

NATIONAL DIRECTORY OF CONTACTS

Use these contacts to verify duplicate participation, or obtain verification for SNAP Benefits. This directory is intended for use by authorized personnel in the administration of the SNAP Program.

Please DO NOT provide these contact numbers to clients

Revision Date: 4/08/25

ALABAMA	ALASKA
SNAP Participation: Email contact preferred to: fs@dhhr.alabama.gov For other participation questions: LaShenda Martin, Program Specialist Alabama Dept. of Human Resources 50 Ripley St, S. Gordon Persons Bldg. Montgomery, AL 36130-4000 Email: LaShenda.Martin@dhhr.alabama.gov Phone: 334-242-1700; Fax: 334-353-1363 Medical Benefits: Phone (334) 242-5010 Email: PIDParis@medicaid.alabama.gov TANF/FIP: No TANF information given over the phone. Email: DHR_PA_Helpdesk@dhhr.alabama.gov FAX number for TANF inquiries: (334) 242-0513. Claims: Email contact preferred to: Amy Plunkett Same address as above. Amy.Plunkett@dhhr.alabama.gov Phone (334) 353-4468; Fax (334) 353-1363 WEB: www.dhhr.alabama.gov	Alaska Department of Health Division of Public Assistance PO Box 110640 Juneau, AK 99811-0640 Participation inquires: Email preferred to: verifications@alaska.gov Virtual Contact Center: (800) 478-7778 WEB: https://health.alaska.gov/dpa/Pages/default.aspx

ARIZONA

Department of Economic Security

Out of state inquiries for Cash Assistance/Nutrition Assistance/Medical Assistance should be submitted to:
outofstate@azdes.gov

Please include the Name, Date of Birth, and Social Security Number of the participant in the email request.

To check the status of an email request, call (602) 771-2047.

WEB: <https://des.az.gov/>

Participants can access information regarding their benefits in Arizona and report changes using the MyFamilyBenefits website:

<https://myfamilybenefits.azdes.gov/Home.aspx>

ARKANSAS

Field Office CENTRAL PROCESSING UNIT

Arkansas PARIS Match Inquires should be sent to the Central Processing Unit (CPU) in Central Office Unit.

ARKParis@DHS.Arkansas.gov

Request emails subject should be: **Sensitive: PARIS Match Request**

Note: "Sensitive" in the subject line denotes encryption.

The body of email need to include, **Full Name, DOB, & full SSN.**

* Require client's new current address with dates moved and or applied for services in your state before any open cases will be closed.

Tomesha Harrison

Program Eligibility Coordinator, FOCPU

Email Address: Tomesha.Harrison@dhs.arkansas.gov

Phone #: 501-683-4443

Fax# 501-683-1229

Jacqueline Caradine

County Administrator, DSIC/FOCPU

Email Address: Jacqueline.caradine@dhs.arkansas.gov

Phone #: 501-534-4162

Fax# 501-683-1229

****CUSTOMER ASSISTANCE UNIT****

Customers/Clients Only should contact the Customer Assistance Unit (CAU) by phone or email to inquire about their own case(s) & status.

Ellen Banks

County Administrator, CAU

Ellen.Banks@dhs.arkansas.gov

800-482-8988

Delicia White

Delicia.White@dhs.arkansas.gov

800-482-8988

CALIFORNIA California Department of Social Services 744 P Street, MS 8-4-23 Sacramento, CA 95814-6400 OUT OF STATE INQUIRIES <u>The city and/or county in which the client resided in California must be provided in order to provide a referral to one of the 58 counties for verification of benefits.</u> cdss.osi@dss.ca.gov Telephone number: 916-651-8848; press 1, then press 7 <u>OR</u> FAX number: (916)651-8866 <u>OR</u> http://www.cdss.ca.gov/cdssweb/entres/pdf/CountyCentralIndexListing.pdf to get a Central County Index Listing.	COLORADO Preferred method of contact is email: cdhs_outofstateinquiries@state.co.us Contact phone number: 1-800-536-5298, Option 3 Colorado Department of Human Services 1575 Sherman St. 3rd Fl Denver, CO 80203 Fraud Hotline: 1-877-934-6361 recording PARIS: 1-800-359-1991 WEB: www.cdhs.state.co.us
CONNECTICUT Department of Social Services 55 Farmington Ave. Hartford, CT 06105-3725 <u>For SNAP/Medicaid/Cash benefits other than TANF:</u> Please send an email from your State or County email account on your agency's letter head to: TPI.EU@ct.gov. Requests must include names, dates of birth and last 4 digits of SSN for each individual for whom verifications are being sought. Also include what programs you need verified and the application address in your state. Allow 3 to 5 working days for a response.	DELAWARE FOR SNAP/TANF/CHILDCARE/MEDICAID Delaware Division of Social Services PO Box 906, New Castle, DE 19720 Phone: 302-571-4900 To verify public assistance benefit status in Delaware for dual participation alerts, please send an email from your STATE or COUNTY email account to: Email: DHSS_DSS_Outofstate@delaware.gov Web: http://www.dhss.delaware.gov/dhss/dss Once duplicate benefits are confirmed by the

