get free Medi-Cal if your income is even a dollar over these limits. Special income deductions and exemptions apply, so even if you think your income may be too high, you can apply and check with Health Consumer Center at 800-896-3203 or Legal Aid (800) 399-4LAW

Special low-cost Medi-Cal for working disabled persons:

If you are a disabled person with share of cost Medi-Cal you may be able to get cheaper Medi-Cal with a low monthly premium if you are working. Your job can be any job that pays you income, no matter how small. This program is called the “250% Working Disabled Medi-Cal” program. If you qualify, you will have to pay a monthly premium that goes up the more income that you have. These monthly premiums range from $20 to $250 for an individual and $30 to $375 for a couple (both receiving 250% benefits). Again, special income deductions and exemptions apply, so apply even if you think your income may be too high and check with the Health Consumer Center (800) 896-3203 or Legal Aid.

Share of Cost

Some people must pay, or agree to pay, a “Share of Cost” for each month that they have a medical expense. Medi-Cal will then pay the rest of the bill for covered services that month.

You do not have a Share of Cost if:

- You are in one of the groups that receive free Medi-Cal (such as those getting CalWORKs, SSI, foster care, adoption assistance, or the Aged and Disabled programs)
- Your countable income is below the limit in the chart on page 40.

If you have Medi-Cal with a Share of Cost, your Share of Cost starts over every month. You don’t have to pay anything in months that you have no medical expense. You can use your past medical bills and the medical bills of family members listed on your application to meet your Share of Cost, including unpaid bills that they are trying to collect from you. You cannot count the same billed item or service twice, but you can carry the balance of an unpaid bill over to later months if a bill is for more than your Share of Cost. If your income goes down, tell your worker so that your “Share of Cost” will go down.

1. Share of Cost for Children

Children whose family income is too high for free Medi-Cal can get Medi-Cal with a Share of Cost.

An increase in income is not counted toward a share of cost for children up to age 19 who are on no-cost Medi-Cal until their next scheduled annual redetermination. So, even if the child’s parents start making more money and the parents have to start immediately paying a Share of Cost as a result, the child still receives Medi-Cal for free until their next annual redetermination.
2. Reporting Changes for Adults

Adults must report to DPSS any significant changes that may affect their eligibility within 10 days after the change. You must quickly report to your worker if you move, begin making more money (or less money), someone moves in or out of your home or you are pregnant. Even if you report a change that hurts your eligibility, you have important rights before the DPSS cuts your Medi-Cal.

3. Losing Welfare Does Not Mean That You Lose Medi-Cal

If you leave CalWorks due to a sanction, time limit, or make too much money, you do not lose Medi-Cal. If you lose your Medi-Cal after you leave welfare, contact your worker to find out how to get back on Medi-Cal. If you need further help, call the Health Consumer Center at (800) 896-3203 or Legal Aid for help and advice.

4. Transitional Medi-Cal (TMC)

You might be eligible for up to one year of free (no Share of Cost) Medi-Cal (called Transitional Medi-Cal or TMC) if you lost CalWORKs or Section 1931(b) Medi-Cal because you started to work and are earning too much money. If you are eligible, during the first six months of TMC you and your family qualify for free Medi-Cal no matter how much income you have. After that, you remain eligible for TMC if your income is not more than the limits in the chart on the next page.

Adults and children can get TMC for up to one year. You can receive TMC more than once in your lifetime. If your income goes down you can qualify again for regular Medi-Cal. If it then goes up again you can return to TMC with new time limits. When children are no longer eligible for TMC they should be screened for the Medi-Cal Targeted Low-Income Health Program.

There are no “resource” or property limits for TMC. TMC requires regular reports like a SAR-7 for cash aid, but on a different form.

5. Four Month Continuing Medi-Cal

If an adult loses CalWORKs because he or she starts getting more child or spousal support, he or she can get free Continuing Medi-Cal, regardless of income, but just for four months. It is important that you turn in a change reporting form explaining why you are leaving CalWORK, to help make sure you get Transitional or Continuing Medi-Cal. The children’s free Medi-Cal continues until their next scheduled annual redetermination.

6. Former Foster Children

If you were in Foster Care on your 18th birthday, you may be automatically eligible for free Medi-Cal until you turn 26, even if your income goes up. To enroll, you can contact the Former Foster Care District at (626) 569-2968. If you lose Medi-Cal, call the Alliance for Children’s Rights (213) 368-6010 or the Health Consumer Center at (800) 896-3203 for assistance.

7. Keep Medi-Cal until DPSS Proves You Are No Longer Eligible

DPSS must send you a written Notice of Action at least 10 days before it cuts off, denies, delays or reduces your Medi-Cal benefits. (See pg. 66 Hearings and Complaints).

If a change occurs that hurts your ability to get Medi-Cal, DPSS must determine if you are eligible for any other type of Medi-Cal, before sending you a notice of action cutting off your benefits. They have to look in your record for any missing necessary information. DPSS can send you a form that only asks for the information it needs; it cannot ask for information it already has or does not need to determine whether you are still eligible for Medi-Cal.

DPSS must give you at least 20 days to complete and return the form. If you don’t return the completed form, DPSS will send you a written notice of action that they will reduce or stop your Medi-Cal benefits. If your form is incomplete, DPSS must first try to contact you by telephone and writing to get missing information before it stops or reduces your benefits. If you send in your form within 30 days of being cut from Medi-Cal, and that information show you were still eligible, DPSS must restore Medi-Cal benefits without making you reapply.
8. If You Move

Be sure to report your change of address to your eligibility worker. Keep using your Medi-Cal card. If you move to a new county, report the change if you can to DPSS and also to the welfare office in the new county. The counties should manage the transfer of your case. If you move to another county you may also have to change your managed care plan. To change your plan call Health Care Options at 1-800-430-4263.

9. If You Were Billed Twice

The doctor or health service provider cannot bill both you and Medi-Cal for the same care. If you think your doctor has billed you unfairly, you should contact the Health Consumer Center at (800) 896-3203 or Legal Aid (800) 399-4529.

10. Lost or Stolen Cards

Notify your worker and a replacement card will be sent to you. If there is a medical emergency, you may receive a written notice of eligibility at your welfare office.

How Do I Choose My Care?

There are two ways to receive your medical care under Medi-Cal:

- "Fee for service" (regular Medi-Cal),
- or Managed Care (Health Plan).

These are also called HMOs (Health Maintenance Organizations). Most Medi-Cal participants must enroll in a Health Plan.

Medi-Cal recipients who may, but do not have to, enroll in an Health Plan include:

- Children in foster care or the Adoption Assistance Program
- People who get health care from an Indian Health Service Program.

Medi-Cal recipients who cannot enroll in a Medi-Cal Managed Care Health Plan

- People who get Medi-Cal only for emergency and pregnancy related services (restricted Medi-Cal)
- Recipients with a Share of Cost, restricted Medi-Cal or who also have one of the following; private insurance, or CHAMPUS PRIME HMO.

1. Fee-for-Service (Regular Medi-Cal)

In regular Medi-Cal you can use any doctor, clinic, hospital, pharmacy or other provider willing to accept Medi-Cal. You must tell the doctor or clinic that you have Medi-Cal before you get care. If you don't, the provider can legally bill you for all services that you get. A provider cannot accept your Medi-Cal for some part of your care and then charge you money and refuse to bill Medi-Cal for other parts of your care, unless that provider does not provide that service under Medi-Cal. For example, a doctor cannot accept your Medi-Cal for your prenatal care but then refuse to bill Medi-Cal for your blood tests and try to charge you.

2. Managed Care (“Health Plan”)

When you join a health plan, you must see the doctors, pharmacists and hospitals that are part of your plan. You must select a health plan and a primary care provider that is in the health plan. Unless you have an emergency, you must get approval for most of your care from your primary care provider. The health plan will receive money each month for your health care even if you don't get services. The health plan is responsible for providing or making arrangements for you to get all Medi-Cal covered services. You should first see your doctor within four months of joining the health plan. You can contact Health Care Options (HCO) at (800) 430-4263 to enroll or change plans.

After you are in a health plan, you may still use your Benefits Identification Card (BIC) to get family planning, dental, and mental health services outside of the health plan. If you have any questions contact Legal Aid (pg. 68).

3. Dental Care

Dental care is fee-for-service in Los Angeles unless you choose to join a dental plan. In fee-for-service, you must get all your dental services from a dental provider willing to accept Medi-Cal. If you are in fee-for-service you can find a dentist by calling (800) 322-6384 Monday through Friday 8 am to 5 pm, or online at www.denti-cal.ca.gov. If you enroll in a dental plan, you will receive primary care from the dentist you selected. If you are In a dental plan and want to switch to fee for service dental care call Health Care Options at (800) 430-4263 for help.

4. How to Choose a Health Plan

When you first enroll in Medi-Cal you will get a packet in the mail from the state. The packet will contain a “Medi-Cal Choice Form” that must be filled out with the doctor and your health plan choice for each person in the family who is required to choose a health plan. Your packet will include a directory with some of the doctors, doctor groups, medical groups and health plan choices in your area. If you don't see your doctor you can call Health Care Options and ask for a county or other area directory, or just call your clinic and ask which plans they take. Fill out the "choice form" and send it back to Health Care Options within 30 days. Keep the pink copy of the form for your records. Mail the form in the postage paid envelope provided, or send the form by certified mail. If you don't complete the form and return it within 30 days, the state will choose a health plan for you that may not be convenient for you.

To get a packet or more information, call Health Care Options at (800) 430-4263 or (800) 430-9009. The TDD line for hearing impaired is (800) 430-7077. If you have questions or problems call the Health Consumer Center at (800) 896-3203 for assistance.

It is very important to consult with any health care provider you already have and want to keep seeing before choosing a plan. You should also ask if you can keep going to the clinic, pharmacy and hospital that you want. You and your other family members may choose to join the same health plan and chose the same doctor, called a “Primary Care Provider” (PCP), or you can choose different health plans and PCPs.

Once you select a health plan, you will be mailed a plastic health plan membership card to use when you need medical services. Enrollment usually takes 30-45 days. If you or your family need medical care before you receive the health plan card, you may use the regular State Medi-Cal Benefits Identification Card (BIC), or if you are already in an health plan and are just switching plans, use your current health plan until you are told you are in the new one.

People in the groups that may, but do not have to, enroll in a health plan will automatically get a packet in the mail even though they do not have to join a plan. You should not be asked to make a choice of a health plan when you apply or at your renewal. People who are already in a health plan when they apply for Medi-Cal should not get a packet in the mail. You may be asked to attend a “Health Care Options” talk. You do not have to go. If you go, you do not have to choose a plan that day unless you want to.
5. Medical Exemptions and Continuity of Care

Most participants must enroll in a health plan; unless you apply for and receive a “Medical Exemption” in order to keep regular fee for service Medi-Cal. You may be able to get an exemption if you have a “complex medical condition” such as pregnancy, kidney disease, diabetes, HIV/AIDS, cancer, asthma, or multiple sclerosis, or receive skilled nursing services at your home, AND if the doctor or clinic that treats you is not part of any available offered health plan and you would lose them if you joined a plan. The state is now making it very difficult to get medical exemptions and you may need an advocate to assist you and your doctor. See “Good Advice (pg. 68) for advocate listing.

You and your doctor must fill out a form called “Request for Medical Exemption From Plan Enrollment” (which is in the packet that you get in the mail) and send it to the state. Do this before the date you would have choose a health plan. If the state denies your exemption, file an appeal. You should be able to stay in regular Medi-Cal while a decision is made on your appeal.

The exemption is good for up to 12 months. After the 12 months, you will get another packet in the mail to complete, or you must request another Medical Exemption. You may call Health Care Consumer Center at (800) 896-3203 for assistance.

6. Fees

In both health plans and regular Medi-Cal, you may have to pay $1.00 for prescriptions and many services unless you are pregnant, over age 64, or under age 19. Also, there may be a charge of $5.00 for non-emergency care given in the emergency room. The state is currently not collecting these fees.

7. Hearings, Grievances, and Leaving a Managed Care Health Plan

If your health plan denies services or you are not satisfied with the services, you have many options. You can file a grievance with your health plan. Your health plan must tell you how to file a grievance. The health plan must resolve your grievance within 30 days, or less if you have an emergency. If you are still not satisfied complain in writing to the Department of Managed Health Care HMO Help Center, IMR Unit, 980 Ninth Street, Suite 500, Sacramento, CA 95814-2725. Their phone number is (888) 460-2219, TDD (877) 688-9891. Or you can go to their website at www.hmohelp.ca.gov.

Mandatory participants in health plans can change to a different plan for any reason. Voluntary participants can change plans or can go back to regular Medi-Cal for any reason. To change or leave a health plan, call Health Care Options at (800) 430-4263 and request a “choice form.”

If you want help with complaints and grievances call an advocacy group for assistance or call:

- Health Care Consumer Center (800) 896-3203
- Managed Care Ombudsman (888) 452-8609
- Department of Managed Care (888) HMO-2219
- Medi-Cal Managed Care Ombudsman (888) 452-8609

You can also find information online at http://www.dmhc.ca.gov/

You can call (800) 400-0815 if your health plan gives you problems. If your health plan is denying you care because it does not think it is medically necessary, but you disagree, you can ask for an independent medical review which is done by a group of doctors and professionals who do not work for your health plan.

You have the right to ask for a fair hearing. (see page 66, “Hearings and Complaints.”)

While waiting for a state hearing, the health plan must continue to provide medical services to you, if you request the hearing before the effective date of the intended action.

8. Mental Health Managed Care

Mental Health services for Medi-Cal recipients are also provided through a managed care system. See page 52.
How Do I Get Help on My Case?

If you have trouble calling your worker, it may be because some district offices now use the Customer Service Line -866-613-3777.

