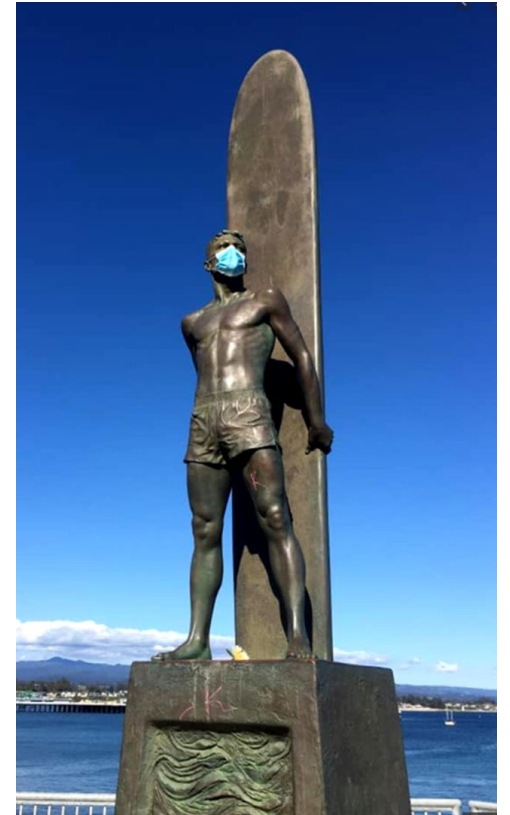


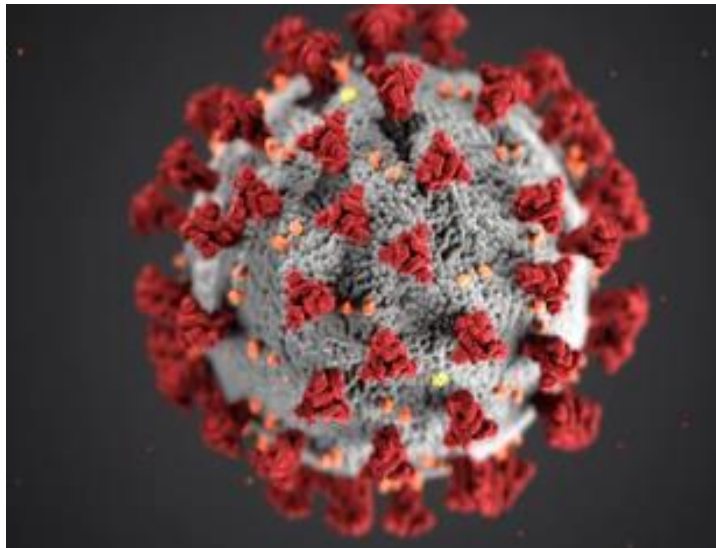
GUIDE FOR APPLYING FOR
EMPLOYMENT AND BENEFITS
ASSISTANCE:

CalFresh
CalWORKs
Medi-Cal
General Assistance



Welcome to the Human Services Department's COVID-19 guide for applying for benefits for food, medical and cash assistance.

You may apply for benefits online or by phone, while you shelter-in-place. We are available to help you.



COVID-19



The CalFresh Program, formerly known as Food Stamps, assists low-income individuals and households to purchase nutritional food.

CALFRESH FOOD ASSISTANCE



www.getcalfresh.org

INTERVIEW MAY BE WAIVED FOR CALFRESH



Some CalFresh applicant households may have their initial interview waived if they submit all necessary documents with their application.



If an interview is required for your application, it will be completed over the phone.



Phone Customer Service Center:
1-888-421-8080

EMERGENCY FOOD — EXPEDITED SERVICES CALFRESH

If you qualify for Expedited Services, you have the right to get emergency CalFresh benefits within three (3) business days from the time the county receives your application.

ACCESS BENEFITS WITH AN EBT CARD



If you qualify for CalFresh, CalWORKs or General Assistance, you will receive an **Electronic Benefit Transfer (EBT)** debit card. You can use your card to purchase food and eligible items.

You can check your account balance, find retailers, and ATMs that accept the EBT card at www.ebt.ca.gov

If you need to replace your EBT card or check your benefit account balance, you may call the EBT customer service line at 1-877-328-9677.

You may also call the Phone Customer Service Center at 1-888-421-8080.

ACCESS HEALTH CARE WITH A BIC CARD



If you are eligible for Medi-Cal, you will receive a **Benefits Identification Card (BIC)** in the mail (if you do not already have one).

