



General Assistance

General Assistance Overview for Santa Clara County Continuum of Care

Presented by Shelby Rogers
JD Advocate for Health, a program of
The Law Foundation of Silicon Valley
October 2023



Law Foundation of Silicon Valley

Our Health Program provides free legal advice and representation to individuals residing in Santa Clara County who identify as having mental health or developmental disabilities and/or who live with HIV or AIDS. We provide legal advice and representation on matters related to Economic Rights and Patient's Rights.

WALK-IN INTAKE HOURS & LOCATION

TUESDAY AND THURSDAY 1:00 PM – 3:00 PM
4 NORTH SECOND STREET, SUITE 1300 (13TH FLOOR)
SAN JOSE, CA 95113

PHONE INTAKE HOURS & NUMBERS

MONDAY – FRIDAY
1:00 PM – 4:00 PM
PHONE: 408-280-2420
FAX: 408-886-3850

What is General Assistance?

Governing Law

W&I Code Section 1700 *et seq.* (3/15 *et seq.*)

“Every county and every city and county shall relieve and support all incompetent, poor, indigent persons, and those incapacitated by age, disease, or accident, lawfully resident therein, when such persons are not supported and relieved by their relatives or friends, by their own means, or by state hospitals or other state or private institutions.”

Santa Clara County General Assistance Handbook

<https://www.sccgov.org/sites/ssa/debs/Pages/policy-general-assistance.aspx>



What is General Assistance?

- County program that provides modest monthly cash grants for adults without children
- Sometimes called General Relief
- Each County sets its own standards
- Benefits can be from \$11 to \$343 per month
 - Monthly benefits based on information given to eligibility worker. Any other income may lower benefit amount.

GA Eligibility

- Resident of Santa Clara County
 - At least 15 days continuous physical presence and intent to remain indefinitely in SCC
 - Don't need an address – many recipients are homeless
- Adults (age 18+) without children (GA is financial assistance for adults without dependent children)
- No other means of support (program of last resort)
- Not eligible for any other cash aid program (like CalWORKs, SSI, SDI, UI, etc.)
- Unemployed, employed but making less than grant level, or unemployable (due to disability)

Where / How to Apply

- You can begin your application in person, over the phone, or online
 - Online: using CalWins: <https://socialservices.sccgov.org/how-do-i/apply-for-benefits> (you will be called and scheduled for an interview after the application is processed)
 - Via phone by calling 758-3800 (you will be called and scheduled for an interview after the application is processed)
 - In person Monday – Friday from 8 am – 5 pm (except for county holidays)

GA OFFICE

1919 Senter Road,
San Jose, CA 95112
(408)758-3100

Or

Benefits Assistance Center

1867 Senter Road, San
Jose, CA 95112

South County Office

379 Tomkins Court
Gilroy, CA 95020 (408)
758-3800

North County Office

1330 W. Middlefield Rd.
Mountain View, CA 94043
(408) 278-2400



Items needed when you apply

- Picture ID/Driver's License (or 2 pieces of ID which have a signature and/or physical description)
- Proof of residence in Santa Clara County (rent receipts, utilities bill, ID)
- Social Security Card or application for Social Security Number
- Proof of Immigration Status or Citizenship (Birth Certificate, Alien Registration Card or Green Card)
- Proof of Property (Bank Statements, car registration, documents that show value of property)
- Proof of income (pay stubs, award letters, documents that show where income came from)
- Proof of Shelter Costs / Expenses (Housing bills, Utility Bills)

Benefit Amount

Maximum Monthly Benefit Level (Effective 04/01/16)

Living Arrangement	GA Grant Amount
One person living alone	\$ 343
One person living with others <i>(Rate based on number of persons sharing)</i>	\$ 257 - \$ 292
Husband and wife living alone	\$ 460
Husband and wife living with others <i>(Rate based on number of persons sharing)</i>	\$ 345 - \$ 391
One person residing in State-licensed Board and Care home <i>(Payment to the home is \$901 and Payment to the client is \$28)</i>	\$ 929

Unhoused Recipients: Access to Full Grant Amount

- For a long time, the County of Santa Clara was not providing unhoused GA recipients the full GA rate of \$343 – due to the fact that unhoused individuals did not have any rent expenses
- After advocacy with the county, the county must:
 - Offer unhoused individuals a shelter or motel bed and, if accepted, can reduce the GA amount accordingly
 - If the unhoused individual declines the bed, and does with a legitimate reason, the unhoused individual is entitled to the full GA rate of \$343
 - Unhoused individual has a support animal and shelter will not allow
 - Unhoused individual has past trauma that is triggered by staying at a shelter or motel



Emergency Support Payments

- Generally, 45 days for determination of eligibility
- But, if you need emergency cash aid and are eligible, the County may make an emergency support payment pending determination of eligibility, not to exceed 25% of the maximum monthly aid the person is entitled to.