You will need your case number or your client ID number for them to look up your case. The Client ID# is located on any Medi-Cal notice of action in the upper right hand corner of the notice (the last line of information after your name, case number, etc.). In some cases, the customer service representative may be able to look up your case info with your name and birthdate.

To look up your case online you will need the Client ID # and a PIN number. You should have received a PIN number on a separate notice. Online, you will have updated information on the status of your case.

You can also call 211 and they can give you the DPSS Customer Service Line or Help Line numbers.

Central Help Line / Customer Service Line

Health and Nutrition Hotline/Customer Service Line
1-877-597-4777 for all of LA County

They will help you with things like:
- General information on Medi-Cal
- Direct number of worker
- Case number (if caller is on the case)
- Card number (if caller is on the case)
- If caller has moved and needs to get Medi-Cal in another state, city or county – they can tell you if you have an active case in LA

CUSTOMER SERVICE LINE – (866)613-3777 for specific district offices
Look at page 70- DPSS offices using the Customer Service Line.

A representative from Customer service can access your case instead of calling the workers directly. They will help you with small changes and issues like:
- Report change of address
- Telephone number changed
- Send replacement benefits cards
- Change in income (making more or less)
- Need to contact or schedule an appointment with worker

You will need your client ID #, case no. or they might look you up with your name and birthdate if you don’t know other information.

Where Can I Apply?

You can apply at county offices on page 66 and/or at any of the following First 5-funded agencies.

<table>
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<tr>
<th>Lancaster, Northern LA, Palmdale:</th>
<th>East LA, Metro LA:</th>
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<tr>
<td>Tarzana Treatment Center 661-726-2630</td>
<td>California Hospital Medical Center 213-742-5537</td>
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<tr>
<td>Burbank, Glendale, San Fernando Valley, Santa Clarita, Northridge:</td>
<td>Chinatown Service Center 213-808-1700</td>
</tr>
<tr>
<td>Asian Pacific Health Care Venture 323-644-3880 (Also East LA/Metro LA)</td>
<td>KHEIR 213-637-1080</td>
</tr>
<tr>
<td>Tarzana Treatment Center 818-342-5897</td>
<td>West Side: Venice Family Clinic 310-664-7509</td>
</tr>
<tr>
<td>Child and Family Guidance Center 818-882-3147</td>
<td>South LA:</td>
</tr>
<tr>
<td>Northeast Valley Health Corp. 800-696-3842</td>
<td>California Hospital Medical Center 213-742-5537</td>
</tr>
<tr>
<td>Valley Community Clinic 818-763-8836</td>
<td>Community Health Councils (Also East LA/Metro LA) 323-295-5500</td>
</tr>
<tr>
<td>El Monte, Monrovia, San Gabriel Valley, Pomona:</td>
<td>Southeast LA County:</td>
</tr>
<tr>
<td>Citrus Valley Health Partners 626-851-2748</td>
<td>AltaMed Health Services Corporation 877-462-2582</td>
</tr>
<tr>
<td>Crystal Stairs 323-299-9295</td>
<td>South Asian Network 562-403-0488</td>
</tr>
<tr>
<td>Long Beach:</td>
<td>Human Services Association 562-806-5400</td>
</tr>
<tr>
<td>Dept. of Health 562-570-7979</td>
<td>St. Francis Medical Center 800-603-9355</td>
</tr>
<tr>
<td>Pasadena, Altadena, Sierra Madre:</td>
<td>Carson, Hawthorne, Inglewood, Lawndale, Lomita:</td>
</tr>
<tr>
<td>Pasadena Public Health Department 626-744-6086</td>
<td>Crystal Stairs 323-299-9295</td>
</tr>
<tr>
<td>Health Consumer Center of Los Angeles 800-896-3202</td>
<td>Long Beach:</td>
</tr>
<tr>
<td>LAUSD – CHAMP Helpline 866-742-2273</td>
<td>Dept. of Health 562-570-7979</td>
</tr>
<tr>
<td>Countywide Assistance:</td>
<td>Pasadena, Altadena, Sierra Madre:</td>
</tr>
<tr>
<td>Health Consumer Center 800-896-3202</td>
<td>Pasadena Public Health Department 626-744-6086</td>
</tr>
<tr>
<td>MCH Access (Training and Troubleshooting, enrollment for East LA, South LA) 213-749-4261</td>
<td></td>
</tr>
</tbody>
</table>

Go Online to Find Help Near You:
www.chigla.org
Health Care for Children

What Health Care Is There for Kids Under 19?

Medi-Cal For Children

Children birth to 19 who are not eligible for the family based Medi-Cal programs will be enrolled in Medi-Cal’s Targeted Low Income Program For Children. The value of things you own (“resources”) don’t count against you.

To be eligible for Medi-Cal’s Targeted Low Income Program For Children, the monthly income must be less than 266% of the Federal Poverty Level. See chart on page 40 for what that means. Families with income above 160% of the Federal Poverty Level will have to pay a monthly premium of $13 per child with a maximum payment of $39 per family. See page 43- Share of Cost for children for income limits. For information on immigration status and how to apply please see page 41 in the Medi-Cal section.

1. Healthy Kids and Kaiser Permanente

Healthy Kids is provided through the LA Care Health Plan for children from birth through age 5 who do not qualify for full scope (regular) no-cost Medi-Cal or for insurance through Covered California. Healthy Kids is only enrolling children ages 0-5 ½.

Family income must be below the limits in the chart below. There are low-cost monthly premiums of $4 or $6 and small payments at visits. You only pay for two children monthly no matter how many are enrolled. Call (888) 452-5437 for more information.

<table>
<thead>
<tr>
<th>Family Size</th>
<th>Monthly Income limit</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>$3,890</td>
</tr>
<tr>
<td>2</td>
<td>$5,244</td>
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<tr>
<td>3</td>
<td>$6,597</td>
</tr>
<tr>
<td>4</td>
<td>$7,950</td>
</tr>
<tr>
<td>5</td>
<td>$9,304</td>
</tr>
<tr>
<td>6</td>
<td>$10,657</td>
</tr>
</tbody>
</table>

Children who grow out of Healthy Kids at age 6 can enroll in My Health LA at a community partner (visit www.cccalac.org), or enroll in Kaiser Permanente Child Health Program.

Kaiser Permanente Child Health Program:

Children under age 19 who are not eligible for full-scope (regular) no-cost Medi-Cal or insurance through Covered California may be eligible for Kaiser Permanente Child Health Program. There are no immigration requirements. The monthly cost is $10 or $20 and there are no copayment costs for visits. Dental, mental health and vision care are included. Enrollment is limited to the open enrollment period (Nov 15, 2014 through Feb. 15, 2015.) Outside of Open Enrollment, a child may qualify for a Special Enrollment Period. For more information visit http://info.kaiserpermanente.org/html/child_health_plan/index.html or call Maternal & Child Health Access at (213) 749-4261.

2. Child Health and Disability Program (CHDP)

CHDP provides free early and regular health exams for many low-income children up to 19 years of age; Medi-Cal eligible children up to 21 years of age; and Head Start and State preschool children. There are no immigration requirements, however, visits are allowed based on a “periodicity schedule”, with some exceptions for physical exams needed for school, for children in foster care and for problems that might occur between screenings. Children in Medi-Cal Managed Care can get more screenings than the state’s schedule allows. CHDP offers physical exams, immunizations, vision and hearing testing, lead poisoning testing, nutritional check, teeth and gum check, and some lab tests including sickle cell. For more information call (800) 993-2437.

3. California Children’s Services

Children’s Medical Services (or California Children’s Services) case manages and provides health services for children up to age 21 with eligible major medical conditions caused by accidents, diseases, and congenital disabilities, whether or not the children also have Medi-Cal. Undocumented children may qualify if their parents live in Los Angeles County. For eligibility information, call (800-288-4584). Service providers are all over the county.

Family income must be less than 250% of the Federal Poverty Level (see pg. 40) per year, or may be greater if their CCS related medical expenses are expected to be more than 20% of the family’s income.

There is no family income limit for children who need services to confirm a CCS-eligible medical condition; or were adopted with a known CCS-eligible medical condition; or are applying only for services through the Medical Therapy Program; or if they are “full scope” Medi-Cal beneficiaries with no share of cost.
In an emergency, it is a legal and ethical duty for every clinic or hospital emergency room to provide emergency care, regardless of immigration status or ability to pay. Know your rights and ask for the help you need (Veterans see pg 27).

1. County Hospitals and Clinics

County Health Dept. (Services, Referrals to Clinics, or Complaints)
(800) 427-8700
On-line: www.ladhs.org, click on "clinics" and then click on "Patient Information."

County Hospitals:
Harbor-UCLA
1000 W. Carson St., Torrance 90509
(310) 222-2345
High Desert Health System (Out patient visits only)
44900 N. 60th St. W., Lancaster 93536
(661) 948-8581
Martin Luther King Hospital/Drew (Urgent care and out patient visits only)
12021 S. Wilmington Ave., LA 90059
(310) 668-2622
Los Angeles County/USC
1200 N. State St., LA 90033
(323) 226-2622
Olive View
14445 Olive View Dr., Sylmar 91342
(818) 364-1555
San Fernando Valley
All for Health, Health for All
519 E Broadway, Glendale CA 91205
(818) 409-3020
Northeast Valley Health Corp.
12756 Van Nuys Blvd., Pacoima, 91331
(818) 896-0531
Mission City Community Network
15206 Parthenia St, North Hills, 91343
(818) 895-3100
Northeast Valley Health Corp.-1600 San Fernando Rd, 91340
(818) 365-8086
El Proyecto del Barrio
8902 Woodman Av., Arleta, 91331
(818) 830-7133
20800 Sherman Way, 91306
(818) 883-2273
North Hollywood Health Center
5300 Tujunga Ave., 91601
(818) 766-3982
Northeast Valley Health Corp./ Valencia Health Center
23763 Valencia Blvd., 91355
(818) 287-1551
Canoga Park Health Center
7107 Remmet Ave., 91303
(818) 365-8086
Pacoima Health Center
13300 Van Nuys Blvd., 91331
(818) 896-1903
Glendale Health Center
501 North Glendale Ave., 91206
(818) 500-5785
San Fernando Valley Health Center
1212 Pico Street, San Fernando CA 91340
(818) 837-6969
Tarzana Treatment Center-West Valley
18646 Oxnard Street, Tarzana CA 91356
(818) 996-7019
Valley Community Clinic
6801 Coldwater Canyon Ave, 91605
(818) 763-8836
San Gabriel Valley
AltaMed Health Services
10454 East Valley Blvd., El Monte, 91731
(626) 453-8466
El Monte La Puente Health Center
15930 Central Ave., La Puente CA 91744
(626) 855-5300
Community Health Alliance of Pasadena
330 West Maple Ave., Pasadena CA 91103
(626) 256-1600
Monrovia Health Center
1855 N. Fair Oaks Ave., Monrovia, 91016
(626) 398-6300
Durfee Family Care Medical Group
2006 Durfee Ave., El Monte, 91733
(626) 442-5015
Pomona Clinic Coalition
1770 N. Orange Grove Ave., 91767
(909) 622-6516
El Monte Comprehensive Health Center
10953 Ramona Blvd., El Monte, 91731
(800) 383-4600
El Proyecto del Barrio
150 North Azusa Avenue, Azusa, 91702
(626) 969-7885
Pomona Health Center
750 S. Park Ave., Pomona, 91766
(909) 868-0235
Ramona Health Plan Medical Group
14051 E. Ramona Pkwy., Baldwin Park, 91706
(626) 338-7338
Whittier Health Center
7643 South Painter Ave, Whittier, 90602
(562) 464-5350
Yu Care Medical Group, Inc.
210 N. Garfield Ave. #203, Monterey Park, 91754 (626) 307-7397

Metro LA
Altamed Health Services Corporation - Buena Care
1701 Zonal Avenue, LA 90033
(323) 223-6146
Estrada Courts
1305 South Concord Street, Suite 18, LA 90023  (323) 981-9816
Ramona Gardens
1424 Crusado Lane, Suite 168, LA 90023
(323) 226-0623
William Medad
268 E. Bloom St, Suite 322, LA 90012
(323) 254-5221
Arroyo Vista Family Health Foundation - El Sereno
4815 East Valley Boulevard, Suite C, LA 90032 (323) 222-1134
Highland Park
6000 North Figueroa Street, LA 90042
(323) 226-0623
Lincoln Heights
2411 North Broadway, LA 90031
(323) 987-2000
The County provides free or low-cost health services to people who can show proof that they live in L.A. County including low-income people who are not eligible for Medi-Cal or who have medical expenses that Medi-Cal, Medicare, and private insurance will not fully cover.

Many people qualify for free care under the "Ability To Pay" (ATP) plan or My Health LA (MHLA). County hospitals and clinics also offer a payment program called “Pre-Payment”. The county contracts with over 100 community clinics called “Community Partners” who provide free clinic care for you if your income is low (see charts in next column.)

If you qualify for free care, you should not be asked to pay any fee by a community clinic, county clinic or hospital. You should receive the same quality of care as those who pay.
1. Do I Qualify for Free Care under ATP or My Health LA?

You can get free hospital and clinic care if you get General Relief, or through MHLA or ATP, if your gross monthly income (after special deductions) is below the following chart:

<table>
<thead>
<tr>
<th># in Family</th>
<th>Income</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>$1343</td>
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<tr>
<td>2</td>
<td>$1809</td>
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<td>3</td>
<td>$2276</td>
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<td>4</td>
<td>$2743</td>
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<tr>
<td>5</td>
<td>$3210</td>
</tr>
<tr>
<td>6</td>
<td>$3677</td>
</tr>
</tbody>
</table>

(As of 2014)

If your income is higher than these amounts and you receive care at a County facility you may have to pay a reduced rate for services, depending upon your income.