<u>For TANF:</u> Email: TANF.OutOfState@ct.gov or Fax request on your Agency's Letterhead to 1-860-424-4886 Allow 3 to 5 days for a response All PARIS related information requests: FAX: 860-424-5333 or Email: Contact.Paris@ct.gov	Division of Social Services and an investigation Is opened you may contact Audit and Recovery Management Services (ARMS) for assistance with obtaining verification documents, EBT transaction lists or additional supporting evidence for the investigation. Send your request for information from your STATE or COUNTY email account to DE_PARIS-ARMS@delaware.gov
DISTRICT OF COLUMBIA Ebony Davis All Combination TANF, SNAP and Medicaid Inquiries D.C. Department of Human Services 64 New York Ave N.E., 6th Floor Washington, DC 20002 O: 202-671-4521 E: Ebony.Davis@dc.gov Karl Bartley PARIS Interstate- Medicaid Only Supervisory Program Analyst D.C. Government, Dept. of Health Care Finance OPRMI, Eligibility Review and Investigation Division (ERID) 645 H Street, N.E. Rm. 310 Washington, DC 20002 O: 202-609-8251 C: 202-645-4197 E: Karl.Bartley@dc.gov	FLORIDA <u>Out of State inquiries:</u> Miami Call Center <u>PREFERRED METHOD:</u> Email to: SNR.D11.SFL.CallCenter@myflfamilies.com (You should hear back from them within 5 business days) Department of Children and Families 2415 N. Monroe St., Suite 400 Tallahassee, FL 32303 Phone: 866-762-2237 WEB: www.dcf.state.fl.us/ess/
GEORGIA DFCS Customer Service Operations 47 Trinity Ave. S.W. Atlanta, GA 30334 Phone: 1-877-423-4746; Fax: 1-888-740-	GUAM Maria Cindy F. Malanum, Social Services Supervisor I Bureau of Economic Security Division of Public Welfare Department of Public Health and Social

9355. <u>Email inquiry is the preferred method:</u> Send requests for out-of-State verification to: DHS-OIG Out-of-State Inquiry mailbox: ga.paris@dhs.ga.gov	Services 590 South Marine Drive Tamuning, Guam 96913-3532 Email: mariacindy.malanum@dphss.guam.gov Contact No. (671) 735-7288/7237 Fax: (671) 734-7092 WEB: http://dphss.guam.gov
HAWAII HAWAII Department of Human Services State Office Administrative Assistant (FSP & TANF) Benefit, Employment & Support Services Division 1010 Richards Street, Suite 512 Honolulu, Hi 96813 Phone: (808) 586-5720 (SNAP) <u>For TANF:</u> Please email inquiries to: BESSD.TANFPO@dhs.hawaii.gov. Allow 3 to 5 business days for a response. If unable to get through, please call (808) 586-5735 for both SNAP/TANF. WEB: http://hawaii.gov/dhs	IDAHO Idaho Department of Health & Welfare Division of Welfare, 2nd Floor P.O. Box 83720 Boise, ID 83720-0036 Contact information to verify benefit status for <u>applicants</u> in your state coming from Idaho: Phone: 208.334.0850 Fax: (208) 334-5817 or 1-866-434-8278 Email: mybenefits@dhw.idaho.gov To verify benefit status in Idaho for clients already active on benefits in your state (dual participation alerts & investigations, PARIS matches, etc.), please contact the Integrity Unit via e-mail at: <u>SRIUWFIU@dhw.idaho.gov</u> WEB: http://www.healthandwelfare.idaho.gov/
ILLINOIS Illinois Department of Human Services Bureau of Customer and Support Services 600 East Ash St., Bld. 500 Springfield, IL 62703	INDIANA Indiana Family and Social Services Administration P.O. Box 1810 Marion, IN 46952

