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 need to read the entire book, just find the topic you need help with 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 book!

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 for their family or their children, and not knowing what the application steps are. Language barriers, people being made to feel embarrassed for asking for needed help.

The People’s Guide is dedicated to helping all people overcome barriers when they try to get help. Everyone has the right to enough food, housing, and health care. You help when you share this information with other people who need help. There is another important way to help. In Sacramento, Washington DC and other communities, people are always being debated. In Sacramento, Washington DC and other communities, people need help. You help when you share this information with other people and health care. You help when you have the right to enough food, housing, and health care. You help when you have the right to enough food, housing, and health care.

In 2020, the President and Congress are discussing even more huge budget cuts that would greatly reduce cash and food assistance, our rights to safe and healthy working conditions, care, workers’ rights, immigrants’ 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 or visit: https://www.govtrack.us. Congress directly at (202) 224-3121.

Politicians often want to use money for other things than health, welfare and social services. But when the rich get too much richer the poor get too much poorer, the gap has very bad effects on the whole society. When the rich get too much other things than health, welfare and social services, the rich 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 N. Mariposa Los Angeles, CA 90006 Tel: 213-388 8228 www.hungeractionla.org info@hungeractionla.org

For further assistance:

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) 660-4026 (TTY)

LA County Office of Immigrant Affairs oasis.lacounty.gov Updated information on immigration issues

LA County Consumer & Business Affairs dcba.lacounty.gov Help for workers, renters & consumers

www.mypublicbenefits.org outlines how low income families can qualify for multiple programs, especially working families.

Public Policy Organizations Get involved with these organizations to learn about policies affecting you.

ACCE (213)683-4548 www.acce.org

California Food Policy Advocates (213) 482-8200 www.cfpap.net

California Partnership www.california-partnership.org

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

Community Coalition (323) 750-9087 www.cccoulthd.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.lane.org

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

L.A. Food Policy Council www.goodfoodla.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 www.smclaw.org

Social Justice Learning Institute (323) 952-7363 www.sjl.org

Spanish translation: Eliza Fraga, Elizabeth Medrano

DECLARER: Hunger Action Los Angeles (HALA) and other contributors to this book are not responsible for the action, consent, 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. 67). Also, phone numbers and other important information: change information: the change was accurate as of December 2019.

Contents

Income, Jobs, & Training:

Medi-Cal ..................45

Medicaid assistance for low income people

Health Care for Children...52

Free & Low Cost Health Care

Health care you can get if you don’t qualify for Medi-Cal: mental health, substance abuse, and regional centers

In Home Supportive Service and Long Term Care...56

Medicare .................57

Health care for retirees, their dependents, and people with disabilities

Transportation and Utilities:

Transportation ........58

Bus passes, affordable car insurance, help for cyclists, bike and car rental

Utilities and Phone ..........60

Help with utility bills and special equipment for the disabled

Guides for Further Help:

Guide for Non-Citizens....62

How to get the benefits you are entitled to

Good Advice ............69

Legal Aid and crisis resources

Welfare Offices .......71

LA FAMILY SOURCE CENTERS

LA County Office of Immigrant Affairs oasis.lacounty.gov

Immigration Resources:

Los Angeles

211 LA County

LA County Office of Immigrant Affairs oasis.lacounty.gov Updated information on immigration issues

LA County Consumer & Business Affairs dcba.lacounty.gov Help for workers, renters & consumers

www.mypublicbenefits.org outlines how low income families can qualify for multiple programs, especially working families.

ACCE (213)683-4548 www.acce.org

California Food Policy Advocates (213) 482-8200 www.cfpap.net

California Partnership www.california-partnership.org

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

Community Coalition (323) 750-9087 www.cccoulthd.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.lane.org

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

L.A. Food Policy Council www.goodfoodla.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 Social Justice Learning Institute (323) 952-7363

(800) 481-8683 or visit: https://www.govtrack.us. Congress directly at (202) 224-3121.

Politicians often want to use money for other things than health, welfare and social services. But when the rich get too much richer the poor get too much poorer, the gap has very bad effects on the whole society. When the rich get too much other things than health, welfare and social services, the rich 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 N. Mariposa Los Angeles, CA 90006 Tel: 213-388 8228 www.hungeractionla.org info@hungeractionla.org

For further assistance:

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) 660-4026 (TTY)

LA County Office of Immigrant Affairs oasis.lacounty.gov Updated information on immigration issues

LA County Consumer & Business Affairs dcba.lacounty.gov Help for workers, renters & consumers

www.mypublicbenefits.org outlines how low income families can qualify for multiple programs, especially working families.

Public Policy Organizations Get involved with these organizations to learn about policies affecting you.

ACCE (213)683-4548 www.acce.org

California Food Policy Advocates (213) 482-8200 www.cfpap.net

California Partnership www.california-partnership.org

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

Community Coalition (323) 750-9087 www.cccoulthd.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.lane.org

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

L.A. Food Policy Council www.goodfoodla.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 Social Justice Learning Institute (323) 952-7363 www.sjl.org

Spanish translation: Eliza Fraga, Elizabeth Medrano

DECLARER: Hunger Action Los Angeles (HALA) and other contributors to this book are not responsible for the action, consent, 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. 67). Also, phone numbers and other important information: change information: the change was accurate as of December 2019.
1. If You Are Homeless

Winter Shelters: These shelters are usually operated by the City and County of Los Angeles from the beginning of November until the end of March. LAHSA (LA Homeless Services Authority) Hotline: (800) 548-4697. There are some major shelters in LA:

- Los Angeles Mission
  - 13422 Saticoy, San Fernando Rescue Mission
  - 505 Olympic, Santa Monica
  - Los Angeles (213) 260-8035
  - N. Hollywood, (818) 785-4476

These shelters are usually becoming homeless and receive or qualify about who can stay and how long they can stay. At the shelters which are funded by the government, Winter Shelter is now a place where you can park your car and stay overnight, with security and access to bathroom.

- Bell Shelter
  - Los Angeles (213) 624-9258
- Cardinal Manning Ctr.
  - 171 S. Gless Street
- Los Angeles (213) 629-1227
- Los Angeles Mission
  - 2135 Pacific Ave LB  (562) 591-1292
- Long Beach Rescue Mission
  - 1307 Pacific Ave LB (562) 915-1292
- Los Angeles 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 Ct. 231 Winston St. Los Angeles (213) 229-9963
- Midnight Mission 601 S. San Pedro St. Los Angeles (213) 624-9258
- Drive-in Mission 171 S. Gliss Street Los Angeles (323) 881-0032
- San Fernando Rescue Mission 3422 Satyci, N. Hollywood, (818) 785-4476
- Shove House 936 S. Centre St., San Pedro (310) 521-9310
- YR Shelter Program 9304 Broadway PI. Los Angeles (323) 232-1711
- Union Rescue Mission 545 S. San Pedro St. Los Angeles (213) 347-6300
- Union Station 412 S. Raymond Ave, Pasadena CA (626) 337-0140

Housing

Legal Issues If You’re On the Street

1. If You Are Living in Your Car

If you are homeless and living in your vehicle, be aware that the City of Los Angeles is considering an ordinance that would ban sleeping overnight in vehicles in residential areas. The law also forbids living in a vehicle shelter within a block of a park, school or day care. Tickets for the first offense will be $25, the second offense $50 and the seventh after that. 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.

Safe Parking (213) 793-8493 can find you a place where you can park your car and stay overnight, with security and access to bathroom.

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 infractions citations - including tickets related to sleeping/living in a tent or on the streets, riding your bicycle, the wrong side of the street, etc. Tickets that cannot receive assistance include moving violations, MTA fare evasion tickets, and tickets that are expired. If your rent increased more than 8.3% between March 15, 2019 and January 1, 2020, you are entitled to have your rent reduced to whatever you were paying on March 15, 2019 plus 8.3%. If your rent increased less than 8.3% between March 15, 2019 and January 1, 2020, you will have to pay your original rent. You can get up to two increases before March 15, 2020, but they can’t exceed more than 8.3% above your March 15, 2019 rent.

If your city or county also has Rent Stabilization, then those rules apply. In Los Angeles City, rents are limited on buildings built before October 1, 1978.
3. Relocation
Relocation payment is equal to one month's rent. It must be paid within 15 days of the no-fault eviction notice. Local jurisdictions may require greater relocation relief amounts, so check local laws.

- If a tenant receives a relocation payment but does not vacate, the owner can recover the payment in an eviction.
- Instead of making a relocation payment, an owner can waive the last month's rent in writing.

If a property is subject to Just Cause protections, owners must give tenants written notice:
- If a tenancy starts or renews on or after July 1, 2020, the notice must be an addendum to the lease or the lease notice signed by tenants, who receive a copy.
- If a tenancy exist prior to July 1, 2020, notice must be given no later than August 1, 2020 OR as an addendum to the lease.
- The notice must be in 12 point font (larger than this text you are reading) and in the language the lease was negotiated in.
- Owners must also notify tenants if they are NOT covered by Just Cause.

4. Local Rent Control
If you live in the city of Los Angeles in a rental unit that has two or more units on the list, and was built on or before October 1, 1978, your rental unit might be under rent control. This means the rent you pay can only be increased by a set percentage, as set by law. Your landlord can only evict you for a good cause, and in most cases you must be given a 30-60 day notice to vacate. You can ask your housing inspector to refer your case to the Urgent Repair Program (in LA.)

5. 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 the rent, you can go to Small Claims Court to try to get the money back. If your landlord has been cited by the city for a code violation, you can file a complaint with the Department of Building and Safety, or Health Department, and repairs have not been made within 60 days, you can go to Small Claims Court to sue your landlord for the cost of the repairs. The attorney or the claims judge can order the landlord to make the repairs. Ask the judge about Civil Code Section 942.4 in cases like this.

If you are looking to recover money for damaged personal property, repairs that you made, or can file a case in Small Claims Court for up to $10,000.

6. 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, national origin, or because you are married or unmarried, or have children, call:
- Southern California Housing Rights Center (818) 338-5377
- California Department of Fair Employment and Housing (800) 884-1684
- (800) 700-2320 (TDD Line)

You are also contact the following organizations for assistance with an eviction:
- Legal Aid Foundation (800) 399-4529
- Neighborhood Legal Services of Los Angeles County (818) 896-5211
- Southern California Housing Rights Center (818) 338-5377
- Coalition for Economic Survival (800) 399-4529
- Legal Aid Foundation of Los Angeles (800) 399-4529
- Disability Rights Legal Center www.disabilityrightslacenter.org
- The Fair Housing Act requires landlords to not discriminate against persons with disabilities who have assistance animals. There is an exception if the specific animal in question poses a threat to others’ health, safety, or property. If you are facing an eviction because of your assistance animal, see page 46 for more information.
**Tax Credits**

Tax credits are benefits you can get only by filling 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) TAK-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 (it has to be form 1040 or 1040A) 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 cannot use an ITIN.).

You qualify for earned income credit if your yearly income in 2019 is below the level shown in the chart at the bottom of the page.

If you are receiving CalWORKs, or CalFresh in the chart at the bottom of the page.

If you are receiving CalWORKs, or CalFresh in the chart at the bottom of the page.

#### EITC Eligibility

<table>
<thead>
<tr>
<th>Dependents</th>
<th>Single, Head of Household or Widowed</th>
<th>Married Filing Jointly</th>
<th>Maximum Credit</th>
</tr>
</thead>
<tbody>
<tr>
<td>0 Children</td>
<td>$4,200</td>
<td>$7,550</td>
<td>$2,050</td>
</tr>
<tr>
<td>1 Child</td>
<td>$5,450</td>
<td>$9,690</td>
<td>$3,100</td>
</tr>
<tr>
<td>2 or more</td>
<td>$6,600</td>
<td>$12,090</td>
<td>$3,900</td>
</tr>
</tbody>
</table>

You can also get up to $500 taken off joint, or $200,000 for everyone else. The federal and state governments both offer a Child and Dependent Care Credit which can reduce your taxes by up to $3,000 generally. The cost you paid for care for a child under 13, an incapacitated spouse, or parent, or another dependent, if paying for the care allows you to work. You can get up to $6,000 for two or more dependents. The child credit is $1,050 and is limited to families with under $100,000 income per year. The federal credit is capped at $3,650 and has no income limit but is reduced as your income goes up. You must provide your care provider’s name, address, and social security number or Employment Identification Number. The caretaker can’t be your spouse, a parent, or your child 18 or younger. See https://www.ftb.ca.gov/file/personal/ credits/ for more state tax credits. A family of three or more children can qualify for up to $2,982.

More information and help for both the federal and state Earned Income Credit and the new Young Child Tax Credit can be found at ceitc.ca.gov or irs.gov. Tax credit calculators that can help you figure out how much you’ll receive for each credit.

### 2. Child Tax Credit

California families with at least one child under 6 years old as of December 31, 2019 who are also eligible for CalEITC can qualify for up to $1,000 in the new Young Child Tax Credit. You can begin earning this credit as soon as you have $1 of income. Find information at https://cal4me.org.

### 3. Dependent Care Tax Credit

The federal Child Tax Credit offers up to $2,000 per qualifying dependent child 16 or younger. To qualify your gross income must be under $400,000 if married filing jointly, or $200,000 for everyone else. You can get up to $500 taken off your taxes for other qualifying dependents besides children.

#### Dependent Care Tax Credit

<table>
<thead>
<tr>
<th>Dependents</th>
<th>Single, Head of Household or Widowed</th>
<th>Married Filing Jointly</th>
<th>Maximum Credit</th>
</tr>
</thead>
<tbody>
<tr>
<td>0 Children</td>
<td>$400</td>
<td>$700</td>
<td>$200</td>
</tr>
<tr>
<td>1 Child</td>
<td>$600</td>
<td>$1,000</td>
<td>$300</td>
</tr>
<tr>
<td>2 or more</td>
<td>$800</td>
<td>$1,400</td>
<td>$400</td>
</tr>
</tbody>
</table>

#### Child and Dependent Care Tax Credit

The federal Child Tax Credit offers up to $2,000 per qualifying dependent child 16 or younger. To qualify your gross income must be under $400,000 if married filing jointly, or $200,000 for everyone else. You can get up to $500 taken off your taxes for other qualifying dependents besides children.

#### EITC hotline

If you are receiving CalWORKs, or CalFresh and want to check if you qualify for up to $1,000 in the new Young Child Tax Credit. You can begin earning this credit as soon as you have $1 of income. Find information at https://cal4me.org.

#### Child Tax Credit

The federal Child Tax Credit offers up to $2,000 per qualifying dependent child 16 or younger. To qualify your gross income must be under $400,000 if married filing jointly, or $200,000 for everyone else. You can get up to $500 taken off your taxes for other qualifying dependents besides children.

#### Dependent Care Tax Credit

The federal Child Tax Credit offers up to $2,000 per qualifying dependent child 16 or younger. To qualify your gross income must be under $400,000 if married filing jointly, or $200,000 for everyone else. You can get up to $500 taken off your taxes for other qualifying dependents besides children.

#### EITC hotline

If you are receiving CalWORKs, or CalFresh and want to check if you qualify for up to $1,000 in the new Young Child Tax Credit. You can begin earning this credit as soon as you have $1 of income. Find information at https://cal4me.org.

#### Child Tax Credit

The federal Child Tax Credit offers up to $2,000 per qualifying dependent child 16 or younger. To qualify your gross income must be under $400,000 if married filing jointly, or $200,000 for everyone else. You can get up to $500 taken off your taxes for other qualifying dependents besides children.
1. America's Job Centers

Local America's Job Centers of California are located at different places across the city and provide services, tax, licenses, 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. 69) if you have any troubles getting these services.

City of LA: (213) 744-7164
TTY (213) 744-9395
lacitywlb@lacity.org

South Bay: Will: (310) 970-7700
http://www.swbww.org/

Verdugo: (818) 937-8011
http://www.verdugo.org/

Pacifica Gateway: (562) 570-3700
http://www.pacificgateway.org/web

Football (626) 796-5627 http://www.
ftwworks.org

2. Community Colleges

Community colleges offer career opportunities or facilitate transfer to a 4 year university. Most of them offer financial aid with the submission of the FAFSA application, school-specific scholarships, day-care centers, resources for homeless and low-income students, and multilingual counselors, financial aid coordinators, and other faculty. The standard pricing with no financial aid is about $46/unit.

General information on requirements and how to apply: cccaplay.org
Search for a college: ccco.edu

3. If You Have a Criminal Record

Sometimes a criminal record can keep you from getting a job. An expungement can help you by changing your criminal conviction to a dismissal. When you get an expungement, you cannot use your conviction against you in private background check, and it also helps with license certification and government employment. Be aware though that the expungement does not take the conviction off your record.

You are eligible for an expungement if you are not on probation or parole, not currently serving a sentence for any offense, or not currently charged with an offense, and if your conviction is also eligible. Most misdemeanor and infraction convictions are eligible. Felony convictions are eligible in limited circumstances.

The first step is to get your court case information. You can go to any criminal courthouse in the county where you were convicted and ask for your criminal docket. A criminal docket contains information on a specific case. There may be a fee for copies of your docket. You can also request your complete criminal file, a "RAP" sheet, for a fee, from the California Department of Justice. To get a RAP sheet you need to go to a LiveScan provider and get your fingerprints taken.

If you think you are eligible for an expungement and have your case information, contact the following organizations for help:

Legal Aid Foundation of Los Angeles (323) 399-4552

A New Way of Life Reentry Project (323) 563-3575

Los Angeles County Public Defender (818) 309-6170

Special services include vocational counseling and training; job placement; money for transportation; ready, able, and willing to accept work when you find it. EDD also sometimes approves "new hires" who have no experience to gain skills while you are unemployed.

