

n accordance with Federal law and U.S. Department of Agriculture (USDA) civil rights regulations and policies, this institution is prohibited from discriminating on the basis of race, color, national origin, sex, age, disability, and reprisal or retaliation for prior civil rights activity. (Not all prohibited bases apply to all programs.)

Program information may be made available in languages other than English. Persons with disabilities who require alternative means of communication for program information (e.g., Braille, large print, audiotape, and American Sign Language) should contact the responsible State or local Agency that administers the program or USDA's TARGET Center at **(202) 720-2600** (voice and TTY) or contact USDA through the Federal Relay Service at **(800) 877-8339**.

To file a program discrimination complaint, a complainant should complete a Form AD 3027, USDA Program Discrimination

onforme a la ley federal y las políticas y regulaciones de derechos civiles del Departamento de Agricultura de los Estados Unidos (USDA), esta institución tiene prohibido discriminar por motivos de raza, color, origen nacional, sexo, edad, discapacidad, venganza o represalia por actividades realizadas en el pasado relacionadas con los derechos civiles (no todos los principios de prohibición aplican a todos los programas).

La información del programa puede estar disponible en otros idiomas además del inglés. Las personas con discapacidades que requieran medios de comunicación alternativos para obtener información sobre el programa (por ejemplo, Braille, letra agrandada, grabación de audio y lenguaje de señas americano) deben comunicarse con la agencia estatal o local responsable que administra el programa o con el TARGET Center del USDA al **(202) 720-2600** (voz y TTY) o comunicarse con el USDA a través del Servicio Federal de Transmisión de Información al **(800) 877-8339**.

Para presentar una queja por discriminación en el programa, el reclamante debe completar un formulario AD 3027, Formulario de queja por discriminación del programa del USDA, que se puede obtener en línea, en cualquier oficina del USDA, llamando al **(866) 632-9992**, o escribiendo una carta dirigida al USDA. La carta debe contener el nombre, la dirección y el número de teléfono del reclamante, y una descripción escrita de la supuesta acción discriminatoria con suficiente detalle para informar al Subsecretario de Derechos Civiles (ASCR, por sus siglas en inglés) sobre la naturaleza y la fecha de la presunta violación de los derechos civiles. La carta o el formulario AD-3027 completado debe enviarse al USDA por medio de:

Complaint Form, which can be obtained online, from any USDA office, by calling **(866) 632-9992**, or by writing a letter addressed to USDA. The letter must contain the complainant's name, address, telephone number, and a written description of the alleged discriminatory action in sufficient detail to inform the Assistant Secretary for Civil Rights (ASCR) about the nature and date of an alleged civil rights violation. The completed AD-3027 form or letter must be submitted to USDA by:

mail:

U.S. Department of Agriculture Office of the Assistant Secretary for Civil Rights 1400 Independence Avenue, SW Washington, D.C. 20250-9410; or

fax:

(202) 690-7442 or (202) 690-7442;

email:

program.intake@usda.gov.

This institution is an equal opportunity provider.

correo postal:

U.S. Department of Agriculture Office of the Assistant Secretary for Civil Rights 1400 Independence Avenue, SW Washington, D.C. 20250-9410; o'

fax:

(202) 690-7442; o'

correo electrónico: program.intake@usda.gov.

Esta institución ofrece igualdad de oportunidades.



This day care facility participates in the Child and Adult Care Food Program (CACFP), a Federal Child Nutrition (CN) Program that provides healthy meals and snacks to children receiving care.

Each day more than 2.6 million children participate in CACFP at day care homes and centers across the country. Providers are reimbursed for serving nutritious meals which meet USDA requirements. The program plays a vital role in improving the quality of day care and making it more affordable for low-income families.

Meals CACFP homes and centers follow meal requirements established by the USDA.