For a convenient and faster response e-mail us at: <u>DHS.OUTOFSTATE@ILLINOIS.GOV</u> (Please choose Out of State tab and follow prompts) Allow 3-5 Business days for a response. Phone: (217) 524-4174	Indiana no longer accepts faxed/telephone inquiries. Out of state inquiries for SNAP/TANF/Medicaid should be submitted to <u>INoutofstate.inquiries@fssa.IN.gov</u>. Requests must include names, dates of birth and last 4 digits of SSN for each individual for whom verifications are being sought. Also include what programs you need verified. <u>Paris Unit Inquiries:</u> parisinquiries@fssa.IN.gov WEB: <u>www.in.gov/fssa/</u>
IOWA Integrated Claims Recovery Unit PO Box 41130 Des Moines, IA 50311 <u>To verify benefits and/or TANF months:</u> Email: <u>icru@hhs.iowa.gov</u> <u>To have an active Iowa case closed:</u> Email: <u>imcsc@hhs.iowa.gov</u> Website: <u>www.hhs.iowa.gov</u>	KANSAS Kansas Department for Children and Families Economic and Employment Services 555 S Kansas Avenue, 4th Floor Topeka, KS 66603 Kansas no longer accepts faxed inquiries. All SNAP <u>and</u> TANF out-of-state inquiries must be emailed to: <u>dcf.ebtmail@ks.gov</u> For all Medical inquiries, contact Kansas Department of Health and Environment at: 800-792-4884 WEB: <u>www.dcf.ks.gov</u> <u>PARIS Matches:</u> EMAIL <u>DCF.PARIS@KS.Gov</u> Fax 785.296.6960 Phone 785.296.3874
KENTUCKY Send OUT OF STATE INQUIRIES For SNAP,	LOUISIANA <u>LAOOSPARIS.dcf@la.gov</u>

MEDICAID and TANF - Email: Outofstateinquiries@ky.gov Phone: 855-306-8959 WEB: http://cfc.ky.gov	To inquire about Medicaid benefits, please email LDH Medicaid staff at MyMedicaid@la.gov. If you are unable to send an email, you may call (318) 305-6161. To apply for Medicaid benefits online, please create an account and apply on our self-service portal: https://sspweb.lameds.ldh.la.gov/selfservice/. Visit <u>LDH's website</u> for more information on Louisiana Medicaid.
MAINE <u>A signed release is required to obtain the verification Out-of-State Inquiries</u> ACES Help Desk – Eligibility Specialists Department of Health and Human Services Office for Family Independence 109 Capitol Street, SHS#11 Augusta, ME 04333 Fax: (207) 287-3455 E-Mail: DESK.ACESHELP@Maine.gov WEB: http://www.maine.gov/dhhs/ofi/index.html	MARYLAND Maryland Department of Human Resources Family Investment Administration 25 S. Charles Street 16th Floor Baltimore, MD 21201 For out of state inquiries, forward your request to: For out of state inquiries, the contact information is: Email: dhf.outofstateinquiry@maryland.gov OR For PARIS matches, the contact information is: Email: paris.inquiries@maryland.gov
MASSACHUSETTS MA Department of Transitional Assistance Data Matching Unit ADDRESS: DTA-PI PO BOX 4411 Taunton MA 02780-9804 FAX # 617-889-7847 EMAIL: DTA.DataMatchingUnit@mass.gov PHONE: 1-877-703-7186 FAXED and/or MAILED REQUESTS SHOULD BE SENT ON AGENCY	MICHIGAN <u>Out-of-State Inquiries by Professional Staff only:</u> Phone: 1-517-335-3900 Fax: 517-432-6079 Email: MDHHS-ICU-Customer-Service@michigan.gov *Require client's new address before they will close case in MI (if sending request via fax or email).

