A Primer on the Restaurant Meals Program in California

Preventing Hunger Among the Elderly, Disabled & Homeless in the Golden State

Samantha Hodges, Bill Emerson National Hunger Fellow, February 2012







This primer was created in partnership with the following organizations:

Western Center on Law and Poverty

http://www.wclp.org

Western Center leads the fight in the courts, counties and capital to secure housing, healthcare and a strong safety net for low-income Californians. Western Center opened its doors in 1967 in the midst of the nation's "War on Poverty" as a joint legal clinic of USC, UCLA, and Loyola Law Schools. In 1996, Congress cut off federal financial support for programs like Western Center. Today Western Center's cutting edge advocacy, litigation and educational work are supported by private donations, foundation grants, and attorney fee awards. Western Center receives no federal funding.

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The Sacramento Housing Alliance (SHA) was formed in 1989 and incorporated in 1991. SHA advocates for housing, services and amenities for low-income communities, communities of color and homeless people. Originally focused on homelessness and housing the Alliance has long worked on a range of issues including transit, food access, redevelopment, community banking and other issues. SHA serves the Sacramento metropolitan region including Sacramento, Yolo, Sutter, Yuba, Placer and El Dorado Counties. The Sacramento Housing Alliance works to make Sacramento more affordable for low-income families by: advocating for mixed income housing; educating the community about affordable housing; and providing technical assistance on affordable developments. The Sacramento Housing Alliance is at the forefront of affordable housing advocacy in the greater Sacramento region. We promote the policies that create more affordable housing and work to eliminate the barriers to production.

The Congressional Hunger Center

http://www.hungercenter.org

The Congressional Hunger Center (CHC) is a 501(c)3 nonprofit that works to make issues of domestic and international hunger a priority to policymakers in the U.S. government, and to raise a new generation of leaders to fight against hunger and poverty. Our mission is to train and inspire leaders who work to end hunger, and to advocate public policies that create a food secure world. We strive to be a leader in the movement to ensure access to food as a basic human right for all people. We create and nurture a community of innovative and inspiring leaders who act as change agents, bridging the gap between grassroots efforts and national and international public policy to provide access to nutritious, affordable and culturally appropriate food. We accomplish this mission through our advocacy, policy and coalition work, and our two leadership development programs; the Bill Emerson National Hunger Fellows Program, and the Mickey Leland International Hunger Fellows Program.

Western Center on Law and Poverty is proud to release this new primer which will improve understanding and implementation of the Supplemental Nutrition Assistance Program's (SNAP) restaurant meals option. Our vision for the primer began when the SNAP restaurant meals option came under attack in Spring of 2011 with state legislation that proposed to ban use of the option in California. Though this legislation was not successful, the program option is still largely misunderstood and underutilized as a tool for reducing hunger among the most vulnerable.

The Restaurant Meals Program (RMP) is a long-standing, federally approved program that enables people who are elderly, disabled and homeless - and only members of these groups - to use their SNAP benefits for which they already qualify in low-cost, approved restaurants. It was authorized by the federal government to address the special needs of people who are elderly or disabled and often find it difficult, if not impossible, to store or prepare meals at home and of homeless people who have no place to safely store and prepare food. It is a federal program option implemented by the states at their discretion and California, with the encouragement of the USDA Food and Nutrition Services Western Region Office, was an early implementer.

SNAP recipients are just like the rest of Americans who struggle daily to make smart dietary selections on a small budget. For some elderly or disabled SNAP recipients, this challenge is complicated by their inability to carry heavy bags of groceries home, open jars, safely use a knife, stand for long periods or complete the other tasks of preparing their own meals that, for the rest of us, seem mundane. For homeless SNAP recipients, the burden can be even greater, with no refrigeration to store healthy foods or sanitary place to prepare it. SNAP RMP increases their options for achieving this goal, it doesn't reduce it. This public-private partnership works to address food access needs of a very vulnerable and unique population that the community is finding increasingly difficult to serve through traditional charitable programs.

Some critics object to the program, citing that the meals available for purchase at the restaurants are low in nutritional value. However, this criticism ignores that RMP is open to all restaurants who apply to participate and meet certain criteria and that, for people who are unable to prepare their own meal, hunger is the unacceptable alternative.

In the states that already have adopted the SNAP Restaurant Meals Program, recipients who are elderly, disabled or homeless who cannot overcome these barriers are not forced to miss meals, which is unhealthy for anyone. They have a choice of purchasing a prepared meal at a low-cost restaurant, where, beginning in 2012, when national menu labeling laws are implemented, they will have new tools to help them select meals that meet their special dietary needs.

Throughout 2011, critics have misrepresented the program and the effort to expand it. They claim that it is intended for all SNAP recipients. It's important to set the record straight. The Restaurant Meals Program is for elderly, disabled and homeless people with gross income below the federal poverty line.

At a time when so many Americans are struggling to put food on the table, we should be extolling the virtues of SNAP as a tool to prevent hunger and the Restaurant Meals Program as a tool to prevent hunger for the most vulnerable among us. We support the expansion of this option and hope this toolkit helps others understand the value of the program and encourages them to expand it into their communities.

Sincerely,

Jessica Bartholow

Western Center on Law and Poverty

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I. Introduction to the Restaurant Meals Program Primer

This guide is intended to offer a comprehensive account of the Restaurant Meals Program (RMP) as it has been implemented by several counties in California from the vantage point of various stakeholders and with a review of federal and state regulations that inform program decisions. The RMP is a state option offered within the Supplemental Nutrition Assistance Program (SNAP), referred to as CalFresh in California.

This project was originally conceived of by the Western Center on Law Poverty and the Sacramento Housing Alliance to support efforts to expand RMP and address unmet food needs of California's most vulnerable residents. The RMP allows homeless, disabled and elderly CalFresh recipients to purchase prepared meals at authorized restaurants.

Just as the research for the guide was beginning, a national debate about the program erupted. Critiques of the RMP, many wrought with inaccuracies about program rules, challenged whether SNAP benefits should be allowed for use in a restaurant setting. It is impossible to ignore these critiques and a disservice to those who rely on the program to avoid addressing them. So, while this guide first and foremost exists to document California's RMP and provide anti-hunger advocates and program administrators tools to implement the RMP in new locations, it has taken on the added goal of defending access to healthy, safe and appropriate food choice for elderly, disabled and homeless SNAP recipients.

In order to adequately explain the RMP, this guide begins with a basic description of the problem of hunger, the role of the Supplemental Nutrition Assistance Program (SNAP) in reducing hunger and the modern day technologies used by SNAP to deliver benefits. Additionally, the guide explores the question of how food insecurity impacts public health outcomes among the RMP eligible population.

¹http://www.stateline.org/live/details/story?contentId=601235 http://www.latimes.com/news/local/la-me-food-stamps-20110802,0,7994181.story

II. Restaurant Meals Program: A SNAP State Option That Reduces Hunger

Hunger and Food Insecurity

In 2010, 46.2 million Americans were living in poverty, up from 43.6 million in 2009—the fourth consecutive annual increase in the number of people in poverty. In this sluggish economy, these numbers can be expected to continue to rise, as will the need for comprehensive social programs that address the consequences of poverty.

One of the most troubling implications of rising poverty is the prevalence of food insecurity and hunger: 17.2 million U.S. households were food insecure at some time during 2010.² Food security, defined as consistent access to adequate food for active, healthy living, is key to good health and quality of life. In 2010, 17.2 million households, 14.5 percent of American households, were food insecure at some point during the year. Among food insecure households, one in three (5.4 percent of American households) had very low food security, which translates to reduced food intake and disrupted eating patterns.

In a report by the Center for American Progress, it was found that hunger costs our nation at least \$167.5 billion a year due to lost economic productivity, poor educational outcomes, avoidable health care costs, and the cost of charitable feeding programs. This \$167.5 billion does not include the cost of the country's largest and most important anti-hunger program, SNAP, and other key federal nutrition programs, which cost approximately \$94 billion a year. If SNAP alone were expanded to all food insecure households it would cost \$83 billion, far less than the cost of hunger. SNAP is an entitlement program, intended to respond to the needs of the American population as they arise.

The Supplemental Nutrition Assistance Program

SNAP, known in California as CalFresh,⁴ is a federal nutrition assistance program that provides benefits to low-income and no-income Americans for the purchase of food.⁵ In order to be eligible for SNAP, applicants must have gross incomes below 130 percent of the Federal Poverty Line (FPL). ⁶ SNAP is authorized nationally by the United States Department of Agriculture (USDA). In California, CalFresh is administered by the California Department of Social Services⁷ (CDSS) in partnership with 58 county human services departments⁸ and currently serves 3.9 million people,⁹ 53 percent¹⁰ of those eligible for the program.¹¹

² http://www.ers.usda.gov/Briefing/FoodSecurity/stats_graphs.htm

³ Center for American Progress, *Hunger in America: Suffering We All Pay For.* October 2011.