Apply online at: www.edd.ca.gov

Or call: (800) 360-5616

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 or fired, but not fired for "misconduct," or quit for a very good reason)
• Be physically able to work
• Be available for work which means to be ready, able and willing to accept suitable work
• Actively looking for work

If you experience problems with Department of Rehabilitation contact the Disability Rights California Client Assistance Program at (800) 776-4776 TTY line (800) 719-5798. Or, visit: www.drcalif.org/de/ClientAssistanceProgram

Unemployment Benefits

How to Apply

You may be eligible to receive unemployment insurance (UI) benefits from the Employment Development Department (EDD) if you lose your job or your hours cut at work, and you still have other regular income, such as savings, funds or money from investments, and you can show you lost your job through no fault of your own.

You must file your claim within 14 days of being laid off, fired, or having your hours cut at work or your employment terminations. If you are laid off, fired, or had your hours cut, you must file your claim within 14 days of the end of your regular pay period. For unemployed workers who have been laid off, fired, and had their hours cut, the benefit period is usually extended for 26 weeks. However, if you have been unemployed for more than 26 weeks, you may still be eligible for benefits in the county where you lost your job.

To file your claim, you must file a written claim to EDD. You can file by mail or by phone. If you are denied benefits, you may appeal.

1. File Your Claim

To file your claim, you must:

• file your claim within 14 days of losing your job by mail or by phone
• file your claim electronically on the EDD website, www.edd.ca.gov

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

Your UI application process will usually include a telephone interview. After the interview, you will receive a decision indicating whether or not they think you qualify for benefits.

2. Appeal Your Denial

If you disagree with the EDD decision, you should appeal and ask for a hearing before the appeal deadline. Your past employer or the EDD will explain why you are not qualified for benefits. You can appeal by filling out the appeal form that is included with the Notice of Determination. The appeal deadline is 30 days from the mailing date of the Notice of Determination.

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 you quit for no good reason, they can cancel it. Misconduct means that you did something bad that could harm the employer, and you either did it on purpose or you completely disregarded the employer's interests. To show that misconduct existed, you will need to show that it was intentional. You may appeal if you think that it was not your fault, or if the action was an isolated occurrence. Also if you can show you had a very compelling reason to quit, or that you did everything possible to preserve the job before you quit, then you can get UI benefits. Call legal services to help you prepare your appeal, keep up-to-date with the continued claim forms, and file them with EDD. If you win the appeal, you can get back benefits.
If you are Working

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 a government office. To find out about unions, or to get in touch with an organizer, call the LA County Federation of Labor (AFL-CIO) (213) 381-5611. www.lacfoncio.org, or contact one of the groups listed on pg. 13 under “Groups That Can Help.”

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 $10,000) if your employer does any of the following:

• Pays less than the minimum wage, which increases to $13 per hour in California on January 1, 2022 for businesses with 26 or more employees ($12 for other businesses.). On July 1, 2020, the minimum wage in the City of Los Angeles, and in the unincorporated areas of Los Angeles County, will increase to $15 per hour (for businesses with 26 or more employees).

• 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 one day.

• Does not provide meal breaks within 4 hours on the 7th day of a work in a row.

• Takes improper deductions from your wages.

• Does not pay you all wages owed immediately upon discharge or within 72 hours if you quit and don’t give 3 days notice.

• After you lose your job, does not pay vacation time that you were promised and have earned.

• Does not pay wages owed, or pays you with a check that bounces.

• Does not give you one 10 minute paid break for every 4 hours worked or a meal break of at least a half hour without interruptions, which can be unpaid, if you work less than a 5-hour shift. You may be entitled to a wage premium for each meal and rest period violation per day.

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

You must bring your claim within three years of the date you should have paid the wages you are claiming. Find the wage claim form at: California Labor Commissioner: https://www.dir.ca.gov/dwc/HowToFileWageClaim.htm

Free Wage Claim Assistance:
Legal Aid Foundation of Los Angeles (800) 399-4529
Neighborhood Legal Services (800) 433-6251

To reach the Labor Commissioner’s office for wage claims:
State Industrial Relations Department, Labor Standards Enforcement, 320 W. 4th Street, Suite 450, LA, 90012. (213) 620-6330

Long Beach: 300 Oceangate, Suite 302 310-434-5838

Vans Nuys: 6150 Van Nuys Blvd. # 206 (818) 901-5315.

www.dir.ca.gov/DLSE

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

4. Work Safety

Employers are required to provide safe workplaces. If you are asked to work under unsafe or unhealthy conditions, a state agency can investigate your complain 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/WorkSafetyOffices.htm.

5. Sick Leave

California law requires employers to provide employees with one hour of paid sick leave for every 30 hours they work. The law applies to employees who have worked for 30 days (Cal/OSHA) office nearest your work. Visit www.dir.ca.gov/dosh/WorkSafetyOffices.htm.

People with a “Physician Practitioner’s Certificate” to:

P. O. Box 10402
Van Nuys, CA 91410-0402

State Disability Insurance
P. O. Box 513096
Long Beach, CA 90801-3096

California unemployment insurance

Wednesday, March 18, 2020

If you are not able to work for a temporary period because of illness, injury, or pregnancy, you may be able to get state disability insurance. These Alliance 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 able to do your regular or customary work for at least eight consecutive days. You must have earned $300 from which SDI deductions were withheld during a previous period. You

1. State Disability Insurance

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

www.smalotlaw.org – Research attorneys who can help with work related issues

LA County Consumer & Business Affairs: (213) 977-7500

Asian Americans Advancing Justice 1145 Wilshire Blvd. (213) 977-7500

Black Worker Center 5350 S. Crenshaw (323) 752-7281

Chicano/Latino Media Watch 2533 W. 3rd Street # 101 (888) 624-4752

CLEAN Carwash Campaign 516 W. Vernon Ave (323) 644-1630

Korean Immigrant Workers Association: (818) 748-5866

www.cleancarwashcampaign.org

Garment Workers Center (213) 749-7775

www.garmentworkers.org

You must also ask your doctor to complete and sign the “Physician Practitioner’s Certificate.” If your doctor will mail the completed certificate to EDD, you do not need to apply to person to receive benefits.

If your disability prevents you from completing the form, you can file for benefits on behalf of a disabled claimant by representing the claimant. In that case, the claimant (or a person with legal authority to act for the claimant) will need to sign the certificate.

You may file 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

State Disability Insurance
P. O. Box 513096
Long Beach, CA 90801-3096

You may not be eligible for SDI benefits if you:

• Are not suffering a loss of wages.

• Are claimig or receiving Unemployment Insurance.

• Have become disabled while committing a crime resulting in a felony conviction.

• Are receiving workers’ compensation benefits of 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 alcohol recovery home or drug-free home, unless it is licensed by the state.

• Fail to submit to an independent medical examination when requested to do so.

• Have become disabled while customarily working during the base period and you remain disabled, you may be able to establish a valid claim by using an alternative method of proof.

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
Worker's Rights

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 worker's compensation benefits, or did not work because of a labor dispute.

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

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

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 continuing disability or certification form for the next two weeks will be sent. You must report income you receive, even though SDI payments will not reduce your SDI payments.

Coordination with Worker's Comp

If you also have a worker's comp claim and the insurance carrier denies or delays 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 Worker's Compensation are two separate programs. You cannot legally be paid full benefits from both programs for the same period. However, if your worker’s 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 SDI from Social Security well before your year of SDI is over. (see page 29 Social Security).

2. Workers' Comp Benefits

If you are disabled because of an injury that occurred on the job, or because of unhealthy, unsafe, or stressful conditions at work, you should apply for Workers' Compensation benefits. You are entitled to receive two types of Workers' Compensation benefits regardless of your immigration status or the length of time you've been paid for your employer. There are six basic types of Workers' Compensation benefits:

A. Medical Benefits: The employer pays for certain medical care expenses resulting from a work-related injury or illness. This includes reasonable burial expenses. Death benefits are paid at the time of a work-related injury or illness, and are paid for a period that increases with the number of years that the injured person was employed by the employer. These benefits are paid until the injured person returns to work, or until the disability becomes “permanent and stationary”.

B. Temporary Disability Benefits: These benefits are paid every two weeks if you are unable to return to work within three months of the hospitalization or medical care. The benefits are intended to partially replace two-thirds of the wages lost because of the injury. These benefits are paid until you can return to work, or until the disability becomes “permanent and stationary”.

C. Permanent Disability Benefits: If your permanent disability prevents you from working, you may receive weekly payments for the rest of your life. The rate of payment depends on the date you were injured.

D. Permanent Partial Disability: The percentage of disability is based on one or more medical evaluations by doctors selected either by agreement of the parties or by a random list of names provided by the state. You receive benefits every two weeks 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.

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 supplemental job displacement benefits (SJDB). SJDB comes in the form of a non-transferable voucher that can be used to pay for educational training or skill enhancement, or both, at state-approved or state-accredited schools. (see page 98 Vocational Training and Employment).

F. Death Benefits: Death benefits are payments to a spouse, children or other dependents if an employee dies from a work-related injury or illness. This includes reasonable burial expenses. Death benefits are paid at the time of death, and amount to two-thirds of the wages lost because of the injury.

By state law, you are entitled to receive, even though sometimes it does not provide you with a Claim Form, or “pre- authorizes” your claim. You can return to work, or until the disability is no longer a significant limitation to work.

These Officers cannot represent you or act as your advocate.

You apply for CalWORKs at the nearest DPSS (Department of Public Social Services) office. (see page 71 Welfare Offices). You can also apply online through YourBenefits.ca.gov website at https://yourbenefits.ca.gov/. If you have an emergency, you should apply at the office (see pg. 71, online)

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

CalWORKs, a joint program of the California Department of Social Services (DPSS) and the California Employment Development Department (EDD), is a welfare-to-work program designed to help families and individuals become self-sufficient. CalWORKs provides cash assistance to families to help support the family unit and help their members find gainful employment. In addition to cash assistance, CalWORKs provides employment services, educational retraining, and skill enhancement assistance.

To qualify your resources must be less than $2,250. But if some in the family on aid is disabled or 60 years or older, the limit is $3,500. Cash on hand, savings, some cars, and most other property count as resources. A home you live in, personal effects, a computer, and some retirement accounts don’t count. The income and resources of a spouse or partner can be disregarded if someone applying for CalWORKs is fleeing because of domestic violence. Please be sure to ask about these rules.

Disabled individuals who meet certain criteria can open a savings account for Qualified Disability Expenses (QDE) known as CalABLE, without losing eligibility to CalWORKs. For CalABLE purposes, the designated beneficiary of a CalABLE account may save up to $100,000 and a maximum contribution of $15,000. Visit www.CalABLE.ca.gov for more information.

While on cash aid, you can have a written agreement with DPSS to have a special ‘financial aid’ savings account for education, training, starting a business or buying a house, and it will not count. You can have some property count as an aid account but you have to make a written agreement with DPSS on a form, and give them the bank account information.

Money you make from working and unemployement benefits, Social Security payments, most 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 more than one loan per student.

To qualify your resources must be less than $2,250. But if some in the family on aid is disabled or 60 years or older, the limit is $3,500. Cash on hand, savings, some cars, and most other property count as resources. A home you live in, personal effects, a computer, and some retirement accounts don’t count. The income and resources of a spouse or partner can be disregarded if someone applying for CalWORKs is fleeing because of domestic violence. Please be sure to ask about these rules.

Disabled individuals who meet certain criteria can open a savings account for Qualified Disability Expenses (QDE) known as CalABLE, without losing eligibility to CalWORKs. For CalABLE purposes, the designated beneficiary of a CalABLE account may save up to $100,000 and a maximum contribution of $15,000. Visit www.CalABLE.ca.gov for more information.
CalWORKs

CalWORKs divides people who get cash aid into "exempt" and "nonexempt" recipients. You're correct if you're getting disability payments such as SSI, SSDI, SSI/SSP, State Disability Insurance, SDI, Workers' Comp or Temporary Disability Indemnity.

If you meet the eligibility requirements, you will be assigned a "Support Case Manager," who can help you with the problems you or your children may have. The case manager can explain to you the eligibility requirements and what services are available.

You must apply for CalWORKs in person. You can make an appointment with your local DPSS office or you can make an application for CalWORKs at your local One-Stop Career Center. You can also apply online at dpss.lacounty.gov/wps/portal/dpss/main/. You can get a special "reasonable modification" if you have a physical or mental disability that makes it impossible for you to go through the regular application process. DPSS will help you. They will tell you how to get cash aid at home, helping you fill out forms, or explaining to you the reason for denial, you may request a "reasonable modification" by:

- verbal request to any employee at a DPSS office.
- calling the ADA hotline at (844) 586-5550. OR
- submitting a written request or ADA PUP 2, Request for Reasonable Modification to any DPSS employee. You can download the ADA PUP 2 form from the DPSS ADA website at dpp.acounty.gov/wps/portal/dps/maas/programs-and-services/civilrights/ada and mail it to: DPSS ADA Title II Coordinator 12860 Crossroads Parkway South City of Industry, CA 91746

Ask your worker for this help. If they won't give it to you, call Legal Services for help.

5. Foster Care (Someone Else's Children)

If you are caring for someone else's children, the child or children may qualify for Foster Care or Approved Relative Caregiver payments even if you are related to the children. Foster Care and Approved Relative Caregiver payments are higher than CalWORKs cash aid. (see page 27 Foster Care.) If a relative's children livewith you but do not get Foster Care or Approved Relative Caregiver payments, you should be able to get cash aid for them.

6. Domestic Violence

If you are a victim of domestic violence, or suffering effects of past domestic violence tell the worker right away, as there are special benefits for you with the problems you or your children may have. Also, you may be excused from getting aid 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 impossible for you to go through the regular application process, DPSS will help you. They will tell you how to get cash aid at home, helping you fill out forms, or explaining to you the reason for denial, you may request a "reasonable modification" by:

- verbal request to any employee at a DPSS office.
- calling the ADA hotline at (844) 586-5550. OR
- submitting a written request or ADA PUP 2, Request for Reasonable Modification to any DPSS employee. You can download the ADA PUP 2 form from the DPSS ADA website at dpp.acounty.gov/wps/portal/dps/maas/programs-and-services/civilrights/ada and mail it to: DPSS ADA Title II Coordinator 12860 Crossroads Parkway South City of Industry, CA 91746

Ask your worker for this help. If they won't give it to you, call Legal Services for help.

8. Photo ID

All applicants, regardless of citizenship or legal status for living in the United States (U.S.), must provide a photo ID, in person, at the time of the application or when an adult is added to the case.

9. Next Steps

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

If you take in papers, get a receipt. Keep your own copy of all the paperwork. If you need help and your worker is not available, the eligibility worker for the CalWORKs office may also help you. You can also call the Customer Service Center at (866) 613-3777.

Within 45 days of when you turn in your application, you must either receive your first payment, or be told you have been denied aid. If the DPSS denies your aid, they must send you a letter explaining the reason. Do not sign "agreement" on your application unless you understand and agree with the written reason provided.

10. Electronic Benefits Transfer "EBT" Card

If you have an EBT "electronic benefits transfer" card, you will be able to get any Benefits and Services you need using the same card. EBT cards are reloadable. You can use them to get food at the grocery store, gas station, or convenience store. You can also use them to get cash at the ATM. EBT cards are available at the bank or other financial institution.

You will get your new EBT card in the mail or at the local DPSS office, or at the local One-Stop Career Center. You will also get a certificate.

The usual payment is up to the grant amount for three months or $2,000, whichever is larger. For a "compelling need," you can get up to $4,000 or the maximum amount paid for 6 months, whichever is greater. The diversion payment counts as months of cash aid against the 48-month time limit (amount of payment divided by monthly grant-months used up) after you get DPSS cash aid. You can still get cash aid if you need it. But if you reapply for CalWORKs within the time period that the Diversion covers, the DPSS must recall the payment by either counting the diversion months against your 48-month time limit, or decreasing your monthly benefit amount.

Diversion payments must be paid to you within 5 days after the application for a non-urgent need, or within 3 days in an emergency. Starting a new job the next day is an example of an emergency.

What Are The Requirements?

1. Reporting Every Six Months

Every six months you must report changes in income, property, and the adult in your household. You will also report once a year on a Semi-Annual Eligibility Income Report (SARI). It says "Eligibility Status Report" on the top of the form. Also once a year, you will fill out what is called an "emergency declaration," which is an annual renewal for CalWORKs. DPSS will mail you a SARI report form. The form also asks you any changes you expect in the next six months.

You must turn in the SARI-7 even if there is no change to report. If you don't get the SARI-7 in the mail 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
- Marriages, divorces or annulments
- Parole or probation violations,
- If your income goes over the "Income Reporting Threshold" ($1,982.00 per month). If, for example, a family of three (non-exempt) has an IRT of $1,982.00 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 $1,982.00.

You can either drop your SARI-7 off at the DPSS office, and get a dated receipt to show you that you have mailed it in. You can mail it to the post-paid envelope. You can also safely submit your SARI-7...
1. 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 requirement mid-year or end-of-year reports as the SAR 7. You will still have to fill out a written redetermination once a year. You may still have to complete reports every six months for CalFresh (food stamps) if allowed.

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/are not eligible because of a fleeing felon status, or has been found by a court to be in violation of probation or parole; and
- The adult(s) is/are not eligible because of a sexual predator or violent predator status.

If there is no adult receiving money because the child is at risk, or has no other information about the child, these families follow the same rules listed under “Reporting Every Six Months” on page 17.

There are some things that need to be reported to the county for child only cases within 10 days:
- When income exceeds the Income Reporting Threshold (IRT)
- Address changes
- Fleeing felon status
- Violation of conditions of parole
- Changes in family composition

2. Getting Excused from GAIN/REP ("Exempt" or "Good Cause")

You may be eligible to exempt from GAIN or REP if you are: 60 years of age or older; a youth from 16 to 18 years old in school full time; 60 years old or older; Disabled; Aided non-parent relative caring for a very young child; or a member, if DPSS agrees that this is the right thing to do based on the information you provide. In the latter case, receiving Kin-GAP benefits, or at risk of placement in foster care or in an all or disabled household member.