LETTERHEAD

Out-of-state Medicaid verification:

Jody Jordan-Kiley
EOHHS/MH
One Ashburton Place 10th Floor
Boston, MA 02108
Jody.Jordan@Mass.gov
617-367-5133
NO FAX

Mail:

Department of Health and Human Services
PO Box 30037
235 S. Grand Ave.
Lansing, MI 48909

General SNAP Inquires by clients:

Clients should contact their local MDHHS office for questions about their benefits or to request case closure.

WEB: www.michigan.gov/dhhs

MINNESOTA

Minnesota Department of Human Services
Economic Assistance and Employment
Services Division
PO Box 64951
St. Paul, MN 55164-0951

Out of State Inquiries for case status of SNAP and TANF programs and the number of TANF months expended are provided through an automated web service.

Go to the website by clicking on this link:

MISSISSIPPI

Department of Human Services
Division of Field Operations
P.O. Box 352
Jackson, MS 39205
Phone: 1-800-948-3050

Out of State Inquiries:

The preferred method to request an Out-of-State Inquiry, Dual Participation Alert, and/or a Paris Match is by submitting an online request form.

Please click the link below to submit a verification request.

[Mississippi Out-of-State Inquiry & Paris Match](#)

Minnesota SNAP and TANF Verification Web Site

OR

Type the web site address into your browser address bar:

<https://mn.gov/snap-tanf-benefit-verification/>

At the web site home page, **complete** the required fields for self- registration. In the code field, enter the word **guest**. After accepting the Oath, click the **Next** button which brings up the client information page. When all the client information has been entered, click the **submit** button which generates the request. A secure email response will be sent to the requestor with the results of the benefit verification.

No other means for requesting this information is offered.

Verification

The Mississippi Out of State Inquiry & Paris Match Verification Form can also be accessed by visiting www.mdhs.ms.gov/help/.

Please allow 1-3 business days for a completed response.

Participants may access information regarding their SNAP/TANF benefits, medical benefits, and report changes using their Access MS portal at www.access.ms.gov.

Medicaid Inquiries:

Stephen.purser@medicaid.ms.gov

Phone: 1-800-421-2408

Website: www.medicaid.ms.gov

MISSOURI

Customer Relations Unit

Family Support Division

Department of Social Services

P.O. Box 2320

Jefferson City, MO 65102-2320

Interactive Voice Response: **1-855-373-4636**

Email: Cole.CoXIX@dss.mo.gov

WEB: <http://www.dss.mo.gov>

OR

Out-of-State line: The Family Support Division Information Center at 855-FSD-INFO or 855-373-4636, Option 3.

MONTANA

FOR SNAP AND MEDICAID:

Julie Nepine

Department of Public Health & Human Services

Human & Community Services Division

PO Box 202925, Helena, MT 59620-2925

Phone: 406-444-4987; FAX: (406)444-2770

OR

Email: hhsparis@mt.gov

For TANF:

	Montana Department of Public Health and Human Services TANF Program 111 N. Jackson, Helena, MT 59601 FAX: (406)444-2770 Email: TANF@mt.gov WEB: http://www.dphhs.mt.gov/
NEBRASKA <u>Customer Service Center</u> Economic Assistance Customer Service Center Toll-free: 1-800- 383-4278 WEB: www.accessnebraska.ne.gov For verification of TANF months: Email: DHHS.EconomicAssistancePolicyQuestions@nebraska.gov	NEVADA OUT OF STATE INQUIRIES FOR SNAP/MEDICAL/TANF/TANF MONTHS: Email: welfoosinquiries@dwss.nv.gov Fax: 775-684-0680 – ATTN: OOS Inquiry When sending an email or fax, it is essential to ensure all the following information is included: Customer/Head of Household Name: Date of Birth: Last four of SSN: Address: Application Date: Interview Date:

Medicaid inquiries: Email at
DHHS.MedicaidPolicyQuestions@nebraska.gov

Benefits Applying for:

Additional Members:

Date of Birth:

Last four of SSN:

Return Information:

Case Number: _____

☐ Email: _____

☐ Fax: _____

☐ Other: _____

PARIS MATCHES:

Email: PARISinvestigations@dwss.nv.gov

Fax: 702-486-8809

Phone: 702-486-1875 (Main Line)

FRAUD INQUIRIES:

Email: IRReferral@dwss.nv.gov

Fax: 702-486-8809

Phone: 702-486-1875 (Main Line)

Welfare Office Contact List:

<https://dwss.nv.gov/Contact/Welfare>

WEB: <https://dwss.nv.gov>

Dept of Health & Human Services
Division of Welfare and Supportive Services
1470 College Parkway
Carson City, Nevada 89706

NEW HAMPSHIRE

Department of Health & Human Services
Bureau of Family Assistance

Contact: Cristin Rojek
Tel: 603-271-9327
Email: outofstateinquiries@dhhs.nh.gov

FAX: (603)-271-4637

WEB: <http://www.dhhs.nh.gov>

NEW JERSEY

Department of Human Services
Division of Family Development (DFD)
Fraud Identification and Recovery Management (FIRM)
Unit
P.O. Box 716, Trenton, NJ 08625-0716
Tel: (609) 588-2283
Email: DFD.FIRM@dhs.nj.gov

For out-of-state inquiries for New Jersey SNAP, TANF, GA and Medicaid programs, **you must contact the county from which the individual receives/received benefits.** Please send an email to the above address. Provide the individual's full name, date of birth and the last 4 digits of their Social Security Number in your email and we will provide you with the county contact

	information. Please indicate “out-of-state inquiry” in the subject line. WEB: http://nj.gov/humanservices/dfd
NEW MEXICO Preferred methods of contact is by: Email: outofstate.inquiry@hca.nm.gov Medical Assistance Division: 1-800-283-4465 Restitution Division: 1-800-283-4465 EBT Cards: 1-800-843-8303. Fraud Division: 1-800-228-4802 New Mexico Health Care Authority. P.O. Box 2348 Santa Fe, NM 87504 WEB: www.hca.nm.gov	NEW YORK For PARIS matches: Go to https://www.acf.hhs.gov/paris/state-interstate-match-contact Select New York State. Select NYS Contact List for PARIS and find the listing for the appropriate district. For TANF count or case status and closure requests on CURRENT applicants in your state: FAX to 518-474-8090 or email otda.sm.cees.outofstateinquiry.efax@otda.ny.gov If only requesting TANF count, please include: Adult applicant’s Name(s), Date(s) of Birth, & Last 4 digits of SSN(s) For CURRENT applicants, you MUST include: Your contact info: Office letterhead, your name, email address, and fax number. The household’s date of application and address in your state. The full name, DOB and last 4 digits of SS# for all persons applying (including minor children). * For FRAUD issues ONLY: Rebecca Lynch, Director of Program Integrity, Audit & Quality Improvement NYS Office of Temporary and Disability Assistance 40 North Pearl Street, 3rd Floor, Albany, NY 12243 Phone: 518-402-0013 Email: Rebecca.Lynch@otda.ny.gov WEB: https://otda.ny.gov/
NORTH CAROLINA	NORTH DAKOTA

North Carolina Department of Health and Human Services Division of Social Services

Out of State Inquiries for SNAP, TANF, and Medicaid

Mail: DHHS EBT Call Center

P. O. Box 190

Everetts, NC 27825

Fax: (252) 789-5395

Phone: (866) 719-0141

Email: ebt.csc.leads@dhhs.nc.gov

Web: www.ncdhhs.gov/dss

Notes: When forwarding requests to the DHHS EBT Call Center, use agency letterhead that includes your agency's name, mailing address, telephone number, and fax number if not already indicated in your request. Emails with HTML or HTM file attachments will be blocked. Email attachments must be in Word or PDF format. IPV inquiries and case closure requests must be handled by the local county DSS office.

NORTH DAKOTA

Out of State Inquiries for SNAP, TANF and Medicaid:

Call or send a secure E-mail request with client's name, full SSN, and DOB on your Agency's Letterhead to:

EMAIL: dhseap@nd.gov

PHONE: 701-328-2332 or 701-328-3513

Please allow 1 to 3 business days for a response.

Website: www.nd.gov/dhs/services

OHIO

Office of Family Assistance, Ohio

Department of Job & Family Services, P.O.

