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

Welfare & Health Services

37th Edition 2017
Los Angeles County

Hunger Action LA
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. There are other problems with obtaining assistance: rumors and false information that discourage eligible people from even trying to get help in Los Angeles County and local governments, the programs and services described in the People’s Guide are always being debated. 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.

In 2017, the President and Congress are discussing even more huge budget cuts that would greatly reduce cash and food assistance, our rights to health care, workers’ rights, immigrant rights, and our right to a clean environment.

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.lwvlosangeles.org/guidegov-ern.html

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

Spanish translation: Eliza Fraga, Elizabeth Medrano

DISCLAIMER: Hunger Action Los Angeles (HALA) and other contributors to this book are not responsible for the action, conduct, treatment you receive, and/or quality of service of any private (non-government) agencies listed in this book and their staff. Government agencies have their own complaint procedures (see pg. 65) Also, phone numbers and other important information change: this information was accurate as of January 2017.

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.healthy.city

- 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 www.cfpa.net
  California Partnership www.california-partnership.org/contact
  Coalition for Humane Immigrant Rights of Los Angeles (213)353-1333
  Community Coalition (323) 750-9087 cocosouthla.org
  Community Health Councils (323) 295-9372 www.chc-inc.org
  Health Access 818-480-3262 www.health-access.org
  L.A. Alliance for a New Economy (213) 977-9400 www.laane.org
  L.A. Community Action Network (213) 228-0024 canpress.org
  Legal Aid Foundation of Los Angeles (800) 399-4LAW
  Maternal & Child Health Access (213) 749-4261 www.mchaccess.org
  Neighborhood Legal Services of Los Angeles (800) 433-6251.
**Contents**

### Income, Jobs, & Training:

- **CalWorks** .............4  
  Cash and other aid for families with children under 19
- **Job & Career Training** ...... 14
- **Worker’s Rights and Unemployment** .............. 15  
  Unemployment, worker’s rights, and aid if you’re temporarily disabled
- **Tax Credits** .............19  
  Extra money for workers and renters
- **Child Care & Education** ......20  
  Assistance for working parents
- **Foster Care** .............22
- **Social Security,**  
  **SSI and CAPI** ..........23
- **Veterans** .............27
- **General Relief** ........ 27  
  Cash aid for single adults
- **Transportation** ..........31  
  Bus passes, affordable car insurance, help for cyclists

### Food:

- **CalFresh (Food Stamps)** ....32  
  Assistance to buy more food.
- **Free & Low Cost Food** ....36  
  Food pantries, meals for seniors, community gardens
- **WIC** .............38  
  Nutrition assistance for mothers, infants and children
- **Child Nutrition** ..........39  
  Free meals for children

### Health Care:

- **Your New Health Care Rights** ..................40
- **Medi-Cal** .........41  
  Medical assistance for low income people
- **Health Care for Children** ....48
- **Free & Low Cost Health Care** ..................49  
  Health care you can get if you don’t qualify for Medi-Cal: plus, mental health, regional centers, In Home Supportive Services, and long term care
- **Medicare** ..........53  
  Health care for retirees, their dependents, and people with disabilities

### Housing and Utilities:

- **Utilities and Phone** ..........54  
  Help with utility bills and special phone equipment for the disabled
- **Housing** ..........56  
  Low cost housing, renter assistance for seniors, renter’s rights

### Guides for Further Help:

- **Guide for Non-Citizens** ..........61
- **Hearings and Complaints** ..........65  
  How to get the benefits you are entitled to
- **Good Advice** ..........68  
  Legal Aid and crisis resources
- **Welfare Offices** ..........70

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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 Beserra Roybal FSC  
  (323) 526-9301  
  TDD/TTY (323) 526-3822  
  El Centro de Ayuda Corporation  
  (323) 265-9228

- **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  
  Pacoima (818) 896-7776

- **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  
  TDD/TTY (213) 473-3788  
  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 3910 Oakwood Avenue (323) 953-7356
CalWORKs (California Work, Opportunity and Responsibility to Kids) 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 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 may also be eligible to Medi-Cal for health care and CalFresh to help you buy food.

What To Bring When You Apply

When applying for CalWORKs, bring the following documents listed below with you. If you lack some of them, go ahead and apply, and get a list of documents to be brought in later. If you aren’t able to get the verification that is requested, ask the worker to help you.

- Identification with your name and current address on it. This can be a birth certificate, driver’s license, California ID card
- Social Security Number or Card (or proof of application for the cards)
- Proof of income (like check stubs, a W2, or copy of your tax return) and resources (like a bank statement)
- Proof that you live in the county (a document that has your name and an address on it) for each person on the application
- Proof that you live in the county (a document that has your name and an address on it) for each person on the application
- If you lack ID, you can also fill out a form called “PA 853 Affidavit” and swear that you are who you say you are
- Proof of citizenship, alien or immigration status for each person on the application
- Proof of your housing situation (rent receipts, lease agreement, etc.)
- Auto payment papers and registration
- Letters from a doctor if anyone in the household is pregnant, disabled, has a special medical need or has a special diet
- Any papers having to do with marriage, divorce, child support, or other circumstances that apply to your family.

How Do I Qualify?

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

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.dpssbenefits.lacounty.gov

YourBenefitsNow! is a website 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 will try to get you all the cash aid, food aid and other benefits for which you are eligible.

At times, 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. Insist on speaking to someone fluent in your language (DPSS must provide a free interpreter) or call a Legal Aid office. (see page 65 Hearings and Complaints.)

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.

To be qualified your resources must be less than $2,250. 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.

Money you make from working and unemployment counts as income. SSI payments, most student loans, tax refunds and Earned Income Credit don’t count. If your child is under age 19, your child’s income may not count if the student exemption rules are met. Loans from friends may be counted if there is no repayment agreement on file.

Table: Monthly Income Limits

<table>
<thead>
<tr>
<th># of people</th>
<th>Gross Income Limit</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>$636</td>
</tr>
<tr>
<td>2</td>
<td>$1,042</td>
</tr>
<tr>
<td>3</td>
<td>$1,292</td>
</tr>
<tr>
<td>4</td>
<td>$1,533</td>
</tr>
<tr>
<td>5</td>
<td>$1,750</td>
</tr>
<tr>
<td>6</td>
<td>$1,968</td>
</tr>
<tr>
<td>7</td>
<td>$2,163</td>
</tr>
<tr>
<td>8</td>
<td>$2,354</td>
</tr>
<tr>
<td>9</td>
<td>$2,554</td>
</tr>
<tr>
<td>10</td>
<td>$2,772</td>
</tr>
<tr>
<td>Over 10</td>
<td>Add $25 for each extra person</td>
</tr>
</tbody>
</table>

Money you make from working and unemployment counts as income. SSI payments, most student loans, tax refunds and Earned Income Credit don’t count. If your child is under age 19, your child’s income may not count if the student exemption rules are met. Loans from friends may be counted if there is no repayment agreement on file.

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.)
CalWORKs divides people who get cash aid into “exempt” and “non-exempt” recipients. You are considered “exempt” if you are getting disability payments such as In-Home Supportive Services, SSI/SSP, State Disability Insurance, SSDI, Temporary Workers’Comp and Temporary Disability Indemnity.

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. Make sure you are getting the correct earned income deductions.

### Maximum Aid Payments
(As of October 1, 2016)

<table>
<thead>
<tr>
<th># of people</th>
<th>“Nonexempt” Grant</th>
<th>“Exempt” Grant</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>$ 355</td>
<td>$ 392</td>
</tr>
<tr>
<td>2</td>
<td>$ 577</td>
<td>$ 645</td>
</tr>
<tr>
<td>3</td>
<td>$ 714</td>
<td>$ 799</td>
</tr>
<tr>
<td>4</td>
<td>$ 852</td>
<td>$ 949</td>
</tr>
<tr>
<td>5</td>
<td>$ 968</td>
<td>$ 1080</td>
</tr>
<tr>
<td>6</td>
<td>$1087</td>
<td>$1214</td>
</tr>
<tr>
<td>7</td>
<td>$1195</td>
<td>$1334</td>
</tr>
<tr>
<td>8</td>
<td>$1301</td>
<td>$1454</td>
</tr>
<tr>
<td>9</td>
<td>$1407</td>
<td>$1571</td>
</tr>
<tr>
<td>10 or more</td>
<td>$1511</td>
<td>$1689</td>
</tr>
</tbody>
</table>

Before 2017, in the CalWORKs program you would usually not get more cash aid for children born while your family is getting CalWORKs (with some exceptions).
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.

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.

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.

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 Semi-Annual Eligibility Income Report (SAR 7). It says "Eligibility Status Report" on the top of the form. Also once a year, you will fill out what is called a "redetermination." 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.

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

- Address changes
- Fleeing felons
- 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 (non-exempt) has an IRT of $1,654.00 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 $1,654.00.
You can either drop your SAR-7 off at the DPSS office, and get a dated receipt to prove that you turned it in on time; or you can mail it in the postage-paid envelope. You can also 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. 65).

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 for CalFresh (food stamps.)

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. DPSS 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, twelve months, or longer, 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, and/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 (866) 901-3212 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 65 Hearings And Complaints.)

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. Children Age 16 to 19 Must Attend School or Participate in Welfare-to-Work

If your child is over 16 and not attending school (reported as “chronic truant” by the School Attendance Review Board), or is not participating in welfare to work activities without good cause, only that child’s cash aid will be cut. The cash grant will be restored when proof is provided to DPSS that the child is attending school regularly 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 activities.
The WtW programs in Los Angeles County are called GAIN (“Greater Avenues for Independence”) and REP (Refugee Employment Program). 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 (“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 WtW 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:
• subsidized or unsubsidized employment
• education and/or training
• mental health, substance abuse, and/or domestic abuse services.

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 a 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 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.

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.
• You have a “good cause” reason.
• You are sanctioned.

1. Weekly Participation Hours
Currently, 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</td>
<td>20</td>
</tr>
<tr>
<td>Single-adult with no children under 6 years old</td>
<td>30</td>
</tr>
<tr>
<td>Two-parent families (hours may be combined between both parents)</td>
<td>35</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.
• Non-parent relative, or caretaker of a child who is a dependent, or a ward of the court, or at risk of being placed in foster care. DPSS must agree that this harms your ability to participate or work.
• One time only, you can use the exemption of caring for a child from newborn to 23 months old.

If you do not qualify for an exemption, you may have good cause that excuses you from doing something GAIN asks you to do. The 48-month time limit is not stopped by good cause (see section below on domestic violence for exceptions).

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, or stop child support collections. The domestic violence incident can be something that happened in the past or in the present.
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.

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.

Services To Help You

In addition to cash aid you get from CalWORKs, if you participate in GAIN or REP, you can get help with transportation and work-related expenses both before and after you reach the CalWORKs 48-month time limit. If you are excused from participating in GAIN but wish to volunteer or are currently attending school, you might be eligible to get work-related and transportation services.

Services you may be eligible for are:

• Child care (see pg. 20)

• Transportation: includes bus fare, mileage payment, and payment for alternative methods of transportation such as shuttle, vanpool, carpool, MetroLink, and taxi, and assistance with major car repairs through the Vehicle Diagnosis and Repair Program (VDRP). Through VDRP, GAIN/REP participants can receive a payment of up to $50 for a vehicle diagnosis and $1,500 in a two-year period for vehicle repair to fix your car to allow you to get to work or attend your Welfare-to-Work activity.

To find out the right mode of transportation, your GAIN/REP worker must determine the lowest cost to the county, while finding the best combination of transportation modes that will keep the round trip travel time less than two hours using public transportation. If it takes you more than two hours round trip by public transportation to travel from your home to your WW activity, including walking time, then DPSS can pay you mileage. The current rate is .51¢ a mile for the first 500 miles per month, and 15¢ per mile for mileage over 500 miles per month. The mileage rate, however, can change from time to time. Parking expenses can be reimbursed when the parking expense is necessary to allow you to attend a WW activity and/or employment.

Transportation for Children:
Transportation for children under 13 years of age is provided when it is necessary and will help the participant continue in their WW activity, and/or obtain or retain employment even if they are not being aided but remain in the household.

A child over 13 years of age is eligible when:
• The parents are receiving specialized supportive services (mental health, domestic violence, substance use disorder)
• A child is not able to provide self-care.

Ancillary/Work-Related payments include help to pay for tools, books, supplies, fees, clothing, uniforms, car seat/booster, tattoo removal services, and other necessary costs specifically required to participate in an approved WW activity or to accept a job or keep a job.

