THE #FKLM FAMILY BLUEPRINT

# Understanding Which Benefits May Apply

Caregiver Wellness & Support · Household Stability

*The official federal starting point for identifying programs a household may qualify for.*

**IN THIS GUIDE**





**A free guide from My Fairy GodParents — for youth impacted by parental incarceration, justice-impacted youth, and the caregivers and families who support them.**
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*Print, write on it, and share it with the people helping your family.*

# Understanding Which Benefits May Apply



*The official federal starting point for identifying programs a household may qualify for.*

## THE DIFFERENCE THIS MAKES

Public benefits carry a lot of noise around them — assumptions about who qualifies, shame about applying, and confusing rules that differ by state. Meanwhile households that would clearly qualify go without, sometimes for years, because nobody ever told them to check.

Relative caregivers are among the most likely to miss out. Many programs consider the child's circumstances rather than the caregiver's income, which means a household that assumed it earned too much may still qualify for help on the child's behalf.

This lesson is orientation, not eligibility. MFGP cannot tell you what you qualify for; nobody can except the program itself. What we can do is show you where the official starting points are and how to approach them without wasting weeks.

## START WITH THE OFFICIAL SCREENERS

Benefits.gov is the federal government's benefit-finder. You answer questions about your household and it returns a list of federal programs that may apply, with links to the agency that runs each one. It does not determine eligibility and it does not apply for you.

USA.gov and your state's human services or social services agency are the other reliable starting points. State agencies matter because many programs are federally funded but state-administered, which is exactly why the rules differ from one state line to the next.

Treat the screener output as a to-do list of things to ask about, not as an answer. The only body that can tell you whether you qualify is the program itself.

## CATEGORIES CAREGIVERS MOST OFTEN MISS

Child-only assistance: in many states a relative caregiver can apply for benefits on behalf of the child alone, where the child's circumstances rather than the caregiver's income drive the decision. This is the single most commonly missed category in kinship families.

Childcare subsidies: help paying for childcare while a caregiver works or attends school. Income rules vary widely and are often more generous than people assume.

Health coverage: children who lose a parent's coverage frequently become eligible for Medicaid or CHIP. Coverage changes are a reason to re-check, even if you were denied before.

Nutrition programs: SNAP, WIC, school meals, and summer meal sites are separate programs with separate rules, so qualifying for none of one says nothing about the others.

Utility and housing help: energy assistance and rental programs typically run through state or local agencies with their own seasonal application windows.

## + HOW TO APPLY WITHOUT LOSING WEEKS

Gather documents before you start: identification for you, the child's birth certificate and Social Security number, proof of where you live, proof of income, and any paperwork showing the child is in your care. Missing paperwork is the number one reason applications stall.

Apply even when you are unsure. An application that gets denied costs you an hour; an application never filed costs you whatever you would have received. Caseworkers cannot approve what was never submitted.

Write down the date you applied, the case or confirmation number, and the name of anyone you spoke with. If a decision does not arrive when promised, that record is what lets you follow up effectively.

If you are denied and believe the decision is wrong, ask in writing for the reason and for the appeal process. Appeals exist, they have deadlines, and denials do get reversed — often over a document that was simply missing.

## + WHAT WE WILL NOT TELL YOU

MFGP does not make eligibility determinations and neither does any organization other than the program itself. Anyone who guarantees you will qualify, or asks for payment to help you apply for a public benefit, should be treated with suspicion.

Applications for public benefits are free. Free help with them is available through community action agencies, legal aid, and many nonprofits.

## + THE APPLICATION SHE ALMOST DID NOT FILE

An aunt raising her sister's two children worked full time and assumed she earned too much for anything. A kinship navigator asked whether she had applied for child-only assistance. She had not heard the term.

She gathered the children's birth certificates and Social Security cards, the guardianship paperwork she had from court, and proof of address, and applied on the children's behalf. It took about ninety minutes.

One application was approved, one was denied for a missing document that she resubmitted and which was then approved. She also learned the children qualified for health coverage they had gone without for five months. Her income never came into it — the children's circumstances did.

## + WORDS YOU CAN USE

### Asking about child-only benefits

*Say this to a state or county human services office.*

*“Hello — I'm a relative caregiver raising [number] children who are not my biological children. I'd like to apply on the children's behalf rather than for my whole household. Can you tell me what child-only assistance is available, what the application is called, and what documents I need to bring?”*

### Following up on a stalled application

*Use when the promised decision date has passed.*

*“Hello — I applied for [program] on [date], confirmation number [number]. I was told to expect a decision within [timeframe] and I haven't received one. Could you tell me the current status, whether anything is missing from my file, and when I should expect a decision?”*

### Requesting a denial in writing and the appeal steps

*Denials can be appealed, and deadlines are short.*

*“Thank you for letting me know. Could you please send me the denial in writing with the specific reason, along with the appeal process and the deadline to file? If the issue is a missing document, please tell me which one so I can submit it.”*

## + BENEFITS ORIENTATION STEPS

- [ ] Run the screener at Benefits.gov and note every program listed.
- [ ] Look up your state human services agency and check its programs page.
- [ ] Ask specifically about child-only assistance as a relative caregiver.
- [ ] Re-check health coverage if the child lost a parent's insurance.
- [ ] Gather ID, birth certificate, Social Security number, proof of address, proof of income, and care documentation.
- [ ] Apply even when you are unsure you qualify.
- [ ] Record application date, confirmation number, and contact names.
- [ ] Ask what the decision timeline is and calendar a follow-up.
- [ ] If denied, request the written reason and the appeal deadline.
- [ ] Never pay anyone to file a public benefit application.

## + REFLECT AND WRITE

**Which programs have I ruled out without ever asking?**

**Do I have the documents I would need to apply this week?**

**Have I asked specifically about assistance for the child rather than for me?**

**What is my follow-up date for anything already submitted?**

## + YOUR NEXT STEP

> Run one screening and write down the two programs most relevant to your household.

## + WHERE THIS COMES FROM

> Source: Benefits.gov (U.S. Government) — verified August 2026. Curated and summarized by MFGP.
> *https://www.benefits.gov/*
> *This is general information and practice guidance — not legal advice, mental-health treatment, or a statement of any court, agency, or facility's rules. Policies differ by state, county, facility, school, and program, so always confirm details with the office involved.*
> *For decisions with legal, medical, financial, or clinical consequences, work with a licensed professional or the organizations listed with each resource.*

*You do not have to do this alone.*

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