



Commonwealth of Massachusetts
Executive Office of Health and Human Services
Department of Transitional Assistance
600 Washington Street • Boston, MA 02111

DEVAL L. PATRICK
Governor

TIMOTHY P. MURRAY
Lieutenant Governor

JUDYANN BIGBY, M.D.
Secretary

DANIEL J. CURLEY
Commissioner

Operations Memo 2012-59
December 28, 2012

To: Department of Transitional Assistance Staff

From: *SB/A* **Stephanie Brown, Assistant Commissioner for Policy, Program and External Relations**

Re: **Processing TAFDC or SNAP Benefits for Clients Affected by the Loss of Unemployment Compensation Benefits**

Overview

The Emergency Unemployment Compensation (EUC) Program is a 100% federally funded program that provides benefits to individuals who have exhausted regular unemployment compensation (UC) benefits. Unless Congress changes the law, EUC payments will end as of December 29, 2012, **even if the claimant has a balance remaining on a federal extension claim.**

The Division of Unemployment Assistance (DUA) has sent letters to all claimants (Attachment A) **who are receiving any type of EUC payments**, informing them of the approaching cut-off date. As a result, case managers may receive calls from your clients inquiring about benefit adjustment or from new applicants inquiring about eligibility for DTA benefits.

Anticipating a significant increase in SNAP applications, the Department will implement the use of a shortened SNAP application form (Attachment B). This form was developed for use by claimants who are no longer receiving UC benefits.

Purpose Of Memo

The purpose of this Field Operations Memo is to provide TAO staff with:

- information about the DUA Hotline;
 - a method to determine whether or not a claimant's UC benefit has ended;
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**Purpose Of
Memo
(continued)**

- information about the shortened SNAP application form;
 - instructions for processing applications affected by the loss of UC benefits;
 - instructions for processing existing cases affected by the loss of UC benefits;
 - information about Attachment D- *Tips/Information for Frontline Staff*
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DUA Hotline

Effective January 2, 2013 through March 31, 2013, in the event that EUC Benefits are not extended, DUA will operate a temporary Agent Assist Hotline for **designated DTA staff only**. The hours of operation will be 9:00 a.m. through 4:30 p.m.

The hotline will assist in the review and verification of cases where claimants who are currently receiving unemployment benefits have exhausted UC benefits or are no longer eligible to receive EUC benefits.

DUA staff will need the claimant's name and Social Security number to verify information for the DTA/DUA Liaison. DUA staff will also advise the DTA/DUA Liaison as to the availability of any future benefits or restoration of regular benefits to the claimant.

The hotline number and list of DTA/DUA Liaisons will be sent to local office managers under separate cover.

**How to
Determine If
UC Extension
Benefit Has
Ended for a
Client**

UC benefits are paid to eligible claimants who fall into one of three payment groups:

1. *Regular* UC benefits coded as REGULAR in the Program field of the Unemployment Insurance Information Inquiry Screen (UC screen). Clients coded as REGULAR will receive benefits until the prescribed payment period for REGULAR benefits expires, usually 26 weeks or 30 weeks. **However, after week ending December 29, 2012, when a claimant's REGULAR UC benefits end, the claimant will not be eligible for an extension;** or
 2. *Emergency Unemployment Compensation* (EUC) benefits are divided into tiers with each tier representing a separate payment period and coded as EUCI, ECUII, or EUCIII in the Program field of the Unemployment Insurance Information Inquiry Screen. Claimants receiving any form of EUC payment will lose UC benefits effective week ending December 29, 2012 unless Congress changes the law; or
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**How to
Determine If
UC Extension
Benefit Has
Ended for a
Client
(continued)**

3. *Federal-State Extended Benefits* coded as EB in the Program field of the Unemployment Insurance Information Inquiry Screen.
Note: Based on the current unemployment rate in Massachusetts, the EB program ended in Massachusetts in April of this year.

If the client submits a letter from DUA which informed the client that the last UC extension benefits would be paid on the week ending December 29, 2012, the case manager must accept the letter as proof that the client is no longer receiving UC extension benefits.

If the client does not provide a letter from DUA, the case manager must look at the Unemployment Insurance Information Inquiry Screen (UC screen) to determine whether or not the client is receiving UC extension benefits.