In addition, Ancillary/Work-Related services are extended to participants who need reasonable accommodations due to a disability which limits their ability to participate in his/her approved WW activity and/or employment.

Tuition and school fees in the nature of tuition are not considered ancillary expenses.

To request Ancillary/Work-Related Expenses you must provide written verification from your provider or employer. If written verification is not available, your worker can assist by contacting the provider/employer, with your authorization, to obtain verification.

You must provide receipts within 10 days from the date the payment was issued.

Domestic Violence Counseling and Protection: Survivors of domestic violence can get special help through programs including emergency housing and safety planning, counseling, parenting classes, and legal services that provide help with restraining orders and divorces. You do not need a police report or other documents. Your sworn statement is enough proof. Everything you tell the DPSS eligibility worker or GAIN worker will be kept secret to the extent of the law.

Mental Health Services: You should receive a mental health screening during orientation.

Also, a DPSS worker can suggest to you that you go to a mental health evaluation if they think you have a mental health barrier to finding or keeping a job. You can also ask for a mental health evaluation anytime by calling your eligibility worker or GAIN worker.

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.

Substance Use Disorder Services: You can ask for help with substance use disorder treatment at any time by calling your eligibility worker or GAIN worker. If you find it difficult to obtain or keep a job because of problems with alcohol or drugs, the DPSS worker can refer you to a substance use disorder clinical assessment. You may receive help through residential or day treatment: individual, group or family counseling; rehabilitation services: and health care information and referrals. You can continue getting these services as part of your Welfare-to-Work requirements while receiving cash aid.

You can go to a substance use disorder treatment program as the welfare to work activity. You have the right to refuse any substance use disorder treatment program as the welfare-to-work activity; however, if you do not go to a treatment program, you cannot use substance use disorder as a reason to not work or not participate in GAIN or REP.

Homeless Assistance, Moving Assistance, Rental Assistance, and Housing Relocation: see pages 12 and 13.
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 you will receive training 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 are working 20/30/35 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 receive 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.65).

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. If You Are Working, What’s Next?

Post-Employment Services (PES) is available to employed GAIN/REP participants with an open CalWORKs case during their entire CalWORKs 48-month eligibility if they are meeting the required hours of participation of 20/30/35 hours per week. PES is also available to CalWORKs terminated participants if employed the minimum participation requirements for their case (20/30/35 hours per week) for up to 12 months from their CalWORKs termination date.
PES will help you get information, resources, and tools you need to keep your job, improve career possibilities, and become financially independent while earning a good living before reaching your CalWORKs 48-month time limit.

Types of services offered through PES:
- Career assessment
- Job retention services
- Educational development
- Job skills training
- Earned Income Tax Credit (EITC) counseling
- Life skills instruction
- Supportive services (childcare, transportation, and ancillary/work-related expenses)
- Rapid re-employment services
- Mentoring
- Mental Health, Domestic Violence, Substance Use Disorder
- PES continued case management
- Referrals to homeless assistance programs and services

To continue receiving PES, you will be required to provide ongoing verification of employment to your case manager.

After CalWORKs case ends: GAIN/REP participants who remain employed (20/30/35 hours per week) can continue receiving PES for up to 12 months from the CalWORKs termination date. PES for former CalWORKs participants include supportive services for the employment activity (including a one-time $300 clothing allowance) and the educational/training activity.

To get more information on PES, contact your GAIN or REP case manager as soon as you find employment, or you can call toll free (877) 292-4246.

Transitional CalFresh and Medi-Cal: You can continue to get Medi-Cal and CalFresh (food stamps) when you leave CalWORKs, without having to show that you are eligible for CalFresh, again. You can get these transitional CalFresh benefits for up to 5 months after leaving CalWORKs. If your CalWORKs case did not close or was closed due to an ineligible cause, you cannot get the transitional CalFresh benefits.

### Time Limit Rules

Most adults can only receive 48 months (4 years) of cash aid from CalWORKs for their whole life. This does not have to be 48 months in a row. After the adult has been aided 48 months, their part of the grant is cut, but their children can still get aid.

You should apply for an exemption to “stop the clock” for any months which should not have been counted in your 48-month limit, which include the reasons listed below under “Clock Stoppers.”. Your request should be in writing, but can be verbal. If all aided adults or relative caregivers in the household permanently fit into one of the groups listed, their clock should not run at all.

DPSS has to send you a written decision within 15 days of the request (unless something happens that is beyond DPSS 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 or Exemptions

In a family with two aided parents, both adults must meet one of the clock stoppers listed here for the month not to count.

- **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
- **Any month that you have been granted an exemption from participation and the cash aid time limit based on caring for a child who is 0-23 months of age** (This exemption is only available once).
- **Age 60 or over**—Any month the parent or caretaker relative is 60 years or older.
- **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.
- **Domestic Violence**—Any month you cannot participate in CalWORKs as a result of domestic abuse. You do not have to currently be in an abuse situation. You also qualify if you are suffering from the effects of past abuse and the effects limit your ability to go to GAIN or work. You only need to tell your worker (“self-declare”) to qualify; no other proof, not even a police report, is required. Your time will be extended for as long as you continue to suffer from the effects of the abuse or are in danger of more violence.
- **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.
- **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.
- **Impairment**—Not able to go to GAIN or employment because of an “impairment,” for example a learning disability or chronic mental illness. You cannot have broken any GAIN rules to qualify for this, or you must show that you were in GAIN for either six months straight or a total of six months over two years.
- **There are No Local Jobs to Accommodate Your Disabilities** is an exemption
- **Child Support Repaid**—Any month that your grant is fully repaid by child support collected by the County does not count against you. Ask the County Child Support Division (866) 901-3212 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 yet have a GED or high school diploma, and either participate in or are excused from CalLearn 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.
What Are The Penalties if I Don't Follow the Rules?

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

DPSS must try to contact you and give you a chance to comply. If you fail to comply, DPSS will send you a “Notice of Action” no sooner than 30 days before the cut in aid will take place. They will give you an appointment within 20 days to discuss the problem with your worker. It is very important for you to go to this meeting or call your worker to explain. You also have the right to ask for a fair hearing if you can’t work it out with your worker.

Your part of the grant will be cut until DPSS agrees that you are complying with the rules. Your cash aid cannot be cut if you have good cause for refusing to comply.

“Good cause” includes:

- You are homeless
- You are a victim of domestic violence
- 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
- Transportation is not available to your job or GAIN activity
- There was discrimination at the job or training offered in terms of age, sex, race, religion, national origin, or physical or mental disability
- The job or job offer exceeded the daily or weekly hours of work customary for that job
- You can only get to the activity by walking and you have to walk more than two miles round trip, not counting the distance needed to take children to school or child care
- 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.

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

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.

Help with Housing

If your family is homeless, or has received a notice to pay rent 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 have not 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.

You can receive this aid every 12 months if you qualify. However, a family can get help more than once in the same 12 month period if the cause is:

- Domestic violence by a spouse, partner, or roommate
- A physical or mental illness (but not including drug addiction or alcoholism) and you have a written doctor’s note.
- Your home is uninhabitable (for example, because of a fire)
- Homelessness directly caused by a State or Federal declared natural disaster

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 hotel or 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.

Additional 14 Days: If you are homeless and have used up the 16 consecutive days of temporary shelter money, you may be able to get an additional 14 days of temporary shelter money if you are receiving

Teen Parents

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

If you live at home, your parents’ income will be counted against you and your child when you apply.
2. Money for 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 if you have received a pay rent or quit notice due to a financial hardship (not for any other lease or contract violation.) 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 out” 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 $3,000 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)

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 you 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 $2,500 as a one time 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. 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 $2,500).

5. 4-Month Rental Assistance (RA) Program

If you just found a permanent place to live with the help of Homeless Assistance, Moving Assistance, or DPSS administered eviction prevention funds, RA can help you get up to $500 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). If you are participating in the GAIN Family Stabilization Program, you may receive up to eight consecutive months of RA. The payments are made out to the landlord.

6. Housing Relocation Program (HRP)

If you are not homeless but need to relocate to accept a job offer of 20 or more hours per week or keep a job you already have, the HRP may provide you with a one-time only relocation payment of up to $1,500 for moving expenses: truck rental, security deposits (including last month’s rent and any legal payment, fee, deposit or charge that is required by a landlord as a condition of assuming occupancy), and utility deposits. An additional $405 is also available to you if the place you are going to rent does not have a stove and/or refrigerator. To get this money, you must:

- Be receiving CalWORKs and be meeting the WtW requirement by either being employed full time or enrolled in GAIN. AND
- You have a need to relocate to access employment, child care, or transportation (based on the documented one hour one-way travel time/distance to/from work, child, or both). The place you rent cannot be more than 60% of your total monthly household income.

7. Homeless Family Solutions System

If you are not eligible or have exhausted any of the DPSS homeless programs, a DPSS Homeless Case Manager can refer you to a Family Solutions Center to receive additional services, if otherwise eligible.
Hundreds of organizations in LA County offer help in job training. Beware of private employment agencies that charge 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 Development Boards

Workforce Development Board offices use government money to help you with job training and placement. Local WIB offices, also called One-Stop WorkSource Centers or America’s Job Centers of California, 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
lacitywlb@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., 90707 562-923-8100 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, 91006 818-240-1000 www.glendale.edu
Long Beach- 4902 E. Carson St. 562-933-4111 www.lbcc.edu
Los Angeles (9 districts) 770 Wilshire Blvd 213-891-2000 www.lacctc.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.lacrrop.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 (ages16-24) (800) 733-5627
- Homeboy Industries (323) 526-1254

Chrysalis can help 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.gov/Programs/ClientAssistanceProgram.htm

Antelope Valley: (661) 945-3502
Van Nuys / Foothill: (818) 901-5024
Glendale: (818) 551-2141
Santa Clarita: (661) 799-1020
West Valley: (818) 569-4302
El Monte: (626) 572-2366
Pasadena: (626) 304-8300
West Covina: (626) 813-7662
Greater Los Angeles: (213) 736-3904
Belt: (323) 771-0866
Mid Cities Branch (323) 565-1860
Culver City: (310) 559-6140
Westchester: (323) 298-2500
South Bay: (562) 422-8325
Bay Cities: (310) 793-1157
Compton Branch: (310) 637-1151
Culver City: (310) 559-6140
Westchester: (323) 298-2501
Bay Cities: (310) 793-8610
Compton Branch: (310) 637-1151
Long Beach: (562) 422-8325
Pacific Gateway: (310) 217-6955
City of Commerce: (323) 720-4073
East Los Angeles: (323) 223-2315
Norwalk: (562) 864-8521
Worker's Rights and Unemployment

This chapter tells you where to get assistance if you lose your job: how to get help if you have problems on the job: and where to get aid if you are temporarily disabled and cannot work.

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, or 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.

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.

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.launionaflio.org

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 will increase to $10.50 per hour on January 1, 2017 for businesses with 26 or more employees ($10 hour for other businesses.) 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
Worker's Rights

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

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

California law now provides that employees can accrue one hour of paid sick leave for every 30 hours they work. The law 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

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

Asian Americans Advancing Justice 1145 Wilshire Blvd. (213) 977-7500
Bet Tzedek Legal Services (818) 769-0136
Black Worker Center 5350 S. Crenshaw (323) 752-7287
CHIRLA 2533 W. 3rd Street # 101 (888) 624-4752
CLEAN Carwash Campaign 516 W. Vernon Ave (323) 644-1630 www.cleancarwashcampaign.org
Garment Workers Center (213) 748-5866
Koreatown Immigrant Workers Alliance (KIWA) 3465 W. 8th St. (213) 738-9050
Legal Aid Foundation – Employment Law Unit (213) 640-3954 & (800) 399-4529
Maintenance Cooperation Trust Fund (janitors) 1247 W. 7th St.,#103 (213) 284-7758
Neighborhood Legal Services (800) 433-6251
9to5 Los Angeles Working Women provides free counseling and resources (213) 201-7029
Pilipino Workers Center 153 Glendale Blvd. (213) 250-4353
Restaurant Opportunities Center 1730 W Olympic Blvd # 300, Los Angeles, CA 90015 (213) 380-1020
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.