Box 183204, Columbus, Ohio 43218-3204

Phone: 614-466-4815 option 2, 1 - FAX: 614-466-1767

OKLAHOMA

Out-of-State Inquiry contact information:

SNAP inquiries: AFS.OutofStateInquiry@okdhs.org

FAX: 405-669-4102

The Ohio Benefit Verification County Contact Directory (88 Counties) is attached. OH is a county-administered state. Please contact County Case Managers directly for information about the client's case status. If client knows what county they lived in, call that county office. If they don't know the county, ask what city they lived in. Go to this website, key in the "city" or "zip code" and it will provide the county that they lived in. <http://ohio.hometownlocator.com/cities/>

Please **E-mail** your request including the Clients name, SSN# and Date of Birth to: [Out of State Inquiries@jfs.ohio.gov](mailto:Out_of_State_Inquiries@jfs.ohio.gov) or OFA-Mail-Services@jfs.ohio.gov.

If you are unable to send an e-mail or unable to locate the County or City, please include on your fax the Clients name, SSN# and DOB. Our **FAX** number is 614-466-1767 and we will submit it to the county for processing.

WEB: www.jfs.ohio.gov/

Phone: 405-522-5050 or 1-866-411-1877

Medical inquiries: eligibility@OKHCA.org

WEB: www.okdhs.org

TANF: TANF@okdhs.org

OREGON

Oregon benefits verification staff are not permitted to disclose information over the phone and/or directly to clients

TO VERIFY CLIENTS RECEIPT OF SNAP, MEDICAL, ERDC AND/OR TANF BENEFIT:

Send e-mail to benefits.verification@odhsoha.oregon.gov

~or~

Send a FAX on your Agency's letterhead to **(503) 373-7032**

Please include the following:
Clients name and household members names who

PENNSYLVANIA

OUT OF STATE INQUIRIES:

Please send out-of-state requests by secure e-mail or fax on your state's letterhead and include the following:

- (1) Name of the household members who are applying for benefits
- (2) Each members name, date of birth, and the last 4 digits of their social security number
- (3) The client's new address.

Email your inquiry to ra-dpwoimnet@pa.gov
Or, fax your request to (717) 705-0040
(use only one of these two options)

Allow 5 business days for a response.

PARIS MATCH

are applying for benefits along with each members
date of birth and
social security number

Oregon Department of Human Services
500 Summer St. NE, E-48
Salem, OR 97301-1066
Phone: (503) 945-5600
Fax: (503) 373-7032 or 503-581-6198

Go to [State Interstate Match Contact | The Administration for Children and Families \(hhs.gov\)](#)
Select Pennsylvania. Click on the “PA County – PARIS Match Contacts” link and find the listing for the appropriate county.

Web: www.DHS.state.pa.us

PUERTO RICO – See last page

RHODE ISLAND

RI Department of Human Services
Louis Pasteur Building 57
25 Howard Avenue
Cranston, RI 02920

Requests for verification of participation and for
PARIS matches must be in writing.
Please send the requests to the attention of:
Cheryl Dessaint
via secure email at: DHS.SNAP-Inquiry@dhs.ri.gov
or via fax at: 401-721-6664

FRAUD DETECTION & PREVENTION UNIT
State of Rhode Island and Providence Plantations,
Department of Administration
Office of Internal Audits
One Capitol Hill – 4th Floor
Providence, RI 02908
Telephone: 401-574-8175
Fax number: 401-574-9255

WEB: <http://www.dhs.ri.gov/>

SOUTH CAROLINA

South Carolina Department of Social Services
Out-of-State Inquiries
Program Support Unit, Division of County
Operations
P.O. Box 1520
Columbia, SC 29202-1520

**Please email all out of state inquiries for
SNAP and/or TANF to:**
SCDSSVerify@dss.sc.gov

Subject line should read: ‘Out of State Inquiry
from ‘name of state’.