⁴http://www.calfresh.ca.gov

⁵http://www.fns.usda.gov/snap/

⁶Poverty guidelines, often referred to as the Federal Poverty Level (FPL), are issued annually by the U.S. Department of Health and Human Services. In 2011, the FPL for a family of three in the 48 contiguous states and the District of Columbia was \$18, 530 annually http://aspe.hhs.gov/poverty/

⁷http://www.dss.ca.gov

⁸http://www.cwda.org/links/chsa.php

⁹ CDSS DFA 285, November 2011

¹⁰ http://www.fns.usda.gov/ora/menu/Published/snap/FILES/Participation/Reaching2009.pdf

¹¹ http://www.fns.usda.gov/ora/menu/Published/snap/SNAPPartState.htm

In July 2011, more than 45.3 million Americans—1 in 7—participated in SNAP, including 4 million Californians. In July 2008, the number was 28.8 million, but the numbers of participants have increased dramatically since the beginning of the Great Recession. In FFY 2011, SNAP cost \$78 billion, but over 92 percent of program costs were directly spent on food benefits, while the remaining 8 percent was spent on administrative costs. According to the Census Bureau's Supplemental Poverty Measure, which counts SNAP as income, SNAP kept more than 5 million people out of poverty in 2010 and lessened the severity of poverty for millions of others. In good and bad economic times, SNAP is necessary for the survival of millions. Over the course of a lifetime, 49 percent of all American children will reside in a household that receives SNAP benefits. Fifty-one percent of adults will be enrolled in SNAP sometime between the ages of 20 and 65. SNAP also ensures that food demand remains steady in tough economic times; every \$1 increase in SNAP benefits generates \$1.79 in economic activity.

Since 2003, all SNAP benefits have been distributed using Electronic Benefits Transfer (EBT) technology. SNAP recipients are only able to access EBT benefits for eligible food purchases made at USDA-approved retailers. SNAP benefits can only be used to purchase food items and cannot be used for non-food items such as diapers, napkins or vitamins. For most SNAP recipients, benefits cannot be used for purchase of prepared food, but federal law makes an exception for elderly, disabled and homeless recipients if they reside in a state that has chosen to enroll these populations in the RMP.

SNAP Participation, Food Insecurity and Health

To the extent that some contrary research suggests an association between SNAP participation and obesity, those studies do so primarily for adult women, not for children and adult men, further confounding efforts to identify a connection. And most of the SNAP studies examining obesity do not control for food insecurity (thereby introducing selection bias), which is a considerable limitation because food insecurity is associated with greater overweight and obesity outcomes, especially among women, and SNAP participants have high rates of food insecurity.

Furthermore, there is evidence that any relationship between program participation and obesity is not uniform by age, gender, or race-ethnicity; is not consistent over time; and varies depending on local food prices. This is not too surprising given that disparities in obesity prevalence exist in the U.S. based on a number of factors, including age, gender, race and ethnicity, and obesity trends by income have been changing over time. Furthermore, social

¹² SNAP/Food stamp monthly participation: October 2011, Food Research and Action Center. http://frac.org/reports-and-resources/snapfood-stamp-monthly-participation-data/

¹³ Policy Basics: An Introduction to SNAP. Center on Budget and Policy Priorities, January 2012.

¹⁴SNAP is Effective and Efficient. Dorothy Rosenbaum, Center on Budget and Policy Priorities, January 2012.

¹⁵The Food Assistance National Input-Output Multiplier Model and the Stimulus Effects of SNAP, Economic Research Service, USDA. October 2010.

¹⁶ http://www.fns.usda.gov/snap/ebt/

safety net programs that reduce financial stress for families may have the added benefit of reducing obesity, given the strong link between stress and obesity.

However, reducing access to the program or making the program more challenging to navigate will only increase the already high levels of stress experienced by low-income families. Perhaps most important of all health outcomes is SNAP's role in reducing food insecurity. Food insecurity is associated with some of the most costly health problems in the U.S., including diabetes, heart disease, and depression. Research also shows a clear link between food insecurity and low birth weight, birth defects, iron deficiency anemia, more frequent colds and stomachaches, developmental risk, and poor educational outcomes — all of which have serious health and economic consequences. The consequences of food insecurity are especially detrimental to the health, development, and well-being of children. In addition, because of limited resources, those who are food insecure often are forced to choose food over medication, postpone preventive or needed medical care, or forgo the foods needed for special medical diets (e.g., diabetic diets), which not only exacerbates disease and compromises health, but also increases expensive physician encounters, emergency room visits, and hospitalizations.

Some have suggested that restricting SNAP consumers' choice might improve dietary intake and combat obesity among low-income people. There are many problems with the rationale, practicality, and potential effectiveness of an approach that restricts the use of SNAP benefits. There is only limited research exploring the potential impact of food restrictions in SNAP. Researchers at the University of California-Davis concluded that a number of possible consequences (e.g., discouraging participation, higher prices for "healthy" food) made it an impractical, ineffective strategy to change. But there is also a separate concern: those suggesting strategies aimed uniquely at keeping poor people from the normal streams of decision-making and commerce bear a burden of justifying that targeting. As the USDA has written: "as the problems of poor food choices, unhealthy diets, and excessive weight characterize all segments of American society, the basis for singling out low-income food stamp recipients and imposing unique restrictions on their food choices is not clear." ¹⁷ Despite stereotypes that low-income families spend their food budgets unwisely, predominantly eating out at restaurants with poor nutritional options, it has been shown that middle-income families are far more likely to eat out than low-income families. 18 In fact, 85% of low-income parents say that eating healthy meals is important to their families. ¹⁹

History of the Restaurant Meals Program

SNAP helps 46.2 million Americans and 4 Million Californians with gross incomes below 100% of the federal poverty line, meet basic food needs. ²⁰.But for many elderly, disabled and homeless individuals, these food benefits offer limited assistance as they are unable to store or prepare

¹⁷ Food Research and Action Center, "A Review of Strategies to Bolster SNAP's Role in Improving Nutrition as well as Food Security." October 2011. Available at: http://frac.org/wpcontent/uploads/2011/06/SNAPstrategies.pdf

¹⁸ "UC Davis study shows that fast-food dining is most popular for those with middle incomes rather than those with lowest incomes." http://www.ucdmc.ucdavis.edu/publish/news/newsroom/5673.

¹⁹ Share Our Strength, "It's Dinnertime: A Report on Low-Income Families Efforts to Plan, Shop for and Cook Healthy Meals." January 2012.

²⁰http://frac.org/reports-and-resources/snapfood-stamp-monthly-participation-data/

food safely themselves. This was the driving factor behind California's decision to implement the Restaurant Meal Program (RMP), a federal option that allows these recipients to purchase prepared food at a qualifying restaurant.

Under SNAP rules, recipients are limited to purchasing only non-prepared food items. One of the few exceptions to this rule is for recipients who live in a state that choses to offer the RMP option to people who are elderly, disabled or homeless, allowing them to use SNAP benefits to purchase a prepared meal at qualifying restaurants.

States have had the authority within SNAP to establish a RMP option for elderly or disabled recipients since 1978 when the RMP was created to give states the option to allow these vulnerable populations to purchase hot prepared food in authorized restaurants²¹. In 1996, under the Mickey Leland Memorial Domestic Hunger Relief Act, the program was expanded to include homeless SNAP recipients.²²

Despite its availability, only a few states have extended the RMP option to eligible SNAP recipients. In January of 2012, participating states included Arizona, California, Florida, Michigan and Rhode Island. The largest RMP is in California where it has been a county option since 2003.

Restaurant Meal Program-Eligible Populations

People who are homeless, elderly or disabled are less able to use SNAP food benefits in traditional ways as they do not have the tools, appliances or physical abilities necessary to prepare their own meals. Simply put, the absence of the RMP option complicates participation among certain SNAP-eligible, vulnerable populations. ²³

The disabled, elderly or homeless SNAP recipient who is afforded the RMP option to eat at a certified restaurant is nourished by an affordable meal in a food-safe environment and by eating in a public place that welcomes their presence, as opposed to eating in isolation or on the streets while looking over their shoulder. The RMP is a public-private partnership that creatively addresses hunger among hard-to-reach populations, making SNAP work for them.

