

New York State

**WHAT YOU SHOULD KNOW
ABOUT SOCIAL SERVICES
PROGRAMS**

Questions and **A**nswers

BOOK 2

Also See

BOOK 1 (LDSS-4148A)
**“WHAT YOU SHOULD KNOW ABOUT YOUR RIGHTS
AND RESPONSIBILITIES”**
(When Applying For or Receiving Benefits)

and

BOOK 3 (LDSS-4148C)
**“WHAT YOU SHOULD KNOW IF YOU HAVE AN
EMERGENCY”**

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TABLE OF CONTENTS

Section	Page
A TEMPORARY ASSISTANCE	2
B MEDICAL ASSISTANCE	7
C CHILD SUPPORT	15
D FOOD STAMP BENEFITS	17
E TRANSITIONAL HELP	19
F SERVICES	20
G OTHER BENEFITS	22
H IMMUNIZATIONS.....	24
I GETTING BENEFITS WITH ELECTRONIC BENEFIT TRANSFER (EBT)	24

PLEASE NOTE:

This book tells you many of the ways your local department of social services may be able to help if you or your family is in need.

Please remember that these programs and services have Federal or State rules that must be followed.

This should not keep you from asking about these programs and services when your family needs help.

TEMPORARY ASSISTANCE

SECTION A

Q. What Is Temporary Assistance?

A. Temporary Assistance is temporary help for needy adults and children. If you are unable to work, can't find a job or your job does not pay enough, Temporary Assistance may be able to help you pay for your expenses. Temporary Assistance Programs include Family Assistance and Safety Net Assistance.

Q. If I Have Or Get A Job, Can I Still Get Help?

A. You can work and still get Temporary Assistance if your income is under a certain amount.

- If your case is closed because your income is over a certain amount, you **may** still be able to get help with child care and Medical Assistance.
- You may be able to get Food Stamp Benefits (**See "Food Stamp Benefits", Section D of this Book.**) and Services (**See "Services", Section F of this Book.**)

Q. Can I Get Help To Get A Job?

A. When you apply for or get Temporary Assistance and/or Food Stamp Benefits, you may be able to get help with:

- The skills you need to find a job
- Education, especially if you have not finished high school or do not have a high school equivalency degree (G.E.D.)
- Training
- Child care, so you can work, take part in employment or training programs or finish your education.
- Transportation and other employment related expenses that are necessary for you to participate in assigned activities.

Q. What If I Have An Emergency And I Need Help Right Away?

A. You may be able to get help right away. Be sure to tell your worker that you think you have an emergency. (**See Book 3 (LDSS-4148C) "What You Should Know If You Have An Emergency".**)

Q. What Kinds of Expenses Will Temporary Assistance Help Me to Pay?

- A.
- Food and clothing costs
 - Rent or mortgage costs
 - Heat, gas, electricity, water and other utilities
 - Other special needs such as:
 - Meals
You may get extra money for restaurant meals or home-delivered meals if you are unable to fix meals at home.
 - Pregnancy
If you are pregnant, you may be able to get extra money. You can get this money from your fourth month of pregnancy to the end of your pregnancy if you give your worker a medical note. The medical note must say that you are pregnant and give the date your baby is due. You cannot get this extra money for any month before you give your worker the medical note.
 - **Education and Training**
If you take part in an approved education or training program, you may be able to get help with expenses such as childcare, transportation and clothing. (**See the Question, "Can I Get Extra Help When I Take Part In Training or Education?" in this book.**)
 - Housing and Household-Related Items
You may be able to get help for any of the following:
 - (1) To prevent eviction or to pay your rent, mortgage or taxes that you have owed for a period of time before you applied for Temporary Assistance
 - (2) If you must move from where you now live, you may be able to get help for:
 - Storing furniture and other personal things you own
 - Broker's or finder's fees
 - A rent security deposit or security agreement
 - Moving expenses

- (3) Repair of needed household items such as heating equipment, stove or refrigerator
- (4) You may be able to get help to buy needed furniture or other household items if:
 - A family member returns home after being discharged from an institution or from foster care.
 - You must move for health and safety reasons and cannot find a furnished apartment or home.
 - You need the items to set up your household.
- (5) If you own your own home, you may be able to get help for property repairs that are needed for your health and safety.
- (6) If you lose your furniture or clothing in a fire, flood or other natural disaster, you may be able to get help to replace these household items or clothing.

NOTE: Most people who can get Temporary Assistance will also get Medical Assistance and Food Stamp Benefits

Q What Are The Temporary Assistance Programs?

- A.** 1. **Family Assistance** provides temporary assistance to eligible needy families that include a minor child living with a parent (including families where both parents are in the household) or a caretaker relative. It is operated under federal Temporary Assistance for Needy Families (TANF) guidelines.

Under Family Assistance, eligible adults are limited to receiving benefits for a total of 60 months in their lifetime, including months of TANF-funded assistance granted in other states. Months of cash Safety Net Assistance (#2 below) also count toward the 60-month lifetime limit. Once this limit is reached, that adult and all members of his or her Family Assistance households are ineligible to receive any more Family Assistance benefits. The months need not be consecutive, but rather each individual month in which TANF-funded benefits (or cash Safety Net Assistance) are received is included in the lifetime count. The counting of this 60-month limit began in December 1996.

Parents and other adult relatives who can work must be working or involved in work-related activities after receiving Family Assistance benefits for two years, or sooner if the local department of social services decides they can work earlier. Parents are also responsible for cooperating with the local department of social services in locating any non-custodial parent in establishing paternity of a child born out of wedlock and in obtaining child support payments. Failure to cooperate without good cause will result in a reduction of Family Assistance benefits.

2. **Safety Net Assistance**

If you are not eligible for other assistance programs, you may be eligible for Safety Net Assistance.

Safety Net Assistance is for:

- single adults
- childless couples,
- children living apart from any adult relative,
- families of persons found to be abusing drugs or alcohol,
- families of persons refusing drug/alcohol screening, assessment or treatment,
- persons who have exceeded the 60-month limit on assistance,
- aliens who are eligible for Temporary Assistance, but who are not eligible for federal reimbursement.

Generally, you can receive Safety Net Assistance in cash for a maximum of two years in a lifetime. The count for this time limit began in August 1997. After that, if you are eligible for Safety Net Assistance, it will be provided in non-cash form, such as a two-party check or a voucher. In addition, Non-Cash Safety Net Assistance is provided for:

- families of persons found to be abusing drugs or alcohol,
- families of persons refusing drug/alcohol screening, assessment or treatment
- families with an adult who has exceeded the 60 month lifetime time limit

Q. How Do I Apply For Temporary Assistance?

- A.** If you live outside of New York City, call or visit your local department of social services in the county where you live and ask for an application package. If you live in New York City, call or visit your local Income Support/Job Center. You must fill out the Application and turn it in. Remember, you may turn in **(file)** the Application the same day you get it.

Q. What Happens When I Apply For Temporary Assistance?

- A.** You will have an interview to find out if you are able to get Temporary Assistance. You will be asked to prove certain things **(See Book 1 (LDSS-4148A)"What You Should Know About Your Rights And Responsibilities")**.

If you are able to work and are between the ages of 16 and 60, you will have an interview to find out what types of work you are able to do.

In limited circumstances, we will also decide if you need education or training in order to get a job.

During the interview, you will be asked:

- About your education, training and work history
- What types of jobs you are able to do, and your preferences
- To talk about and agree to an employment plan just for you
- What your child care needs are

Unless you are exempt from participation in work activities, you must participate in work activities as assigned by the local department of social services. You are expected to continually look for a job and take a job when one is available.

Q. Are There Certain Individuals Who Are Not Eligible For Temporary Assistance?

A Yes, Temporary Assistance cannot be given to individuals who:

1. are under the age of eighteen, who are not married, are caring for a child, but have no children under twelve weeks of age in their care, and who have not successfully completed or are not working towards a high school diploma or its equivalent, or not participating in an alternative program approved by your worker.
2. have been convicted in federal court of having made a fraudulent statement or representation with respect to their place of residence in order to receive Temporary Assistance from two or more states. The period of ineligibility is ten years.
3. are fleeing to avoid prosecution or custody or confinement under the laws of the place from which the individual flees for a crime or attempts to commit a crime which is a felony under the laws of the place from which the individual flees, or which, in the case of the State of New Jersey, is a high misdemeanor under the laws of that state.
4. are violating a condition of probation or parole imposed under federal or State law.
5. are penalized by an individual or program sanction because of failure to comply with certain eligibility rules.

Q. Can I Get Temporary Assistance If I Am Not A Citizen Of The United States?

A. If you are not a citizen of the United States, you must document that you are an alien in one of the categories listed below in order to be eligible for Temporary Assistance (some aliens may only get Safety Net Assistance):

1. a United States (U.S.) non-citizen national, or
2. an American Indian born in Canada with at least 50 per centum of blood of the American Indian race under section 289 of the Immigration and Nationality Act (INA), or
3. a member of an Indian tribe as defined in section 4(e) of the Indian Self-Determination and Education Assistance Act (25 U.S. C. 450b(e)), or
4. an alien admitted to the United States as a refugee under Section 207 of the Immigration and Nationality Act; or
5. an alien granted asylum under Section 208 of the Immigration and Nationality Act; or
6. an alien whose deportation has been withheld under Sections 241(b)(3) or 243(h) of the Immigration and Nationality Act; or
7. an alien admitted to the United States as a Cuban and Haitian entrant; or
8. an alien admitted as an Amerasian immigrant; or
9. an alien admitted as a Hmong or Highland Laotian, including the spouse and dependent children, or
10. an alien who is on active duty in the U.S. armed forces or, an honorably discharged veteran, their spouse and dependent children, and the unremarried surviving spouse and unmarried dependent children of an active duty member or veteran who has died, or
11. an alien who has been admitted as a lawful permanent resident: or
12. an alien who has been paroled into the United States under Section 212(d)(5) of the Immigration and Nationality Act, for a period of at least one year; or
13. an alien who has been granted conditional entry under Section 203(a)(7) of the Immigration and Nationality Act; or
14. an alien who has been battered or subject to extreme cruelty in the United States by a family member and who meets certain other requirements, or
15. an alien who has been subjected to a Severe Form of Trafficking in Persons under the Victims of Trafficking and Violence Protection Act of 2000, or
16. an alien not listed above who is considered to be permanently residing in the United State Under Color of Law (PRUCOL), including:
 - a. an alien paroled into the United States for less than one year;
 - b. an alien residing in the United States pursuant to an Order of Supervision;
 - c. an alien residing in the United States pursuant to an indefinite stay of deportation;
 - d. an alien residing in the United States pursuant to an indefinite voluntary departure;
 - e. an alien on whose behalf an immediate relative's petition has been approved and their families covered by the petition;
 - f. an alien who has filed an application for adjustment of status that Immigration and Naturalization Service (INS) has accepted as properly filed or has granted;
 - g. an alien granted stays of deportation;
 - h. an alien granted voluntary departure;
 - i. an alien granted deferred action status;
 - j. an alien who has entered and continuously resided in the United States before January 1, 1972;
 - k. an alien granted suspension of deportation; or

- I. an alien living in the United States with the knowledge and permission or acquiescence of the INS and whose departure the INS does not contemplate enforcing.