Beginning Date of Aid

- Date of Filing – Application for General Assistance and an Identification and Intake Record
- First date on which General Assistance becomes effective.
 - Effective on the earliest of:
 - The date of determination of eligibility;
OR
 - The tenth day following the date of filing a signed application.

Vendor Payment to Landlord

- Applicants may choose to receive their **personal needs** amount and have remainder of maximum GA payment sent directly to landlord, or
- Not to receive their **personal needs** amount and have entire maximum GA payment sent directly to landlord.
 - (Usually, a personal needs amount will be \$147 with the vendor payment)
- Verification of housing costs must be provided.
 - Reported to the Internal Revenue Service (IRS) and the State Franchise Tax Board (FTB) as income to the landlord (W-9 Form)
 - Client's Housing Assistance Statement Form (GA-11)



Staying on General Assistance

- Required to work for monthly benefit, unless deemed unemployable*
 - Must make good faith effort to make 24 contacts every month
 - *Unemployable means you cannot work due to a physical or mental health disability (doctor's letter)
- Must report any changes to income or circumstances to County within 10 days
- Personal Property Allowance
 - Can have up to \$500 maximum in personal property
 - Your car can be valued up to \$4,650

Due Process Requirements

- Notices of Action
- Aid Paid Pending
- Hearings

YOUR HEARING RIGHTS

You have the right to ask for a hearing if you disagree with any county action. You have only 90 days to ask for a hearing. The 90 days started the day after the county gave or mailed you this notice. If you have good cause as to why you were not able to file for a hearing within the 90 days, you may still file for a hearing. If you provide good cause, a hearing may still be scheduled.

If you ask for a hearing before an action on Cash Aid, Medi-Cal, CalFresh, or Child Care takes place:

- Your Cash Aid or Medi-Cal will stay the same while you wait for a hearing.
- Your Child Care Services may stay the same while you wait for a hearing.
- Your CalFresh benefits will stay the same until the hearing or the end of your certification period, whichever is earlier.

If the hearing decision says we are right, you will owe us for any extra Cash Aid, CalFresh or Child Care Services you got. To let us lower or stop your benefits before the hearing, check below:

Yes, lower or stop: Cash Aid CalFresh
 Child Care

While You Wait for a Hearing Decision for:

Welfare to Work:

You do not have to take part in the activities.

You may receive child care payments for employment and for activities approved by the county before this notice.

If we told you your other supportive services payments will stop, you will not get any more payments, even if you go to your activity.

If we told you we will pay your other supportive services, they will be paid in the amount and in the way we told you in this notice.

- To get those supportive services, you must go to the activity the county told you to attend.
- If the amount of supportive services the county pays while you wait for a hearing decision is not enough to allow you to participate, you can stop going to the activity.

Cal-Learn:

- You cannot participate in the Cal-Learn Program if we told you we cannot serve you.
- We will only pay for Cal-Learn supportive services for an approved activity.

OTHER INFORMATION

Medi-Cal Managed Care Plan Members: The action on this notice may stop you from getting services from your managed care health plan. You may wish to contact your health plan membership services if you have questions.

Child and/or Medical Support: The local child support agency will help collect support at no cost even if you are not on cash aid. If they now collect support for you, they will keep doing so unless you tell them in writing to stop. They will send you current support money collected but will keep past due money collected that is owed to the county.

Family Planning: Your welfare office will give you information when you ask for it.

Hearing File: If you ask for a hearing, the State Hearing Division will set up a file. You have the right to see this file before your hearing and to get a copy of the county's written position on your case at least two days before the hearing. The state may give your hearing file to the Welfare Department and the U.S. Departments of Health and Human Services and Agriculture. (W&A Code Sections 10850 and 10950.)