3. Weekly Participation Hours

Once your WTW 24-Month Time Clock ends, if you do not meet your new participation requirements, your cash aid may be reduced by $50 per month for each month you use up all your months from your WTW 24-Month Time Clock. They will also send you an appointment to review your WTW 24-Month Time Clock with you. If you use up all your months from your WTW 24-Month Time Clock, they will provide you another chance. If you choose from, and instructions on what you will do next in order to continue receiving your CalWORKs grant:
- You are sanctioned.
- You are exempt from participating.
- You are in Appraisal, Job Search, Vocational Assessment, or in the process of doing a New Plan.
- You are working part time.
- You are an exempt employee or independent contractor.
- You are not the right thing to do based on the information you provide.
- You are part of a paid or volunteer group.
- You are a member, if DPSS agrees that this is not in your best interest.
Services To Help You

Exempt people can volunteer and get help. You do not have to participate in GAIN or REP if you are excused or exempt. But you may volunteer to participate. As an exempt volunteer, you do not have to do the full 20 hours each week, but you are subject to other requirements of GAIN participants. You can do as many or as few hours each week 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 and REP participants must be offered a Learning Disability (LD) screening. You can say do you not want to take the test, 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 WtW plan must have activities that help you deal with your learning disability for the full three weeks of the study time. DPSS must decide whether job search will be useful for you, or if your time limits should be extended.

4. 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.

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 use the education and training as your Ww activity instead of going through Job Club and the rest of the GAIN process.

5. Your Ww Plan and Activities

You can request that your Employment Plan includes any work experience or job skills training offered by DPSS or other private or public school, such as General Education Development (GED), Transition to Self-Sufficiency (TSS), or Transitional Subsidized Employment (TSE) program if you are interested in working. You are paid minimum wage to work at a job you could be placed to work at for-profit businesses, which might or might not pay more than minimum wage. DPSS, the community colleges, and adult schools may also offer special job training programs for people with limited English-speaking skills. If earnings from the TSE Program cause you to lose your Food Stamps, you may be able to remain in the TSE program for three months to continue to earn wages even if your CalWORKs case is closed. You may also be eligible to continue to receive child support, including child care services. If you voluntarily request to close your CalWORKs case you will need to provide information on your CalWORKs case as requested by your CalWORKs office, you

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 each week as you are able. DPSS must also pay you for services, like child care and money for transportation, tools, and books.
8. 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 (with a few exceptions). 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 have already a 4-year college degree, then you can get 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 as long as you were in good standing when you left. If your SIP activity weekly hours of participation are less than 10 hours and your day care provider or DPSS told you to do so, you must continue the required activity for at least 10 hours a week. If your activity was already approved by DPSS, you must continue it for at least 10 hours a week. If the total required number of weekly participation hours, study time counts toward hours of participation.

7. If You Don’t Agree With The Employment or your WW Plan

If you disagree with the required weekly hours of participation, you must request a formal review of your employment eligibility. You can request this change within the first three days from the date you signed your plan. If you have already begun an activity, you have 15 days to request a change to another activity. Your worker must grant your request if the other activity is consistent with your unmet need to lead to employment. You can request this grace period only once.

8. If You Are Working, What’s Next?

• Rapid re-employment services
• Supportive services for the education/training activity
• Any month you are sick, do not get a CalWORKs cash aid payment for that month, or you are caring for an aided adult relative, or in an adult-supervised child care situation. You also have the right to ask for a CalWORKs cash aid time limit based on the reason for your request.
• You are a victim of domestic violence (including drug addiction or alcoholism) or a physical or mental illness (but not AIDS) or who already has a child, and has never lived with the child; and that caretaking interfered with regular employment or participation in GAIN activities.
• You are legally emancipated
• You lived apart from your parents or legal guardian for at least 12 months before your eighteenth birthday, or you are a runaway or homeless youth. The money is the same as time limit, except you do not have to be paid back. To apply for Housing Assistance (HA) you must: 
- be looking for permanent housing
- be homeless (you are homeless if you have no regular, permanent, place to sleep at least 1 night out of every 7)
- be homeless or have received a notice to pay rent or quit
- be in an abuse situation. You also have the right to ask for a CalWORKS cash aid time limit based on the reason for your request.

9. If You Don’t Agree With The Employment or your WW Plan

If you disagree with the required weekly hours of participation, you must request a formal review of your employment eligibility. You can request this change within the first three days from the date you signed your plan. If you have already begun an activity, you have 15 days to request a change to another activity. Your worker must grant your request if the other activity is consistent with your unmet need to lead to employment. You can request this grace period only once.

8. 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 (with a few exceptions). 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 have already a 4-year college degree, then you can get 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 as long as you were in good standing when you left. If your SIP activity weekly hours of participation are less than 10 hours and your day care provider or DPSS told you to do so, you must continue the required activity for at least 10 hours a week. If your activity was already approved by DPSS, you must continue it for at least 10 hours a week. If the total required number of weekly participation hours, study time counts toward hours of participation.

7. If You Don’t Agree With The Employment or your WW Plan

If you disagree with the required weekly hours of participation, you must request a formal review of your employment eligibility. You can request this change within the first three days from the date you signed your plan. If you have already begun an activity, you have 15 days to request a change to another activity. Your worker must grant your request if the other activity is consistent with your unmet need to lead to employment. You can request this grace period only once.

8. 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 (with a few exceptions). 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 have already a 4-year college degree, then you can get 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 as long as you were in good standing when you left. If your SIP activity weekly hours of participation are less than 10 hours and your day care provider or DPSS told you to do so, you must continue the required activity for at least 10 hours a week. If your activity was already approved by DPSS, you must continue it for at least 10 hours a week. If the total required number of weekly participation hours, study time counts toward hours of participation.

7. If You Don’t Agree With The Employment or your WW Plan

If you disagree with the required weekly hours of participation, you must request a formal review of your employment eligibility. You can request this change within the first three days from the date you signed your plan. If you have already begun an activity, you have 15 days to request a change to another activity. Your worker must grant your request if the other activity is consistent with your unmet need to lead to employment. You can request this grace period only once.

8. 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 (with a few exceptions). 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 have already a 4-year college degree, then you can get 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 as long as you were in good standing when you left. If your SIP activity weekly hours of participation are less than 10 hours and your day care provider or DPSS told you to do so, you must continue the required activity for at least 10 hours a week. If your activity was already approved by DPSS, you must continue it for at least 10 hours a week. If the total required number of weekly participation hours, study time counts toward hours of participation.

7. If You Don’t Agree With The Employment or your WW Plan

If you disagree with the required weekly hours of participation, you must request a formal review of your employment eligibility. You can request this change within the first three days from the date you signed your plan. If you have already begun an activity, you have 15 days to request a change to another activity. Your worker must grant your request if the other activity is consistent with your unmet need to lead to employment. You can request this grace period only once.

8. 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 (with a few exceptions). 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 have already a 4-year college degree, then you can get 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 as long as you were in good standing when you left. If your SIP activity weekly hours of participation are less than 10 hours and your day care provider or DPSS told you to do so, you must continue the required activity for at least 10 hours a week. If your activity was already approved by DPSS, you must continue it for at least 10 hours a week. If the total required number of weekly participation hours, study time counts toward hours of participation.

7. If You Don’t Agree With The Employment or your WW Plan

If you disagree with the required weekly hours of participation, you must request a formal review of your employment eligibility. You can request this change within the first three days from the date you signed your plan. If you have already begun an activity, you have 15 days to request a change to another activity. Your worker must grant your request if the other activity is consistent with your unmet need to lead to employment. You can request this grace period only once.

8. 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 (with a few exceptions). 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 have already a 4-year college degree, then you can get 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 as long as you were in good standing when you left. If your SIP activity weekly hours of participation are less than 10 hours and your day care provider or DPSS told you to do so, you must continue the required activity for at least 10 hours a week. If your activity was already approved by DPSS, you must continue it for at least 10 hours a week. If the total required number of weekly participation hours, study time counts toward hours of participation.

7. If You Don’t Agree With The Employment or your WW Plan

If you disagree with the required weekly hours of participation, you must request a formal review of your employment eligibility. You can request this change within the first three days from the date you signed your plan. If you have already begun an activity, you have 15 days to request a change to another activity. Your worker must grant your request if the other activity is consistent with your unmet need to lead to employment. You can request this grace period only once.

8. 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 (with a few exceptions). 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 have already a 4-year college degree, then you can get 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 as long as you were in good standing when you left. If your SIP activity weekly hours of participation are less than 10 hours and your day care provider or DPSS told you to do so, you must continue the required activity for at least 10 hours a week. If your activity was already approved by DPSS, you must continue it for at least 10 hours a week. If the total required number of weekly participation hours, study time counts toward hours of participation.
The People's Guide 2020

1. Temporary HA (Homeless Assistance)

You can get money for up to 16 consecutive days of temporary shelter such as a hotel, motel, or paid shelter. You cannot use this money to pay to stay with a friend or relative or to pay for temporary shelter, depending on your family size. If you find some place else you want to give you, you can keep the extra money.

You must show receipts to prove that you have used the money given to you to pay for temporary shelter. If you cannot show receipts, you will lose the 16 days of Temporary HA benefits until the next time you pay to a friend or relative. The Temporary HA payments will be made directly to the hotel, motel, or paid 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 Temporary HA benefits for shelter.

If eligible, DFSS should help you the same day you give them your Temporary HA benefits with the assistance. You should ask for Temporary HA benefits for as many nights as you need shelter, but your request has to be made during the 16-day period that begins the day you apply and receive your first payment of Temporary HA benefits. For example, you cannot apply during the week following the 16th week from now. If you did not receive all 16 days of Temporary HA benefits you requested, you may request a hearing to have your Temporary HA application reviewed.

Even if you decide not to go to the shelter, you should ask for money for as many nights as you need shelter, 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 HA benefits, request a hearing to collect it retroactively. After the 16 days are over, make sure you are homeless, attendance in a shelter (even if only temporary) within 10 days.

16 Additional Days: If you are homeless and have used up the 16 consecutive days of Temporary HA, you may be able to get an additional 16 days of Temporary shelter for payments if you are receiving CalWORKs and are working full-time or part-time and participating in GAIN or unemployment and participating in GAIN. Depending on your family size, you will get $65 to $145 per day for pay for temporary shelter. To get this money, you must not have more than $100 in liquid resources and obtain temporary shelter Others can use this money to pay to a friend or relative for temporary shelter. You also have to provide receipts to prove you received this money.

Expanded Temporary HA: CalWORKs applicants who provide a sworn statement of past or present domestic abuse and are making, their abusers are deemed homeless and can receive a lump sum payment equal to 16 days of Temporary HA benefits (regardless of their abuser's income or assets) on the first day of their application and are granted Good Cause for not looking for permanent housing. If the CalWORKs application has not been approved or denied, these applicants can receive an additional lump sum payment.

Expanded Temporary HA benefits are available only once in a lifetime and are in addition to regular Temporary HA (temporary and permanent) benefits and do not count against the once-a-year Temporary HA exception.

2. Permanent HA

You can also get money to cover the actual cost of security and utility deposits including last month's rent and any legal fees, tenant deposit fee, or charge that is required by a landlord as a condition of assuming occupancy, and gas, electricity, and other utility deposits. Permanent HA payments are made for the first month's rent or past due utility bills. The Permanent HA payment is made for six months of rental deposits only and cannot exceed two times your total monthly rent amount (before subsidies).

You must 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-sharing plan and your name must be on the lease.

If you are a CalWORKs participant now, and you are approved for Permanent HA benefits, you must be given Permanent HA benefits 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 Permanent HA benefits, you must first provide the documents you need to prove you are eligible for CalWORKs, and proof that you have paid your rent and are ready to sign a lease (like a note from the landlord or a proposed rental agreement).

When you receive Permanent HA benefits, you must prove to pay your landlord and/or utility companies and get receipts to give to your family size. You may be able to get up to $500 for move-in costs such as security deposits, rent, cleaning fees, key deposits, etc., utility deposits, your rental, and up to $405 for the purchase of a stove and/or refrigerator if the new place doesn’t have one. MA is once-in-a-lifetime with exceptions.

4. Moving Assistance (MA) (Homeless Assistance)

If you have a permanent place to live that you no longer have to stay with a friend or relative, and you are not yet receiving CalWORKs or EAPE, MA can help you get up to $500 per month (based on family size) for four months. You can get a “pay rent or quit” or an eviction notice due to a financial hardship (not due to any other lease or contract violation). Your rent must be within 80% of your Total Monthly Household Income. Call Legal Aid for details (pg. 69)

3. Emergency Assistance to Prevent Eviction (EAPE)

If you are at risk of becoming homeless because you didn't pay the rent due to a financial hardship (not for any other lease or contract violation), EAPE can give you enough money to pay up to two months of back rent and utilities so that you can continue living in your home. To be eligible for EAPE, you must:

• Be approved for CalWORKs, or
• Have exhausted or not be eligible to the Permanent HA Program (unless you need to access the MA Program in conjunction with the Permanent HA payment);
• Be working full-time or part-time and participating in GAIN or Post-Time Limited Services, or unemployed and participating in GAIN or Post-Time Limited Services;
• Be homeless at risk of homelessness or a tenant recipient of a Section 8 voucher;
• Ensure permanent housing where your share of the rent amount does not exceed 80% of your Total Monthly Household Income;
• Provide evidence of property availability and cost.

Once the worker verifies you are eligible, you can get up to $250 for move-in costs such as security deposits (e.g., last month's rent cleaning fees, key deposits, etc.), utility deposits, your rental, and up to $405 for the purchase of a stove and/or refrigerator if the new place doesn’t have one. MA is once-in-a-lifetime with exceptions.

5. 4-Month Rental Assistance (RA) Program

If you just found a permanent place to live that you no longer have to stay with a friend or relative, and you are not yet receiving CalWORKs or EAPE, RA can help you get up to $500 per month (based on family size) for four months. Your RA is for families who have secured unsubsidized permanent housing. If you are more than 2 months behind in payments, the RA Program may do up to $500 per month. If you are 1 month behind in payments, the RA Program may do up to $250 per month. If you are 12 months behind in payments, the RA Program may do up to $125 per month. If you are 24 months behind in payments, the RA Program may do up to $35 per month.

6. Coordinated Entry System for Families (CESF)

If you are not eligible or have exhausted any of the DPSS homeless programs and are homeless, you can use the CESF. A DPSS Homeless Care Manager can refer you to the CESF to receive rapid rehousing and prevention services to address your needs.

The People's Guide 2020

1. Preschool and Afterschool Programs

The L.A. County Office of Education offers numerous programs for all family members including:

• Literacy programs for students and parents
• Computer and job readiness for parents
• A variety of advantage programs for children under age 3
• Head Start and State Preschool

Call your local school district or call (626)292-6111. County-wide to find out about preschool programs and family literacy programs.

After School Programs

Enrollment programs provide supervised afterschool fun, growth, snacks, and learning for children from first through sixth grade. If you are a post-Time Limited Service or Post-Time Limited Service recipient, you can receive RA one time (for up to four consecutive months) when you request for RA (you must provide a rental/ lease agreement).

If you just found a permanent place to live that you no longer have to stay with a friend or relative, and you are not yet receiving CalWORKs or EAPE, RA can help you get up to $500 per month (based on family size) for four months. Your RA is for families who have secured unsubsidized permanent housing. If you are more than 2 months behind in payments, the RA Program may do up to $500 per month. If you are 1 month behind in payments, the RA Program may do up to $250 per month. If you are 12 months behind in payments, the RA Program may do up to $125 per month. If you are 24 months behind in payments, the RA Program may do up to $35 per month.

6. Coordinated Entry System for Families (CESF)

If you are not eligible or have exhausted any of the DPSS homeless programs and are homeless, you can use the CESF. A DPSS Homeless Care Manager can refer you to the CESF to receive rapid rehousing and prevention services to address your needs.

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

The People's Guide 2020

Child Care and Education

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 and enroll at the school serving the place they are living temporarily
• Cannot be denied enrollment just because all 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 between the ages of 1 and 18 if the child is disabled and needs special care. You may be eligible for child care even if you are homeless. You may apply for reduced/qualified child care at (213) 745-1900. Call your local district for information on programs in other cities.

The People’s Guide 2020
How Do I Get Child Care?
To determine whether you may be eligible for subsidized child care, you will have to talk to the agency. “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 DPS/APP or 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 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 a 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.

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.

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 enough, 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 want 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 recommend a care provider to you by someone on your CalWORKs case.
• If the provider is caring for children from more than one family (besides their own) they may need a license.
Most providers will have to be fingerprinted and go through a criminal background check. Your relatives may not have to go through this process.

CalWORKs Child Care Stage Cares
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 Effective October 1, 2019, DPSS will authorize immediate and continuous Stage One child care for CalWORKs recipients of the same day CalWORKs cash aid is approved. If you are getting CalWORKs you will get Stage One care for 12 months or until you are transferred to Stage Two. Child care will be authorized full-time (meaning 30 or more hours per week) unless you specifically ask for part-time care (less than 30 hours per week.) Once child care is authorized, the county shall connect you to a child care education specialist.

The following exceptions apply:
• Families with no aided adults including adults receiving SSI; ineligible non-citizen adults; and non-needy caretaker relatives
• Timed out adult(s) (Note: timed out adults who have received cash aid within the past 24 months are to be referred to Stage Two)
• Application, newly approved recipients who are determined to have a WW (Welfare to Work) exemption and who do not indicate a desire to volunteer for any program activity. Exempt WW participants who intend to participate in program activities in the future are sign a WW plan will be eligible for immediate and continuous child care.

