

**ARIZONA DEPARTMENT OF
ECONOMIC SECURITY
Family Assistance Administration
ABAWD PARTICIPATION AND
REFERRAL**

Arizona has a 3-month time limit for certain adults who receive Nutrition Assistance Benefits in a 36-month period. These adults are called *Able Bodied Adults without Dependents (ABAWDs)*.

ABAWDs can get Nutrition Assistance Benefits in only three (3) months out of 36 months unless they qualify for an exemption, meet certain work requirements or participate in an employment and training program. *The ABAWD's benefits will end following the third (3rd) full month of benefits unless the ABAWD meets the requirements in this form.*

**See pages 14-16 for USDA/EOE/
ADA disclosures**

This Form Explains:

- 1. The work requirements for those who do not meet an exemption.**
- 2. The exemptions to the three (3) month time limit.**
- 3. Information on how to participate in an employment and training program.**
- 4. How to regain eligibility if the ABAWD reaches their time limits and becomes ineligible.**
- 5. Good cause exceptions to not work or not participate in an employment and training program.**
- 6. What reporting requirements are as an ABAWD participant.**

Ways to Meet the Work Requirements

The ABAWD can meet the ABAWD work requirement by doing any of these things:

- 1. Works 80 hours per month. This includes any combination of:**
 - **Paid work**
 - **Self-employment**
 - **Volunteer work**
 - **In-kind work: working in exchange for food, rent, or other needs. Proof must include the value of the work and the number of hour worked.**
- 2. Participate in an approved Supplemental Nutrition Assistance, Employment and Training (SNAP E&T) activity a minimum of 80 hours per month.**
- 3. Participate in a combination of work and an approved SNAP E&T activity for a minimum of 80 hours per month.**
- 4. Can show good cause for not meeting work requirements. Good cause is explained in this form.**

If the ABAWD is meeting the work requirement, please let us know

immediately so we can update our records.

Any full month that the ABAWD is either not exempt or does not meet the work requirement will count toward their (3) month limit, unless the ABAWD contacts us and participates in an employment and training program.

Exemptions to Time Limits for ABAWDS

When an ABAWD meets one of the exemptions, please complete this section.

Lives with a minor child under 18 years of age, who is a member of the household, even if they are not eligible for nutrition assistance benefits.

Mentally or physically unfit for work. Disability will qualify you for this exemption, but you do not need to be disabled to qualify.

You may also let us know if you are chronically homeless or a victim of domestic violence. You think you have a reason that might make you unfit for work, submit a statement that explains your circumstances.

Pregnant.

Meets any one of the following exemptions to the general work requirement:

- **Provides care for an incapacitated individual.**
- **Has applied for or gets Unemployment Insurance.**
- **Is a migrant or seasonal farm worker who is currently working or going back to work within the next 30 days.**
- **Receives treatment in a drug or alcohol treatment or rehabilitation program.**
- **Attends school, a training program, or college at least half time.**

Lives in an Arizona exempt county or on an American Indian reservation in Arizona.

Name (*Last, First, M.I.*):

Case Number: _____

Signature of Person Claiming Exemption: _____

Date: _____

Return the completed form, with the ABAWD's signature, to the Family Assistance Administration (FAA) and the records will be updated. The ABAWD may be required to provide proof of the exemption.

Employment and Training Opportunities

If the ABAWD does not meet a qualifying exemption and is not

currently doing any of the above work activities to meet the work requirements, the ABAWD may contact us about participating in the SNAP E&T Program. The SNAP E&T Program has opportunities available to help ABAWDs get jobs or learn skills needed for employment. For any month the ABAWD participates in an authorized employment and training program and meets the work requirement, the time limit will not apply to the ABAWD.

For additional information on the SNAP E&T Program, please call 1-833-762-8196 or visit the website at

<https://des.az.gov/snapcan-participants>.

Ways to Give Information When the ABAWD Qualifies for an Exemption or Meets the Work Requirements

You can submit your information to us

in any of the following ways:

1. Health-e-Arizona Plus accounts ONLY:

You can use your on-line account to:

- **Scan and upload verification, OR**
- **Print Health-e-Arizona Plus account, fax cover sheets and fax verification to the number on the fax cover sheet.**

2. Return it by mail to:

**Department of Economic Security
P. O. Box 19009**

Phoenix, AZ 85005-9009

Please include your printed name and case number on each document you send to us.