Disabled: SNAP, and therefore CalFresh, defines applicants and recipients as disabled if he or she:

- Receives State disability or blindness payments based on Supplemental Security Income (SSI) rules; or
- Receives a disability retirement benefit from a governmental agency because of a disability considered permanent under the Social Security Act; or

²¹http://www.fns.usda.gov/snap/rules/Legislation/history/PL 95-113.htm

http://www.fns.usda.gov/snap/rules/Legislation/history/PL 101-624.htm

www.ebtproject.ca.gov/restaurantmeals.aspx

- Receives an annuity under the Railroad Retirement Act and is eligible for Medicare or is considered to be disabled based on the SSI rules; or
- Is a veteran who is totally disabled, permanently housebound, or in need of regular aid and attendance; or
- Is a surviving spouse or child of a veteran who is receiving VA benefits and is considered to be permanently disabled.

Work-limiting disabilities increase the risk of food insecurity among low-income families. Within the very low food security subgroup, 37 percent of households had at least one working-age disabled adult. Households with disabled adults incur high medical costs and reduced or prevented employment for both the disabled and caretakers. Households with no member in the labor force and at least one working-age adult who was out of the labor force because of a disability had the highest rate of very low food security at 23 percent and were 29 percent of all low-income households with very low food security. Increasing participation in assistance programs for the disabled is an important way to improve food security in this economically vulnerable population.²⁴

Elderly:

SNAP, and therefore CalFresh, applicants and recipients are considered "elderly" if they are over 60 years of age. Low-income seniors have limited food budgets, lower nutrient intakes and higher rates of hospitalization and mortality. Nationally, 34 percent of eligible seniors participate in the SNAP program.²⁵ In California, only one in ten eligible seniors participate due to isolation, misinformation about benefits, stigma around public assistance, and a difficult application process.²⁶ Supplemental Security Income (SSI) and State Supplementary Payment (SSP) recipients are unable to participate. From FFY 2002 to 2006, CalFresh served no more than 11 percent of the state's eligible seniors (individuals 60 years of age and older).²⁷

In a recent report by the California Food Policy Advocates, three strategies were proposed to increase CalFresh enrollment and food security among low-income seniors: 1) data sharing between social service agencies that administer benefits for seniors (i.e. Social Security Administration), 2) standardized benefits, telephonic signatures, and self-verification of shelter, medical and income expenses, 3) waiver of face-to-face interviews.²⁸

On October 6, 2011, AB 69 was signed into law, giving seniors applying for Social Security the option of having their information shared with a county CalFresh office. Once implemented, this enrollment method will increase seniors' awareness of CalFresh benefits and save time and administrative burdens for both seniors and CalFresh caseworkers.²⁹ In a publication published

²⁴http://www.ers.usda.gov/Amberwaves/february08/Findings/Disability.htm

²⁵Policy Basics: An Introduction to SNAP. Center on Budget and Policy Priorities, January 2012.

²⁶An Opportunity to Boost Senior Participation in CalFresh. California Food Policy Advocates, October 2011.

²⁷Karpilow, K. A., Reed, D. F., Chamberlain, P.T., & Shimada, T. (October 2011). Primer Module on CalFresh. In Understanding Nutrition: A Primer on Programs and Policies in California. (2nd ed.). Sacramento, CA: California Center for Research on Women and Families, Public Health Institute.

²⁸ An Opportunity to Boost Senior Participation in CalFresh, Kerry Birnbach, California Food Policy Advocates, October 2011.

²⁹ CCWRF report

by the National Senior Citizens Law Center and the Western Center on Law and Poverty, it was noted that adding CalFresh to the application process for low-income seniors applying for medical subsidies would increase participation among the elderly.³⁰

Homeless:

SNAP, and therefore CalFresh, applicants and recipients are considered "homeless" under federal law if they:³¹

- have no fixed, regular place to sleep at night or;
- sleep at night at one of the following:
 - o a shelter (which includes a welfare hotel or congregate shelter); or
 - o a half-way house; or
 - o the home of someone else if you are there less than 90 days; or
 - a place where people do not usually sleep such as a doorway, a lobby, a bus station, a hallway, or a subway.

In a report issued by the U.S. Conference of Mayors' Task Force on Hunger and Homelessness, respondents provided relevant information on emergency food assistance and homeless service between September 2010 and August 2011. The number of persons experiencing homelessness increased across the survey cities by an average of six percent. Among families, the number experiencing homelessness increased across the survey cities by an average of 16 percent, with six in 10 of the cities reporting an increase. Children are experiencing homelessness more frequently, with more than 1.6 million children without homes in America. California is rated the 46th worst state on child homelessness policies.³² Across the survey cities over the last year, an average of 18 percent of homeless persons needing assistance did not receive it. Because no beds are available for them, emergency shelters in two thirds of the survey cities must turn away homeless families with children. Officials in 64 percent of the survey cities expect the number of homeless families to increase over the next year, and 11 percent of these expect the increase will be substantial. No survey city expects resources to provide emergency shelter to increase over the next year.³³

People who are homeless have all the same rights under the SNAP program as people who are housed, but face additional barriers to accessing SNAP benefits. These include:

- Lack of adequate transportation;
- Lack of knowledge about the program;
- Barriers caused by mental illness;
- No mailing address or telephone to receive communication from SNAP worker; and/or

³⁰ New Opportunities for Helping Low-Income Seniors: Recommendations for Streamlining Medicare Savings Program and Medi-Cal Determinations and Improving Access to Nutrition Assistance, National Senior Citizens Law Center and Western Center on Law and Poverty (August 2010)

 $[\]frac{http://www.wclp.org/Resources/WCLPContent/tabid/1088/smid/3613/ArticleID/680/t/Improving-Access-to-Medicare-Savings-Program/Default.aspx$

³¹7 C.F.R. § 271.2 - definition of "homeless individual"

^{32 1.6} million Children Homeless in America, Christina Murphy, The National Center on Family Homelessness

³³Hunger and Homelessness Survey, US Conference of Mayors, December 2011.

No documentation or collateral contacts needed to verify identity or residency.³⁴

Additionally, even when they are determined eligible for SNAP benefits, people who are homeless can find it difficult to use their EBT card to purchase food because people without homes often lack the basic necessities of safe food preparations like cooking utensils, clean water, or a place to heat, cool or store food. Like so many people who live below the FPL, people without homes often live in areas that do not have grocery stores or if there are grocery stores, they lack a safe place to leave their things while they shop. While many urban areas have charitable feeding programs, like soup kitchens, the meals served by these organizations are often limited to five meals a week and there are many urban and rural communities that do not have charitable food programs at all.

IV. Limits of Charitable Feeding Programs in Preventing Skipped Meals

As the debate about the RMP hit the front pages of newspapers and food blogs across the county, few discussed the real lack of meaningful alternatives for people who have very small incomes and lack abilities or facilities to prepare their own food. Some of the critics argued that if elderly, homeless or disabled SNAP recipients could not prepare their own food, they could turn to charitable feeding programs to prepare their food. These statements and assumptions were based on a misperception of how emergency food programs work, how they are funded, the quality of food that they can afford to serve, the number of meals they serve per day and the capacity of these programs to meet all food needs for their customers on any given day.

Below are excerpts of interviews with program directors at two such programs in California urban centers where RMP programs have been established. These narratives remind us that while emergency feeding programs are an essential contributor to the food safety-net for very low-income Californians, they cannot reach all those in need with three meals a day. They are not positioned to be as effective as preventing missed meals for elderly, disabled and homeless Californians as can be secured through the public-private partnership of the RMP.

Loaves and Fishes: Founded in 1983, Loaves and Fishes provides food for the hungry and shelter for the homeless. Loaves and Fishes is a private charity and neither solicits nor accepts government money. In 2011, Loaves and Fishes served their six millionth meal. In October 2011, 775 meals were served, up from 625 in October 2007. By contrast, 2,358 people experience homelessness on any given night in Sacramento.³⁵

Sister Libby Fernandez, Executive Director of Sacramento Loaves and Fishes, on rising hunger and food insecurity in Sacramento:

"At the beginning of the month we are serving 300 to 400 guests meals. By the end of the month, we serve up to 1,000. More people are right on the edge, and need the extra help to feed themselves.

³⁴ Homelessness and Food Stamps, Rights and Barriers, National Law Center on Homelessness and Poverty

³⁵ Homeless Count 2011, Sacramento Steps Forward.