If you are getting Stage One Child Care, you do not need to recertify child care eligibility more frequently than every 12 months unless:
• you inform the County that your child care provider moved
• you have a new child that needs care
• you have changed child care providers
• the child you were getting care for becomes ineligible.
If you are sanctioned after being authorized for 12 months of immediate and continuous child care, Stage One Child Care shall continue until the 12-month period has concluded or until you are transferred through this Stage.

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 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>$5,343</td>
</tr>
<tr>
<td>3</td>
<td>$6,802</td>
</tr>
<tr>
<td>4</td>
<td>$6,271</td>
</tr>
<tr>
<td>5</td>
<td>$7,794</td>
</tr>
<tr>
<td>6</td>
<td>$8,869</td>
</tr>
<tr>
<td>7</td>
<td>$9,070</td>
</tr>
<tr>
<td>8 or more</td>
<td>$9,272</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 next 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 child care is not appropriate for your child’s needs.

You can appeal to a fair hearing if you request child care, you do not need to recertify your child care eligibility more frequently than every 12 months unless:

• You are sanctioned after being authorized for 12 months of immediate and continuous child care, Stage One Child Care shall continue until the 12-month period has concluded or until you are transferred through this Stage.

You can appeal to a fair hearing if you request child care, you do not need to recertify your child care eligibility more frequently than every 12 months unless:

• You are sanctioned after being authorized for 12 months of immediate and continuous child care, Stage One Child Care shall continue until the 12-month period has concluded or until you are transferred through this Stage.

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.

If you use a broker, be very careful about signing a “representative payer” form, which gives the broker direct control of your child care payments. If you have any problems with brokers, complaints should be directed to the listed columns of this page under “Complaints About Providers.”

4. Hearings
You have a right to a fair hearing if you are denied care or if your care is made by DPS, the child care agency. You can ask for a hearing by following the instructions on the back of any child care “Notice of Action.” You should file for a hearing within 14 days or before the action/termination happens.

Is There Help for Foster Care?
If you are caring for a child in your home who is not related to you, and was placed with you by DFS/CFS, 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.

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 must be licensed by the state through the Foster Care Resource and Referral (R&R) Network at (800) 540-4000 /TDD (800) 272-6699. For general child care information, you may contact the California Child Care Resource and Referral (R&R) Network at (800) 540-4000 or visit the R&R Network website at www.rnnetwork.org.

Is There Help for Foster Care?
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 must be licensed by the state through the Foster Care Resource and Referral (R&R) Network at (800) 540-4000 /TDD (800) 272-6699. For general child care information, you may contact the California Child Care Resource and Referral (R&R) Network at (800) 540-4000 or visit the R&R Network website at www.rnnetwork.org.

Is There Help for Foster Care?
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 must be licensed by the state through the Foster Care Resource and Referral (R&R) Network at (800) 540-4000 /TDD (800) 272-6699. For general child care information, you may contact the California Child Care Resource and Referral (R&R) Network at (800) 540-4000 or visit the R&R Network website at www.rnnetwork.org.

Is There Help for Foster Care?
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 must be licensed by the state through the Foster Care Resource and Referral (R&R) Network at (800) 540-4000 /TDD (800) 272-6699. For general child care information, you may contact the California Child Care Resource and Referral (R&R) Network at (800) 540-4000 or visit the R&R Network website at www.rnnetwork.org.

Is There Help for Foster Care?
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 must be licensed by the state through the Foster Care Resource and Referral (R&R) Network at (800) 540-4000 /TDD (800) 272-6699. For general child care information, you may contact the California Child Care Resource and Referral (R&R) Network at (800) 540-4000 or visit the R&R Network website at www.rnnetwork.org.
Social Security, SSI & SNAP

1. Retirement Benefits

Monthly retirement payments are made to workers and their eligible dependents. The amount you get depends on how much money you have earned, how many years you worked in a job covered by Social Security, and whether or not you were full retirement age when you began receiving payments. Covered workers pay Social Security (FICA) by being taxed on the money they earn, and employers must match this amount. The amount you get depends on how much money you have earned, how many years you worked. Generally an applicant must have worked for at least 10 years immediately before retirement age to even get reduced retirement benefits. You may be able to delay your retirement. You may be able to increase the monthly amount you receive. You also may receive benefits if you have problems with the worker's support when the worker's support was not “lawfully present” in the U.S. (see page 64 Guide for Non-Citizens).

2. Survivor Benefits

When a covered worker dies, monthly payments are made to eligible family members who apply for benefits including:
- A spouse or dependent child who is under 18 years old or age 19 if s/he is a full-time student and under age 19.
- A divorced spouse of the deceased worker who can get the survivor’s benefits if:
  - The marriage lasted at least 10 years, the ex-spouse is unmarried, and remarried after age 60 (age 50 if divorced before age 62) and they are entitled to more benefits on their dead ex-spouses’ account than on their own account.
  - A child under age 18, or age 19 if s/he is still in high school.
  - An adult child who became disabled before age 22, never married, and has not worked what is considered “substantial gainful employment.”
  - A parent of the worker over age 62, or 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 Credit-Adjusted Age is advanced.

The number of credits needed to qualify for SSI depends on your age and how recently you worked. Generally an applicant must have worked 40 quarters with at least 20 of them (5 years of quarters or work credits) worked in the 10 years immediately before the date the disability began. Different rules apply for the blind. Those under 22 and those under 31 have reducing earning requirements, with those between age 22 and those under 31 having progressively increasing earning requirements in order to qualify for disability benefits. See Social Security website under the “Number of Credits Needed to Qualify” section for the various rules depending on age.

Those who do not have sufficient work quarters should apply for SSI (see below.) SSI provides Medicare benefits after the 24 months, starting from the date your disability began plus a 5-month waiting period. Those with end-stage renal disease or ALS can get Medicare faster.
SSI may be your entire income, or it may add to other income you already get (including Social Security benefits or SSDI). However, your total countable income cannot be more than the SSI maximum benefit. Earned and unearned income are counted differently. (See column to the right.) SSI grant amounts differ depending on whether the recipient is blind, is 65 or older, or is homeless.

You may also want to apply for SSI if you are disabled or over 65 years of age and are poor. SSI does not require low family income, but SSDI does. Also, you cannot receive Medicare benefits (after a waiting period), while SSI automatically qualifies you for Medi-Cal (no waiting period). Unlike SSDI, the SSI program has no work or income limit for SSI, you can spend money/property for housing, education, or medical expenses. (See pg. 53.)

If you are currently receiving state disability benefits, your SSI application will be sent to the Social Security Administration for verification. If you have too much money or other resources that put you over the resource limits, you cannot receive SSI. You may have to use your 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 you do not cover whatever you go over another limit), or you can pay off debts. If you give away resources or tell the Social Security Administration you are below the fair market value, you can be ineligible for SSI for up to 36 months.

The People’s Guide 2020

SSI & CAPI

What Is SSI?

Can I Get SSI?

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

• You are 65 or older;
• You are blind; the vision in your best eye is less than 20/200 with glasses or your corneal vision is 20/20 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 determined physical or mental condition that would keep you from working if you were an adult or significantly interfere with your daily activities.

If you are blind, or disabled, or any income that has been set aside as part of a plan of self-support approved by the Social Security office;

• Federal or state relocation assistance payments;
• Earnings of a blind or disabled student who is under age 18, up to $1,870 a month, maximum $7,550 a year;
• Payments from FERA, Red Cross and other agencies for disaster-related expenses; and
• Money you receive to pay to replace or repair a lost, damaged or stolen resource.

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

If you are applying for SSDI or SSI based on disability, your financial information is needed. If you are denied SSI, you can appeal the decision within 60 days, or you may also appeal Social Security or SSI. If you believe you are entitled to SSI but your application was not processed or took too long to process, you may also appeal Social Security or SSI. If you are denied SSI benefits, you may have the Social Security Administration review your case.

To appeal, you should either send a letter to the final decision-maker with an explanation of your case, or you can call Social Security at (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 month 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 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 family member, friend, advocate or attorney. 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 wish to sign a form allowing someone else (a legal representative, ask by phone for 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
• Certificate or other proof of age
• Information about the home of residence, such as mortgage or lease information
• Payroll slips, bank books, insurance policies, car registration, burial fund documents, 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 in limited circumstances, you may qualify for SSI or SSDI even if you don’t have a disability or are not receiving Social Security or SSI.)
• Social Security card or record of number
• Certificate or other proof of age
• Information about the home of residence, such as mortgage or lease information
• Payroll slips, bank books, insurance policies, car registration, burial fund documents, 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 in limited circumstances, you may qualify for SSI or SSDI even if you don’t have a disability or are not receiving Social Security or SSI.)

How Do I Apply?

See page 32, ‘How 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 month 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 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 family member, friend, advocate or attorney. 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 wish to sign a form allowing someone else (a legal representative, ask by phone for 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
• Certificate or other proof of age
• Information about the home of residence, such as mortgage or lease information
• Payroll slips, bank books, insurance policies, car registration, burial fund documents, 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 in limited circumstances, you may qualify for SSI or SSDI even if you don’t have a disability or are not receiving Social Security or SSI.)
• Social Security card or record of number
• Certificate or other proof of age
• Information about the home of residence, such as mortgage or lease information
• Payroll slips, bank books, insurance policies, car registration, burial fund documents, 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 in limited circumstances, you may qualify for SSI or SSDI even if you don’t have a disability or are not receiving Social Security or SSI.)

How Do I Apply?

See page 32, ‘How 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 month 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 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 family member, friend, advocate or attorney. 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 wish to sign a form allowing someone else (a legal representative, ask by phone for 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
• Certificate or other proof of age
• Information about the home of residence, such as mortgage or lease information
• Payroll slips, bank books, insurance policies, car registration, burial fund documents, 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 in limited circumstances, you may qualify for SSI or SSDI even if you don’t have a disability or are not receiving Social Security or SSI.)
• Social Security card or record of number
• Certificate or other proof of age
• Information about the home of residence, such as mortgage or lease information
• Payroll slips, bank books, insurance policies, car registration, burial fund documents, 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 in limited circumstances, you may qualify for SSI or SSDI even if you don’t have a disability or are not receiving Social Security or SSI.)

How Do I Apply?

See page 32, ‘How 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 month 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 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 family member, friend, advocate or attorney. 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.
What Are Your 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. Even if you 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 submit a “Request for 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 67 “Hearings & Complaints”).

Where to Apply for Social Security or SSI

For SSI, Medicare and Social Security benefits, it is best to apply in person at one of the Social Security offices listed below. (L.A. area). For appointments and information about Social Security, Medicare or SSI call: (800) 772-1213 (7 A.M. to 7 P.M. during the week) (800) 325-0778 (TTY)

When you call the 800 number you are talking to a representative in a local social security office, be sure to get and keep that person’s name and direct phone number so you can reach him/her again.

Alhambra, 900 S. Garfield, Ste. 102
Boyle Heights, 215 N. Soto St.
Burbank, 1420 W. Olive
Chatsworth, 20439 Nordhoff St
Compton, 171 E. Compton Blvd.
Crenshaw, 3840 Crenshaw Blvd.
El Monte, 9351 Flair Dr.
Glendale, 225 W Broadway Ste. 600
Inglewood, 1165 E Route 66
Hollywood, 1122 N Vine St.
Huntington Park, 6303 Ruby Ave.
Inglewood, 1710 E. Crenshaw Ave.
Lakewood, 4957 Paramount Blvd.
Lancaster, 44451 N 20th St W
Long Beach, 2005 Long Beach Blvd.
LA-Willshire Center 4000 Wilshire Blvd.
Montebello, 2216 W Beverly Blvd.

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. 64 “Which Immigrants can get CAPI?” and pg. 65 “What if I Have a Sponsor” for important information about “deeming”)

CAPI benefit amounts are the same as for SSI. 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, see pg. 56) and CalFresh/Food Stamps (see pg. 37). You will have to apply for these benefits separately.

1. How to Apply

To apply for CAPI in person, go to the Metro North DPSS Office at 2601 Wilshire Blvd., Los Angeles 90057, or to any DPSS public contact office (see page 71). To apply for CAPI by telephone or to receive a CAPI application by mail, call the Customer Service Center at 1-866-637-377-op option 7.

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 that GR has been denied due to your immigration status. DPSS can give you a referral sheet to take to Social Security explaining that you are required to apply for SSI before receiving CAPI. You may apply for SSI on your own or ask for help from the County worker.

The County has 30 days from receipt of your application to make a decision on eligibility to CAPI benefits. If approved, your benefits will begin the month after your CAPI application date. 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 benefit; the CAPI 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 an interpreter to help you fill out the papers.

Norwalk, 12440 E Imperial Hwy
Panorama City 14500 Roscoe Blvd
Pasadena, 104 N. Mentor
Pomona, 960 W Mission Blvd
San Fernando, 456 San Fernando Mission Blvd.
Santa Clarita, 27200 Tourney Rd. Ste 320
Torrance, 22600 Crenshaw Blvd
University Village, 1122 W Washington Blvd., Suite 201
Watts, 12429 S Avalon Blvd
West Covina, 501 S. Vincent Ave
Westwood, 11500 W Olympic Blvd
Whittier, 7200 Greenleaf Ave. Ste. 200

Veterans

Veterans and their family members may be eligible for income, health care, housing, and other services. Ask at the VA about programs for veterans and their families, like Education, Vocational Rehabilitation, Life Insurance, Burial Assistance, Survivors Benefits, and more. Vets511.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 varies depending on the severity of the medical condition.

2. Non-Service-Connected Pension

Provides a monthly income to veterans who are low-income and either 65 years or older totally disabled. Veterans with dependents can get more Compensation and Pension.

You can apply for a veteran’s pension at https://www.va.gov/pension/how-to-apply/

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 unemployable. If so, DPSS will call you “unemployable.” “Unemployable” people can get aid year round. You may go to work 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.

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?

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 $100 total in cash or in a bank account when you apply.

1. Basic Requirements

You can own:
• One car worth less than $4,500 (if you are homeless and live in your car, the limit is $11,500)
• 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 eligibility. If you have been a victim of domestic violence, DPSS may not have to consider your spouse’s income. (See page 70, Domestic Violence.)
1. Basic Benefits
The most you can get in cash aid per month is $221.
In addition to the cash aid, you can get:
- Metropolitan Transit Authority (MTA) Transit Access Pass (TAP) cards to all required appointments
- Scripts for medical appointments including mental health assessments.
- Crisis housing/eviction/legally obligated housing vouchers (when the one-way distance is one mile or more or you are unable to walk a mile)
- A personal care kit (DPSS will deduct $5 from your GR benefit)
- Sanitary napkins
- Housing repairs if there is a lien on your house (Homeowner’s Special Needs)
- Supplements for medically required diets
- A referral to a county-paid drug or alcohol recovery program
- You can also get Medi-Cal (health insurance, pg. 45) and CalFresh (food benefits, pg. 37)

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 will be referred to one of the crisis housing shelters. If there are no vacancies in any of the crisis housing shelters, you will receive hotel vouchers. 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 take the money out of your first GR benefits issued. To stop that you must ask in writing to the eligibility worker.

Emergency Food - You may be entitled to CalFresh or food vouchers the day you apply (see page 37 CalFresh). If you do not get CalFresh, and no voucher restaurant is open in or near 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 paid will be deducted from your first GR benefits issued.

Aid to Prevent Eviction - You can get up to $272 when you first apply 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. Or, you may 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, fax, or online with the Your Benefits Now (YBN) self-service portal available on the DPSS website: http://dpss.lacounty.gov
- To apply in person, go to the closest DPSS office to complete a GR application (see page 71 for a list of Welfare Offices).
- To apply by mail, fax, or online, you will download and print the Application for General Relief (ABP 891-GR) by visiting Your Department’s Your Benefits Now (YBN) website at: dpssbenefits.lacounty.gov

Once you have filled out your application and forms, you may fax it to (310) 215-8220 or mail it to:
Department of Public Social Services P.O. Box 1580 Inglewood, CA 90309-1580 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, remember that you have the right to apply that same day. Bring with you identification and proof of income (such as a pay stub and car title that prove your income and resources.

A law-enforcement agency may request information about someone wanted on an arrest warrant. DPSS must give them the person’s name, address, and physical description. DPSS may 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. 69) and the Public Defender’s Office: (213) 974-7075)

You must provide photo ID to verify identity at the time of application. If you don’t have photo ID when you apply for GR, you may get cash aid for up to 60 days. You must get a photo ID during the 60 days.

Make sure to give your worker a reliable address and telephone/message number where you can be called. Your mailing address do not have to be the same. If you are homeless, you can use the DPSS address to receive your pay. 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. Have a correct address and telephone/message number where your worker can get touch with you and you can get notifications 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 writing the meeting with your 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 get a PIN. You need the identification number (“PIN”). Using your EBT card and your PIN, you can get your GR Cash Aid from any ATM. You should provide them with a list of ATMs in the area.

2. If You Think You Are Unable to Work
If you have a disability, you may want to apply for SSDI (See page 30). You may apply for GR while you wait on SSDI. Ask help at the GR office if you need assistance with the SSDI application procedure. They should refer you to the “CEBET” team.

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 evaluated by a medical health professional to determine if you are unable to work. You may provide verification of a physical health condition in any one of the following ways:

- Providing a statement from a private doctor on the clinic/health center letterhead is 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 are currently receiving treatment from your own physician or medical provider, you can have him/her complete a Physical Health Assessment Form (ABP 1676-1) to verify your disability or condition. You may request these forms from your worker or contact them from the YBN website at: https://www.yourbenefits.lacris.org/ybn/GRDownloads.html

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 unable to work, the GR Program will consider you “Unemployable.” Your “Unemployable” determination will exempt you from some sanctions, work and other program requirements.