If the client was in an extension category that is no longer being paid:

- the Program field of the UC screen will list one of the EUC tiers, for example, EUC I or EUC II; and
- the Payment History field will show the last check date as 12-29-12; and
- the REMAIN BAL field **may or may not** show a balance.

If the information on the UC screen appears to be discrepant, the case manager must:

- complete the DTA/DUA Unemployment Compensation (UC) Verification form (Attachment C); and
- submit the DTA/DUA Unemployment Compensation (UC) Verification form to one of the DUA Liaisons in your office.

The DUA Liaison will:

- contact the DUA Hotline and provide the names and Social Security numbers of DTA clients whose UC information appears to be discrepant based on the information on the UC screen; and
- complete the DTA/DUA Unemployment Compensation (UC) Verification form with updated information based on the DUA Hotline review.

Remember: You may also receive applications from clients whose REGULAR UC benefits have ended. Since these claimants will not be eligible for an extension category after the week ending December 29, 2012, they have been informed that they may be eligible for DTA benefits.

**The Shortened
SNAP
Application
Form**

A shortened SNAP application form has been developed for use by applicants whose UC benefits have ended. The form will be available at <http://www.mass.gov/snap>.

An instruction on the cover sheet of the shortened application form advises the applicant to complete and mail the form to the DTA office in the applicant's area. The Department's website and Interactive Voice Response (IVR) number provide two ways for the client to find location of the DTA office that serves the community in which the client resides.

The page immediately following the cover sheet (the first page of the application) has, at the top right-hand corner, a box with the inscription **UI-2012**. This identifies this form as the application to be used by former UC claimants. Although a shortened SNAP application form has been developed for use by applicants whose UC benefits have ended, other applicants with the same set of circumstances may choose to apply online via the Virtual Gateway, or may apply using the regular SNAP application form. Regardless of the method of application or the version of the SNAP application form submitted, the Department must accept and process all applications.

**Case Manager
Responsibilities**

When the applicant is determined to be a person whose UC benefits have ended, the case manager must:

- determine whether the household meets the criteria for expedited processing of SNAP benefits as outlined at 106 CMR 365.810.
- access BEACON and select the Method of Application from the dropdown list;
- select **Loss of Unemployment Benefits** as the primary reason by clicking on the Primary Reason dropdown list on the Application window;
Note: For tracking purposes, it is important that Loss of Unemployment Benefits be used as the primary reason for applicants who have lost UC benefits.
- select the appropriate source of application from the dropdown list; and
- process the application for expedited SNAP benefits, if appropriate.

After all mandatory verifications have been returned

- process the SNAP case; and
 - certify the case using the appropriate certification type based on the circumstances of the household; or
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**SNAP
Applications**

Case Manager Responsibilities

- deny the case for failure to complete the application process or other appropriate denial reason.

Combination Cash/SNAP Applications

If a combination cash/SNAP application is received because the household no longer receives UC benefits, the case must be processed following established procedures, including the issuance of expedited benefits, when appropriate.

Processing Existing Cases

If a client in an existing TAFDC and/or SNAP case reports that UC extension benefits have ended, the case manager must:

- access the UC Screen to confirm the UC benefit termination;
 - remove the UC income from the Other Income window of BEACON
 - select the UC record to be closed;
 - indicate *No* in the Exists field;
 - select *Closed* from the Status dropdown list; and
 - enter a new Status Date.
 - on the verifications tab, select the item to be verified and select the proof used from the Documents of Evidence list;
 - click on Save; and
 - wrap-up the case for a recalculation of benefits.
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Attachment D

Tips/Information for Frontline Staff (Attachment D) was provided to help case managers better understand the UC filing process. The attachment contains information including but not limited to:

- the expiration of Federal extensions on week ending December 29, 2012;
 - an overview of latest extension benefits in Massachusetts;
 - general information about claims; and
 - the Agent Assist Temporary Hotline number established to help agencies such as DTA clarify discrepant DUA screen information.
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Questions

If you have any questions, please have your Hotline designee call the Policy Hotline.