TO ASK FOR A HEARING:

- Fill out this page.
- Make a copy of the front and back of this page for your records. If you ask, your worker will get you a copy of this page.
- Send or take this page to:

OR

- Call toll free: 1-800-952-5253 or for hearing or speech impaired who use TDD, 1-800-952-8349.

To Get Help: You can ask about your hearing rights or for a legal aid referral at the toll-free state phone numbers listed above. You may get free legal help at your local legal aid or welfare rights office.

If you do not want to go to the hearing alone, you can bring a friend or someone with you.

HEARING REQUEST

I want a hearing due to an action by the Welfare Department of _____ County about my:

- Cash Aid CalFresh Medi-Cal
 Other (list) _____

Here's Why: _____

- If you need more space, check here and add a page.
- I need the state to provide me with an interpreter at no cost to me. (A relative or friend cannot interpret for you at the hearing.)

My language or dialect is: _____

NAME OF PERSON WHOSE BENEFITS WERE DENIED, CHANGED OR STOPPED

BIRTH DATE _____ PHONE NUMBER _____

STREET ADDRESS _____

CITY _____ STATE _____ ZIP CODE _____

SIGNATURE _____ DATE _____

NAME OF PERSON COMPLETING THIS FORM _____ PHONE NUMBER _____

- I want the person named below to represent me at this hearing. I give my permission for this person to see my records or go to the hearing for me. (This person can be a friend or relative but cannot interpret for you.)

NAME _____ PHONE NUMBER _____

STREET ADDRESS _____

CITY _____ STATE _____ ZIP CODE _____

Appeals

- Denials, benefits lowered or less than expected, stopped, or overpaid/overissued
- Appeal to Hearing Officer
 - In person: 333 W. Julian Street, San Jose, CA 95110
 - By Mail: California Department of Social Services State Hearings Division, P.O. Box 944243, Mail Station 9-17-37, Sacramento, CA 94244-2430
 - By Fax: (916) 651-5210
 - By Phone: (800) 952-5253 or (800) 952-8349 (TDD)
 - Online: <https://secure.dss.cahwnet.gov/shd/pubintake/>

Appeals cont.

- Appeal deadline = **30 days** from Notice of Action
 - Plus 5 days for mailing
 - Good Cause
- Aid Paid Pending
 - Must request within **7 days** of Notice of Action
- Hearing should be scheduled within 45 days of and a decision should be issued within 90 days

Resolving Issues and Other Tips

- Steps:
 - (1) Get a signed Release of Information
 - (2) Contact Eligibility Worker
 - (3) Contact Supervisor (if unknown, call 408-758-3100)
 - (4) Contact Mariela Moncayo, DEBS SCC SSA Ombudsman at Ombudsman@ssa.sscgov.org
 - (5) Refer for legal assistance

Resolving Issues and Other Tips

- Homeless Individuals
 - May use a mailing address of friend, relative, PO Box (in SCC), or Social Services District Office
- Home visits if applicant unable to come to GA office for initial interview (includes inpatients at VMC)
- Language Access
- Vendor payments and landlord not wanting to fill out W-9s.
 - Client can complete a “Client’s Housing Assistance Statement” (GA-11) and payment will be issued via warrant to landlord.



Common Myths - is GA a loan?

- Effective January 1, 2014, GA benefits received are no longer considered loans.
- Benefits do not have to be paid back to the County, unless:
 - You are eligible and approved for SSI for the months you received GA
 - You were overissued GA benefits



SSI Advocacy Program

- GA recipients who cannot work due to a disability and the disability is expected to last 12 months or more, will be *required* to apply for Supplemental Security Income and/or Retirement, Survivors, Disability Insurance.
- County social workers will assist with appeals and referrals to Social Security attorneys.
- SSI Advocacy Program (408) 793-8876



Non-Citizen Eligibility

- Must be citizen, lawfully admitted permanent resident, or and a non-citizen granted temporary legal residence under the Immigration Reform and Control Act of 1986 or Violence Against Women Act of 1994
- There are separate cash programs for U-Visa Immigrants and Refugees



Cash Assistance Program for Immigrants (CAPI)