If you are determined to be able to work, see right of this page “GR Requirements.”

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 may 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 either:

- Providing a statement from a private doctor on the clinic/health center letterhead is 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 are currently receiving treatment from your own physician or medical provider, you can have him/her complete a Mental Health Assessment form (ABP 1676-1) to verify your disability or condition. You may request these forms from your worker or contact them from the YBN website at: https://www.yourbenefits.lacris.org/ybn/GRDownloads.html

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

If you are determined to be able to work, see right of this page “GR Requirements.”

2. If You Are “Unemployable” or “Needs Special Assistance”
If you have already been determined “Unemployable” or “Needs Special Assistance” you will be sent a notice to comply with GR requirements when disability period expires. 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
General Relief

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 https://www.youngbenefits. lacrs.org/GR/Downloads.html.

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

3. Drug and Alcoholic 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” defense if you are judged “unable to work” when you apply for GR and the penalty will be removed if you had “good cause” for missing the appointment.

4. Quarterly Reports

You must file a Q-R 7 LA form every three months. This is Very, Very, Very important. If you fail to do so the Q-R 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 that was overpaid to you. If this happens, call legal services for help (see pg 69).

You must also report new income from any source over $25 or more per month per person or unearned income of $25 or more per month per person to your GR worker within five days.

4. Penalties or “Sanctions”

If you do not go to your GR hearing, or it is determined you willfully did not comply with a GR requirement, your case will be terminated discontinued or your benefits will be reduced. If you are employable you will not be discontinued or sanctioned during the first three months of receiving GR benefits in a 12-month period. But if you willfully did not comply with an employment requirement your first sanction will make you ineligible for 0 days. You can re-apply right away. If this is the second sanction in a year, you can re-apply in 30 days. After the third penalty in a year, you have to wait 60 days to re-apply.

5. GR Time Limits

If your General Relief is stopped due to the 9 month time limits, you can continue to get CalFresh/Food Stamps and Medi-Cal. You can reapply for GR in three months. Your GR worker will tell you when they will re-apply. If you become sick or hurt and cannot work for good reasons such as illness or disability, you can report this by participating in GROW. Alternatively, you may be penalized for not participating in GROW, quitting a job, or not working at least minimum wage, not complying with substance abuse requirements, or getting fired for misconduct. “Good Cause” can be any illness, accident, difficulty in finding or continuing instruction, conflicting appointments, confusion, transportation problems, or any physical or mental condition that affects your ability to work. “Good Cause” covers anything short of willfully not complying with program requirements.

2. “Extended Suspend”

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, or not working at least minimum wage, not complying with substance abuse requirements, or getting fired for misconduct. “Good Cause” can be any illness, accident, difficulty in finding or continuing instruction, conflicting appointments, confusion, transportation problems, or any physical or mental condition that affects your ability to work. “Good Cause” covers anything short of willfully not complying with program requirements.

If you are not able to comply with the GR program requirement, and you have “Good Cause,” you should contact your DPSS worker immediately and explain your situation.

2. “Extended Suspend”

If DPSS says you have not complied with your GR requirements your benefits will be stopped. If you comply with your GR requirements by the third Tuesday of the following month, your benefits should be started again. The DPSS calls this an “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 GR benefits are reduced, you will be given a hearing to go to the GR hearing. You must mail the DPSS a “Notice of Action” nine days before a hearing. The date and time of the hearing will be listed on the notice. You can call witnesses to support your case if your hearing appointment is at a time you want. If you have “Good Cause,” you have a good chance of winning the hearing, but even if you win without a hearing unless you do not go to the hearing.

4. How Do I Get CalFresh?

There are different ways to apply for CalFresh:

- By calling your local DPSS Customer Service Center at (866) 613-3777, visit at (866) 569-1399, (310) 258-7400, (818) 701-8200 Online at www.dpsbenefits.lacity.gov
- Online or by phone app www. getcalfresh.org
- In person at any Department of Public Social Services (DPSS) Office, see pg 71.
- At any Community and Faith Based organizations listed online at www.dpsbenefits.lacity.gov

CalFresh applications must be processed within 30 days following the date of application. In emergency situations, a household may receive CalFresh benefits on the same day or within three days from the date of their CalFresh application filing date. If your household must meet certain conditions that are considered an emergency (for example, your gross income is less than $150 and you have less than $100 on hand). To apply for CalFresh only you need to sign and date the application and statement of facts. The worker will ask you for proof of household size, income, and resources. You will be allowed time to get the documents you need before your case is approved or denied. You will need to submit them before your application can be approved. Although your cash on hand and other liquid resources may not affect general CalFresh eligibility, they do count if you are asking DPSS to give you emergency or same-day CalFresh.

Many people don’t realize they are eligible for CalFresh. If you or someone in your home needs food, you should apply: everyone deserves to have enough to eat. For additional information if needed. You may bring someone along to help you as your “authorized representative.”

Documents: You will be given a list of mandatory verification needed to complete the application process. You may be given a due date to provide necessary information. The eligibility worker should help you understand what documents are required and what you can bring in. 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 or that you be interviewed by phone. A worker may visit or phone you if no adult in your household can go to the office for good reasons such as illness or disability.

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 name, address and phone number of the person at the office who is responsible for getting the documents from you. If you take any documents, make sure to get a receipt to prove that you dropped off the documents requested.

These are some examples of 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

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, CalPep, 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 all the information you filled out and will be asked for additional information if needed. You may bring someone along to help you as your “authorized representative.”

What Can I Buy With CalFresh?

You can use the CalFresh card to buy nearly any food item at most grocery stores, supermarkets, farmers markets, and other locations. You may also buy seeds to grow your own food.

Most recipients cannot buy hot foods ready to eat with CalFresh. Homeless, disabled, or elderly households can use CalFresh to buy hot prepared foods, at certain restaurants participating in the Restaurant Meals Program.

CalFresh cannot be used for alcoholic beverages or for non-food products such as soap, tobacco, or diapers.

Keep your own copy of all the paperwork you submitted. If you need help and your program 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 case is denied and you believe you qualify for benefits, request a hearing or call a legal aid organization for advice (see pg 67 “Hearings and Complaints” Sections for additional information).

Be sure to comply with all reporting requirements. You must submit reports of changes in your income, property, or recertification form. Some things such as changes to income must be reported within 10 days of the 6 month report is due. If you don’t understand the reporting requirements ask your DPSS worker or contact Legal Aid. (See pg 39”What are the Requirements.”)

The People’s Guide 2020

The People’s Guide 2020
Individuals or households whose income is low enough and meet other eligibility factors, can get CalFresh benefits. U.S. citizens, legal residents, and some qualified immigrants may receive CalFresh benefits. Beginning June 1, 2019, SSI recipients are also potentially eligible for CalFresh.

1. CalFresh Income Limits

See the chart at the top of the page for gross income limits for receiving CalFresh benefits. Unless your household has an elderly or disabled member, your income must be under those limits to potentially qualify for CalFresh benefits. The county will then make deductions from your gross income, based on certain household expenses: the result must be under the “Net” income in order for you to receive CalFresh. There are some exceptions; ask your worker for more information.

2. Special Rules for Students

Students between age 18 and 24 attending school at least half-time may qualify if they meet any of the conditions listed below:

- Being disabled;
- If they are enrolled in CalWORKs;
- Applying for or receiving General Relief and also complying with a GROW Program education/training requirement, including attendance and completion;
- Working and getting paid at least 80 hours per month. If the student works part-time, they must work at least 80 hours per month and receive weekly earnings equivalent to at least federal minimum wage X 80 hours.

3. If You Get Free Meals

If you do not pay for any of your meals, you may not be able to get CalFresh. Even if you don’t prepare your own meals you may be able to get CalFresh 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 benefits from you if they use them to feed you.

4. “Households”

“Households” receive CalFresh. A household is defined as an individual living alone or a group of individuals who live together and customarily purchase food and prepare meals together for home consumption. 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. Each "household" buys and prepares their own food separately from the other households, they are a "separate household."

What Are The Requirements?

1. Semi-Annual Reports

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

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

If you get the form in the mail, you must fill it out and return it to the DPSS office by the fifth day of your reporting month indicated on the SAR-7. You should receive your SAR-7 about one week before it is due.

If you don’t get it in the mail, you must go to the DPSS office to complete the form or go online at https://dpssbenefits.ca.gov/gym/ . Make sure to get a copy of the report and keep a copy of it. If your SAR-7 gets lost, or you need to send it back with copies of income, other receipts of services you are paying for such as child care or medical expenses.

4. Recertification

Your case must be recertified for benefits every six before the end of your certification period or your CalFresh will be terminated. You will receive a recertification (RC) packet and a letter saying that you need to renew your case if you want to continue receiving CalFresh benefits, along with a date when you need to return the RC. You will not receive the SAR-7 in the mail. Contact your worker, the DPSS Customer Service Center, or a community agency if you need assistance with filling out the report.

3. CalFresh Work Registration

Currently Los Angeles County is under a waiver for CalFresh work requirements. This may change in 2020. The usual regulations are as follows:

- All CalFresh household members age 16 through age 59 are required to be registered for work (exceptions are described below).

As a work registrant, you must do the following to remain eligible for CalFresh:

- Report to re-employment if called in for an interview.
- Respond to a request for supplemental information regarding your employment status or availability for work.
- Report to an employer if you are referred to one by your employment counselor.
- Accept an offer of suitable employment.
- Comply with the requirements of the CalFresh Employment and Training (FSET) Program if assigned to it.
What Are The Penalties?

When the work requirements are in effect, if you quit a job without good cause, you can be cut off from CalFresh® until you correct the problem. The penalties get worse each time:

• The first time DPSS says you have not complied, you can be denied CalFresh for at least one month;
• The second time, you can be denied CalFresh for at least three months;
• The third time and after, you can be denied CalFresh® for at least six months.

The person breaking the law will be excluded from CalFresh, not the whole household. If you are penalized for any reason, you can get back on the program if you can correct the problem with compliance for any of the reasons listed above.

“Good Cause”

“Good cause” for quitting a job or not doing a work project includes everything beyond your control, including but not limited to:

• Illness of yourself or a household member who needs your care;
• Transportation problems;
• Inability to speak or write English;
• A household emergency;
• Lack of adequate childcare for a child age 6 to 11.

What Are My Rights?

You have the right to:

• Be treated with courtesy, consideration, and respect, and not to be discriminated against;
• Get help filling out your application or any other form and to have an interpreter if needed at no cost to you;
• Be interviewed in a reasonable amount of time by the County when you apply and to have your eligibility determined within 30 days;
• Get a written notice when your application is approved, or denied, or when your benefits are to change or stop;
• Apply for and get benefits for eligible family members, even if your family includes other members who are not eligible because of immigration status (you do not have to provide information about family members who are not applying for CalFresh but you must report their income);
• Get CalFresh benefits within 3 calendar days if you qualify for Expedited Services;
• To get help filling out your application or any other form

If you need assistance, you may request a Reasonable Modification by:

• verbally to any employee at a DPSS office;
• calling the ADA hotline at (844) 586-5550, OR
• submitting an application or ADA PUB 2, Request for Reasonable Modification, to the program, if you cannot correct the problem with compliance for any of the reasons listed above.

Free and Low-cost Meal Programs

Food Pantries and Free Meal Programs

Food pantries are places that give food to people in need. Most 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. Some may limit who they can serve. You can call each one to find out what kind of identification and proof that you are low income. Generally, food pantries never have as much as needed. Foods distributed most often include canned foods, rice, beans, bread, cereal, and fresh fruits and vegetables.

LA Regional Food Bank works with over 600 agencies in LA County and operates programs including food boxes for seniors, distribution of fruits and vegetables, mobile food pantries, and backpaks for food for children. Learn more and find programs near you:

www.lafoodbank.org/get-help/pantry-locator

www.lafoodbank.org/programs

Free and Low-cost Meal Programs

Food pantries are places that give food to people in need. Most 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. Some may limit who they can serve. You can call each one to find out what kind of identification and proof that you are low income. Generally, food pantries never have as much as needed. Foods distributed most often include canned foods, rice, beans, bread, cereal, and fresh fruits and vegetables.

LA Regional Food Bank works with over 600 agencies in LA County and operates programs including food boxes for seniors, distribution of fruits and vegetables, mobile food pantries, and backpaks for food for children. Learn more and find programs near you:

www.lafoodbank.org/get-help/pantry-locator

www.lafoodbank.org/programs

Food Finders collects leftover food from grocery stores and restaurants for redistribution to over 400 agencies: https://www.foodfinders.org/food-pantry-locator/

Westside Food Bank serves locations on the West side of LA County: westsidefoodbank.org click on “Need Food Assistance”

Other websites for food resources:
• 211 referral line or 211.ca
• www.1ldoeeрг
• www.foodasis.ca

Free meals including hot meals, soup, sandwiches and snacks are offered by many private volunteer groups and churches. The frequency of the meals varies from daily in some places to once a month. To find out more about getting...
Food
meals or volunteering contact 213-1 or one of these agencies:
The Burnite Project
www.theburniteproject.org
Food on Foot (Hollywood)
www.foodonfoot.com
Hollywood Food Coalition www.hofoco.org
Hope-Net (Wishire area churches, mosques and synagogues) www.hopenetla.org
Monday Night Mission www.facebook.com/mondaynightmission

Community Gardens
You can grow some of your own nutritious 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, contact:
LAG Green Bank
(213) 362-9000 ext. 201
LA Community Garden Council
http://lagarden council.org/
Common Ground (626) 586-1981
Community Services Unlimited
www.csuinc.org
Composting: LA Compost
www.lacompost.org
LA City Sanitation Department:
lacyssan.org/compostworkshops

- Fresh Fruits and Vegetables at Low Cost
Food Forward Produce Pickups provide fresh fruits and vegetables, free of charge, to individuals, families, and communities facing challenges in getting fresh produce. See foodforward.org/about/produce-pickups/ for an updated list. Currently (January 2020) the program operates:
WLAC, 10950 S Central Ave, Los Angeles, CA 90023
5151 State University Drive, Cal State LA, Baldwin Hills, 90044.
4201 Vermont Ave, Los Angeles, CA 90044.
www.csuinc.org

- Meats, Eggs, and Milk
Meat and dairy products are available through 1 st and 3 rd Wednesday of the month at 3:00 pm at the Watts Cal State LA Model Neighborhood Program, Social Justice Learning Institute offers people who receive CalFresh and at some markets WIC a $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) 988-8228 or visit fsfind.org to see more programs or new markets that have been added.

- 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.

- 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
WIC is a nutrition program that helps pregnant women, new mothers, infants and young children under 5 years of age eat well and stay healthy. WIC IS FREE - you will never have to pay for any WIC services.

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 clinicians 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/wic

The New WIC Card
WIC is changing from a paper voucher system to an EBT card, similar to the CalFresh program. This will happen in 2020 in Los Angeles County.

- The WIC card is a different card from the CalFresh card.
- Download the WIC app on your smartphone’s app store. Search for “California WIC”. This will enable you to log in and use more of the app’s features.
- The WIC Card Video will show you how to use your new WIC card at the store, check your balance and more. Go to www.myfamily.wic.ca.gov to play the video.

- The WIC Card
- Where Can I Find WIC?

The People’s Guide 2020

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 those 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 meals 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 shop or cook due to illness, frailty, or disability. Some programs can provide for special diets. You cannot be required to pay for meals if the program is federally funded, but sponsoring groups will ask for a small contribution. Some meals-on-wheels programs are authorized to accept food stamps. To find out about meals-on-wheels anywhere in Los Angeles County, call (213) 738-4004.

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

Project Chicken Soup (PCS) prepares and delivers free, nutritious, kosher meals to people in the greater Los Angeles area living with HIV/AIDS, cancer and other serious illnesses, and who are unable to prepare or access their own meals due to their health status. Anyone living outside the service delivery area may come to the kitchen to pick up meals. To apply visit: www.projectchickensoup.org or call: (310) 810-5402.
You will have to list the total income of

You should receive an application for the

Reservations, the only information you

If you receive CalWORKs, CalFresh, or

if your income goes down during

one at any time from the school office,

meal program in your own language at the

Children certified as homeless or in foster

The state and federal government fund Medi-Cal. There are many Medi-Cal programs that eat breakfast and lunch at school, talk with your

Parents can improve the cafeteria programs

Recent changes in the law require schools to

2. Extra Food for Pregnant

At many schools, pregnant and

The law says that children who get free or

Ask the school, child-care sponsor, or

Who receive Supplemental Security

The state of New York offers free or low-cost health coverage for

If you are in the U.S. and have Deferred

Infants who are born to mothers who were

You can get a Medi-Cal application

How Do I Apply?