THE COMMONWEALTH OF MASSACHUSETTS
EXECUTIVE OFFICE OF LABOR AND WORKFORCE DEVELOPMENT
DEPARTMENT OF UNEMPLOYMENT ASSISTANCE

Attachment A

DEVAL L. PATRICK
GOVERNOR

TIMOTHY P. MURRAY
LT. GOVERNOR

JOANNE F. GOLDSTEIN
SECRETARY

MICHELLE R. AMANTE
ACTING DIRECTOR

**IMPORTANT INFORMATION REGARDING
EMERGENCY UNEMPLOYMENT COMPENSATION (EUC)**

Dear <claimant>:

Currently, individuals can receive UI benefits for weeks beyond the 30 weeks maximum under state law. These extended benefits are paid by a federal program called the Emergency Unemployment Compensation (EUC) program. This program is scheduled to end on December 29, 2012, which means that **no EUC benefits will be paid for weeks after December 29, 2012.** As a result, you can only receive up to 30 weeks of benefits.

You can call the After TeleClaims Center at 877-626-6800 (toll-free from area codes 351, 413, 508, 774 and 978) or 617-626-6800 from any other area code to determine how many more weeks of eligibility you have or to get general information. You can also check www.mass.gov/dua for more information.

Health Insurance

If you receive health insurance through the Medical Security Program (MSP), please be aware that this benefit will end shortly after your unemployment compensation eligibility ends. To ensure that you have healthcare coverage thereafter, we strongly encourage you to apply for health insurance through MassHealth at www.mass.gov/masshealth, or by calling 1-800-841-2900.

Additional Assistance Programs

Please continue to visit the One-Stop Career Centers for assistance with your job search and retraining needs. To find the Career Center most convenient for you, please visit, www.mass.gov/careercenters or call 1-877-872-5627.

In addition, depending on your personal and family circumstances, you may be eligible for other state resources including the following:

- Supplemental Nutrition Assistance Program (SNAP)
- Low Income Home Energy Assistance Program (LIHEAP)
- Transitional Aid to Families with Dependent Children (TAFDC)
- Emergency Aid to the Elderly, Disabled, and Children (EAEDC)

Additional information regarding these programs is available at www.mass211help.org or call 2-1-1 where assistance is available 24 hours a day, 7 days a week.

Sincerely,

Michelle Amante, Acting Director
Department of Unemployment Assistance



Massachusetts Department of Transitional Assistance

SNAP (formerly Food Stamps) BENEFITS FOR YOU AND YOUR FAMILY

APPLY TODAY! IT'S EASIER THAN YOU THINK!

If your Unemployment Insurance benefit has been terminated and your family has no income or very little income, you may be eligible for the Supplemental Nutrition Assistance Program (SNAP – formerly Food Stamps). SNAP benefits can help you put food on the table during hard times.

We encourage you to apply for SNAP benefits by completing the attached application and sending it to the local DTA office in your area.

To find out the correct mailing address, please visit the DTA website at <http://www.mass.gov/dta> and look for “DTA Office Locations” under the “Key Resources” section, or call DTA’s Interactive Voice Response number at 1-877-382-2363.

(If possible, please enclose a copy of the unemployment benefit termination letter you received from DUA and a copy of your driver’s license, birth certificate or other proof of your identity with the application.)

Please try to answer all the questions on the application. The more information we have, the more quickly we will be able to act on your application. If you aren’t sure what a question means or how to answer it, leave it blank and we will talk about it during your interview. After we receive your application, we will contact you for an interview and ask you more questions. If you need an interpreter, tell us at the interview and we will arrange for one. Below we list the types of things you will need to provide for your application. Please look at the list and prepare to gather the proofs you will need.

To apply for SNAP benefits, you need to prove your income, expenses and other information. You only need to prove information that applies to you. For example, if you do not have a job, then you do not need to worry about earned income in the list below.

When you get SNAP benefits, you will be given an account, like a bank account. Each month, your SNAP benefits will be put into your account. To use your SNAP benefits, you will get a Bay State Access card which you will use like an ATM or credit card. Your privacy is important and using the Bay State Access card helps maintain that privacy. You can use your Bay State Access card at grocery stores, convenience stores, markets and co-ops. You use it in the same way you would buy food with a debit/ATM or credit card.

Things you must provide, if they apply to you, to receive SNAP benefits.