NOTE: If we determine that you or any member of your household is a sponsored alien with an affidavit of support executed after December 1997 and your sponsor does not contribute enough money to make you ineligible for Temporary Assistance, we may report that information to the New York State Office of Temporary and Disability Assistance. They will report the information we send them to the U. S. Immigration and Naturalization Service (INS).

Q. What If An Undocumented Alien Lives In My Household?

- A. Aliens who do not have documents that permit them to reside in the United States are eligible only for certain kinds of emergency benefits. When citizens or aliens who are legally in the country live together with undocumented aliens, all members of the household must be listed on the application. Any person who does not give a social security number or does not certify that he or she is a citizen or an alien qualified to receive assistance cannot get Temporary Assistance. However, the rest of the household will receive their benefits. If the Immigration and Naturalization Service (INS) has made a final determination that a member of the household is illegally present in the country (for example, if INS has issued a final order of deportation) and that person applies for benefits, we will notify INS.

Q. Can I Get Extra Help When I Take Part In Training Or Education?

- A. If you are getting Temporary Assistance and/or Food Stamp Benefits and are in an approved training or education program, you may be able to get extra help to pay for:
 - Child care
 - Transportation and related expenses
 - Clothing
 - Work tools
 - Tuition, books and supplies for a program approved by the local department of social services.

Q. What Happens If I Get A Job?

- A. If you get a job, you may still be able to get Temporary Assistance, and/or Food Stamp Benefits depending on how much you make.

If you have a child living with you, a large portion of your earned income may not be counted toward your Temporary Assistance.

If you get a job and make enough money so that you no longer get Temporary Assistance, you may be able to get the following:

- Child Care and/or Medical Assistance for up to one year (**See "Transitional Help", Section E of this Book**)
- Food Stamp Benefits (**See "Food Stamp Benefits", Section D of this Book**)
- Earned Income Credits (**See "Other Benefits", Section G of this Book**)

Q. Can I Get Help With an Expense, Which If Not Paid, May Cause Me to Lose My Job?

- A. You may be eligible for a diversion payment. This is a payment, which would deal with a specific crisis situation or episode when such a payment would enable the individual or a family to avoid the need for ongoing assistance. In order to be eligible for a diversion payment, you must be without available financial resources of your own to meet the need. *Examples* of "diversion payments" are employment-related expenses, including employment-related transportation expenses, or relocation costs to a living arrangement that will allow the individual or family to be self-sufficient.

Q. What Will Happen If I Do Not Agree Or Fail To Take Part In A Required Employment Program?

- A. If you are able to work and you refuse to participate in a required employment program, you could lose Temporary Assistance, Food Stamp Benefits, and other services. Before you lose your Temporary Assistance, Food Stamp Benefits or other services, you may be offered a meeting, called a Conciliation Conference or Agency Conference, to discuss why you failed or refused to participate. You will not lose your Temporary Assistance, Food Stamp Benefits, or other services if you have good cause for failing or refusing to participate. You also have a right to a Fair Hearing. For how to request a Fair Hearing, **see Book 1 (LDSS-4148A) "What You Should Know About Your Rights And Responsibilities"**.

Q. Does Everyone Who Lives With Me Have To Apply For Temporary Assistance?

- A. If one of the people you want to get Temporary Assistance is a child under the age of 18, this often means that all of the siblings who are also under age 18, and the parents in the household must apply for Temporary Assistance. This is called the Filing Unit Rule. You may apply for Family Assistance only for yourself if you do not want to apply for Family Assistance for your children (for example, when your children are self-supporting or are supported by their non-custodial parent). If the non-custodial parent is supporting your children you may be able to get more money by taking your children off of your Family Assistance grant and receiving their child support directly. You may ask your temporary assistance worker in your local department of social services how this would affect you. A parent cannot apply for Safety Net Assistance without also applying for his or her children living with the parent.

Q. What Happens If My Child Gets Social Security Benefits?

A. If any of the children, in your household, have or must apply for Social Security benefits, and you are applying for Temporary Assistance for these children, you should know the following:

Congress and the Social Security Administration have deemed it legal for you to spend the Social Security benefits of a child in your care on that child's parents and siblings if they want to apply for or are getting Temporary Assistance benefits. This means that the Social Security benefits will be counted as income to the filing unit and can be used for basic household expense items, such as food and shelter, in addition to providing for the child's immediate needs.

Q. If I Am Found Eligible, How Do I Access My Temporary Assistance Benefits?

- A.**
- You will receive a brochure entitled "EBT How to use your Benefit Card to get your Food Stamp and/or Cash Benefits."
 - You must access your cash benefits from participating retailers or Automatic Teller Machines (ATMs) that display the QUEST logo. To find the location of a non-surcharging participating retailer or ATM that does not surcharge call, 1-800-289-6739.
 - You will use your Common Benefit Identification Card (CBIC) and Personal Identification Number (PIN)
 - Your regular monthly cash grant will be split into two benefits per month (if over \$25.00).
 - You will be given a form that will tell you your availability dates for each of your cash grants.
 - Benefits can be used throughout the month. Unused benefits carry over in your cash benefit account from month to month.
 - If your cash account goes unaccessed for a 90-day period, any remaining benefits will be removed from your account and returned to the agency.
 - Remember to check your receipts after any Electronic Benefit Transfer - EBT transaction.

Q. Is There A Limit On How Long I Can Get Temporary Assistance?

A. There are two time limits on Temporary Assistance in New York State.

- 1. State sixty-month time limit** - In New York State this time limit includes the following Temporary Assistance Programs:
 - Cash benefits received since December 1996 under the Aid-to-Dependent Children, Family Assistance, Safety Net Assistance, the Child Assistance Program and the Refugee Cash Assistance.
 - Temporary Assistance benefits from other states under the federal Temporary Assistance for Needy Family (TANF) Program.
 - Non-cash Safety Net benefits received by families in which the adult is required to participate in substance abuse treatment programs.
- 2. Twenty-four month cash-Safety Net time limit** – This time limit includes all cash Safety Net Assistance payments received since August 1997.

NOTE: TANF assistance received in other states may include time periods before December 1996.

NOTE: If you are HIV positive or have an incapacity that prevents you from working you may be exempt from time limits.

NOTE: Temporary Assistance time limits do not affect your Food Stamp Benefits or Medical Assistance.

Q. I Believe I Am A Victim of Domestic Violence. How Will This Agency Assist Me and Protect My Safety?

A. You must meet certain requirements to be eligible for Temporary Assistance. However, if you are a victim of domestic violence and you think that meeting one or more of the Temporary Assistance requirements would put you or your children at further risk of harm, you may request a meeting with a domestic violence liaison to address the risk of harm. Some requirements can be waived if necessary to keep you safe. Your Temporary Assistance worker can give you more information during your interview.

Additionally, you can call a 24-hour hotline for information about emergency shelter, support groups, counseling and your legal rights. These services will help keep you and your children safe.

For the phone number of the domestic violence program in your area:

In New York City call **1-800-621-HOPE (1-800-621-4673)**

All others call: **1-800-942-6906**

Spanish speaking callers call: **1-800-942-6908**

A Services caseworker can also arrange for you to get this information.

Q. As An Alien Lawfully Residing In The United States, How Will My Sponsor's Income And Resources Affect My Eligibility And Grant?

A. The income and resources of the sponsor who signed an affidavit of support after December 1997 will be deemed available to you when determining eligibility for Family Assistance. If you are eligible, only the amount actually contributed by the sponsor is considered income for purposes of calculating your Temporary Assistance benefit. However, under the revised federal sponsorship agreement, the social services district will request and pursue reimbursement from the sponsor. This information as to the sponsor's obligation will be shared with the federal government.

MEDICAL ASSISTANCE

SECTION B

Q. What Is Medical Assistance?

A. Medical Assistance is help for people who cannot pay for all of their medical care.

- Child Health Plus A provides health care coverage for children under the age of 21, when their family income is below certain levels.
- Medicaid provides health care coverage for adults who have income and resources below certain levels.
- Family Health Plus provides health care coverage for persons age 19 through age 64 who do not have other health insurance and who also have incomes too high to qualify for Medical Assistance or Child Health Plus A. There are income guidelines that must be met. Many of the rules for Medical Assistance also apply to Family Health Plus, but not all (See the description of Family Health Plus at the end of the Medical Assistance Section of this booklet).
- Family Planning Benefit Program (described later in this booklet) provides family planning services, certain health education and related medical care to people of childbearing age who have income below certain levels.

Q. Who May Get Medical Assistance?

A. You may get Medical Assistance if you:

- Meet certain income, resource, age, disability or other requirements
- Generally, are eligible for Temporary Assistance or Supplemental Security Income- SSI

Q. How Do I Apply for Medical Assistance?

A.