You must also ask your doctor to complete and sign the “Physician Practitioner’s Certificate.” If your doctor will mail your completed certificate to EDD, provide him/her with an envelope addressed to the SDI office listed below. Mail your claim no earlier than 9 days but no later than 49 days after the first day you became disabled. Mail the completed, signed “Claim Statement of Employee” together with the completed, signed “Physician Practitioner’s Certificate” to:

- State Disability Insurance
  P.O. Box 10402
  Van Nuys, CA 91410-0402
  OR
- State Disability Insurance
  P. O. Box 513096
  Los Angeles, CA 90051-1096
- File online: www.edd.ca.gov

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.

When your claim is received, the SDI office will notify you of your weekly benefit amount and request any additional information needed to determine your eligibility. If you meet all requirements, EDD will provide you with a debit card for your disability payments. The first seven days of your claim is a waiting period for which no benefits are paid.

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).
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 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 who are injured and 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.
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 2016 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>$53,505</td>
<td>$6,269</td>
</tr>
<tr>
<td>Unmarried with 3 + children</td>
<td>$47,955</td>
<td></td>
</tr>
<tr>
<td>Married with 2 children</td>
<td>$50,198</td>
<td>$5,572</td>
</tr>
<tr>
<td>Unmarried with 2 children</td>
<td>$44,648</td>
<td></td>
</tr>
<tr>
<td>Married with one child</td>
<td>$44,846</td>
<td>$3,373</td>
</tr>
<tr>
<td>Unmarried with 1 child</td>
<td>$39,296</td>
<td></td>
</tr>
<tr>
<td>Married couple no children</td>
<td>$20,430</td>
<td>$506</td>
</tr>
<tr>
<td>Single workers (aged 25 - 64) with no children</td>
<td>$14,880</td>
<td></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. New State Earned Income Credit

To qualify for the new California Earned Income Credit, you must complete a 540 or 540 EZ form, and have income that is reported on a W2. One person in a family without children can have an income up to $6,580 to qualify for a benefit of $214. A family with one child can earn up to $9,880 to qualify and receive up to $1,428. A family with 2 or more children can earn up to $13,870 to qualify, and can receive up to $2,358 for 2 children, or up to $2,653 for 3 or more children.

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. For both the federal and state credits, you must have a social security number or an Individual Taxpayer Identification Number (ITIN). You must have income from work and must provide the social security number of the child or dependent that is receiving care, and the name, address, taxpayer identification or social security number for the person or agency providing the care.

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

4. 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 $50 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

5. Health Care Tax Credit

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.
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.

3. Choosing Quality Child Care

Choosing a provider. If you decide the referrals are not good choices, you may 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 reimburse for child care provided 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.

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.

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 an R&R or APP agency. Your child care request will be approved or denied within 4 business days of the APP agency 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.

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.

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.

To determine whether you may be eligible for subsidized 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 quality child care
- Issue child care reimbursements to child care providers

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 an R&R or APP agency. Your child care request will be approved or denied within 4 business days of the APP agency 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 Reimbursements to Child Care Providers are Made

A Provider Payment Request will be mailed each month 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. Reimbursements are then made directly to your child care provider. If the reimbursement 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 APP 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, you may 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 reimburse for child care provided 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.

4. CalWORKs Child Care Stages

There are three “Stages” of child care. You should not have any problems as you move from one “Stage” to another. You may be eligible for child care while you are participating in an approved welfare-to-work activity (work, school, training, appointments with GAIN, or specialized supportive services like domestic violence counseling, mental health or substance use disorder treatment appointments).

Stage One
The child care agency may reimburse for any qualified child care that you choose for up to six months or until your welfare-to-work activity and child care are both stable. Teen parents may also get Stage One Child Care, as long as they are actively participating in the Cal-Learn Program. You may be eligible for child care for up to 30 days prior to the date of your child care request: call the Child Care hotline at (877) 244-5399 for more information.

Stage Two
After both your welfare-to-work activity and child care are stable, the child care agency will move you to Stage Two. You may stay in Stage Two while you are receiving CalWORKs and are in an approved welfare-to-work activity. You may be eligible for Stage Two Child Care for up to 24 months after you have been terminated from CalWORKs cash aid.

Stage Three
“Stage Three” Child Care is subject to budget cuts in Sacramento and applicants may be placed on waiting lists. Stage Three Child Care is available for low income working parents who do not receive CalWORKs. You may qualify for Stage Three Child Care if your income is below the levels in the following chart:

<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>
</tr>
<tr>
<td>3</td>
<td>$3,518</td>
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<td>4</td>
<td>$3,908</td>
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<td>5</td>
<td>$4,534</td>
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<td>6</td>
<td>$5,159</td>
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<td>7</td>
<td>$5,276</td>
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<td>8</td>
<td>$5,394</td>
</tr>
<tr>
<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.

What Are My Rights?

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.

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

Connections for Children (310) 452-3325
Santa Monica, Beach Cities, Culver City

Crystal Stairs, Inc. (888)543-7247
South Los Angeles, Inglewood, Hawthorne, Gardena, Watts, Long Beach, San Pedro, Bellflower, Cerritos, Norwalk

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

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

Pathways (213) 427-2700
Hollywood, Downtown, Silver Lake

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

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

City of Norwalk (562) 462-1713

Drew Child Development Corporation CalWORKs (310) 638-8108- Gardena

International Institute of Los Angeles (323) 224-3800- Boyle Heights

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.) you may be eligible for either federal foster care “Youakim” or state foster care “Approved Relative Caregiver (ARC)” benefits. For both Youakim or ARC benefits, your home does not have to be licensed by the state, but it must meet the same standards as for licensing. ARC benefits do not include a “specialized care rate”

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>$707</td>
</tr>
<tr>
<td>5-8</td>
<td>$765</td>
</tr>
<tr>
<td>9-11</td>
<td>$805</td>
</tr>
<tr>
<td>12-14</td>
<td>$843</td>
</tr>
<tr>
<td>15 &amp; older</td>
<td>$883</td>
</tr>
</tbody>
</table>

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.

Some 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.

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 an unrelated legal guardian, you may receive CalFresh/food stamps, depending on your income.

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.childsworld.ca.gov
or call: (877) 846-1602
If you are going out of care see “Foster Youth Housing Options” on page 59

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.
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 child under age 18, or age 19 if s/he is still in high school;
- An adult child who was disabled before age 22, never married, and has not worked what is considered “substantial gainful employment”;
- 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 on the worker’s record 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.) SSI has no work history requirements.

The Social Security Administration provides a good description of SSI 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. To qualify for SSI however your total income cannot be more than $20 over the SSI maximum benefit. SSI grant amounts differ depending on 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 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.

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 absent parent if you are caring for a child
- If you are blind or disabled, any income 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.
• Up to $2000 equity value for household goods and personal belongings
• There are many other resources not counted: you should consult Legal Aid.

If you have too much money or other resources that puts 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?

#### 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>$895</td>
</tr>
<tr>
<td>Disabled person 18 or over</td>
<td>$895</td>
</tr>
<tr>
<td>Single blind person any age</td>
<td>$952</td>
</tr>
<tr>
<td>Couple, both disabled or aged</td>
<td>$1,510</td>
</tr>
<tr>
<td>Couple, both blind</td>
<td>$1,661</td>
</tr>
<tr>
<td>Disabled person under 18</td>
<td>$800</td>
</tr>
<tr>
<td>One person living in a licensed Board &amp; Care facility($132 for that person’s private use)</td>
<td>$1,158</td>
</tr>
</tbody>
</table>

Effective as of January 2017; rates change each year

#### 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 52.)

#### 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 your fair share 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.

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. Also tell Social Security if you move/lose housing or if you no longer have access to cooking facilities.

If you are living with someone else, who is paying all or a part of the expenses for your food or shelter, and you have an agreement to pay them back once you begin receiving SSI, be sure to tell Social Security (at the time you apply for SSI benefits.) This signed written agreement should say that you will pay your share of the food and shelter expenses for each month you receive back SSI payments. 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. You can contact legal aid for help writing this agreement so your back SSI benefits are not reduced.

A single person can get a $1,145.00 (as of 2016) 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 Congressperson and ask for a staff person who can help.

### How Do I Apply?

See page 26, “Where to Apply for Social Security or SSI,” Come in, or call (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 have problems with any of this call Legal Aid right away.

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. You can also get this form in the office or on the Internet. 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 or SSDI because of disability or blindness)
• Proof of U.S. citizenship or eligible non-citizen status
What Are My Rights?

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. If you receive GR while waiting for your SSI to be approved, your retroactive SSI check will be reduced by the amount of GR you received.

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 65 “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.

What Is CAPI?

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. (See pg. 62 “Which Immigrants can get CAPI?” and pg. 64 “What If I Have a Sponsor” for important information about “deeming”)

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 possibly In Home Supportive Services (IHSS) and CalFresh/Food Stamps (see pg. 32). You will have to apply for these benefits separately.

1. How to Apply

To apply for CAPI, go to the Metro North DPSS Office at 2601 Wilshire Blvd., Los Angeles 90057, or to any DPSS public contact offices (see page 70). To receive a CAPI application by mail, you may call the Customer Service Center at (866) 613-3777. 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. 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 free help from a non-profit community organization.
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. VetsGo511.com is a helpful website with many resources for veterans.

Can Vets Get Cash Aid?

The Department of Veterans Affairs (VA) has two income benefits for veterans. Veterans with an Other Than Honorable or Bad Conduct Discharge, may still be eligible for VA Benefits.

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 basic amount of Compensation depends on the severity of the medical condition, and ranges from $133 to $2,906 per month for veterans without dependents.

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 $1,07 Veterans with dependents can get more Compensation and Pension.

NOTE: If you served during wartime and are receiving less than $1,072 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?

The VA's "Welcome Center" offers housing resources and emergency housing for veterans. The Welcome Center is located on the VA Campus at 11301 Wilshire Blvd, Building 257, in West Los Angeles.

Subsidized Permanent Housing - The VA has limited HUD-VASH subsidized housing vouchers for homeless veterans. In order to get HUD-VASH, a veteran must be eligible for VA Healthcare. If you are not VA Healthcare Eligible, you may be eligible for a special Section 8 Housing Choice Voucher for veterans. Visit a VA Medical Center or the VA Welcome Center to apply.

General Relief

General Relief (GR) is a cash assistance program provided by the County of Los Angeles for individuals who are not eligible for other federal or State cash assistance programs, such as CalWORKs, Supplemental Security Income (SSI), and Disability Insurance Benefits (DIB). The GR Program is managed by Los Angeles County Department of Public Social Services (DPSS).

Can I Get GR Cash Aid?

1. Basic Requirements

To get GR, you must live in L.A. County for at least 15 days and intend to remain here permanently. 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/her income will be considered as income in determining your eligibility to receive GR benefits.

If your spouse's income is SSI, his/her income will not be used to determine your GR eligibility. If you have been a victim of domestic violence, DPSS may not have to consider your spouse's income. (See page 69, Domestic Violence.)

2. Time Limits

If you are able to work, DPSS will classify you as "employable." "Employable" 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," and "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 most you can get in cash aid per month is $221.

In addition to the cash aid, you can get:

- 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 (800)-427-8700
- 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)
2. Emergency Benefits
When you apply for GR, you may be eligible to receive the following emergency benefits:

- **Emergency Housing** - If you are homeless and need emergency housing, tell the person who interviews you at the DPSS office and you may receive hotel vouchers for up to two weeks. A small portion of the cost of the voucher ($4.35 per night) will be deducted from the first month of GR benefits issued. If you take the vouchers but do not use them, DPSS will still take the money out of your first GR benefits issued. To stop that you must ask in writing to cancel the voucher. You can also 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 benefits issued.

- **Aid to Prevent Eviction** - You can get up to $272 to stop an eviction. You need a letter from your landlord that says: 1) You did not pay your rent this month or last month and 2) He/she will not evict you if DPSS pays the $272. The money will be paid directly to your landlord.

- **Aid for Utilities** - 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 from the utility company that the cash aid will stop the shut-off.

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 may be less or 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
You may apply for GR benefits by going to a district office, by mail, or fax.

- To apply in person, go to the closest DPSS office to complete a GR application (see page 70 for a list of Welfare Offices).
- To apply by mail or fax, you may download and print the Application for General Relief (ABP 898-1) by visiting the Department’s Your Benefits Now (YBN) website: [dpssbenefits.lacounty.gov](http://dpssbenefits.lacounty.gov)

Once you have filled out your application and forms, you may fax it to (310) 215-8220 or mail to:

**Department of Public Social Services**
P.O. Box 1580
Inglewood, CA 90308-1580
ATTN: GR APPLICATION

A worker will contact you to schedule an appointment at a GR office within five business days of receipt of your application. You may also bring your completed application to your nearest GR District Office.