- 1. Proof of Identity:** Driver’s license, birth certificate or other proof of your identity.
- 2. Proof of Massachusetts Residence:** Mortgage, tax, homeowners insurance or utility bills, rent receipt or lease. If you are homeless, a collateral contact, motor vehicle registration, statement from a shelter or a statement from the person you are staying with temporarily.
- 3. Earned Income:** Pay stubs or written statement from employer on letterhead showing income before taxes for the past four weeks.
- 4. Other Income:** Most recent copy of Social Security check or copy of award letter, proof of unemployment compensation, workers’ compensation, pension, child support or alimony.
- 5. Self-Employment:** Most recent federal tax return (Schedule C Form) or last three months of business records.
- 6. Noncitizen Status:** For all non-US citizens applying for SNAP benefits, alien registration card or other immigration document.
- 7. Child Support Payments:** If you make child support payments to someone not living with you, show proof of the legal obligation to make the payment, such as a court order, tax returns showing legally obligated support payments, verification of withholding from unemployment compensation, and the amount paid.

Things you may provide, if they apply to you, to receive higher SNAP benefits. SNAP rules allow you to deduct certain expenses from your countable income. If you give us proof of any of the expenses from the list below, you may be able to receive higher SNAP benefits.

- 1. Housing Costs:** You can self-declare shelter costs, including your rent or home ownership costs (mortgage, real estate taxes, insurance). If we think the information is questionable and need proof, we may ask you for your rent receipt or lease agreement. Homeowners can verify these costs through their mortgage statement, real estate taxes and homeowners’ insurance bills.
- 2. Utilities:** You can self-declare your utility expenses. If we think the information is questionable, we may ask you for a copy for oil, gas, electricity, or telephone (including cellular phone).
- 3. Medical Expenses:** If you or anyone in your household is age 60 or older or has a certified disability, the amount of your out-of-pocket medical expenses can be shown by receipts for co-payments or premiums on health insurance, dentures, eyeglasses, hearing aid batteries, prescription medications, doctor-prescribed pain relievers, over-the-counter drugs, and transportation to get to medical services. With the exception of medical transportation, most medical costs need to be verified.
- 4. Child Care or Adult Dependent Care Expenses:** You can self-declare dependent care costs. If we think the information is questionable, we may ask you for a written statement from your dependent care provider, or a canceled check or money order paid to the dependent care provider.

After your interview, you will get a list of things you will need to show us. **Pay stubs, utility bills and other proof must not be more than four weeks old from the day that you turn in your application.**



Massachusetts Department of Transitional Assistance
SNAP Benefits Application
for Former UI Recipients

UI-2012

1. Information About You (Answer all boxes.)			
Last Name	First Name	Middle Initial	Social Security Number
Date of Birth _____/_____/_____	Gender	<input type="checkbox"/> M <input type="checkbox"/> F	Marital Status (check one) <input type="checkbox"/> Married <input type="checkbox"/> Never Married <input type="checkbox"/> Divorced <input type="checkbox"/> Separated <input type="checkbox"/> Widowed

2. Information About Where You Live (Answer all boxes.)			
Your current address	Number and Street	Apt #	City, State, ZIP
Are you homeless?	<input type="checkbox"/> yes <input type="checkbox"/> no	Is your current address temporary?	<input type="checkbox"/> yes <input type="checkbox"/> no
Your daytime telephone number(s)		Is your current address your mailing address?	
(_____) _____ - _____		<input type="checkbox"/> yes <input type="checkbox"/> no	
A good time of day to reach you by telephone: Time: _____		Monday Tuesday Wednesday Thursday Friday	
Circle all that apply:			

3. Questions Regarding Citizenship Status	
a. Are you and all household members U.S. citizens by birth or naturalization?	<input type="checkbox"/> yes <input type="checkbox"/> no
If No, go to Part b, below.	
b. Under SNAP rules (106 CMR 362.220), a noncitizen who is unable or unwilling to provide immigration status information and/or Social Security number due to immigration status does not need to do so. This noncitizen will be ineligible for SNAP benefits. However, the remaining members of the household may apply for benefits.	
List any household member(s) who chooses NOT to apply for SNAP benefits:	

4. Information About People You Live With - Please list everyone you live with. Do not include yourself. (Attach a separate sheet if necessary.) Noncitizens living with you who choose not to apply for SNAP benefits do not need to tell us their Social Security number or immigration status.				
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Last Name	First Name	Middle Initial	Date of Birth	Gender <input type="checkbox"/> M <input type="checkbox"/> F	Relationship to you
Do you purchase and prepare food together?		Is this person applying for SNAP benefits?		Social Security Number	
<input type="checkbox"/> yes <input type="checkbox"/> no		<input type="checkbox"/> yes <input type="checkbox"/> no			