"The fact is that people have very little resources and places to actually receive food. Not everyone can come to Loaves and Fishes. You have to take a light rail that costs six dollars or you're biking and that's only for one meal. Just because there is a Loaves and Fishes does not mean that people aren't hungry. To have an extra program attached to Loaves and Fishes would be ideal. Maybe something like a token for the nearest Subway [restaurant] after they have a meal here, so people can sleep well at night. We have a limited feeding program. It's only Monday through Friday for everyone. We have existing programs here but there's definitely a need for more access.

"Nutrition is very important and we do our best to provide a full, healthy meal. We could improve our nutritional guidelines; we could always use more resources and training. It's something that we're up for, but we have to work with what's donated. But we do have a work with a variety of food, so people do have choices. Willpower is what's in front of your face, if you're hungry, you're hungry. We never judge people for how much butter they put on their plate. There are very few choices that people get, so we never judge them. If there's an organization that could provide the training and the food to go with it, that would be perfect.

"As a society, we're looking at the reality of obesity. And we're not talking just low-income and homeless people, we're talking everyone. The way food is presented, the way we eat is not healthy. Your choices are very present when you're homeless. When you don't know when your next meal is coming from, you don't make choices based on health. If people know where their next meal is coming from, they will be better able to make healthy choices."

St. Anthony Foundation: In the spirit of St. Francis of Assisi, the mission of St. Anthony Foundation is to feed, heal, shelter, clothe, lift the spirits of those in need, and create a society in which all persons flourish. They are committed to providing the poor of San Francisco with basic needs and services as a gateway to reclaiming their sense of dignity and to progressing towards stability.

^colleen Rivecca, Legislative Advocate at St. Anthony Foundation, on how the RMP complements emergency feeding programs:

"The Restaurant Meals Program supports local economies and helps individuals eat who otherwise would not. The Restaurant Meals Program gets wrongly categorized as a program that is for all food stamp recipients when in reality, it is for people who cannot prepare their own food. Food stamps are not beneficial for RMP-eligible food stamp recipients if they can't get prepared food.

"St. Anthony's is unique because we have a non-government funded meal program that's been in existence for 61 years now. We've seen the program grow. When it started in 1950, it served 400 people a day and now it serves 3,000. At the same time, we see that the people who eat in our dining room are supported by other nutritional

programs like the RMP. We see our program and the RMP as complementary programs. We know without food stamps, particularly the RMP, we would see even higher numbers of people in our dining room. I see RMP as a way to make food stamps work for people whose life situations make it so they cannot cook at home. They can eat.

"Limited access to food is a huge problem, especially when living in the shelter system. You spend a lot of time spent waiting for a bed and sometimes, when you go in you can't leave until morning. The RMP ensures that you get food despite limitations on your time.

"We should not just be providing charity, but treating our brothers and sisters who are in poverty with the same respect that we would want. There's a lot of shame in participating in any type of government assistance. The work that we're doing here is about breaking down that shame and giving people a chance to understand poverty from the perspective of the people that experience it. Breaking through RMP stereotypes is connected to our mission of exposing poverty as an injustice."

VI. Restaurant Meal Program Implementation in California

County Participation in the Restaurant Meals Program

Which Counties Participate

In California, the Restaurant Meals Program is a county option, meaning each county determines if it wants to participate in the RMP. Counties interested in participating must submit a proposal for approval to the California Department of Social Services (CDSS). Currently, six counties are participating in the program: Alameda, Los Angeles, Sacramento, San Diego, San Francisco, and Santa Clara counties.

Los Angeles County

Los Angeles County began the Restaurant Meals Program in 2005 after going through the approval process with the Los Angeles Board of Supervisors.³⁶ According to Lino Rios and Lilia Erviti³⁷ with the Los Angeles Department of Public Social Services, there are currently four individuals working on the program, one manager and three program assistants, who work mostly to ensure that the 1,200 restaurants participating have their paperwork, like health permits, insurance liability, and the license with the Food and Nutrition Service (FNS), in order. This staff also visits each vendor annually to make sure that they are complying with federal SNAP laws and that they are displaying the RMP decal designed by Los Angeles County.

³⁶ Board of Supervisor approval is not required for state or federal approval of the plan but because RMP requires that a Memorandum of Understanding (MOU) be established between the county CalFresh administering agency and each restaurant, county human services departments may fall under county rules to obtain Board approval for these MOUs. 37 Interview with Lino Rios and Lilia Erviti, Los Angeles Department of Public Social Services, conducted on the phone on December 6th, 2011

Early on, clients had to carry a paper identification to indicate eligibility because the county's eligibility system did not have a way to identify RMP clients. Since then, the county's eligibility system has built in functionality to identify the RMP-eligible population. The system automatically sends the client a letter directing them to a participating restaurant list on the Los Angeles County website, and notifies the EBT Vendor to program the card so that it can be used at restaurants and clients no longer have to carry separate proof of RMP eligibility.

Looking back, Rios is proud of where the program has come: "when the County first launched the program, there were only a few businesses that wanted to be a part of it. After a lot of advertising, little by little we added restaurants." Increasing the numbers of RMP restaurants has improved food security and turned out to be key to keeping some businesses and jobs in already struggling neighborhoods. During the first two years of the recession, program administrators heard from many participating restaurants that they would have closed were they not on the RMP.

Responding to the critique that RMP drives participants to 'fast food' and unhealthy restaurants, Rios stated, "While there is no written process to turn people away, we explain to restaurants that we are focusing on healthy eating and we review their menus." He also added that one of the driving factors for establishing the program in Los Angeles County was to address unique food needs of a large homeless population that has nowhere to safely prepare or store their food. "Our County is trying to find ways to serve people who are homeless and food insecure. So what is LA County doing to address this food insecurity? We have an RMP."

In giving advice for other counties considering adoption of the RMP, Rios advices that they should consider an online form for restaurant inquiries to streamline the application process and be sure to connect with local anti-hunger advocates, chambers of commerce and restaurant associations to assist in the restaurant outreach process.

San Francisco County

After extensive advocacy on the part of local advocates and the California Department of Social Services, and with encouragement from the USDA Food and Nutrition Services (FNS) Western Region Office, San Francisco was the first county to offer the RMP with a pilot program in 2003 before the state was fully signed on with FNS to allow the RMP statewide.

According to Leo O'Farrell and Lotta Torres-Clemente from the City and County of San Francisco Department of Human Assistance³⁸, the RMP has been a great benefit to the homeless population in San Francisco and they are pursuing strategies to expand it for the elderly and disabled. Torres-Clemente manages most of the RMP oversight on her own including the Memorandum of Understanding (MOU) with the County, all of the IDs and business licenses

³⁸ Interview with Leo O'Farrell and Lotta Torres-Clemente, City and County of San Francisco Department of Human Assistance, conducted in person on December 2nd, 2011

and keeping up with the restaurant's public health ratings. San Francisco County only selects restaurants with ratings of 90 percent or higher. If it is below, she informs them and checks back to see if they have rectified the problem and then they resubmit with their new score.

O'Farrell wonders, "If someone is living on the street, where are they legitimately going use their benefits? Where will they store food that they buy from the grocery stores? I really believe [the RMP] is a deterrent to trafficking." He suggests that interested counties work with their local departments of public health, advocates, and local merchants association to make a compelling case to elected officials so they aren't swayed by a couple of editorials. Emphasize that it's good for business.

San Francisco County is looking at food as a spectrum. They acknowledge that while they have more fast food restaurants on their RMP they are going to reach out to nutritious and ethnically diverse restaurants to sign up. The County will continue to put forth effort to provide culturally appropriate and conveniently located restaurants for their RMP clients. These restaurants would tip the scales more to the middle of the spectrum in San Francisco.

Alameda County

In January 2011, Alameda County was RMP authorized by the USDA-FNS³⁹. Alameda was one of the first counties required to submit a demographic analysis of their RMP eligible population and restaurants; the Alameda Department of Environmental Health completed the report for the RMP authorization. Alameda also submitted restaurant outreach material, including a restaurant fact sheet and signage that outlines who is eligible for the program. According to Sheila Danehy-Oakes of Alameda County Services, there are plans in place to sit down with stakeholders and conduct outreach to the restaurants in the areas where the most RMP participants live. In Alameda County, existing CalFresh recipients who are eligible for RMP will have to get a new card when they are coded as RMP eligible in the system, while new applicants will have EBT cards coded automatically. Danehy-Oakes said that in their application, Alameda indicated that they will promote healthy eating. "Part of changing the nutritional landscape is by having an RMP that gives options to people that wouldn't have them otherwise."