If you visit a GR District Office, be prepared. Remember that you have the right to apply that day. Tell the worker that you need GR. The worker will help you go through the application process. Bring with you identification and 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 benefits pending an investigation. You can appeal this decision with your worker if you do not agree.

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 an ID during the 60 days.

Make sure that you give your worker a reliable address and telephone/message number 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 correct address and telephone/message number is important so DPSS can get in touch with you and you can get notices from them.

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 District 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 have a disability, 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 if you need assistance with the SSI application process.

Due to a Physical Disability or Condition
If you have a physical disability or condition that prevents you from working, tell your worker when you apply for GR. You will need to be assessed by a medical health professional to determine if you are unable to work. You may provide verification of a
physical health evaluation by:
• If you are currently receiving treatment from your own physician or medical provider, you can have him/her complete a Physical Health Assessment for General Relief form (ABP 1676-1) to verify your disability or condition. You may request these forms from your worker or download them from the YBN website at dpssbenefits.lacounty.gov.

OR
• A statement from a private doctor on the clinic/health center letterhead is also acceptable as long as it provides the duration of the disability and whether the condition prevents you from working full-time in sedentary work related activities.

The doctor will evaluate your physical health to determine if you have an impairment that prevents you from participating in sedentary work-related activities. If you are determined to be unable to work, the GR Program will consider you “Unemployable.” Your “Unemployable” designation will exempt you from some sanctions, work and other program requirements.

If you are determined to be able to work, you will be referred to the County’s employment preparation program called GROW, where you will have an opportunity to take advantage of the different services GROW offers to prepare you for employment. (Examples: General Education Diploma, Short-Term training, Vocational Assessment).

Due to a Mental Health Disability or Condition
If you have a mental health disability or condition that prevents you from working, tell your worker when you apply for GR. You will need to be evaluated by a mental health professional to determine if you are unable to work. You may provide verification of a mental health evaluation by:
• If you are currently receiving treatment from your own mental health provider, you can have him/her complete a Mental Health Assessment for General Relief form (ABP 1676-3). You may request these forms from your worker or download them from the YBN website at dpssbenefits.lacounty.gov.

A statement from a private doctor on the clinic/health center letterhead is also acceptable as long as it provides the duration of the disability and whether the condition prevents you from working full-time in sedentary work related activities.

OR
• If you do not have a mental health provider, let your worker know. Your worker will refer you to a Department of Mental Health (DMH) Clinician located at GR district offices for an assessment. Take any medications, prescriptions, or other proof about your disability to your disability assessment appointment.

If you are determined to be unable to work due to your mental health disability, the GR Program will consider you as “Needs Special Assistance” (NSA). NSA applicants are approved for GR promptly and are given priority service. “NSA” participants are exempt from work requirements and some program requirements.

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

3. If You Need Assistance
You can request assistance at any time during the GR application process or if you are unable to meet GR Program requirements. If you need a modification or accommodation due to a disability, DPSS will provide you a reasonable accommodation. For example, if you cannot read or write, DPSS will help you complete any necessary forms.

If you need help applying, during the GR application process or meeting GR Program requirements due to a disability, you may request a Reasonable Modification:
• From any employee at a DPSS office;
• By calling the ADA hotline at (844) 586-5550 or 562-908-8374; OR
• Writing a letter asking for a Reasonable Modification or filling out the Request for Reasonable Modification form (ADA PUB 2). You can download the ADA PUB 2 form from the DPSS ADA website located at:
dpss.lacounty.gov/wps/portal/dpss/main/programs-and-services/civilrights/ada and mail it to:
DPSS ADA Title II Coordinator
12860 Crossroads Parkway South
City of Industry, CA 91746

GR Requirements
1. If You Are Able to Work
If you are able to work, DPSS will consider you an “Employable” individual. An Employable individual may receive GR cash aid for 9 months in any 12-month period. If you are employable, you will be required to:
• Complete 6 job searches at application
• Register with the Employment Development Department (“EDD”). You will have to apply for unemployment benefits if you appear eligible for these benefits.
• Participate in GROW program 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 schedule for another date and time. Make sure to contact your GROW worker. GROW provides 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 are currently no work requirements for the CalFresh/Food Stamps program in LA County.

2. If You Are “Unemployable” or "Needs Special Assistance"
If you cannot work due to a health condition, you must obtain verification of your health status from your doctor (see If You Think You Are Unable to Work section). "Unemployable" and "Needs Special Assistance" individuals can get cash aid for their period of disability. and are exempt from many GR requirements.

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 schedule a follow-up visit with your primary care doctor or request an appointment with a DMH Clinician. You must sign a release (ABP 1676-2 or ABP 1676-4 GRMH) that gives your doctor permission to release your medical/mental health information to DPSS. You may request these forms from your worker or download them from the YBN website at dpssbenefits.lacounty.gov.

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

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 Public Health.

If you are assessed to be chemically dependent you must enroll in a treatment program (Mandatory Substance Use Disorder Recovery Program) in order to receive GR.

If you fail to comply with the Mandatory Substance Use Disorder 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 Use Disorder Recovery Program but are considered “employable” and in a residential treatment program, you are not required to register for work or complete a job search. However, 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 LA form every three months. This Is Very, Very, Very IMPORTANT! On the QR-7 LA, 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 GR cash aid for the next three months will be based on the information you list on your QR-7 LA. If you do not report income on your QR-7 LA when you received income, you will be charged an overpayment. An overpayment is when you receive GR when you were not eligible to receive it. If an overpayment occurs, you will have to pay the GR cash aid that was overpaid to you. 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.

5. GR Time Limits

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 DPSS made a mistake and took too much money from your first SSI check, you can ask for a fair hearing (see Hearings and Complaints pg. 65).

What Are My Rights?

1. Good Cause

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.

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 $10 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.

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. You can take documents or witnesses to support your case to your hearing appointment if you want. 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 if it is determined you willfully did not comply with a GR requirement, 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.
Transportation

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 1 1/4” full face photo (no hats, sunglasses or bandannas.)

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.

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 (R RTP).

Rider Relief coupon booklets include six months of coupons.

Rider Relief coupons are accepted by:: Antelope Valley Transit Agency, Big Blue Bus, Culver City Bus Lines, Torrance Transit, LADOT, MTA, Santa Clarita Transit, Foothill Transit, Long Beach Transit, Montebello Bus Lines, and Norwalk Transit.

Adolescents 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 rttp-info@hsala.org
If you live anywhere else contact:
FAME Assistance Corporation
323.730.7715 rttpinfo@famecorporations.org

4. Other Transportation Help

Help for Stranded or Runaways to Get Home: Runaways (800) 786-2929
Air Travel Assistance for Patients Needing Medical Aid: Angel’s Flight West (888) 426-2643

Help with Smog Check

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>
</thead>
<tbody>
<tr>
<td>1</td>
<td>$43,400</td>
</tr>
<tr>
<td>2</td>
<td>$34,750</td>
</tr>
<tr>
<td>3</td>
<td>$29,700</td>
</tr>
<tr>
<td>4</td>
<td>$20,200</td>
</tr>
<tr>
<td>5</td>
<td>$15,900</td>
</tr>
<tr>
<td>6</td>
<td>$12,600</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; or had more than one point for a moving violation; You also cannot be a college student claimed as a dependent on someone else’s taxes.

5. Bicycle Help

These organizations offer guidance and usage of their shop tools and parts to bike owners with broken bikes that do not have the tools or resource to fix them. There’s a small donation for their help, but no one is turned away for lack of funds.

Bici Libre
1205 W. 6th St, Los Angeles, 90017
213-261-5626
http://la-bike.org/biclilere

The Bicycle Kitchen
4429 Fountain Ave, LA CA 90029
(323) NO-CARRO or (323) 662-2776
http://www.bicyclekitchen.com

Can Drivers Get 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>
</thead>
<tbody>
<tr>
<td>1</td>
<td>$29,700</td>
</tr>
<tr>
<td>2</td>
<td>$40,050</td>
</tr>
<tr>
<td>3</td>
<td>$50,400</td>
</tr>
<tr>
<td>4</td>
<td>$60,750</td>
</tr>
<tr>
<td>5</td>
<td>$71,100</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; or had 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 (800) 952-5210 Or visit: www.bar.ca.gov
CalFresh/Food Stamps

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 61 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. Persons with past drug felonies may qualify if they are complying with parole and probation.

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.

- To have an application mailed to you, call any of these numbers:
  (626) 569-1399  
  (310) 258-7400  
  (818) 701-8200  
  (866) 613-3777
- 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 may 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. If you are unable to file your application, contact your local Legal Aid right away.

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.

1. Mail: To have an application mailed to you, call any of these numbers:
  (626) 569-1399  
  (310) 258-7400  
  (818) 701-8200  
  (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 at: 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. Write 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. At a minimum, be sure to complete your name and address and sign the application before you submit it.
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 are eligible (usually a “certification period” is 12 months) and the amount of benefits that you will receive and information about your reporting requirements.

If your CalFresh/Food Stamps case is denied and you believe you qualify for benefits, request a hearing or call a legal aid organization for assistance. (See pg 68 “Good Advice” and pg 65 “Hearings and Complaints”)

When your income, expenses, or other circumstances change, report this on the form called “SAR 7.” (See pg. 34, “What Are the Requirements”). Be sure to comply with all reporting requirements. If you do not understand your reporting requirements, ask your eligibility worker or contact your local Legal Aid for guidance.

**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.fnspe.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:

<table>
<thead>
<tr>
<th># in Household</th>
<th>Maximum Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>$194</td>
</tr>
<tr>
<td>2</td>
<td>$357</td>
</tr>
<tr>
<td>3</td>
<td>$511</td>
</tr>
<tr>
<td>4</td>
<td>$649</td>
</tr>
<tr>
<td>5</td>
<td>$771</td>
</tr>
<tr>
<td>6</td>
<td>$925</td>
</tr>
<tr>
<td>7</td>
<td>$1022</td>
</tr>
<tr>
<td>8</td>
<td>$1169</td>
</tr>
</tbody>
</table>

For each additional person, add $146
(accurate until Sept. 30, 2017)

**Can I Get CalFresh?**

1. **Who Cannot Get CalFresh?**

People getting even $1 of SSI cannot get CalFresh. However, 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 temporarily or permanently disqualified from the program if you intentionally violate the program rules, including a permanent disqualification for 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 62 for restrictions applying to immigrants.

2. **Special Rules for Students**

Most students can’t get CalFresh/Food Stamps. But new rules allow more college students to receive them. Students between age 18 and 49 attending school half time can qualify if they are any one of the following:

- Disabled
- Enrolled in CalWORKs
- Working and getting paid at least 80 hours per month
- Receiving a federal or state 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) or certain other government created programs
- Participating in Extended Opportunities Program Services (EOPS)
- Participating in the Workforce Innovation Opportunity Act (WIOA)
- Participating in Job Opportunities and Basic Skills (JOBS) program under the Title IV of the Social Security Act
- Participating in a state or county employment and training program determined by an Eligibility Worker

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 a 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.
- Seniors and people with disabilities

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)

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.

6. Resource and Property Limits

<table>
<thead>
<tr>
<th># in Household</th>
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<tbody>
<tr>
<td>1</td>
<td>$1980</td>
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<td>8</td>
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For each additional person, add $694 to GROSS Income or add $347 to NET Income

(2017)

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3. CalFresh/Food Stamp Work Registration

"Workfare" is a work project you might be required to do to keep receiving CalFresh. Workfare is suspended in Los Angeles County at least through Dec. 31, 2017, but 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 certain 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

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, including but not limited to:

- 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.
### Farmer's Markets That Accept CalFresh in LA County

This is a partial list of farmers markets that accept CalFresh. (Farmers markets in the city of Los Angeles are required to accept CalFresh. Markets in other parts of the county are not required to accept CalFresh.)