We will be unable to process your request
without the following information:

1. Individual’s name, SS#, and current
address

	OR 2. Individual's name, last four digits of the SS#, date of birth, and current address. If unable to email, please fax inquiries to 803-898-1222, ATTN: Program Support Unit. <u>Fraud and PARIS matches:</u> Send to Keshawn Jacobs at Keshawn.Jacobs@dss.sc.gov Medicaid Inquiries: Contact SC Dept. of Health and Human Services at 888-549-0820. Email inquiries: Interfaces@SCDHHS.gov Press #1 for English, #1 for caseworker feedback and #2 to speak with a rep.
SOUTH DAKOTA Department of Social Services 700 Governors Drive Pierre, South Dakota 57501-2291 Phone: 1-877-999-5612 (toll free) or 1-605-773-4678 (direct) Email: SNAP@state.sd.us WEB: http://dss.sd.gov/economicassistance/snap/	TENNESSEE To verify benefit information (out of state inquiries, dual participation alerts, etc.) Please click on the following link to submit the request: State of Tennessee (formstack.com) <i>Please Note: The Out of State Inquiry <u>Online</u> Form is the preferred method of contact.</i> TN Supplemental Nutrition Assistance Program (SNAP) Policy James K. Polk Bldg. 15th Floor 505 Deaderick Street Nashville, TN 37243 www.tn.gov/humanservices

	*Medicaid Inquiries: *Note: Please send Medicaid inquiries to paris.inquiries@tn.gov. PARIS INQUIRIES: Paris.inquiries@tn.gov
Texas Texas Health and Human Services Commission Fax: 1-877-447-2839 (Please submit one inquiry per page and fax each inquiry separately on agency letterhead.) Phone: 1-877-541-7905. Then <i>select the following options from the Virtual Assistant System:</i> • <i>Option 1 for English;</i> • <i>Option 2 for Your Texas benefit information (ESS) State Benefits;</i> • <i>The virtual assistant attempts to authenticate information before transferring to a representative.</i> Note: Inquiries regarding TANF countable months are required via Fax.	UTAH Department of Workforce Services Eligibility Services Division P.O. Box 143245 Salt Lake City, UT 84114-3245 Phone: 866-435-7414 - Press Option 5 for Out-of- State inquires. OR Additional contact: 801-526-0950 WEB: www.jobs.utah.gov

VERMONT Call Center Economic Services Benefits Service Center 1000 River Rd Essex Junction, VT 05452 Preferred: Toll-free: 1-800- 479-6151. If 800# is not working, call (802) 828-6896 WEB: www.mybenefits.vt.gov (this site can be used, but not preferred). MEDICAID: Contact Us Green Mountain Care (Vermont Medicaid) Customer Support Center (Member Services) Phone: 1-800-250-8427 Relay services for the Deaf and hard of hearing: dial 711 Business hours: 8:00 a.m. to 4:30 p.m. Monday - Friday	VIRGINIA Virginia Department of Social Services Division of Benefit Programs 5600 Cox Rd. Glen Allen, VA 23060 Richmond, VA 23219-2901 WEB: http://dss.virginia.gov/benefit/snap.cgi Out of State Inquiries: Include the following: - Client's name, DOB, SSN (if last four only, you must provide entire DOB), and current address - All household members who are applying for assistance in your state Submit the inquiry to: • EMAIL: vaoutofstateverifications@dss.virginia.gov. Please allow 5 business days for an emailed response. PARIS Matches: <u>See the contact information is provided in the PARIS match.</u>
VIRGIN ISLANDS Emmanueline Archer Director, Program Operations Certification Unit Department of Human Services Division of Family Assistance 1303 Hospital Ground, STE 1 St. Thomas, VI 00801-6722 Email: emmanueline.archer@dhs.vi.gov	WASHINGTON <u>Out of State Inquiries:</u> For SNAP, Medicaid, and TANF status and ABAWD/TANF Months (Only): (Call Toll-Free # 1-855-927-2747 (1-855-WAPARIS) Monday – Friday (except observed holidays) 8:00 a.m. – 3 p.m. PST) NOTE: To request closure, please have the client present on the phone or email request to dshsparissupport@dshs.wa.gov with: 1. Your name, Agency, and contact information 2. Name, SSN, DOB of all household members who are applying in your state 3. Current mailing address for the client(s)