- You must fill out an application and check the Medical Assistance box.
- An application for Temporary Assistance is not an application for Medical Assistance. Persons who get Temporary Assistance do not automatically get Medical Assistance. If you want both Medical Assistance and Temporary Assistance, **you must check both boxes on the application.**
- When you are getting Supplemental Security Income-SSI, you do not have to apply separately for Medical Assistance. If you want Medical Assistance before you get SSI, you must apply.

If you want to apply for Medical Assistance, you must do one of the following:

- If you live in New York City, call the Human Resources Administration InfoLine at **(718) 557-1399** or **toll free at 1-877-472-8411** for information about how and where to apply.
- If you live outside of New York City, call or visit your local department of social services in the county where you live and ask for an application packet.
- If you are a patient of one of the following, contact the office listed after the type of facility:
 - New York State Office of Mental Health facility - Patient Resource Office; or
 - New York State Office of Mental Retardation and Developmental Disabilities facility - Revenue Support Field Office.
- If you are pregnant or applying for young children **call 1-800-522-5006.**

There are enrollment facilitators throughout New York State who can assist you with applying for Medical Assistance. For the name of the organization nearest you, call 1-800-698-4543 or 1-877-934-7587.

Q. How Can Medical Assistance Help Me?

A. Medical Assistance may help you pay for:

- Health Insurance Premiums
- Hospital inpatient and outpatient services
- Home health care
- Laboratory and X-ray services
- Nursing home care
- Treatment and preventive health and dental care (doctors and dentists)
- Treatment in psychiatric hospitals (for persons under 21, or 65 and older), mental health facilities, and mental retardation and developmental disabilities facilities
- Family planning services
- Medicine and supplies
- Clinic services
- Emergency ambulance transportation to a hospital
- Other health services

Medical Assistance may also help pay for the following, but you or the person/facility providing the service must have the service **approved ahead of time (prior approval)**:

- Transportation to medical appointments, including bus tokens and car mileage
- Personal care
- Private Duty nursing
- Certain dental care
- Durable medical equipment (wheelchairs, orthopedic shoes, etc.)
- Long term home health care, under the Long Term Home Health Care Program (**LTHHCP**). This is care in the home that is very much like nursing home care for people who require home care for more than 90 days and who need nursing or therapy services. (This program is not available in all social services districts.)

If you are pregnant or have a child, the following programs may be able to help you:

- **Prenatal Care Assistance Program (PCAP)** If you are pregnant, the **Prenatal Care Assistance Program** can help you get the care you need to have a healthy baby. You can have a high income and still get care from Prenatal Care Assistance. There is no limit to the amount of resources you may have. At your first Prenatal Care Assistance visit, a worker will help you apply for Medical Assistance. For more information about this program, call the Healthy Baby Hotline at **1-800-522-5006**.
- **WIC** - You may also get **WIC** (Special Supplemental Food Program for Women, Infants and Children) –The **WIC** Program provides helpful information about nutrition and the importance of eating healthy foods. The **WIC** program provides checks that can be exchanged in participating stores for infant formula, milk, juice, eggs, cheese, cereal, peanut butter, dry peas and beans.
For more information about the WIC Program and where you can apply, call **1-800-522-5006**.

Child/ Teen Health Program

All children need a “medical home”. A medical home is the doctor, nurse, physician’s assistant or healthcare team who takes care of your child’s health as he or she grows and develops from an infant to a toddler, to a preschooler, and all throughout childhood and adolescence. A medical home is the place you always bring your child for a check up or when your child is sick. And a medical home is the place where you go with questions and concerns about your child’s health and development.

- **Child/Teen Health Program (C/THP)** - The Child/Teen Health Program helps you find a “medical home”. It is a way for children and teens to receive preventive care (checkups), medical exams and follow-up care they need to make sure they are healthy and growing right.

The **Child/Teen Health Program** is for children from birth up to age 21 who have Medical Assistance. It is free of charge. The **Child/Teen Health Program** gives your children:

- Complete medical exams
- Tests to see if your child is growing and developing and doing the right things for his or her age
- Blood lead level testing
- Hearing, lab, and eye tests
- Any shots they may need
- Dental care
- Necessary treatment for a condition or illness found during an examination, such as asthma, cystic fibrosis, diabetes, sickle cell anemia and vision and hearing problems

For more information about this program, or for help finding a doctor for your child, ask the **Child/Teen Health Program** coordinator at your local department of social services.

- **Managed Care Programs** will also help you to find a doctor who can give you prenatal care and will continue to see you for follow-up after your pregnancy. Managed Care Programs also provide the Child/Teen Health Program for Children.

Q. Can Medical Assistance Help Me Get Family Planning Services?

A. Yes. **The Family Planning Benefit Program (FPBP)** provides Medical Assistance coverage for family planning services to eligible persons of childbearing age based on their income. If you are of childbearing age and are eligible for regular Medical Assistance or Family Health Plus, family planning services are included. If you were denied or terminated from Medical Assistance and/or Family Health Plus, you may be eligible for the Family Planning Benefit Program because the income level is higher and there is no resource limit.

If you are eligible, you will have access to family planning services from all Medical Assistance enrolled family planning providers. These services include: all FDA approved birth control methods, devices, and supplies, comprehensive reproductive health history and physical/gynecological examination, male and female sterilization, pregnancy testing and counseling, and preconception counseling.

Local county health departments, publicly-supported family planning clinics, and Prenatal Care Assistance Program providers (family planning providers) will assist you in completing the application and obtaining required documentation. Eligibility for the Family Planning Benefit Program will continue for 24 months unless eligibility circumstances change. For more information about this program, call or visit your local department of social services in the county where you live and ask for an application. You may be able to apply at a family planning provider's office. To find out where a participating family planning provider is in your area, you may call 1-800-541-2831.

- See the description of Family Health Plus at end of the Medical Assistance section of this booklet.

Q. How does Medical Assistance Work?

A. After an application is approved, most persons will get a plastic card called a **Common Benefit Identification Card (CBIC)**. When you get medical care, give this card to the doctor, pharmacist or other person you want help from. Your doctor, pharmacist or other person must agree to bill Medical Assistance. Your bills will be sent to the State to be paid. Persons enrolled in Family Health Plus will receive a card from the health plan that they selected.

Q. Do I Pay Any Money for My Medical Care?

A. Medical Assistance recipients age 21 or older may be asked to pay part of the costs of some medical care/items. This is called a co-payment or co-pay. Your health care provider is allowed to ask you for the co-payment. For each 12 months beginning April 1, 1994, there is a \$100 maximum per recipient for all co-payments.

If you are unable to pay the requested co-payment, tell your health care provider when the provider asks you for payment. You can still get the services you need from your provider. The provider cannot refuse to give you services or goods because you tell the provider that you are unable to pay the co-payment. Call 1-800-541-2831 to report any provider who refuses to give you care or services because you are unable to pay the co-payment.

- **Co-payment amounts are as follows:**

Service	Amount(\$)
Inpatient Hospital	\$25.00 per stay upon discharge
Outpatient Hospital and Clinic.....	\$3.00 per visit
Non-emergency/Non-urgent ER Visits	\$3.00 per visit
Prescription Drugs	
(brand name)	\$2.00
(generic)	\$.50
Over-the-Counter Drugs	\$.50
Drugs to treat Mental Illness or Tuberculosis	NO CO-PAYMENT
Family Planning	NO CO-PAYMENT
Enteral/Parenteral Formulae/Supplies	\$1.00 per order/prescription
Medical/Surgical Supplies	\$1.00 per order
Laboratory.....	\$.50 per procedure code
X-ray	\$1.00 per procedure code

- **Recipients exempt from co-payment include the following:**
 - Recipients under the age of twenty-one;
 - Pregnant women (this exemption continues for two months after the month in which the pregnancy ends);
 - Recipients institutionalized in a medical facility who are required to spend all of their income, except for a personal needs allowance, on medical care. This includes all recipients in nursing facilities and Intermediate Care Facilities for the Developmentally Disabled (ICF/DD);
 - Recipients enrolled in Medicaid Managed Care Health Plans;
 - Residents of OMH and OMRDD certified community residences and recipients enrolled in a Comprehensive Medicaid Case Management Program (CMCM) or in a Home and Community Based Services (HCBS) waiver Program.

- **Exempt services include the following:**

- Emergency services;
- Family planning services and supplies (for example; birth control pills or condoms) Tuberculosis Directly Observed Therapy;
- Methadone Maintenance Treatment Programs, mental health clinic services, mental retardation clinic services, alcohol and substance abuse clinic services.

NOTE: Co-payments are not charged by practicing physicians and dentists or, for home health and personal care services. There are no co-payments for Family Health Plus services.

Q. How Often and How Much Medical Assistance Help Can I Get?

A. The number of times Medical Assistance will pay for visits to doctors or clinics, labs and drug stores may be limited. This limit is called "**Medicaid Utilization Thresholds**". Your worker can tell you if **Medicaid Utilization Thresholds** apply to you.

Q. What is a Medicaid Managed Care Health Plan?

A. Many counties have a Medicaid Managed Care program through one or more Medicaid Managed Care health plans. When you join a Medicaid Managed Care health plan, you use the providers and hospitals that are in your plan. You choose your own doctor or nurse practitioner who will keep track of all your health care. This person is called Primary Care Provider (PCP). Your Primary Care Provider will send you to a specialist if you need one. Under Family Health Plus, all services are received from the managed care plan that you select.

Q. Why Join a Medicaid Managed Care Health Plan?

A. In some counties, you must join a managed care health plan to receive most of your Medical Assistance health care services. Call your local department of social services to find out if you can join or must join a Medicaid Managed Care health plan. Most Medicaid Managed Care health plans offer more providers to choose from than regular Medical Assistance. You get to choose your own Primary Care Provider (PCP), which means you don't need to use the emergency room for medical care that is not life threatening. Your Primary Care Provider will give you a referral when you need to see a specialist. You can call your Primary Care Provider or a health plan phone number 24 hours a day if you think you need medical care.