- State program providing cash assistance to some elderly or disabled immigrants denied SSI only because of immigration status
- Disability determination is the same as SSI/SSDI
- Must be documented immigrant
- Meet income and asset requirements similar to SSI
- Apply at County Social Services:
 - 1919 Senter Rd, San Jose, (408)271-5500

Interim Assistance Reimbursement (IAR)

- Only when application for SSI or CAPI has been granted.
- If approved for SSI or CAPI
 - Amount of cash aid paid prior to approval will be taken from retroactive SSI/CAPI payment.
 - CAPI
 - Apportionment will be included on the Notice of Action
 - SSI
 - Within 10 days of SSA issuance of benefits
 - Apportionment form
 - Breakdown of the amount retained by the county

Women, Infants, and Children Program (WIC)

Santa Clara County

Joycelyn A. Mendoza, RDN, IBCLC

Monday, October 24, 2023



Santa Clara County
PUBLIC HEALTH



wicworks.ca.gov



Mission:

The WIC Program aims to safeguard the health of low-income women, infants, and children up to age 5 who are at nutrition risk by providing nutritious foods to supplement diets, information on healthy eating, and referrals to health care.



Who does WIC serve?



Pregnant



Breastfeeding



Post-Partum
Women



Infants



Children
under age 5

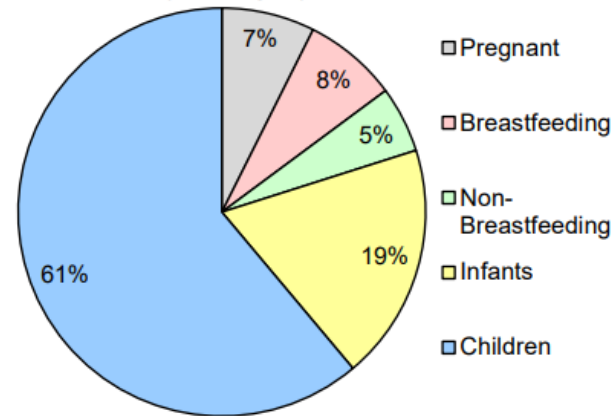


Dads,
grandparents,
foster parent or
other guardian
caring for infants
and children

WIC Participation

- California WIC serves approximately **1 million** participants statewide each month.
- Approximately **60 percent** of all California resident births in a given year are eligible for the WIC Program.

Percentage of CA WIC Participation
by Category: FY 2020-21



Who qualifies for WIC?

- Live in California
- Have low-to-medium income
- Receive Medi-Cal, CalWorks, or CalFresh(SNAP)
 - Recipients automatically considered income-eligible
- WIC does not check immigration status
 - Participating in WIC does not impact a person's immigration status

WIC Services

Breastfeeding



Nutrition



Healthy Foods



Resources





Breastfeeding Support

- Lactation Consultant Services and Breastfeeding Peer Counselor Program
- Breastfeeding support line
 - SCC WIC: (408) 794-0550
 - Nursing Mothers Counsel: (650) 327-6455
**For non-WIC participants*
- Breast pump loans

Gardner and Indian Health WIC do not have Peer Counselors but have IBCLCs on staff.



Healthy Foods:



Example food packages

Breastfeed! Mom & Baby Get More Food

FULLY Breastfeeding

Mom — Up to 1 year	Baby — 6 to 12 months	Baby — 9 to 12 months*

*When your baby is 9 months, you can change to a food package with more fresh fruits and vegetables.

MOSTLY Breastfeeding

Mom — Up to 1 year	Baby — 6 to 12 months	Baby — 9 to 12 months*

*When your baby is 9 months, you can change to a food package with more fresh fruits and vegetables.

SOME/NO Breastfeeding

Mom — Up to 6 months	Baby — 6 to 12 months	Baby — 9 to 12 months*

*When your baby is 9 months, you can change to a food package with more fresh fruits and vegetables.



Example food packages

Child

Here is an example of the foods you can get for your child.



Child

You will receive food and nutrition education until your child's 5th birthday.

