

Frequently Asked Questions (FAQs) About Free and Reduced-price School Meals

Dear Parent/Guardian:

Children need healthy meals to learn. **Simsbury Public Schools** offers healthy meals every school day. Breakfast costs **\$1.75** and lunch costs **\$3.00** at the elementary schools and breakfast costs **\$2.00** and lunch costs **\$3.50** at Henry James and the High School. **Your children may qualify for either free meals or reduced-price meals.** The reduced price is \$0.30 for breakfast and \$0.40 for lunch. This packet includes an application for free and reduced-price meal benefits and detailed instructions.

NOTE: Children receiving Supplemental Nutrition Assistance Program (SNAP), Temporary Family Assistance (TFA) or Medicaid (HUSKY) benefits *may* be directly certified and automatically eligible for free meals without applying for benefits. (Some children who receive Medicaid (HUSKY) benefits **may** also be directly certified and automatically eligible for *reduced-price* meals.) Questions regarding SNAP/TFA/Medicaid and direct certification should be sent to the determining official, **Lorrie Lescarbeau, Director of Nutrition Services, 860-323-8152.**

If you have received a NOTICE OF DIRECT CERTIFICATION for free or reduced-price meals, **do not** complete the application unless instructed to do so by the district. Let the school know if any children in your household are **not** listed on the **Notice of Direct Certification** letter you received, since free or reduced meal benefits are extended to all children in a household when directly certified.

Additionally, all school-aged children in income-eligible households can receive school meal benefits regardless of a child's immigration status and the district/school does not release information for immigration-related purposes in the usual course of operating the Child Nutrition Programs.

The **Simsbury Public Schools** complies with the federal requirements for meal modifications for children with special dietary needs. The requirements for meal modifications are different for children with and without disabilities. For more information, please contact the food service director, **Lorrie Lescarbeau at 860-323-8152.**

The answers to the common questions below can help you with the application process.

1. **Who can get free or reduced-price meals?**

- All children in households receiving SNAP or TFA benefits are eligible for free meals. Note: *Some* students receiving Medicaid (HUSKY) benefits are eligible for free or reduced-price meals.
- Foster children that are under the **legal** responsibility of a foster care agency or court are eligible for free meals. (Note: A foster child is categorically eligible for free meals and

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may be included as a member of the foster family if the foster family chooses to also apply for benefits for other children. Including children in foster care as household members may help other children in the household qualify for benefits. If non-foster children in a foster family are not eligible for free or reduced price meal benefits, an eligible foster child will still receive free benefits.)

- Children participating in their school’s Head Start program are eligible for free meals.
- Children who meet the definition of homeless or runaway are eligible for free meals.
- Children may receive free or reduced-price meals if your household’s income is within the limits of the Federal Income Eligibility Guidelines. Your children may qualify for free or reduced-price meals if your household income falls at or below the limits on this chart:

Reduced Federal Eligibility Income Chart (Effective 7/1/2020 to 6/30/2021)			
Household size	Yearly	Monthly	Weekly
1	23,606	1,968	454
2	31,894	2,658	614
3	40,182	3,349	773
4	48,470	4,040	933
5	56,758	4,730	1,092
6	65,046	5,421	1,251
7	73,334	6,112	1,411
8	81,622	6,802	1,570
Each additional family member	+ 8,288	+ 691	+ 160

2. **How do I know if my children qualify as homeless or runaway?** Do the members of your household lack a permanent address? Are you staying together in a shelter, hotel, or other temporary housing arrangement? Does your family relocate on a seasonal basis? Are any children living with you who have chosen to leave their prior family or household? If you believe children in your household meet these descriptions and you have not been told your children will get free meals, please call or e-mail **Neil Sullivan at 860-651-3361, nsullivan@simsburyschools.net**.

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3. **Do I need to fill out an application for each child?** No. Use **one *Free and Reduced-price School Meals Application*** for all students in your household. We cannot approve an application that is not complete, so be sure to fill out all required information. Return the completed application to **your child's school or Simsbury BOE, Nutrition Services Department, 933 Hopmeadow Street, Simsbury, CT. 06070.**
4. **Should I fill out an application if I received a letter this school year saying my children are already approved for free or reduced-price meals?** No, but please read the letter carefully and follow the instructions. If any children in your household were missing from your eligibility notification, contact **Nutrition Services Department at 860-323-8152** immediately.
5. **My child's application was approved last year. Do I need to fill out a new one?** Yes. Your child's application is only good for that school year and for up to 30 operating days into the new school year (or until a new eligibility determination is made, whichever comes first). When the carryover period ends, unless you are notified that your children are directly certified or you submit an application that is approved, your children's meals must be claimed at the paid rate. Though encouraged to do so, the LEA is not required to send a reminder or a notice of expired eligibility.
6. **I get WIC. Can my children get free meals?** Children in households participating in WIC may be eligible for free or reduced-price meals. Please send in an application.
7. **Will the information I give be checked?** Yes. We may also ask you to send written proof of the household income you report.
8. **If I don't qualify now, may I apply later?** Yes, you may apply at any time during the school year. For example, children with a parent or guardian who becomes unemployed may become eligible for free and reduced-price meals if the household income drops below the income limit.
9. **What if I disagree with the school's decision about my application?** You should talk to school officials. You also may ask for a hearing by calling or writing **Neil Sullivan, Simsbury BOE, Director of Personnel, 933 Hopmeadow Street, Simsbury, CT. 06070; 860-651-3361.**
10. **May I apply if someone in my household is not a U.S. citizen?** Yes. You, your children or other household members do not have to be U.S. citizens to apply for free or reduced-price meals.