If you are pregnant, you will have your own doctor or nurse practitioner who will give you all the medical care and tests that you need. Your newborn baby will get follow-up visits. Your children will also have their very own Primary Care Provider.

There are no co-pays or utilization thresholds except for pharmacy services when you are in a Medicaid Managed Care health plan. You will get your own health plan card that is separate from your Common Benefit Identification Card (CBIC).

Q. Can Medical Assistance Pay For Past Medical Bills?

A. We must pay you for some bills you paid before you asked for Medical Assistance – even if the doctor or other provider that you paid does not take Medical Assistance. The following explains when we will pay you for these bills.

What bills can be paid? You can be paid for bills you paid before you asked for Medical Assistance and for bills you pay until you get your Medical Assistance Common Benefit Identification (CBIC) card. Bills you paid before you asked for Medical Assistance must be for services you received on or after the first day of the third month before the month that you asked for Medical Assistance. Example: If you ask for Medical Assistance on March 11, we can pay you for services you received and paid for from December 1 until you get your Medicaid Common Benefit Identification (CBIC) card.

What if the doctor or other provider that you paid doesn't take Medical Assistance? We can pay you for some bills even if the doctor or other provider you paid does not take Medical Assistance. If you paid the bills before you asked for Medical Assistance, we can pay you even if the doctor or other provider does not take Medical Assistance. After the day you ask for Medical Assistance, we can pay you only if the doctor or other provider takes Medical Assistance.

YOU MUST GO TO MEDICAL ASSISTANCE PROVIDERS FROM NOW ON TO BE PAID FOR BILLS YOU PAY.

Always ask the doctor or other provider if he or she takes Medical Assistance. After you ask for Medical Assistance, we will not pay you if the doctor or other provider does not take Medical Assistance.

Are there more rules? Yes. You also need to know that:

1. The bills you paid must be for services that the Medical Assistance program pays for. These services include, but are not limited to, doctors, home care, hospitals, and drugs.
2. We can only pay what Medical Assistance pays for these services. This may be less than the bill you paid.
3. We can pay you only when we decide you can get Medical Assistance and only if you could have gotten Medical Assistance when you paid the bill.

4. We can pay you only when the bills you paid were for services that you needed.
5. You must give us the bills and prove you paid them.

What if my family or friend paid the bills for me? If your bills were paid by a family member or friend, we may be able to pay them. Ask your worker.

Any questions? Please ask your worker if you have any questions.

Q. Can Medical Assistance Pay For Medical Care I Get Outside Of New York State?

A. Maybe. Medical Assistance will pay for medical care you get out of state if:

- People from your county usually get medical care in that state; **or**
- Your local department of social services placed or helped place you in a nursing home or foster care in another state; **or**
- Your doctor has gotten approval for you to get medical care out of state (prior approval); **or**
- You need emergency medical care while traveling in another state, but **only** if the doctor or other person providing care agrees to bill the New York State Medical Assistance program.

If you are a member of a Medicaid Managed Care health plan, call the health plan member services number on the back of your card to find out how to get services if you are going out of state.

Q. What Is Medicare?

A. **Medicare** is not the same as Medical Assistance (Medicaid). Medicare is a federal insurance program administered by the Social Security Administration that pays for hospital bills (Part A) and doctor bills and some other medical services (Part B). You can apply for Medicare at your local Social Security Office

Q. Can Medical Assistance Pay My Medicare Premiums?

A. Yes, under certain conditions, Medical Assistance may pay for Medicare premiums, coinsurance and deductibles.

Q. Should I Cancel Any Other Health Insurance I Already Have?

A. No. Wait and ask this question at your interview.

Q. Where, Besides Social Services, Can I Get Money To Help With My Health Insurance Costs?

A. You may be able to get a Health Insurance Tax Credit. Call your local Internal Revenue Service (IRS) for more information.

Q. Can I Still Keep Some of My Income If I Am In A Nursing Home or Other Medical Facility?

A. Yes. You can keep a small amount for your own personal use. You can also keep some of your income and resources for your family if they are dependent on you.

Q. Are There Higher Income and Resource Limits For Pregnant Women And Children?

A. Yes, if you are pregnant or want help for a child younger than age 19, you can have higher income and your family's resources are generally not considered.

CHILD HEALTH PLUS B

If you have children and your income is too high for Medical Assistance, the children may want to apply for the Child Health Plus B Program. You can apply for the Child Health Plus B Program by calling 1-800-698-4543.

NOTE: If you are pregnant or want help for a baby under the age of one, there is no limit to the amount of resources the family can have.

Q. What are Home and Community Based Waiver Programs?

A. These are Medical Assistance programs which may provide special services and may also have different financial eligibility rules. New York has "Waiver" programs for:

- Developmentally Disabled Adults and Children
- Adults with Traumatic Brain Injuries
- Long Term Home Health Care Program
- Children with Severe Mental Illness
- Children with Severe Physical Disabilities

Q. What If I Have Emergency Medical Needs?

- A.** New York State law requires hospitals to give you emergency care, even if you cannot pay for it. If you have a medical emergency, like a heart attack or other life-threatening illness, go to a hospital **right away**, before you find out if you are able to get Medical Assistance or before you have applied for Medical Assistance. If you are sick and need medical care right away, and you have applied for but have not gotten your Benefit ID card, your worker may be able to help you get a temporary card for the medical help you need. You must show the card when you get medical treatment and the doctor or other person providing medical care must agree to bill Medical Assistance.

Medical Assistance may be able to pay medical bills for care you were given during the three months before you applied for help. Remember to tell your worker if you have any paid or unpaid medical bills.

Q. What Is Prospective Drug Utilization Review?

- A.** The Prospective Drug Utilization Review Program lets a pharmacist check a computer before you get your prescription filled to see if you recently received any other medicines that should not be taken with your new prescription. If the pharmacist sees a problem, the pharmacist may check with your doctor to find out if you should be given the new medicine. This is done to make sure you get the right medicine. By checking with the computer, your pharmacist will also be better able to answer any questions you may have about your medicines.

Q. If I Sell, Give Away Or Transfer Any Money Or Property, Can I Still Get Medical Assistance?

- A.** This section explains what may happen if you or your spouse transfer any property or money and apply for Medical Assistance. A transfer is when you give away money or property or sell property for less than it is worth. You **can keep** certain money or property for you and your family and still get Medical Assistance. If you or your spouse transferred **other** money or property, Medical Assistance **may not** pay for the following medical care for a period of time, depending on how much money or property you transferred:

1. Nursing home care
2. Certain care in your own home, which is like nursing home care
3. Care you get in a hospital, when you no longer need hospital care and you are waiting for nursing home care

However, Medical Assistance **will** pay for **other** medical care if you are eligible.

In most cases if you want full Medical Assistance coverage, you cannot transfer money or property. Sometimes, you can transfer money or property and still get full Medical Assistance coverage if:

- You transfer money or property to your husband or wife.
- You transfer money or property to your child who is certified blind or certified disabled. The local department of social services where you are applying must decide if your child is certified blind or certified disabled.
- The property transferred was your home, and it was transferred to your husband, wife, child under age 21 or child of any age who is certified blind or certified disabled. The local department of social services where you are applying must decide if your child is certified blind or certified disabled.
- You transfer your home to your brother or sister who already has a right to part of your home and lived in the home for a least one year immediately before you went into a nursing home.
- You may transfer your home to your child if your child was living in your home at least two years immediately before you entered a nursing home and your child took care of you, so that you could stay home rather than go into a nursing home.
- You set up a trust for a certified disabled individual under 65 years of age. The local department of social services must decide if the individual is certified disabled.

When the local department of social services decides that you have transferred any property or money and you think that they have made a mistake, you have a right to prove that you did not transfer the property or money by:

- Proving that you meant to sell the property for what it was worth or to get something else of equal value in exchange
- Proving that you got rid of the money or property only for some reason other than to get the medical care listed above as 1, 2, or 3 of this answer.
- Proving that despite all your attempts, you cannot get the money or property back or get something of equal value, and that you cannot get the medical care you need without Medical Assistance. You must work with the local department of social services when trying to get the money or property back.

Q. Will A Claim Be Made Against My Estate When I Die?

- A.** If you receive medical services paid for by Medical Assistance on or after your **fifty-fifth** birthday, or when permanently residing in a medical institution, Medical Assistance **may** recover the amount of the cost of these services from the assets in your estate upon your death.