Example of foods your child gets:

-
- 16 OZ Cheese
 - 1 DOZ Eggs
 - 36 OZ Breakfast Cereal
 - 1 CTR Dry Beans or Peanut Butter
 - 32 OZ Whole Grains
 - 9 \$\$\$ Fruits and Vegetables
 - 3 GAL Milk (1% Lowfat or Nonfat; Whole fat for age 12-23 months)
 - 128 OZ Juice
 - 32 OZ Yogurt (1% Lowfat or Nonfat; Whole fat for age 12-23 months)
-

Look at your Shopping Guide to find specific brands, sizes, and varieties.



California Department of Public Health, California WIC Program
This institution is an equal opportunity provider.

1-800-852-5770
PILOT 05/13

wicworks.ca.gov



Introducing the California WIC Card!



Convenient, easier, secure



Program Update: Fruits and Vegetables Benefit

The temporary increase to the Fruits and Vegetables Benefit has been extended through September 30, 2024.

The WIC Fruits and Vegetables Benefit now has new inflation-adjusted amounts, effective October 1, 2023.

- **\$26** for children ages 1 to 5
- **\$47** for pregnant and postpartum individuals
- **\$52** for fully and partially breastfeeding individuals
- **\$78** for individuals breastfeeding more than one infant



Use WIC at your local farmers' markets.



Farmers Market Nutrition Program

- Booklets of paper vouchers to purchase **\$30** of fresh produce at California farmer's markets.
- Distribution began on **June 1, 2022**.
- Distributed on a first-come-first-served basis. One booklet per family.
- Can be redeemed from **June to November**.



WIC offers video appointments and classes.



WIC Services during COVID-19

- Appointments are offered by in-person or by phone
- New enrollments are welcome
- Lobbies are open



Making WIC Referrals

Provider's role:

- Complete the request for WIC Program Enrollment.
 1. Provide to patient (preferred)
 2. Email (optional)
 3. Fax (optional)

Patient's role:

- Call or text WIC mainline to schedule an appointment.
 - Walk-ins available



CALIFORNIA
wic
WOMEN, INFANTS & CHILDREN

Request for WIC Program Enrollment
Santa Clara County Public Health Dept.
Main - WIC Office
725 E. Santa Clara Street
San Jose, Ca. 95112
Suite 200

(408) 792 – 5101 Phone
(408) 294 – 6315 Fax

Applicants' Name: _____
If pregnant: **Date of Birth:** _____ **Mother's First Name:** _____

Child's Name: _____ **Date of Birth:** _____
If applicant is NOT child's mother: **Mothers first name:** _____

Address: _____ **Phone:** _____
_____ **Language:** _____

MediCal: N/A **Gross Monthly Income:** _____ **Family Size:** _____

Is this client or another family member receiving WIC? _____

If yes, where? _____ **Date of last WIC visit?** _____

WIC Family ID #: _____ **Source of Health Care:** _____

EDD: _____ **If already delivered, is mom breastfeeding?** _____

Was infant delivered preterm? N/A **If so, how many weeks:** _____ **Birth weight:** _____

If this is a high risk individual or family, please specify high risk conditions: _____

Name of Referring Party: _____
Program/Agency: _____
Address & Phone: _____
Date of Referral: _____

This form is for referral by agency or provider. The WIC Program will provide the client with an appointment, directions to the WIC office and forms to be completed.

This institution is an equal opportunity provider.

WIC Program Use Only:
Date & Time of Enrollment: _____
Version: 7/2017

WIC Materials



CALL US
LLÁMENOS
GOI CHO CHÚNG TÔI

California WIC
WOMEN, INFANTS & CHILDREN
<https://myfamily.wic.ca.gov/>

YOU AND YOUR CHILDREN CAN COUNT ON US
USTED Y SUS NIÑOS PUEDEN CONTAR CON NOSOTROS
BẠN VÀ CON BẠN CÓ THỂ TIN TƯỞNG VÀO CHÚNG TÔI

IF YOU:
 ✓ Are pregnant or a new mom
 ✓ Are the parent or caregiver of a child under the age of five
 ✓ Have a low to medium income

SI USTED:
 ✓ Está embarazada o es nueva mamá
 ✓ Es madre, padre o tutor de un niño menor de cinco años
 ✓ Tiene de bajo a mediano ingreso

NEU BAN:
 ✓ Có thai hay đã sanh rồi
 ✓ Là cha mẹ hoặc người chăm sóc trẻ em dưới năm tuổi
 ✓ Có thu nhập thấp đến trung bình