* Markets with a * offer the Market Match program, where low income customers can get $5- $10 bonus dollars for fresh fruits and vegetables, while supplies last. More markets: [www.fmfinder.org](http://www.fmfinder.org)

<table>
<thead>
<tr>
<th>Location</th>
<th>Address</th>
<th>Days and Times</th>
</tr>
</thead>
<tbody>
<tr>
<td>Alhambra</td>
<td>Sun. 8:30 am-1 pm</td>
<td>100 S. Monterey &amp; E. Bay</td>
</tr>
<tr>
<td>Altadena</td>
<td>Wed. 3-7 pm</td>
<td>600 W. Palm</td>
</tr>
<tr>
<td>Atwater Village</td>
<td>Sun. 10 am-2 pm</td>
<td>3250 Glendale Blvd., Wells Fargo lot</td>
</tr>
<tr>
<td>Beverly Hills</td>
<td>Sun. 9 am-1 pm</td>
<td>9300 Block of Civic Center Dr.</td>
</tr>
<tr>
<td>Burbank</td>
<td>Sat. 8 am-12:30 pm</td>
<td>3rd St./Orange Grove Ave.</td>
</tr>
<tr>
<td>Cerritos</td>
<td>Sat. 8 am-12 noon</td>
<td>17870 Park Plaza Dr., N. end of Performing Arts Center Parking lot</td>
</tr>
<tr>
<td>East LA</td>
<td>Sat. 9 am-2 pm</td>
<td>4801 E. 3rd</td>
</tr>
<tr>
<td>El Sereno</td>
<td>Fri. 4pm-8pm</td>
<td>Huntington Drive/ Maycrest</td>
</tr>
<tr>
<td>Encino</td>
<td>Sun. 8 am-1 pm</td>
<td>17400 Victory Blvd Van Nuys</td>
</tr>
<tr>
<td>Gardena</td>
<td>Sat. 8 am-1 pm</td>
<td>13000 South Van Ness. Wed. 9am-1 pm 1670 W. 162nd St.</td>
</tr>
<tr>
<td>Glendale</td>
<td>Thurs. 9:30am-1:30pm</td>
<td>100 Block North Brand Blvd.</td>
</tr>
<tr>
<td>Hollywood</td>
<td>Sun. 8 am-1 pm</td>
<td>Ivar between Selma &amp; Hollywood</td>
</tr>
<tr>
<td>Huntington Park</td>
<td>Wed. 9:30am-1:30pm</td>
<td>Salt Lake Park, Bissell/Florence Ave.</td>
</tr>
<tr>
<td>La Puente</td>
<td>Thurs. 3-8 pm, Martin Park</td>
<td>Long Beach (North) Thurs. 3-6:30pm 46th St and Atlantic Ave</td>
</tr>
<tr>
<td>Long Beach (Downtown)</td>
<td>Fri. 10 am-4 pm , 5th st. on Promenade</td>
<td>Long Beach Sun. 9 am-2 pm Alamitos Bay Marina</td>
</tr>
<tr>
<td>Long Beach</td>
<td>Sun. 9 am-2 pm</td>
<td>LA-Adams Wed. 2-6 pm 1432 W. Adams &amp; Vermont (St. Agnes)</td>
</tr>
<tr>
<td>LA-Central Avenue</td>
<td>Thu. 12pm–5pm 4401 Central Ave.</td>
<td>LA-Crenshaw Sat. 10am-3pm 3650 M.L.K. Jr. Blvd.</td>
</tr>
<tr>
<td>LA East Hollywood</td>
<td>Thurs. 3:30-7:30pm</td>
<td>Western &amp; Hollywood Red Line Station</td>
</tr>
<tr>
<td>LA-Echo Park</td>
<td>Fri. 3-7:30 pm</td>
<td>1125 Logan St.</td>
</tr>
<tr>
<td>LA-Historic Downtown</td>
<td>Saturday 9 am-2 pm, 5th St. &amp; Spring</td>
<td>LA-La Cienega Thurs. 2-7 pm 1801 La Cienega Blvd</td>
</tr>
<tr>
<td>LA-Lincoln Heights</td>
<td>Wed. 3-8 pm</td>
<td>N.Broadway &amp; Daly</td>
</tr>
<tr>
<td>LA-Motor Ave</td>
<td>Sun 1-3pm, National &amp; Motor</td>
<td>LA-OLD L.A. CFM Tue. 3 pm-8 pm North Figueroa St. / Avenue 58</td>
</tr>
<tr>
<td>LA-Pershing Square</td>
<td>Wed. 9 am-1 pm</td>
<td>LA-Vernon &amp; McKinley Sat. 10 am-2 pm</td>
</tr>
<tr>
<td>LA-Watts</td>
<td>Sat. 10 am-2 pm</td>
<td>103rd/Central</td>
</tr>
<tr>
<td>LA-Wellington Square</td>
<td>Sun. 9am-1pm</td>
<td>4394 Washington Blvd.</td>
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<tr>
<td>Mar Vista</td>
<td>Sun. 9am-2pm</td>
<td>Grandview/Venice Blvd</td>
</tr>
<tr>
<td>Monterey Park</td>
<td>Fri. 4 pm-8 pm</td>
<td>381 S Ramona Blvd near City Hall</td>
</tr>
<tr>
<td>Newhall</td>
<td>Saturday 8:30 am-12:30 pm</td>
<td>Lyons &amp; Railroad</td>
</tr>
<tr>
<td>North Hollywood</td>
<td>Saturday 10 am-2 pm</td>
<td>5255 Bakman Ave</td>
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<tr>
<td>Norwalk</td>
<td>Tue. 9am-1pm</td>
<td>Alondra/Pioneer</td>
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<tr>
<td>Paramount</td>
<td>Fri. 9:30 am-1:30 pm</td>
<td>Progress Park, 15550 Downey Ave.</td>
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<tr>
<td>Pasadena</td>
<td>Tue. 8:30am-12:30pm</td>
<td>E. Villa &amp; Garfield.</td>
</tr>
<tr>
<td>Santa Monica</td>
<td>Sat. 8 am-1 pm</td>
<td>Cloverfield &amp; Pico</td>
</tr>
<tr>
<td>Sun Dimas</td>
<td>Wed. 4pm-8pm</td>
<td>245 E. Bonita Ave.</td>
</tr>
<tr>
<td>Santa Monica</td>
<td>Sat. 8 am-1 pm</td>
<td>800 4th St. &amp; Ocean Park</td>
</tr>
<tr>
<td>South Gate</td>
<td>Mon. 10am-3pm</td>
<td>4855 Tweedy Blvd. (inside parking lot at South Gate City Park)</td>
</tr>
<tr>
<td>South Pasadena</td>
<td>Thur. 4pm-8pm</td>
<td>Meridian and El Centro</td>
</tr>
<tr>
<td>Studio City</td>
<td>Sun. 8am-1pm</td>
<td>Between Laurel Cyn. Blvd./ Ventura Blvd</td>
</tr>
<tr>
<td>Topanga</td>
<td>Sun. 10am-2pm</td>
<td>6600 Topanga Blvd (indoors)</td>
</tr>
<tr>
<td>Whittier</td>
<td>Fri. 3-8 pm Mayberry Park</td>
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<tr>
<td>Whittier Uptown</td>
<td>Fri. 8am-1pm</td>
<td>Philadelphia/ Bright (SW Corner)</td>
</tr>
</tbody>
</table>

### Free and Low Cost Food

#### 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.

#### Here are some larger area pantries, referral lines and websites:

- **211** (County phone referral line)
- **Internet**: [www.healthycity.org](http://www.healthycity.org)
- **www.lafoodbank.or/get-help/pantry-locator**
- **www.foodoasis.la**
- **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
Food

**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**

Farmers Markets That Accept CalFresh Benefits: See previous page for partial list or use [www.fmfinder.org](http://www.fmfinder.org). Many of these markets also participate in the Market Match program (see below).

The Market Match Program (operated in LA County by Hunger Action LA, SEE-LA, Model Neighborhood Program, and Social Justice Learning Institute) offers people who receive CalFresh/Food Stamps, WIC, and at some markets 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.

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](http://www.projectchickensoup.org) or call: 310-836-5402.
WIC

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.

### 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:

<table>
<thead>
<tr>
<th>Household Size</th>
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<th>Monthly</th>
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<tr>
<td>8</td>
<td>75,647</td>
<td>6,304</td>
</tr>
</tbody>
</table>

For each additional household member, add:

+7,696 +642

This chart is accurate until June 30, 2017. 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 clinics 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 farmer 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](http://www.cdph.ca.gov/programs/wicworks)
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>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
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<td>$5,663</td>
</tr>
<tr>
<td>8</td>
<td>$4,430</td>
<td>$6,304</td>
</tr>
</tbody>
</table>

(Accurate until June 30, 2017)

1. How Do I Apply?

If you receive CalWORKs, CalFresh, 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 and to increase the amount of vegetables and fruits available.

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.

3. After School Snacks and Supper Program

After school snacks are available at after school programs for free at many schools, where more than half the students would qualify for free or reduced price meals.

The After School Supper Program is offered to students under age 18 and is available at 600 schools in the LA Unified School District. Students do not have to be enrolled in either the school or in the afterschool program to receive supper. For more information see cafe-la.lausd.net or call (213) 241-6422.

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.

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) passed in 2010 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, and
- Domestic violence screening and counseling

The new health care law requires that many people purchase some kind of health insurance. Some people are exempt from this mandate.

- People who would have to pay more than 8% of their income for health insurance
- People with incomes below the threshold required for filing taxes
- People who qualify for religious exemptions
- Undocumented immigrants
- People who are incarcerated
- Members of Native American tribes
- People who have experienced a severe hardship

In 2017 Congress and the Trump administration are discussing taking away these new rights and benefits. For updated information see the list of Public Policy Organizations on page 3.

For more information contact:

Covered CA
www.coveredca.com
800-300-1506

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.
(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)

### MediCal Income Limits (See next chapter)

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<thead>
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<th># of Persons</th>
<th>Maintenance Need Level</th>
<th>100% FPL Parents and Children to age 18</th>
<th>138% FPL HWA &amp; Single Adults</th>
<th>213% FPL Pregnant women and children age 1</th>
<th>250% FPL Working Disabled</th>
<th>266% FPL Low Income Children</th>
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<td>$479</td>
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Effective 4/1/16-3/31/17
Medi-Cal

Medi-Cal is California’s program to pay for medical care for many low-income people, including families, children, seniors 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

The state and federal government fund Medi-Cal. There are many Medi-Cal programs with different rules. Depending on which program you qualify for and how much money you make, Medi-Cal may pay for all your medical expenses or you might have to pay a share of the cost when you access health care services in a particular month. If you have Medi-Cal with a share of cost, you may qualify for lower priced insurance through Covered California.

Can I Get Medi-Cal?

You can get free Medi-Cal if you:
• Have low income and.
• Are a California resident (which means that you intend to stay in California). This rule is not about immigration status.

To get Medi-Cal you must meet certain income limits, described on page 40. All adults aged 19 to 64 who are U.S. citizens or legal permanent residents and have income below 138% of the Federal Poverty Level (see chart on page 40) now qualify for a free Medi-Cal program. Pregnant women and people with a diagnosis of breast or cervical cancer may qualify for Medi-Cal at a higher income level (see page 43).

If you get CalWORKs, SSI, foster care, or certain refugee benefits, you get Medi-Cal automatically and don’t have to apply separately.

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 61 Guide for Non-Citizens).

If you are in the U.S. and fall under the Deferred Action for Childhood Arrivals (DACA) group, you can qualify to get full Medi-Cal benefits.

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.
   • 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. Child Health and Disability Program (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, “Child Health and Disability Program”.

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 readetermination 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.
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 child’s absent father or mother is and whether that parent can provide the child with medical insurance.

If you do not cooperate with DCSS you are denied Medi-Cal, but your children do not lose coverage. Cooperation is not required if applying only for the children. Pregnant women do not have to give information to DCSS until after the birth of the baby.

Under some circumstances you have good cause for not cooperating. For example:
- You are cooperating in good faith, but are unable to identify or assist in locating 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

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. Call (877) 597-4777 or a legal aid of California to dispute the denial. You can also fill out a form called “PA 330” if you are paid in cash or do not have any other way to prove income.

9. The Medi-Cal Card

Once you have been “approved,” your permanent 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. If you have received a Medi-Cal card in the past, you can use the previous card.

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. 65 “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 the expected date of delivery of the baby.

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 “Newborn Referral Forms” you can fax to DPSS. Or you can get one yourself on the computer at http://dhcs.ca.gov/formsandpubs/forms/Forms/mc330.pdf and download the form called, “Newborn Referral”. It is number MC 330.

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 138% of the Federal Poverty Level. If you want to be evaluated for the Seniors and Persons with Disabilities Medi-Cal program you will need a disability determination. To find out which program would be best for you call: MCH Access (213) 749-4261 or the Health Consumer Center of Neighborhood Legal Services at (800) 896-3202.