Last Name	First Name	Middle Initial	Date of Birth	Gender <input type="checkbox"/> M <input type="checkbox"/> F	Relationship to you
Do you purchase and prepare food together?		Is this person applying for SNAP benefits?		Social Security Number	
<input type="checkbox"/> yes <input type="checkbox"/> no		<input type="checkbox"/> yes <input type="checkbox"/> no			

5. Earnings and Assets	
Approximately how much do you and others living with you currently have in bank account(s):	\$ _____
Are you or is anyone living with you working at the present time or in the last 60 days?	<input type="checkbox"/> yes <input type="checkbox"/> no
If yes , complete the following section. (Attach a separate sheet, if necessary.)	
IMPORTANT: Be sure to complete this section if you or anyone else living with you is self-employed.	

Last Name		First Name		Employer Name, Address & Telephone Number			
Job Title	Start Date	End Date	Hourly Wage \$ _____	Weekly Hours	Weekly Tips \$ _____	How Often Paid?	Permanent Job? <input type="checkbox"/> yes <input type="checkbox"/> no

If job ended, last day of work ____/____/____

Record most recent wage information here:

Date		Gross Amount	Hours
From	To		
		\$	
		\$	
		\$	

6. Other Income

Are you or is anyone living with you eligible to receive or receiving **any other type of income** such as Unemployment Compensation, Child Support, Social Security, SSI, Workers' Compensation, Veterans' Benefits, Pensions or Rental Income? yes no
 If **yes**, complete the following section. (Attach a separate sheet, if necessary.)

Name	Type of Income	Amount	How Often Received?	Date Income Started

7. Shelter Expenses

What type of shelter expenses do you have?

Rent/Mortgage	<input type="checkbox"/> yes <input type="checkbox"/> no	Rent/Mortgage amount per month \$ _____
Property Taxes	<input type="checkbox"/> yes <input type="checkbox"/> no	
Other	<input type="checkbox"/> yes <input type="checkbox"/> no	

Type of housing you live in

<input type="checkbox"/> Private Housing	<input type="checkbox"/> Public Housing	<input type="checkbox"/> Commercial Boarding House
<input type="checkbox"/> Transitional Housing	<input type="checkbox"/> Residential Facility	<input type="checkbox"/> Employer-provided Housing
<input type="checkbox"/> Teen Living Program	<input type="checkbox"/> Migrant Campsite	<input type="checkbox"/> Shelter

8. Utility Expenses

What type of utility expenses do you pay for **separate** from your rent?

Heating (gas, oil or electric) or electricity for air conditioning	<input type="checkbox"/> yes <input type="checkbox"/> no
Any other utilities (not including heating/air conditioning)	<input type="checkbox"/> yes <input type="checkbox"/> no
A telephone only, including cellular phone	<input type="checkbox"/> yes <input type="checkbox"/> no

NOTICE OF RIGHTS, RESPONSIBILITIES AND PENALTIES (PLEASE READ CAREFULLY)

I certify under penalty of perjury that I have read, or have had read to me, the information in this application and my answers to the questions in this application and such answers are true and complete to the best of my knowledge. I also certify under penalty of perjury that my answers on any supplement I may complete in the future will be true and complete to the best of my knowledge. I understand that giving false or misleading statements or misrepresenting, hiding or withholding facts, either orally or in writing, to establish eligibility for the Supplemental Nutrition Assistance Program (SNAP) is fraud, an Intentional Program Violation (IPV), and is punishable by civil and criminal penalties.

I understand that the Department of Transitional Assistance (DTA) administers SNAP. I understand that I must report to DTA any changes in my household income, address, living arrangement, family size, employment or any other changes to my SNAP household that may affect our eligibility. I understand that I must report these changes to DTA in person, in writing or by phone **within 10 days of the change** unless I am allowed by DTA to report changes under the SNAP semiannual reporting rules.

I understand that, for SNAP benefits, to receive a deduction for dependent care expenses, rent or mortgage payments, utility or shelter expenses or medical expenses, I must report and provide verification to DTA. Failure to report or verify the above-listed expenses(s) could mean that I will receive less SNAP benefits each month, and will be seen as my statement that the household does not want to receive a deduction for the unreported or unverified expense(s).

