

## 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: 6/13/15	NEED RESPONSE BY: 6/19/15
2. REQUESTOR NAME: Marian Acosta	6. COUNTY/ORGANIZATION: Santa Barbara	
3. PHONE NO.: (805) 287-3858	7. SUBJECT: Overpayment for Fleeing Felon	
4. REGULATION CITE(S):	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).  ACL 14-100	

9. QUESTION: (INCLUDE SCENARIO IF NEEDED FOR CLARITY):

If a client was not aware that he had an active warrant for his arrest, would the client be assessed an overpayment for months in which he received benefits if the client states that he was not aware of the warrant?

1) Example applicant: Client applied for CF on 5/13/15 and during the intake interview the client stated that he was not a Fleeing Felon and that he was meeting conditions of Probation/Parole. The worker approved CF benefits and sent a referral to the SIU to confirm the clients status. A response was received from the SIU unit on June 10th. Would May and June benefits be a Client error overpayments if the client states he was not aware that he had a warrant?

2) Example recipient: Worker received a report from SIU on 6/10 mid-period stating that the client had an active warrant. The worker did not look at the report from SIU until 6/23 so was not able to disc the case until 7/31 due to no 10-day. Would the July benefits be considered an Admin overpayment or no overpayment assessed since reports of Fleeing Felon status are not a mandatory mid-period report?

10. REQUESTOR'S PROPOSED ANSWER:

ACL 14-100 states that clients will be eligible to receive CalFresh benefits so long as the individual is compliant with the terms of his or her probation or parole, if applicable, including participation in a government recognized drug treatment program, if required.

1) Even if the client was not aware of the warrant, he must me compliant with the terms of probation or parole, therefore both May and June would be Client error overpayments.

2) The July benefits would be an Admin overpayment due to the information was known to the county but the county acted late.

11. STATE POLICY RESPONSE (CFPB USE ONLY):

1. Federal Register Volume 76 number 161 states that an individual has to be aware of the warrant in order to be considered a fleeing felon, therefore there would be no overissuance for the months of May and June as the client was unaware of the active warrant and was currently meeting conditions of their probation.

2. The State concurs with the proposed response as the information received on 6/10/15 from SIU is considered VUR. If a NOA is issued by the deadline for issuing a 10 day notice, however, there would be no overissuance for the month of July.

### FOR CDSS USE

DATE RECEIVED:	DATE RESPONDED TO COUNTY/ALJ: A.B. 6/19/2015
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**CALFRESH (CF) PROGRAM  
REQUEST FOR POLICY/REGULATION INTERPRETATION (Continued)**

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	6. COUNTY/ORGANIZATION:	
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	8. REFERENCES: <i>(Include ACL/ACIN, court cases, etc. in references)</i> <b>NOTE: All requests must have a regulation cite(s) and/or a reference(s).</b>	
2. REQUESTOR NAME:		
3. PHONE NO.:		
4. REGULATION CITE(S):		