WIC OFFERS:
 ✓ Nutrition and wellness tips
 ✓ Breastfeeding support
 ✓ Free healthy foods
 ✓ Referrals to other community resources

WIC OFRECE:
 ✓ Consejos de nutrición y bienestar
 ✓ Apoyo en la lactancia
 ✓ Alimentos saludables y gratuitos
 ✓ Conexión a otros recursos comunitarios

ƯU ĐÃI WIC:
 ✓ Lời khuyên về dinh dưỡng và sức khỏe
 ✓ Hỗ trợ nuôi con bằng sữa mẹ
 ✓ Thực phẩm lành mạnh miễn phí
 ✓ Kết nối với người khác cộng đồng



California WIC
WOMEN, INFANTS & CHILDREN
<https://myfamily.wic.ca.gov/>

Santa Clara County PUBLIC HEALTH
Call: (408) 792-5101
Text: (888) 413-2698

SAN JOSE
725 East Santa Clara St., Ste. 200
2406 Clove Dr., T-41
1993 McKee Rd., EVT 1
500 Tully Rd.,
MILPITAS
143 North Main St,
SUNNYVALE
680 S. Fair Oaks Ave.
GILROY
7475 Camino Arroyo

GARDNER Health Services
Call: (408) 264-5197
Text: (888) 410-7908

SAN JOSE
160 E. Virginia St., #210
3030 Alum Rock Ave.
647 S. King Rd.,
ALVISO
1621 Gold St,
GILROY
7526 Monterey St.

Indian Health Center of Santa Clara Valley
Call: (408) 960-0900
Text: (888) 410-9652

SAN JOSE
1885 Westwood Dr., Suite 4
2039 Forest Ave, Suite 105
SILVERCREEK
1642 E. Capitol Expressway

USDA is an equal opportunity provider and employer.



California WIC
WOMEN, INFANTS & CHILDREN
<https://myfamily.wic.ca.gov/>

California Families Grow Healthy with WIC




California WIC
WOMEN, INFANTS & CHILDREN
<https://myfamily.wic.ca.gov/>

Các Gia Đình California Phát Triển Khỏe Mạnh với WIC




WIC Local Agencies in SCC

- ❖ Santa Clara County Public Health Department (Blue)

Call: (408) 792-5101

Text: (888) 413-2698

Email: SCCWIC@phd.sccgov.org

- ❖ Gardner Health Services (Green)

Call: (408) 254-5197

Text: (888) 410-7908

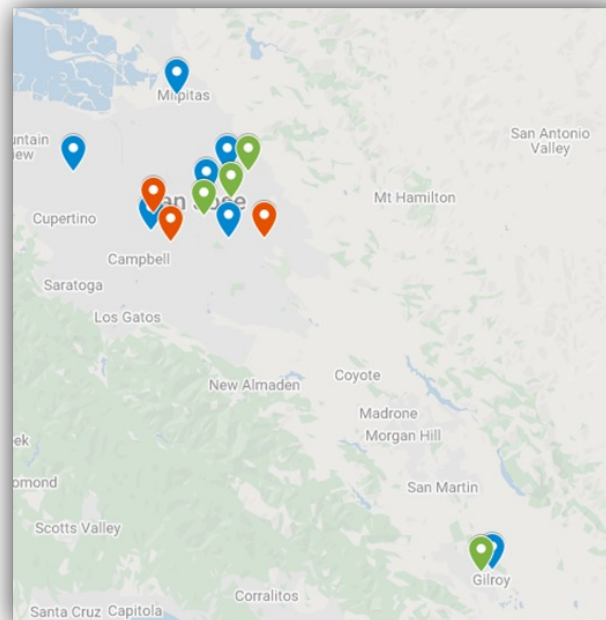
Email: WIC@gfhn.org

- ❖ Indian Health Center of Santa Clara Valley (Orange)

Call: (408) 960-0900

Text: (888) 410-9652

Email: wic@ihscsv.org



To find the nearest WIC office call toll-free
1-888-WIC-WORKS

wicworks.ca.gov



RBL Contact information

Joycelyn A. Mendoza

Regional Breastfeeding Liaison

Email: joycelyn.mendoza@phd.sccgov.org

Office: (408) 852 2306

Mobile: (669) 669 288 9063