2. How Do I Apply for MHLA or ATP?

My Health LA (MHLA) is a no cost health program that provides health care coverage to low-income uninsured adults who don’t qualify for “full scope” Medi-Cal.

You may be eligible for MHLA if:
- You are a Los Angeles County resident.
- You are 6 years of age or older
- You are not pregnant.
- You have no health care coverage
- You meet monthly income limits. (see above for income limits)

Health benefits at no cost to you include:
- Excellent quality primary care
- Many clinics and health centers to choose from as your medical home
- ID Card to let people know you are a member of MHLA
- Toll free member information line 24 hours a day, 7 days a week, even on holidays
- Preventive and primary care services within 30 working days, as well as specialty care, hospital care, and emergency room visits at a LA County hospital or clinic

For more information, please call My Health LA Member Services.

ATP

If you get your care, at a county clinic, it’s best to use ATP. ATP pays for all clinic and hospital care, including medicines, tests and lab work. You must apply annually. If you don’t qualify for free ATP you might qualify for low-cost ATP. The screener will figure out what you must pay, if anything, for each visit.

The application process is only one page asking about family size and income. However, you don’t need to bring documents to show proof of the information; you just sign a form stating that what you say is true.

Later, random patients will be asked to provide documents to prove income. Be sure to save your income documents for at least one year after you apply. ATP is good for one year, and at the end of one year you will have to apply again.

To apply for ATP, you must make an appointment for a financial screening at a county hospital or clinic that has an ATP worker. Sometimes you will be able to be seen the same day, but you may have to wait. You do not have to wait for your financial screening to get care. If you appear to qualify for Medi-Cal, you will be asked to apply and either get a decision that you are not eligible or are only eligible for restricted benefits before an ATP application will be taken.

Be very firm about your right to apply for free care and be sure to ask for ATP at the county clinics. If it is your first visit to a county hospital or clinic, they should give you a written notice regarding available plans, including ATP, to reduce the cost of your medical care. If you do not receive this notice at your first visit, ask for one. If the worker or the clinic screener you see tells you that you do not qualify for ATP or free care and you do not agree, ask to meet with the worker’s supervisor within 10 working days. If you were found ineligible before, you may reapply. If you are unable to keep your screening appointment, call the worker immediately or you may be billed for the full cost of any treatment you have already received.

Even if you do not qualify for ATP, you still have a chance to pay a low-cost fee for the outpatient services within seven days.

3. Pre-Payment Plan

The Pre-Payment Plan is only available at County clinics and hospitals. It covers cost of care but often does not cover your prescriptions (however, you can get emergency prescriptions, public health medicines, and medicines provided in the clinic at no cost).

You do not have to prove your income, family size, or resources if you pay the following standard fees within seven days of treatment. But you do need to show proof that you live in L.A. County.

If you do not pay these fees, you will be billed for the much higher full amount cost of care:
- $80 at all County Comprehensive Care Centers, County Hospital Outpatient Clinics, and Public Health Centers; for prenatal visits, the first seven cost $60 and remaining visits are free
- $80 at County Comprehensive Health Center Urgent Care Centers
- $140 at County Hospital Emergency Rooms
- $500 at Hospital Outpatient Surgery Clinics

Most Community Partner clinics also offer a sliding scale for patients who don’t qualify for free care.

4. What Else Should I Know?

If you have any questions about your care, need referrals, or have a complaint, call the County Health line: (800) 427-8700. You can also call the Health Consumer Hotline:(800) 896-3203.
- If you receive free or low cost medical care, your medicines are free.
- Non-citizens with restricted Medi-Cal coverage who live in L.A. County can apply for ATP or MHLA to cover non-emergency care.
- Before using ATP, you must use any other medical benefits you have such as private insurance, or outpatient Medicare. ATP will cover your deductible for private insurance, but will not cover inpatient Medicare deductibles and Medi-Cal “Share of Cost”.
- Foreign visitors with a valid visa can receive emergency services at County hospitals and clinics, but are not entitled to ATP, Pre-Pay or MHLA for medical services. They may apply for the County’s Out of County Discount Payment Plan.

5. Cancer Detection Program: Every Woman Counts (EWC)

EWC provides free mammograms for women age 40 and over and free pap smears for women over age 21. Your family income must be below 200% of poverty. The services are provided at doctors’ offices, clinics and hospitals all over Los Angeles County. Call the Cancer Detection Program at (800) 511-2300.
### Mental Health

If you believe you need mental health services, you should call the Local Mental Health Plan’s 24-hour “Access Center,” at (800) 854-7771, which can screen and evaluate your request for mental health services and can refer you to a mental health provider.

County Mental Health authorizes and can provide treatment including Medi-Cal “specialty mental health services” for all Medi-Cal recipients.

County Mental Health also authorizes and provides Medi-Cal recipients with other services to help them live and function in the community, including “EPSDT” supplemental services for children on Medi-Cal.

If you do not have Medi-Cal or other health insurance, you can receive mental health services from County Mental Health. You are charged a fee based on a sliding scale, depending on your ability to pay. Therapists can request that the fee be waived if the fee will cause stress and hardship.

### Developmental Services

Children and adults who are developmentally disabled due to Down’s Syndrome cerebral palsy, epilepsy, autism, have other qualifying conditions, or who are high-risk children up to age 3, may qualify for services through Regional Centers.

California residents who are undocumented may be eligible. To apply call one of the listed Regional Centers and ask for “Intake.” If you are not found eligible for these services, they must explain why.

- East L.A. (626) 299-4700
- Harbor (Torrance) (310) 540-1711
- Mid-Wilshire area (213) 383-1300
- Sepulveda (818) 778-1900
- San Gabriel/Pomona (800) 822-7504
- South Central L.A. (213) 734-1884
- Culver City (310) 258-4000

### Substance Abuse Treatment

There are several hundred alcohol and drug treatment programs all over LA County, offering both outpatient and residential treatment. To find a program close to you, call 1-800-564-6600. You will reach a local Community Assessment Service Center (CASC) for an appointment to find the right treatment program. If this is an emergency, please call 911. Many alcohol and drug treatment programs are full, so you may be put on a waiting list. Program costs vary.

#### Homeless Health Care

(213) 744-0724

Provides treatment services for homeless persons.

### In Home Care and Long Term Care

#### 1. In-Home Supportive Services (IHSS)

The In-Home Supportive Services Program (IHSS) helps pay for services to eligible persons to enable them to stay in their own homes. To be eligible you must qualify for Medi-Cal or SSI, be blind, disabled, or over 65, and need these services so you can remain safely in your home. IHSS is an alternative to out-of-home care such as nursing homes or board and care facilities.

Services which can be authorized include personal care, meal preparation, laundry, grocery shopping, housecleaning, transportation to medical appointments and protective supervision for the mentally impaired. Services may sometimes be provided by a spouse or by the parent of a minor, with significant restrictions.

You may qualify for IHSS if you live at home and need the services to remain there, and one of the following applies:

- You receive SSI or CAPI, even if you are working.
- You do not receive SSI but meet the SSI medical requirements, except for income or immigration status.
- You do not receive SSI but meet the disability or age requirements of the SSI program.

Someone now in an institution may also qualify if he or she could safely live at home if IHSS services were provided.

You must also have limited income and resources ($2000 for one person and $3000 for a couple, not counting your home or an automobile used for work or medical appointments).

If your income is too high to meet the SSI requirements, you may still qualify for IHSS but will have to pay a “Share of Cost.” Some IHSS recipients in certain Medi-Cal programs will have no Share of Cost based on income and allowable deductions.

If you do not currently receive SSI or Medi-Cal, your application for IHSS will be forwarded to Medi-Cal to evaluate for Medi-Cal eligibility.

IHSS applications are taken by telephone. You, or someone calling for you, may apply by calling toll free from anywhere in L.A. County at (888) 944-4477. A social worker will make an appointment to come to your home to see if you are eligible and determine what services IHSS can provide you. Within 30 days, you should receive a notice telling you if you qualify and stating the tasks and the number of hours approved. It will take longer if you have to get Medi-Cal approved first. Be sure to tell the worker about any special problems or personal needs you may have so that you get enough help.

If you are approved for IHSS, you hire someone to perform the services. You are considered that person’s employer. You have to hire, train, supervise and if necessary, fire this person (called the IHSS provider).

IHSS providers must receive at least $9 per hour. The state issues the checks for provider payments. You and your provider must complete, sign, date, and mail in the time sheets that they send you, to verify that the work was done.

Severely impaired persons may be eligible for an advance payment to pay a provider. Ask the worker doing the assessment.

For help with problems or questions, or for information on how to start an appeal about the number of hours approved for the IHSS worker, call the IHSS Ombudsman at (888) 678-4477.

#### 2. Long Term Care

If you are caring for someone that a doctor has recommended for 24-hour care by skilled nurses for a long period of time, call the Long Term Care District at (626) 854-4987.

The State Central Registry at (800) 700-7575 will give you three referrals to long term care facilities. www.californiaregistry.com

There is a difference between board and care facilities and nursing facilities. Medi-Cal will pay for long term care in a nursing facility but not in a board and care home. Before you send someone to any kind of long term care facility, you should visit the places and inspect them thoroughly. If you are not happy with the referrals you can call again for more.
Medicare is a federal health insurance program. There are three parts to the program: “Part A” (hospital insurance), “Part B” (medical insurance), and “Part D” (prescription drug insurance). For general information call (800) 633 4227.

Can I Get Medicare?

1. Part A : Hospital Insurance
You are automatically eligible for Medicare Part A free of charge if you are one of the following:
- You are 65 or older and are eligible for Social Security retiree benefits based on your own or your spouse’s employment
- You are a federal employee who retired after 1982 and have enough quarters of coverage
- You have been receiving Social Security Disability Income payments for 24 consecutive months
- You are age 50 or older and are a disabled widow or widower who has received Social Security through your spouse for at least 2 years
- You have end-stage kidney disease, regardless of your age (you still must have worked enough quarters, however, even though you don’t need to be 65.)
- You have Lou Gerhig’s disease. (You still must have worked enough quarters, even though you don’t need to be 65.)

People who are not automatically eligible for Medicare Part A may enroll voluntarily if you meet all of the following three requirements:
- You are 65 or older
- You are a U.S. citizen, or a legal alien who has resided in the U.S. continuously for at least five years
- You purchase both Parts A and B of Medicare, or you purchase Part B only. You may not purchase Part A only.

If you meet these three requirements for voluntary Part A, the amount of monthly premiums you will pay will depend upon how many work quarters you have on record with Social Security. If you have between 30 and 39 quarters, your monthly Part A premium is $234. If you have less than 30 quarters, your monthly Part A premium is $426.

2. Part B : Medical Insurance
If you meet the eligibility guidelines for Part A, you will be eligible for Part B. The Part B monthly premium is $104.90. The premium is higher if your income is $85,000 or more for an individual and $170,000 or more for a married couple. If you have a low income and low resources, the state may pay for your Medicare premiums under Medi-Cal or the Medicare Savings Program.

What is Covered?

Medicare does not cover all types of health care needs, nor is it free of cost. It does NOT cover custodial care in a nursing home or at home, dental care, eyeglasses, and hearing aids. For services that are covered by Medicare, you have to pay copayments.

1. Part A Coverage
Medicare will pay for hospital care if a doctor has decided that you need inpatient care and the hospital participates in Medicare.
You will pay a first day hospital deductible of $1,216 if you use days 1 through 60 in a benefit period.
If you remain in the hospital for days 61 to 90, you pay $304 per day and Medicare pays the balance.
If you need hospital care after the 90th day, you draw on 60 extra “reserve” days which are not renewable and can be used only once. During that period you pay $608 each day and Medicare pays the balance.

2. Skilled Nursing and Hospice Services
After a three day prior hospitalization, Medicare pays for daily (five to seven days per week) skilled nursing and therapy services in a Medicare certified skilled nursing facility. Medicare pays for the first 20 days in full and days 21-100 on a copayment basis of $152 per day.
Medicare pays for skilled nursing and therapy services in the home if you are homebound and meet other requirements. There are no copayments for home health services.
Medicare hospice services are for persons who are terminally ill (patients must be recertified as “terminal” after 210 days of hospice care).

3. Part B Coverage
Part B pays 80% of “allowable” charges for a variety of outpatient care. You pay the remaining 20%, an annual deductible of $147 and a 15% excess charge if the provider does not take “Medicare assignment.”
Doctors and other Part B providers who accept Medicare assignment agree to charge no more than the Medicare approved charge. This means that you can be charged only for the 20% co-payment and any unpaid portion of the annual Part B deductible. Ask your provider if he or she will accept assignment.

4. Part D Coverage
Part D pays for outpatient drug coverage. To obtain Part D coverage, you must enroll into a Medicare Part D drug plan. There are two types of Part D plans: PDPs that only provide Medicare drug coverage and MAPDs that provide Medicare Part A, B and D benefits. There is a standard Part D benefit package, however, not all Part D plans are the same. Each plan has its own drug formulary, cost sharing requirements and restrictions on coverage.

5. Medicare Advantage HMOs
A Medicare Advantage HMO is a health insurance plan that enrolls Medicare beneficiaries who have both Medicare Parts A and B. Medicare HMOs must provide the same benefits as original Medicare. Persons who have Medicare end stage renal disease (kidney failure) cannot enroll into a Medicare HMO.
When you join a Medicare HMO, you must use the HMO for all of your medical care, except for emergencies or urgent care when you are out of the HMO’s service area. Medicare pays the HMO a fixed monthly amount for each enrollee.