Breakfast	Lunch or Supper	Snacks (two of the five items)	
Milk	Milk	Milk	
Fruit or Vegetable	Meat or meat alternate	Meat or meat alternate	
Grains or Bread	Grains or bread	Grains or bread	
Meat/Meat Alternate (to	Fruit	Fruit	
replace grain up to 3 times per week)	Vegetable	Vegetable	

Participating

Facilities Many different homes and centers operate CACFP and share the common goal of bringing nutritious meals and snacks to participants. Participating facilities include:

- Child Care Centers: Licensed or approved public or private nonprofit child care centers, Head Start programs, and some for-profit centers
- ✓ **Family Day Care Homes:** Licensed or approved private homes
- ✓ At-Risk Afterschool Care Programs: Centers in low-income areas provide free snacks and meals to school-age children and youth
- ✓ Homeless Shelters: Emergency shelters provide food services to homeless children

Eligibility State agencies reimburse facilities that offer non-residential day care to the following children:

- ✓ Children age 12 and under,
- ✓ Migrant children age 15 and younger, and
- ✓ Youths through age 18 in afterschool care programs in needy areas

Contact If you have question about the CACFP, please contact your

Information

Center/Sponsoring Organization:

State Administering Agency:

The Children's (Center			
Organization Name 700 Campbell Ave				Special Nutrition Programs: CACFI Virginia Department of Health
Address Franklin	VA		23851	Division of Community Nutrition 109 Governor Street 8 th Floor
City	State		Zip Code	Richmond, VA 23219
Phone Number: (7	757 ₎ 562-6806	-		Help Desk: 1-877-618-7282

or

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Signing up is easy!

To apply by phone, call toll free **1-855-242-8282** between 8 AM and 7 PM Monday through Friday, or 9 AM to noon on Saturday (TTY for deaf or hearing impaired: 1-888-221-1590). Interpreters are available.

To apply online, visit commonhelp.virginia.gov. You can also apply at your local Department of Social Services.

When applying, we'll try to verify your household income electronically. If we're unsuccessful, we'll ask for proof of income (paycheck stubs or a letter from your employer).

You can also apply for FAMIS if you are caring for a grandchild or relative's child.

There are also premium assistance programs called FAMIS *Select* and HIPP for Kids

If your children are enrolled in FAMIS, the FAMIS Select program lets you choose between FAMIS and an employer's health plan. FAMIS Select gives parents who choose employer health insurance \$100 per child, per month, to help pay the child's portion of the premium. But you must first apply for and be enrolled in FAMIS.

The Health Insurance Premium Payment (HIPP) For Kids Program is a premium assistance program for FAMIS Plus (children's Medicaid) enrolled children under the age of 19. For children who are eligible for or enrolled in qualified employer-sponsored coverage and are also eligible for FAMIS Plus, HIPP may help pay for some or all of the cost of the health insurance premium.

For more information on these premium assistance programs, go to coverva.org.



Call 1-855-242-8282 to apply or go to coverva.org for more information.

Se habla español. TTY for deaf or hearing impaired:

1-888-221-1590

FAMIS is a program of the Commonwealth of Virginia FAMIS-4 0119

QUALITY LOW COST HEALTH INSURANCE FOR CHILDREN



CHECK UPS. PRESCRIPTIONS. DENTAL AND VISION. MENTAL HEALTH CARE AND MORE.



coverva.org 1-855-242-8282

FAMIS IS VIRGINIA'S HEALTH INSURANCE PROGRAM FOR CHILDREN

Find out if FAMIS or FAMIS Plus is the right plan for your children

FAMIS is Virginia's health insurance program for uninsured children. FAMIS Plus is Virginia's name for children's Medicaid. Both provide quality health care for children. If your children qualify, they will be enrolled in either FAMIS or FAMIS Plus based on your household size and income.

FAMIS and FAMIS Plus cover the regular care children need to keep them healthy, plus the services that will help them get better fast if they get hurt or sick. And best of all, you can choose your child's health plan and doctors.

FAMIS keeps your personal information private-we just want to help you keep your children healthy. Your information will NOT be shared with the immigration department, and enrollment in these programs will not affect your immigration status.