Sacramento County

In Sacramento County, the RMP got off to a slow start in the beginning. According to Nancy Scheiber and Vicki O'Brien of the Sacramento Department of Human Assistance, the program expanded from 16 restaurants in 2008 to 60 in 2011.

³⁹ Ecaterina Burton, Legislative Advocate at the Alameda County Community Food Bank says that there are several reasons for but that RMP success was possible because advocates made a coordinated request, the restaurants helped to advocate for the program and these both landed in the ears of a member on the county board supervisors, Nadia Lockyer, who clearly understood the need for the program and became a local champion for the RMP. In the end, the Board of Supervisors were moved to support the program after hearing of the experiences of clients.

Scheiber and O'Brien are concerned about the recent guidance (October 2011 ACIN) that limits the program to the spouses of the elderly and disabled. Prior to this guidance, RMP clients and their families were able to eat at authorized restaurants. Scheiber: "I'm not sure who is going to be the restaurant police to make sure that people are abiding by it. I think that this may make other counties back away from the program. What are the liabilities? Some counties may decide that there are too many sticking points. When I've talked to other counties I've heard that there's too few staff to make the program successful. With the budget, we can't hire additional staff."

Scheiber, who devotes the most time to the RMP notes that the state and the federal levels seem to be pushing back against each other and she is unclear on who to contact with any questions.

When it comes to nutritional standards, O'Brien knows that the state prioritizes healthier foods but is unsure what impact the the Sacramento DHA can have within the program's current guidelines or how one would go about defining a restaurant that served healthier foods. The USDA approves applications from restaurants, so the Sacramento DHA cannot deny any restaurants. "When we get applications from fast food restaurants all we can do is send them on to the feds. At this point, we're just proceeding. We're not in a position to deny because we're not in a position to approve."

O'Brien takes a realist stance: "I'm all for healthy eating but at the same time who is going to police it? We've looked at how much our homeless recipients have to spend a day and it's around \$6. You have to go somewhere where there's a value menu. That's their budget for the entire day."

Santa Clara County⁴⁰

Santa Clara first implemented the RMP in 2006 and decided that if they could find restaurants to sign up they would pursue it. One of the biggest issues Santa Clara has had is getting restaurants to complete all the necessary paperwork. Restaurants often get lost in the bureaucracy, submitting insurance papers and putting together the MOU. Also, with high restaurant employee turnover, restaurants get the POS and never open it because a new manager might not know that the restaurant is RMP certified. County administrators note that there is too much bureaucracy around the RMP and if the process were simplified, it would allow more restaurants to sign on to the program and serve more participants.

The county works with outreach workers from Second Harvest and the Department of Public Health to expand the program on the restaurant and client side. They also report that once they unveil the bureaucracy of the RMP to restaurants, many back down. Despite limitations, clients use the program widely at the restaurants that currently participate. Administrators suggest

⁴⁰ A link to Santa Clara's materials, also in the appendix: http://www.sccgov.org/portal/site/ssa/agencychp?path=%2Fv7%2FSocial%20Services%20Agency%20%28DEP%29%2FDepartment%20of%20Employment%20%26%20Benefit%20Services%2FFood%20Assistance%20%28CalFresh%20%26%20more...%29

that restaurant sign up would be easier if the contract renewal period were longer than a year. However, the participating restaurants both get more customer traffic and feel good because they are helping a needy population. On the customer side, administrators note that they have never heard a negative comment.

Santa Clara has recently been pursuing farmers' markets to sign on prepared food vendors to the RMP. On the grocery side, the county made an aggressive effort at the beginning of their program but was cut short by Safeway's corporate office. Much of Santa Clara's homeless population goes to the grocery store for food, so grocery store sign ons would be a win for everyone. Santa Clara administrators suggest that up and coming RMP counties work with their department of public health because many are already conducting outreach with RMP eligible populations. 41

San Diego County

In January 2011, the Board of Supervisors of San Diego County directed the Health and Human Services Agency to explore the feasibility of the RMP. San Diego DHHS reviewed the feasibility of costs, what resources would be necessary and how long it would take to get the program up and running; they were approved by the USDA-FNS to implement the RMP in March 2011. At the time of the feasibility study, the county realized that they would not be able to staff the program and a partnership with the San Diego chapter of the California Restaurant Association was established. The idea is that the San Diego CRA will conduct restaurant outreach, keep the restaurant applications and verify that all materials are in place to submit the final application to the county. The county will then forward the application to the USDA. Currently, San Diego DHHS and San Diego CRA are negotiating their Memorandum of Agreement outlining the responsibilities of the CRA to the DHHS and vice versa. 42

How to Participate in the RMP

Information about how to become an RMP county in California is detailed in CDSS All County Information Notices I-31-04 and I-71-11, which can be found at:

http://www.dss.cahwnet.gov/getinfo/acin04/pdf/I-31 04.pdf and

http://www.dss.cahwnet.gov/lettersnotices/entres/getinfo/acin/2011/I-71_11.pdf, respectively.

Additionally, some counties have helpful information about how they administer their RMP on their websites, below are links to their websites:

Los Angeles: http://www.ladpss.org/dpss/restaurant meals/pdf/Restaurants list.pdf

Sacramento:

http://www.dhaweb.saccounty.net/Financial/documents/Approved%20Restaurant%20List.pdf

⁴¹ Interview with Katherine Buckovetz, Michelle Greenwood and Dana McQuary of Santa Clara Social Services Agency, conducted on the phone on January 30th, 2012

42 Interview with Adrienne Yancey, County of San Diego Health and Human Services Agency, conducted on the phone on

February 1st, 2012

San Francisco: http://www.sfhsa.org/156.htm

Santa Clara:

http://www.sccgov.org/SCC/docs%2FEmployment%20%26%20Benefit%20Services,%20Department%20of%20(DEP)%2Fattachments%2FSCD 2307 en%20Vendor%20Information.pdf

For more information about RMP participation in California, contact the CalFresh Policy Bureau at (916) 654-1896 or visit: http://www.cdss.ca.gov/foodstamps/contact.htm

CalFresh Recipients: Client Eligibility and Process of Purchasing Meals

The RMP only allows CalFresh recipients to use their Golden State Advantage EBT card to purchase prepared meals from participating restaurants if they are homeless, age 60 years or older or disabled or the spouse of someone who is disabled or elderly. 44

Once a county has launched their RMP, they will automatically identify recipients who are eligible to purchase a prepared meal at a restaurant. This information will be sent to the state's EBT vendor so that recipient EBT card numbers can be coded as RMP-eligible. Not all counties have mastered the process of informing CalFresh recipients who are RMP-eligible that they have the option to purchase a meal at a restaurant.

In San Francisco County, the CalWIN computer system has been coded to show whether or not a participant is eligible for the Restaurant Meals Program. They have encountered issues with restaurant employees; they recently had a restaurant that charged a secret shopper sales tax. These issues arise due to high employee turnover rate in the restaurant industry. If a participant is RMP eligible and comes in for CalFresh approval, a county eligibility worker will tell them about the program and provide a list of restaurants that accept EBT. The San Francisco County system automatically enrolls participants once they are identified as eligible.

In Sacramento County, participants apply for CalFresh and if they meet the criteria for RMP eligibility, the eligibility worker will code it into their EBT card. The next time a participant's status is recertified, their RMP eligibility is reevaluated.

Why and How California's Anti-Hunger Advocates are Asking for Restaurant Meal Programs

Homeless, elderly and disabled advocates across the state of California have been indispensable in RMP implementation. They have the pulse on the needs of their communities and have worked in partnership with counties and restaurant associations to ensure that the program best serves RMP participants.

⁴³ http://www.ebtproject.ca.gov/restaurantmeals.aspx

⁴⁴ http://www.fns.usda.gov/snap/applicant_recipients/eligibility.htm#special

According to Bob Erlenbusch, Executive Director of the Sacramento Housing Alliance, the RMP can dramatically change how CalFresh recipients who are homeless reduce hunger and even how they are treated in the community. "Disenfranchised communities are fed by the RMP. At the end of the day, it's to fight hunger and expand options for people. The RMP provides food to people that might be turned away otherwise." In a survey conducted by the Sacramento Housing Alliance, almost 20 percent of homeless people responded that they had experienced discrimination at restaurants in Sacramento. They stated that they had been kicked out of the restaurant, had to show money before they could order, or were targets of nasty comments made by employees and patrons. Erlenbusch explains that, the RMP establishes protocols for how CalFresh recipients must be treated and gives recipients a list of restaurants that are willing to serve them.