3. If you do not have Health-e-Arizona Plus account, fax to:

- **602-257-7031, if faxing from area codes 602, 480, or 623; or**
- **1-844-680-9840, TOLL FREE if faxing from any other area code.**

Please include your printed name and case number on each document that you fax to us.

- 4. Take this notice to the local Department of Economic Security, Family Assistance office.**

How to Regain Eligibility if the ABAWD's Benefits Stop

If the benefits stopped for the ABAWD because the ABAWD reached the full three (3) month time limit, the ABAWD can become eligible again if the ABAWD:

- 1. Works 80 hours in any 30-day period**
- 2. Participates in a work program for 80 hours in a 30-day period**
- 3. Has a combination of work and work program participation for 80 hours in a 30-day period**
- 4. Meets any exemption**
- 5. Enters a new 36-month period**

The ABAWD regains eligibility as many times as they meet an exemption category.

If the ABAWD regains eligibility through work or employment and training and then becomes ineligible again, the ABAWD can only get one additional three (3) month period of eligibility within the 36-month period.

Good Cause to Not Work or Participate in an Employment and Training Program

In some cases, a person who is employed and who has been meeting the 80-hour requirement may have good cause for missing work and not meeting the work or participation requirement. Good cause is a temporary situation that is not in the person's control. Some examples of good cause may be illness, illness of a household member, lack of transportation, household emergency or natural disaster.

If you think you have good cause, please let us know immediately so we can update our records.

What You Can Do if You Need Help or Have Questions

Call us Monday – Friday, 7:30 a.m. to 5:00 p.m. at 1 (855) 432-7587. The TTY/TDD number for the hearing impaired is 7-1-1.

Contact us if you need help in getting documents or other information.

To find a DES Office, visit this website: des.az.gov/find-your-local-office.

Reporting Changes

Reporting requirements are changing. You are required to report when your income changes to 130% of the Federal Poverty Level or above. You must report when the ABAWD's work hours fall below 80

hours per month if they are working. These changes must be reported within 10 days of the beginning of the month following the change. It is your responsibility to inform us when you think the ABAWD qualifies for an exemption.

Free Legal Assistance

For Free Legal Assistance, you may contact:

- **In Maricopa, Mohave, San Luis, Yavapai, and Yuma Counties: Community Legal Services as www.clsaz.org or 1-800-852-9075;**
- **In Apache, Cochise, Gila Graham, Greenlee, Navajo, Pima, Pinal and Santa Cruz counties: Southern Arizona Legal Aid at www.sazlegalaid.org or 1-800-640-9465;**

- **In Coconino County: DNA-People's Legal Services at www.dnalegalservices.org or 1-800-789-5781.**

These free legal assistance programs are not a part of DES or AHCCCS.

Legal Authority

Time limit for Able Bodied Adults: 7 CFR Section 273.24;

You can find these laws at any of the following:

- **At a public library**
- **On the Internet at: www.ecfr.gov/; and**
- **By asking for a copy at a DES Office**

In accordance with federal civil rights law and U.S. Department of Agriculture (USDA) civil rights regulations and policies, this institution is prohibited from discriminating on the basis of 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.

Program information may be made available in languages other than English. Persons with disabilities who require alternative means of communication to obtain 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.

To file a program discrimination complaint, a Complainant should complete a Form AD-3027, USDA Program Discrimination Complaint Form which can be obtained online at <https://www.usda.gov/sites/default/files/documents/ad-3027.pdf>, from any USDA office, by calling (833) 620-1071, or by writing a letter addressed to USDA. The letter must contain the complainant's name, address, telephone number, and a written description of the alleged discriminatory action in sufficient detail to inform the Assistant Secretary for Civil Rights (ASCR) about the nature and date of an alleged civil rights violation. The completed AD-3027 form or letter must be submitted to:

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. email:

**[FNSCIVILRIGHTSCOMPLAINTS@
usda.gov](mailto:FNSCIVILRIGHTSCOMPLAINTS@usda.gov)**

This institution is an equal opportunity provider.

To request this document in alternative format or for further information about this policy, contact your local office; TTY/TDD Services: 7-1-1. • Disponible en español en línea o en la oficina local.