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. One of the requirements for BCCTP is that you have no other health insurance including full-scope no share-of-cost Medi-Cal or Medicare. Please refer to DHCS website for information about the BCCTP: http://www.dhcs.ca.gov/services/medi-cal/Pages/BCCTP.aspx

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 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

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 "Non-MAGI" Medi-Cal. Under some programs, only the income of the family unit being given the Medi-Cal counts, 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 $1220 (an individual) or $1645 (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 if even 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 "countable earned 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 (see pg 68).

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. (These families may qualify for an Advanced Premium Tax Credit under Covered California: see page 40.)

An increase in income is not counted 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. Share of Cost if you are between the ages of 19 and 65, not blind, not disabled

To find out your monthly Share of Cost, start with your gross monthly income. Include spouse or parent income, but not other people living in your house. Then subtract the need level for your family size on the chart on page 40. The balance is your monthly Share of Cost. For more information contact Legal Aid (Pg. 68)

3. Share of Cost if you are over 65, blind or disabled

To find out your monthly Share of Cost, start by adding your earned and unearned income, and subtract $20. Then subtract the need level amount for your family size in the chart on page 40. For more information contact Legal Aid (Pg. 68)

Resource Limits

The resource limit does not apply to people applying for a "MAGI" Medi-Cal program. For anyone else, your family’s resources must be below the following limits to get Medi-Cal:

<table>
<thead>
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<th># in Family</th>
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<td>10 or more</td>
<td>$4,200</td>
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The home you live in, furnishings, personal items, and some non-term life insurance policies don’t count. For “Non-MAGI” Medi-Cal, one car does not count. There are other exemptions if a vehicle is used as part of employment and for transporting a family member with a disability.

Staying On Medi-Cal

1. Once a Year Eligibility Form

People receiving Medi-Cal get a form in the mail every 12 months that needs to be completed to redetermine eligibility. This is called the Annual Medi-Cal Renewal. 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 90 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.

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 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 for the remaining six months if your income is not more than the limits in the chart at the top of the next column and if you comply with the reporting requirements.

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. To enroll, you can contact the Former Foster Youth Unit at (626) 927-2690 or (626) 927-2687. 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. 65 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.
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 to DPSS and also to the welfare office in the new county within 10 days. 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”)

Medi-Cal requires that persons eligible to Medi-Cal with no share of cost join a managed care plan. Some exceptions apply. 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, doctors 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 choose 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. You will also receive a packet in the mail about dental managed care. Enrolling in a dental plan is optional; you don’t have to enroll. If you choose not to enroll, you can still use your Medi-Cal card with any dentist who accepts Denti-Cal to get dental services.

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 Options if you have questions, or you can call the Health 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.

8. Mental Health Managed Care

Mental Health services for Medi-Cal recipients are also provided through a managed care system. See page 52 “Mental Health.”

Medi-Cal for Teens

If you are between 12 and 21 years old, you can apply for “Minor Consent Services” to get free and confidential medical treatment without parental consent related to:
- Drug or alcohol abuse (except methadone treatment)
- Sexually transmitted infections
- Pregnancy and abortion
- Family planning
- Outpatient mental health (not overnight in a hospital)
- Sexual abuse

If you are under 21 and living with your parents, or temporarily away such as in school, you may apply for Minor Consent Medi-Cal to cover these specific services without your parents’ consent or knowledge. If you are a minor who is living on your own you may complete a regular Medi-Cal application.

Your parents won’t be required to give information about their income or resources or pay toward the medical services, unless you want Medi-Cal for services other than those listed above.

DPSS won’t tell your parents or send letters to your home without your permission. “Minor Consent Services” are available regardless of your immigration status and cover more services than restricted Medi-Cal.

To apply, fill out the regular Medi-Cal application and another short form for Minor Consent Services at DPSS or with a DPSS Worker at the site where you are receiving care. You will have to fill out a new short form each month you need treatment, except for mental health services. For that, you need a letter from a mental health professional explaining that you meet certain conditions for getting mental health services and how long you will need treatment. You will still have to complete the short form each month to update your eligibility.
If you already get Medi-Cal through your parents’ case, you may already have a plastic Medi-Cal card, but do not use it for Minor Consent services.

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 if you don’t know other information.

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
See 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 70 and/or at any of the following First 5-funded agencies.

Lancaster, Northern LA, Palmdale:
Tarzana Treatment Center 661-726-2630

Burbank, Glendale, San Fernando Valley, Santa Clarita, Northridge:
Asian Pacific Health Care Venture 323-644-3880 (Also East LA/Metro LA)
Tarzana Treatment Center 818-342-5897
Child and Family Guidance Center 818-882-3147
Northeast Valley Health Corp. 800-696-3842
Valley Community Clinic 818-763-8836

El Monte, Monrovia, San Gabriel Valley, Pomona:
Citrus Valley Health Partners 626-851-2748

East LA, Metro LA:
California Hospital Medical Center 213-742-5537

Chinatown Service Center 213-808-1700
KHEIR 213-637-1080
West Side: Venice Family Clinic 310-664-7509

South LA:
California Hospital Medical Center 213-742-5537
Community Health Councils (Also East LA/Metro LA) 323-295-5500
Southeast LA County:
AltaMed Health Services Corporation 877-462-2582
South Asian Network 562-403-0488
Human Services Association 562-806-5400
St. Francis Medical Center 800-603-9355
Carson, Hawthorne, Inglewood, Lawndale, Lomita:
Crystal Stairs 323-299-9295
Long Beach:
Dept. of Health 562-570-7979

Pasadena, Altadena, Sierra Madre:
Pasadena Public Health Department 626-744-6086
Health Consumer Center of Los Angeles 800-896-3202
LAUSD – CHAMP Helpline 866-742-2273

Countywide Assistance:
Health Consumer Center 800-896-3202
MCH Access (Training and Troubleshooting, enrollment for East LA, South LA) 213-749-4261

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

To be eligible for Medi-Cal's Optional Targeted Low Income Children Program, 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 for three or more children.

Under a new law, all children under the age of 19 are now eligible for full scope Medi-Cal regardless of immigration status.

See page 43- Share of Cost for children for income limits and page 41 on How to Apply for Medi-Cal.

What Other Programs Are There?

1. 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.

2. 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 $40,000 per year or may be greater if the child has free Medi-Cal or 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.
Free and Low Cost Health Care

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

2. Free/Low Cost Health Clinics in Los Angeles County

See also http://www.ccalac.org. Click on “Find a Clinic”

Antelope Valley
Tarzana Treatment Center
907 West Lancaster Blvd., 93534
(661) 726-2630

San Fernando Valley
All for Health, Health for All
519 E Broadway, Glendale CA 91205
(818) 409-3020

Northeast Valley Health Corp.
12755 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

North Hollywood Health Center
5300 Tujunga Ave., 91601
(818) 766-2273

Northeast Valley Health Corp.- Valencia Health Center
23763 Valencia Blvd., 91355
(861) 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 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 Mead
268 E. Bloom St, Suite 322, LA 90012 (323) 238-0707

Arroyo Vista Family Health Foundation - El Sereno
4815 East Valley Boulevard, Suite C, LA 90032 (323) 223-6146

Highland Park
6000 North Figueroa Street, LA 90042 (323) 254-5221

Lincoln Heights
2411 North Broadway, LA 90031 (323) 987-2000
The People's Guide 2017

Health Care

Loma Drive
303 South Loma Drive, Suite 202, LA 90017 (213) 201-5800
Asian Pacific Health Care Venture
1530 Hillhurst Avenue, LA 90027 (323) 644-3888
Chinatown Service Center
767 North Hill St, Suite 200, LA 90012 (213) 808-1792
Clinica Msr. Oscar A. Romero
123 South Alvarado Street, LA 90057 (213) 989-7700
Northeast Health Center
2032 Marengo Street, LA 90033 (323) 987-1030
Eisner Pediatric & Family Medical Center
1530 South Olive St., LA 90015 (213) 747-5542

JWCH Institute, Inc. - PATH
340 North Madison Avenue, LA 90004 (323) 644-2252
JWCH Institute, Inc. - Center for Community Health
522 San Pedro Street, LA 90013 (213) 622-2639
Koreandering Education, Information & Research (KHEIR)
3727 W. 6th Street, Ste. 220, LA 90020 (213) 637-8833
Koryo Health Foundation
1058 S. Vermont Ave, Ste 200 LA 90006 (213) 380-8833
Saban Free Clinic Beverly
8405 Beverly Boulevard, LA90048 (323) 653-1990
Hollywood
6043 Hollywood Boulevard, LA 90028 (323) 653-1990
Wilshire Health Center
5205 Melrose Avenue, LA 90038 (323) 653-8622
Martin Luther King, Jr
12021 S. Wilmington Ave., LA 90059 (310) 668-5011
Queenscare Family Clinic
3242 W. 8th St, 90005 - 213-368-9779
Hollywood: 323-935-7170
4618 Fountain Ave, 90029
Eagle Rock: 323-344-5233
4448 York Blvd. 90041
Central Health Center: 213-240-8203
241 N. Figueroa St, 90012
East Los Angeles Health Task Force
2120 E. 6th St, 90023
323-881-1112
BAART-Beverly 213-353-1140
1926 W Beverly Blvd, 90057
West Los Angeles
Venice Family Clinics
Culver City
604 Rose Ave., 310) 392-8636 Rose Avenue Clinic
4401 Elienda St. Venice, CA 90291 (310) 392-8636
Mar Vista Gardens Clinic
1711 Ocean Park Blvd., 90405 (310) 450-2191
Santa Monica School Teen Clinic
601 Pico Boulevard, Santa Monica, 90405 (310) 392-8636
Simms/Mann Health and Wellness Center
2509 Pico Blvd., Santa Monica, 90405 (310) 392-8636
Frederick R. Weisman Family Center
622 Rose Avenue, Venice, 90291 (310) 392-8636
Levine Family Health Center
905 Venice Boulevard, Venice, 90291 (310) 392-8636
Westside Family Health Center
4909 Marionwood Dr. Culver City, 90230 (310) 392-8636
South Los Angeles
Central City Community Health Center, Inc.
5970 S. Central Ave., Los Angeles, 90001 (323) 234-3280
University Muslim Medical Association
711 W. Florence Ave, Los Angeles, 90044 (323) 789-5610
Compton Central Health Clinic, Inc.
201 N. Central Avenue, Compton, 90220 (310) 635-7123
Watts Healthcare Corporation
Crenshaw Community Health Center
10300 S. Compton Avenue, LA, 90002 (323) 789-5610
North East Community Clinic
1414 S. Grand Avenue, Ste 200, 90015 (310) 743-9000
Family Medicine Inc.
8540 Alondra Blvd, Ste. B2, Paramount, 90723 (562) 602-2508
South Central Family Health Center
4425 South Central Avenue, LA 90011 (323) 908-4200
Bell and Bell Gardens
JWCH Institute
6912 S. Ajax Ave, Bell Gardens, 90201 (323) 562-5815
Northeast Community Clinic
4129 East Gate Ave, Bell, 90021 (323) 771-8400
San Pedro and South Bay
Harbor Free Clinics Children’s Center
731 S. Beacon St., San Pedro, 90731 (310) 732-5887
Harbor Free Clinics Adult Center
593 W 6th Street, San Pedro, 90731 (310) 547-0202
Curtis R. Tucker Health Center
123 W. Manchester Blvd, Inglewood, 90301 (310) 419 5325
South Bay Family Healthcare Center
746 West Gardena Blvd, Gardena, 90247 (310) 802-6170

Dr. Claudia Hampton Clinic
1091 La Brea Ave., Inglewood, 90301
Westside Neighborhood Clinic
1436 W. 23rd St., Long Beach, 90810 (562) 595-5507
El Dorado Community Service Center
4450 W. Century Blvd., Inglewood, 90304 (310) 671-0555
Wilmington Community Clinic
1009 North Avalon, Wilmington, 90744 (310) 549-5760
Redondo Beach Clinics
2114 Artesia Blvd.Redondo Beach, 90278 (310) 318-2521

3. Dental, Eye Care, and Hearing Care

Dental:
Eisner Pediatric and Family Medical Center
(213) 747-5542
Harbor-UCLA Dental (310) 222-3493
LA Free Dental Clinic (323) 653-1990
USC School of Dentistry 1-888-USC-DENT (1-888-872-3368)
QueensCare Echo Park (213) 380-7298

Vision:
California Vision Foundation 1-800-877-5738
www.californiavision.org

Hearing
Agency on Deafness (323) 478-8000
Hearing Aid HotLine (800) 521-5247
Hear NOW (800) 648-4327

Community Health Alliance of Pasadena
330 W. Maple Ave., Pasadena, 91103 (626) 256-1600

How Do I Get Care if I Don’t Qualify for Medi-Cal?