I understand that all household members between the ages of 16 and 59 are automatically work registered and enrolled in the SNAP Employment and Training Program (SNAP E&T). The automatic SNAP E&T enrollment allows household members to easily access SNAP E&T services. Nonexempt household members will be notified of work requirements, have exemptions and penalties for noncompliance explained and be referred to an employment activity, if appropriate.

I give permission to DTA to verify and investigate the information I have given that relates to my eligibility for assistance. I give permission to DTA to get any records or data and to verify information given on this application with other agencies, including federal and state agencies, local housing authorities, out-of-state welfare departments and financial institutions. I also give permission to these agencies to give to DTA information about my household that concerns my SNAP benefits.

I understand that I also give permission to DTA to share information about me and my dependents under age 19 with the Department of Education (DOE) so that my dependents are automatically certified for school breakfast and lunch programs. I also give permission to DTA to share information about me, my dependents under age 5 and anyone pregnant in my household with the Department of Public Health (DPH) so that these individuals are referred to the Women, Infants and Children (WIC) Program for nutrition services.

I understand that I authorize DTA and the Massachusetts Executive Office of Health and Human Services to share information about my eligibility for public assistance benefits with electric distribution companies, gas distribution companies and eligible telecommunications carriers pursuant to confidentiality agreements executed by these companies for the sole purpose of certifying my eligibility for discount utility service rates. I also authorize DTA to share my information with the Department of Housing and Community Development (DHCD) for the purpose of enrolling me in the Heat & Eat Program.

I understand that I will receive a copy of the Your Right to Know, brochure and the SNAP brochure, that I must read or have them read to me and that I must understand their contents and my rights and responsibilities. If I have any questions about the brochures or any of this information, I will ask my case manager. I can also call Recipient Services at 1-800-445-6604 if I have trouble reading or understanding any of this information.

SNAP Penalty Warning

I understand that if I or any member of my SNAP household intentionally breaks any of the rules listed below, that person will be barred from SNAP for **one year** after the first violation, **two years** after the second violation and **permanently** after the third violation. The person may also face criminal prosecution under applicable state and federal laws with penalties up to \$250,000 in fines, imprisonment up to 25 years, or both. These rules are:

- Do not give false information or hide information to get SNAP benefits.
- Do not trade or sell SNAP benefits.
- Do not alter EBT cards to get SNAP benefits you are not entitled to receive.
- Do not use SNAP benefits to buy ineligible items, such as alcoholic drinks and tobacco.
- Do not use someone else's SNAP benefits or EBT card, unless you are an authorized representative.

I also understand the following penalties:

- Individuals who commit a **cash program** violation that is confirmed in an Administrative Disqualification Hearing (ADH) will be barred from SNAP for the same period the individual is barred from cash assistance.
- Individuals who make a fraudulent statement or representation about their identity or place of residence to receive multiple SNAP benefits **simultaneously**, will be barred from SNAP for **ten years**.
- Individuals who trade (buy or sell) SNAP benefits for a controlled substance/illegal drug(s), will be barred from SNAP for a period of **two years** for the first finding, and **permanently** for the second finding.
- Individuals who trade (buy or sell) SNAP benefits for firearms, ammunition or explosives, will be barred from SNAP **permanently**.
- Individuals who trade (buy or sell) SNAP benefits having a value of \$500 or more, will be barred from SNAP **permanently**.
- Individuals who are fleeing to avoid prosecution, custody or confinement after conviction for a felony or are violating a condition of probation or parole, are **ineligible** to participate in SNAP.
- Individuals who fail to comply without good cause with SNAP Work Requirements will be disqualified from SNAP for a period of **three months** for the first finding, **six months** for the second finding and **twelve months** for the third finding. If the individual found to have failed to comply for a third time is the head of the SNAP household, the **entire** household shall be ineligible to participate in SNAP for a period of **six months**.

Right to an Interpreter

I understand that I have a right to an interpreter provided by DTA if no adult in my SNAP household is able to speak or understand English. I also understand that I can get an interpreter for any DTA fair hearing or bring one of my own. If I need an interpreter for a hearing, I must call the Division of Hearings at least one week before the hearing date.