If you are undocumented, and a California

4. Deemed Eligibility for Infants

How do you apply online using Your Benefits

How to Receive a Medi-Cal ID Card

The advantage of adjusting their legal status might also

Help is available if you need it to complete

If you do not have all the necessary
documents, you or someone you know

2. Apply Online

3. Child Health and Disability Program (CHDP) “Gateway”

The California Children’s Service (CCS), a program of the Department of

The Summer Lunch Program is located

Some residential or day camps and

Meals and snacks are served

One at any time from the school office,

meal program in your own language at the

2. Extra Food for Pregnant

All children and teens ages 18 and under can

the menus.

administrators to participate in developing

You can get a Medi-Cal application

If you have Medi-Cal with a share

In order to get Medi-Cal benefits,

People who receive Supplemental Security

Medi-Cal is California’s program that offers free or low-cost health coverage for

California children under 19 can get

You may have to fill out an

How do you apply online using your Benefits

If you do not have all the necessary
documents, you or someone you know

If you do not have all the necessary
documents, you or someone you know

If you do not have all the necessary
documents, you or someone you know

How do you apply online using Your Benefits

If you do not have all the necessary
documents, you or someone you know

If you do not have all the necessary
documents, you or someone you know

How do you apply online using Your Benefits

How do you apply online using Your Benefits

If you have Medi-Cal with a share

In order to get Medi-Cal benefits,

In order to get Medi-Cal benefits,

In order to get Medi-Cal benefits,

In order to get Medi-Cal benefits,

In order to get Medi-Cal benefits,

In order to get Medi-Cal benefits,

In order to get Medi-Cal benefits,

In order to get Medi-Cal benefits,

In order to get Medi-Cal benefits,

In order to get Medi-Cal benefits,

In order to get Medi-Cal benefits,

In order to get Medi-Cal benefits,

In order to get Medi-Cal benefits,

In order to get Medi-Cal benefits,

In order to get Medi-Cal benefits,

In order to get Medi-Cal benefits,

In order to get Medi-Cal benefits,

In order to get Medi-Cal benefits,

In order to get Medi-Cal benefits,

In order to get Medi-Cal benefits,

In order to get Medi-Cal benefits,

In order to get Medi-Cal benefits,

In order to get Medi-Cal benefits,

In order to get Medi-Cal benefits,

In order to get Medi-Cal benefits,

In order to get Medi-Cal benefits,

In order to get Medi-Cal benefits,

In order to get Medi-Cal benefits,

In order to get Medi-Cal benefits,

In order to get Medi-Cal benefits,

In order to get Medi-Cal benefits,

In order to get Medi-Cal benefits,

In order to get Medi-Cal benefits,

In order to get Medi-Cal benefits,

In order to get Medi-Cal benefits,
6. Provide Documentation

DPSS Medi-Cal offices are now able to electronically verify required information to determine if you can get Medi-Cal. If they are able to verify some or all of the required information, then you will have to provide physical documentation to them. The following items are needed to determine if you are eligible. If you are eligible for MAGI Medi-Cal, you may not have to show documentation of care, 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 be acceptable.

• Social Security Number Card (or proof of application for the card) only for those who want to apply.

• Proof of income (like a copy of your tax return, or monthly bank statements). You can have direct deposit or a self-affidavit (statement of income if you are paid in cash or receive income in any other way to prove income)

• Proof that you live in Los Angeles County (by showing a lease or a mortgage statement and an address on it) for each adult on the application.

• Proof of a hardship or acceptable immigration status for each person on the application who has declared an 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 for non-MAGI Medi-Cal only, if you are over age 65 or have children in your household (and of more than one vehicle is declared.)

• Bank Statement if you are over age 65, as proof of aid for non-MAGI Medi-Cal, or who have Medicare

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 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 will be denied Medi-Cal (except under certain conditions described below), but your children do not lose coverage. Cooperation is not required if an adult is not the parent for the children. Pregnant women do not have to give information to DCSS until 60 days 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 on pg. 45. If the state must evaluate a disability, the approval or denial can be delayed up to 90 days. Call (877) 597-4777 or your local social services office for help if you are not contacted within 45 days about your Medi-Cal application.

A caseworker will determine if you are eligible and/or notify you of Action that you do not qualify, you can appeal the denial of benefits (see pg. 67 Hearings and Complaints).

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 on your application will get one card, even if they aren’t eligible for Medi-Cal, because if the family must pay a monthly Share of Cost, the medical expenses of everyone 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, do not throw it away, 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 state authorization. However, if the state denies or changes authorization, you will not get the service. You can appeal any unreasonable delay, denial, or reduction in service. You will get a “Denial, Refunds, and Complaints” for information on grievances and complaints.

11. If you are pregnant

Any pregnant woman must be “presumed eligible” at clinic’s offices and given limited pregnancy-related Medi-Cal immediately called “PE Medi-Cal” without proving pregnancy or providing information on property, car, or resources. PE Medi-Cal will cover pregnancy, abortion, or help you get early prenatal care, lab tests and medication. You still must complete your Medi-Cal application. If you first time receiving PE 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 child to your case. If a pregnant woman has too much income to be eligible for free Medi-Cal, she may be eligible for a program called Medi-Cal for pregnant women (MCAP) (MCAP). MCAP is that the pregnancy, pregnancy loss or abortion, and dental care. MCAP can be contacted at (800) 433-2611, or apply at www.coveredca.com or BCCTP: http://www.dhcs.ca.gov/services/BCCTP.aspx

12. If you are Diagnosed With Breast or Cervical Cancer

If you are a man or woman diagnosed with breast or cervical cancer, you can get free Medi-Cal immediately, and during the entire time you are receiving treatment. If your household’s monthly income is at or below 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 the BCCTP 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 doctor who accepts Medi-Cal and file an internet application. You should state that you want the internet application to serve as a “MAGI” Medi-Cal application. The rules for these programs count the income of the service provider, not the applicant or the applicant’s dependents. For information call Legal Aid (800) 896-3202 or the Health Consumer Center (800) 896-3203 or Legal Aid (800) 399-4LAW.

13. 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 pay only a “share of cost” in months when you actually use services.)

The different Medi-Cal programs have different limits on income. These limits are counted and which deductions to allow. In general, adults under age 64 and 65, who are disabled (see what is called “Non-MAGI” Medi-Cal programs. The rules for these programs count the income of the service provider, not the applicant or the applicant’s dependents. For information call Legal Aid (800) 896-3202 or the Health Consumer Center (800) 896-3202.)

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.” You can apply up to three months prior to the month you filed the form during the application or you have up to 12 months from the retro to apply for retroactive benefits. Both the paper and internet application sites will ask you if you had medical expenses in the last three months, if you did, if you received any Medi-Cal for those months, and what services you received if you did. If you had medical, dental or pharmacy services from a Medi-Cal provider in the three months during those three months, Medi-Cal may pay those bills. If you’ve already paid for the services, you can have the state reimburse the provider. After the three month period has expired. Individuals with Medicaid or Medicare may be eligible for a program called Medi-Cal for seniors and disabled persons: “Medi-Cal for seniors and disabled” without proving pregnancy or providing information on property, car, or resources. Special low-cost Medi-Cal for working disabled persons:

• You may get the same benefits as a disabled person with share of cost Medi-Cal if you can get free Medi-Cal 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 state authorization. However, if the state denies or changes authorization, you will not get the service. You can appeal any unreasonable delay, denial, or reduction in service. You will get a “Denial, Refunds, and Complaints” for information on grievances and complaints.

15. If you are Diagnosed With Breast or Cervical Cancer

If you are a man or woman diagnosed with breast or cervical cancer, you can get free Medi-Cal immediately, and during the entire time you are receiving treatment. If your household’s monthly income is at or below 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 the BCCTP 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 doctor who accepts Medi-Cal and file an internet application. You should state that you want the internet application to serve as a “MAGI” Medi-Cal application. The rules for these programs count the income of the service provider, not the applicant or the applicant’s dependents. For information call Legal Aid (800) 896-3202 or the Health Consumer Center (800) 896-3202.)

16. 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 pay only a “share of cost” in months when you actually use services.)

The different Medi-Cal programs have different limits on income. These limits are counted and which deductions to allow. In general, adults under age 64 and 65, who are disabled (see what is called “Non-MAGI” Medi-Cal programs. The rules for these programs count the income of the service provider, not the applicant or the applicant’s dependents. For information call Legal Aid (800) 896-3202 or the Health Consumer Center (800) 896-3202.)
### Share of Cost

To find out your monthly Share of Cost, you should be screened for Covered California. Many adults under age 65 not receiving Medicare, whose family income is over the Medi-Cal limit, should be screened for Covered California. Many adults under age 65 with share of cost have it by mistake. If you have a share of cost call the Health Consumer Center (800) 896-3202 to find out if it is a mistake.

#### Share of Cost for Children

Some children whose family income is too high for free Medi-Cal can get Medi-Cal with a Share of Cost. (These families qualify for an Advanced Premium Tax Credit under Covered California: see Health Care Law 531.)

An increase in income is not counted for children up to age 19 who are on no-cost Medi-Cal until their next annual redetermination. So, even if the child's parents start making more money and the parents have to start paying a Share of Cost as a result, the child still receives Medi-Cal for free until their next annual redetermination. The child's family income is over the Medi-Cal limit should be screened for Covered California. Many children with share of cost have it by mistake. If your child has a Share of Cost call health Consumer Center (800) 896-3202 to find out if it is a mistake.

#### 2. Share of Cost if you have "Non-MAGI" Medi-Cal

To find out your monthly Share of Cost, start by adding your earned and unearned income, and subtract $20. Then subtract the need amount for your family size in the chart on page 52. For more information contact the Health Consumer Center (800) 896-3202.

#### Resources Limit

- # in Family Resource Limit
  - $2,000
  - $3,000
  - $3,300
  - $3,450
  - $3,600
  - $3,750
  - $4,000
  - $4,050
  - 10 or more $4,200

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 need to renew their Medi-Cal every 12 months. If you have MAGI Medi-Cal DPSS will try to automatically renew your Medi-Cal. If they can't they will send you a form in the mail that needs to be completed and returned to Medi-Cal. This is called the Annual Medi-Cal Renewal.

If you have Non-MAGI Medi-Cal DPSS will send you a form. DPSS must get you a written notification of what they are going to do with your case. You can call the number below to see if you have a Share of Cost.

#### 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 amount for your family size in the chart on page 52. For more information contact the Health Consumer Center (800) 896-3202.

#### 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 out of the county, start or stop receiving SSI or get coverage for a medicaid eligible service under Medi-Cal. Adults must report to DPSS any significant changes that may affect their eligibility within 10 days after the change. If you return the completed form, DPSS will send you a written notice of action that they will take.

### 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 CAWORKS or MAGI Medi-Cal for Parents and Caretaker Relatives because you started a new job and are earning too much money. If you lose Magi Medi-Cal, the call the Alliance for Children's Rights (213) 368-6060 or(800) 363-5505. If you lose Medi-Cal, call the Health Care Options at (800) 896-3203 or Legal Aid (800) 399-4529.

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

DPSS must send you a written Notice of Ineligibility, if they lose you. If you get this notice, don't discard it. Don't discharge, delays or reduces your Medi-Cal benefits. (See pg. 67 Hearings and Complaints)

### 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 ask to be put on a Medi-Cal Covered Service in the new county. You may be automatically eligible up to one year. If you want to stay on Medi-Cal you must report to DPSS within 10 days. If you return the completed form, DPSS will send you a written notice of action that they will take.

### 5. Four Month Continuing Medi-Cal

If an adult loses CalWORKs because he or she starts receiving more child or spousal support, he or she can be eligible for four months of income, but not for four months. It is important that you submit a change reporting form explaining why you are no longer eligible for CalWORKs to help make sure you get your Transitional or Continuing Medi-Cal. The child's free Medi-Cal benefits will continue 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 Foster Youth Unit at (866) 313-5505 or (626) 313-5505. If you lose Medi-Cal, call the Alliance for Children's Rights (213) 368-6060 or(800) 363-5505. If you lose Medi-Cal, call the Health Care Options 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 page at least one of your children may receive money each month for your health care. If you think your doctor has billed you for services you didn't get, you should report it to your managed care plan.  Some exceptions exist for drops in insurance status and then charge you money for services. The provider cannot accept your Medi-Cal for some part of your care and then charge you money for services. The provider cannot accept your Medi-Cal for some part of your care and then charge you money for services. If you are eligible for any other type of health care under Medi-Cal, DPSS must determine if you are eligible for any other type of health care under Medi-Cal, before sending you a notice of action cutting off your benefits. They cannot send you a notice about other necessary information. DPSS can send you a form that 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.

### How Do I Choose My Care?

There are two ways to receive your medical care under Medi-Cal: “Fee for service” (FFS) or “Medi-Cal,” or Managed Care (Health Plan). These are also called HMOs (Health Maintenance Organizations). Most Medi-Cal recipients get their care through a health plan. Health Plans must provide all the same benefits provided by fee-for-service Medi-Cal.

Medi-Cal recipients who may, but do not have to, enroll in an Health Plan include: Children in foster care and the Adoption Plan.
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, hospital and pharmacy that you are already using.

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 Cal Benefits Identification Card (BIC), or if you are already in a health plan and are just switching plans, use your current health plan until you are told you are enrolled in the new one.

People in the groups that may, 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 renewal. People who are enrolled in a health plan when they apply for Medi-Cal should not get a packet in the mail. You will be asked to attend a “Healthcare Options” talk. You do not have to go. If you do go, you do not have to choose a plan that you do not want to use.

You will also receive a packet in the mail about dental managed care. Enrolling in a dental plan is optional. You do not 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.

If your health plan denies services or you and your family need more services than your health plan will pay, you may need to appeal.

Your health plan must provide you with the reasons why they are denying your request. You must be told how to make an appeal. If you are not satisfied with the appeal, you may need to appeal to a higher level of review. If you are not satisfied with the result of the review, you can appeal to the state. If the state denies your appeal, you can appeal to an independent arbiter. You must then tell the state and the arbiter what you think is medically necessary, but you may not request a second medical review which is done by a group of doctors and professionals who do not work for your health plan.

You have the right to ask for a fair hearing (see page 67 “Hearings and Complaints.”) While waiting for a state hearing, the health plan may not provide medical services to you, if you request the hearing before the effective date of the intended action.

If you are between 12 and 21 years old, you can apply for “Minor Consent Services” to get services for you or your family without parental consent related to:

- Drug or alcohol abuse (except methadone treatment)
- Sexually transmitted infections and the medications for them
- Pregnancy and abortion
- Outpatient mental health (not overnight treatment)
- Sexual abuse
- If you are under 21 and living with

You have the right to ask for a fair hearing. If you disagree, you can ask for an independent arbiter. If you do not think it is medically necessary, but you may not request a second medical review which is done by a group of doctors and professionals who do not work for your health plan. You must then tell the state and the arbiter what you think is medically necessary, but you may not request a second medical review which is done by a group of doctors and professionals who do not work for your health plan.

You will need to give information about their income or resources to the state. If you or your family do not meet the income or resources limits, you may not be eligible for Medi-Cal.

You may need an advocate to assist you and your doctor. See “Good Advice” (pg. 69) for advocates who may not be convenient for you.

For dental care, during pregnancy and the first year of life, you will automatically get a packet in the mail. People who are enrolled in the new one.

You have the right to ask for a fair hearing. If you disagree, you can ask for an independent arbiter. If you do not think it is medically necessary, but you may not request a second medical review which is done by a group of doctors and professionals who do not work for your health plan.

You have the right to ask for a fair hearing. If you disagree, you can ask for an independent arbiter. If you do not think it is medically necessary, but you may not request a second medical review which is done by a group of doctors and professionals who do not work for your health plan.

You have the right to ask for a fair hearing. If you disagree, you can ask for an independent arbiter. If you do not think it is medically necessary, but you may not request a second medical review which is done by a group of doctors and professionals who do not work for your health plan.

You have the right to ask for a fair hearing. If you disagree, you can ask for an independent arbiter. If you do not think it is medically necessary, but you may not request a second medical review which is done by a group of doctors and professionals who do not work for your health plan.

You have the right to ask for a fair hearing. If you disagree, you can ask for an independent arbiter. If you do not think it is medically necessary, but you may not request a second medical review which is done by a group of doctors and professionals who do not work for your health plan.

You have the right to ask for a fair hearing. If you disagree, you can ask for an independent arbiter. If you do not think it is medically necessary, but you may not request a second medical review which is done by a group of doctors and professionals who do not work for your health plan.

You have the right to ask for a fair hearing. If you disagree, you can ask for an independent arbiter. If you do not think it is medically necessary, but you may not request a second medical review which is done by a group of doctors and professionals who do not work for your health plan.

You have the right to ask for a fair hearing. If you disagree, you can ask for an independent arbiter. If you do not think it is medically necessary, but you may not request a second medical review which is done by a group of doctors and professionals who do not work for your health plan.

You have the right to ask for a fair hearing. If you disagree, you can ask for an independent arbiter. If you do not think it is medically necessary, but you may not request a second medical review which is done by a group of doctors and professionals who do not work for your health plan.

You have the right to ask for a fair hearing. If you disagree, you can ask for an independent arbiter. If you do not think it is medically necessary, but you may not request a second medical review which is done by a group of doctors and professionals who do not work for your health plan.

You have the right to ask for a fair hearing. If you disagree, you can ask for an independent arbiter. If you do not think it is medically necessary, but you may not request a second medical review which is done by a group of doctors and professionals who do not work for your health plan.

You have the right to ask for a fair hearing. If you disagree, you can ask for an independent arbiter. If you do not think it is medically necessary, but you may not request a second medical review which is done by a group of doctors and professionals who do not work for your health plan.

You have the right to ask for a fair hearing. If you disagree, you can ask for an independent arbiter. If you do not think it is medically necessary, but you may not request a second medical review which is done by a group of doctors and professionals who do not work for your health plan.

You have the right to ask for a fair hearing. If you disagree, you can ask for an independent arbiter. If you do not think it is medically necessary, but you may not request a second medical review which is done by a group of doctors and professionals who do not work for your health plan.

You have the right to ask for a fair hearing. If you disagree, you can ask for an independent arbiter. If you do not think it is medically necessary, but you may not request a second medical review which is done by a group of doctors and professionals who do not work for your health plan.

You have the right to ask for a fair hearing. If you disagree, you can ask for an independent arbiter. If you do not think it is medically necessary, but you may not request a second medical review which is done by a group of doctors and professionals who do not work for your health plan.

You have the right to ask for a fair hearing. If you disagree, you can ask for an independent arbiter. If you do not think it is medically necessary, but you may not request a second medical review which is done by a group of doctors and professionals who do not work for your health plan.

