

End of EA Benefits Webinar for MCOA

SNAP Outreach Unit,
Department of Transitional Assistance
February 7, 2023



Department of
Transitional
Assistance

Federal SNAP Emergency Allotments Ending Webinar



Department of
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Agenda

- SNAP Emergency Allotments
- Key Messages
- Outreach Materials
- Benefit Maximization
- Submitting Documents to DTA
- EBT Card Security
- Resources
- SNAP Outreach Partnership

SNAP Emergency Allotments

- The extra COVID SNAP benefits are the difference between the approved benefit amount and the maximum amount for a household size, with a minimum amount of \$95 a month. These benefits are known as SNAP Emergency Allotments.
- These extra payments have been added to the EBT cards at the beginning of each month.
- Since March 2020, Massachusetts has elected to utilize this temporary benefit program that was made available under the Families First Coronavirus Relief Act.



Why are they ending?

Recent action by the federal government (through the Congressional Consolidated Appropriations Act 2023) ends the extra COVID SNAP benefits as of February 2023.

This means that
**households will receive
their last payment on
March 2, 2023.**



Key Messages

- 1** The last extra COVID SNAP payment is March 2, 2023.
- 2** **Reminder:** Unused SNAP benefits roll over month to month. Change the PIN on your EBT card frequently to protect against skimming.
- 3** There are certain expenses households can share with DTA to potentially increase their normal monthly SNAP benefit amount.

Key Messages

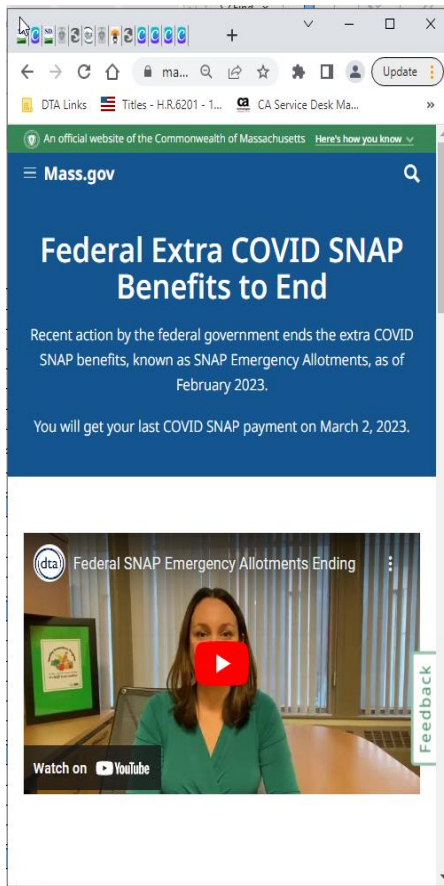
4

Other resources are available to help households, including food pantries, Healthy Incentives Program (HIP) and tax deductions.

5

Encourage households to visit [Mass.gov/ExtraCOVIDSNAP](https://www.mass.gov/ExtraCOVIDSNAP) to learn how they can get the most out of their SNAP benefits, save some of it to help after March 2, and be connected with other resources.

Mass.gov/ExtraCOVIDSNAP



Frequently Asked Questions (FAQs) →

Learn more about the extra COVID SNAP benefits ending from answers to these frequently asked questions.

Get Other Help →

Find food and other resources

Get the Most SNAP →

Tell DTA about changes that may increase your SNAP!

Your SNAP may go up if you tell DTA about:

- Medical costs over \$35 a month for anyone in your SNAP household who is 60 or older or has a disability
- Increase to your housing costs (rent/mortgage)
- Child or disabled adult care costs

Feedback

Outreach Materials

Download flyers, social media text/graphics and sample robo call/text/email to help spread the word.

DOWNLOAD MATERIALS

Outreach Materials in 15 Languages!

Resources: <https://www.mass.gov/info-details/federal-snap-emergency-allotment-ending-toolkit>

- Flyers
- Text/email/robo call templates
- Social media posts and graphics
- Video

Federal Extra COVID SNAP Ending

What is COVID SNAP?

During COVID, Massachusetts households have been getting extra SNAP at the beginning of each month to buy food.



Due to federal action, the last COVID SNAP payment is March 2, 2023.

How will this impact my SNAP benefits?

Starting in April, you will get only 1 monthly payment. That is your normal benefit. Find the amount on DTA Connect or by calling 877-382-2363.

Reminder: Unused SNAP benefits roll over each month. Change the PIN on your EBT card regularly to protect your benefits.

You may be able to increase your normal SNAP benefits by telling DTA about:

- Medical costs over \$35 a month for anyone in your SNAP household who is 60 or older or has a disability,
- If your housing costs have gone up (rent/mortgage), and
- Child or disabled adult care costs.