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11. **What if my income is not always the same?** List the amount that you **normally** receive. For example, if you normally make \$1,000 each month, but you missed some work last month and only made \$900, put down that you made \$1000 per month. If you normally get overtime, include it, but do not include it if you only work overtime sometimes. If you have lost a job or had your hours or wages reduced, use your current income.
12. **What if some household members have no income to report?** Household members may not receive some types of income we ask you to report on the application, or may not receive income at all. When this happens, please write “0” in the field. However, if any income fields are left empty or blank, those will **also** be counted as zeroes. Please be careful when leaving income fields blank, as we will assume you **meant** to do so.
13. **We are in the military. Do we report our income differently?** Your basic pay and cash bonuses must be reported as income. If you get any cash value allowances for off-base housing, food or clothing, or receive Family Subsistence Supplemental Allowance payments, these must also be included as income. However, if your housing is part of the Military Housing Privatization Initiative, do not include your housing allowance as income. Any additional combat pay resulting from deployment is also excluded from income.
14. **What if there isn’t enough space on the application for my family?** List any additional household members on a separate piece of paper and attach to your application. Contact the **Nutrition Services office at 860-323-8147** to receive a second application.
15. **My family needs more help. Are there other programs we might apply for?** To find out how to apply for SNAP benefits and to contact the Department of Social Services office in your town, contact United Way’s free referral number **2-1-1** (free call, statewide).

If you have other questions or need help, call the **Nutrition Services office at 860-323-8147**.

Sincerely,

Lorrie Lescarbeau

Nutrition Services Director

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Nondiscrimination Statement: This explains what to do if you believe you have been treated unfairly.

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, disability, age, 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: [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: 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.

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Does Your Family Need Health Insurance?

Connecticut offers low-cost or free coverage!

Dear Parent / Guardian,

Is your child protected by health insurance? If not, your school and the State of Connecticut want to help. Connecticut’s HUSKY Health program, for example, pays for doctor visits (including physical exams), prescriptions, emergency care, vision and dental care, mental healthcare, special healthcare needs and more. It’s for children under age 19 in families of all incomes. Approximately 300,000 Connecticut children now have their healthcare covered by the HUSKY Health program. **There are two parts to the HUSKY Health program for children:**

- I. **HUSKY A** (or Medicaid) - For children in families with limited income. Parents, relative caregivers and pregnant women may also be eligible.
- II. **HUSKY B** (or Children’s Health Insurance Program) - For children in families with higher incomes.

You can apply for HUSKY A or HUSKY B any time of the year.

- To apply **online**, please visit AccessHealthCT.com
- To apply by **phone**, please call **855-394-2428 (TTY: 855-789-2428)**
- For general information about HUSKY Health, please visit www.ct.gov/Husky

Your child needs YOU to stay healthy, too!

When you apply for HUSKY Health for your child, see what Access Health CT has to offer you.

Most Connecticut residents have to wait until the next Open Enrollment period (**November 1, 2020 - December 15, 2020**) to get healthcare coverage through Access Health CT. You may be able to get coverage earlier if you have a **Qualifying Life Event** OR if you qualify for Medicaid (HUSKY A or D) or CHIP (HUSKY B).

What is a Qualifying Life Event? Qualifying Events include:



Loss of Minimal Essential Coverage



Newly eligible/ineligible for Premium Tax Credits as a result of Divorce, or other Legal Decree or Court Order



Marriage

> **Loss of Coverage Due to Other Circumstances:**



Permanent move to Connecticut

- Expiration of COBRA
- No longer eligible for HUSKY Health
- No longer eligible for an Advance Premium Tax Credit (APTC) or a Cost-Sharing Reduction (CSR)
- Change in citizenship or lawful presence status



Pregnancy, birth, adoption or foster care

For More Information, Visit Learn.AccessHealthCT.com/Special