You have the right to ask for a fair hearing. If you disagree, you can ask for an independent arbiter. If you do not think it is medically necessary, but you may not request a second medical review which is done by a group of doctors and professionals who do not work for your health plan.
Healthcare Law

The Affordable Care Act (also called Obamacare) passed in 2010:

- Prevents denial from gaining insurance to anyone with serious illnesses, including pre-existing conditions such as asthma and diabetes.
- Extends Medicare eligibility to people who have experienced a severe hardship (homelessness, bankruptcy, domestic violence, and certain other situations count as “severe hardship”).
- If you buy insurance through Covered California you may be able to get financial assistance to pay your premiums, or tax credits to help you afford this. Beginning in 2020 you might get this assistance even if you did not qualify previously, or you can also possibly get more assistance if you did get it previously. You may get assistance if you are below the following income levels:
  - People who would have to pay more than 8.24% of their income for health insurance.
  - People with income below the state tax filing threshold.
- A short coverage gap of three or fewer consecutive months.
- 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.

California Children’s Services (CHDP) provides free and reduced-cost health care for low-income 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.

For more information contact:

- Covered CA www.coveredca.com (800) 300-1506 (310) 393 7734 (TDD)

Marin Luther King Hospital/Drew (Urgent care and out patient visits only) 1670 E 120th St. (310) 338-1000

Los Angeles County/USC 1200 N. State St., LA 90033 (323) 226-2262

Olive View 14445 Olive View Dr., Sylmar 91342 (818) 364-1555

Rancho Los Amigos National Rehabilitation Center 7601 E. Imperial Highway, Downey 90242 (877) 726-2461

Comprehensive Health Centers: Mid Valley 7515 Van Nuys Blvd. Van Nuys 91405 (818) 947-0330

El Monte 10953 Ramona Blvd., El Monte 91731 (626)579-8463

C. Claude Hudson 2929 S. Grand Ave., LA 90007 (213) 744-4716

Hibbert Humphery 5850 S. Main Street, LA 90003 (323) 846-4104

Long Beach 1333 Chestnut, Long Beach 90813 (626) 599-2153

Edward R. Roybal 245 S. Betterley Ave., LA 90022 (323) 780-2373

California Children’s Services

1. County Hospitals and Clinics

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

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

Visit http://www.calor.org, Click on “Find a Clinic”, You can also go to https://www. californiahealthplus.org/ and click on “Find My Health” Center, Or call (213) 201-6505, or (211).
Benefits at no cost to you include:

- Preventive and primary care services within 30 working days.
- 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.
- MHLA will automatically enroll you in ATP so you can get specialty care, hospital care, and emergency room visits at a L.A. County hospital or clinic. For more information, please call my Health LA Member Services (844) 744-3492.

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 qualify for free ATP you might qualify for low-cost ATP. The screener will figure out what you must pay, if anything, for each visit.

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

Later, random patients will be asked to provide documents to prove income. Be sure to save your income documents for at least one year after you apply. ATP is good for one year, and at the end of one year you will have to apply again. To apply for ATP, you must make an appointment for a financial screening at a county hospital or clinic that has an ATP worker. Sometimes you will be able to be seen the same day, but you may have to wait. You do not have to wait for your financial screening to get care. If you appear to qualify for Medi-Cal, you will be asked to apply and either get a new appointment, or you may be seen the same day if you are unable to keep your screening appointment, call the clinic manager 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 will 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 clinic a $140 at County Hospital Emergency Center Urgent Care Centers 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 Healthline: (800) 896-3202.

If you receive free or low cost medical care, your medicines are free.

If you have any questions about your care, need referrals, or have a complaint, call the County Healthline: (800) 896-3202.

If you have any questions about your care, need referrals, or have a complaint, call the County Healthline: (800) 896-3202.

If you have any questions about your care, need referrals, or have a complaint, call the County Healthline: (800) 896-3202.

If you have any questions about your care, need referrals, or have a complaint, call the County Healthline: (800) 896-3202.

If you have any questions about your care, need referrals, or have a complaint, call the County Healthline: (800) 896-3202.
1. In-Home Supportive Services (IHSS)

The In-Home Supportive Services (IHSS) Program helps pay for services provided to eligible aged, blind or disabled individuals, including children, to enable them to remain safely in their own homes. IHSS is considered an alternative to out-of-home care such as nursing homes or board and care facilities. You may qualify if you:

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

If you receive Medicare but not Medi-Cal, call Medicare to learn about similar services (800) 633-4227.

Services which may be authorized include:

- Personal care (such as bowel and bladder care, bathing, grooming and personal medical services), meal preparation, 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 some restrictions.

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. If you do not currently receive SSI or Medi-Cal, you may be automatically referred to a Medi-Cal Office to be evaluated for Medi-Cal eligibility when your IHSS application is taken.

Once you apply for IHSS, a Social Worker will make an appointment to come to your home to determine if you are eligible and what services IHSS may provide for you. You will need to be available to perform certain tasks for yourself, the Social Worker will assess the types of IHSS services you need and authorize an amount of time for each one. The assessment of need includes information given by you and, if appropriate, by your family, friends, physicians or other health care practitioners.

You will be notified in writing, in a Notice of Action, if IHSS has been approved or denied. If denied, you will be notified of the reason for denial. If approved, you will be notified of the services and how many hours per month have been authorized for you.

If approved for IHSS, you must hire one provider (your IHSS provider) to perform the authorized services. You, the IHSS consumer, are considered your provider’s employer. It is your responsibility to hire, train, supervise, and, if necessary, fire this individual. If you hire a provider prior to being approved for IHSS and are subsequently denied, you are responsible for paying the provider.

If you need assistance locating a provider, call the Personal Assistance Services Council (PASC). The PASC is the Public Authority for Los Angeles County. They operate a registry to provide referrals for IHSS consumers and providers. You may contact PASC at (877) 565-4477 for more information.

IHSS providers receive at least $12.80 per hour effective July 2019. The State of California issues the checks for provider payments. You and your provider must complete, sign, date, and submit in the timesheets, to verify that the work was done. Timesheets can be accessed 4 days a week 7 days a week on line at timesheets.ihss.ca.gov or by phone at (866) 376-7066.

Severely impaired persons may be eligible for an advance payment to pay a provider. Ask the IHSS Social Worker during the assessment for more information.

For help with problems or questions, call the IHSS Helpline at (888) 822-9622.

2. Long Term Care

If you are caring for someone that a doctor has recommended for 24-hour nursing care for a long period of time, call the Long Term Care District at (626) 854-4987 or (626)854-4765. The State Central Registry at (800) 777-7575 will give you three referrals to long term care facilities.

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. For assistance with finding a nursing facility or advocating for a client in a nursing facility contact California Advocate For Nursing Home Reform at (800) 474-1116.

3. Medicare

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.

4. Part D Coverage

Part D pays for outpatient drug coverage. This program does not cover all types of health care treatments, nor is it free of charge as Medicare does not cover custodial care in a nursing home or at home, dental care, eyeglasses, and hearing aids. If you are enrolled in this plan by Medicare, you have to pay copayments.

5. Medicare Advantage HMOs

Medicare Advantage HMO is a health insurance plan that enrolls Medicare beneficiaries who have both Medicare Parts A and B. Medicare HMOs must provide the same benefits as original Medicare. People who have Medicare end stage renal disease (Kidney failure) cannot enroll into a Medicare HMO. When you join a Medicare HMO, you must use the HMO for all your medical care, except for emergencies or urgent care when you are out of the HMO's service area. There are no copayments for home health services.

Medicare Advantage Plans that provide prescription drug coverage must also provide a Part D plan. You can get information about Medicare Advantage Plans by calling 1-800-772-1213 or online at https://secure.ssa.gov/1020/start or contacting your local Medicare Rights Education Service at: (800) 727-4323.

Medicare Part D plans that enroll individuals with significant incomes may also hold individuals liable for a Low Cost Premium Assistance Payment (LCPAP). This means that you can be charged for only $6 per premium payment that is due. If you are enrolled in an Medicare Part D plan, you can get information about Medicare Part D by calling 1-800-772-1213.

6. Other Information

Many people receive both Medicare and Medi-Cal. (see page 45 “Medi-Cal”) People who pay both 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.
### Transportation

#### 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". To apply, call (213) 680-0004. All applicants must pay a non-refundable $2 application fee and bring a current 1x1 1/4" full face photo (no hats, sunglasses or bandannas.)

To qualify you must show any one of the following:

- **Medicare ID (not Medi-Cal)**
- **California DMV disabled or disabled veteran place-card 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 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 $84, 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. LIFE (Low Income Fare is Easy) Program**

You can save up to $24 on a Metro 30-Day Pass if your income qualifies you for Metro’s LIFE (Low Income Fare is Easy) program. Seniors and disabled persons can save $8, college and vocational students $13, and K-12 students can save $10 monthly using LIFE coupons.

LIFE coupons are accepted by Antelope Valley Transit Agency, Culver City Bus Lines, Foothill, LA-DOT, Long Beach Transit, Metro, Montebello Bus Lines, Norwalk Transit System, MTA, Santa Clarita Transit, Santa Monica Big Blue Bus, and Torrance Transit.

Adult riders, Senior/Disabled, K-12 grade students and full-time College/Vocational students are eligible if their incomes are at or below (limits for 2020):  

<table>
<thead>
<tr>
<th># in household</th>
<th>Annual Income</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>$31,550</td>
</tr>
<tr>
<td>2</td>
<td>$42,275</td>
</tr>
<tr>
<td>3</td>
<td>$45,050</td>
</tr>
<tr>
<td>4</td>
<td>$48,700</td>
</tr>
<tr>
<td>5</td>
<td>$52,200</td>
</tr>
</tbody>
</table>

#### 4. Other Transportation Help

Help for Stranded or Runaways to Get Home: Runaways (800) 786-2929 also assistance with mediation between runaways and parents.

Air Travel Assistance for Patients Needing Medical Aid: Angel’s Flight West (888) 426-2643

#### Can Cyclists Get Help?

The People’s Guide 2020

#### Can Drivers Get Help?

The People’s Guide 2020

#### 1. Bicycle Repair

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.

**The Bicycle Kitchen**

4429 Fountain Ave., LA CA 90029 (323) 662-2776 http://www.bicyclekitchen.com

Other bicycle cooperatives can be found at LA County Bicycle Coalition https://la-bike.org/resources/bike-ca-ops/

#### 2. Metro Bike Share

The Metro Bike Share system makes bikes available to rent for short trips 24 hours a day, 365 days a year in Downtown LA, Central LA, North Hollywood and the Westside.

Reduced Fare TAP card holders are eligible for discounted Metro Bike Share 30-Day and 365-Day passes. Click here https://bikeshare.metro.net/reduced-fares/ to apply for Reduced Fares. Once approved, discounts will apply automatically at checkout. Low-Income Fare is Easy (LIFE) patrons are not eligible for a Reduced Fare discount at this time. Reduced Fares are available for:

- **Seniors (62+)**
- **Persons with Disabilities**
- **College / Vocational Student**
- **K-12 Student (must be 16+ to ride Metro Bike Share)**

#### 3. LIFE (Low Income Fare is Easy)

Program to help pay your Part A or Part B Medicare cost sharing and providing you with Medicare covered benefits such as non-emergency transportation.

If your income is too high for free Metro, you might qualify for a Medicare Savings Program to help pay your Part A or Part B premiums. Contact the Center for Health Care Rights (800) 824-0780

Outside Los Angeles County call: (800) 434-0222.

You should also know the following:

- **Always carry 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 Medicare benefits (see page 68 “Hearings and Complaints”)**

For help with Medicare call Center for Health Care Rights (800) 824-0780

#### 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 or help call (800) 952-5210 or visit www.bluela.com/pay-less-and-drive-better

#### 3. BlueLA Electric Car Share

BlueLA is an all-electric car-sharing service expanding to 40 stations, 200 charging points, and 100 cars in Los Angeles. Members have access to a network of shared electric vehicles 24 hours a day, 7 days a week, at self-service locations in central LA.

How it works:

You have to enroll in BlueLA at https://www.bluela.com/pay-less-and-drive-better-blue-la-community-membership.

The BlueLA Community Membership is available to qualifying low-income individuals for $1 per month. You can qualify if you receive Tribal benefits, CalWORKS, CalFresh, WIC, SSI, Medi-Cal, LIHEAP, Section 8, or participate in GAIN or REP, or if your income is below the following levels:

<table>
<thead>
<tr>
<th># in household</th>
<th>Annual Income</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>$31,550</td>
</tr>
<tr>
<td>2</td>
<td>$42,275</td>
</tr>
<tr>
<td>3</td>
<td>$45,050</td>
</tr>
<tr>
<td>4</td>
<td>$48,700</td>
</tr>
<tr>
<td>5</td>
<td>$52,200</td>
</tr>
</tbody>
</table>

To use the BlueCar:

Reserve a BlueCar in advance on the mobile app or website, or walk up to any BlueLA location to pick up an available car.

Tap your user card at any of the kiosks and follow the instructions. Unlock the car. Use the built-in GPS for directions and drive without having to worry about gas or parking. Park at a BlueLA location and plug the car to end your trip.

Rental Rate: $0.15 per minute / $9 per hour (+9.5% tax)

Rental period begins when you pick up a car, and ends when you plug in at a BlueLA station.

Minimum charge is $15 minutes ($2.25).
%page:1

Utilities

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’s Available” pg. 16.) If you are low-income and have overdue gas or electric bills, call:

Low-Income Home Energy Assistance Program (HEAP) (866) 675-6623 http://www.csd.ca.gov/Services/FindServices/YourArea.aspx

Catholic Charities (213) 251-3432
Energy Hotline (800) 342-5397
Legal Aid (utility cutoffs) (213) 640-3881
Maravilla Foundation (323) 869-4500
PACE Environmental Services: (323) 844-4358

1. Need Help With Your Gas Bill?

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 percent discount on their Service Establishment Charge. You will receive your discount once your completed application is approved by Southern California Gas Company (SoCal Gas).

There are two ways to qualify.

1. 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).

2. 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>$33,820</td>
</tr>
<tr>
<td>3</td>
<td>$42,660</td>
</tr>
<tr>
<td>4</td>
<td>$51,500</td>
</tr>
<tr>
<td>5</td>
<td>$60,340</td>
</tr>
<tr>
<td>6</td>
<td>$69,180</td>
</tr>
<tr>
<td>7</td>
<td>$78,020</td>
</tr>
<tr>
<td>8</td>
<td>$86,860</td>
</tr>
</tbody>
</table>

Each additional add $8,840
* includes current household income from all sources before deductions.

Income guidelines effective until May 2020

2. Energy Saving Home Improvements

For qualified renters or homeowners who meet certain income requirements, SoCalGas provides no-cost, energy-saving improvements like attic insulation, door weatherstripping and minor home repairs. Other terms and conditions may apply. For more information, visit socalsave.com (search “Energy Savings Assistance Program”) or call (800) 331-7593.

3. Heating Assistance for People with Serious Medical Conditions

Regardless of income, a household with a member who requires more heat in winter due to serious health conditions can qualify for a Medical Baseline Allowance. This allowance provides additional heat without an increase in cost. For more information on this program, call (800) 427-2200.

4. Seasonal Bill Assistance

If you are having 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 socalsave.com (search “Gas Fund”) or call (877) 238-0092.

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

Utilities and Phone

5. 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 (800) 244-4458 before the due 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) for customers who qualify in income levels. This rate reduces the cost of electricity, water, and sewer services for the participants’ permanent, primary residence.

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>$43,100</td>
</tr>
<tr>
<td>5</td>
<td>$45,600</td>
</tr>
<tr>
<td>6</td>
<td>$52,800</td>
</tr>
<tr>
<td>7</td>
<td>$60,500</td>
</tr>
<tr>
<td>8</td>
<td>$77,700</td>
</tr>
</tbody>
</table>

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

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

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

Customers with a Teletype device hookup (TTY) may call LADWP at 1-800-HEAR DWP (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, call 211.

6. 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 cubic feet in volume.
• The outlet to which the refrigerator is connected must be grounded (3-prong)
• The customer must be willing to give up (exchange) their old refrigerator to be environmentally recycled.
• Call the Appliance Recycling Centers of America (800) 722-9340 to set up an inspection appointment.

The customer will be contacted to schedule an appointment to verify that your refrigerator outlet is properly grounded. If it is not properly grounded, you will be given time to correct the situation in order to

Utilities

Utilities and Phone

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) 806-119.

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, 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>$27,500</td>
</tr>
<tr>
<td>3</td>
<td>$32,500</td>
</tr>
<tr>
<td>4</td>
<td>$37,500</td>
</tr>
<tr>
<td>5</td>
<td>$42,500</td>
</tr>
<tr>
<td>Each additional</td>
<td>Add $6,900</td>
</tr>
</tbody>
</table>

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: (866) 272-0349
Spanish: (866) 272-0350
TTY: (866) 272-0358

You can get much more information including how to get a low cost cell phone.

AT&T is offering low-cost wireless 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, where they offer wireless 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 1-855-220-521.

You must access the application on the website at 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) 220-521.

Helpful Contact: (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.

The People's Guide 2020
Deferred Action

Child Arrivals

Beginning in 2012, certain young people who were generally under 31 years old as of June 15, 2012, who were brought into the United States by undocumented parents and met several other criteria, were able to receive a renewable two year period of deferred action on deportation and able to apply for work permits in the United States.

This law is called Deferred Action for Childhood Arrivals (DACA). About 200,000 persons in California have DACA.

The Trump administration has moved to end DACA. That action was challenged in court and three U.S. District Court orders remain in effect allowing DACA recipients to file renewal applications. However, USCIS stopped accepting “first-time” DACA applications as of October 6, 2017.

A “first-time” DACA applicant is considered someone who did not already have DACA as of October 6, 2017.

If you have, or had, DACA, you can apply to renew it; but if you never had DACA, you cannot apply for it now.