6. Other Information
Many people receive both Medicare and Medi-Cal. (see page 41 “Medi-Cal”) People who have both programs do not have to pay Medicare’s monthly premiums, deductibles, or co-payments when they see a provider that accepts Medi-Cal.
If you have both Medicare and Medi-Cal, you should see health care providers that take both Medicare and Medi-Cal to avoid being charged any cost sharing amounts. If possible, show your insurance cards before you receive services.
A new law requires people who have both Medicare and Medi-Cal to assign their Medi-Cal to a managed care plan. You will also be given the choice to assign both your Medicare and your Medi-Cal to a CalMedconnect plan. If you do, your Medicare and Medi-Cal will both be assigned to the same plan. If you don’t want your Medicare assigned to a plan, you must NOT choose a Cal Medconnect plan, but you still must choose a managed care plan for your Medi-Cal. If you do this you do not have to go to the Medi-Cal managed care plan doctors.

You should also know the following:

- Always carry your Medicare card with you
- Contact the Social Security office immediately if you lose your card or don’t get one
- Appeal any incorrect or unfair decision about your Medi-Cal benefits (see page 66 “Hearings and Complaints”)

For help with Medicare call Center for Health Care Rights
(800) 824-0780
Outside Los Angeles County call: (800) 434-0222.

Utilities and Phone

Utility Bill Assistance

If you are applying for CalWORKs, you may be able to get “immediate need” money to pay for your delinquent utility bills. (See CalWORKs’ What Else is Available’ pg. 5)

If you are low-income and have overdue gas or electric bills, call:
Low-Income Home Energy Assistance Program (HEAP) (866) 675-6623
http://www.csd.ca.gov/Services/FindServicesinYourArea.aspx

Catholic Charities (213) 251-3400
Energy Crisis Line (213) 353-1226 or (213) 353-1228
Energy Hotline (800) 342-5397
Labor Community Services (213) 427-9044
Legal Aid (utility cutoffs) (213) 640-3881
Maravilla Foundation (323) 869-4500
PACE Environmental Services: (213) 989-3250
SoCal Gas General Questions and Assistance: (800) 427-2200
SoCal Edison Low Income Utility Tax Unit (800) 736-4777
West Angeles Center (323) 733-8300

1. Need Help With Your Gas Bill?

You may be eligible for the California Alternate Rates for Energy (CARE) program. Eligible customers of SoCalGas may receive a 20 percent discount on their monthly gas bill at their primary residence through our California Alternate Rates for Energy (CARE) program. New customers who are approved within 90 days of starting new gas service may also receive a $15 discount on their Service Establishment Charge. You will receive your discount once your completed application is approved by Southern California Gas Company (SoCal Gas.)

2. Help for Your Home

No-Cost, Energy Saving Home Improvements

Whether you own or rent your home, there are no-cost energy saving home improvements to improve the energy efficiency of your home. For qualified customers who meet certain income requirements, SoCalGas provides no-cost, energy-saving home improvements like attic insulation, door weatherstripping and minor home repairs. Other terms and conditions may apply. For more information, visit socalgas.com (search "Energy Savings Assistance Program") or call (800) 3331-7593.

3. Seasonal Bill Assistance

If you have difficulty paying your winter gas bills, you may qualify for a one time annual allowance through SoCal Gas Gas Assistance Fund (GAF). Assistance is available during the winter months on a first-come, first-served basis for qualifying customers who meet certain income requirements. For more information visit socalgas.com (search "GAS FUND").

For a referral to a United Way agency serving your area, call (800) 427-2200.

4. Help with Electric Bill

If you are unable to pay your bill by its due date, contact LADWP before the bill becomes overdue. They will work with you in setting up a payment plan. If you visit one of their customer service centers and pay half of your bill, you will receive a two-week extension.

You can also arrange to pay in installments. Call the LADWP Special Collections Unit at 1-800-244-4458 before the bill is due to make payment arrangements.

If you have a notice of termination from the Department of Water and Power (DWP), call1-800-DIAL DWP (342-5397) and ask about Project Angel Fund. Priority is given to those not eligible for other aid or assistance. If you do not receive your water service from DWP, call your own water district and ask them if they provide any assistance for low-income customers.

The Los Angeles Department of Water and Power (LADWP) offers a residential Low Income Discount Program (LIDP) rate for customers within qualifying income levels. This rate reduces the cost of electricity, water, and sewer services for the participants’ permanent, primary residence.
Extra money could be right under your nose.

YOU COULD SAVE 20 PERCENT ON YOUR MONTHLY GAS BILL.

Sometimes the best things may be right in front of you, like a 20 percent discount on your gas bill courtesy of our CARE program. Today, there are more than 1.7 million Southern Californians who qualify for these monthly savings. Are you one of them?

See if you qualify and learn more at socalgas.com/care2save
The rates are generally available for families and individuals with annual incomes below the following levels:

<table>
<thead>
<tr>
<th>Members in Household</th>
<th>Annual Income</th>
</tr>
</thead>
<tbody>
<tr>
<td>1-2</td>
<td>$31,800</td>
</tr>
<tr>
<td>3</td>
<td>$37,400</td>
</tr>
<tr>
<td>4</td>
<td>$45,100</td>
</tr>
<tr>
<td>5</td>
<td>$52,800</td>
</tr>
<tr>
<td>6</td>
<td>$60,500</td>
</tr>
<tr>
<td>Each add’l</td>
<td>add $7,700</td>
</tr>
</tbody>
</table>

Lifeline Discount Program applies a discount to the energy bills of income-qualified customers who are 62 years of age or older, or permanently disabled and can provide proof of disability. For questions call (213) 481-5411

Life Support Device Discount: Discounts on water and electric service are offered to customers who provide satisfactory proof that a member of the household regularly requires the use of an essential life-support device.

Physician Certified Allowance Discount: Discounts on water and electric bills are available to customers who provide verification by a state-licensed physician that a fulltime member of the household is being treated for certain life threatening illnesses. or has a compromised immune system and needs an additional heating and/or cooling allowance Call 1-800-DIAL DWP (342-5397).

Customers with a Teletype device hookup (TTY) may call LADWP at 1-800-HEAR-DWP (or 1-800-432-7397) to receive assistance regarding water or electric service.

For a listing of other agencies that provide information and referral services to customers in need, contact 211 LA County (previously Info Line) at 1-800-339-6993.

5. Refrigerator Exchange Program

The LA Department of Water and Power offers certain customers the opportunity to replace their old, inefficient refrigerators with a new energy saving model.

- The customer must be a current participant in the LADWP Residential Low Income Discount Rate
- The customer’s refrigerator must be at least 10 years old and be at least 14.0 cubic feet in volume.
- The outlet to which the refrigerator is connected must be grounded (3-prong)
- The customer must be willing to give up (exchange) their old refrigerator to be environmentally recycled

Call the Appliance Recycling Centers of America (ARCA) at (800) 722-9340 to set up an inspection appointment. A representative will contact you to schedule an appointment to verify that your refrigerator outlet is properly grounded. If it is not properly grounded, you will be given time to correct the situation in order to qualify for the energy efficient refrigerator.

Can I Get Phone Help if I'm Disabled?

The California Telephone Access Program provides special equipment you can get if you are hard of hearing or have another disability that makes it difficult for you to use a telephone. Call English TTY line (800) 806-4474 or Voice: (800) 806-1191

Can I Get Low Cost Phone Service?

California LifeLine is a state program that provides basic home phone service at a discount to eligible households.

To apply for California LifeLine you must call your home phone company and state you qualify for the program via Method 1 Program-Based OR Method 2 Income-Based.

1. Program-Based:
You can qualify for California LifeLine if you or another person in your household is enrolled in any one of the following public-assistance programs: Medi-Cal, Low Income Home Energy Assistance Program (LIHEAP) SSI, Federal Public Housing Assistance or Section 8, CalFresh, WIC, National School Lunch Program (NSL), CalWORKs Tribal TANF, Bureau of Indian Affairs, General Relief or Head Start Income Eligible (Tribal Only).

2. Income-Based
You can qualify for California LifeLine if your total household income is at or less than these income maximums:

<table>
<thead>
<tr>
<th>Household Size</th>
<th>Annual Income</th>
</tr>
</thead>
<tbody>
<tr>
<td>1-2 members</td>
<td>$24,000</td>
</tr>
<tr>
<td>3</td>
<td>$28,200</td>
</tr>
<tr>
<td>4</td>
<td>$34,000</td>
</tr>
<tr>
<td>Each additional</td>
<td>Add $5,800</td>
</tr>
</tbody>
</table>

Effective from 06/01/09 to 05/31/12

California LifeLine Call Center
Contact the LifeLine Call Center for general information about the California LifeLine program. Call Center's hours of operation are from 8 a.m. to 7 p.m. (Pacific Time) Monday through Friday.

English 1-866-272-0349
Spanish 1-866-272-0350
TTY 1-866-272-0358

You can get much more information including how to get a low cost cell phone at: www.californialifeline.com
Where Can I Get Help if I’m Homeless?

Unfortunately, if you are homeless in Los Angeles, there is no guarantee of housing or shelter, and the existing shelters are often full.

The LA County Housing Resource Center can assist residents in locating housing resources for affordable, special needs, and emergency housing. To access their rental listings and assistance visit www.housing.lacounty.gov or call (877) 428-8844.

We list the resources below as a guide to trying to get help.

1. Finding an Agency to Help You

If you become homeless in LA County, there are agencies that can help you find assistance:

- **Valley Area** - LA Family Housing 818-982-4092 ext 151cmccray@lafh.org
- **Pasadena and San Gabriel Valley** - Union Station Homeless Services 626-791-6601 rizell@unionstationhs.org
- **Hollywood** - The Center at Blessed Sacramento 740-504-6499 nathan@thecenterinhollywood.org
- **Downtown** - Lamp Community 213.488.9559 x 114 Hazell@lampcommunity.org
- **Westside** - Westside Shelter & Hunger Coalition 602-904-2000 or 310-314-0071 darci@westsideshelter.org
- **South LA** - Special Services for Groups (HOPICS 323-948-0444 ext 140 vlewis@hopics.org
- **Southeast Cities (Bell, Downey)** - Our Place Housing Solutions 562-416-3273 kbarnette@ourplacehousing solutions.org
- **Long Beach and South Bay** - South Bay Coalition for the Homeless (St. Peter's Presby/RPV) 310-480-2866 wilcox_nancy@sbcglobal.net

2. Shelters

- **In the Hospital**: It is illegal for the hospital to drop you off in the street after your treatment if you are homeless. The hospital discharge staff must work with you to find a safe place to go. Ask to speak to a social worker prior to your discharge.
- **Families**: If you are homeless or at risk of becoming homeless and receive or qualify for CalWORKs, you may be able to receive Homeless Assistance Money, money to help prevent eviction, or help with your rent. CalWORKs also offers a 12 month Rental Subsidy for CalWORKs and non-CalWORKs families. See CalWORKs section of the Guide for more information (pg.12-13).

- **Singles**: If you are applying for General Relief, you can get emergency shelter vouchers or eviction prevention money. See General Relief section of the Guide for more information (pg. 27).

- **Emergency Shelter**: There are over 300 privately run agencies in Los Angeles offering shelter, so we cannot list them all here. The following numbers and website are helpful:
  - **Year Round and Winter Shelters**: (800) 548-6047 for shelter locations and pick-up points. These shelters are usually operated by the City and county of Los Angeles from the beginning of November until the end of March. Some of the shelters now operate all year long.
  - **InfoLine**: Call (211) or (800) 339-6993
  - **Internet**: www.healthycity.org lists shelters and other resources by zip code for all L.A. County.
  - **Some agencies and shelters are able to offer hotel or motel vouchers** if there is no other shelter option available, or if the shelter is full for the night.

2. Shelters

- **In the Hospital**: It is illegal for the hospital to drop you off in the street after your treatment if you are homeless. The hospital discharge staff must work with you to find a safe place to go. Ask to speak to a social worker prior to your discharge.

3. Access Centers

Access Centers are also called Drop-in Centers. These agencies can refer you to shelters. They may also help you find transitional or permanent housing. Some of these agencies operate shelters or other housing programs.

- **Antelope Valley**
  - Lancaster Access Center (661) 942-2758
  - Weingart Center's Hope Row Resource Center 501 E 6th St LA 90021(213) 689-2114

- **Downtown Women’s Day Center**
  - 325 S. Los Angeles (213) 680-0600
  - VOA Drop-In Center 628 S. San Julian (213) 624-4663

- **El Monte**
  - ACHIEVE (626)444-79000
  - Hollywood and Mid City
  - PATH 340 N.Madison Ave (323) 644-2216

- **Pomona**
  - Pomona Access to Social Services 502 W. Holt (909)622-3806

- **San Pedro**
  - FISH 670 W. 9th St. (310) 831-0603

- **Long Beach**
  - New Image (562) 983-7289

- **Pasadena**
  - Union Station Foundation (626) 240-4550
  - San Fernando Valley - N. Hollywood
  - LA Family Housing 7843 Lankershim (818) 982-4091

- **Santa Monica and West Side**
  - OPC 1616 7th St. (310) 264-6646
  - St. Joseph's Service Center 204 Hampton Dr. (310) 396-6468

- **South Central L.A.**
  - WLCAG 958 E. 108th St. (323) 563-5654
  - HOP South Central Drop In 5715 S. Broadway (213) 553-1823

- **West Covina**
  - VOA West Covina Access Center 415 S. Glendora Ave (626)918-2005 by referral only
Housing

4. Housing for Health
If you or your whole family is homeless and you get medical care at one of these locations, ask for a staff person at the Social Work department. Tell them you are homeless and ask about the Housing for Health program:
• LAC USC Medical Center
• Harbor UCLA Medical Center
• Olive View Medical Center
• DHS Multi-Ambulatory Care Center
• MLK MACC High Desert Health System

Can I Get Low Cost Housing?
The federal government has a few subsidized housing programs. Each of these programs has various income and resource requirements and require you to provide information regarding your family income and makeup. It is important to document all your attempts to comply with the program requirements because you can be terminated from the program if you do not comply.