Tell DTA About These Costs:

- Upload a written note on DTA Connect
- Call the DTA Assistance Line at 877-382-2363
- Visit a DTA office or work with a community SNAP outreach partner: [Mass.gov/ContactDTA](https://mass.gov/ContactDTA)

If you get SNAP, you can automatically participate in HIP!



HIP puts money back on your EBT card when you use SNAP to buy fruits and vegetables from HIP farm vendors. Depending on household size, you can get \$40 to \$80 a month.



[Mass.gov/ExtraCOVIDSNAP](https://mass.gov/ExtraCOVIDSNAP)



អត្ថប្រយោជន៍បន្ថែមនៃកម្មវិធី
COVID SNAP នឹងបញ្ចប់នៅ
ថ្ងៃទី 2 ខែមីនា ឆ្នាំ 2023



ស្វែងយល់បន្ថែម

[Mass.gov/ExtraCOVIDSNAP](https://mass.gov/ExtraCOVIDSNAP)



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FAQ: What is my SNAP balance?

How do I check my balance/find out my normal monthly SNAP benefit amount?

- You can check your balance and find your normal monthly SNAP benefit amount on DTAConnect.com, the [DTA Connect mobile app](#) or by calling the number on the back of your EBT card (800-997-2555).

You can also find this amount on the DTA Assistance Line by following these steps:

- Call 877-382-2363
- Choose your language
- Press 1 and authenticate
- Press 1 for SNAP
- Press 1 again to hear your case summary. This information includes your normal monthly benefit amount.

For more FAQs go to: mass.gov/info-details/frequently-asked-questions-faqs-on-federal-covid-extra-snap-ending

Publicly available data

In support of government transparency and with a focus on equity and inclusion, DTA has made data publicly available on the impact of the end of the emergency allotments in Massachusetts by demographic characteristics and city/town.

- You can find the report here:
<https://www.mass.gov/lists/data-on-impact-of-federal-snap-emergency-allotments-ending-on-massachusetts-households>

Maximizing Client's Benefits

Get the Most Out of SNAP

Due to the receipt of the Emergency Allotments, your client may not have reported changes to their case regarding:

- Out of pocket medical expenses over \$35 for anyone in their household over 60 or has a disability
- Rent or mortgage increase
- Child or disabled adult care costs

Shelter Deduction



Rent, mortgage,
property taxes,
homeowner's insurance,
condo fees, mobile
home park rent

Heating/Cooling: \$860
Non-heating: \$525
Telephone: \$60

Maximum Shelter
Deduction \$624 (cap)
Note: cap does not
apply to anyone
elderly or disabled.

Dependent Care Deduction

The actual costs of the care of a child or elder necessary for a household member to:

- search for, accept or continue employment
- comply with SNAP Path to Work
- attend training or education preparatory to employment



Allowable expenses include, but are not limited to:

Transportation to and from program site, child & adult care costs, before school, after school &/or extended day programs, mileage, etc.



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Medical Expense Deduction

Health Insurance:

- Health insurance and hospitalization policy premiums.
- Medicare premiums or monthly subsidy.
- Medicaid spend-down or cost-sharing.

Transportation/Lodging to Obtain Medical Treatment or Services:

- Mileage for use of private car, friend or family member driving you to pharmacy or medical appointment.
- Actual cost of bus, subway, the RIDE, shuttle or taxi

Medical Care:

- Doctor /clinic visits
- Psychotherapy
- Hospital /outpatient care
- Prescribed alternative therapies
- Dental care
- Rehabilitation services
- Nursing care / home nursing care
- Service animal expenses

Medical Expense Deduction

Over the Counter Medications:

DO NOT need to be approved by a licensed medical practitioner or a qualified health professional.

Examples:

- Pain relievers
- Skin care ointments
- Foot care supplies
- Vitamins
- Herbal supplements
- Dietary supplements
- Antacids
- Insulin

Health Related Supplies:

- Foot care
- Dentures
- Hearing Aid Batteries
- Incontinence supplies
- Heating pads
- Hearing aids
- Contact lenses
- Eyeglasses



Medical Expense Deduction

Prescription Medications:

- Direct payments
- Co-pays
- Postage and handling costs for receiving medications by mail



Medical Equipment:

- Sickroom equipment (including rental)
- Purchase / repair of wheelchairs or mobility aids
- Prosthetics
- Personal emergency response systems (Lifeline)
- Communication equipment for the hearing or visually impaired

Standard Medical Deduction Waiver

Standard Medical Deduction (SMD) Waiver

- Older adults (60+) and/or clients with disabilities can now self-declare medical expenses, provided that these expenses are in the SMD range*
- **Example:** If the client has a hospital bill for \$55, copay for \$38, prescriptions for \$42, and over-the-counter medication for \$37, the client can self-declare all of them because their total (\$172) is within the SMD range.