Advice for advocates from advocates:

Erlenbusch: "Make sure that you have educated your stakeholders and that they are going to be there to support you. To start, I would create an invite-only roundtable, with both advocates and clients."

Frank Tamborello, Executive Director of Hunger Action Los Angeles: "I'd recommend that advocates partner up with restaurants."

Ecaterina Burton, Legislative Advocate at the Alameda County Community Food Bank says that persistence may be needed, but in the end, this is a program that county leaders can come behind. She explained that throughout the history of the food bank, there has always been some amount of advocacy around the RMP but there had been little traction. "This year was the year that our request was supported and very quickly the RMP was approved and now is being implemented."

Although critics often say that the RMP leads to poor health for low-income Californians, local anti-hunger advocates disagreed. First, they pointed out that the public dialogue about RMP misses the point of the program completely because misperceptions about the program prevail, specifically that the program is only available for CalFresh recipients who are homeless, elderly and disabled.

Tamborello points out that eating healthy on a very low-income is very difficult to begin with, and even more difficult when a person cannot prepare food for themselves due to incapacity or lack of cooking facilities.

Erlenbusch: "The only reason that there isn't a full range of restaurants participating in RMP is that not all restaurants are willing to serve the homeless, elderly and disabled. We have found that they will deny them walking through the door even when they can pay with cash."

⁴⁵ Bob Erlenbusch, Farshid Haque, and Michele Watts. Sacramento Hunger Coalition, "Hunger and Homelessness in Sacramento: 2010 Hunger and Food Insecurity Report." November 2010.

Rivecca: "The Restaurant Meals Program supports local economies and helps individuals eat who otherwise would not. The Restaurant Meals Program gets wrongly categorized as a program that is for all food stamp recipients when in reality, it is for people who cannot prepare their own food. Food stamps are not beneficial for RMP-eligible food stamp recipients if they can't get prepared food."

VII. Conclusion

Hunger is a devastating consequence of increasing poverty in the United States and federal nutrition programs like SNAP are essential to hunger prevention and alleviation. The RMP is an innovative public-private partnership that furthers the reach of SNAP, ensuring that the most vulnerable low-income individuals are fed. Without the program, this population that often cannot safely prepare their own food would likely go hungry and experience increased isolation. Simply put, the RMP makes CalFresh work for a largely ignored sector of our society.

Ultimately, this toolkit is intended to inspire advocates and program administrators to implement the RMP in their communities and offer them the tools they need to do so. Through this project, the Western Center on Law and Poverty and the Sacramento Housing Alliance have strengthened their commitment to expanding the RMP throughout the state of California and hope you will join them in achieving this important goal!

IX. Appendices

Appendix One: Frequently Asked Questions for Clients—Los Angeles DPSS⁴⁶

1. What can the Restaurant Meals do for a client?

The Restaurant Meals Program allows homeless, senior (age 60 or over), or disabled CalFresh participants to use CalFresh benefits to purchase prepared meals using Golden State Advantage (EBT) card at participating restaurants.

2. How can I find out if a client is eligible for the Restaurant Meals Program?

If a client is homeless, elderly (age 60 or over), or disabled receiving Social Security Disability, Railroad Retirement Benefit Annuities, or Cash Assistance Program for Immigrants (CAPI), they may be eligible to purchase meals at participating restaurants. The client must also live in one of the six participating counties: Alameda, San Francisco, Santa Clara, Los Angeles, Sacramento or San Diego. This list is subject to change as new counties are coming on board.

3. Does an eligible client have to apply for the Restaurant Meals Program?

No, an application is not required, if the client is eligible to participate in the Restaurant Meals Program. That is, you meet one of the criteria in question #2.

4. How do I find out if a restaurant is participating in the program?

A restaurant is participating in the program if the Restaurant Meals Program sign or logo is displayed on its door or window.

5. Where can I find a list of participating restaurants?

You may also ask an Eligibility Worker for a list.

6. Do I have to show an identification card aside from my Golden State Advantage (EBT) card to purchase a meal?

No, an identification card is no longer required. Only an EBT card is necessary to purchase a meal at the restaurants participating in the Restaurant Meals Program.

7. After purchasing a meal, will a client get a sales receipt showing their CalFresh benefit balance?

Yes, their sales receipt will show the cost of their meal and their CalFresh benefit balance.

8. Will a client be charged a service gratuity or sales tax when purchasing a meal?

No, the participating restaurants are not allowed to charge a service gratuity or sales tax under the Restaurant Meals Program.

9. If a client's EBT CalFresh benefit is not enough to purchase a meal, can they use the EBT cash benefit to cover the difference for payment?

Yes, a client must inform the cashier that they will use a mixed transaction (EBT CalFresh and EBT cash combined). Before buying a meal, clients should check their last receipt or may call the toll-free EBT Customer Service number (1-877-328-9677 or the TTY at 1-800-735-2929) to find out the balance in their EBT CalFresh account.

⁴⁶http://www.ladpss.org/dpss/restaurant_meals/FAQs.cfm

10. What if an EBT CalFresh transaction is denied by a participating restaurant?

A client must call their CalFresh Eligibility Worker or call the EBT Customer Service Center number (1-877-328-9677 or the TTY at 1-800-735-2929).

11. Need more information?

For more information about the Restaurant Meals Program, call a CalFresh Eligibility Worker or the Central Help Line at (877-481-1044).

Appendix Two: Frequently Asked Questions for Restaurants – Los Angeles DPSS⁴⁷

1. What is the purpose of the Restaurant Meals Program?

The CalFresh Restaurant Meals Program is a voluntary component of the Supplemental Nutrition Assistance Program (SNAP). It enables CalFresh recipients who are elderly (age 60 or over) and/or disabled, and their spouses, or homeless individuals to purchase prepared meals at participating restaurants. Its goal is to provide a variety of nutritious meal choices to eligible CalFresh individuals.

2. Are there any fees that to participate in the Restaurant Meals Program?

There are no fees/dues that a restaurant owner must pay for the Restaurant Meals Program.

3. I have more than one restaurant. Can I apply for all my restaurants to participate in the Restaurant Meals Program?

Yes, a restaurant owner can apply for all owned restaurants to participate in the Restaurant Meals Program.

4. How long does it take to become an authorized restaurant?

The entire process to become authorized takes approximately 60 days.

5. What happens if a participating restaurant changes ownership or closes for business?

The restaurant owner must notify the Department of Public Social Services (DPSS), CalFresh Program and the Food and Nutrition Service (FNS) when a restaurant changes ownership or closes. This ensures that the authorization is cancelled immediately since the previous owner's authorization is NOT TRANSFERABLE. If the new owner wants to continue to participate in the Restaurant Meals Program, he/she must sign an MOU with their county and apply for authorization with the FNS.

6. How do you know if a customer who provides a Golden State Advantage (EBT) card is eligible for the Restaurant Meals Program?

The state EBT system is programmed to automatically identify if a restaurant and an EBT card can be processed for the CalFresh Restaurant Meals Program. EBT cards work similarly to ATM and debit cards.

7. How can you handle a customer whose Golden State Advantage (EBT) card was denied when processed on the EBT/POS device?

A restaurant employee may inform the customer to contact their CalFresh Eligibility Worker at their local county office or call the EBT Customer Service Center at (877-328-9677 or the TYY at 800-735-2929).

8. Can you process an EBT cash transaction when an EBT cardholder, not eligible to participate in the CalFresh Restaurant Meals Program, who wants to use the EBT cash as payment for meals?

Yes, an EBT cardholder not eligible for the program with the EBT cash portion on their card may use it at any site with EBT equipment, even at the Restaurant Meals Program sites.

9. Can a participating restaurant allow a mixed transaction (EBT CalFresh and EBT Cash combined)?

Yes, a participating restaurant may process a mixed transaction when an EBT cardholder eligible for the Restaurant Meals Program informs the cashier that meal payment is EBT CalFresh and EBT Cash combined.

⁴⁷http://www.ladpss.org/dpss/restaurant_meals/FAQs.cfm

10. How can the eligible CalFresh individuals know that our restaurant is participating in the program? Your restaurant name and address will be placed on a list of participating restaurants, which we provide to eligible participants through our local district offices, community organizations, community partners and advocates. The list of participating restaurants can also be accessed through the California EBT Client Website at www.ebt.ca.gov. In addition, the restaurant will display a Restaurant Meals decal on their front door or window.

11. How long does it take to be reimbursed for the Golden State Advantage (EBT) card meal purchases?

EBT meals purchases are usually reimbursed within forty-eight hours.