Q. Can I Get Medical Assistance If I Am Not A Citizen Of the United States?

A. If you are pregnant, you do not have to tell us about your citizenship or alien status. Otherwise, if you are not a citizen of the United States, you must document that you are an alien in one of the immigration categories below in order to be eligible for Medical Assistance:

1. a United States (U.S.) non-citizen national, or
2. an American Indian born in Canada with at least 50 per centum of blood of the American Indian race under section 289 of the Immigration and Nationality Act (INA), or
3. a member of an Indian tribe as defined in section 4(e) of the Indian Self-Determination and Education Assistance Act (25 U.S. C. 450b(e)), or
4. an alien admitted to the United States as a refugee under Section 207 of the Immigration and Nationality Act; or
5. an alien granted asylum under Section 208 of the Immigration and Nationality Act; or
6. an alien whose deportation has been withheld under Sections 241(b)(3) or 243(h) of the Immigration and Nationality Act; or
7. an alien admitted to the United States as a Cuban and Haitian entrant; or
8. an alien admitted as an Amerasian immigrant; or
9. an alien admitted as a Hmong or Highland Laotian, including the spouse and dependent children, or
10. an alien who is on active duty in the U.S. armed forces or, an honorably discharged veteran, their spouse and dependent children, and the unremarried surviving spouse and unmarried dependent children of an active duty member or veteran who has died, or
11. an alien who has been admitted as a lawful permanent resident: or
12. an alien who has been paroled into the United States under Section 212(d)(5) of the Immigration and Nationality Act, for a period of at least one year; or
13. an alien who has been granted conditional entry under Section 203(a)(7) of the Immigration and Nationality Act; or
14. an alien who has been battered or subject to extreme cruelty in the United States by a family member and who meets certain other requirements, or
15. an alien who has been subjected to a Severe Form of Trafficking in Persons under the Victims of Trafficking and Violence Protection Act of 2000, or
16. an alien not listed above who is considered to be permanently residing in the United State Under Color of Law (PRUCOL), including:
 - a. an alien paroled into the United States for less than one year;
 - b. an alien residing in the United States pursuant to an Order of Supervision;
 - c. an alien residing in the United States pursuant to an indefinite stay of deportation;
 - d. an alien residing in the United States pursuant to an indefinite voluntary departure;
 - e. an alien on whose behalf an immediate relative's petition has been approved and their families covered by the petition;
 - f. an alien who has filed an application for adjustment of status that Immigration and Naturalization Service (INS) has accepted as properly filed or has granted;
 - g. an alien granted stays of deportation;
 - h. an alien granted voluntary departure;
 - i. an alien granted deferred action status;
 - j. an alien who has entered and continuously resided in the United States before January 1, 1972;
 - k. an alien granted suspension of deportation; or
 - l. an alien living in the United States with the knowledge and permission or acquiescence of the INS and whose departure the INS does not contemplate enforcing. (Examples include, but are not limited to: permanent non-immigrants, pursuant to P.L.99-239, applicants for deferred action or voluntary departure status, and aliens granted extended voluntary departure for a specified time due to conditions in their home countries.)

If you are an alien who is not in any of the immigration categories listed above you may be able to get help with your medical care if you are pregnant or you need medical care because of an emergency medical condition.

Q. Are there limits on the number of times I can receive certain medical services through the Medical Assistance Program?

A. Yes. There are limits on the following types of service:

Service Type	Number of visits, items or lab tests allowed in a year.	
	Recipients who are: - Under 21 or 65 or over - Certified disabled - Certified blind - Single caretaker of a child under 18	Most Other People who are: - between 21 and 65
Physician and/or Clinic	10 visits	10 visits
Laboratory	18 tests	18 tests
Pharmacy (prescription drugs and Over the counter medicine.)	40 items	43 items
Mental Health Clinic	40 visits	40 visits
Dental Clinic	3 visits	3 visits

Emergency Medical Care Will Be Covered Even If You Have Reached These Limits

There are no limits on the following services:

- family planning services
- methadone maintenance treatment
- obstetric services (pregnancy)
- care given under a managed care program (See Managed Care Programs in this booklet)
- kidney dialysis
- Child Teen Health Plan
- other services -call 1-800-421-3891

Benefit Year

Service limits are for a 12-month period called a benefit year, which begins the month you become eligible for Medical Assistance. You will have these same limits even if you go on and off Medical Assistance during this benefit year. After the benefit year is over a new 12 month benefit year will begin with the full number of service limits (for example: 18 laboratory tests). Services not used from the last benefit year will not be carried over to the new benefit year.

During each benefit year we will keep track of the number of services you are using and will let you know by mail if you are using services quickly and are in danger of reaching your limit. We will also let you know by mail if you have reached your service limit.

Medical Assistance Common Benefit Identification Card

When you go for a medical service, your doctor, clinic or pharmacy must first check with Medical Assistance to see whether you have reached the limit for medical services. It is important that you show your plastic "Common Benefit Identification Card" (CBIC) each time you go for medical services. Each case member will receive a Common Benefit Identification Card (CBIC) for Medicaid purposes.

If You Need More Services

Your doctor can fill out a special form called a "Threshold Override Application" to ask Medical Assistance to increase the number of services you can receive or to give you an exemption from service limits.

You should ask your doctor to fill out the Threshold Override Application to get more services when:

- you or other household members have a serious illness or are sick a lot; or
- you get a letter from Medical Assistance warning you that you are using services quickly and are in danger of reaching your service limit; or
- you get a letter from Medical Assistance telling you that you have reached your service limit.

If you need services above your limit make sure that you ask your doctor to fill out the threshold override application. Remember, if you do not ask for more services and you reach your limit, medical assistance will not pay for additional services except for emergency medical care, until your new benefit year begins.

Managed Care Programs

If you enroll in a Medicaid Managed Care Program you will not be subject to the Utilization Threshold Program except for pharmacy. To find out if there is a Medicaid Managed Care Program available to you, please call your local department of social services. If you are enrolled in Family Health Plus, you are not subject to Utilization Thresholds, but there may be limits on some services.

If You Have Any Questions

Call your local Department of Social Services and ask for the Medicaid Managed Care Coordinator (upstate New York). In NYC, call 1-800-505-5678.

Fair Hearing Rights

You have a right to a Fair Hearing when your application for an exemption or an increase in service limits is denied and you have reached your service limits. At this hearing you can raise the issue of whether we correctly figured the number of services you used.

Your eligibility for Medical Assistance will be determined by your local district. Generally, you should contact your local district with any questions concerning your application for Medical Assistance. If you have general questions concerning Medical Assistance in New York State, you may call **1-800-541-2831**.

Q. Are there any program requirements that may limit what drugs I may get?

A. A medical Assistance law requires that New York State Medical Assistance recipients get generic drugs in place of brand name drugs. The law requires doctors to prescribe the generic version of a drug, unless they get special approval for a brand name drug.

FAMILY HEALTH PLUS

Q. What is Family Health Plus?

A. Family Health Plus is a public health insurance program for adults age 19 through 64 who do not have health insurance – either on their own or through their employers – but have incomes too high to qualify for Medical Assistance. You must be a resident of New York State, and be a United States citizen, or an alien who falls into one of the immigration categories listed earlier. Health care is provided through managed care plans in your area.

Q. How can I apply?

A. When you apply for Medical Assistance, either at a local department of social services or with an enrollment facilitator, your eligibility for Family Health Plus will automatically be determined. (See previous section, How Do I Apply for Medical Assistance?)

Q. What benefits can I get?

A. Family Health Plus covers many of the services that Medical Assistance covers. The services that Family Health Plus does not cover include: nursing home care, long term home health care, personal care and non-emergency transportation. Some services have limits. Some Family Health Plus managed care plans offer dental services; others do not.

Q. How is health care provided?

A. Health care in the Family Health Plus program is provided through managed care plans. You must select a participating health plan when you apply. When you choose a health plan, you use the providers and hospitals that are in that plan. You will get your own health plan card so you can get services from the plan.

Q. How do I choose a health plan?

A. In choosing a health plan, you should think about the doctors you want, the services you and your family need, and the health plans available to you. Make sure the doctor you want to see is in the health plan you choose. After you join a plan, you must use the hospital, clinics and doctors that work with that plan.

Q. How much does it cost?

A. There is no cost to join Family Health Plus, and no co-payments or deductibles once you are enrolled.

Q. Can Family Health Plus Help With Past Medical Bills?

A. No. Unlike Medical Assistance, Family Health Plus cannot pay for any care you get before your enrollment in your Family Health Plus plan.

CHILD SUPPORT

SECTION C

Q. What are child support enforcement services?

A. The child support enforcement program provides services to:

- Find a non-custodial parent through computerized searches;
- Establish legal fatherhood for a child either by helping a parent to sign a voluntary acknowledgment of paternity or by referring the matter to court;
- Obtain a support order from court for a child based on the state's child support guidelines and a provision in the support order for health care coverage by filing petitions with the family court; and
- Collect child support payments from the non-custodial parent through income withholding;
- Enforce unpaid child support through income withholding, state and federal tax refund offset, bank account seizure, suspension of drivers' licenses and by taking action in court;
- Review the support order for more support based on a cost-of-living adjustment.
- Any of these actions may be taken across state lines.

Q. Who may get child support enforcement services?

A. Any parent, guardian, or caretaker of a child for whom support is needed. These services are available to the general public, as well as to Temporary Assistance, Medical Assistance, IV-E Foster Care, Food Stamp Benefits and Child Care applicant/recipients.

Q. How do I apply?

A. You may apply by contacting the child support enforcement unit located in your local department of social services or, if you live in New York City, by contacting the Administration for Children's Services' Office of Child Support Enforcement and by completing the child support services application. If you are applying for Temporary Assistance for a child for whom legal fatherhood needs to be established or where there is a noncustodial parent you will be automatically referred to child support.

Q. If I apply for Temporary Assistance or transitional child care am I required to cooperate with child support?

A. Yes, as a condition of eligibility you must:

- Cooperate with the agency in establishing legal fatherhood for any child born out of wedlock; and
- Cooperate with the agency in establishing, modifying and enforcing child support for any child for whom assistance is sought.

Q. What happens if I do not cooperate with child support enforcement program?

A. If an applicant/recipient does not cooperate, the temporary assistance benefit amount is reduced by 25% for each custodial parent.

Q. What if I do not want to cooperate because I have safety concerns for my child or myself?

A. You need to indicate what your concerns are to your caseworker. They will guide you through appropriate steps to determine if you have good cause or if you need a domestic violence waiver from child support requirements.

Q. If I receive Temporary Assistance will I also get the child support?

A. For temporary assistance recipients, the child support payments are kept by the agency and the household receives a payment of up to the first \$50 of current support collected by the child support program. This payment is called the "pass through payment".

Q. When I no longer receive Temporary Assistance what happens with my child support?

A. You will receive all the child support paid except for any collections made for past due support owed to the Agency. Also, child support services automatically continue after Temporary Assistance closes unless you wish otherwise.

Q. How long can I get child support services?

A. Unlike Temporary Assistance which is time limited, the child support program can continue to collect for children until each is 21 years of age.

Q. What happens when I apply for or I am referred for Child Support Services?

A. You will have an interview with the child support program to determine what services are necessary to secure you child support. During the interview you will be asked to provide:

- The noncustodial parent's name, social security number, date of birth and mailing and residential address;
- The name and address of the noncustodial parent's employer
- Copies of noncustodial and your income information e.g., tax records, pay stubs, bank and business records
- Information about available health care coverage
- Copies of child's birth certificate or a marriage certificate
- Copies of court orders for support e.g., separation agreements, divorce decrees or acknowledgments of paternity
- Information about your child-related expense's e.g., child care, health care and educational expenses.