* **The SMD range** = Medical expenses greater than \$35 and less than (or equal to) \$190 per month

Standard Medical Deduction (SMD) Waiver

Medical Expenses Above \$190

- **Example:** Client has a hospital bill for \$75, copay for \$50, prescriptions for \$50, and over-the-counter medications for \$30 (\$205 total)
 - Client can self-declare any three out of the four items to get into the SMD range
 - However, the client must submit verification of all four items to receive the actual medical expense deduction

Medical Deductions Self Declaration Form

Out-of-Pocket Medical Expenses Form

Massachusetts Department of Transitional Assistance



Instructions: Anyone who is 60 or older or gets benefits for a disability can submit out-of-pocket medical expenses to DTA. Please complete the entire form. Only write down information you have. We will tell you if we need more information. Please use a new form for each person in your SNAP case who qualifies. If you need more space, attach a sheet of paper.

The information I am giving is true and complete to the best of my knowledge.

Name of person age 60+ or disabled

DTA Agency ID

Your signature

Date

You may give this information to DTA in any of the following ways:

- **Online:** DTACConnect.com or DTA Connect Mobile App
- **Phone:** DTA Assistance Line at 877-382-2363
- **Mail:** DTA Processing Center, P.O. Box 4406, Taunton, MA 02780
- **Fax:** (617) 887-8765
- **In person:** Scan at a local DTA office

Repeating Medical Expenses		
Co-payments	Cost	How often? (select one)
<input type="checkbox"/> Doctor, hospital	\$ _____	<input type="checkbox"/> weekly <input type="checkbox"/> monthly <input type="checkbox"/> annually
<input type="checkbox"/> Dentist	\$ _____	<input type="checkbox"/> weekly <input type="checkbox"/> monthly <input type="checkbox"/> annually
<input type="checkbox"/> Physical therapy	\$ _____	<input type="checkbox"/> weekly <input type="checkbox"/> monthly <input type="checkbox"/> annually
<input type="checkbox"/> Chiropractor	\$ _____	<input type="checkbox"/> weekly <input type="checkbox"/> monthly <input type="checkbox"/> annually
<input type="checkbox"/> Mental health services	\$ _____	<input type="checkbox"/> weekly <input type="checkbox"/> monthly <input type="checkbox"/> annually
Pharmacy costs	Cost	How often? (select one)
<input type="checkbox"/> Prescriptions	\$ _____	<input type="checkbox"/> weekly <input type="checkbox"/> monthly <input type="checkbox"/> annually
<input type="checkbox"/> Over-the-counter drugs/supplies	\$ _____	<input type="checkbox"/> weekly <input type="checkbox"/> monthly <input type="checkbox"/> annually
<input type="checkbox"/> Wound care supplies	\$ _____	<input type="checkbox"/> weekly <input type="checkbox"/> monthly <input type="checkbox"/> annually
<input type="checkbox"/> Adult diapers	\$ _____	<input type="checkbox"/> weekly <input type="checkbox"/> monthly <input type="checkbox"/> annually
<input type="checkbox"/> Vitamins and herbal health remedies	\$ _____	<input type="checkbox"/> weekly <input type="checkbox"/> monthly <input type="checkbox"/> annually

(Form continues on the other side.)

Medical supply costs	Cost	How often? (select one)
<input type="checkbox"/> Hearing aids/batteries	\$ _____	<input type="checkbox"/> weekly <input type="checkbox"/> monthly <input type="checkbox"/> annually
<input type="checkbox"/> Contact lenses	\$ _____	<input type="checkbox"/> weekly <input type="checkbox"/> monthly <input type="checkbox"/> annually
<input type="checkbox"/> Diabetes supplies	\$ _____	<input type="checkbox"/> weekly <input type="checkbox"/> monthly <input type="checkbox"/> annually
<input type="checkbox"/> Adhesives	\$ _____	<input type="checkbox"/> weekly <input type="checkbox"/> monthly <input type="checkbox"/> annually

