# Health and Human Services

## **Legal Information**

## You Have the Right to Appeal

An appeal is a request for a hearing regarding a decision made by the Department. You can appeal in person, by telephone, or in writing for SNAP and FIP. To appeal in writing, you must do **one** of the following:

- Complete an appeal electronically at https://hhs.iowa.gov/appeal, or
- Write a letter telling us why you think a decision is wrong, or
- Fill out an Appeal and Request for Hearing form. You can get this form at your county HHS office.

Send or take your appeal to the Department of Health and Human Services, Appeals Section, 321 E. 12<sup>th</sup> St., Des Moines, IA 50319-0114. If you need help filing an appeal, ask your county HHS office. You can represent yourself. Or, you can have a friend, relative, lawyer, or someone else act on your behalf. You may contact your county HHS office about legal services. You may have to pay for these legal services. If you do, your payment will be based on your income. You may also call Iowa Legal Aid at (800) 532-1275. If you live in Polk County, call (515) 243-1193.

## You Will Not Be Discriminated Against

It is the policy of the lowa Department of Health and Human Services (HHS) to provide equal treatment in employment and provision of services to applicants, employees and clients without regard to race, color, national origin, sex, sexual orientation, gender identity, religion, age, disability, political belief or veteran status.

If you feel HHS has discriminated against or harassed you, please send a letter detailing your complaint to: lowa Department of Health and Human Services, Bureau of Human Resources, 321 E. 12<sup>th</sup> St., Des Moines, IA 50319-0114 or via email inclusion@dhs.state.ia.us

#### **SNAP**

In accordance with federal civil rights law and U.S. Department of Agriculture (USDA) civil rights regulations and policies, this institution is prohibited from discriminating on the basis of race, color, national origin, sex (including gender identity and sexual orientation), religious creed, disability, age, political beliefs, or reprisal or retaliation for prior civil rights activity.

Program information may be made available in languages other than English. Persons with disabilities who require alternative means of communication to obtain program information (e.g. Braille, large print, audiotape, American Sign Language), should contact the agency (state or local) where they applied for benefits. Individuals who are deaf, hard of hearing or have speech disabilities may contact USDA through the Federal Relay Service at (800) 877-8339.

To file a program discrimination complaint, a Complainant should complete a Form AD-3027, USDA Program Discrimination Complaint Form which can be obtained online at:

https://www.usda.gov/sites/default/files/documents/ad-3027.pdf, from any USDA office, by calling (833) 620-1071, or by writing a letter addressed to USDA. The letter must contain the complainant's name, address, telephone number, and a written description of the alleged discriminatory action in sufficient detail to inform the Assistant Secretary for Civil Rights (ASCR) about the nature and date of an alleged civil rights violation. The completed AD-3027 form or letter must be submitted to:

#### I. mail:

Food and Nutrition Service, USDA 1320 Braddock Place, Room 334 Alexandria. VA 22314: or

#### 2 fax

(833) 256-1665 or (202) 690-7442; or

#### 3 email

FNSCIVILRIGHTSCOMPLAINTS@usda.gov

This institution is an equal opportunity provider.

Do Not Mail Applications to the Above Address

## SNAP, FIP, and RCA

#### We Check What You Tell Us

The information you give us may be checked by federal, state, and local officials to make sure it is true. Things we might check are any listed person's: social security number, job and pay, bank account amount, amounts received from other sources like Social Security or unemployment, and alien status. If any information you give us is not correct, we may deny your application.

We may check records from other states to see if any person in your household can get benefits in lowa. This may be because a person was disqualified from a program in another state.

We check and use computer systems like the state Income and Eligibility Verification System. If something you told us is different from what the computer system tells us, we will check to find out what is correct. We might check your information by contacting your employer, your bank, or other people. Such information may affect your household's eligibility and level of benefits.

### Things You Need to Know

- HHS may give your answers to law enforcement officials to catch persons fleeing to avoid the law.
- The Quality Control unit or Investigations unit may review your case. They may contact other people or
  organizations to get proof of your information. By signing this application, you give permission to release
  confidential information to the Quality Control unit or Investigations unit. You must cooperate with Quality
  Control and Investigations to keep your FIP benefits. You must cooperate with Quality Control to keep your
  SNAP benefits.
- We will use the information you give us to determine what assistance you are eligible to receive.
- You will have to pay back any benefits you got or that was paid to a third party on your behalf for which you were not eligible.
- Section 1128B of the Social Security Act provides federal penalties for fraudulent acts and false reporting in connection with these programs.
- Anyone who gets, tries to get, or helps any other person get assistance to which they are not entitled, is guilty
  of violating the laws of the state of lowa. This includes, but is not limited to, lowa Code Chapters 239B, 243,
  249, and 249A.
- Your expenses may be used to figure the amount of assistance you get. You may have expenses included in your benefit calculation by reporting and giving proof of your expenses. If you do not report or give proof of your expenses, you choose not to claim the expense. You can report and give proof later, and the expense can be used for future months.

#### You also have the right to:

- Have someone help you complete the application.
- Have all of your questions answered.
- Get information about programs you applied for and any other HHS programs you may be able to get.
- Be sent a notice if you are eligible and when your benefits change or stop.
- Have information about you and your family kept private.

## To report a change

- Call: I-877-347-5678 Monday Friday 7:00 a.m. to 6:00 p.m., excluding state holidays
- Email: <u>IMCSC@dhs.state</u>.ia.us

#### **SNAP Only**

Follow these Rules of the SNAP Program:

- **Don't** hide or give wrong information on purpose to get SNAP benefits.
- **Don't** use SNAP benefits to buy non-food items like alcohol or tobacco.
- **Don't** trade, sell, or give away SNAP benefits.
- Don't use someone else's SNAP benefits for yourself.