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.

The People's Guide 2017
1. Do I Qualify for Free Care under ATP or My Health LA?

You can get free hospital and clinic care 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>
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<tbody>
<tr>
<td>1</td>
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</tr>
<tr>
<td>2</td>
<td>$1843</td>
</tr>
<tr>
<td>3</td>
<td>$2319</td>
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<tr>
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<td>6</td>
<td>$3747</td>
</tr>
</tbody>
</table>

(As of April 2016)

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 19 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
- MHLA will automatically enroll you in ATP so you can get 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 844-744-6452

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 to see 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 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) 896-3202.
- 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.
Health Care

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 found not 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 Use 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.
Turning Point (323) 296-1840 alcohol and drug education program

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. IHSS is an alternative to out-of-home care such as nursing homes or board and care facilities. You may qualify for IHSS if you:

- Are blind, disabled, or over 65;
- Receive Medi-Cal or SSI;
- Live at home and need the services to remain there;
- Do not live in an acute care hospital, long-term care facility, or licensed community care facility
- Submit a completed Health Care Certification form.

Services which can be authorized include personal care, meal preparation, laundry, grocery shopping, housecleaning, accompaniment 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.

If you do not currently receive SSI or Medi-Cal, you will be referred to a Medi-Cal Office to be evaluated 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 or (213) 744-4477.

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 have to 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 receive at least $11 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 social 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 by the IHSS social worker, call your IHSS office at the number below:

Burbank (866) 544-9048
Chatsworth (866) 822-9622
El Monte (866) 322-2204
Hawthorne (866) 512-2856
Lancaster (866) 514-9911
Metro (866) 512-2857
Pomona (866) 465-0905
Rancho Dominguez (866) 896-0044

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 $226. If you have less than 30 quarters, your monthly Part A premium is $411.

2. Part B: Medical Insurance
   If you meet the eligibility guidelines for Part A, you will be eligible for Part B. The standard Part B monthly premium is $121.80. The premium is lower for those enrolled prior to 2016. 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 $1,288 (in 2016) if you use days 1 through 60 in a benefit period. If you remain in the hospital for days 61 to 90, you pay $322 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 $644 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 $161 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 $166 (in 2016) 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 Medi-care Parts A and B. Medicare HMOs must provide the same benefits as original Medicare. Persons who have Med-i-care 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.
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.csdd.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 Questoins and Assistance: (800) 427-2200.
So Cal Edison Low Income (800) 736-4777
Utility Tax Unit (senior discount) (213) 978-3050
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.)

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 Cal Mediconnect 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 Mediconnect 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.

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), call 1-800-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.

There are two ways to qualify. If you or another person in your household receives benefits from any of these programs; Medi-Cal, WIC, CalWORKs, Tribal TANF, Head Start Income Eligible-Tribal Only: Bureau of Indian Affairs General Assistance; CalFresh: School Lunch : Low Income Home Energy Assistance Program (LIHEAP): or SSI:

Total income for all persons in your household meets the following income guidelines:

<table>
<thead>
<tr>
<th>Members in Household</th>
<th>Annual Income</th>
</tr>
</thead>
<tbody>
<tr>
<td>1-2</td>
<td>$ 32,040</td>
</tr>
<tr>
<td>3</td>
<td>$ 40,320</td>
</tr>
<tr>
<td>4</td>
<td>$ 48,600</td>
</tr>
<tr>
<td>5</td>
<td>$ 56,880</td>
</tr>
<tr>
<td>6</td>
<td>$ 65,160</td>
</tr>
<tr>
<td>7</td>
<td>$73,460</td>
</tr>
<tr>
<td>8</td>
<td>$81,780</td>
</tr>
<tr>
<td>Each add’l</td>
<td>add $ 8,320</td>
</tr>
</tbody>
</table>

* Includes current household income from all sources before deductions


In addition to the above, you may be eligible for the following programs:

• Appeal any incorrect or unfair decision about your Medicare 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.
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>

**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 LA Department of Water and Power (previously Info Line) at 1-800-339-6993. Customers in need, contact 211 LA County information and referral services to 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).

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

**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 as either “Program-Based” or “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>

**AT&T is offering low-cost wireline home Internet service to qualifying households:**

- With at least one resident who participates in the U.S. Supplemental Nutrition Assistance Program (SNAP) (CalFresh) and
- With an address in AT&T’s 21-state service area, at which we offer wireline home Internet service, and
- Without outstanding debt for AT&T fixed Internet service within the last six months or outstanding debt incurred under this program.
- If you are a California resident and at least one member of your household receives Supplemental Security Income (SSI) benefits you also may qualify based on the same requirements that apply to SNAP (CalFresh) participants.
- Other eligibility requirements apply. Visit att.com/access for complete information and to apply. Or call 1-855-220-5211.

You must access the application on the website https://att.com/access and submit the form online or via email. You may also print the form and send via fax or mail. If you experience difficulties with the online form, you can contact an AT&T representative by phone at 855.220.5211. (For help in Spanish, call 855.220.5225.) Please send your application and supporting documentation to:

**Access from AT&T**
PO Box 5030
Charleston, IL 61920-5030

Qualifying households will pay as little as $5 to $10 per month for internet.
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 Help

Year Round and Winter Shelters:
LAHSA (LA Homeless Services Authority)
Hotline: (213) 225-6581Monday through Friday: 7:30 a.m. to 4:30 p.m.

Winter Shelters: (800) 548-6047 TDD: 1-(800) 660-4026 (for the deaf and hearing disabled) for shelter locations and pick-up points for free transportation to shelter. 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. Winter Shelters are not able to serve families. (see Families a few lines below.)

InfoLine: Call (211) or (800) 339-6993
Internet: www.healthy.city.org lists shelters and other resources by zip code for all L.A. County.
WIN: What I Need by Our Children LA is a free mobile and web app helping homeless or needy youth aged 12 to 25 locate essential services including shelter.

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.

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). See list of shelters and agencies below.

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).

Families seeking assistance can also contact the Family Solutions System by calling: 211 LA County (2-1-1). FSS can help families find financial assistance for rapid rehousing, including a security deposit for an apartment; partial rent for three months or a motel voucher and utilities, etc. You can call 211, or be referred by another agency, or contact the Family Response Team directly at one of these agencies:

Family Solutions Centers:
Valley Oasis (Antelope Valley) 661-942-2758
LA Family Housing (San Fernando Valley) 818-255-2766
Union Station Homeless Services (Pasadena) 626-256-9195
PATH (Hollywood) 323-212-6291
St. Joseph (West LA, Venice, Santa Monica) 310-694-6035
Weingart Center Association 323-531-7000
The Whole Child 562-692-0383
Harbor Interfaith (Long Beach) 310-831-0589

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.

Housing for Health is an LA County program providing permanent supportive housing, recuperative care, and specialized primary care to homeless people with complex physical and behavioral health conditions. If you or your whole family is homeless and you get medical care at one of the participating locations, ask for a staff person at the Social Work department. Tell them you are homeless and ask about the Housing for Health program:

Housing for Health Locations
• LAC USC Medical Center
• Harbor UCLA Medical Center
• Olive View Medical Center
• DHS Multi-Ambulatory Care Center
• MLK MACC High Desert Health System

2. Local Agencies

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

Beyond Shelter Neighborhood Resource Center 5101 S. Broadway, 1st. floor LA 90037 (213) 252-0772 or (323) 232-9000
Long Beach Multi-Services Center 1301 W. 12th St (562) 733-1147
CHCADA San Gabriel Valley Center (El Monte) 11046 Valley Mall (626) 444-9000
Mental Health of America 506 Jackman St., Lancaster (661) 726-2850
Chrysalis 516 South Main Street, Los Angeles (213) 895-7777
New Direction 11301 Wilshire Blvd Bldg. 206, (310) 478-3711
DMH Mental Health Clinic 529 S. Maple Los Angeles (213) 430-6700
OPCC Access Center 1616 7th St, Santa Monica (310) 450-4050
Downtown Drop-In Center 628 S. San Julian Los Angeles (213) 624-4357
PATH Achieve 437 Fernando Court, Glendale (818) 246-7900
E. L.A. Service Center 133 N. Sunol Dr., Los Angeles, (323) 260-2801
PATH MALL 340 Madison Ave, Los Angeles (323) 644-2216
FACTS Older Adults Program 150 W. 7th Street San Pedro (310) 519-6222
South Antelope Valley Emergency Services 37925 Sierra Hwy, Palmdale, (661) 267-5191
Homeless Health Care 2330 Beverly Blvd Los Angeles (213) 744-0724
St. Francis Center 1835 S. Hope St., Los Angeles (213) 747-5347
Family Solutions Access Center 45134 N. Sierra Hwy Bldg. B Lancaster (661) 942-2758
3. Shelters

Emergency Shelter: There are over 300 privately run agencies in Los Angeles offering shelter, so we cannot list them all here. Here are some: call 211 for other shelters.

Angels Flight (Youth) (800) 833-2499

Long Beach Rescue Mission
1335 Pacific Ave LB (562) 591-1292

Bell Shelter 5600 Rickenbacker Road, Bell 90201 (323) 263-1206

Los Angeles Mission 303 E. 5th Street Los Angeles (213) 629-1227

Cardinal Manning Ctr. 231 Winston St. Los Angeles (213) 229-9963

Midnight Mission 601 S. San Pedro St. Los Angeles (213) 624-9258

Dolores Mission 171 S. Gless Street Los Angeles (323) 881-0032

San Fernando Rescue Mission 13422 Saticoy, N. Hollywood, (818) 785-4476

Jovenes, Inc. (Youth) 1208 Pleasant Ave. Los Angeles (323) 260-8035

Samoshel 505 Olympic, Santa Monica (310) 450-4050 or (310) 581-9825

Filipino American Svcs. Group 135 N. Park View St., LA (213) 487-9804

Shawl House 936 S. Centre St., San Pedro (310) 521-9310

YR Shelter Program 3804 Broadway Pl. Los Angeles (323) 231-1711

Union Rescue Mission 545 S. San Pedro St. Los Angeles (213) 347-6300

Lancaster Community Homeless Shelter 44611 Yucca Ave. (661) 945-7524

Union Station 412 S. Raymond Ave, Pasadena (626) 240-4550

The conditions at shelters vary widely. They can generally make their own rules about who can stay and how long they can stay. At the shelters which are funded by the government, such as the Winter Shelters, there has to be a written grievance procedure you can go through if you feel you have been treated unfairly, or that conditions are not safe or healthy there. You can file these grievances with: Los Angeles Homeless Services Authority (LAHSA) 811 Wilshire Blvd, 6th Floor, LA 90017.

Legal Issues If You’re On the Street

1. City of LA Ordinance on Sleeping in Vehicles

In early 2017 The City of Los Angeles began enforcing a new law that heavily restricts sleeping in a vehicle. These restrictions included, but are not limited to, living or sleeping in your vehicle in a residential area between 9 pm and 6 am; and living in a vehicle is prohibited at all times within one block, or 500 feet, of schools, pre-schools, daycare facilities, and parks. You can be allowed to sleep in your vehicle in a commercial or industrial area - not, however, in these areas where there are existing parking restrictions. You can be fined $25 to $250 for violating this law (no including court fees). Call LA CAN (213) 228-0024 for updated information on this law or if you have questions about enforcement.

2. Homeless Citation Defense Clinics

Through two monthly citation defense clinics (one in Downtown LA and another on Venice Beach), homeless residents can receive legal assistance and defense for all quality-of-life infraction citations - including tickets related to sleeping/living in a tent or on the streets, jay walking, riding your bicycle on the wrong side of the street, etc. Tickets that cannot receive assistance include moving violations, MTA fare evasion tickets, and all misdemeanors and felonies.

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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; or 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 a shelter or resource agency about any special program that can provide you a Section 8 Voucher when you complete the program.

