OKLAHOMA Human Services

Information for Benefit Renewal

Benefit Renewal Requirements and Time Frames

You must submit a benefit renewal every six months or annually when you receive food, health, or child care subsidy benefits. When your benefit renewal is due, Oklahoma Human Services, (OKDHS) sends you a notice titled, Renew My Benefits. **You must submit your benefit renewal even when you have no changes to report**.

OKDHS sends all forms and notices, including the benefit renewal notification, to the last address on record. **Keeping your address current** with OKDHS helps ensure you receive forms and notices.

The box checked on this form contains the information that applies to you. If you receive multiple benefits, such as food, health, or child care subsidy, submit the benefit renewal for these programs at the same time.

☐ **Semi-annual benefit renewal**

Households approved for food benefits for 12 months must submit a benefit renewal at six months. OKDHS sends the Renew My Benefits notice in the fifth month of your certification period.

You must submit the benefit renewal and provide all required verification by the date shown on the notice.

If you do not submit the benefit renewal, your benefits will stop!

☐ **Annual benefit renewal**

Households approved for food benefits for 24 months must submit a benefit renewal at 12 months. OKDHS sends you the Renew My Benefits notice in the 11th month of your certification period.

Households approved for child care subsidy benefits and/or health benefits must submit a benefit renewal every 12 months. OKDHS sends the Renew My Benefits notice when your benefit renewal is due.

You must submit the benefit renewal and provide all required verification by the date shown on the notice.

If you do not submit the benefit renewal, your benefits will stop!

Change Reporting Rules

For food benefits: Anytime your household monthly gross income changes to more than the amount shown for your household size on the scale below, **you must tell OKDHS within 10-calendar days** of the change and provide verification of all income.

Gross income is all income your household received in the most recent calendar month before any deductions were made.

Maximum gross income scale for household size

1 person	2 persons	3 persons	4 persons	5 persons	6 persons	7 persons	8 persons
$1,696	$2,292	$2,888	$3,483	$4,079	$4,675	$5,271	$5,867

A member of your household meeting the able-bodied adult without dependents (ABAWD) work rule must report if work hours decrease below an average of 20 hours per week or 80 hours per month.

You must also report if anyone in your household receives substantial lottery or gambling winnings within 10-calendar days of receipt. Substantial lottery or gambling winnings are defined as a cash prize won in a single game before taxes or other amounts are withheld that are equal to or greater than $4,500.

Some changes may cause your household to get more food benefits. Examples include, when:

- your gross household income goes down. For example, a household member loses a job, work hours are reduced, or a check stops coming;
- someone moves into your home or someone who has income moves out; or
- your shelter costs increase.

You may **report changes** between your benefit renewal months by:

- logging into the www.okdhslive.org website and clicking on the "Report A Change" option;
- calling 405-522-5050; or
- completing Form 08FB038E, Changes in Household Circumstances.

For child care subsidy benefits: You must tell OKDHS **within 10-calendar days** when your household income exceeds the amount shown on the income scale below for your family size:

1 person	2 persons	3 persons	4 persons	5 persons	6 persons	7 persons	8 persons
$3,460	$4,525	$5,589	$6,654	$7,718	$8,783	$8,983	$9,182

For health benefits: You must tell OKDHS **within 10-calendar days of all** changes in resources and gross income.

Non-Discrimination Statement

In accordance with federal civil rights law and U.S. Department of Agriculture (USDA) civil rights regulations and policies, the USDA, its agencies, offices, and employees, and institutions participating in or administering USDA programs are prohibited from discriminating based on race, color, national origin, sex (including gender identity and sexual orientation), religious creed, disability, age, political beliefs, or reprisal or retaliation for prior civil rights activity in any program conducted or funded by the USDA. Programs that receive federal financial assistance from the U.S. Department of Health and Human Services (HHS), such as Temporary Assistance to Needy Families (TANF), and programs HHS directly operates are also prohibited from discrimination under federal civil rights laws and HHS regulations.

Persons with disabilities who require alternative means of communication for program information (e.g., Braille, large print, audiotape, American Sign Language) should contact the agency (state or local) where they applied for benefits. Individuals who are deaf, hard of hearing, or have speech disabilities may contact USDA through the Federal Relay Service at (800) 877-8339. Additionally, program information may be made available in languages other than English.

CIVIL RIGHTS COMPLAINTS INVOLVING USDA PROGRAMS

USDA provides federal financial assistance for many food security and hunger reduction programs such as the Supplemental Nutrition Assistance Program (SNAP), the Food Distribution Program on Indian Reservations (FDPIR) and others. To file a program complaint of discrimination, complete the USDA Program Discrimination Complaint Form, (AD-3027) (found online at: How to File a Complaint, and at any USDA office) or write a letter addressed to USDA and provide in the letter all of the information requested in the form. To request a copy of the complaint form, call (866) 632-9992.

Submit your completed form or letter to USDA by:

(1) **mail**: Food and Nutrition Service, USDA
1320 Braddock Place, Room 334,
Alexandria, VA 22314; or

(2) **fax**: (833) 256-1665 or (202) 690-7442; or

(3) **phone**: (833) 620-1071; or

(4) **email**: FNSCIVILRIGHTSCOMPLAINTS@usda.gov

For any other information dealing with SNAP issues, persons should either contact the USDA SNAP hotline number at (800) 221-5689, which is also in Spanish or call the state information/hotline numbers (click the link for a listing of hotline numbers by state); found online at SNAP hotline.

CIVIL RIGHTS COMPLAINTS INVOLVING HHS PROGRAMS

HHS provides federal financial assistance for many programs to enhance health and well-being, including TANF, Head Start, the Low Income Home Energy Assistance Program (LIHEAP), and others. If you believe that you have been discriminated against because of your race, color, national origin, disability, age, sex (including pregnancy, sexual orientation, and gender identity), or religion in programs or activities that HHS directly operates or to which HHS provides federal financial assistance, you may file a complaint with the Office for Civil Rights (OCR) for yourself or for someone else.

To file a complaint of discrimination regarding a program receiving federal financial assistance through HHS, complete the form online through OCR's Complaint Portal at https://ocrportal.hhs.gov/ocr/. You may also contact OCR via mail at: Centralized Case Management Operations, U.S. Department of Health and Human Services, 200 Independence Avenue, S.W., Room 509F HHH Bldg., Washington, D.C. 20201; fax: (202) 619-3818; or email: OCRmail@hhs.gov. For faster processing, we encourage you to use the OCR online portal to file complaints rather than filing via mail. Persons who need assistance with filing a civil rights complaint can email OCR at OCRMail@hhs.gov or call OCR toll-free at 1-800-368-1019, TDD 1-800-537-7697. For persons who are deaf, hard of hearing, or have speech difficulties, please dial 7-1-1 to access telecommunications relay services. We also provide alternative formats (such as Braille and large print), auxiliary aids and language assistance services free of charge for filing a complaint.

This institution is an equal opportunity provider.