

ONE Customer Service Center
PO Box 14015
Salem, OR 97309

Date: 09/05/2023
Your Case ID: [REDACTED]



Your SNAP Benefits - Some are Approved with Changes, Some are Ending

Hello [REDACTED],

Your Supplemental Nutrition Assistance Program (SNAP) information has been updated. This letter tells you about an update to your benefits due to a change made to your case.



SNAP benefits are **continuing with changes**. You will receive:

- **\$444.00** each month from **10/01/2023-02/29/2024**.



SNAP benefits are **ending for**:

- [REDACTED] on **09/30/2023**.



We understand this decision affects you. In this letter you will find:

- Overview of benefits
- Support and resources
- Changes you must report
- How to request a hearing

We are here for you if you need support or more information. You can call your local office at **1-971-673-7600** or the Oregon Eligibility (ONE) Customer Service Center at **1-800-699-9075 or 711 (TTY)**. Go to the [Get support](#) section in this letter for all support options available to you. You can also

SAVE THIS LETTER

find a direct phone number to speak to someone in another language at
<https://www.oregon.gov/dhs/Benefits/Documents/one-language-lines-translation.pdf>.

Get this letter in other formats: Call the ONE Customer Service Center to get this letter in other languages, large print, braille or a format you prefer. You can also ask for an interpreter. This help is free. We also accept relay calls.



SNAP benefits overview



SNAP benefits approved

Some of your household will continue to receive SNAP benefits. These benefits will continue until your certification period ends on 02/29/2024.

Date	Benefit amount
10/01/2023-02/29/2024 (5 months)	\$444.00 each month

Here's why you see a difference in your new and previous amounts:

These changes or amounts are calculated into your new benefit amount.



Your **SNAP benefits reduced** because:

- There was a change in your household members.

Your SNAP benefits are based on **4 individuals** and **\$1,271.00 gross monthly countable income**.
(Gross income is the income before taxes or other deductions.)



Approved individuals

[REDACTED], 24 years
[REDACTED], 23 years
[REDACTED] years



Benefit start date

03/27/2023
03/27/2023
03/27/2023



SNAP benefits ending

SNAP benefits are ending for the following individuals. You may reapply for benefits at any time or if the denial reason no longer describes your situation. Your eligibility for benefits may change.

We understand this decision affects you. Contact us or go to the [Get support](#) section in this letter for resources available to you.



[REDACTED], 27 years



Benefits end on

09/30/2023



Here's why:

You have reached the maximum time limit for ABAWD.



Did you know?

- Any benefit amount left on your Oregon Electronic Benefit Transfer (EBT) card at the end of the month is rolled over into the next month. If there's no activity on the card, SNAP cash benefits will expire 9 months after they are issued.
- SNAP Double Up Food Bucks lets you get more fruits and vegetables by matching a certain amount of SNAP dollars you spend at participating farmers markets. Visit <https://doubleuporegon.org> for more information.
- Able-Bodied Adult Without Dependents (ABAWD) is a person who is age 18 and not yet 50, without dependents.

Oregon Administrative Rules (OARs)

The following OARs were used to make the decisions in this letter. If you do not agree with the decisions in this letter or think we made a mistake, you can ask for a hearing. Go to the [Hearing rights](#) section in this letter to learn about your rights.

SNAP benefits approved

Household - This decision is based on these OARs: 461-110-0370; 461-110-0530; 461-110-0630; 461-115-0040; 461-115-0210; 461-115-0450; 461-135-0506; 461-135-0520; 461-135-0570; 461-140-0010; 461-140-0040; 461-145-0410; 461-150-0020; 461-150-0060 through 461-150-0090; 461-155-0190; 461-160-0060; 461-160-0070; 461-160-0430; 461-165-0060; 461-180-0080.

SNAP benefits reduced

Household - There was a change in your household members. This decision is based on these OARs: 461-170-0010; 461-170-0011; 461-180-0006.

SNAP benefits ending

[REDACTED] You have reached the maximum time limit for ABAWD. This decision is based on these OARs: 461-135-0520.