This information is critical to the child support program to expedite getting you child support. Your worker will advise you as to next steps.

FOOD STAMP BENEFITS

SECTION D

Q. What Are Food Stamp Benefits?

A. Food Stamp Benefits are used to purchase food items and are redeemed when you use your Common Benefit Identification Card (CBIC) at Point of Sale (POS) locations.

Q. Who May Get Food Stamp Benefits?

A. You may be able to get Food Stamp Benefits if you:

- Work and get low wages
- Have little or no income
- Are elderly or disabled
- Get Supplemental Security Income -SSI or Temporary Assistance
- Are homeless (even if you are staying with someone temporarily or you are staying at a shelter temporarily)

NOTE: Even if you own a home and a car you may still be able to get Food Stamp Benefits.

Q. Can I apply for Food Stamp Benefits if I have reached the Temporary Assistance Time Limits?

A. Yes. The diversionary requirements and time limits of cash assistance programs do not apply to the Food Stamp Benefits Program.

Q. How Do I Apply For Food Stamp Benefits?

A. You must fill out an application. A Food Stamp Benefits Application must be accepted if you have filled in at least your name, address (if you have one) and signature. This is important because the amount of your Food Stamp Benefits is figured from the day you turn in (**file**) your Food Stamp Benefits Application. You could get more Food Stamp Benefits if you turn in your application the same day you get it. Please note, however, that you will have to fill out the rest of the application to see if you can get Food Stamp Benefits.

NOTE: If everyone in your household has applied for Temporary Assistance, usually you do not have to apply separately for Food Stamp Benefits. Also, you do not have to apply for Temporary Assistance to get Food Stamp Benefits.

Q. Where Do I Apply?

A. If you live **outside of** New York City, call or visit your local department of social services in the county where you live and ask for an application package. You can get the address and phone number by calling toll free **1-800-342-3009**.

If you live in **New York City** and you are **not** also applying for Temporary Assistance, call or visit any Food Stamp Benefits Office and ask for an Application package. You can get the address and phone number by calling **1-877-472-8411** or toll free **1-800-342-3009**.

Q. Can Someone Apply For Food Stamp Benefits For Me?

A. You can choose a relative or friend to apply for your household. This person would be called an "**Authorized Representative**". You must write a note saying you want this person to represent you. You must sign the note and tell this person to take it to the Food Stamp Benefits office. If you want, this person or someone else may also be authorized to access your Food Stamp Benefits and use them to shop for your food.

Q. Do I Have To Apply for Food Stamp Benefits in Person?

A. No. You can also apply by mail or another person can apply for you.

NOTE: If everyone in your household is applying for or getting Supplemental Security Income -SSI, you can also apply at your local Social Security Administration Office.

Q. What Happens When I Turn In My Application?

A. After you turn in your Application, you will have a confidential interview with a worker. Usually, you must appear in person for this interview unless:

- You have an Authorized Representative who can go for you.
- You are 60 years of age or older, or disabled, and you do not have an Authorized Representative who can go for you.
- You have a transportation hardship.

- You live alone and get Supplemental Security Income-SSI, or you live with your spouse who also gets SSI.
- You are homebound.

NOTE: If you cannot go to the interview and you do not have anyone to go for you, you may be interviewed over the phone or a worker may ask to come to your home.

Q. How Long Will It Take To Get Food Stamp Benefits?

A. It may take up to 30 days from the date you first apply.

Q. Can I Get My Food Stamp Benefits Right Away?

A. Yes, you may be able to get your Food Stamp Benefits within five calendar days. This is called **Expedited Processing**.

Usually, you may be able to get **Expedited Processing** if you are eligible for Food Stamp Benefits and:

- Your household has less than \$100 in cash and other available resources **and** has or will get less than \$150 in gross income during the month that you apply, or
- Your income and available resources are less than your rent or mortgage, plus heat, utilities and phone, or
- You are a migrant or seasonal farm worker.

NOTE: You do not need to be out of food to get Expedited Processing of Food Stamp Benefits.

Q. If I Am Found Eligible, How Do I Access My Food Stamp Benefits?

A. Please refer to **Section I: “Getting Benefits With Electronic Benefit Transfer (EBT)”**, in this Book.

Q. When Do I Access My Food Stamp Benefits?

A. If you live *outside* of New York City:

The last number of your case, 1 through 9, will tell the earliest date of the month that you can access your Food Stamp Benefits. For example, if your case ends in 2, you can access your Food Stamp Benefits beginning on the 2nd day of the month. If your case ends in 0, you can access your Food Stamp Benefits beginning on the 1st of the month. You have 270 days to access these benefits or they are no longer available.

If you live *in* New York City:

You will get a form from your Food Stamp Office that will tell you the earliest date of the month that you can access your Food Stamp Benefits. For example, if the form tells you the first day you can access your Food Stamps benefits is the 3rd, you can use your Common Benefit Identification Card (CBIC) on the 3rd and thereafter. **You will have up to 270 days to access these benefits or they are no longer available.**

Q. Can Food Stamp Benefits Be Used At Senior Citizen Sites and For Home Delivered Meals?

A. You may be able to sign a voucher form for these services to charge your Food Stamp Benefits account.

Q. What Happens If A Person In My Household Does Not Follow An Employment Requirement Or Quits A Job?

A. A person who does not comply with work requirements, or voluntarily quits or reduces work hours, without a good reason will be sanctioned (no Food Stamp Benefits for that person).

Q. Can I Get Food Stamp Benefits if I Am Not A Citizen of the United States?

A. Many non-citizens are qualified aliens who are eligible for Food Stamp Benefits. Even if you are not eligible for Food Stamp Benefits, you may receive Food Stamp Benefits for your children if they are eligible. Food Stamp Benefits do not affect your citizenship application or Immigration and Naturalization Services (INS) decisions. If you were in an alien status that was eligible for Food Stamp Benefits and then were adjusted to a more limited alien status, your eligibility will be based on your earlier eligible status.

You may be eligible for Food Stamp Benefits if you are one of the following:

1. A United States (U.S.) non-citizen national, or
2. An American Indian born in Canada with at least 50 per centum of blood of the American Indian race under section 289 of the Immigration and Nationality Act (INA), or
3. A member of an Indian tribe as defined in section 4(e) of the Indian Self-Determination and Education Assistance Act (25 U.S.C. 450b(e)), or
4. Alien admitted as a Hmong or Highland Laotian, including the spouse and dependent children, or

5. Alien admitted as a refugee under section 207 of the INA, for 7 years from the date of entry, or
6. Alien granted asylum section 208 of the INA, for 7 years from the date of entry, or
7. Alien with deportation or removal withheld under section 243(h) or 241(b)(3) of the INA, for 7 years from the date of entry, or
8. Alien admitted as a Cuban or Haitian entrant, for 7 years from the date of entry, or
9. Alien admitted as an Amerasian, for 7 years from the date of entry, or
10. an alien who is on active duty in the U.S. armed forces or, an honorably discharged veteran, their spouse and dependent children, and the unremarried surviving spouse and unmarried dependent children of an active duty member or veteran who has died, or
11. Alien who is a victim of trafficking under section 103(8) of the Trafficking Victims Protection Act, for 7 years from the date of entry, or
12. A "qualified" alien who also:
 - is lawfully admitted for permanent residence and has 40 qualifying quarters of work (including spouse's and parents' work);
 - receives certain disability or blindness benefits;
 - was lawfully in the U.S. on August 22, 1996 and is now blind or disabled, under 18 years old, or was born on or before August 22, 1931;
 - beginning April 1, 2003, has lived in the U.S. as a qualified alien for at least 5 years; OR
 - beginning October 1, 2003, is a qualified alien under 18 years of age.

Qualified aliens include:

- Alien lawfully admitted for permanent residence under the INA
- Refugee admitted under section 207 of the INA more than 7 years ago
- Alien granted asylum under section 208 of the INA more than 7 years ago
- Alien paroled under section 212(d)(5) of the INA for at least 1 year
- Alien with deportation or removal withheld under section 243(h) or 241(b)(3) of the INA more than 7 years ago
- Alien granted conditional entry pursuant to section 203(a)(7) of the INA
- Alien admitted as a Cuban or Haitian entrant more than 7 years ago
- Alien or parent or child of an alien who has been battered or subjected to extreme cruelty in the U.S. by a Family member.
- Alien who is a victim of trafficking under section 103(8) of the Trafficking Victims Protection Act more than 7 years ago

TRANSITIONAL HELP

SECTION E

Q. Can I Still Get Child Care Assistance When My Temporary Assistance Stops?

- A.** Recipients who reach their 60-month time limit and voluntarily close their assistance case, or who are otherwise ineligible for assistance may be eligible for a child care subsidy. Parents who need child care because they are working or participating in an approved education or training program and whose income falls within the financial limits may wish to apply for a child care subsidy. Parents will have to pay a share of the cost of child care.

Q. What if My Medical Assistance Case Closes?

- A.** Transitional Medical Assistance - If your Low Income Family (LIF) Medical Assistance case closes because you have increased income, you may still be able to get Transitional Medical Assistance. Low Income Family Medical Assistance is the Medical Assistance program for families who are eligible for Temporary Assistance, but you do not have to be getting Temporary Assistance to get Low Income Family Medical Assistance.

You may be able to get this extra help for up to 6 months if:

- You have been getting Low Income Family Medical Assistance in 3 out of the last 6 months.
- You have a child under the age of 21 living with you.

After the 6 months are up, you may be able to get **6 more** months of Transitional Medical Assistance if:

- Your income, less child care cost necessary for employment, is less than 185% of the federal poverty level.
- You fill out the reports sent to you by your local department of social services so that they can see if you are still able to get this help and
- You have a child under the age of 21 living with you.