You may request a replacement benefit card through www.MyBenefitsCalWIN.org or by calling the Phone Customer Service Center at 1-888-421-8080.

The California Work Opportunity and Responsibility to Kids (CalWORKs) program offers temporary cash aid, employment services and health insurance to eligible families who have children under age 19.

CALWORKS



CalWORKs - Federal Disaster Homeless Assistance Program

CalWORKs applicants/recipients homeless due to COVID-19 may be eligible for homeless assistance even if they have received homeless assistance through CalWORKs during the last 12 months.

www.mybenefitscalwin.org

CALWORKS RECIPIENTS' TIME ON AID DURING COVID-19

California law limits cash assistance to 48 months of CalWORKs for adults.

Due to COVID-19, the months of March, April, May and June will not count towards the time limit.



Medi-Cal is
California's
Medicaid
health care
program.

MEDI-CAL




Medi-Cal provides health care services to low-income individuals including families with children, seniors (65 or older), individuals with disabilities, children in foster care, former foster youths up to age 26, pregnant women, and low-income people.

www.coveredca.com

APPLY FOR
BENEFITS TODAY:

CALL OUR PHONE
CUSTOMER
SERVICE CENTER

We understand you may encounter an extended wait time but for your safety and well-being during this COVID-19 outbreak we are encouraging you to conduct you benefit related matters via our Phone Customer Service Center, 7:30am to 5:00pm.



1-888-421-8080

FOR AN EASY WAY TO SUBMIT DOCUMENTS,
DOWNLOAD THE APP ON YOUR SMART PHONE

Download the **My Santa Cruz County App** on
Google Play or the App Store and click on
HSD Submit Documents.



A County
Funded Loan
Program

GENERAL ASSISTANCE



The General Assistance Program is a County-funded loan program designed to assist adults in meeting their basic needs for housing, utilities, personal needs and transportation.

www.mybenefitscalwin.org

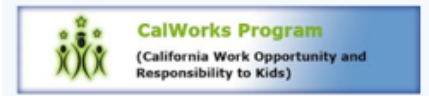
WHERE TO APPLY FOR ONE OR MORE PROGRAMS? APPLY ONLINE:

Medi-Cal, CalFresh, General Assistance & CalWORKs:

www.mybenefitscalwin.org

Mail:
Human Services Department,
P.O. Box 1320, Santa Cruz, CA 95061

Fax: (831)786-7100
Phone: 1-888-421-8080



WHERE TO APPLY FOR CALFRESH ONLY? APPLY ONLINE:

www.getcalfresh.org

or

www.mybenefitscalwin.org



Mail:
Human Services Department,
P.O. Box 1320, Santa Cruz, CA 95061

Fax: (831)786-7100
Phone: 1-888-421-8080

WHERE TO APPLY FOR MEDI-CAL ONLY? APPLY ONLINE:

www.mybenefitscalwin.org

or

www.coveredca.com

Mail:

Human Services Department,
P.O. Box 1320, Santa Cruz, CA 95061



Fax: (831)786-7100

Phone: 1-888-421-8080

IF YOU ARE ALREADY RECEIVING ASSISTANCE:

CalWORKs, CalFresh and General Assistance

If you are already receiving CalWORKs, CalFresh or General Assistance, you do not have to complete your SAR 7 (CW 7 for General Assistance) or renewal for the months of March, April and May.

For any questions call 1-888-421-8080.

Things to remember

- ✓ You must report if your gross monthly income goes over your household's Income Reporting Threshold (IRT).
- ✓ GA recipients need to report any changes in income within 10 days of the change.
- ✓ If your income goes down, your benefit amount may go up.

MEDI-CAL REPORTING:

Medi-Cal Renewal

Please continue to submit your annual renewal for March, April, May and June as it will be processed at a later date.

For any questions call 1-888-421-8080.

Reporting Changes

For a decrease or loss of income, or to add a person to your case, contact our Phone Customer Service Center: 1-888-421-8080.