Get support

Contact ONE Customer Service Center if you:

- Have questions about your eligibility
- Need to give us information or documents
- Need to renew your benefits
- Need to report changes
- Need to find a different local APD, AAA or SSP office



Call

ONE Customer Service Center on weekdays:
7am to 6pm
1-800-699-9075 or 711 (TTY)
Local Office Number
1-971-673-7600



Visit Us

0311 - Oregon City
APD 221 Molalla Ave
Ste 104
Oregon City, OR 97045



Online

<https://one.oregon.gov>



Fax

1-503-378-5628



Email

Oregon.Benefits@odhsoh.a.oregon.gov

Contact Oregon Public Benefits Hotline for legal help with:

- Your rights, immigration requirements, identity documents
- Sexual assault, and education



Call

1-800-520-5292



Online

<https://go.usa.gov/xz2EP>

Contact 211 to:

- Connect with a community resource expert
- Find other resources such as housing, job search help and clothing



Call

211 or 1-866-698-6155
Weekdays: 7am to 11pm; Weekends: 8am to 8pm



Online

<https://211Info.org>



Text

Your zip code to **898211**



Email

help@211info.org

Contact Oregon Food Bank to:

- Find your local food bank



Call

1-503-282-0555



Online

Use the 'Food Finder' at
<https://oregonfoodbank.org>



Download the Oregon ONE Mobile app

Scan the QR code with a smartphone camera to download our app from Apple App Store or Google Play Store



Hover



Scan



Select

→ Take action

You may use this page to report changes

You must report changes in your household. Reporting changes can affect the benefits you receive. Let us know if any of the changes listed below happen.

→ You are in the Simplified Reporting System. This means you must report these changes **by the 10th day of the month after the change has happened.**

Changes you must report for SNAP

Have any of the following changed in your household?

- | | |
|---|--|
| <input type="checkbox"/> Your household gross monthly income (before taxes or deductions) goes over \$2,694.00* | <input type="checkbox"/> Someone in your household wins \$4,250 or more from lottery or gambling |
|---|--|

* When you report a change to income, you may receive a separate letter requesting the proof.

Changes you may want to report for SNAP

Have any of the following changed in your household?

- | | |
|--|---|
| <input type="checkbox"/> Your household has a reduction in gross monthly income (before taxes or deductions) | <input type="checkbox"/> Your household has more expenses |
| <input type="checkbox"/> Someone has moved or has a new mailing address | <input type="checkbox"/> Someone no longer lives with you or someone new lives with you |

Ways to report: You may report changes to us by calling the ONE Customer Service Center or your local office, by fax, email, letter, visiting your local office, or through your online account. You may use this page to report a change by checking off the boxes and giving us the page. Go to the [Get support](#) section in this letter for our contact information.



You have hearing rights. What are they? Why do you need them?

You have the right to ask for a hearing if you disagree with a decision about your benefits or an action taken on your case. If you ask for a hearing, you may also ask for your benefits to continue until a decision is made.

There is limited time to ask for a hearing or continued benefits. You can find this information on the next page.

We understand that this is a lot of information and can be confusing. See [Common questions about hearings](#) on the next page for more information about hearings.

If you still need support, you may call:

- Oregon Public Benefits Hotline at **1-800-520-5292** for free legal help; or
- Governor's Advocacy Office (GAO) at **1-800-442-5238** to help you work through questions, concerns, or complaints related to Oregon Department of Human Services (ODHS) programs or services.

Calling the hotline or GAO does not:

- Request a hearing.
- Change the hearing request.
- Change the continued benefits deadline.

Ways to ask for a hearing

For all programs:



By using the request form

Fill out an Administrative Hearing Request Form (MSC 0443) at

<https://sharedsystems.dhsoha.state.or.us/DHSForms/Served/me0443.pdf> and return it to an ODHS office.

Other ways for food benefits and medical eligibility:



By phone

Call any ODHS office, or
ONE Customer Service
Center: **1-800-699-9075** or
711 (TTY)



In writing

Put your request in writing
and send it by email, mail,
in-person or upload to
applicant portal at
<https://one.oregon.gov>



In-person

Visit any ODHS/OHA office
and ask a worker
in-person.



Common questions about hearings

How long do I have to ask for a hearing?

ODHS must get your request for a hearing within a certain time depending on the program. The time is calculated from the date of this notice **09/05/2023**.

- For medical eligibility — 90 days. For medical service denials: 60 days for fee-for-servicemembers and 120 days for Coordinated Care Organization (CCO) enrolled members.
- For food benefits — 90 days. However, if you disagree with the current amount of your food benefits, you may request a hearing at any time.
- For all Temporary Assistance Needy Families (TANF) program benefits — 45 days. For TANF reductions due to not cooperating with your Job Opportunity and Basic Skills (JOBS) case plan — 90 days.
- For all other benefits like domestic violence assistance, child care benefits — 45 days.

I'm an active-duty service member in the military. How does that change the process?