Other health costs	Cost	How often? (select one)
<input type="checkbox"/> Home health or adult day care	\$ _____	<input type="checkbox"/> weekly <input type="checkbox"/> monthly <input type="checkbox"/> annually
<input type="checkbox"/> Gym membership	\$ _____	<input type="checkbox"/> weekly <input type="checkbox"/> monthly <input type="checkbox"/> annually
<input type="checkbox"/> Acupuncture or alternative medicine	\$ _____	<input type="checkbox"/> weekly <input type="checkbox"/> monthly <input type="checkbox"/> annually
<input type="checkbox"/> Service animal costs	\$ _____	<input type="checkbox"/> weekly <input type="checkbox"/> monthly <input type="checkbox"/> annually
<input type="checkbox"/> Housekeeping	\$ _____	<input type="checkbox"/> weekly <input type="checkbox"/> monthly <input type="checkbox"/> annually

Insurance Premiums: Provider Name	Cost	How often? (select one)
<input type="checkbox"/> Health: _____	\$ _____	<input type="checkbox"/> weekly <input type="checkbox"/> monthly <input type="checkbox"/> annually
<input type="checkbox"/> Drug: _____	\$ _____	<input type="checkbox"/> weekly <input type="checkbox"/> monthly <input type="checkbox"/> annually
<input type="checkbox"/> Other: _____	\$ _____	<input type="checkbox"/> weekly <input type="checkbox"/> monthly <input type="checkbox"/> annually

Travel (Non-driving)	Cost	How often? (select one)
<input type="checkbox"/> Taxis, rideshare (Uber, Lyft, etc.)	\$ _____	<input type="checkbox"/> weekly <input type="checkbox"/> monthly <input type="checkbox"/> annually
<input type="checkbox"/> Public transportation/The Ride	\$ _____	<input type="checkbox"/> weekly <input type="checkbox"/> monthly <input type="checkbox"/> annually
<input type="checkbox"/> Parking, tolls	\$ _____	<input type="checkbox"/> weekly <input type="checkbox"/> monthly <input type="checkbox"/> annually

Travel by car: For any medical appointments or pharmacy. There and back is 2 trips.

Provider name and address (street, city)	Number of trips	How often? (select one)
Name: _____	_____	<input type="checkbox"/> weekly <input type="checkbox"/> monthly <input type="checkbox"/> annually
Address: _____		
Name: _____	_____	<input type="checkbox"/> weekly <input type="checkbox"/> monthly <input type="checkbox"/> annually
Address: _____		

Other One-Time Medical Expenses			
One-Time Costs	Cost	One-Time Costs (cont.)	Cost
<input type="checkbox"/> Glasses	\$ _____	<input type="checkbox"/> Communication equipment	\$ _____
<input type="checkbox"/> Wheelchair	\$ _____	<input type="checkbox"/> Medical procedure	\$ _____
<input type="checkbox"/> Walker	\$ _____	<input type="checkbox"/> Other _____	\$ _____
<input type="checkbox"/> Prosthetics	\$ _____	<input type="checkbox"/> Other _____	\$ _____
<input type="checkbox"/> Crutches	\$ _____		
<input type="checkbox"/> Dentures	\$ _____		

SNAP-Med-Exp
09-372-1022-05

SNAP-Med-Exp
09-372-1022-05



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<https://www.mass.gov/doc/out-of-pocket-medical-expenses-form/download>

Working with DTA

To speak with a DTA worker about a client's case:

- Can conduct a conference call with the client & DTA:
 - 877-382-2363 Main #, or
 - If client is 60+, call Senior Assistance Office 833-712-8027

If the client is not present, submit a release to DTA granting permission to discuss their case:

- VARI-01 form or,
- Note from client granting permission

Submitting Documents to DTA

Mass.gov/DTAConnectHelp



Follow these steps below to send your documents to DTA via the DTA Connect mobile app.

- Open the DTA Connect mobile app on your phone
- Click on the upload button at the bottom of the screen. It looks like a camera.
- Read the upload instructions and click confirm.
- Next, it will ask you what kind of documents you are uploading.
 - Submit Verification
 - Voluntary Request to Stop Benefits
 - Request for authorized representative
 - Request for replacement Due to Household Misfortune
- Click on whichever document type you are uploading
- Now you can select which household member the document is for by clicking person and selecting the household member
- Then click the gray box that says photo instructions to read tips on taking a photo of the document
- Now click on the photo icon on the page. You can choose to upload a photo from your photo library or take a photo.
 - If you click take photo, your camera will open up and you can click the circle button to take the photo. You then can click use photo or retake. If you are all set, click use photo.
- If you need to select multiple pages, you can click the photo icon again to add more.
- Finally, click Submit in the top right hand corner of the screen. Click submit again. And then click confirm at the bottom of the page. A message will pop up saying your document has been submitted.



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Submitting Documents to DTA

Mass.gov/DTAConnectHelp



Follow these instructions below to send your documents to DTA via DTAConnect.com.

