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| LOCAL COMMISSIONERS MEMORANDUM |
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DSS-4037EL (Rev. 9/89)

Transmittal No: 98 LCM-30

Date: June 12, 1998

Division: PSQI

TO: Local District Commissioners

SUBJECT: Survey of Drug and Alcohol Assessment Costs

ATTACHMENTS: Survey of Drug and Alcohol Assessment Costs

Districts must complete the attached survey for drug and alcohol assessment costs. Survey amounts must be reported under TANF and non-TANF categories. The purpose of the survey is to evaluate the current funding levels from Federal and State sources against the experiences of the districts as to the categories of cases undergoing the drug/alcohol assessments.

The Welfare Reform Act of 1997 requires the assessment of head of household and adult Public Assistance (including CAP) applicants and recipients for alcoholism and substance abuse. Claiming of assessment costs is addressed in 97 ADM-23 "Public Assistance (Family Assistance/Safety Net Assistance) Changes Resulting from The Welfare Reform Act of 1997." The TANF and non-TANF amounts incurred from assessment activities are claimed on the DSS-3274 "Schedule D-17 Distribution of Allocated Costs to Other Reimbursable Programs" and DSS-3922 "Financial Summary for Special Projects" which is labelled "Drug/Alcohol Assessment." These claims may be referred to when determining assessment amounts incurred to date.

Submit the completed survey to the following personnel by e-mail:

Regions I-IV Roland Levie at 1-800-343-8859, extension 4-7549 (USER ID FMS001), or

Region V Marvin Gold at (212) 383-1733 (USER ID OFM270).

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The survey must be submitted to the Office of Temporary and Disability Assistance (OTDA) Finance Unit by June 24, 1998.

Thaddeus Ziemba
Director
Bureau of Financial Management

Attachment 1

Trans. No.

SURVEY OF DRUG AND ALCOHOL ASSESSMENT COSTS

District _____

Date __/__/__

	TANF	Non-TANF
Actual Expenses SFY ' 97 - '98	\$ _____	\$ _____
Actual Expenses Incurred from 4/1/98 to Date	_____	_____
Estimated Amount to be Incurred During Remainder of SFY '98 - '99	_____	_____
Total Actual Amount and Estimated Amount to be Incurred	\$ _____	\$ _____

Please E-Mail through Office Link the results of this survey to:

Regions I - IV - Roland Levie (USER ID FMS001)

Regions V - Marvin Gold (USER ID OFM270)

The survey should be completed and E-Mailed by June 24, 1998