NONDISCRIMINATION STATEMENT

In accordance with Federal law and U.S. Department of Agriculture (USDA) policy, this institution is prohibited from discriminating on the basis of race, color, national origin, sex, age, religion, political beliefs or disability.

To file a complaint of discrimination, write USDA, Director, Office of Civil Rights, Room 326-W, Whitten Building, 1400 Independence Avenue, S.W., Washington, DC 20250-9410 or call (202) 720-5964 (voice and TDD). You may also contact the Massachusetts Commission Against Discrimination (MCAD) or the Office of Diversity, Equal Opportunity and Civil Rights (see Your [Right to Know](#) brochure for more information). USDA is an equal opportunity provider and employer.



APPLICANT'S SIGNATURE: By signing this application, I hereby certify under penalty of perjury that I have read (or have had read to me) and I understand and agree to the "Rights and Responsibilities," and the answers in this application and any additional documents I provide to the Department in the future are accurate and complete to the best of my knowledge. I have read the SNAP Penalty Warning in my primary language, have had it read to me or have had it interpreted for me. I also certify that all members of my SNAP household requesting SNAP benefits are either U.S. citizens or noncitizens in satisfactory immigration status.

Applicant Signature: _____

Date: / / _____

DTA/DUA Unemployment Compensation (UC) Verification

Client's Name: _____

Client's SSN: _____

UC Payment History for the last four weeks

(To be completed by DTA/DUA Liaison)

Date	UC Amount Confirmed By DUA hotline Staff

Case Manager's Name _____ Date _____

Case Manager's Phone Number _____

Tips/Information for Front-line Staff

Federal Extensions

Please note that the last payable week for all federal extensions is December 29, 2012. This means that even if you have a balance on any Emergency Unemployment Compensation (EUC) Tier, these benefits cannot be paid after this date.

Overview of Latest Extension Benefits

Federal Extension Benefits Update (10/17/12)

Since the current extended benefit period will end on 12/29/12, Massachusetts will resume paying a maximum of 30 weeks of Regular Unemployment Insurance (UI) benefits beginning 12/30/12.

Please review the chart below for program specifics.

Program	Number of Weeks	Program End Date/Application Deadline	Last Payable Week
Emergency Unemployment Compensation (EUC) Tier I	On or after 9/2/12 - up to 14 wks Before 9/2/12 - up to 20 wks	Claimants must exhaust Regular UI on or before 12/22/12 .	12/29/2012
Emergency Unemployment Compensation (EUC) Tier II	Up to 14 weeks	Claimants must exhaust Tier I on or before the week ending 12/22/12 .	12/29/2012
Emergency Unemployment Compensation (EUC) Tier III	Up to 13 weeks	The week ending 06/23/12 was the last week in which claimants could exhaust Tier II and establish eligibility on Tier III.	12/29/2012
Federal-State Extended Benefits (EB)	Up to 13 weeks	The last effective date to file for EB was 04/01/12 . Please note that the EB Program has triggered off in Massachusetts effective 03/08/12.	4/7/2012

General Information About Claims

If an individual has general questions (including prior benefits received) and whether or not they are impacted by Unemployment Insurance benefit extensions they should:

- **Call the Department of Unemployment Assistance TeleClaim Center**
 - Call the Teleclaim Center at 1-877-626-6800 if you are calling from the following area codes: 351, 413, 508, 774, and 978.
 - Call the TeleClaim Center at 617-626-6800 if you are calling from any other area code.
 - **Visit the website www.mass.gov/dua** for updated information about the extended benefits program or general information on Unemployment Insurance.
 - **Health Insurance** - If a claimant receives health insurance through the Medical Security Program (MSP), please be aware that this benefit will end shortly after your unemployment compensation eligibility ends.

Agent Assist Temporary Hotline 1/2/13 - 3/31/13

Effective January 2, 2013 in the event that EUC Benefits are not extended, DUA has set up a temporary Agent Assist Hotline for **designated DTA staff only**.

The hours of operation will be Monday through Friday, 9:00am - 4:30 pm.

The hotline will be set up to assist in the review and verification of those cases where claimants who are currently receiving unemployment benefits have exhausted or are no longer eligible to receive EUC Benefits.

DUA staff will be able to review and advise DTA case managers/designees as to the availability of any future benefits or restoration of regular benefits to the claimant.

DUA staff will need the claimant's name and Social Security number to verify information for DTA designee.