In general, there are two types of programs: project-based and voucher-based. Project-based programs are ones where the housing benefit is connected to a specific unit. Voucher-based programs are ones where the housing benefit is connected to a specific household.

1. Project-Based Programs
There are many types of project-based subsidized housing. Many of these projects advertise their availability and you can apply directly at the building or at a leasing office. Most of the time, the best way to get into this kind of housing is to go through special programs offered by community agencies that will help you get into housing when you finish the program. There is not enough project-based housing for everyone who needs it, so many of the complexes have wait lists.

We have listed three of the most common programs below. For more information about what type(s) of programs you may qualify for, you can ask a caseworker at one of the Access Centers.

Conventional Public Housing
Conventional public housing is one of the most well-known federal housing programs. The buildings that are part of this program are owned and operated by local Public Housing Authorities. These are often very large buildings or complexes and the people who work at them are government employees. Rent is usually between 30-40% of the household's income. To apply for conventional public housing, you should contact the housing complex directly.

Project-Based Section 8
For project-based Section 8, private landlords have agreed to reserve certain units for Section 8. Project-based Section 8 means that you must live in one of these assigned units to get the benefit. Unlike conventional public housing, your landlord is a private owner, not a Housing Authority.

Shelter Plus Care
Shelter Plus Care provides affordable housing and supportive services. You are required to participate in the supportive services to be part of this program. You may be eligible for this program if you are:
- Homeless,
- Have a mental illness and/or AIDS, and
- Have a substance abuse problem.

2. Voucher-Based Programs

Section 8 Vouchers
Section 8 vouchers are offered by the local government (the Housing Authority). They allow you to stay in any apartment or house where the landlord will accept them. You pay a limited portion of the rent (usually between 30-40% of your income). The Housing Authority pays the rest directly to your landlord.

You have the same rights as other tenants renting from private landlords, including any local rent control laws.

You also have additional special protections. Your landlord cannot evict you without a reason. Your landlord also has to give at least 90 days written notice if they want to stop accepting Section 8 Vouchers. When you receive a Section 8 Voucher you will have a limited time to find a landlord who will accept it, or you will have to return the voucher. Once you find a place, the Housing Authority must inspect the unit to make sure that it is up to their standards. The entire process may take up to several months.

The Section 8 Voucher waiting lists are currently closed for the city of Los Angeles, county of Los Angeles, and city of Long Beach. To find out if the waiting list is open in other cities, contact their local Housing Authority directly. You can also ask a caseworker at one of the Access Centers about any special program that can provide you a Section 8 Voucher when you complete the program.

The following agencies receive a limited number of Section 8 vouchers from HACLA through the "homeless set aside" program. If you are homeless, please try to get connected to one of the following agencies:

Alexandria House
(Women and Children) (213) 381-2649
Beyond Shelter (Under PATH)
(323) 644-2200
Coalition for Responsible Community Development (Serving youth)
(323) 521-1910
Department of Mental Health
(Mental health) (213) 251-6560
Good Shepherd Center for Homeless Women & Children
(women and children)(213) 235-1460
Harbor Interfaith Services
(Families) (310)-831-0603
LA Family Housing
(818)982-4091
Los Angeles House of Ruth
(Domestic violence victims)
(323) 266-4139
New Economics for Women
(Affordable housing, women and children)
(213) 483-2060
New Image Emergency Shelter
(Emergency shelter, individuals and families) (562) 983-7478
Palms Residential Care Facility
(Substance abuse treatment)
(323) 293-2319
Para Los Ninos
(Children and families) (213) 250-4800
PATH (323) 644-2216
Penny Lane Centers
(Shelter for Emancipated Foster Youth) (818) 892-3423
Rainbow Services (Domestic violence, women and children)
(310) 547-9343
San Fernando Valley Mental Health Center
(Adults and children with mental illness) (818) 901-4830
1. Help for Homeowners in Danger of Foreclosure

Many people who are in danger of losing their homes due to foreclosure have turned to loan modification or foreclosure “rescue” companies for help – only to realize they’ve been scammed. Anyone can become a victim of a loan modification scam. Be careful about signing any papers from groups you are not sure about.

If you are facing foreclosure and want assistance, you can contact a housing counselor for advice at:

- 888-995-HOPE [4673]
- www.makinghomeaffordable.gov

There are also local groups that are available to provide advice. Below is a list of some of the groups in Los Angeles the government has approved. For information for another city, visit the Department of Housing and Urban Development’s website at www.hud.gov.

- East LA Community Corporation (ELACC) (323) 269-4214
- Korean Churches for Community Development (213) 985-1500
- Los Angeles Neighborhood Housing Services, Inc. (888) 895-2647
- New Economics for Women (213) 483-2060
- Operation Hope, Inc. (213) 891-2900

2. Renters Living in Buildings that were Foreclosed

If you are living in a building that was foreclosed, you still have rights. The new owner must give you a 90-day notice to move in most situations. If you have a lease, you may be able to stay until the term of your lease ends. Some cities may have local rules that provide additional protection. In the City of Los Angeles, for example, you cannot be evicted from a building solely because it was foreclosed upon and there is a new owner. You should contact a local renter’s rights group for more information. (See “What Are My Rights As A Renter” on page 60).

Foster Youth

Your Housing Options

If you are in the foster care system now, or were in the system between your 16th and 19th birthdays, there are several housing options available to you. Even if you were in the juvenile probation system, but were living in a suitable placement (meaning you were placed by the court somewhere other than with your parents) between the ages of 16 or 19 – you might be able to get housing at least for a while. The system is complicated but you can call these numbers for help and advice:

- Youth Development Services (877) 694-5741
- (877) MY ILP 411
- ilponline.org
- The Alliance for Children’s Rights (213) 368-6010
- kids-alliance.org
• If you’re 16 or 17 and still in care - you may qualify for the Transitional Housing Placement Program (THPP). You must be either going to high school, working towards your GED, or attending vocational/technical training. To apply, contact your Children’s Social Worker (CSW) or Youth Development Services (YDS) Transition Resource Coordinator (TRC) who will assist you completing the application. For information call: Transitional Housing Placement Program (213) 351-0120.

• If you are in the foster care system and turn 18, you have the option to continue in care until you turn 21 years old. You can get this help if you have been placed by the court somewhere outside your parents’ home and you are there on your 18th birthday. If you chose this option, you may stay in your current home, live in a supportive transitional housing program, or move out on your own if your social worker or probation officer believe you are ready.

• If you are a former foster youth between the ages of 18 and 21 and your case closed after your 18th birthday, you may be eligible to exit and re-enter foster care as many times as you need to before you turn 21 years old- call the Alliance for Children’s Rights at (213) 368-6010 for more information.

• If you are no longer in foster care or probation, but you lived in a foster home, group home or with a relative sometime between your 16th and 19th birthday), you may be able to get help from the Transitional Housing Program (THP). They can put you in housing for up to three years. For more information please go to: http://ilponline.org/housing/THP.html, or call 213-351-0123 or 213-351-0100.

• If you aged out of foster care or probation systems after your 18th birthday, you might be able to get help from the Transitional Housing Program Plus (THPP+). You have to be between the ages of 18 and 24 and either going to school or working. You can get this help for up to two years. For more information go to http://ilponline.org/housing/THPPplus.html or call 213-351-0239.

Other resources for information if you are 18 and leaving foster care:
• The Alliance for Children’s Rights and Children’s Law Center “Know Before You Go” mobile app that shows housing providers, food, legal services, education, and employment. Search the app store on your phone for “Know Before You Go”.
• Public Counsel “My Life My Rights” website: http://www.mylifemyrights.org

What are My Rights as a Renter?

1. Groups That Can Help
There are many groups in Los Angeles that deal with landlord/tenant issues. Here are a few that may be able to provide free help or advice:
Bet Tzedek (323) 939-0506 Coalition for Economic Survival (213) 252-4411 Inner City Law Center (213) 891-2880 Inquilinos Unidos (213) 483-7497 Legal Aid Foundation of Los Angeles (800) 399-4529 L.A. Community Action Network (213) 228-0024 Neighborhood Legal Services of L.A. County (818) 986-5211 Public Counsel (213) 385-2977 Union de Vecinos (323) 908-3454
The California Department of Consumer Affairs also provides booklets and information regarding landlord/tenant law. For more information contact: (800) 952-5210 or visit www.dca.ca.gov/publications/landlordbook/index.shtml.

2. Bad Conditions
You have the right to live in a place without bad conditions.
• No holes in the wall
• Working toilets, and sinks
• Electricity should work
• Heat should work
• No rats, roaches, or other pests

If your unit has problems, you should tell your landlord about them and request that they be fixed. You should make your request in writing and keep a copy of your written request for yourself. If your landlord does not fix the problems, there are a few things you can do.

Government Agencies
County Health Department (323) 881-4015
For complaints regarding plumbing and electrical; lack of water or heat; illegal utility shutoff, in Los Angeles.
For other cities, check the phone book. If you think the conditions pose an imminent threat to your health or safety, you can ask the housing inspector to refer your case to the Urgent Repair Program.

Los Angeles County Department of Consumer Affairs (888) 700-9995
For questions regarding withholding rent, repair and deduct, and abandonment remedies, call.

Getting Your Landlord to Fix the Problem
If your landlord will not fix problems, you should give written notice of the problem, wait 30 days, and have proof of the problem. Then you have the right to repair the problem yourself and deduct the cost from your rent. It must be a problem affecting your health or safety, not just something you want to change in the apartment. If you withhold your rent, your landlord may try to evict you. It is very important that you keep copies of everything relating to the problem. You should get legal advice or support before withholding any rent. If you do not want to withhold rent, you can also go to Small Claims Court to try to get the money back. If your landlord has been cited by the Department of Building and Safety, Housing Department, or Health Department, and repairs have not been made within 60 days, you can go to Small Claims Court on your own without an attorney. The small claims judge can order the landlord to make the repairs. Ask the judge about Civil Code Section 942.4 in cases like this.
If you are looking to recover money for damaged person property, repairs that you made, or bad conditions, you can file a case in Small Claims Court for up to $10,000.

3. Rent Stabilization (Rent Control)

If you live in the city of Los Angeles in a rental unit that has two or more units on the lot, and was built on or before October 1, 1978, your unit might be under rent control. This gives you even more protections than state law. Your landlord can only evict you for a very limited number of reasons, which are in the rent control law. Your rent can only be increased by a set percentage, which the city decides. For more information contact Los Angeles Housing and Community Investment Department (866) 557-RENT www.lacity.org/ahd

You can also call the Housing and Community Investment Department to make a complaint if you think your landlord violated the rent control rules. If you are not in a rent control unit, your rent may be increased by any amount with notice if you have lived in your unit for a year or more. You can also be evicted from either a rent controlled or non-rent controlled unit for a good reason. There are special rules if you have a Section 8 voucher. Subsidized units (like Section 8 or project-based units) may have different notice periods. To best assure that you do not lose your housing, it is important to seek legal advice about your notice before the notice period has run out (expired).

When you have received a 30/60 day notice to vacate, you are still responsible for paying the rent on time. If you do not pay the rent, the landlord may proceed with a much shorter notice against you, usually a 3-day notice. Additionally, security deposits may not be used in place of last month’s rent, unless the landlord agrees to do so, in writing. For questions about these issues contact: Legal Aid Foundation of Los Angeles 800-399-4529.

Eviction Process

1. Written Notice: In most cases, you must receive a notice in writing. The most common notices are a 3-day notice to pay rent or quit, or a 30- or 60-day notice to vacate.
2. Summons & Complaint: This is the lawsuit, or Unlawful Detainer (UD). You have five days to answer it.
3. Sheriff’s 5-Day Notice to Vacate: If you don’t answer your summons and complaint or you lose in court, you will get a 5-day notice to vacate. If you do not move out, you will be locked out by the sheriff sometime after the five days.

If your case is filed in another courthouse, there may be a Self-Help Center where you can get help preparing your answer.

If you are being evicted and your case was filed at the downtown Stanley Mosk Courthouse, visit: Eviction Assistance Center (EAC) 111 North Hill St., Room 115, LA, 90011. EAC staff can assist you with filing an answer, and provide full representation in some cases, free of charge. Service is also available in Spanish.

You may also contact the following organizations for assistance with an eviction:

Legal Aid Foundation - 800-399-4529
Eviction Defense Network - 213-385-8112
Bet Tzedek - 323-939-0506
Neighborhood Legal Services (818) 896-5211

There are also organizations that offer low-cost assistance. The cost is based in part on your income and you may be able to work out a payment plan.

BASTA (213) 736-5050
Eviction Defense Network (213) 385-8112

5. Illegal Lockout

Landlords cannot lock you out without first going to court, even if you are late on paying rent. If your landlord locks you out without using the eviction process, you should immediately call LAPD. When the police respond to your call, they should show some proof that you are a tenant (receipts, ID, etc.). Ask them to tell your landlord to let you back in. If the police officer does not respond, you should call LAPD and ask to speak to the watch commander.

6. 28 Day Shuffle

If you have lived in a residential hotel for over 30 days, you are a tenant and can only be evicted through a legal eviction. You should not be asked to move rooms or leave for a few days every 28 (or 21) days. If this happens, you should file a complaint with the Los Angeles Housing Department (866) 557-RENT. If you are locked out, you should call the police and show them your receipts. If you leave voluntarily, it is not a shuffle.

