

RETURN ADDRESS
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XXXXXXXXXXXXXXXXXX
XXXXXXXXXXXXXXXXXX

Mailing Date: MM/DD/YYYY

000001
ANNA MEMBER
123 MAIN ST
ANYTOWN WI 55555



State of Wisconsin

Case #: 1234567890

ABC Agency

Worker: IM A WORKER

Phone #: 1-555-555-5555

Fax #: (444) 444-4444

Use fax # to send verifications.



The State of Wisconsin is an equal opportunity service provider. This letter contains information that affects your benefits. If you need this material in a different format because of a disability or if you need this letter translated or explained in your own language, please call 1-888-947-6583. These services are free.

Action Required:

Your Benefits are Due for Renewal

To keep getting your **FoodShare** benefits without experiencing a gap or delay in your benefits, you must complete the entire renewal process by **Month Day, Year**. This includes giving us any proof that we ask for (see the "Proof Needed" section of this letter).

You are required to complete an interview to renew your FoodShare benefits. Call your agency at 555-555-5555 for your interview any day from Month Day, Year, through Month Day, Year. You can do your interview during open business hours.

It is important to complete your interview during the dates listed above so that your FoodShare benefits can continue. If you do not complete your interview during these dates, you must call to do your interview before **Month Day, Year**, or your FoodShare benefits will end.

If you want to report changes before your FoodShare interview, you can complete a renewal form online or by mail:

- Online – Go to access.wi.gov. See the online instructions below.
- By mail – Go to dhs.wisconsin.gov/forwardhealth/resources.htm for the application, or ask your agency for a renewal form with your case information by calling the phone number at the top of this letter.

Fair Hearing Information

Once your renewal is complete, if you do not agree with the decision, you have the right to a fair hearing. You can ask for a hearing at any time if you do not agree with your FoodShare benefit amount. You can find information about fair hearings on your Notices of Decision, in the Enrollment and Benefits booklet, or online at dhs.wisconsin.gov/forwardhealth/resources.htm.

Additional Online Instructions

Go to the ACCESS website at access.wi.gov.

If you already have an ACCESS account:

- Click the Log in button.
- Enter your user ID and password, and click Login.
- Once on your Account Home page, click the alert that says “Benefit Renewals Due For.”
- Follow the instructions to start your renewal.

If you do not have an ACCESS account:

- Click the Create an account link, and follow the steps to set up an account.
- You will see a message that says “Congratulations! You have created your secure ACCESS account.” Click the “Click here” link.
- Enter your user ID and password, and click Login.
- Once on your Account Home page, click the alert that says “Benefit Renewals Due For.”
- Follow the instructions to start your renewal.

Proof Needed

To complete your renewal, you may be required to provide proof of your answers. If you need help getting any of the items listed, contact your agency. In some situations, you may be asked to give proof of other items not listed here.

Income - Proof of all job income and wages for any family members who have a job. You can use:

- Pay stubs (for the last 30 days), or
- Employer Verification of Earnings (EVF-E) form signed by your employer, or
- A letter from the employer. The letter must have the same information as the EVF-E form.

Self-Employment Income - Proof of income for all family members who are self-employed. You can use copies of your most recent federal tax forms. Your agency will send you a Self-Employment Income Report Form(s), if needed.

Other Income - Proof of all other income for anyone in your home such as alimony, child support, disability or sick pay, interest or dividends, Veterans Benefits, workers compensation, unemployment insurance, etc. You can use:

- Pension statement, or
- Current award letter, or
- Copy of check, or
- Court order or payment record of child support received from another state.

If you get a payment from Social Security you do not have to send proof of that payment, unless requested.

If you get a payment from Wisconsin unemployment or in-state child support, you do not have to send proof of that payment, unless requested.

Proof Needed, If You Want to Get the Credit

Obligated Child Support Payments - Proof of any child support payments a family member pays. You can use a court order or payment record, if order is from another state.

Medical Expenses for Elderly or Disabled Household Members - Proof of any medical expenses. You can use:

- Itemized receipts.
- Medicine or pill bottle with price on label.
- Health insurance policy showing co-payment, deductible, premium or coinsurance.

Note: Your agency may ask for proof of any item if they have questions regarding your answers such as:

- **Utility Costs** – Proof of utility bills for anyone in your home. You can use utility bills, a lease, a written statement from your landlord, or a bank statement that includes who the bill was paid to.
- **Shelter Costs** – Proof of shelter costs for anyone in your home. You can use a rent receipt that includes your address, a lease, a mortgage statement, a property tax statement, or an insurance policy or billing statement.

Other Proof

Work Registration Requirement for Individuals Ages 16 through 59

All FoodShare members ages 16 through 59 must be registered for work unless they are considered exempt. A member will be registered for work when he or she is determined eligible for FoodShare, unless the member meets an exemption.

A member may be considered exempt and may not need to register for work if any of the following apply:

- The member is younger than age 16 or older than age 59.
- The member is already working at least 30 hours per week (or getting weekly earnings that equal 30 times the federal minimum hourly wage).
- The member is the primary caregiver for a dependent child under age 6 (whether the child lives in your home or out of your home).
- The member is the primary caregiver for a person who cannot care for himself or herself (whether the person lives in your home or out of your home).
- The member is age 16 or 17 and is not listed as the primary person for his or her FoodShare

group on the application.

- The member is taking part in an alcohol or other drug abuse (AODA) treatment program.
- The member is getting or has applied for unemployment insurance.
- The member is enrolled at least half-time in a recognized school, training program, or institution of higher learning.
- The member is physically or mentally unable to work.
- The member is taking part in certain work programs.

A member may need to provide proof to the agency if he or she meets one of these exemptions.

Note: Although registration for work is required, taking part in a work program is voluntary.

Work Requirement for Able-Bodied Adults Ages 18 through 49

The work requirement for able-bodied adults ages 18 through 49 is different from the work registration requirement stated above. The work requirement for able-bodied adults applies to anyone in your FoodShare group who is age 18 through 49 with no minor children living in the home. These individuals may need to meet a work requirement to keep getting FoodShare benefits unless they are exempt. You will get more information about the work requirement from your agency.

Anyone who does not meet the work requirement may only get up to three months of FoodShare benefits in a 36-month period. Your agency will ask you some questions to see if anyone in your home meets the work requirement or is exempt. You may need to provide proof of your answers.

Anyone who needs to meet the work requirement will be referred to the FoodShare Employment and Training (FSET) program.