- Log in to DTAConnect.com
- Click Documents at the top of the screen
- Click on the blue box that says Send Documents to DTA
- Read the upload instructions and click continue to step 2
- Next, it will ask you what kind of documents you are uploading.
 - Submit Verification
 - Voluntary Request to Stop Benefits
 - Request for authorized representative
 - Request for replacement Due to Household Misfortune
- Click on whichever document type you are uploading. The box will turn blue
- Now click continue to step 3
- Next select which household member the document is for
- Click photo instructions to read tips on how to take a photo of documents
- Click on choose a file to send
- Find the document you want to upload from your computer and click open
- If you want to send more than one document, click add another file
- When you are done, click send to DTA at the bottom of the page. A pop up message will appear saying your document(s) have been submitted

Submitting Documents to DTA

You can also fax or mail your client's documents to DTA:



Fax: (617) 887-8765

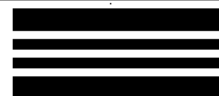


DTA Document
Processing Center
PO Box 4406
Taunton, MA 02780-
0420

- Use the mail/fax cover sheet when submitting



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Department of Transitional Assistance (DTA) Electronic Document Management (EDM) Mail/Fax Cover Sheet

Please print clearly. Use this cover sheet when mailing or faxing documents to DTA.

Head of Household Information

Name: _____
Last 4 digits of Soc. Sec. No: _____
Date of birth: _____
AP ID (if applicable): _____
No. of pages (including cover sheet): _____
Date: _____

Sender

Name: _____
Phone No: _____
Name of Agency (if applicable): _____

Important Message

Do NOT photocopy cover sheets. Cover sheets must be originals, not copies. Use one cover sheet for each household. Do NOT use the same cover sheet to send items for more than one household.

Fax or Mail Information

Documents should be sent to the address below (mail or fax) to avoid a delay in processing.

DTA Document Processing Center
PO Box 4406
Taunton, MA 02780-0420
Fax: 617-887-8765

This facsimile transmittal may contain information that is privileged, confidential, or exempt from disclosure under applicable law and is intended for the use of only the individual or department to which it is addressed. If you are not the recipient, or the employee or the agent responsible for the delivery of this transmittal to the intended recipient, please notify the sender by telephone at the above number and destroy the attached documents. Anyone other than the intended recipient is hereby notified that any dissemination, distribution, or copying of this communication is strictly prohibited.

Believing you can.

www.mass.gov/dta



EBT Card Security



- Due to an increase in the theft (“skimming”) of benefits on EBT cards, DTA is instructing clients to re-PIN their EBT card prior to each benefit issuance
- Direct deposit is also available as a safe way to receive TAFDC and EAEDC benefits
- More information:
Mass.gov/ProtectYourEBT

How to re-PIN:

1. Call the number on the back of the EBT card: 800-997-2555.
2. Choose the preferred language.
3. Enter the number on the front of the card.
4. Press 2 to PIN the EBT card.
5. Enter the last 4 digits of the Social Security Number (SSN). If a client does not have an SSN, they enter the last 4 digits of the 99 number assigned by DTA.
6. Enter the Date of Birth, for example: 12 01 1989 for December 1, 1989.
7. Enter a NEW 4-digit PIN; then enter it again. Choose a different PIN from any previous PINs.

EBT Card Security



How to Report Fraud:



By phone: Call our toll-free hotline at 1-800-372-8399



By mail: Download the [Suspected Fraud Reporting Form](#) and mail the completed form to:

DTA Program Integrity
Fraud Investigation Unit
P.O. Box 4411



Taunton, MA 02780-0435

By fax: Download the [Suspected Fraud Reporting Form](#) and fax the completed form to the Fraud Investigation Unit at: (617) 348-5479



Online: By Email: DTA.ReportFraud@MassMail.State.MA.US

By Online Form: [Report Department of Transitional Assistance Fraud](#)



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Additional Resources

Healthy Incentives Program

Earn More SNAP Dollars
with the Healthy Incentives Program!

Spend your SNAP dollars on farm-fresh fruits and vegetables at participating Healthy Incentives Program (HIP) retailers and have the amount of your purchase instantly added back to your EBT card!



Farmers Markets
Look for participating farmers at regularly scheduled markets in your town or nearby, selling fresh fruits and vegetables.



Farm Stands
On-farm stores where you can buy fresh fruits and vegetables, right from the hands that picked them.



Mobile Markets
Markets that bring farm-fresh produce right to your community.



CSA Farm Shares
Membership-based service that provides your family with fresh fruits and vegetables every week.