7. Housing Discrimination

If you are discriminated against in trying to buy or rent property, or use services provided to other tenants, because of your race, color, religion, sex, nationality, disability, or because you are married or unmarried, or have children, call:

Southern California Housing Rights Center (213) 387-8400
California Department of Fair Employment and Housing (800) 884-1684
(800) 700-2320 (TDD Line)

Service or Assistance Animals:
The Fair Housing Act requires landlords to provide reasonable accommodations to persons with disabilities who have assistance animals. There is an exception if the specific animal in question poses a threat to others’ health or safety, or would cause substantial physical damage. If you are being discriminated against due to having a service or assistance animal, contact:

Disability Rights Legal Center www.disabilityrightslegalcenter.org
800 S. Figueroa St., #1120, LA 90017 (213) 736-1334
213-736-8310 TTD
**Guide for Non-Citizens**

If you have questions about immigration or benefits for immigrants, or the government has treated you differently just because you don’t speak English, or of the way you look or because you are from a particular country, please call one of the agencies listed on page 65 (“Help with Immigration”).

### Deferred Action

#### 1. Child Arrivals

Effective June 15, 2012, certain young people who were brought to the United States as young children, do not present a risk to national security or public safety, and meet several key criteria will be considered for relief from removal from the country or from entering into removal proceedings. Those who demonstrate that they meet the criteria will be eligible to receive deferred action for a period of two years, subject to renewal, and will be eligible to apply for work authorization.

You are possibly eligible for deferred action if you:
1. Came to the United States under the age of sixteen;
2. Have continuously resided in the United States since January 1, 2010, and were present in the United States on June 15, 2012;
3. Are currently in school, have graduated from high school, have obtained a GED certificate, or are an honorably discharged veteran of the Coast Guard or Armed Forces of the United States;
4. Have not been convicted of a felony offense, a significant misdemeanor offense, multiple misdemeanor offenses, or otherwise pose a threat to national security or public safety;
5. In November 2014, the upper age limit for this deferred action was removed by the President’s executive order.

Only those individuals who can prove through verifiable documentation that they meet these criteria will be eligible for deferred action.

For more information visit:
- **USCIS’ hotline** 1-800-375-5283
- **http://www.uscis.gov/immigrationaction**
- **ICE’s hotline** 1-888-351-4024

### 2. Undocumented Parents

Undocumented parents of U.S. citizens or legal permanent residents who have been in the U.S. for more than 5 years can request temporary relief from removal of the country, and work authorization for three years at a time. They must register with authorities, pass a background check, submit fingerprints, pay fees, and show that their child was born before November 20, 2014. This measure was announced by the President on that date. Please consult immigration groups listed on page 65 for more information.

### Can Immigrants Get Benefits?

Certain government programs are not available to all low income immigrants who are lawfully present in the U.S. However, even if you are undocumented, you can apply for CalFresh (Food Stamps) or CalWORKs for other family members who may be eligible (like for your children born in the U.S. - they are U.S. citizens). If you are an immigrant who has become a U.S. citizen through naturalization, you must be treated the same as other U.S. citizens when you apply for benefits.

**Anyone, Even if Undocumented, Can Apply for These Programs:**
- Prenatal Care
- Emergency Medi-Cal
- Minor Consent Medi-Cal
- Regional Centers
- California Children’s Services
- CHDP and CHDP Gateway
- Immunizations for kids
- WIC
- School Breakfast & Lunch
- Summer Food
- Health Care in some Counties
- Public Education
- Help from Food Pantries
- Help from Shelters
- Services from Many Non-Profit Agencies

These programs don’t have immigration requirements and if you are undocumented, you may still qualify. If anyone asks you about your immigration status, be careful. You do not need to tell anyone that you or anyone else who lives with you is undocumented. Your workers do not need to ask about your immigration status if you are not getting benefits for yourself. If they do ask you, simply tell them that you are a “not qualified” immigrant (“not qualified” is not the same as undocumented). That is all they need to know.

If a school or child care center requests your social security number on a form, you can write “none” on the form or leave it blank. They may not give the information on that form to a government agency.

### Benefits for Victims of Trafficking, Domestic Violence, and Other Serious Crimes

California law provides eligible non-citizens who are victims of trafficking, domestic violence and other serious crimes access to benefits equal to those available for refugees.

- Victims of trafficking may qualify for up to one year before they are certified by the federal government as victims or obtain T status.
- Victims of domestic violence and other serious crimes may qualify once they have applied for U status.
- You do not need a social security number to apply.

### Interpreter Help

If you speak limited English and you need to apply for benefits such as CalWORKs, Medi-Cal, GR, CAPI or CalFresh, you have the right to ask for an interpreter free of charge. The Department of Public Social Services (DPSS), the Department of Health Services (DHS), and the Social Security Administration must provide you with a worker who speaks your language or connect you to a telephone interpreter service, at no cost to you. You may also have the right to have written materials translated for you, or if the materials are in English, you have the right to have the information explained to you in your language.

DPSS now assigns a supervisor in every office to serve as the District Immigrant Liaison. You should call the District Immigrant Liaison if:
- you are denied assistance because you are not a citizen, even though you are eligible
- you do not receive a free interpreter or bilingual caseworker
- there is a delay or any other problem because you speak limited English
- Ask for the District Immigrant Liaison at the nearest welfare office, in person or by telephone (see pg. 70).
If you speak limited English and you need to apply for SSI, SSDI, or a Social Security number, the Social Security Administration is required to give you an interpreter, no matter what language you speak, whether it is at the Social Security Office or at an appointment to determine a disability.

Who Can Get Benefits?

1. Who are "Qualified" and "Non Qualified" Immigrants?
The government divides immigrants into "qualified" and "non qualified" immigrants. You have to check the guidelines for each program to see which immigrants are eligible. The names are misleading, because "Qualified" immigrants are not necessarily eligible for programs, and "Not qualified" immigrants may still be able to apply in different programs.

"Qualified" immigrants include:
- Lawful permanent residents ('green card')
- Refugees
- Asylees
- Persons granted withholding of deportation or removal
- Cuban and Haitian entrants
- Persons paroled into the US for at least one year
- Conditional entrants
- Certain spouses and children who are victims of domestic violence.

"Not Qualified" immigrants include:
- Undocumented immigrants
- Temporary Protected Status (TPS)
- Persons who are Permanently Residing Under Color of Law (PRUCOL), which means the authorities know you are here but do not plan to deport you
- Persons in the US on a non-immigrant visa
- Survivors of trafficking
- U Visa applicants and holders

2. Which Immigrants Can Get SSI?
If you are a low-income non-citizen in the U.S. who has a disability, is blind, or over 65 years old, you can get SSI if you meet all the usual requirements of the program, and you meet these conditions for your immigration status:
- You are a refugee, Amerasian immigrant, Cuban or Haitian entrant, federally certified victim of trafficking or a T visa holder, asylee, or were granted withholding of deportation/monitoring, (but only during the seven years after getting this status). If it has been more than 7 years and you do not qualify for SSI based on any other grounds, you should apply for CAPI;
- You are a "qualified immigrant" who is a current or veteran U.S. military personnel (or Filipino veteran who served under U.S. command during WWII), or the spouse or dependent child (under 18 if unmarried or under 22 if a student) of one, or the un-remarried widow or widower of one;
- You are a lawful permanent resident with credit for 40 quarters (about 10 years) of work in the U.S. You can add your work quarters with any work quarters earned by your spouse during the marriage, or that your parents earned before you were 18. However, if you entered the US on or after August 22, 1996 you cannot use your work quarters until 5 years after the date you became a "qualified" immigrant.
- You are a "qualified" immigrant who was lawfully residing in the US on August 22, 1996 and are blind or disabled. However, unlike those in the above categories you cannot qualify solely on the basis of being over 65 years old.
- If you have a sponsor, see pg 65 "What If I Have a Sponsor" about "deeming" rules.

3. Which Immigrants Can Get CAPI?
If you are an immigrant who has a disability, is blind or 65 years old or older and you are not eligible for SSI because of your immigration status, you may be able to get CAPI (Cash Assistance Program for Immigrants.)

To get CAPI you must be either:
- a "Qualified Immigrant" (see left column of this page)
- a survivor of trafficking

4. Which Immigrants Can Get CalFresh (Food Stamps)?
To get CalFresh (Food Stamps) you must be:
- A Qualified Immigrant (see left column on this page) OR
- You, your spouse or parent are a member of a Hmong or Lao tribe that provided assistance to the US during the Vietnam War era and you are lawfully present in the US.
- A survivor of trafficking or a U visa applicant or holder
- Lawful temporary resident (you have a green card but have not yet been here 5 years)
- If you have a sponsor, see pg 65 "What If I Have a Sponsor" about "deeming" rules.

5. Which Immigrants Can Get CalWORKs and GR?
Qualified immigrants, noncitizen victims of trafficking, U visa applicants and holders, and immigrants who are PRUCOL may be eligible for CalWORKs pg. 4) and General Relief (pg. 27). You must also meet the income limit and other requirements. If you have a sponsor, see pg 65 "What If I Have a Sponsor" about "deeming" rules.

6. What is Refugee Cash Assistance?
Refugees who have been in the country less than 8 months and persons who were granted asylum less than 8 months before, may be eligible for Refugee Cash Assistance (generally this is for able bodied adults without children.) Survivors of trafficking, noncitizen victims of domestic violence and other serious crimes, and U visa applicants and holders also may qualify for Refugee Cash Assistance. Call the local DPSS office listed on page 70.
7. What Health Care Programs Are Available for Immigrants?

All LA county residents, including documented and undocumented immigrants, may be able to get health care through county programs. They may also be able to receive services through Emergency Medi-Cal, Pregnancy related Medi-Cal, Minor Consent Services Medi-Cal, county mental health services, CHDP and services provided by many free and community clinics.

To be eligible for all Medi-Cal services (also known as full-scope Medi-Cal) you must be PRUCOL or a "Qualified" immigrant. See "Health Care for Children" pg. 48 for programs with no immigration restrictions.

"Qualified" immigrants, survivors of trafficking, U visa applicants and holders, and PRUCOL immigrants may be eligible for In-Home Supportive Services. CAPI (Cash Assistance Program for Immigrants) recipients may also be eligible for In-Home Supportive Services. Sponsor "deeming" may apply (see "What If I Have a Sponsor", pg. 65)

8. Public Housing

Most "qualified" immigrants and victims of trafficking are eligible for housing assistance from the U.S. Department of Housing and Urban Development (HUD) if they meet the program's other rules. HUD is a federal program; different rules apply to state and local housing programs.

You can apply for and receive HUD assistance even if one or more household members are not a citizen or "qualified" immigrant. Assistance may be calculated based on the number of citizens or eligible immigrants in the household.

1. Social Security Benefits

If you have paid into the Social Security system as a worker or had money taken out of your paycheck for this program, you may qualify for Social Security disability, retirement or survivor benefits. (See pg. 23)

To receive the benefits, you must be either lawfully present in the country now, or have been receiving benefits based on a claim filed before December 1, 1996.

You are not eligible for Social Security benefits if you have been deported, except if you have been readmitted as a lawful permanent resident. Your benefits may be suspended if you leave the U.S. for 6 months or more while still a non-citizen.

2. Social Security Numbers

To get a Social Security card that allows you to work, you must have papers showing that you are a:
- Lawful Permanent Resident ("green card holder")
- refugee, asylee, citizen of a "freely associated state" (Micronesia, Marshall Islands or Palau) or
- have an employment authorization document issued by the U.S. Citizenship and Immigration Services.

If you are lawfully in the U.S. but do not have work authorization, and need an SSN in order to get a benefit for which you are otherwise eligible, you can apply for a "non-work" SSN from a Social Security office that can be used for benefits purposes only. It is illegal to use this card for work-related purposes.

Worker's Rights

Regardless of your immigration status, you have the right to receive minimum wage, overtime and safe working conditions. You also have the right to be free from harassment and discrimination. If your rights as a worker are being violated, contact the state Labor Commissioner’s Office at (213) 897-4037 to complain. If you have legal work papers, it is illegal for employers to commit on-the-job discrimination, or deny a job because a worker is from another country.

The following groups can help if you are an immigrant worker and your employer owes you wages and has not paid you:

Asian Americans Advancing Justice 1145 Wilshire Blvd. (213) 977-7500
Bet Tzedek Legal Services (818) 769-0136
CHIRLA (day laborers and domestic workers) 2533 W. 3rd St. #101 LA (888) 624-4752
Garment Workers Center (213) 748-5866
Koreatown Immigrant Workers Alliance (KIVA) (restaurant workers) 3465 W. 8th St. LA (213) 738-9050
Legal Aid Foundation Employment Law Unit (213) 640-3954 (800) 399-4529
Maintenance Cooperation Trust Fund (janitorial workers) 1247 W. 7th St. Room 103 LA (213) 284-7758

70 LA (213) 680-4084

Neighborhood Legal Services (800) 433-6251
Pilipino Workers Center 153 Glendale Blvd. LA (213) 250-4353

Can Using Immigration Benefits Affect My Immigration Status

1. What is Public Charge?

If you are applying to become a lawful permanent resident (green card holder), using health care programs (such as Medi-Cal, In Home Supportive Services, or Healthy Families) or CalFresh/Food Stamps, will not hurt your chances of getting your green card by making you a "public charge". You might have a problem getting your green card if you have used cash welfare or long-term care (like a nursing home) paid for by Medi-Cal or other government funds. The government can deny a green card to people who are likely to become a "public charge" (meaning someone likely to rely on cash welfare or long-term care.) Officials will look at many factors, including your age, your health, your entire family's income and resources (and if you have a sponsor, their income and resources) to determine whether in the future you will be likely to need to rely on cash welfare to live. They will look at "the totality of your circumstances" and no single factor will make you a public charge.