Appendix Three: Los Angeles County Sample Memorandum of Understanding (MOU)

RMP restaurant (i.e. CONTRACTOR) responsibilities

- CONTRACTOR shall provide low-cost meals for breakfast, lunch and/or dinner during regular hours to eligible homeless, elderly and disabled CalFresh participants. Low-cost meals are defined as:
 - Meals that cost less than what would be charged to customers not using CalFresh; or
 - Discounted meals already offered to certain consumers; or
 - Advertised special (i.e., breakfast, lunch and/or dinner combination meals), or sale priced meals, offered to all customers.
- CONTRACTOR must provide meals to all eligible patrons under this MOU without regard to race, color, creed, religion, national origin, ancestry, age, height, weight, sex, sexual preference, gender identity, domestic partner status, marital status, disability, or Acquired Immune Deficiency Syndrome, or HIV status (AIDS/HIV status). See part 5.3, Civil Rights.
- CONTRACTOR must collect payment from patrons eligible under this MOU through the Electronic Benefit Transfer (EBT) System.
- CONTRACTOR must post a sign, in a manner and place prescribed by COUNTY, informing the general public of CONTRACTOR's participation in Restaurant Meals Program and include references to nondiscrimination statues and regulations.
- CONTRACTOR must provide to the COUNTY an Incident Report in the event that it becomes necessary to report that something occurred in the course of business that may have a significant impact on Restaurant Meals Program participants. This may include, but is not limited to, incidents of food borne bacteria that may cause illness, or an illness of an employee that is of a nature that customers may have been exposed or put at risk of contracting an illness or disease. Incident Reports must be submitted to the County Contract Manager within 72 hours of the occurrence.
- CONTRACTOR must <u>not</u> include a service gratuity in the cost of the low cost meals. CONTRACTOR is further prohibited from charging a sales or meals tax to any eligible household who uses CalFresh benefits to purchase a low cost meal.
- CONTRACTOR must <u>not</u> accept CalFresh benefits for the purchase of alcoholic beverages.
- CONTRACTOR must abide by the rules and regulations of the USDA-FNS regarding Supplemental Nutrition Assistance Program benefit acceptance and redemption. Upon execution of an agreement, CONTRACTOR must complete and submit an application for authorization to participate in the Supplemental Nutrition Assistance Program for Communal Dining Facilities (Form FNS 252-22) with the USDA. CONTRACTOR must notify COUNTY once such authorization is received and provide COUNTY with a copy of the certification document. The agreement is contingent upon CONTRACTOR certification by the USDA to participate in the Restaurant Meals Program.

- CONTRACTOR must comply with all local, state and federal health and safety regulations pertaining to retail food operations. CONTRACTOR must maintain a current public health operating permit, issued either by the County of Los Angeles Department of Health Services or by a municipal health department, throughout the term of the agreement. CONTRACTOR must provide a copy of such current permit upon request of COUNTY.
- CONTRACTOR must install Electronic Benefit Transfer (EBT) equipment, and/or software from an EBT certified processor and be available to service Restaurant Meals Participants within 60 calendar days of notification from DPSS acknowledging FNS Certification.
- CONTRACTOR must surrender immediately all EBT equipment, software and/or hardware to the appropriate EBT vendor upon termination of this agreement; or the revocation of certification by the USDA-FNS.
- CONTRACTOR must not delegate its duties and/or assign its rights, either in whole or in part, without the prior written consent of COUNTY. Any attempted delegation and/or assignment without the COUNTY's prior written consent must be void. Any attempt by CONTRACTOR to assign or subcontract any performance of the agreement without the express written consent of COUNTY must be null and void and will constitute a breach of the terms of the agreement. In the event of such a breach, the agreement may be terminated.

Appendix Four: Alameda County Sample Memorandum of Understanding (MOU)

MEMORANDUM OF UNDERSTANDING (MOU) with [participating restaurant name] located at [address].

CalFresh, through the Restaurant Meal Program (RMP) authorized by Federal and State law, allows local communities to meet the food needs of CalFresh recipients who are homeless, elderly, or disabled and whose ability to prepare meals may be limited, due to health status or a lack of cooking facilities. The RMP allows these recipients to purchase low cost prepared meals with their CalFresh benefits, using their Electronic Benefits Transfer (EBT) card. Meals may be purchased from any restaurant certified for RMP transactions by the United States Department of Agriculture, Food and Nutrition Service (USDA FNS).

This MOU constitutes the agreement between the participating restaurant listed above, hereafter referred to as the "Contractor," and Alameda County Social Services Agency, hereafter referred to as the "Agency." This agreement delineates the responsibilities of both the Contractor and the Agency.

- 1. The Contractor will:
- a. Provide low cost meals during regular business hours to eligible CalFresh recipients.
 - i. Low cost meals will be offered at:
 - 1. Prices set below what is charged to non CalFresh Restaurant Meal patrons.
 - 2. Discounted prices equal to or below what is offered to other discounted patrons.
 - 3. Advertised specials and/or sale-prices offered to all patrons.
 - ii. Low cost meal charges may not include gratuity charges, sales, or meal taxes.
- b. Verify that the recipient's EBT card reflects that the patron is eligible for RMP purchases.
- c. Accept payment by EBT.
 - i. The Contractor is responsible for obtaining the EBT equipment and software to transact benefits.
 - ii. The Contractor must notify the Agency when EBT payment can be accepted at the restaurant.
 - iii. Prohibit the sale of alcoholic beverages to RMP participants.
- d. If provider has some indoor seating for regular patrons, some indoor seating must be made available to CalFresh patrons.
- e. Post an Agency approved "notice of participation" in the RMP in public areas. This "notice of participation" must include reference to federal and state non-discrimination statutes and regulations.
- f. Be certified as an authorized Meal Service provider by USDA FNS.

- i. The Contractor will provide the Agency with a copy of the certification when received from USDA FNS.
- ii. The Contractor must notify the Agency immediately if their certification expires, is suspended, or is revoked for any reason.
- iii. In the event of that the Contractor's certification is no longer valid (due to expiration, suspense, or revocation), the Contractor is responsible for the return of all EBT equipment to the EBT vendor.
- g. Maintain the Contractor (and/or subcontractor) contact information with the Agency.
 - i. The Contractor will not assign its rights or duties to subcontractors or others as identified in this MOU, either in whole or part, without prior written consent from the Agency.
 - ii. All such authorized subcontractors/other designees must comply with all Contractor responsibilities. The Contractor will ensure that all subcontractors are compliant with the provisions of this MOU.
- h. Maintain a current public health permit and comply with all Federal, State, and local health and safety laws, regulations, and ordinances.
 - i. Document all complaints involving the RMP from RMP patrons including all pertinent information about the incident, and any follow-up investigation and steps to resolve the complaint that is taken by the meal provider. The Contractor will submit this information to the Agency contact within five days of the complaint.
- j. Document any circumstance that impacts, or may impact, RMP patrons in an "Incident Report". Reported incidents may include, but are not limited to, incidents of food-borne contagions, employee illnesses that may constitute a significant public health threat, facility damage, etc. Reports must be submitted to the Agency within 72 hours.
- k. Indemnify, defend, and hold harmless the Agency and County of Alameda, including all elected or appointed officers, employees, or designated agents from and against any and all liability arising from or connected with the Contractor's acts or omissions related to your responsibilities under this MOU. This includes, but is not limited to, demands, claims, actions, fees, costs, and expenses which may include attorney and/or expert witness fees.
 - i. The Contractor will maintain a general liability insurance policy, at the Contractor's expense. This policy will name the Agency as a party to be insured and will be for a limit that is agreed upon by the Agency. The Contractor will provide the Agency with the specifics of coverage and will notify the Agency of any changes to this insurance.
- I. Abide by all federal and state rules and regulations regarding acceptance and redemption of CalFresh benefits and the RMP.
- m. Provide all meals and related services under this MOU to all eligible patrons without regard to race, color, creed, religion, political belief, national origin, ancestry, age, height, weight, sex, sexual

orientation, gender identity, marital or domestic partner status, veteran status, disability (of any kind), medical condition (including AIDS/HIV), receipt of CalFresh benefits, association with members of such protected classes, or in retaliation for opposition to discrimination against such classes.