Coverage includes

- Annual well checkups for babies, kids, and teens
- Prescription drugs
- Doctor visits
- Shots
- Dental care

- Vision care and
- Mental health care
- Tests and X-rays
- ER care

In addition, for children enrolled in FAMIS Plus:

- Transportation to medical appointments
- Specialized treatments and services for children with special health care needs

It's quality low cost health insurance for your children

There are no enrollment costs or monthly premiums for FAMIS or FAMIS Plus. With FAMIS, there is a small co-payment of just \$2 or \$5 when your child gets certain medical services. You will not be asked to pay more than \$25 for any FAMIS covered service your child may need. And no matter how many times your child sees the doctor, you will never pay more than \$350 in co-pays a year for your children. Some services, such as annual well check-ups and dental services, do not require a copayment at all.

With FAMIS Plus, there are never any co-payments for any health service your child receives.

Note: Native Americans and Alaskan Natives do NOT have any co-payments for any services.

Check to see if your children qualify

To be eligible for FAMIS or FAMIS Plus, your child must:

- Live in Virginia
- Be under the age of 19
- Be a U.S. citizen or a lawfully residing immigrant • (a parent's immigration status is not considered)
- Have a family income (before taxes and • deductions) within the FAMIS limit (see chart)

For FAMIS only:

Children must also be uninsured at the time you apply

FAMIS Programs Income Limits* (Gross Income)

Qualifying for FAMIS programs also depends on household income and family size. For your family size, count the number of people included on your federal taxes. If you don't file taxes, count how many children and stepchildren under age 19 live in your home. Add yourself if you are the mother, father or stepparent of the children. Then add your husband or wife. For example, if you have 2 children and/or stepchildren under age 19 living in your home, plus yourself and your husband, your family size is 4. We determine eligibility based on monthly income before taxes and deductions. The current monthly income limit for a family size of 4 is \$4,400.

FAMILY SIZE	MONTHLY	YEARLY
m	\$2,135	\$25,605
ŵ ŵ	\$2,890	\$34,666
ŵ ŵ ŵ	\$3,644	\$43,727
ŵ ŵ ŵ ŵ	\$4,400	\$52,788
ŵ ŵ ŵ ŵ ŵ	\$5,155	\$61,849
ݰ ݰ ݰ ݰ	\$5,910	\$70,910
Each Additional Family Member	\$756	\$9,061

*Effective January 11, 2019. Income limits change annually so check coverva.org for the latest updates.

Gross income is your income before taxes and deductions.

Visit coverva.org for an easy-to-use screening tool.



QUALITY LOW COST HEALTH INSURANCE FOR CHILDREN

- glasses
- Hospital stays
- And more...

WIC At-A-Glance

WIC gives access to healthy food, nutrition education and breastfeeding support. If you're pregnant, a caregiver, or a mom with a child under 5, you can get the right personalized support for you and your family.



Breastfeeding Support



Shopping guidance Prenatal nutrition tips Kid-friendly recipes Personalized nutrition counselina

Support and education Peer counseling Lactation support Classes and information

Fresh fruits & vegetables Milk, cheese & more Cereal & other grains Peanut butter, beans & **Inre**

Social services Substance abuse Health screenings Immunization services

Healthy Food Options

Referrals & Resources





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WIC_{At-A-Glance}

WIC clinics statewide are now issuing eWIC cards to WIC families. WIC participants use their eWIC card like a debit card to purchase WIC approved foods at authorized WIC grocery stores.

Is Virginia WIC For Me?

Must Be:

- A Virginia resident A pregnant woman, breastfeeding woman, or the parent
 of a child aged birth to five years old
- of a child aged birth to five years old Household income eligible (*Ex. family of four can earn* \$45,510 or less yearly or \$3,793 or less monthly)

Assessed as having a nutritional risk

EBT Benefits:

- Electronic payment system
- Each WIC family gets one eWIC card Family's food benefits are added together
- Food benefits are kept in a special family account

Next Steps

Contact Virginia WIC @ 1-877-TELL-WIC(835-5942) to connect to a local clinic, check eligibility, and set up an appointment