Active-duty servicemembers have a right to delay these proceedings under the federal Servicemembers Civil Relief Act (SCRA). For more information, you may contact the Oregon State Bar **1-800-452-8260**, the Oregon Military Department **1-503-584-3571** or the nearest legal assistance office,
<https://legalassistance.law.af.mil>

Who can help with my hearing?

For food benefits and for medical programs,

anyone may represent you. For all other programs, you must represent yourself or have a lawyer or a legal assistant represent you. You can call Oregon Public Benefits Hotline at **1-800-520-5292** for free legal advice and possible representation.

Who would hold my hearing?

The Office of Administrative Hearings (OAH) holds hearings. OAH is independent from the Oregon Department of Human Services (ODHS) or Oregon Health Authority (OHA).

What happens at a hearing? Where can I find more information about hearings process?

At the hearing, you can tell OAH why you do not agree with the decision. You can have people testify for you. ODHS will tell OAH why they support the decision and may have people testify. The laws about your hearing rights and the hearing process are at Oregon Administrative Rules (OARs) 137-003-0501 to 0700, 410-120-1860, 410-141-3900, 461-025-0300 to 0375, Oregon Revised Statutes (ORS) 183.411 to 183.470 and ORS 411.095.

How can I keep getting benefits until my hearing (continued benefits)?

If your benefits were reduced or closed, you can ask to keep your benefits the same until the hearing decision. This is called continued benefits. Let ODHS or OHA know if you want continued benefits when you request a hearing, and they will decide if you qualify.

- If you don't keep getting benefits and win the

hearing, ODHS or OHA will give you the benefits you should have received.

- If you ask to keep getting benefits but lose the hearing or miss your hearing without good cause, you will need to pay back the continued benefits.

Is there a deadline to ask for continued benefits?

You must ask by whichever date is later.

- "Effective Date" on the notice. This is the date from which your benefits are closed.
- 10 days after the date of the notice.
- For medical benefits only, 10 days after the receipt of the notice.

What happens if there is no hearing?

If you do not ask for a hearing on time, withdraw the hearing request or miss your hearing without good cause, you may lose your right to a hearing. This notice will become the final ODHS or OHA decision — a final order by default. You will not get a separate final order by default. The case file, along with any materials you submitted in this matter, is the record. The record is used to support the ODHS or OHA decision upon default. You may appeal the final order by default by filing a petition in the Oregon Court of Appeals (ORS 183.482). If you withdraw a hearing request or miss your hearing, the appeal deadline is set out in the dismissal order. If you do not ask for a hearing, this appeal must be filed within 60 days of the date this notice becomes a final order, by default. The time to appeal from default is calculated from the date of this notice 09/05/2023 as follows:

- Medical eligibility — 150 days. Medical service denials — 120 days for fee-for-servicemembers and 180 days for CCO

enrolled members.

- Food benefits — 150 days.
- TANF program benefits — 105 days. TANF reductions due to not cooperating with your JOBS case plan — 150 days.
- All other benefits like domestic violence assistance, child care benefits - 105 days.

Can I have an expedited hearing?

You may have the right to an expedited, or sooner, hearing for:

- Expedited or disaster food benefits.
- Refugee benefits.
- JOBS and Pre-TANF payments.
- Temporary Assistance for Domestic Violence Survivors (TA-DVS) benefits.
- Medical — you have an immediate need for health services and standard timeline for the appeal process could jeopardize your life or health, ability to attain, maintain, or regain maximum function.
- ODHS or OHA closed or reduced your benefits and then denied continued benefits.

Non-Discrimination Policy

ODHS and OHA follow state and federal civil rights laws. We do not discriminate because of a person's race, color, disability, national origin, religion, sex, sexual orientation, gender identity, marital status, age, or any other protected class status.

ODHS is the Department responsible for determining Oregon Health Plan (OHP) eligibility. If you believe you have been treated differently than others by an ODHS office or as a part of the eligibility determination process, please contact:
Email: GAO.CR@dhs.oha.state.or.us
Call: **1-800-442-5238** (All relay calls accepted)
Fax: **1-503-378-6532**

OHP members also have a right to make a report of discrimination to the Oregon Health Authority:
Visit <https://go.usa.gov/xz2Ej>
Email: OHA.PublicCivilRights@state.or.us
Call **1-844-882-7889 or 711 (TTY)**
You also have a right to file a civil rights complaint

with the US Department of Health and Human Services Office for Civil Rights.
Visit <https://hhs.gov>
Email: OCRComplaint@hhs.gov
Call **1-800-368-1019 or 1-800-537-7697 (TDD)**