Q. Can I still Get Help With Collecting Child Support After My Temporary Assistance Stops?

A. Yes, The Child Support Enforcement Unit at the local department of social services helps any custodial parent who wants to get support. You will not lose the help of the Child Support Enforcement Unit just because you no longer get Temporary Assistance. You will automatically continue to receive child support enforcement services to help you locate the non-custodial parent and establish, modify or enforce child support collections. They can even have your support taken directly from the non-custodial parent's wages. There is no cost to you for these services, except for legal services which, if requested by you, will be recovered from future child support collections.

Q. Can I Still Get Food Stamp Benefits After My Temporary Assistance Stops?

A. If you work and get low wages, have other low income, or are unable to work, you still may be able to get Food Stamp Benefits (see "Food Stamp Benefits", Section D of this Book).

SERVICES

SECTION F

Q. How Can Services Help Me?

A. Services programs may be able to help you and/or your family with:

- Getting child care
- Adopting a child
- Placing a child in foster care or placing a child for adoption
- Family abuse problems
- Budget problems
- Children's behavior
- Safely keeping families together

Q. How Do I Apply For Services?

A. If you live **outside** of New York City, call or visit your local department of social services in the county where you live and ask for an Application package.

If you live **in** New York City, call or visit your local Income Support/Job Center or look for the Human Resources Administration (HRA), Administration for Children's Services (ACS), in the Government pages of the telephone book for your borough. Call the number listed for the type of help you need.

Q. What Services Can I Get?

A. If you live **outside** of New York City, you can get free information and referral services from your local department of social services.

If you live **in** New York City, call or visit your local income support/ job center.

You can also apply for the following services:

1. **Child Protection** - Services given to abused or maltreated children under the age of 18 and to their families. These **may** include:

- Emergency care outside the home if necessary
- Parent aide or homemaker services
- Counseling
- Child care

There is no income limit to get these services.

2. **Adult Protection** – Services given to persons 18 years of age or older who are physically or mentally ill, or disabled, and have been harmed or may be at risk of harm, and cannot protect themselves and have no one able and willing to responsibly help them. These services may include:

- Finding a home to suit the adult's needs
- Counseling
- Helping to get medical care, legal help or other benefits or services
- Homemaker or housekeeper/chore services for a limited time
- Helping to manage money

There is no income limit to get these services.

3. **Domestic Violence (Physical or Emotional Abuse or Threat of Abuse)** - Services given to wives, husbands, family members or persons living in the same household together, with or without children, to help them with problems of violence or the threat of violence. You may be able to get help with:

- Finding a safe place to stay
- Medical care
- Legal problems
- Counseling
- Finding a job
- Child Care
- Transportation

There is no income limit to get these services.

4. **Child Care** - Services to help families who need care and supervision for their children. Children may get child care if the parent in a single parent household or both parents in a two parent household are:

- Sick or disabled
- Looking for a job
- Taking part in an approved education, job training or rehabilitation program
- Working
- Required to be away from the home for a large part of the day due to unusual situations

5. **Preventive Services To Children and Families** - Services given to children and families to safely keep the family together and to prevent foster care placement or to safely return the children from foster care as soon as possible. These services may include:

- Child care
- Parent training and counseling
- Housing
- Homemaker, housekeeper, parent aide
- Emergency shelter, food, clothing or other essential items
- Drug Abuse Treatment
- Alcohol Abuse Treatment
- Respite Care Services for Crisis Situations (including AIDS/HIV)

There is no income limit to get these services.

6. **Preventive Services for Adults** - Services given to single adults 18 years of age and older or to families without children under age 18. These services may include:

- Counseling.
- Support and referral services to prevent or delay having to get long term care outside the home.

7. **Adoption** - Services given to families who want to adopt a child and to parents and legal guardians may include:

- Counseling.
- Parent training.

In addition to Services extra money (adoption subsidies) may be given to support children who need extra care.

8. Foster Care

A. Services given to **birth families/adoptive families** when a child is placed in foster care may include:

- Counseling.
- Medical and educational services.
- Other preventive services to help safely return the child home as soon as possible.

B. Services given to families who want to be **foster parents** may include:

- Counseling and supportive services.
- Training.
- Child care if you have a job.
- Monthly payments toward the costs of caring for the foster child.

9. **Residential Placement Services For Adults** - Services given to adults 18 year of age and older who are mentally and physically impaired and need supervised living outside their own homes.

These services include:

- Finding family type homes in the community who will take care of these adults.
- Assisting adults in finding homes that will meet their level of need.
- Providing supportive services for the adults who are placed in these homes.

10. Teenage Pregnancy Programs and Unmarried Parent Services - Services to help pregnant teens and unmarried parents may include:

- Education and parent training
- Medical and legal help
- Counseling
- Employment help
- Family planning
- Transportation
- Housing
- Health care and nutrition
- Placement in foster care
- Child care

11. Housing Improvement Services - Services to help with:

- Home repairs and maintenance.
- Working out problems with landlords or neighbors.
- Getting help from local housing or legal aid agencies.
- Finding a place to stay, if necessary.

12. Home Management Services - Services to help with learning about budgets, fixing good meals, caring for children, health care, and home care.

13. Housekeeper/Chore Services - Services to help with chores such as shopping, light housework, simple repairs and errands when you, or a child or adult's caretaker is ill, disabled or absent.

14. Homemaker Services - Services to help with personal care, home management and household tasks from a trained homemaker when you, or a child or adult's caretaker is ill, disabled or absent.

15. Other Services you may be able to get:

- Education services
- Employment services
- Family planning services
- Health-related services
- Social group services for senior citizens
- Transportation services

Q. What If I Need Emergency Services?

A. The following are some services you can get to help you with your emergency. If you live **outside** of New York City, your local department of social services may be able to give other kinds of help.

If you live **in** New York City, call or visit your local Job Center or look for the Human Resources Administration (HRA), or Administration for Children's Services listings in the Government pages of the telephone book for your borough. Call the number listed for the type of help you need.

There is no income limit to get these services.

- **Child Protection** - Services given to children under the age of 18 who are abused or maltreated, and to their families.
- **Adult Protection** - Services given to persons 18 years of age or older who are physically or mentally ill, disabled and have been harmed or may be at risk of harm, and cannot protect themselves, and have no one who is able and willing to help them.
- **Domestic Violence (Physical or Emotional Abuse or Threat of Abuse)** - Services given to wives, husbands or other household members, with or without children, to help them with problems of violence or the threat of violence.

OTHER BENEFITS

SECTION G

1. Supplemental Security Income - SSI - If you are certified blind, certified disabled or age 65 or older and your income and resources are below certain limits, you may be able to get money from the Supplemental Security Income Program. You can apply for Supplemental Security Income at your nearest **Social Security Office**. Most people who get Supplemental Security Income also get Medical Assistance.

2. Interim Assistance -You may be able to get money called Interim Assistance through the **Family Assistance/ Safety Net Assistance programs** if:

- You have applied for Supplemental Security Income- SSI, but your application has not been approved or denied.
- You are appealing a suspension of your Supplemental Security Income-SSI.
- Your Supplemental Security Income-SSI has been stopped.

This Interim Assistance will stop once you start getting your SSI or when your SSI is reinstated. Your initial SSI check(s) will be sent to your local department of social services to pay back the amount of Interim Assistance money you received. If you live **outside** of New York City, you may apply for Interim Assistance at your local department of social services. If you live in New York City, call or visit your local Income Support/Job Center.

3. **Child Support Enforcement Program** - The Child Support Enforcement Program can help you get child support, from anyone who should legally be paying it. While most applicants/recipients of Temporary Assistance and Medical Assistance must cooperate with the Child Support Enforcement Program requirements, the program is available, upon application, to people who do not get Temporary Assistance or Medical Assistance.

Your local Child Support Enforcement Unit will help to:

- Find non-custodial parents
- Legally prove who is the father of a child who is born out-of-wedlock
- Set up child support orders
- Enforce child support orders if a responsible parent does not pay
- Collect and pay out child support

4. **Earned Income Credit** - If you are working or worked last year, you may be able to get additional money from the State and Federal Earned Income Credits (EIC). In order to get these credits, you must file tax returns even if you do not owe any taxes. To get the federal EIC, you must file a federal income tax return using either the 1040 or 1040A form and the form Schedule EIC (only workers who are not raising children may use form 1040EZ to claim the Federal EIC). To get the State EIC, you must file a State income tax return and the State form IT-215.

If your tax returns show you earned enough to owe income tax to the State and /or Federal government, the respective tax agency will send you a check for the Earned Income Credit. If your tax returns show you earned too little to owe income tax to the State and/or Federal government, the Earned Income Credit reduces the amount of income tax you must pay.

If you are eligible for the EIC and you would like the money spread out over the whole year (advance payments) and get a reduced EIC at the end of the year, ask for a "W-5" form from your employer, fill it out and return it to your employer.

5. **Home Energy Assistance Program (HEAP)** - The Home Energy Assistance Program can help you with heating and utility costs and certain essential heating equipment repairs. You may be able to get Home Energy Assistance if:

- You receive Temporary Assistance
- You receive Food Stamp Benefits
- You receive Supplemental Security Income -SSI
- Your income is at or below current guidelines
- You live in subsidized housing and pay directly for heating costs

YOU DO NOT NEED TO HAVE A HEATING OR UTILITY EMERGENCY IN ORDER TO GET HEAP.

6. **Grants of Assistance to Guide Dogs** - If you are able to get Supplemental Security Income and use a guide dog, you may be able to get money to buy food for your dog. If you live **outside** of New York City, you can apply for this money at your local department of social services. If you live **in** New York City, call or visit your local Job Center.
7. **LifeLine** - If your income is low, you may be able to get a telephone discount service called LifeLine for a little more than \$1.00 a month. You may be able to get LifeLine if you get:

- Temporary Assistance
- Medical Assistance
- Food Stamp Benefits
- Home Energy Assistance
- Supplemental Security Income-SSI

For information on LifeLine, call Verizon telephone, toll free, at **1-800-555-5000**.

