



Date: 8/7/2024
Application ID: [REDACTED]
Application Date: 5/7/2024



NOTICE OF DENIAL

Your application for the Heating Assistance Program received on 5/7/2024 is denied.

Your application is not timely because it wasn't received, or postmarked by April 30. The deadline, set by regulation, is noted on the application. This action is supported by Heating Assistance Policy Manual Section 3001-2J and state regulations at 7 AAC 44.020(c).

Application has been denied due to application date being after 04/30/24.

If your situation changes, you may reapply before May 1, 2024. To reapply, you must complete a new application and provide proof of income for the month prior to the date you sign your application. You can obtain a new application by calling 1-800-478-7778, at any local DPA office, at your vendor's place of business, through your local fee agent, or on-line at www.heatinghelp.alaska.gov. Your case cannot be redetermined after the April 30, 2024 filing deadline.

If you have additional questions, feel free to contact us by phone at 1-800-478-7778 or by email at hss.dpa.offices@alaska.gov

YOUR RIGHTS AND RESPONSIBILITIES

You have the right to discuss any action taken on your application or case with a caseworker or supervisor.

FAIR HEARINGS

If you disagree with an action taken by the Division of Public Assistance that affects the benefits or services you receive, you can ask for a fair hearing. The request for SNAP (formerly known as Food Stamps) may be made to any employee of the Division in person, by telephone, or in writing; requests for all other programs must be made in writing. If your disagreement has to do with medical billing or services, contact the Medicaid Recipient Information Helpline at 1-800-780-9972. Usually, you must ask for a fair hearing within 30 days from the date of the notice. SNAP fair hearing requests must be made within 90 days from the effective date of the action. At the hearing you may represent yourself or be represented by a legal representative. You may qualify for free legal advice and representation by contacting the Alaska Legal Services Corporation.

You may continue to receive Alaska Temporary Assistance, Adult Public Assistance, or Medicaid program benefits until a hearing decision is made. SNAP can continue until a hearing decision is made or until the certification period ends if you request the hearing before the effective date of the action or within 10 days from the date the notice is mailed. If the hearing decision is not in your favor, you may be required to repay benefits you received while you waited for the decision.

FAIR HEARING REQUEST

You may request a hearing by filling out the following information and delivering or mailing this request to the Public Assistance office address on the front of this notice. **Please fill this out if you want to request a fair hearing.**

Reason for Fair Hearing Request: _____

- ☐ Continue my benefits at the level received before this notice until the hearing decision is made, or my SNAP certification period ends. I understand that if the hearing decision is not in my favor, I am responsible for paying back any extra benefits I receive while waiting for the hearing decision.
- ☐ Do not continue my benefits at the level received before this notice. I accept the amount stated on this notice, knowing that if the hearing decision is in my favor I will be paid for any benefits wrongly denied me.

Signature _____ Date: _____

WHEN DO I NEED TO REPORT CHANGES?

You must report changes in your household within 10 days of which you know of the change. If you receive Alaska Temporary Assistance and a child leaves your home, you must report this within 5 days.

WHAT CHANGES DO I NEED TO REPORT?

If you receive Alaska Temporary Assistance, Adult Public Assistance, or Medicaid Program benefits, you must report any and all changes to information provided on your application, including changes in your medical insurance. If you receive SNAP benefits and you do not receive benefits for any other program, you only need to report when your household's total gross income goes over the income limit for your household.

If you receive public assistance services, the changes you must report include, but are not limited to the following:

- Starting or stopping a job, change in wage rate, change from part-time to full-time, or full-time to part-time
- When money you receive from sources other than working changes by more than \$50
- Someone moves into or out of your home
- You move or get a new mailing address
- Your household gets a vehicle
- Your household has more than \$2000 total in cash and money in bank
- Changes in your child support payment or obligation
- Changes in your medical insurance if you or anyone in your household gets Medicaid
- Pregnancy changes

CIVIL RIGHTS

The Civil Rights Act of 1974 states, "No person in the United States, on the grounds of race, color, age, sex, handicap, religious creed, political belief or national origin shall be excluded from participation in, be denied the benefits of, or be subjected to discrimination under any program receiving federal assistance."

COMPUTER MATCHING AND YOUR SOCIAL SECURITY NUMBER

Your Social Security Number will be used to obtain information from various state and federal agencies through computer matching. This information may be used to determine your eligibility. You are not required to provide a Social Security Number (SSN) or citizenship information for anyone in your household who will not receive benefits from a public assistance program.

WELL CHILD CHECKUPS AND FAMILY PLANNING SERVICES

Medicaid pays for well child checkups, dental care, and other services for children through their 21st birthday. Ask your local Public Health Nurse, clinic, or health care provider for more information. If Medicaid coverage ends and you need help find low cost or free family planning services, call your local Public Health Center or AK Info at 1-800-478-2221.