Look at what you can earn each month! (based on household size)

\$40 1-2 PEOPLE | **\$60** 3-5 PEOPLE | **\$80** 6+ PEOPLE

- The Healthy Incentives Program (HIP) puts money back on an EBT card* when one uses SNAP to buy healthy, local fruits and vegetables from HIP farm vendors. **Up to a monthly cap of \$40, \$60, \$80*
- SNAP households are automatically enrolled in HIP
- HIP farm vendors:
 - Farmers' markets
 - Farm stands
 - Mobile markets
 - Community supported agriculture (CSA) aka farm share program

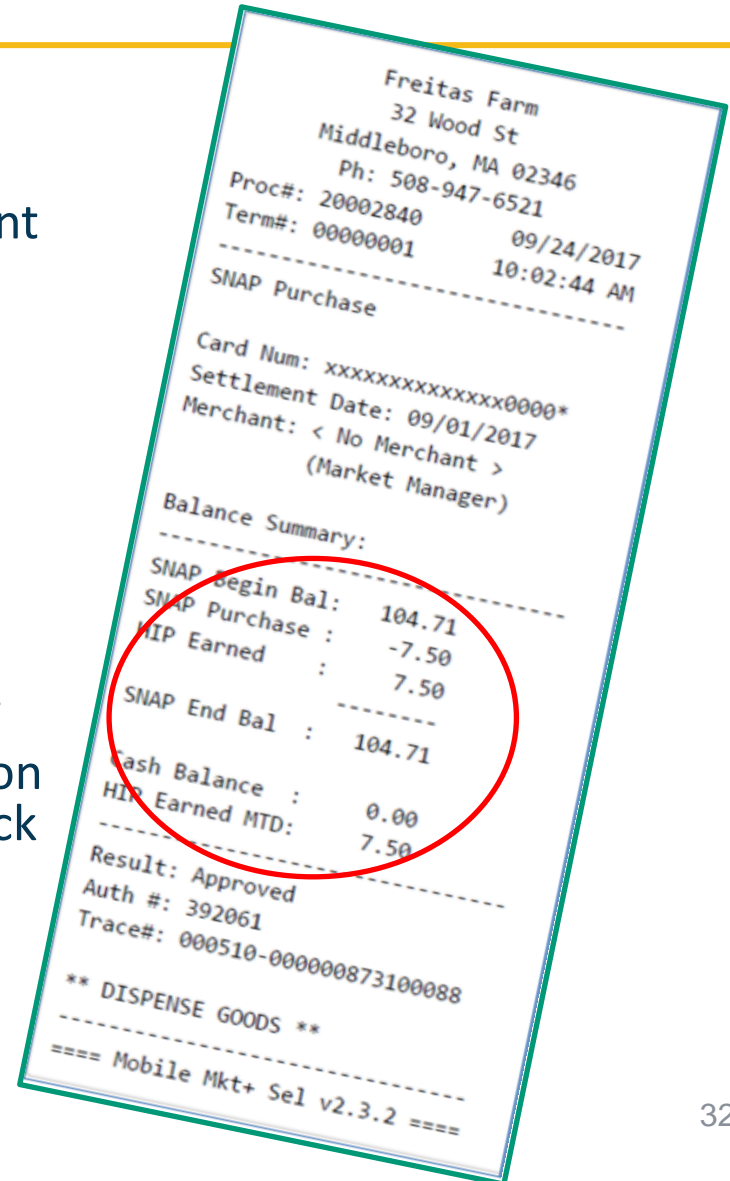
What do clients need to know before using HIP?



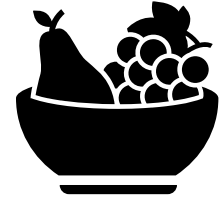
- Make sure they have SNAP benefits left on their EBT card. If their SNAP balance is zero, they will not be able to use HIP until they have SNAP benefits available again.
- HIP will put the SNAP dollars spent on HIP produce back onto their EBT card instantly. Once the money has been put back on their EBT card, they can spend it at any SNAP retailer like always.
- Only certain vendors process HIP.
- Each type of vendor may process HIP a little differently.

The Healthy Incentives Program

- Visit the vendor. Make sure they process HIP.
- Choose the fruits and vegetables you want to buy and swipe your EBT card to pay.
- The vendor will charge you in SNAP and enter the amount that is eligible for HIP.
- The amount eligible for HIP will immediately be put back onto your EBT card, replacing the SNAP you spent up to your monthly cap of \$40/\$60/\$80
- The receipt will also show the amount of HIP you have used, both in this transaction and for the entire month so far. Keep track of this amount so you know when you have used up your HIP for the month.



HIP: FAQs



Does HIP roll over?

- No. Your monthly cap is always \$40, \$60, or \$80, depending on your SNAP household size. If you do not use the full monthly HIP cap for your household size, you will not have extra HIP to use the following month.

