

HOW TO APPEAL A GENERAL ASSISTANCE PROGRAM DENIAL, DISCONTINUANCE OR REDUCTION OF BENEFITS

- 1) **Did you receive a notice of action** through either mail (you are responsible for the address you provided and to retrieve your mail) or handed to you, **informing you of any action that affects your eligibility, duration of benefits (including termination of benefits) or benefit levels (amount received)?**
 - a. If you were denied assistance, you will have received a Notice of Action. Advance notice is not required when an initial aid application request is denied. The effective date of the denial is the date the Notice of Action is issued.
 - b. The Notice of Action in cases of discontinuance or grant reduction must be provided 10-days prior to the effective date stated in the Notice of action.

- 2) **You may request to meet with (have a conference with) representatives of the County Department of Social Services General Assistance Program to discuss a Notice of Action.** Sometimes this initial conference can resolve issues without the need for an appeal. Scheduling and attending a conference will not affect your right to appeal. If the applicant/recipient is able to show that the action is incorrect or is able to establish good cause for a failure, the action shall be rescinded within three (3) business/working days.

- 3) **You may appeal the decision on a Notice of Action directly to the Department of Social Services.** This requires you to request the appeal hearing in writing (or you can completely fill out and return the original Notice of Action form requesting an appeal), within the 30 day window (or show good cause for failure to do so). A hearing will be scheduled where you can present your case as to why you disagree with the Notice of Action. The hearing will be heard in front of a hearing officer. The hearing officer will record the hearing. You are allowed to present written evidence or witness testimony on your behalf. You allowed to have someone represent you (stand in your shoes) at the hearing.

- 4) **The Appeal Request Must:**
 - Be requested **in writing or by filling out the back side of the Notice of Action notifying of intent to appeal and return the form.**
 - State the reasons** for disagreement with the action and include your case number.
 - Be signed and dated.**
 - Be filed within thirty (30) calendar days of the effective date on the Notice of Action.**
 - a. You have the right to ask for an appeal if you disagree with any county action. **You have only 30 calendar days to request an appeal.** The 30 calendar days appeal request period **starts from the date marked as the “Effective Date” on the Notice of Action and ends on the date the appeal is date stamped as received at the Department of Social Services (DSS), or the postmark date on the envelope,** if the request is mailed. If the postmark date cannot be determined, the date the request was received can be used. All requests for an appeal shall be date stamped on the day the request is received at the Department of Social Services (DSS).
 - b. If the last date to file the request for an appeal falls on a day when the Department of Social Service (DSS) offices are closed, then you shall have until the next business/working day to file the request.
 - c. You will be referred to as the claimant after you have filed the appeal request.
 - d. If you have good cause as to why you were not able to request an appeal within the 30 calendar days, you may still request an appeal and include evidence in your request that shows good cause. An appeal hearing may still be scheduled, if you are found to have shown good cause. Examples of good cause are; I was in jail or the hospital during the 30 calendar days when I should have requested the appeal and have documentation of it; a family member died during this time frame and I have a copy of the obituary or death certificate, etc.

- 5) **Representing yourself at the Hearing:** You (the claimant) may represent yourself during all aspects of the hearing process, or you may be represented by an attorney, an authorized representative, or any other person you designate, by signing a written statement to notify all parties of your (the claimant's) intent to have a representative speak on your behalf during the appeal hearing. You must authorize the person to be your representative in writing *prior to* the hearing if you (the claimant) does not attend the hearing.
- 6) **Overview of Appeal Hearing:** You will receive a notice explaining the date, time and location of the appeal hearing. County will record the appeal hearing. At the hearing, you will have an opportunity to present evidence (written and witnesses) and may be asked questions about the facts of your case. A decision will not be made at the appeal hearing. The appeal hearing officer will mail you the decision within 30 days after the appeal hearing. If you still disagree with the decision of the hearing officer, you may file a written request for review by the Director of Monterey County Department of Social Services or their designee. They will review the decision and the case file and make a final decision. For more details on each of these steps, please continue to read the information below.
- 7) **Appeal Hearing Rules:**
 - a. The claimant and/or authorized representative shall have the right to review the case record and/or any other evidence used in making a determination of eligibility. Such review shall be made available prior to the hearing.
 - b. Appeals shall be conducted in accordance with departmental procedures. All testimony shall be given under oath or by affirmation.
 - c. Witnesses may only testify at the hearing in your (the claimant's or authorized representative's) presence.
 - d. You (the claimant or authorized representative) shall have the right to testify, present witnesses, present written documentation and cross/examine witnesses.
 - e. Decisions by the Appeals Hearing Officer are adopted by the Department of Social Services.
- 8) **Denial of a Request for a Hearing:** Your request for an appeal hearing (or any portion of the request), may be denied in writing by sending a letter to you when:
 - a. The issue is not within the jurisdiction of the Department of Social Services appeals process.
 - b. The request for hearing is filed beyond the 30 calendar day time limit (with no good cause found).
 - c. The Appeals Hearing Officer determines at the hearing that the claimant or authorized representative is unwilling to present the case.
 - d. The Appeals Hearing Officer determines that the identical issue has been the subject of a previous hearing involving the claimant, within the previous twelve months.
 - e. The requestor of the hearing does not have standing to request the hearing.
 - f. The claimant abandons the hearing by failing to confirm or appear at the hearing without good cause.
- 9) **Request for Additional Review:** If the appeal is denied or dismissed, the claimant may file a written request for a review by the Director of the Monterey County Department of Social Services or their designee within ten (10) calendar days of the date the decision was adopted. The filing date shall be determined by the date the written request is received and date stamped by the Department of Social Services. Claimants will be informed within fourteen (14) calendar days if a request for review is granted.