Restaurant Meals Program Notice of Eligibility Decision

NOTICE DATE:				NAME AND ADDRESS OF AGENCY/CENTER OR DISTRICT OFFICE:		
CA	SE NUMBER:	CIN:				
CASE NAME (And C/O Name if Present) AND ADDRESS			GENERAL TELEPHONE NO. FOR QUESTIONS OR HELP			
				OR Age	ncy Conference	
			Fair Hearing Information And assistance			
			Record Access			
				Leg	al Assistance Information	
OF	FICE NO.	UNIT NO.	WORKE	R NO.	UNIT OR WORKER NAME	TELEPHONE NO.
ACTION TAKEN: Your Supplemental Nutrition Assistance Program (SNAP) case was reviewed to determine your household's eligibility to participate in the Restaurant Meals Program (RMP). It has been determined that your SNAP household is:						
	ELIGIBLE. Your SM	NAP household is eligi	ble to par	ticipate in the	RMP.	
	The RMP allows households where all members are either elderly (age 60 or older) or disabled (receives disability or blindness payments or receives disability retirement benefits from a governmental agency because of a disability considered permanent), or the spouse of someone who is elderly or disabled, and for households that are homeless, to use their SNAP benefits to purchase prepared meals at certain restaurants. Since your household meets the eligibility criteria to participate, your household has been included in the RMP. If there is a change in your household's circumstances and a member of your SNAP household is no longer considered elderly or disabled, your household is no longer homeless, or your SNAP case closes, your household will no longer be included in the RMP and you will not be able to use your SNAP benefits to purchase prepared meals at participating restaurants.					
	Please check your household's food benefit balance by calling 1-888-328-6399 or visiting <u>www.ConnectEBT.com</u> to ensure you have sufficient funds in your SNAP EBT account prior to purchasing prepared meals at participating restaurants. Once logged into your ConnectEBT account, check the "Cardholder Info" section which must display "Restaurant Meal Program Eligible" to confirm that your EBT card can be used at participating restaurants. If you attempt to purchase a prepared meal and do not have sufficient funds, you will still be responsible for covering the cost of your meal with funds other than SNAP benefits. For a current list of participating restaurants where you may use your SNAP benefits to purchase prepared meals, visit <u>https://otda.ny.gov/rmp</u> .					
	INELIGIBLE . Your SNAP household is ineligible to participate in the RMP.					
	RMP, all members blindness payments	is is because your household does not meet the eligibility criteria to participate in the RMP. To be eligible for th IP, all members of your household must be either elderly (age 60 or older) or disabled (receives disability or indness payments or receives disability retirement benefits from a governmental agency because of a disability insidered permanent), the spouse of someone who is elderly or disabled, or your household must be homeless.				
	you are no longer e	his does not mean that you cannot use your SNAP benefits. You may continue to use your SNAP benefits, but ou are no longer eligible to use them at participating restaurants. If you attempt to purchase a prepared meal at a estaurant, you will be responsible for covering the cost of your meal with funds other than SNAP benefits.				
	-	The above decision is ba	sed on Nev	w York State reg	gulations at 18 NYCRR 387.16	

BE SURE TO READ THE BACK OF THIS NOTICE FOR YOUR RIGHTS ON HOW TO APPEAL THIS DECISION.

LDSS-5230 (Rev. 10/23)

NAME	ADDRESS:	CASE NUMBER:

CONFERENCE AND FAIR HEARING SECTION - DO YOU THINK WE ARE WRONG?

If you think our decision was wrong, you can ask for a review of our decision. We will correct our mistakes. You can do both 1 and 2:

1. Ask for a meeting (conference) with one of our supervisors; 2. Ask for a State fair hearing with a State hearing officer.

The Office of Temporary and Disability Assistance (OTDA) policy issuances and manuals are posted on the OTDA website at otda.ny.gov/legal. These issuances and manuals are available to you or your representative to determine whether a fair hearing should be requested or to prepare for a fair hearing. In addition, upon request to your local social services district, specific OTDA policy issuances and manuals will also be available to assist you or your representative.

1. CONFERENCE (informal meeting with us) – If you think our decision was wrong, or if you do not understand our decision, please call us to set up a meeting. To do this, call the conference phone number on the **front** of this notice **or** write to us at the address on the **front** of this notice. Sometimes this is the fastest way to solve any problem you may have. We encourage you to do this even when you have asked for a fair hearing.

2. STATE FAIR HEARING - You have 90 days from the date of this notice to ask for a fair hearing.

HOW TO ASK FOR A FAIR HEARING: You can ask for a fair hearing by:

<u>Mail</u>: Send a copy of the entire notice *completed* to the Office of Administrative Hearings, New York State Office of Temporary and Disability Assistance, P.O. Box 1930, Albany, New York 12201. Please keep a copy for yourself.

□ I want a fair hearing. I do not agree with the agency's action. (You may explain why you disagree below, but you do not have to include a written explanation.)_____

Phone: 800-342-3334 (PLEASE HAVE THIS NOTICE WITH YOU WHEN YOU CALL.)

Fax: Fax a copy of the front and reverse of this notice to: (518) 473-6735 or

<u>Online</u>: Complete an online request form at: http://www.otda.ny.gov/oah/forms.asp.

If you cannot reach the New York State Office of Temporary and Disability Assistance by phone, fax or on-line, please write to ask for a fair hearing before the deadline.

WHAT TO EXPECT AT A FAIR HEARING: The State will send you a notice that tells you when and where the fair hearing will be held.

At the hearing, you will have a chance to explain why you think our decision is wrong. You can bring a lawyer, a relative, a friend or someone else to help you do this. If you cannot come yourself, you can send someone to represent you. If you are sending someone who is not a lawyer to the hearing instead of you, you must give this person a letter to show the hearing officer that you want this person to represent you at the hearing. At the hearing, you and your lawyer or other representative will have a chance to explain why we are wrong and a chance to give the hearing officer written papers that explain why we are wrong. To help you explain at the hearing why you think we are wrong, you should bring any witnesses who can help you. You should also bring any papers you have, such as: pay stubs, leases, receipts, bills, doctor's statements. At the hearing, you and your lawyer or other representative can ask questions of witnesses which we bring or which you bring to help your case.

LEGAL ASSISTANCE: If you think you need a lawyer to help you with this problem, you may be able to get a lawyer at no cost to you by contacting your local Legal Aid Society or other legal advocate group. For the names of other lawyers, check your Yellow Pages under "Lawyers".

ACCESS TO YOUR FILE AND COPIES OF DOCUMENTS: To help get ready for the hearing, you have a right to look at your case file. If you call or write us, we will provide you with free copies of the documents from your file that we will give to the hearing officer at the fair hearing. Also, if you call or write us, we will provide you with free copies of other documents from your file that you think you may need to prepare for your fair hearing. To ask for documents or to find out how to look at your file, call us at the Record Access phone number on the **front** of this notice or write to us at the address on the **front** of this notice.

If you want copies of documents from your case file, you should ask for them ahead of time. They will be provided to you within a reasonable time before the date of the hearing. Documents will be mailed to you only if you specifically ask that they be mailed.

INFORMATION: If you want more information about your case, how to ask for a fair hearing, how to see your file, or how to get additional copies of documents, call us at the phone numbers on the **front** of this notice or write to us at the address on the **front** of this notice.