Depending on your situation, past use of cash benefits may not count against you, for example if it was several years ago that you received the benefits or if it was only for a short period of time.

You do not have to worry about public charge if you:
- Already have a green card (unless you leave the US for more than 6 months at a time and try to re-enter)
- Are applying for citizenship
- Are applying for asylum
- Are applying for a T visa
- Are applying for a green card based on: asylee or refugee status
- T or U visa status
- Having lived in the US since before 1972

Victims of domestic violence who file a self-petition under the Violence Against Women Act (VAWA) are subject to the "public charge" test. However, they can use all benefits, including cash welfare, without affecting this decision.
U visa applicants can get a public charge “waiver,” and there is no public charge test when U visa holders apply for a green card.

The government should not demand that you repay any welfare you correctly received as a condition of giving you legal status. If this happens, call one of the immigrant advocate agencies.

2. What If I Have A Sponsor?

Most new immigrants entering into the US through family members are required to have a sponsor sign an “affidavit of support” form. This form is a promise to the government that the sponsor will help to provide economic support for any sponsored immigrants. Not all immigrants are required to have a sponsor, for example refugees and asylees.

If you are a sponsored immigrant and you want to apply for certain government benefits, your sponsor’s income and resources may be added to yours in determining your eligibility for benefits (this is called “deeming”). This deeming rule makes the income of many immigrants too high to qualify for benefits. There is no deeming if you are applying for health care programs, only for CalFresh/Food Stamps and cash assistance programs.

Deeming does not apply to some migrants, including: refugees, asylees, parolees, battered spouses who have filed a “self-petition” for an immigrant visa, or certain other immigrants who are not required to have a sponsor such as T and U visa holders. In addition, there are exceptions to the deeming rule, depending on which program you are applying for and when you entered the US. For example, if you are a victim of domestic violence or would go hungry or homeless without assistance, you may be exempt from deeming. However, you will still have to meet the other eligibility requirements.

If you have a question or problem with “sponsor deeming” contact one of the agencies listed at the end of this page.

Help with Immigration Questions

Asian Americans Advancing Justice (213) 977-7500
Center for Human Rights & Constitutional Law (213) 388-8693
Carecen (Central American Refugee Center) 2845 W. 7th St. 90005 (213) 385-7800
Center for Human Rights and Constitutional Law 256 S. Occidental Blvd., L.A. 90057 (213) 388-8693
CHIRLA (Coalition for Humane Immigrant Rights of Los Angeles)(213) 353-1333
El Rescate 1501 W 8th St., Suite 100 LA 90017 (213) 387-3284
Legal Aid Foundation of Los Angeles (213) 640-3883
Neighborhood Legal Services of Los Angeles County (818) 896 5211 13327 Van Nuys Blvd., Pacoima 91331
Los Angeles County Bar Immigration Project (213) 485-1872 www.lacba.org
LA Gay and Lesbian Center Legal Services Department (323)993-7670www.lagaycenter.org
Immigration Center for Women and Children (213) 614-1165 www.icwclaw.org/

The National Immigration Law Center has resources on benefits for immigrants at: www.nilc.org/benefitsca.html
Hearings and Complaints

If your benefits have been denied or cut unfairly, you should fight it! Don’t be intimidated. Request a fair hearing immediately whenever your rights are threatened. Don’t forget deadlines. Remember you only have ninety days to appeal a denial or cut of a county program such as CalWORKs and CalFRESH. However, if the county fails to send out a notice, or the notice is inadequate the ninety days to appeal do not begin to run out.

In a fair hearing, you will have a chance to explain your case, and after hearing your side and the county office’s side, an impartial judge will decide who wins. Sometimes, just requesting a hearing will resolve your problem. If a county employee tells you that you don’t have a case, insist on a hearing and seek out legal advice. [See Good Advice, p. 68]

If you disagree with this action and you want to make such a claim under Welfare and Institutions Code section 10967 and want to get your benefits reinstated.

For CalFresh, Medi-Cal, CalWORKs, and IHSS

1. Fixing Your Problem Without A Hearing
The most reliable way to fix a problem with your benefits is to ask for a hearing (see below).

Below are some tips that may allow you to fix your benefits problem without going to hearing. However, please remember the following two things: (1) You only have ninety days to ask for a hearing once you receive notice of a county action and (2) None of the steps below are the same as actually requesting a hearing, so keep an eye on your deadline and remember to request a hearing if the steps below don’t fix your problem.

If you are not satisfied with any decision made about your case, complain to your worker’s supervisor. Besides filing for a hearing, call the district HELPLine for your DPSS office (see the list of HELPLines on page 68), or walk up to the HELPLine Information Worker in the lobby of the DPSS office and ask for help. You can also call the Central HELPLine at 1-877-481-1044.

If this fails, ask to speak to the deputy director and, after that, the director of the DPSS office. However, you may file for a fair hearing to challenge an action (see below) at any time. If you need help, call an advocate, legal aid organization, your county supervisor, or a local legislator. If you act fast, and keep at it, you may win.

2. Asking For A Hearing
You must be sent a special notice 10 days before any action is taken that will reduce or stop your benefits. The notice must explain clearly the reasons for the action and list the regulations that support this action. If you disagree with this action and you formally request a fair hearing before the date the action takes effect, then under most circumstances your aid will not be cut until the hearing (unless it ends for another reason, like your certification period ended.) If you did not appeal on time because the notice was not clear and you did not understand what action was being taken until after the action became effective, you can ask the judge at the hearing for your benefits to continue at the unreduced rate. You should seek help if you want to make such a claim.

To request the fair hearing, you may fill out and return the form on the back of the notice or write a letter doing so in your own words. Send your request to:
Appeals and State Hearing Section
P.O. Box 18890
Los Angeles, CA 90018.

Please keep a copy of your hearing request and, if possible, mail the request with a postal tracking number so you can prove that your hearing request was received on time.

You can also request a hearing online at: www.dhs.ca.gov or by calling the toll-free number set up for this purpose, (800) 952-5253. You should call early: they open at 7:30 AM. The line is often busy, so keep trying. Remember to take the name of the person you spoke with.

You cannot make a hearing request with your worker or any other County staff. You must either call the 800 number or send the written request to the Appeals and State Hearing Section P.O. Box. But if you do mistakenly request a hearing from your worker or local county staff, they are bound to forward your hearing request to the right place. Even if you made your hearing request to the wrong place like the county offices, if you did it on time, you are still entitled for your aid to continue at the old rate until the hearing.

The state will send you a notice with the date, time, and place of your hearing. Usually, this happens within 3 or 4 weeks.
Currently, in the CalFresh program, any time before the hearing, you can request a delay ("postponement") of the hearing in order to have more time to prepare or to get an attorney or advocate. In other aid programs, or to get a second postponement, you must have a very good reason ("good cause"). You will also receive the name, telephone number and address of the Appeals Hearing Specialist (AHS) assigned to your case. The AHS will present the county’s side at the hearing. Again, if you asked for a hearing early enough, your benefits are not supposed to be cut before your hearing. This is called “Aid Paid Pending.” If you were supposed to get Aid Paid Pending, and you did not, tell your AHS. He or she is supposed to help you.

The AHS will also write up the county’s side before the hearing in a position statement. You have the right to get a copy of the county’s position statement. If you ask the AHS for the position statement, you may get it up to two days before the hearing. Even if you don’t ask for the position statement, the AHS must have it ready on the day of the hearing for you to read. If the AHS does not have it ready for you to see before your hearing, you may ask the judge to postpone the hearing to give you more time to read the statement. This postponement does not count against you. You may have the statement of position faxed to you or go to the Appeals and State Hearings Office and pick it up. It will tell you what the county’s position and evidence are before the hearing so you can prepare your case.

If you are disabled, or homebound, hearings can be held by phone, at the county office or in your home, but you must ask for this in your hearing request. If you forget to request it on the hearing request, send a letter to the same P.O. Box address where you sent your hearing request as soon as possible.

You must also be provided with an interpreter for the hearing, at no cost, if English is not your first language or if you have a disability, such as a hearing impairment, that limits your ability to communicate with others.

After your hearing, call the toll-free number and complain if the state takes longer than 60 days to give you a decision about CalFresh, or 90 days if the hearing was about CalWORKs or Medi-Cal. These are usually the maximum amounts of time that are permitted to decide such cases (starting on the date of your request for hearing). If your hearing decision takes longer than 90 days and you have never continued it, you must get extra money for the delay, if the decision is granted in your favor.

If you do not win the hearing, you can request a rehearing. You may also appeal the ALJ’s decision to the Superior Court. You should contact a lawyer experienced in this area to file such an appeal. You have one year from the date of the decision to file a case in court.

The Social Security Administration must mail you a notice before they make any changes to your benefits. If you disagree with the proposed action, request a “Reconsideration” immediately by going to the Social Security office and filling out a “Request for Reconsideration” form. Make sure that you get a copy of the form stamped by Social Security with the date it was filed. You may also download the form from Social Security’s website ssa.gov and mailing in the form to your local Social Security office with a postal tracking number to prove when you mailed it. Make sure you check the box for an informal conference. If you do not check this box, you will just get a review of the paper work and the decision is not likely to change. The county DPSS will help with reconsiderations and appeals if you are a GR recipient attempting to get on to SSI or Social Security.

If you request a Reconsideration within the time period given on the notice (usually 10 days but sometimes 30 days for an overpayment), your benefits can continue unchanged until you receive a reconsideration decision. If Social Security paid you too much, and they want to take money out of your benefits check, you can request a waiver if it wasn’t your fault and it would be hard for you to pay the money back. You can get the waiver form from your local Social Security office or online from ssa.gov. If you owe the money, you can also request that the money be collected back at a lower rate per month.

In SSDI cases, you must fill out a separate form asking for your aid to continue. If you miss the deadline given in the notice, the aid will be cut or reduced, but you still have 60 days from the date you received the notice to request a Reconsideration. After 60 days, if you have “Good Cause” for missing the deadline, you may be allowed to file a Reconsideration. If you win the Reconsideration, your lost benefits will be paid back to you.

There are three types of Reconsideration: case review, informal, or formal conference. It is best to ask for an informal conference. However, if your application for SSDI or SSI is denied for medical reasons, you can usually only get a case review. Some SSA offices require that you file for a hearing with a judge to appeal any decision related to disability. Check with your local SSA office before appealing.

If your reconsideration or waiver is denied, you may request a hearing before an Administrative Law Judge (ALJ) with the Office of Disability Adjudication and Review (ODAR). You have to request a hearing within 60 days of receiving an unfavorable reconsideration decision. You can request a hearing after 60 days if you have good cause. At the hearing you may appear in person, submit new evidence, examine the evidence used in making the determination or decision under review, and present and question witnesses. You should always review your hearing office file well before your hearing date because you may need time to obtain additional evidence. This is particularly true if it is a hearing where your disability is at issue. The ALJ who holds the hearing may ask you questions. He or she will write a decision based on the hearing record. If you waive your right to appear at the hearing, the ALJ will make a decision based on the evidence that is already in the file. It is never a good idea to let the judge make a decision without hearing from you particularly if the issue is whether you are disabled.

When you are receiving SSI or SSDI and then start working, your benefits could be cut if you are working and earning too much. (This is known as “Substantial Gains Activity” or “SGA”). Ten days after you get the tentative notice, a notice that your payments will stop, you can request a reconsideration immediately. To protect yourself, it is best to make a new application at the same time you request a Reconsideration. In 2015 SGA is $1090 a month ($1820 if you are blind).

If you are considering going back to work, Call Disability Rights California at (800) 776-5746 and ask for their booklet, “Disability and Work.” You can get this online on the Social Security website, www.ssa.gov.
Legal Aid

You can get free legal help with problems involving all the programs in this guide or with such issues as divorce, separation, child support, custody, and consumer rights. To qualify for free legal services that are federally-funded, your income must be low (around the level of people who qualify for CalWORKs).

The following are some of the leading legal and casework services programs in our county:

Legal Aid Foundation of L.A.
800-399-4LAW (4529) www.lafla.org
TDD for deaf callers 310-393 7734
Central L.A. (213) 640-3881
1550 W. 8th St. at Union
East L.A. (213) 640-3883
5228 Whittier Blvd.
South L.A. (213) 640-3884
8601 S. Broadway
West L.A. (323) 801-7989
1102 S. Crenshaw
Santa Monica (310) 899-6200
1640 5th St #124.
Long Beach (562) 435-3501
110 Pine Ave., Ste. 420.

Neighborhood Legal Services of Los Angeles County www.nls-la.org
(800) 433-6251.
Health Consumer Center, 800-896-3203
13327 Van Nuys Blvd. Pacoima (Multi-lingual. Covers all of San Fernando Valley, San Gabriel Valley, Pomona, Antelope Valley, Glendale and Burbank.