Phone: (340-774-0930 ext. 4309 or (340) 774-2399 Fax: (340) 777-5449 Lorna Sutton Asst. Director Certification Unit Department of Human Services Division of Family Assistance 4102 Mars Hill, Frederiksted, St. Croix, 00840-3376 340-772-7100 ext. 7195 lorna.sutton@dhs.vi.gov. The names below are the Medicaid managers, and you can reach out to them for the MEDICAID Program. Gary Smith gary.smith@dhs.vi.gov Karen Virgil karen.virgil@dhs.vi.gov	4. Date of application and programs applied for in your state <u>PARIS Inquiries/Matches or PARIS Related Fraud:</u> Email (Preferred) to PARIS Unit: dshsparissupport@dshs.wa.gov or Fax 1-888-212-2319
WEST VIRGINIA Department of Health & Human Resources Division of Family Assistance 350 Capitol St., Room B-18 Charleston, WV 25301-3705 Email: dohsbfabenefitver@wv.gov (recommended) Phone: (304) 352-4431 (request to speak to the worker of the day) WEB: www.dhhr.wv.gov	WISCONSIN <u>Out-of-State Inquires should be directed to:</u> SNAP and HealthCare (MA): WI Department of Health & Family Services 1 W Wilson St, Madison, WI 53703 Phone: (608) 261-6378--Option 3 Fax: (608) 267-2269 Email: DHSOSBQ@dhs.wisconsin.gov Applicant/Members should contact the county agency. To get the phone number of the agency, call 1-800-362-3002 or go to dhs.wisconsin.gov/em/customerhelp.

	PARIS-Related SNAP and HealthCare (MA): 1. Email: DHSOIGPARIS@dhs.wisconsin.gov TANF: Phone: (608) 422-7900 Fax: (608) 327-6125 Email: DCFW2TANFVerify@wisconsin.gov PARIS-Related TANF (Child Care and Cash Assistance): 1. Email: DCFOIG@wisconsin.gov <i>or</i> 2. Phone: 608-422-7100
WYOMING Ann Bowen, SNAP/TANF Help Desk Department of Family Services 2300 Capitol Ave., Hathaway Bld, Third Floor Phone: 307-777-6082; Fax: 1-307-777-7747 For future out of state SNAP and TANF verification requests from Wyoming please send them to Ann Bowen at ann.bowen@wyo.gov WEB: https://dfs.wyo.gov/assistance-programs/food-assistance/ For verification of Medicaid benefits ONLY: Diann Catano diann.catano2@wyo.gov or ruth.jo.friess@wyo.gov 777-3648	

FOR MEDICAID: AND PARIS PUERTO RICO MEDICAID PROGRAM:

If you are a Medicaid representative in another state and need to validate an applicant or beneficiary's place of residence, or need to close a moving case, contact:
Department of Health,

Organization: Medicaid Program

Address: P.O. BOX 70184 San Juan, Puerto Rico 00956-8184

Tel: (787) 765-2929 Ext. 6700, 6758, (787) 641-4224 / (787) 763-5250
Email: pr.paris@salud.pr.gov / Web: www.medicaid.pr.gov

***Puerto Rico –**

For Snap (Nap) and TANF Paris Match interstate duplicity Contact:

Jeanette Rivera Escalera
Administrative Officer
Telephone: (787) 289-7600 Ext. 2408
FAX (787) 289-7621 **OR** 787-289-7614
Email: Communityrelations@Familia.Pr.Gov

Address: 800 Ave. Ponce De León,
Capitol Office Building, Miramar, PR 00907

Please Note:

All Inquiries Should Be Sent with Complete SSN Since, this is our Case #.
If agency cannot write SSN on email or Fax, write PR Case Is and Input
The SSN without dates and it will be understood.

Important Always send the Snap duplicity in your state with our territory.
This email is only for Snap or Tanf Paris Match
not for Medicaid Paris Match investigation or residency investigation

Mailing Address
PO Box 8000,
San Juan, PR 00910-0800
Web: www.Adsef.Gobierno.Pr

For SNAP - Removed from National Directory of Contacts because they run an entirely separate Program from SNAP, called Nutrition Assistance Program (NAP). Duplicate participation is not a concern if a household is still receiving NAP benefits from Puerto Rico, as NAP benefits cannot be accessed in the US. Although 25% of Puerto Rico's NAP benefits are issued in a form readily converted to cash, the benefit cannot be converted to cash in mainland Automatic Teller Machines (ATMs). It is considered to be inaccessible for the SNAP eligibility process. Therefore, it is not necessary to verify NAP benefits or case closure for customers who were previously participating in Puerto Rico.

NAP is also in Northern Marianas Islands and American Samoa.

Please send needed revisions to Tim Anderson @usda.gov

Revisions are sent out semi-annually