- Don't purchase a product with SNAP benefits that has a container requiring a return deposit with the intent of
  obtaining cash by intentionally discarding the product and intentionally returning the container for the deposit
  amount.
- Don't buy food on credit and attempt to pay for it with SNAP.
- **Don't** buy a product with SNAP benefits so you can get cash or something other than eligible food by reselling that product.
- Don't fail to report if your household goes over its income limit.

If you get SNAP, your worker will tell you what your household's income limit is. If your household's income goes over your limit, or if anyone in your household receives lottery or gambling winnings of \$4,250 or more in any month, you must tell us by the 10th day of the next month. If you don't tell us on time, you might have to pay back the benefits.

## Penalties of the SNAP Program. Anyone who breaks the above rules:

- May not get SNAP benefits for one year for the first time, two years for the second time, and forever for the third time;
- May be fined up to \$250,000 or jailed up to 20 years or both; and may also be subject to prosecution under other applicable Federal and State laws.
- May be kept off SNAP for an additional 18 months, if court ordered.
- If a court finds you guilty of trading SNAP benefits for firearms, ammunition, or explosives, you will lose benefits forever.
- If a court finds you guilty of buying, selling, or trading more than \$500 in SNAP benefits, you will lose benefits forever.
- If a court finds you guilty of trading SNAP benefits for controlled substances, you will lose benefits for two years the first time and forever the second time.
- You will not get SNAP for 10 years if you are found guilty of getting or trying to get SNAP in more than one household at a time. This penalty happens if you give wrong information about who you are or where you live.

Giving wrong information on purpose may result in us taking legal action against you, either criminal or civil. It might also mean we reduce your benefits or take money back from you.

#### Things You Need to Know

- If you have a SNAP overpayment, HHS will give your answers to federal and state agencies as well as private claims collection agencies, to collect the overpayment.
- The SNAP office may contact other people or organizations to get proof of your information.
- The application filing date is different if your household is in an institution and applying for SNAP and Supplemental Security Income at the same time. In this case, the filing date is the date of release from the institution.
- For information regarding services provided for Healthy Marriages contact your local office.
- You may not be denied SNAP benefits just because you were denied benefits from other programs. SNAP applications will not be delayed due to requirements of other programs you may apply for.
- By having signed this application, you agree that all members of your household will register for work and follow all of the work and training rules.
- To see what employment and training opportunities are available, please visit:
  - SNAP Employment & Training (E&T) Program by phone (515) 281-3131, online at: <a href="https://workforce.iowa.gov/jobs/worker-programs/snap">https://workforce.iowa.gov/jobs/worker-programs/snap</a> or your local lowaWorks Center at <a href="https://workforce.iowa.gov/contact">https://workforce.iowa.gov/contact</a>
  - United Way 211
- The collection of information on the application, including the social security number of each household member, is authorized under the Food and Nutrition Act of 2008 (formerly the Food Stamp Act of 1977), as amended, 7 U.S.C. 2011-2036. The information will be used to determine whether your household is eligible or continues to be eligible to participate in the SNAP program. We will verify this information through computer matching programs. This information will also be used to monitor compliance with program regulations and for program management.

 A household consisting of only Supplemental Security Income (SSI) applicants or recipients is entitled to apply for SNAP recertification at a Social Security Administration office.

### FIP or Refugee Cash Assistance (RCA) Only

Within 10 days of the date the change happens, you must tell HHS about changes, such as:

- Income, when it starts or stops, including getting an inheritance or a one-time payment of past due child support
- Resources or assets
- Someone moving in or out of your home
- Mailing or living address
- Receipt of a SSN
- Change of school attendance of a child

If you receive FIP or Refugee Cash Assistance benefits, your SNAP may go down or stop.

Unless exempt, all members of your household must cooperate with the Family Investment Agreement (FIA) you signed with PROMISE JOBS. Talk with your worker if you feel you have a reason not to cooperate. If you choose not to participate in your FIA with PROMISE JOBS, your FIP benefits will stop.

You must cooperate with the Child Support Recovery Unit. While you get FIP, you give up your rights to child support for the months you are on FIP. The state of Iowa will keep your child support to pay back the money you get from FIP.

# Using Your FIP/RCA Electronic Access Card (EAC) or Your Debit Card to Access FIP/RCA Funds from Your Personal Bank Account

You cannot access your cash benefits with your EAC or personal debit card at a:

- Liquor store or any place that mainly sells liquor,
- Casino or other gambling or gaming establishment, or
- Business which provides adult-oriented entertainment in which performers disrobe or perform in an unclothed state (such as a strip club).

This includes these types of businesses located in lowa, on tribal land, or in any other state. If HHS determines that you have accessed your cash benefits with your EAC or personal debit card at one of the above places you:

- Will have committed fraud.
- Have to repay the amount of cash accessed at the location, as well as any access fees, and
- Your family will not get cash benefits for three months with the first misuse and six months for each additional misuse.

By having signed this application, you agree that no member of your household will use the EAC or your personal debit card to access FIP/RCA funds at prohibited locations.

#### Additional responsibilities:

You must:

- Apply for and accept any benefits that you may be able to get.
- Give us information and provide proof when we ask for it.
- Fill out review forms when you are asked to.

## Penalty for Getting FIP in More Than One State

You will not get FIP for 10 years if you are found guilty of getting or trying to get FIP in more than one state at a time. This penalty happens if you give wrong information about where you live.