Why does the EBT customer service line say my HIP amount is zero?

- The HIP amount tracks how much HIP you have used. If you actively receive SNAP and your HIP amount is zero, you have not yet used HIP for the month. Your full monthly cap is still available to you.

What food is eligible for HIP?

- Any variety of fruits and vegetables sold by HIP vendors are eligible for HIP, as long as they do not contain added salt, sugar, fat or oil. Eligible HIP products include fruits and vegetables that are: fresh, canned, dried, frozen, in seed/seedling form

Find HIP Vendors: DTAFinder.com

The screenshot displays the DTA Finder search interface. At the top, there are four filter sections: 'County/City' with a dropdown set to 'Greenfield'; 'Area Within' with a dropdown set to '5 miles'; 'Type' with a dropdown set to 'All selected'; and 'Order Option(s)' with a dropdown set to 'All selected'. Below these are 'Month(s) of Operation' (dropdown: 'All selected'), 'Day(s) of Operation' (dropdown: '7'), and 'Vendor Name' (dropdown: 'All Vendors'). There is an 'Open Today' checkbox and a 'Clear Search' button. A map on the left shows a green circular search area around Greenfield, MA, with several vendor pins. A 'Map Key' button is visible. On the right, the 'RESULTS' section shows two entries: 'Clarkdale Fruit Farms Inc.' with a 'HIP Farm Stand' icon, '2.2 miles away', address '303 Upper Road Deerfield MA 01343', phone '(413) 772-6797', email 'ben@clarkdalefruitfarms.com', and a 'Closed today' status; and 'Great Falls Farmers' Market' with a 'HIP Farmers' Market Booth' icon.

- Mobile friendly
- Available in 5 languages, including Portuguese, Chinese, Spanish and Vietnamese
- Search locations by order options, such as curbside pickup or delivery
- Search a location's "open" status by month, specific day of the week or "open today"
- Tutorial videos on how to use DTA Finder on a mobile device and desktop computer are available on DTA's [YouTube channel](#)

For More Help

- Get help with 2022 taxes and any COVID stimulus or Child Tax Credit money you are owed:
[FindYourFunds.org](https://www.findyourfunds.org)
- Rent or mortgage help: **[Mass.gov/covidhousinghelp](https://www.mass.gov/covidhousinghelp)** or call 2-1-1
- Fuel Assistance help paying for heat:
[Toapply.org/MassLIHEAP](https://www.toapply.org/MassLIHEAP) or call 800-632-8175
- Money to help pay for the internet or a computer:
[GetInternet.gov](https://www.getinternet.gov), [AccedeAInternet.gov](https://www.accedeinternet.gov)

For More Help

- If you have children/are pregnant and have no income or low income, you may be able to get TAFDC cash benefits.
- If you are 65 or older or disabled with no or very low income, you may be able to get EAEDC cash benefits. Learn more and apply: **[DTAConnect.com](https://www.dtaconnect.com)**
- Community Food Resources: call or text Project Bread's FoodSource Hotline 1-800-645-8333
- If you have children under age 5/are pregnant or breastfeeding, you may be eligible for the WIC nutrition program: **[Mass.gov/WIC](https://www.mass.gov/WIC)** or call 800-942-1007
- All K-12 students can get free school meals this school year

Information on Food Banks

There are 4 Food Banks in MA:



Greater Boston Food Bank

gbfb.org



Merrimack Valley Food Bank

mvfb.org



Worcester County Food Bank

foodbank.org



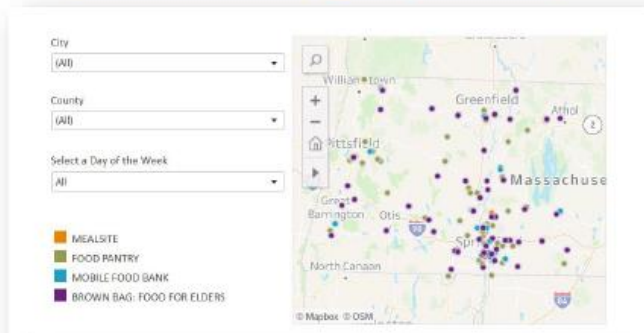
The Food Bank of Western MA foodbankwma.org