8. **WIC** (The Special Supplemental Program For Women, Infants and Children) - If you have little or no income, are pregnant, breastfeeding or have children up to age 5, and are at nutritional risk, the **WIC Program** may be able to help you. The WIC Program provides helpful information about nutrition and the importance of eating healthy foods. The WIC Program provides checks which can be exchanged in participating stores for infant formula, milk, juice, eggs, cheese, cereal, peanut butter, dry peas and beans.

For more information about the **WIC Program** and where you can apply, call **1-800-522-5006**.

9. **Burial** -The local department of social services provides for burial when a Temporary Assistance recipient or other poor person dies leaving no funds or insurance sufficient to pay the burial cost, and there are no relatives, friends or other persons liable or willing to take responsibility for the burial expense. This is true only if the county limit for the cost of the burial is not exceeded.

Sometimes relatives and friends make burial arrangements for a poor person. They might be eligible for some reimbursement, provided that no more has been spent on the burial than the county allows.

Application may be made for burial or for limited burial reimbursement at the burial unit or resource unit of your local department of social services. Contact that agency to find out where you should apply and what the limit is on the length of time you have to apply.

Do not make arrangements with a funeral director until you find out the county limit on how much may be spent on a Welfare burial.

10. Voter Registration - You have a right to obtain an application for voter registration, to receive assistance in filling out that application, and to file that application for forwarding to the appropriate local board of election at any government office accepting applications for benefits described in this book.

11. Recommended Childhood Immunization Schedule

IF YOU HAVE A CHILD 5 YEARS OF AGE OR LESS IT IS IMPORTANT THAT YOU KNOW ABOUT IMMUNIZATIONS.

IMMUNIZATIONS

SECTION H

Immunizations have reduced, and in some cases, eliminated, many diseases that routinely killed or harmed many infants, children, and adults. However, the viruses and bacteria that cause preventable disease and death still exist and can be passed on to people who are **not protected by immunizations**. Immunizations are the single most important way parents can protect their children against the following childhood diseases:

- Diphtheria
- Haemophilus influenza type b (Hib)
- Hepatitis A
- Hepatitis B
- Measles
- Mumps
- Pertussis (whooping cough)
- Rubella (German measles)
- Tetanus (lockjaw)
- Varicella (chicken pox)

GETTING BENEFITS WITH ELECTRONIC BENEFIT TRANSFER (EBT)

SECTION I

Q. What is EBT?

A. EBT is Electronic Benefit Transfer. This refers to the method by which your Temporary Assistance and/or Food Stamp Benefits are issued to you. In the past, benefits were received by picking up Cash and Food Stamp coupons. Under the Electronic Benefit Transfer (EBT) Program, recipients will have accounts set up for Food Stamp Benefits and/or Temporary Assistance. These benefits are electronically transferred into accounts on your benefit availability dates.

Q. How do I access my benefits?

A. You will receive a Common Benefit Identification Card (CBIC) that you will use to access your Temporary Assistance, Food Stamp Benefits and Medical Assistance Benefits. The Common Benefit Identification Card (CBIC) may be used:

- To get cash at Automated Teller Machines (ATM's) that display the QUEST logo
- To buy food at any store where the QUEST logo and food symbol are displayed
- To purchase food and get cash at any store where the Quest logo, food symbol and dollar sign are displayed
- To access medical benefits

You will receive receipts for all of your Cash and Food transactions. These receipts will show the amount of the transaction and the balance remaining in your Cash or Food account.

Q. What is a PIN?

A. PIN stands for Personal Identification Number (PIN). Your PIN is a 4-digit number that was either assigned to you or that you chose. Your PIN is equal to your *electronic signature* and should always be kept a secret. **Remember** - if someone has your Common Benefit Identification Card (CBIC) and knows your PIN they can access ALL of your benefits. These benefits will NOT be replaced. It is YOUR responsibility to keep your card safe and your PIN secret. You may change your PIN at any time.

NOTE: When your Common Benefit Identification Card (CBIC) is replaced you can continue to use the same Personal Identification Number (PIN).

Q. How can I change my Personal Identification Number (PIN)?

A. You have **two** options:

- Call Customer Service at **1-888-328-6399**.
- Go to your local county department of social services (DSS) and choose a new Personal Identification Number (PIN).

Q. How does the card work?

A. The front of the card contains your name and a 19-digit card number.

The back of the card has a **1-888-328-6399** Customer Service Number. Also on the back of the card is a black magnetic stripe. You will slide your card through the groove in the ATM or Point of Sale (POS) device. The machine “reads” information coded into the magnetic stripe on the back of your card. Sliding your card through the groove is what is called a “swipe”. A swipe initiates a transaction to your account. For a transaction to be completed your Personal Identification Number (PIN) must be entered.

Q. When should I contact my worker about my benefits?

A. You should contact your local county department of social services (DSS) worker regarding the following questions or problems:

- For replacement of a lost, damaged or stolen Common Benefit Identification Card (CBIC), (after you have called Customer Service).
- Questions about an Authorized Representative (a person other than yourself who is able to access your benefits with your permission).
- Questions related to your Food Stamp or Cash Benefits such as: the schedule on which you receive your benefits, the amount of your benefits that were authorized to your accounts or changes in your circumstances that would affect your benefits.

Q. Do I have to use my benefits all at once?

A. No, the benefits in your Cash and Food Stamp Benefits accounts can carry over from month to month. However, if you do not use your cash account for a period of 90 consecutive days, the remaining benefits in your cash account will be expunged and returned to the agency.

You may request your worker to reissue expunged cash benefits to you. Also, once a Food Stamp Benefits becomes available in your food account, it must be used within 270 days of when it became available. Food Stamp Benefits that are 270 days old or older will be removed from the account (expunged) and cannot be reissued.

Q. Are there charges for using my Common Benefit Identification Card (CBIC)?

A. You may use your card at a Point of Sale (POS) device in a QUEST participating store to make purchases from your Cash and Food accounts, at no charge. If you are getting cash from an ATM machine, you may withdraw money four times during each month without having to pay a transaction fee. After the four free uses, there will be an 85¢ transaction fee taken from your cash account every time you use an ATM to withdraw cash for the rest of that month. In addition, some ATMs and Point of Sale devices impose a surcharge per transaction to withdraw cash. The cost to use the ATM or Point of Sale (POS) device should be clearly posted. To find locations of ATMs and Point of Sale (POS) devices that do not surcharge in your area, you may call the Electronic Benefit Transfer (EBT) Locator Service toll free at **1-800-289-6739**.

There is never a charge to access your Food Stamp Benefits or Medical Benefits with your Common Benefit Identification Card (CBIC).

Q. Will I be able to get any change back from my Food Stamp Benefits account?

A. No, your Food Stamp Benefits account may only be used to purchase eligible food items at participating stores. No cash will be issued as a result of a Food Stamp Benefits account transaction.

Q. What is Electronic Benefit Transfer (EBT) Customer Service? What questions or problems can they help me with?

A. You may call Customer Service at **1-888-328-6399**, 24 hours a day/7 days a week, if you have a question or a problem concerning getting your benefits with EBT. People with disabilities may use the following relay center numbers: TTY users **1-800-662-1220**; Non TTY users **1-800-421-1220**; and VCO users **1-877-826-6977**. The Customer Service Representative can help you with many questions, including the following examples:

Q. What should I do if my Common Benefit Identification Card (CBIC) is lost, stolen or does not work?

A. Immediately, telephone Customer Service at **1-888-328-6399** and they will void your lost or stolen card. To replace the card you must contact your local county department of social services.

Q. How can I find out how much Cash or Food Stamp Benefits I have in my accounts? How can I find out where and when I spent my benefits?

A. Call Customer Service at **1-888-328-6399** and the Automated Response Unit (ARU) will provide answers to your questions regarding account transactions and balances.

When using the Automated Response Unit (ARU), be prepared to provide your 19-digit card number found on the front of your Common Benefit Identification Card (CBIC).

Q. What should be done if I think the account balance on the last receipt is wrong?

A. Contact Customer Service and compare your last several receipts to the information provided regarding your past account record.

Any differences between the account record and your receipts should be reported to a Customer Service representative at **1-888-328-6399** so that a claim may be investigated. With regard to Food Stamp Benefits account claims, your claim will be investigated and resolved within 10 business days from the date you filed the claim with Customer Services.

A claim number will be given to you. Remember to write this claim number down because it will be needed when you telephone customer service to check on the progress of the claim.

A claim investigation can take up to 30 days from the day you report your claim to Electronic Benefit Transfer (EBT) Customer Service. For your Food Stamp Benefits account, a claim can be taken only if you report it within 90 days of the date of the transaction that you want investigated.

Q. Can I get a written record of my account?

A. Yes, Customer Service will provide the last ten transactions from either your Food Stamp Benefits or your Cash account. You may also request that a Customer Service Representative mail a report of the last two months of transactions to your home.

Q. How can I find the location of ATMs and retailer Point of Sale (POS) devices that do not surcharge to withdraw cash?

A. This information is also available from your local department of social services office, or through the Internet at <http://www.otda.state.ny.us/ebt/zips>.

Q. What is a “retailer adjustment”?

A. When you buy food with your Food Stamp Benefits account, but a computer error happens and your account isn't charged, the store can ask Customer Service to investigate their claim. If the investigation shows that the store didn't get paid from your account, your account will be charged to pay the store for the food you bought. This is called a **retailer adjustment**. When a **retailer adjustment** happens, you will get a notice.

Q. Can the State make an adjustment to my cash and/or Food Stamp Benefits accounts?

A. If, as a result of an error in the benefits issuance process your account is unjustly enriched with a benefit to which you are not entitled, the State may adjust your account to correct the situation.

Q. Can I continue to access my account(s) after my case is closed?

A. Yes, your card will remain active and you will be able to access your account(s) as long as there are benefits remaining in the account(s).