American Civil Liberties Union—Southern California
(213) 977-9500 www.aclu-sc.org
Voice mail for intake (213)977-5253

AIDS Project Los Angeles
(213) 201-1600. www.apla.org. 611 S. Kingsley Dr.; 639 N. Fairfax Ave. (Benefits, insurance, counseling, case management, food distribution, home health care, dental clinic, housing, jobs)

Alliance for Children’s Rights
(213) 368-6010. www.kids-alliance.org
3333 Wilshire Blvd #550 LA (legal and social services, foster care, adoption, guardianships, health access)

Asian Americans Advancing Justice
(213) 977-7500 www.apalc.org
1145 Wilshire Blvd., L.A. (multi-lingual services: family law, domestic violence, government benefits, elder law, housing rights, consumer and debtor relief, garment worker rights, anti-discrimination county-wide)

Bet Tzedek Legal Service L.A.
(323) 939-0506 www.bettzedek.org
145 S. Fairfax, #200 L.A. or
(818) 769-0136 12821 Victory Blvd, North Hollywood (multilingual services: seniors, nursing home advocacy, housing conditions, Outreach through senior centers county-wide)

Center for Health Care Rights
www.healthcarerights.org
(213) 383-4519.
520 S. Lafayette Park Place #214, L.A. (Medicare issues)

Coalition for Economic Survival (213) 252-4411.
5114 Shatto Pl. Ste. 270
(tenants organizing and rights)www.nkla.sppsr.ucla.edu/ces

Community Legal Services www.legal-aid.com (800) 834-5001. 725 W. Rosecrans Ave., Compton and 11834 E. Firestone, Norwalk (Orange County & Southeast L.A. County)

HALSA—HIV & AIDS Legal Services Alliance (213) 201-1640. 3550 Wilshire #750. (APLA, Public Counsel, County Bar, AIDS Service Center & LA Gay & Lesbian Service Center. Public benefits, discrimination, employment, housing, immigration, wills, guardianship, adoption)

Harriett Buhai Center for Family Law
www.hbcfl.org (213) 388-7515. 4262 Wilshire Blvd #201 L.A.

Inner City Law Center (213) 891-2880
1325 E. 7th St. L.A. (homeless issues, veterans, housing conditions, GR)

Maternal and Child Health Access
(213) 749-4261.1111 W. 6th St. #400 L.A. (Medi-Cal & CalFresh)

Mental Health Advocacy Services
325 Wilshire Blvd, LA, Ste. 902 90010
(213) 389-2077
((SSI, discrimination, access)

Disability Rights California
www.disabilityrightsca.org
350 S Bixel St, Suite 290, L.A. (800) 776-5746 (800) 781-4546 TTY
(Human rights for people with disabilities, institutions and hospitals; abuse and neglect, government benefits)

Public Counsel www.publiccounsel.org
(213) 385-2977. 610 S. Ardmore Ave.
(Child care provider support, children’s rights, adoption of foster children, consumer scams, juvenile justice, homelessness, immigration asylum)

Disability Rights Legal Center www.disabilityrightslc.org
800 S. Figueroa St., #1120, L.A. 90017 (213) 736-1334
213-736-8310 TTD

Women Helping Women Services (323) 655-3807 (Counseling, information and referral for many problems)

Financial Help

These groups provide services only if they have funds available.

Beyond Shelter (Rent/Eviction funds)
Downtown: (213) 624-3370
Mid-Wilshire and South LA (323) 644-2200

Catholic Charities (213) 251-3400

Jewish Free Loan (interest free loans and flexible payback: serves all people) (213) 761-8830

Labor Community Services (one-time bill payment and financial aid if money available) 213-985-1987

Pregnancy and Adoption

Adoption HotLine (800) 697-4444
Beverly Hills Birthing (323) 462-6423
Birth Control Helpline (800) 942-1054
El Nido Family Center (323) 971-7360
Pregnancy HotLine (800) 848-5683
St. Anne’s Maternity (213) 381-2931
1. Child and Elder Abuse

Child Abuse: (800) 540-4000 (Report abuse or exploitation of a child to the County)

Elder Abuse: (800) 992-1660 (Report abuse or exploitation of a disabled adult or elder to the County)

2. Domestic Violence and Rape

If you are a victim or a friend of yours is a victim of domestic violence (abuse) or rape you should call to get help. Protect yourself and your children, seek help and deal with violence. Most of the following hotlines are 24 hour and have multi-lingual capability.

(800) 585-6231. TDD for deaf callers (800) 787-3224
(213) 626-3393 (310) 547-9343.
(310) 392-8381 (323) 655-3807
(562) 402-4888 (626) 793-3385
(818) 886-0453 (909) 626-4357

Center for the Pacific-Asian Family
(323) 653-4042 or (800) 399-3940
“A Safe Way Out” (800) 978-3600

What is Abuse?
Abuse can be anything that hurts you:
• Physical abuse (hitting, punching, shoving, using weapons or threats of physical harm)
• Any kind of forced sexual activity with any adult or child
• Threats of assault or sexual assault
• Yelling at you
• Threatening to kidnap the children
• Keeping you from friends or relatives
• Making you account for all your time
• Denying or neglecting food or medical care
• Controlling the money
• Harassing you at your job
• Following you around wherever you go.

Restraining Orders
Legal aid agencies listed on the previous page can help you get a restraining order against the abuser. A restraining order can be obtained at the Superior Courthouse at 111 N. Hill St. in downtown LA or at your local court. If you file at the downtown courthouse, call the Domestic Violence Counseling Project (213) 624-3665. Local police or sheriff officers can issue 3-day emergency restraining orders if called to the scene of a battering incident.

Almost all of the courts in Los Angeles have domestic violence clinics where they will help anyone, regardless of income, to get a temporary restraining order against an abuser.

Immigrants
Low income immigrants who are victims of domestic violence may be able to legalize their immigration status without relying on their abuser, and may be able to get government benefits to help them escape abusive situations.

For free help, contact:
Asian Americans Advancing Justice
(213) 977-7500
Legal Aid (800) 399-4LAW (4529).

Hate Crimes

In California, a hate crime is any criminal act or attempted criminal act against a person or place based on the victim’s actual or perceived race, nationality, religion, sexual orientation, disability, gender, or status as homeless. Hate crimes include threats of violence that look like they can be carried out and any act which results in injury. If you or someone you know becomes victim of a hate crime:

• Seek medical attention for any injuries, even if you consider them minor. Keep copies of all medical records.
• Contact the police as soon as possible. Tell them you have been victim of a hate crime.
• Keep copies of all documents signed or received and write down the name of the police or sheriff’s officer who took your report.
• Document the hate crime providing as much detail as possible.
• Take photos of any injuries sustained or damage to property. Contact a legal service agency (see previous page) or

Center for Human Rights & Constitution- al Law (213) 388-8693
Coalition for Humane Immigrant Rights of Los Angeles (888) 624-4752
Los Angeles Gay & Lesbian Center (800) 373-2227 or (323) 993-7677
Muslim Public Affairs Council (323) 258-6722
Society of Christian Leadership Conference (323) 903-7691
So. CA Indian Center (213) 387-5772

If You Just Left Prison

Friends Outside (626) 795-7607

Variety of services to families of jail and prison inmates.
Community Coalition:
Ex-Offender Task Force (323) 750-9087
Chrysalis (for jobs)
• Los Angeles (213) 895-7777
• Santa Monica (310) 392-4117
<table>
<thead>
<tr>
<th>Department of Public Social Services</th>
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<tbody>
<tr>
<td><strong>70</strong> METRO SPECIAL (GR, FS, MC)</td>
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<tr>
<td>2707 S. Grand Ave., LA 90007</td>
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<tr>
<td>* (866) 613-3777</td>
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<tr>
<td><strong>82</strong> WEST VALLEY (CW,FS,MC)</td>
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<tr>
<td>349 W. Butterfield Rd., Montclair 91761</td>
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<td>* (866) 613-3777</td>
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<td><strong>31</strong> SOUTH FAMILY (CW, FS, MC)</td>
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<td>17600-B Santa Fe Ave., Rancho Dom. 90221</td>
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<td>* (866) 613-3777</td>
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<td><strong>32</strong> SAN FERNANDO (GR,FS)</td>
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<td>9188 Glendora Blvd., L.A. 90044</td>
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<tr>
<td>* (866) 613-3777</td>
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<td><strong>33</strong> EAST AV. KILO 35, Lancaster 93535</td>
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<td>67 LANCASTER GENERAL (GR)</td>
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<td>3300 S. Lancaster Ave., Lancaster, 93535</td>
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<td>* (866) 613-3777</td>
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<td><strong>27</strong> SOUTH CENTRAL (CW,FS,MC)</td>
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<tr>
<td>7160 S. Central Ave., L.A. 90004</td>
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<td>* (866) 613-3777</td>
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<td><strong>41</strong> ROBERT B. EWTON BLVD.</td>
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<td>211 E. Alondra Blvd., Compton 91342</td>
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<td>* (866) 613-3777</td>
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<td><strong>34</strong> LANCASTER (CW,FS,MC)</td>
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<td>349-B East Ave. K6, Lancaster 93535</td>
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<td>* (866) 613-3777</td>
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<td><strong>12</strong> EXPOSITION PARK (CW,FS,MC)</td>
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<td>5445 E. Olympic Blvd., L.A.</td>
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<td>* (866) 613-3777</td>
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<td><strong>10</strong> WILSHIRE SPECIAL (GR,FS)</td>
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<tr>
<td>2411 S. Valentine St., L.A. 90063</td>
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<td>* (866) 613-3777</td>
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<td><strong>08</strong> SOUTHWEST SPECIAL (GR,FS)</td>
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<td>1819 W. 120th St., L.A. 90047</td>
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<td>* (866) 613-3777</td>
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<td><strong>02</strong> GLENDALE (CW,FS,MC)</td>
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<tr>
<td>4680 San Fernando Rd., Glendale</td>
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<tr>
<td>(818) 546-6100 or (818)546-6200</td>
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<td><strong>04</strong> EL MONTE (CW,FS,MC)</td>
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<td>3350 Aerojet Ave. El Monte 91731</td>
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<td>* (866) 613-3777</td>
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<td><strong>03</strong> PASADENA (CW,GR,FS,MC)</td>
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<td>955 N. Lake Ave., Pasadena 91104</td>
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<td>* (866) 613-3777</td>
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<td><strong>05</strong> BELVEDERE (CW,FS,MC)</td>
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<tr>
<td>5445 Whittier Blvd. LA 90022</td>
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<td>(323) 727-4542</td>
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<td><strong>06</strong> CUDAHY (CW,FS,MC)</td>
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<tr>
<td>8130 S. Atlantic Ave. Cudahy 90201</td>
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<td>* (866) 613-3777</td>
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<td><strong>07</strong> SOUTH SPECIAL (GR,FS)</td>
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<td>17600-B Santa Fe Ave., Rancho Dom. 90221</td>
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<td>* (866) 613-3777</td>
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<td><strong>11</strong> EAST VALLEY (CW,FS,MC)</td>
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<td>14545 Lanark St., Panorama City</td>
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<td>* (866) 613-3777</td>
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<td><strong>13</strong> METRO FAMILY (CW)</td>
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<td>14545 Lanark St., Panorama City</td>
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<td>* (866) 613-3777</td>
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<td><strong>14</strong> CIVIC CENTER (GR,FS,MC)</td>
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<td>813 E. Fourth Place. L.A. 90013</td>
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<td>* (866) 613-3777</td>
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<td><strong>15</strong> METRO EAST (CW,GR,FS)</td>
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<td>2855 E. Olympic Blvd., L.A.</td>
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<td><strong>17</strong> FLORENCE (CW,FS,MC)</td>
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<td>1740 E. Gage Ave., L.A. 90001</td>
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<td>* (866) 613-3777</td>
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<td><strong>20</strong> SAN GABRIEL VALLEY (CW,FS,MC)</td>
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<td>* (866) 613-3777</td>
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<td><strong>26</strong> COMPTON (CW,FS,MC)</td>
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<td><strong>22</strong> CAMP PERRY RD.</td>
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<td>2233 Camp Perry Rd., Canyon</td>
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<td><strong>51</strong> SANTA CLARITA (CW,FS,MC)</td>
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<td>1101 W. Proctor Blvd., Santa Clar. 91380</td>
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<td>* (866) 613-3777</td>
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<td><strong>60</strong> RANCHO PARQUE (CW,FS,MC)</td>
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<td>1110 W. Proctor Blvd., L.A.</td>
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<td><strong>28</strong> NORMANDY (CW,GR)</td>
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<td>40 Normandy St., L.A. 90044</td>
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<td><strong>19</strong> ALIAGA ST.</td>
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<td>1830 S. Aliaga St., El Monte 91731</td>
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<td><strong>36</strong> POMONA (CW,GR,FS,MC)</td>
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<td>2040 W. Holt Ave., Pomona 91768</td>
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<td>* (866) 613-3777</td>
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<td><strong>37</strong> EAST AV. KILO 10, Lancaster 93535</td>
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<td><strong>38</strong> METRO NORTH (CW,FS,MC)</td>
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<td><strong>39</strong> METRO FAMILY (CW)</td>
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<td><strong>40</strong> NORWALK (CW,GR,FS,MC)</td>
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<tr>
<td>400 N. Loma Vista St., Norwalk 90650</td>
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<tr>
<td>(818) 546-6100 or (818)546-6200</td>
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**When you speak to a Customer Service Representative, you must have your ten (10) digit Customer ID number and six (6) digit Personal Identification Number (PIN). If you don't have the Customer ID/PIN, request one when you speak to a Customer Service Representative.**

The Customer Service Center (CSC) answers questions, provides case information, and updates case records of participants.

You must have your ten (10) digit Customer ID number and six (6) digit Personal Identification Number (PIN). If you don't have the Customer ID/PIN, request one when you speak to a Customer Service Representative.
At these Department of Public Social Services offices you can apply for these programs: CW=CalWORKs, FS=Food Stamps, GR=General Relief, MC=Medi-Cal.

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1. Mail complete form to: HALA- 961 S. Mariposa, Los Angeles, CA 90006
2. Email to: orders@hungeractionla.org (scan complete form or specify in email: quantity, language of books, and shipping address)
3. Order by Phone: (213) 388-8228 (If you are leaving a message, specify: quantity, language of books, and shipping address)
4. Fax complete form to: (213) 388-8448

Name:__________________________________________________________
Organization
(If there is one): ______________________________________________
Billing Address: __________________________________________________City/ Zip: ____________
Shipping Address
(If Different): _________________________________________________City/Zip: ____________
Phone: ____________________________E-Mail: ________________________