TO SUBMIT DOCUMENTS

Our offices have limited access due to COVID-19, these are the ways you can provide any documents:

All programs – You will need to create an account
www.mybenefitscalwin.org

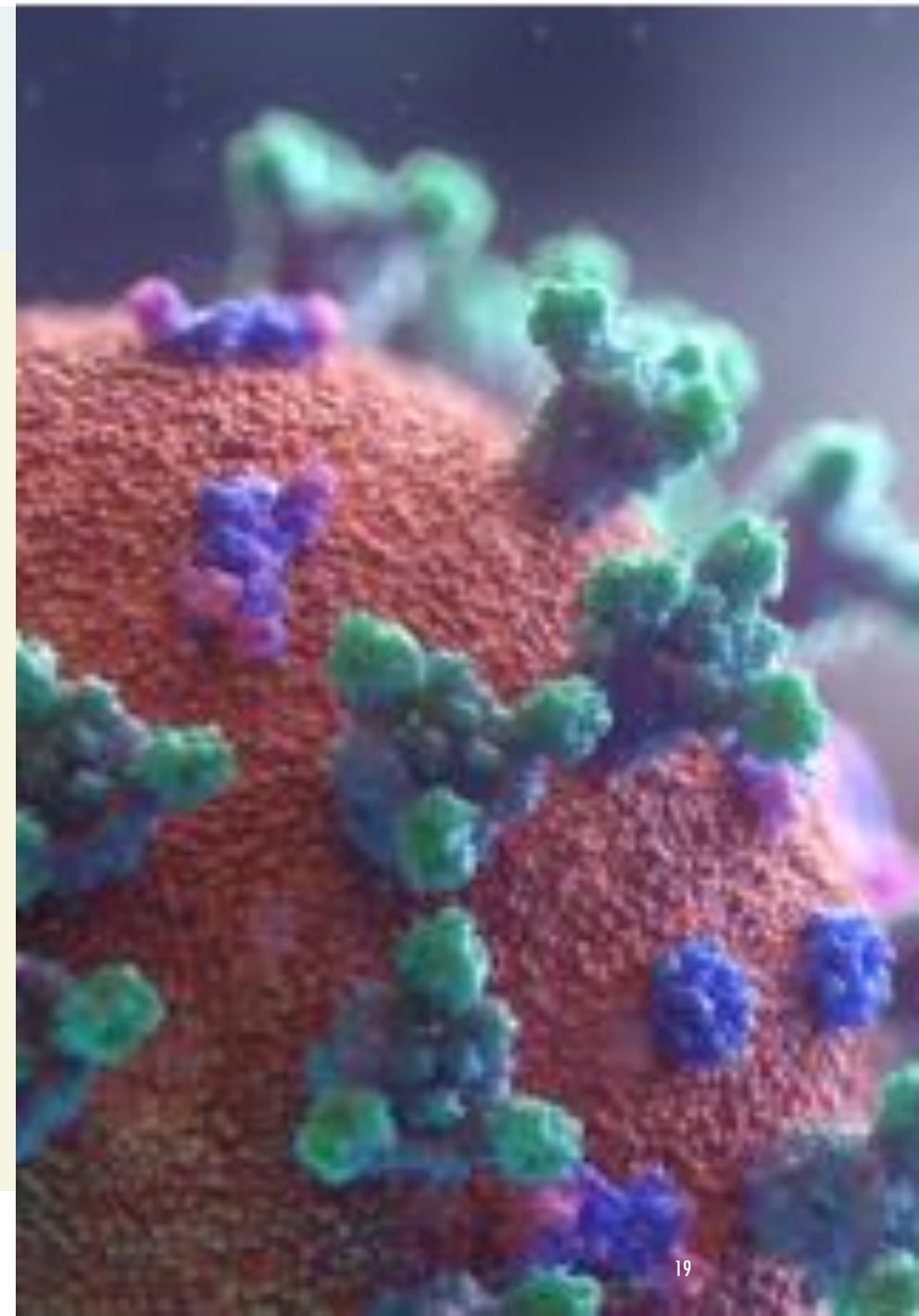
All programs – no account needed

My Santa Cruz County Mobile App or
www.getcalfresh.org

Medi-Cal – You will need to create an account
www.coveredca.com

Fax: 831-786-7100

Mail:
Human Services Department
P.O. Box 1320, Santa Cruz, CA 95061





CalWorks Program

(California Work Opportunity and
Responsibility to Kids)

REFERENCE FOR
FOR MORE
INFORMATION
ABOUT
ELIGIBILITY
REQUIREMENTS:

[CalFresh Fact Sheet](#)

[CalWORKs Fact Sheet](#)

[Medi-Cal Fact Sheet](#)

[Modified Adjusted Gross Income Medi-Cal Fact Sheet](#)

[General Assistance Fact Sheet](#)

<https://www.santacruzhumanservices.org/EmploymentBenefits>



General
ASSISTANCE

Department of
Health Care Services