- i. The Contractor will ensure that no discrimination and/or harassment is tolerated against employees of the Contractor, applicants for employment with the Contractor, employees or agents of the Agency and other Alameda County departments, or CalFresh RMP patrons.
- ii. The Contractor will ensure compliance with all relevant Americans with Disabilities Act (ADA) regulations and guidelines.
- iii. The Contractor will ensure the confidentiality of all CalFresh RMP patrons and transactions. No information may be shared regarding such meal purchases, except as necessary to transact purchases. The Contractor will comply with all required federal, state, and local laws, regulations, ordinances, and directives relating to confidentiality. The Contractor will ensure that all employees are notified and aware of the confidentiality provisions of this MOU. iv. The Contractor may not disclose any information regarding RMP patrons without prior authorization of the Agency, except to the designated Contractor and Agency contacts. All EBT transaction and related documentation must be maintained in secured storage at all times, and must be shredded prior to disposal. No such documentation may be recycled prior to being shredded.

2. The Agency will:

- a. Authorize eligible recipients to participate in the RMP program through the EBT system, and ensure that recipients are provided an EBT card.
- b. Review compliance of all RMP providers on at least an annual basis. The Agency will also monitor complaints and Incident Reports regarding the RMP.
 - i. The Agency will attempt to resolve all non-compliance, incident report events, or complaint issues with the Contractor as necessary.
 - ii. The Agency may require necessary corrective actions from the Contractor, with documentation of implementation. The Agency will allow adequate time for implementation of corrective actions; however, the time allowed may not exceed three (3) months.
- c. Maintain the Agency contact information with the Contractor.
- d. Maintain a list of participating providers with addresses, which includes this Contractor, and make the list available to eligible recipients. The Contractor will be added to this list within thirty (30) days of notification that EBT payment can be accepted by the Contractor.

This MOU is effective from the date signed by both the Agency and Contractor, without limit.

Non Cause Termination

This agreement may be terminated by either party, without cause, by written notice. Termination, without cause, will be effective 30 days after notice has been delivered.

Immediate Termination

This MOU may be terminated by the Agency, immediately, under the following circumstances:

- 1. The failure of the Contractor to comply with the above conditions of the agreement, and/or:
- --The Contractor's USDA FNS certification expires, is suspended, or is revoked.
- -- The Contractor fails to maintain a current public health operating permit.
- 2. Changes in Federal or State law governing the RMP.
- 3. Loss of program funding.

For

4. At the request of the Contractor and upon the agreement of the Agency.

A notification letter regarding an immediate termination action, on the part of either party, must be sent by certified mail addressed to the designated contact of the Contractor.

Alameda County Social Services Agency	
For (Restaurant name)	-
Policy Director/	
Owner/ Store Manager/ Corporate Operations Manager _	
Administration Address: Corporate Office Address:	
Federal Employer Number:	
Agency Contact(s):	
Contractor Contact(s):	

Appendix Five: State Regulations Concerning the Restaurant Meal Program

The State's Manual of Policy and Procedures (MPP)⁴⁸ includes a section about participation in the RMP. Below are excerpts from this section:

California Manual of Policies and Procedures Section 63-102(e)(2)(H)(5): Before instituting a Restaurant Meals Program, counties must first submit a written proposal to CDSS for review and approval. All county documents and definitions must reflect the requirements of federal and State regulations. The proposal must contain:

- a. Identify households eligible to participate in the program for the use of CalFresh benefits at restaurants which have been entered into Memorandum of Understanding (MOU) with the county for this purpose.
- b. Certify eligible CalFresh recipients who are elderly (age 60 or over) and/or disabled, and their spouses or homeless individuals to purchase low cost meals with CalFresh benefits at authorized restaurants.
- c. Draft publicity sheet to notify restaurants about the requirements of the Restaurant meals Program;
- d. Develop a Quality Assurance Monitoring Plan to monitor the CONTRACTOR's operation of the Restaurant Meals Program to ensure compliance with the terms and conditions of this MOU.
- e. A draft publicity sheet for current homeless, elderly, and disabled recipients including information on requirements and availability;
- f. A draft Memorandum of Understanding (MOU) detailing the obligations of the county to:
 - (i) Ensuring that the RMP Indicator Code programmed into the county consortium system will only be applied to RMP-eligible Electronic Benefit Transfer (EBT) cardholders; and
 - (ii) inform those recipients of the names and addresses of participating restaurants
- g. A draft MOU detailing the obligations of the restaurant to:
 - (i) prohibit inclusion of a service gratuity in the price of the meal;
 - (ii) prohibit charging sales or meals tax;
 - (iii) prohibit sale of alcoholic beverages to participants; and
 - (iv) require posting of a sign notifying the public of the restaurant's participation in the program and including references to nondiscrimination statutes and regulations.
- h. A demographic analysis (by zip code) of the location of the potential RMP population in relation to potential participating restaurants.
- i. The Department strongly encourages current participating counties and any interested counties to evaluate the menu options offered by interested restaurants during the restaurant selection process. In support of FNS' and CDSS' efforts to promote healthy eating for CalFresh recipients, it is also recommended that counties assist participating restaurants in developing signage outlining the nutritional content of menu choices to assist in the selection of healthier menu options. To support this approach, the Department, in conjunction with the California Department of Public Health, will develop informational materials for RMP recipients emphasizing the benefits in selecting healthier and more nutritional food.
- j. Draft outreach information to advertise the restaurant meals program to the restaurant community and to the eligible recipient community.
- 4. CDSS will review and notify the county of approval or denial of the proposal within 60 days of receipt of the county's draft material. If materials require modification, CDSS will define necessary corrections. On receipt of resubmitted materials, CDSS will make final approval or denial within 60 days.
- 5. Counties that choose to participate in the Restaurant Meals Program must recognize that CDSS approval of their written proposal will be contingent upon the availability of State funds.

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⁴⁸ California Manual of Policies and Procedures Section 63-102

Appendix Six: Restaurant Eligibility

In order for a meal to qualify as a CalFresh "eligible food," it must be purchased in a county approved to administer the RMP by the California Department of Social Services (CDSS) at a restaurant approved as a vendor by the USDA with a current MOU with the county CalFresh administering agency and by an eligible CalFresh recipients: someone who is elderly (age 60 or over) and/or disabled, and/or homeless or the spouse of someone who meets these qualifications.

To participate, restaurants must be located within a county participating in the Restaurant Meals Program (RMP). Since RMP participation is a county option, a county must opt-in to participate and have their plan approved by CDSS. See County Participation section of this guide to learn more about which counties currently participate and the process a county needs to go through to become a participating county. Counties are only allowed to enter into an MOU for the RMP with a restaurant that:

- A. Serves meals at concessional prices: Restaurants must serve meals that cost less than that which would be charged to customers not using CalFresh benefits, or that are discounted meals already offered to certain consumers or advertised special or sale priced meals offered to all consumers.
- B. Authorized by FNS as a SNAP Approved Retailer: Restaurants must be authorized by FNS (by approval of the FNS-252-2, "Application for Authorization to Participate in the CalFresh Program for Communal Dining Facilities," submitted by the restaurant) to accept CalFresh benefits.

To become a SNAP Approved Retailer, vendors must go to the USDA website and fill out the Food and Nutrition Service (FNS) SNAP Retailer Application. Eligible Restaurant Meals Program vendors must also complete the "USDA Food Stamp Application for Meal Services" (FNS 252-2). The application can be obtained from the internet⁴⁹ or by calling FNS at 916-498-5790. A single application can be completed for two or more restaurants if these restaurants are under the same ownership and structure, but a different application must be completed for each company with a unique Taxpayer ID Number (TIN). The following must be submitted:

- a. A copy of a government issued photo ID for all owners/officers listed on the application
- b. Verification of social security number (i.e. a copy of the Social Security card) for all owners/officers listed on the application
- c. A copy of the business license for each location.

These materials must be sent along with a signed County MOU to:

USDA, FNS 801 "I" Street, Room 179 Sacramento, CA 95814

Phone number: 916-498-5790

FNS will contact restaurants directly if they need any additional information to process the application. Restaurants find that it takes between 45 and 60 days (approximate) to be approved. FNS will notify the restaurant whether a restaurant is approved or denied. When a retailer has two distinct businesses within one building, and more than one Taxpayer ID (TID) number, they can have two distinct FNS certifications. This is important in the case of grocery stores that are collocated with a restaurant and both establishments would like to participate in SNAP: the grocery store as a traditional SNAP vendor and the restaurant as an RMP authorized vendor. 50 It is also important to note that FNS used to require an MOU for each restaurant, but now allows a restaurant under the same ownership and structure, to execute one MOU for more than one restaurant.

⁴⁹http://www.fns.usda.gov/snap/retailers/pdfs/FNS-252-2.pdf

⁵⁰E-mail interview with Rapone Anderson, Bureau Chief, Program Technology and Support Bureau, CDSS