

This institution is prohibited from discriminating on the basis of race, color, national origin, disability, age, sex and in some cases religion or political beliefs.

The U.S. Department of Agriculture also prohibits discrimination based on race, color, national origin, sex, religious creed, disability, age, political beliefs or reprisal or retaliation for prior civil rights activity in any program or activity conducted or funded by USDA.

Persons with disabilities who require alternative means of communication for program information (e.g. Braille, large print, audiotape, American Sign Language, etc.), 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.

To file a program complaint of discrimination, complete the USDA Program Discrimination Complaint Form, (AD-3027), found online at: http://www.ascr.usda.gov/complaint_filing_cust.html, 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: U.S. Department of Agriculture, Office of the Assistant Secretary for Civil Rights, 1400 Independence Avenue, SW, Washington, D.C. 20250-9410
- (2) fax: (202) 690-7442; or
- (3) email: program.intake@usda.gov.

For any other information dealing with Supplemental Nutrition Assistance Program (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: http://www.fns.usda.gov/snap/contact_info/hotlines.htm.

To file a complaint of discrimination regarding a program receiving Federal financial assistance through the U.S. Department of Health and Human Services (HHS), write: HHS Director, Office for Civil Rights, Room 515-F, 200 Independence Avenue, S.W., Washington, D.C. 20201 or call (202) 619-0403 (voice) or (800) 537-7697 (TTY).

This institution is an equal opportunity provider.

You may also file a complaint of discrimination by contacting DSS. Write DSS Office of Civil Rights, P.O. Box 1520, Columbia, SC 29202-1520; or call (800) 311-7220 or (803) 898-8080 or TTY: (800) 311-7219.

AFTER THE HEARING

You will receive a final decision in writing from the Office of Administrative Hearings. You may appeal the decision if the decision is not in your favor. Information where to appeal will be included with the decision.

SPECIAL ACCOMMODATIONS

If you need an interpreter, translated documents, or will require special accommodations at the hearing, you should make the request at the time you ask for the hearing, so that the services or accommodations may be arranged in time for the hearing. These accommodations will be provided at no cost to you.

DSS Brochure 2410 (MAY 16)
Edition of APR 14 is obsolete.

FAIR HEARINGS

You may ask for a fair hearing when you disagree with an action taken by DSS or when you think there has been an unreasonable delay in acting on your application for services.



SC Department of
Social Services
Individual and
Provider Rights
Office of Administrative
Hearings
P.O. Box 1520
Columbia, SC
29202-1520

1-800-311-7220 or
803-898-8080 or
Fax: 803-898-7269
TTY: 1-800-311-7219

FAIR HEARINGS

You may ask for a fair hearing when you disagree with an action taken by DSS or when you think there has been an unreasonable delay in acting on your application for services.

TIME FRAMES

Family Independence (FI)

You must request a hearing **within 60 days** from the time you are notified of the adverse action in a **Family Independence (FI)** case.

SNAP

You must request a hearing **within 90 days** from the time you are notified of the adverse action in a **Supplemental Nutrition Assistance Program (SNAP)** case. However, you may request a hearing at any time concerning the benefits you are currently receiving.

If you request a hearing within the 10-day advance notice period, before your benefits are reduced, suspended or ended, you may be entitled to continued benefits or continued access to a disputed EBT amount.

Other Programs

You must generally request a hearing **within 30 days** from the time you are notified of the adverse action.

HOW TO REQUEST A HEARING

FI & SNAP: You may ask for a hearing orally or in writing.

Other Programs: Hearing requests must be made in writing and sent to the Office of Administrative Hearings.

Telephone requests may be made by contacting your case worker directly or by contacting the Office of Administrative Hearings at **1-800-311-7220**, or **(803) 898-8080**, in the Columbia area. Written requests may be given to your case worker or sent to the SCDSS Office of Administrative Hearings. You should provide your name, address, telephone number, case number,

the action you disagree with, and the relief you want. Your hearing will be held by telephone, unless you ask that it be held face-to-face.

NOTICE OF HEARING

You will receive advance notice of the date and time of your hearing. You will always be given reasonable notice to prepare for the hearing.

REPRESENTATION

You have the right to be represented by an attorney. However, you may represent yourself, or you may ask a friend, relative or someone else to be your spokesperson. If you would like to be represented by an attorney, but feel you cannot afford one, you may apply for free legal services by contacting South Carolina Legal Services at 1-888-346-5592 statewide or 803-744-9430 in the Columbia area.

BEFORE THE HEARING

You have the right to review your case file and the evidence in your case. You also have the right to receive a free copy of your file. You should make arrangements with your case worker to review the file prior to the hearing.

You may request that the hearing officer issue a subpoena, requiring a witness to appear and testify at the hearing on your behalf. You must make this request at least fourteen (14) days before the date of the hearing. Please note that you are responsible for any costs associated with subpoenaing the witness or the actual appearance of the witness. Most professionals charge an hourly fee for court time and for expenses.

You may request a pre-hearing conference with the county DSS to discuss the issues in the appeal. Participating in a pre-hearing conference will not affect your right to a hearing. A pre-hearing conference may resolve the issue(s) and eliminate the need for a hearing.

If the issue(s) is resolved in a pre-hearing conference, or you decide you no longer wish to appeal, please contact your case worker or the

Office of Administrative Hearings, to withdraw your request for a hearing.

You may ask for a postponement of your hearing and your hearing will be rescheduled.

AT THE HEARING

For a face-to-face hearing, you should arrive at least 20 minutes prior to the scheduled time of the hearing. If the hearing is to be held by telephone, the hearing officer will call you, at the number you provided, at the time of the hearing. You should anticipate the telephone call 5 minutes prior to and up to 15 minutes after the scheduled time of the hearing.

If you fail to appear at the place and time of the hearing, or if you fail to answer the telephone call for a telephone hearing, your appeal will be dismissed.

During the hearing, you may testify, present your witnesses, and ask questions of any witnesses for DSS. You may present any relevant evidence, such as records, receipts or other statements that will help explain your side of the case.

If you do not want a witness to hear the testimony of others, you may ask the hearing officer to have the witness wait outside the hearing room during the hearing.

The final decision will not be made at the conclusion of the hearing, but will be made at a later date by the hearing officer; a committee, including the hearing officer; or by the State Director's designee.