In 2019, the U.S. Supreme Court agreed to consider the three District Court orders that are currently in effect. 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 66 “Help with Immigration Questions” for groups that can provide advice or visit website.

Guide for Non-Citizens

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.

• 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.S. status. Other victims of domestic violence of which 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.

If you do not speak English, or speak limited English, you can apply for work permits in the United States.

If you do not speak English, or 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 an appointment to determine a disability.

Prohibited Discrimination: Under State law, welfare agencies may not provide you aid, benefits or services that is different from aid provided to others on the basis of Race, Color, National Origin (including language), Ethnicity, Citizenship, Age, Disability, Religion, Sex, Sexual Orientation, Political Affiliation, Marital Status, or Domestic Partnership.

Revolution English is an online platform designed to help immigrants to learn English and keep up with news affecting immigrants in the United States. You can go to https://revolutionenglish.org and click Start Now to receive free daily English lessons on Facebook Messenger. The lessons have 3 levels. To start learning you just click on the buttons.

If you have questions about immigration or benefits for immigrants, or if the government has treated you unfairly just because you don’t speak English, speak limited English, or of the way you look or because you are a member of a particular country, please call one of the agencies listed on page 66 (“Help with Immigration Questions”).
3. Which Immigrants Can Get CAPi? 

If you are an immigrant who has a disability, is blind or 65 years old or older, or you are not eligible for SSI because of your immigration status, you may be able to get CAPi (Cash Assistance Program for Immigrants, see pg. 32 for full details.).

To get CAPi you must be either:
- a "Qualified Immigrant" (see page 63)
- a sponsor of a "qualified immigrant" (see pg. 65)
- PRUCOL (Permanently Residing Under Color of Law), meaning 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 65 “What If I Have a Sponsor” about “deeming” rules.

4. Which Immigrants Can Get CalFresh? 

To get CalFresh you must be:
- A Qualified Immigrant (see page 63) OR
- You, your spouse or parent are a member of a Hmong or Laotian tribe that provided assistance to the US during the Vietnam War era and you are lawfully present in the US.
- A surviving of a family member who was killed in the line of duty for the US. If the surviving family member is lawfully present in the US and is under age 18, they are eligible for CalFresh.
- You or your family member are lawfully present in the US. For example, if you are a victim of domestic violence or would go hungry if you were to leave the US, you may be eligible.
- You or your family member are lawfully present in the US through family members are required to have a sponsor.
- You or your family member are lawfully present in the US through family members are required to have a sponsor.

5. Which Immigrants Can Get CalWORKs and GR? 

Qualified immigrants, noncitizens, victims of trafficking, U visa applicants and holders, and PRUCOL immigrants may be eligible for In-Home Supportive Services. Sponsor “deeming” may also be eligible for In-Home Supportive Services. Sponsor “deeming” may apply (see “What If I Have a Sponsor”, pg. 65).

8. Public Housing

Most “qualified” immigrants and victims of trafficking are eligible for housing assistance from the U.S. Department of Housing and Urban Development (HUD) if they meet the program’s other rules. HUD is a federal program; different rules apply to state and local housing programs.

You can apply for and receive HUD assistance even if one or more household members are not a citizen or “qualified” immigrant. Assistance may be calculated based on the number of citizens or noncitizens immigrants in the household.

In 2019, the Trump administration proposed a rule change that if applied would strip many housing benefits away from households that have any household members who are a “non-qualified” immigrant. If adopted, the new rule will bar “mixed-status” families from public housing and Section 8 programs. If this rule goes into effect, HUD will also require all applicants and household members to provide their immigration status and screen for immigration status and will change the citizenship and immigration verification requirements for U.S. citizens and noncitizens over age 62.

For updated information see https://www.keep-families-together.org

Social Security

1. Social Security Benefits

If you have paid into the Social Security system as a worker or have had money taken out of your paycheck for this program, you may be eligible for Social Security retirement or survivor benefits. (See pg. 29) To receive the benefits, you must be either legal residents, or have been here 5 years) and immigrants who are PRUCOL may be eligible for Retirement Assistance to the US during the Vietnam War era and you are lawfully present in the US.

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, asylum, citizen of a “free associating 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 EAD, you may apply for a “non-work” EAD from a Social Security Office that can be used for benefits purposes only. It is illegal to use this card for work-related purposes.

The following groups can help if you are an immigrant worker and your employer owes you wages and has not paid you:
- American Asians Advancing Justice
- 1145 Wildshire Blvd. (213) 977-7500
- Legal Aid Services (323) 939-0506
- CHIRLA (420 W. Los Angeles Ave.)
- 2533 W. 3rd St. #101 LA (888) 624-4752
- Garment Workers Center (213) 748-5866
- Koreatown Immigrants Workers Alliance (KIWA) (restaurant workers) 3465 W. 6th St. LA (213) 738-9505
- Legal Aid Foundation Employment Law Unit (LAB) (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
- Pinelos Workers Center 153 Glendale Blvd. LA (213) 250-4533

The rules of Public Charge may change. Check with an agency you trust for updated information.

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 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, contact the local DPSS office on page 71.

The People’s Guide 2020
Hearings and Complaints

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 timeline 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. You can also contact the Customer Service Center at (866) 613-3777.

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 Notice of Action 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 unduced rate. You must also ask to make sure you get to make such a claim under Welfare and Institutions Code section 10967 and want to get your benefits reinstated.

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 any communications you have with your benefit workers or local county staff, they are important in case you need them in the future.
will be able to track your State hearing request, including the county’s Statement of Position which will be available two days before the State hearing.

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 request 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, Medi-Cal or IHSS. These are usually the maximum amounts of time that are permitted to decide such cases (starting on the date of your request for hearing).

The county DPSS will help with recompositions and appeals if you are a GR recipient attempting to get on to SSI or Social Security.

If you request a Reconsideration within the time period given on the notice (usually 10 days but sometimes 30 days for an overpayment), your benefits can be continued unchanged until you receive a recomposition decision.

Social Security paid you too much, and you want to take back your benefits check, you can request a waiver if it wasn’t your fault and it would be hard for you to pay the money back. You can get the waiver form from your local Social Security office or online from ssa.gov. If you lose the waiver, your benefits will be collected back at a lower rate per month.

In SSDI cases, you must fill out a separate reconsideration form stamped by Social Security with the money be collected back. In SSDI cases, you must fill out a separate reconsideration form stamped by Social Security with the money be collected back at a lower rate per month.

For Social Security and Medicare

The Social Security Administration must mail you a notice before they make any changes to your benefit. You should also be able to see all the information in your benefit. You can order a new copy of the information by going on the Social Security’s website ssa.gov and mailing in the Reconsideration form. You can also request a reconsideration online, at https://www.ssa.gov/benefits/disability/appeal.html.

If your reconsideration or waiver is denied, you may request a hearing before an Administrative Law Judge (ALJ) with the Office of Hearing Operations (OHO). You have to request a hearing within 60 days of receiving an unfavorable recomposition decision. You can request a hearing after 60 days only if you have good cause. At the hearing you may appear in person, submit new evidence, examine the evidence used in making the determination or decision, and present and answer any questions you should. You always have the right to hear your hearing file well before the hearing because you may need time to obtain additional evidence. This is particularly true if it is a hearing where your disability is at issue. The ALJ who holds the hearing may ask you questions. He or she will write a decision based on the hearing record. If you want your time properly 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 the benefit of your case, 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 may be cut if you are working and earning too much. (This is known as “Substantial

Good Advice

American Civil Liberties Union—Southern California (213) 977-9500 www.acluc-losangeles.org

AIDS Project Los Angeles (213) 388-5020 www.apla.org (Benefits, insurance, counseling, case management, food distribution, home health care, dental clinic, housing, jobs)


Center for Health Care Rights www.chcr.org (213) 838-4519, 520 S. Lafayette Park Place #214, L.A. (Medicare issues)

Coalition for Economic Survival (213) 388-3001 (tenants organizing and rights) www.coalitionforsurvival.org

Center for Health Care Rights www.chcr.org (213) 838-7515, 4262 Wilshire Blvd #201 L.A. (Medicare and Social Security, hospital billing, health insurance)

Community Legal Services www-legal aid.com (800) 438-5001, 752 W. Adams Blvd, Los Angeles (multilingual service: family law, domestic violence, government benefits, elder law, health care, legal aid)

Department of Health Care Services (213) 891-2880 8601 S. Broadway, South L.A. (Medi-Cal & CalFresh)

E. Firestone, Norwalk (Orange County & Southeast L.A. County)

Harriett Buhai Center for Family Law www.hbbcl.org (213) 388-7515, 4262 Wilshire Blvd #201 L.A. (Medi-Cal & CalFresh)

Mental Health Advocacy Services (213) 749-4261. 1111 W. 6th St. #400 L.A. (Medi-Cal & CalFresh)

AIDS Project Los Angeles (213) 388-5020 www.apla.org (Benefits, insurance, counseling, case management, food distribution, home health care, dental clinic, housing, jobs)


Center for Health Care Rights www.chcr.org (213) 838-4519, 520 S. Lafayette Park Place #214, L.A. (Medicare issues)
**Elder Abuse** (800) 992-1660 (Report abuse or exploitation of a disabled adult or elderly to the County)

### 3. 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) 586-6231 TDD for deaf callers. (800) 877-3272
- (213) 626-3339 (310) 547-9343
- (310) 392-8381 (323) 652-3807
- (562) 402-4888 (626) 793-3885
- (818) 866-0453 (909) 626-4637

### Center for the Pacific-Asian Family (323) 635-4042 or (800) 399-3940

#### A Safe Way Out

(800) 978-3600

**What is Abuse?**

Abuse can be anything that hurts you: Physical abuse (hitting, shoving, slapping, 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 relations
- Making you account for all your time
- Denying or neglecting food or medical care

**Restraining Orders**

Legal and 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's officers can issue 3-day emergency restraining orders if called to the scene of a battering incident.

Almost all of the courts in Los Angeles have domestic violence clinics where they will help anyone, regardless of income, to get a temporary restraining order against an abuser.

### Immigrants

Low income immigrants who are victims of domestic violence may be able to legalize their immigration status without relying on their abuser, and may be able to get government benefits to help them escape abusive situations. For free help, contact: Asian Americans Advancing Justice (213) 977-7500 Legal Aid (800) 399-4LAW (4529).

### Hate Crimes

In California, a hate crime is any criminal act or attempted criminal act against a person or place based on the victim's actual or perceived race, nationality, religion, sexual orientation, disability, gender, or status as homeless. Hate crimes include threats of violence that look like they can be carried out and any act which results in injury.

If you or someone you know becomes a victim of a hate crime:

- Seek medical attention for any injuries
- Contact the police as soon as possible. Tell them you have been a victim of a hate crime.
- Keep copies of all documents signed or written down the name of the police or sheriff's officer who took your report.
- Document the hate crime providing as much detail as possible.
- Take photos of any injuries sustained or damage to property. Contact a legal service agency (see previous page) or Center for Human Rights & Constitutional Law (213) 388-8233

### 4. Victims of Violence

#### 1. Victims of Violent Crime

The California Victim Compensation Program provides eligible victims with reimbursement for many 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) 840-4000 (Report abuse or exploitation of a child to the County)

**If You Just Left Prison**

Outsiders (626) 795-7607 Variety of services to families of jail and prison inmates.

Chrysalis (for kids) (323) 258-6722

So. CA Indian Center (213) 387-5772

**Information on Prop 47:**

Certain non-violent crimes are now classified as misdemeanors instead of felonies. Learn how to change your record.

www.myprop47.org

###Felony Dismissal

- (323) 895-7777
- (310) 392-4117

**Information on Prop 47:**

Certain non-violent crimes are now classified as misdemeanors instead of felonies. Learn how to change your record.

https://realid.dmvd.ca.gov/what-is-real-id-faq

### REAL ID

A REAL ID is a driver license or identification card that is also a federally accepted form of identification. The new rules for REAL ID begin October 1, 2020.

A REAL ID is needed if:

- You want to continue to use your driver license or identification card to board domestic flights within the U.S.
- Enter certain federal facilities.

If you want to continue to use a U.S. passport, U.S. passport card, military ID, enhanced driver license, or other federally accepted identification to do those things, you do not need to get a REAL ID, however, it is recommended.

You do not need a REAL ID to:

- Apply for federal benefits, such as Social Security Administration, County CPS programs, etc.
- Enter a post office, or other secure federal facility that does not require identification
- Visit a hospital or receive life-saving services
- Ride Amtrak or other public ground transportation

Because of high demand for REAL ID between now and October 1, 2020 (when the Enhanced Driver's license, or other federally accepted identification expires), DMV recommends you wait to apply for a REAL ID at the time of your renewal cycle.

You must visit a DMV office in person when applying for a REAL ID for the first time. You will need to show documentation when applying for a REAL ID; however, if you do not need to get a REAL ID, it is recommended.

- You will need to provide:
  - One or two documents proving your identity, California residency, and California residency that include your full name:
    - U.S. passport, U.S. passport card, military ID, enhanced driver license or other accepted identification

### Department of Public Social Services

At these Department of Public Social Services offices you can apply for these programs:

- CalWORKs
- CalFresh
- General Relief
- Medi-Cal
- Foster Care

You must have your (10) digit Customer ID number and six (6) digit Personal Identification Number (PIN). If you don’t have the Customer ID/PIN, request one when you speak to a Customer Service Representative. Here are the locations of the DPSS offices:

- BELVEDERE (CW,CF,MC)
  - 5445 Whittier Blvd. LA 90220
- CIVIC CENTER (GR, CF, MF)
  - 813 E. Fourth Place. LA 90013
- COMPTON (CW, CF)
  - 211 E. Alondra Blvd. Compton 90220
- CUDAHY (CW, CF, MS)
  - 8130 S. Atlantic Ave. Cudahy 90201
- EAST VALLEY (CW, CF, MS)
  - 14545 Lanark St. Panorama City 91342
- EL MONTE (CW,CF,MC)
  - 3350 Aerjet St. El Monte 91731
- EXPOSITION PARK (CW,FS)
  - 3833 S. Vermont Ave. LA 90037
- FLORENCE (CW,CF,MC)
  - 1740 E. Gage Ave. LA 90001
- GLENDALE (CW,SR,CF,MC,CF)
  - 4860 San Fernando Rd., Glendale 91204
- LANCASTER (CW,CF,MC,GR)
  - 349-B East Ave. K6, Lancaster 93535
- LANCASTER (CF,CF,MC,GR)
  - 337 East Ave. K10, Lancaster 93535
- LINCOLNHEIGHTS (CW,CF,MC)
  - 4077 N. Mission Rd., LA 90032
- METRO EAST (CW,GR,FS)
  - 2855 E. Olympic Blvd., LA 90023
- METRO FAMILY (CW,CF,MC)
  - 2615 S. Grand Ave. LA 90007
- METRO NORTH (CW,CF,MC,GR)
  - 2601 Whitley Blvd., LA 90057
- METRO SPECIAL (GR, CF, MC)
  - 2707 S. Grand Ave., LA 90007

- NORWALK (CW,FS,MC,GR)
  - 1227 Norwalk Blvd., Norwalk 90650
- PARAMOUNT (CW,FS,MC)
  - 2961 E. Victoria Ave., Rancho Dominguez 90221
- PASADENA (CW,GR,CF,MC)
  - 955 N. Lake Ave., Pasadena 91104
- POMONA (CW,GR,FS,MC)
  - 2400 W. Holt Ave., Pomona 91768
- RANCHO PARK (GR,FS,MC)
  - (818) 671-2000
- SAN BERNANDO (GR,FS)
  - 9188 Glendora Blvd., Sun Valley 91342
- SAN GABRIEL VALLEY (GR,FS)
  - 3350 Aerjet Ave., El Monte 91731
- SALT LAKE (CW,FS,MC)
  - 27233 Camp Plenty Rd, Canyon Country 93515
- SOUTH CENTRAL (CW,GF,CF,GR)
  - 10726 S. Central Ave., LA 90059
- SOUTH FAMILY (CW,CF,GR)
  - 17600 S. Santa Fe Ave., Rancho Dominguez 90221
- SOUTH SPECIAL (GR,FS)
  - 17600 S. Santa Fe Ave., Rancho Dominguez 90221
- SOUTHWEST FAMILY (CW,FS,MC)
  - 8300 S. Vermont Ave, LA 90044
- SOUTHWEST SPECIAL (GR,CF,MC,GR)
  - 1819 W. 120th St., LA 90047
- WEST VALLEY (CW,FS,MC)
  - 21415 Pumiller St., Chatsworth 91311
- WILSHIRE SPECIAL (GR,CF,MC)
  - 2416 6th St. LA 90057
ENGLISH AND SPANISH PRINT EDITIONS:

COST: $1.25 per copy - includes sales tax
*SHIPPING: $ .90 $3.00 for 3-10 copies
Pay by PayPal www.hungeractionla.org/peoplesguide, or by check through mail

*Contact for delivery or pick up arrangements for any orders of more than 10 copies

THREE WAYS TO ORDER:

1. Online at www.hungeractionla.org/peoplesguide
2. Email to: orders@hungeractionla.org (specify in email: quantity, language of books, name, and shipping address)
3. Order by Phone: (213) 388-8228 (leave a message and specify: quantity, language of books, name, and shipping address)

WHAT'S NEW IN 2020?

Will I need a Real ID to apply for benefits? see pg 71
What is the new state Rent Control law? see pg 5
Will the DACA program be continued? see pg 62
What families can get $1,000 at tax time if they have a child under 6? see pg 9
Can I get help paying for health insurance? see pg 53
Can people getting SSI now get CalFresh? see pg 31 and pg 38
Is the new WIC EBT card the same as CalFresh? see pg 43
How can I get a job if I have a criminal record? see pg 10
Can I rent a car for low cost in L.A.? see pg 59