

CALFRESH (CF) PROGRAM REQUEST FOR POLICY/REGULATION INTERPRETATION

INSTRUCTIONS: Complete items 1 - 10 on the form. Use a separate form for each policy interpretation request. If additional space is needed, please use the second page. Be sure to identify the additional discussion with the appropriate number and heading. Retain a copy of the CF 24 for your records.

- Questions from counties, including county Quality Control, must be submitted by the county CalFresh Coordinator and may be submitted directly to the CalFresh Policy analyst assigned responsibility for the county, with a copy directed to the appropriate CalFresh Policy unit manager.
- Questions from Administrative Law Judges may be submitted directly to the CalFresh Policy analyst assigned responsibility to the county where the hearing took place, with a copy of the form directed to the appropriate CalFresh Bureau unit manager.

1. RESPONSE NEEDED DUE TO: <input checked="" type="checkbox"/> Policy/Regulation Interpretation <input type="checkbox"/> QC <input type="checkbox"/> Fair Hearing <input type="checkbox"/> Other:		5. DATE OF REQUEST: October 17, 2014	NEED RESPONSE BY: ASAP
2. REQUESTOR NAME: Deanna Helenihi		6. COUNTY/ORGANIZATION: County of San Diego	
3. PHONE NO.: 619-338-2726		7. SUBJECT: Break in Aid/Participation	
4. REGULATION CITE(S): MPP 63-102.1(8A-C)		8. REFERENCES: <i>(Include ACL/ACIN, court cases, etc. in references)</i> NOTE: All requests must have a regulation cite(s) and/or a reference(s). ACIN I-33-14, MPP 63-102.1(8)	
9. QUESTION: (INCLUDE SCENARIO IF NEEDED FOR CLARITY):			

ACIN I-33-14 (page 3 Example 1) states "The CWD discovers (calculates) an AE overissuance of \$102 for a CalFresh SAR HH during June. This HH is set to discontinue at the end of June due to non-receipt of the SAR 7. Since the HH will be discontinued before the establishment of the AE overissuance and the AE overissuance is less than \$125, the CWD will not establish the AE overissuance. However, the HH turns in a completed SAR 7 on July 6th with good cause and benefits are issued for the complete month of July. The CWD will begin the establishment process for the \$102 AE overissuance. If the discontinuance remains effective or the HH's eligibility is restored in July, the HH experienced a break in aid and the CWD will not begin the establishment process for the previously discovered \$102 AE overissuance.

My question is, why would a restoration of benefits be considered a break in aid if they get benefits in June and July?

10. REQUESTOR'S PROPOSED ANSWER:	
All the references to "breaks in aid" have a one month time limit (MPP 63-102.1(8A), 63-102.1(8B) and 63-102.1(8C)). MPP63-102.1(8A2) even states that less than 1 month would be considered continuous participation.	
Since in this example the case is restored in the next month, just with prorated benefits, it wouldn't be considered a break in aid and the overissuance of \$102 would be established.	
11. STATE POLICY RESPONSE (CFPB USE ONLY):	
In response to your policy question regarding break in aid/participation. ACIN I-33-44 provides that If an AE overissuance that is above \$35 and less than \$125 is discovered for an active CalFresh HH and it has been determined that the HH will be ineligible for CalFresh benefits prior to the establishment of the AE overissuance, the county will not establish a claim for that overissuance. However, if the CalFresh HH's eligibility is reestablished the month following discontinuance (due to either good cause or discontinuance was rescinded) with no break in aid, the previously discovered AE overissuance will be established.	

FOR CDSS USE

DATE RECEIVED: 10/17/14	DATE RESPONDED TO COUNTY/ALJ: 10/23/14 by VM
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**CALFRESH (CF) PROGRAM
REQUEST FOR POLICY/REGULATION INTERPRETATION (Continued)**

1. RESPONSE NEEDED DUE TO: <input type="checkbox"/> Policy/Regulation Interpretation <input type="checkbox"/> QC <input type="checkbox"/> Fair Hearing <input type="checkbox"/> Other:	5. DATE OF REQUEST:	NEED RESPONSE BY:
	6. COUNTY/ORGANIZATION:	
	7. SUBJECT:	
	8. REFERENCES: <i>(Include ACL/ACIN, court cases, etc. in references)</i> NOTE: All requests must have a regulation cite(s) and/or a reference(s).	
2. REQUESTOR NAME:		
3. PHONE NO.:		
4. REGULATION CITE(S):		