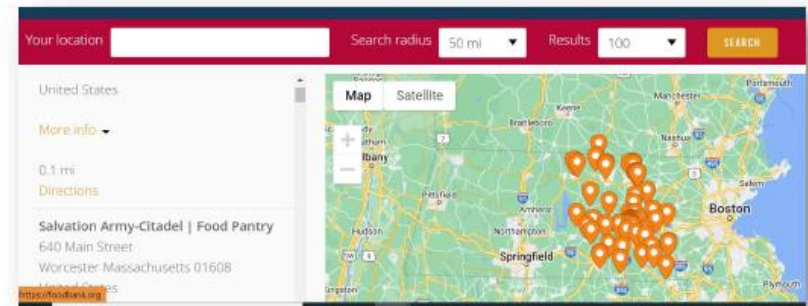
Information on Food Banks

Each food bank has a pantry & meal site locator on their website

Western MA Agency Locator



Worcester County Agency Locator



Merrimack Valley Schedule

Pantry Schedule & Resources

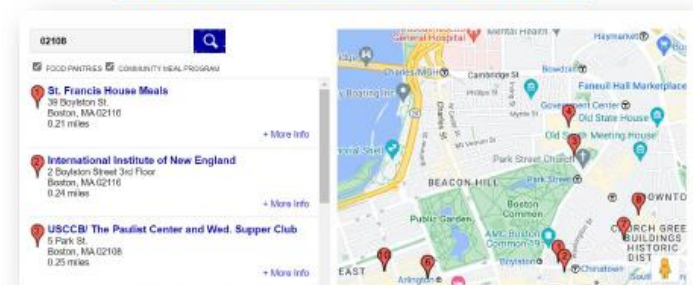
If you, a family member or friend are in need of food please refer to the appropriate links below for a food pantry and meal program near you.

[Greater-Lowell Area Pantry List & Schedule](#)

[Greater-Lowell Area Pantry List & Schedule \(Spanish\)](#)

[Greater-Lowell Area Pantry List & Schedule \(Khmer\)](#)

Greater Boston Food Finder



Department of
Transitional
Assistance

SNAP Outreach Partnership

SNAP Outreach Program

- Is a joint effort between the DTA and UMass Chan Medical School to increase access to SNAP benefits which are a critical nutrition and economic support for low income households.
- Information sessions for agencies interested in becoming a partner are the 4th Friday of every month, to sign up, contact: snap@umassmed.edu
- For more information, please contact:
DTA.SNAPOutreach@MassMail.St
ate.MA.US



SNAP Outreach

Partner Reimbursement Project

Project Description & Goals

The **SNAP Outreach** Partner Reimbursement project is a collaboration between the Department of Transitional Assistance (DTA) and the University of Massachusetts Medical School (UMass) to expand participation in SNAP and improve nutrition and economic self-sufficiency of SNAP clients.



Does Your Organization:

- Assist clients with applying and recertifying for SNAP benefits
- Support clients in resolving issues related to their SNAP benefits
- Raise awareness of SNAP benefits within your community

*If so, you may be eligible to become a SNAP Outreach Partner and qualify for federal reimbursement.**

Why Participate?

- Maximize dollars already spent on outreach/application assistance
- Expand the capacity to serve more individuals
- Introduce a new flexible funding stream into your organization that can cover an array of costs
- Gain access to the DTA Connect Provider Portal to better support the families you assist
- Partner directly with your own DTA community liaison

Project Eligibility

Outreach activities must be funded through allowable sources that are not federally matched elsewhere.

For more information:

- Contact UMass: 1-508-856-3139 or snap@umassmed.edu
- Attend a recruitment session, visit:
 - www.mass.gov/legis/departments-of-transitional-assistance
 - www.snappathwork.org/providers/recruitment-events
- Tune in to our monthly webinar on the 4th Friday of every month – 10-12 for Outreach.
 - Join from PC, Mac, Linux, iOS or Android: <https://umassmed.zoom.us/j/889897543>
 - Telephone: 1-646-876-9923 (Meeting ID: 889 897 643)

* Current reimbursement rate is up to 50% of allowable Outreach expenditures



USDA
Supplemental
Nutrition
Assistance
Program
Putting Healthy Food Within Reach

Contact us at: **UMass Medical School**
333 South Street
Shrewsbury, MA 01545-2732

Jayna Mistry
Tel: 508-856-3139
Email: snap@umassmed.edu



Why become a SNAP Outreach Partner?

- Umass Chan Medical School contracts with Outreach partners that provide outreach/application assistance.
- Non federal funds are used to pay for application assistance
- Partners can be eligible for approximately 50% reimbursement for allowable costs when:
 - Assisting clients with SNAP applications & recertifications
 - Educating clients about SNAP
 - Translating SNAP materials



Questions?



Contact Information:

For additional outreach questions please contact:
DTA.SNAPOutreach@mass.gov

Lorraine Ward, Director of Food Access and Nutrition

Mary Loughlin, SNAP Outreach Program Coordinator

Kimberly Badgett, SNAP Outreach Specialist

Andrew Neves, SNAP Outreach Specialist