The following agencies may be able to help you with Section 8 vouchers, depending on their availability:

AIDS Project Los Angeles (213) 201-1600
Alexandria House
(Women and Children) (213) 381-2649
Beyond Shelter (Under PATH) (323) 644-2200
Catholic Charities (213) 251-3400
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 (213) 235-1460
Harbor Interfaith Services (Families) (310)-831-0603
Hope Again(323) 661-4004
LA Family Housing (818)982-4091
Little Tokyo Service Center (213) 473-1602
Los Angeles House of Ruth (Domestic violence victims) (323) 266-4139
New Economics for Women (213) 483-2060
(Affordable housing, women and children)
New Image Emergency Shelter
(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
South Central Health & Rehabilitation Programs
(Mental illness)(310) 631-8004
St. Joseph Center (Individuals and Families)
(310) 396-6468
St. Vincent DePaul (323) 224-6280
Testimonial Community Love Center
(Shelter for Single Women w/children under age 12)(323) 291-6753
The Serra Project
(Assisted living for HIV/AIDS Patients) (323) 344-4888
West Angeles Counseling Center
(323) 733-8300
Shelter Plus Care
Shelter Plus Care also has some vouchers. The requirements for Shelter Plus Care Vouchers are the same as the requirements for the Shelter Plus Care project-based program. Ask at shelters or other housing resource agencies.

Housing Authorities
Housing Authority of the County of Los Angeles (HACoLA) (626) 262-4510
Housing Authority of the City of Los Angeles (HACLA) (213) 252-2500.

Long Beach Housing Authority: (562) 570-6985
Other cities: Check in the City Government pages in the phone book or online

3. Low-Income Housing Tax Credit
Some private owners participate in the Low-Income Housing Tax Credit (LIHTC). In this program, private landlords reserve some of their units to offer at affordable rates. Eligibility for the units is based on income, and each unit has a set rent amount. For more information about this program, you should contact the individual owners or management offices directly.
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” next column).

Foster Youth 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 or (877) MY ILP 411
  www.ydpl.online.org

- The Alliance for Children’s Rights
  (213) 368-6010 kids-alliance.org

Some things you should know if you are in foster care now, or have been in foster care:
- 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.
- 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.
- If you’re 16 or 17 and still in care - you may qualify for the Transitional Housing Placement Program (THPP).
- 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).
- 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 (THP+).

All of these options come with conditions. Call the Alliance for Children’s Rights at (213) 368-6010 or Department of Children and Family Services 213-351-0100.

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, workshops you can attend, and advice:

- Bet Tzedek (323) 939-0506
- Coalition for Economic Survival (213) 252-4411
- Eviction Defense Network (213) 385-8112
- Housing Rights Center LA (800) 477-5977
- 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) 896-5211
- Public Counsel (213) 385-2977
- Unión 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.

Los Angeles Housing and Community Investment Department (HCID) Systematic Code Enforcement Program (SCEP)

(866) 557-RENT   (866) 557-7368

For complaints regarding plumbing and electrical; lack of water or heat; illegal utility shutoff, in the city of Los Angeles.

For other cities, check the Internet. 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 (in LA.)

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
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 (866) 557-7368 www.lacity.org/lahd

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 a written notice. If it is increased by 10% or less, you then should get a 30-day notice. If it is more than 10%, then you must get a 60-day notice. You can also be evicted for a rent controlled or non-rent controlled unit for a good reason.

4. Evictions

If you are not in a rent controlled unit, you can be evicted for no reason, but you must be given a 30-day notice if you have lived in the unit for less than a year or a 60-day 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.

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.

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 your local police department or LA Sherriff's Department. When the police respond to your call, you should show them 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 the police or sherriffs 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 Community and Investment Department (866) 557-RENT. (866) 557-7368. 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.disabilityrightsgc.org (866) 733-1660 (213) 736-1334 213-736-8310 TDD
Guide for Non-Citizens

If you have questions about immigration or benefits for immigrants, or if 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 64 (“Help with Immigration Questions”).

Deferred Action

Child Arrivals

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 being removed from the country. 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.

This law is called Deferred Action for Child Arrivals (DACA). You are possibly eligible for deferred action if you can prove with documentation that you:

1. Were under the age of 31 as of June 15, 2012;
2. Came to the United States before reaching your 16th birthday;
3. Have continuously resided in the United States since June 15, 2007, up to the present time;
4. Were physically present in the United States on June 15, 2012, and at the time of making your request for consideration of deferred action with USCIS;
5. Had no lawful status on June 15, 2012;
6. Are currently in school, have graduated or obtained a certificate of completion from high school, have obtained a general education development (GED) certificate, or are an honorably discharged veteran of the Coast Guard or Armed Forces of the United States; and
7. Have not been convicted of a felony, significant misdemeanor, or three or more other misdemeanors, and do not otherwise pose a threat to national security or public safety.

Although the Trump administration has talked about ending DACA, as of February 2017 the USCIS is still processing DACA applications. No one knows if the DACA program will be terminated, or what will happen with the information already submitted by those in DACA. You should consult an organization to help you decide whether to apply. See page 64 “Help with Immigration Questions” for groups that can provide advice.

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
- Restricted Scope 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 require satisfactory immigration status 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 a “T Visa”.
- Victims of domestic violence and other serious crimes may qualify once they have applied for U status. Other victims of domestic violence who are applying under the VAWA self-petition process may become eligible once they have a pending VAWA self-petition.
- 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
   - Amerasian, Iraqi or Afghan special immigrants
   - Persons paroled into the US for at least one year
   - Conditional entrants
   - Victims of trafficking
   - Certain spouses and children who are victims of domestic violence.
   - Veterans, active duty military and their spouse or unremarried surviving spouse or children
   - Certain American Indians born abroad

   "Non 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
   - 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/ removal, (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 former U.S. military personnel (or a 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 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 64 "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
   - a "U" visa applicant or holder, or
   - PRUCOL (Permanently Residing Under Color of Law), meaning that the immigration authorities know you are here and do not plan to deport or remove you from the country.

   If you have a sponsor, see pg 64 "What If I Have a Sponsor" about "deeming" rules.

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 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 64 "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 64 "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 Restricted Scope 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.
All children under 19 years of age are eligible to all Medi-Cal services (also known as full-scope Medi-Cal) regardless of immigration status, if they meet all other requirements.

“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. 64)

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.

Social Security

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
Neighborhood Legal Services
(800) 433-6251
Pilipino Workers Center
153 Glendale Blvd. LA (213) 250-4353

Can Using 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.

The People’s Guide 2017
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. Deeming applies for CalFresh/Food Stamps and cash assistance programs; however, there is no deeming if you are applying for health care 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 for Refugees

Each “official” or documented refugee who enters the United States is assigned to a Resettlement Agency (RA), usually before arrival. In addition to initial resettlement and sponsorship, these offices can provide some employment assistance and social service counseling. RAs can also give referrals to other services and often help refugees arrange for the entry of close family members. These organizations include the following:

Jewish Family Services Interfaith Refugee & Immigration Service (323) 667-0489
International Institute of Los Angeles (American Council for Nationalities Service) (323) 224-3800

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) 993-7670 www.lagay-center.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 are disabled, the Department of Public Social Services [DPSS] office, where you get your cash aid and food stamps, must help you to request a hearing and to understand your rights, so ask for help if you need it. For example, you may need help writing because you have arthritis. If you are disabled and cannot come to a hearing downtown you have a right to have a hearing in your home. However, you must request an in-home hearing and tell why you need it. Keep a copy of your hearing request. If you are treated unfairly because of a disability or health problem, send a complaint letter to the Civil Rights Division, U.S. Dept. of Justice, P.O. Box 66118, Washington DC 20035-6118.

Seek advice and assistance. Talk to a legal worker or community worker about your situation. [See Good Advice, p. 68].

Keep good records and save all papers that an agency gives or mails to you. Keep a copy of any documents that you send to a county office. Get a receipt for any papers you mail or hand in to a county office. Write down the name of anyone you speak with in person or over the phone and the date and time that you talked.

You have a right to see your case file and to copy anything you need in it, such as the documents you provided to the DPSS office, notices of action, requests for documents, and anything the DPSS office mailed or hand delivered to you.

You have a right to see any regulations or instructions that apply to your situation. The county must follow a legally-guaranteed set of rights which apply to any of these programs.

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, ask to speak 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 under Welfare and Institutions Code section 10967 and want to get your benefits reinstated.

If you do not ask for a fair hearing before the date the action takes place, your aid may be reduced or cut, but you still may fight the action if you ask for the hearing within 90 days of the date the notice was mailed. Save the envelope your notice came in and a copy of your fair hearing request so you will have proof that you met the required deadline.

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.cahealth.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 first and last 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.

3. Next Steps

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.

4. What If I’m Disabled or Homebound?

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.

5. After the Hearing

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, the state can decide that you can get extra money for the delay.

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.
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. If your reconsideration or waiver is denied, you may request a hearing before an ALJ. 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.

If You Get SSI or SSDI and Begin Working

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 Gainful Activity” or “SGA”). Ten days after you get the tentative notice, a notice that your payments will stop will be sent to you. Request a reconsideration immediately. To protect yourself, it is best to make a new application at the same time you request a Reconsideration. In 2017 SGA is $1170 a month ($1950 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 (Multilingual. 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 advancingjustice-la.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.bethtzedek.org 3250 Wilshire Blvd. L.A.90010 or (multilingual service: 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.nka.sppsrl.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)

Harriet 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) 736-1334 800 S. Figueroa St., #1120, L.A.90017  
(213) 736-1334 TTD

Women Helping Women Services  
(323) 655-3807 (Counseling, information and referral for many problems)

Disability Rights California  
www.disabilityrightsca.org  
350 S Bixel St, Suite 290, L.A. (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.disabilityrightslegalcenter.org  
800 S. Figueroa St., #1120, L.A.90017  
(213) 736-1334.  
213-736-8310 TTD

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(213) 736-1334 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)  
(323) 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
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.

Victims of Abuse and Violence

1. Victims of Violent Crime
The California Victim Compensation Program provides eligible victims with reimbursement for many crime related expenses, including funeral, medical, income loss, relocation and other. There are restrictions. See www.victims.ca.gov or call (800) 777-9229

2. 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)
## Department of Public Social Services

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.

<table>
<thead>
<tr>
<th>No.</th>
<th>Location</th>
<th>Address</th>
<th>Phone</th>
</tr>
</thead>
<tbody>
<tr>
<td>01</td>
<td>Metro Family (CW)</td>
<td>2707 S. Grand Ave., LA 90007</td>
<td>(866) 613-3777</td>
</tr>
<tr>
<td>02</td>
<td>1st Street (CW)</td>
<td>1494 N. Grand, Glendale 91203</td>
<td>(866) 613-3777</td>
</tr>
<tr>
<td>03</td>
<td>Metro Special (GR, FS)</td>
<td>3101 W. 115th St., LA 90047</td>
<td>(866) 613-3777</td>
</tr>
<tr>
<td>04</td>
<td>El Monte (CW)</td>
<td>3350 Aerojet Ave, El Monte 91731</td>
<td>(866) 613-3777</td>
</tr>
<tr>
<td>05</td>
<td>Belvedere (CW, FS, MC)</td>
<td>5445 Whittier Blvd LA 90022</td>
<td>(323) 727-4542</td>
</tr>
<tr>
<td>06</td>
<td>Cudahy (CW, FS, MC)</td>
<td>8130 S. Atlantic Ave. Cudahy 90201</td>
<td>(323) 560-5192</td>
</tr>
<tr>
<td>07</td>
<td>South Special (GR, FS)</td>
<td>17600-B Santa Fe Ave., Rancho Dominguez 90221</td>
<td>(866) 613-3777</td>
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<td>Southwest Special (GR, FS, MC)</td>
<td>1819 W. 120th St., LA 90047</td>
<td>(866) 613-3777</td>
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<td>10</td>
<td>Wilshire Special (GR, FS, MC, CAPI)</td>
<td>2415 6th St. L.A. 90057</td>
<td>(866) 613-3777</td>
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<td>11</td>
<td>East Valley (CW, FS, MC)</td>
<td>14545 Lanark St. Panorama City 91402</td>
<td>(866) 613-3777</td>
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<td>12</td>
<td>Exposition Park (CW, FS)</td>
<td>3833 S. Vermont Ave. L.A. 90037</td>
<td>(866) 613-3777</td>
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<td>Metro East (CW, GR, FS)</td>
<td>2855 E. Olympic Blvd., L.A. 90023</td>
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<td>17</td>
<td>Florence (CW, FS, MC)</td>
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<td>Compton (CW, FS, MC)</td>
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<td>10728 S. Central Ave., L.A. 90048</td>
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