

Louisiana Department of Health

Simplified Reporting Reminder Notice of Incomplete Filing

Case ID: _____

Date: _____

This is a reminder that your _____ Simplified Report was received but was not complete for the reasons below:

- Your Simplified Report form was not signed. Please sign the attached form and return it in the enclosed envelope by _____.

- Your Simplified Report did not contain the following information or required verifications that are necessary to determine eligibility and/or benefit amount. Please return the required information no later than _____.

You may FAX documents to (225) 663-3164, mail to LDH Economic Stability, P O Box 260031, Baton Rouge, LA, 70826-0031, or upload documents through the LDH Customer Portal at www.ldh.la.gov/CAFE. Please include the head of household's name, Case ID Number, Social Security Number, and Date of Birth on all documents that you submit. Do not submit original documents such as original birth certificates or social security cards, or original check stubs. Please provide copies of these documents because the original may not be returned to you.

For more information about programs and services or for specific information about your case, call 1-888-LAHELPU (1-888-524-3578).

In accordance with federal civil rights law and USDA civil rights regulations and policies, the USDA, its agencies, offices, employees, and institutions participating in or administering USDA programs are prohibited from discriminating based on race, color, national origin, religion, sex, disability, age, marital status, family/parental status, income derived from a public assistance program, political beliefs, or reprisal or retaliation for prior civil rights activity, in any program or activity conducted or funded by USDA (not all bases apply to all programs). Remedies and complaint filing deadlines vary by program or incident.

Persons with disabilities who require alternative means of communication for program information (e.g., Braille, large print, audiotope, American Sign Language, etc.) should contact the state or local agency that administers the program or contact USDA through the Telecommunications Relay Service at 711 (voice and TTY). Additionally, program information may be made available in languages other than English.

To file a program discrimination complaint, complete the USDA Program Discrimination Complaint Form, [AD-3027](#), found online at [How to File a Program Discrimination 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: USDA Food and Nutrition Service, 1320 Braddock Place, Room 334 Alexandria, VA 22314; or (2) Email: FNCSIVILRIGHTSCOMPLAINTS@usda.gov.

USDA is an equal opportunity provider, employer, and lender.

You may file a civil rights complaint with the Louisiana Department of Health (LDH) by completing the Civil Rights Complaint Form. Turn the form in to a local office; mail it to LDH Bureau of Legal Services, P.O. Box 3836, Baton Rouge, LA 70821-3836; email LDH.CivilRightsComplaints@la.gov; or call 1-888-524-3578. You may file a civil rights complaint with LDH and USDA or only LDH. Additionally, a program complaint may be filed with the LDH/Economic Stability Section, by mailing to P.O. Box 260031, Baton Rouge, Louisiana, 70826, by emailing LAHelpU@La.gov, or by calling 1-888-524-3578.

What is a fair hearing?

Any time you disagree with a decision taken on your SNAP case, you have the right to request a fair hearing with an official who is required by law to review the facts of every case in a fair and objective manner.

When can you ask for a fair hearing?

You can ask for a fair hearing if:

- You applied for benefits and are denied, or
- You disagree with a decision on your case, or
- You believe your benefits were not calculated correctly.

Deadline to ask for a fair hearing?

For SNAP decisions:

- If we closed your case or denied your request for benefits, you must appeal within 90 days following the date of the notice.
- If we changed your benefit amount, you can appeal anytime within your certification period.

For FITAP/KCSP decisions, you must request a hearing within 30 days of the date this notice was mailed.

Can you get free legal help?

Yes. For free legal advice call (800) 256-1175

How do you ask for a fair hearing?

To request a fair hearing:

- Call 1-888-LAHELPU (1-888-524-3578) and request a fair hearing, or
- Complete and sign the section below and mail it to: LDH Economic Stability, P O Box 260031, Baton Rouge, LA, 70826-0031, or
- Visit a local LDH office and speak to a supervisor.

Please explain your reason for requesting a fair hearing

By signing this document and returning it, I am requesting a fair hearing.

Signature

Date

Phone Number

Return to:

LDH Economic Stability

P O Box 260031

Baton Rouge, LA 70826-0031