GENERAL INFORMATION SYSTEM Center for Employment & Economic Supports

August 22, 2012

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TO: NYC Commissioner, TA Directors, FS Directors, Employment Coordinators, WMS Coordinators, MA

Directors

FROM: Phyllis Morris, Deputy Commissioner, Center for Employment and Economic Supports

SUBJECT: NYC – Updated Supplemental Nutrition Assistance Program (SNAP) Standards for October

1, 2012

EFFECTIVE DATE: October 1, 2012

CONTACT PERSON: SNAP/Food Stamp Questions – SNAP/Food Stamp Bureau – (518) 473-1469

MRB/A NYC Questions – Pat Bennett – (212) 961-8184

All Social Service Districts will be drop-shipped a Public Notice Poster (copy attached) outlining the updated SNAP standards for October 1, 2012. The Poster is to be displayed in reception and lobby areas to inform the districts' clients of the recent changes. This poster must be placed in close proximity to the Poster Pub. 4842, "If you need an Interpreter" compliant with Executive Order 26.

In compliance with Federal requirements, effective October 1, 2012 SNAP standards will be as follows:

The standard deduction amounts that will be used in the annual SNAP mass re-budgeting for October 1, 2012

Household Size	Standard Deduction
1	\$149
2	\$149
3	\$149
4	\$160
5	\$187
6+	\$214

The minimum allotment for one and two person households remains at \$16.

Maximum Excess Shelter Deduction: \$469

Homeless Shelter Deduction: \$143 (unchanged)

Boarder/Lodger Exclusion: \$200 for one person or \$367 for two persons (unchanged)

Househ	200% of	Monthly Income Elderly/	Maximum Gross	Maximum Net	Maximum
old size	Poverty**	Disabled Separate/	Monthly Income	Monthly Income	Allotment
		Household 165% of Poverty*	130% of Poverty	100% of Poverty	
1	\$1,862	\$1,536	\$1,211	\$931	\$200
2	\$2,522	\$2,081	\$1,640	\$1,261	\$367
3	\$3,182	\$2,625	\$2,069	\$1,591	\$526
4	\$3,842	\$3,170	\$2,498	\$1,921	\$668
5	\$4,502	\$3,714	\$2,927	\$2,251	\$793
6	\$5,162	\$4,259	\$3,356	\$2,581	\$952
7	\$5,822	\$4,803	\$3,785	\$2,911	\$1,052
8	\$6,482	\$5,348	\$4,214	\$3,241	\$1,202
Each Add'l Member	+\$660	+\$545	+\$429	+\$330	+\$150

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*Elderly (60 years of age or older) or disabled household members (and their spouses) who are incapable of buying food or preparing meals due to a disability may apply as a separate food unit if the income of the others with whom the individual resides (excluding the income of the elderly or disabled individual and spouse) do not exceed the 165% limit.

**SNAP households containing an aged or disabled individual, and households that pay out-of-pocket dependent care costs, that pass the 200% gross income test and do not contain a SNAP-sanctioned or an Intentional Program Violation (IPV) member are categorically eligible for SNAP benefits.

There will be a decrease to the amounts of the HT/AC SUA (Combined Heat/Utility/Phone SUA in NYC) as well as the Non-Heating SUA. The Phone SUA will remain the same:

Geographic Area	HT/AC SUA	UTIL SUA	PHONE SUA
NYC	\$725	\$287	\$33
Nassau & Suffolk	\$675	\$265	\$33
Rest of State	\$599	\$242	\$33

Note: The SUA values other than the Phone SUA include amounts for water, sewage, and trash collection.

NYSNIP BENEFITS MATRIX BY SHELTER TYPES

Effective 10/01/12 - 09/30/13

HOU	SEHOLD	SNAP/FOOD STAMP MONTHLY BENEFIT AMOUNT					
		New York City Nassau/Suffolk Upsta					
Shelter Type 94 (High	SSI Only	\$200	\$200	\$200			
Shelter/SUA)	Other Income	\$200	\$200	\$200			
Shelter Type 95 (Low	SSI Only	\$200	\$186	\$164			
Shelter/SUA)	Other Income	\$192	\$177	\$155			
Shelter Type 96 (High Shelter/	SSI Only	\$200	\$200	\$200			
SUA/\$1 HEAP)	Other Income	\$200	\$200	\$200			
Shelter Type 97 (Low Shelter/	SSI Only	\$200	\$186	\$164			
SUA/\$1 HEAP)	Other Income	\$192	\$177	\$155			
Shelter Type 98	SSI Only	\$86	\$86	\$86			
(No Shelter or SUA Data)	Other Income	\$82	\$82	\$82			

A copy of the mass notice sent to recipients is attached. If the notice does not print properly and a hard copy is needed, please request a faxed copy via the contacts listed above. Please note that the attached mass notice is also being used to update the gross monthly income standards (130% of poverty level) to those households subject to six-month reporting rules.



Notice to all SNAP Recipients

Important! Please Read!

The Supplemental Nutrition Assistance Program (SNAP)

is the new name for the Food Stamp Program (FSP)

Beginning October 1, 2012, some items used to figure the amount of SNAP benefits a household gets will change. These changes are a result of **federally-required** changes to the following standards and deductions.

The Standard Deduction for households of one to three persons will increase by \$2, from \$147 to \$149.

The Standard Deduction for households of four persons will increase by \$5, from \$155 to \$160.

The Standard Deduction for households of five persons will increase by \$6, from \$181 to \$187.

The Standard Deduction for households of six or more persons will increase by \$6, from \$208 to \$214.

The SNAP Maximum Excess Shelter Deduction will increase by \$10, from \$459 to \$469.

The new Standard Utility Allowance (SUA) amounts, as of October 1, 2012 are:

	New York City		Nassau / Suf	folk Counties	Rest of State		
	Old SUA Values	New SUA Values	Old SUA	New SUA	Old SUA	New SUA	
Heating / Air Conditioning SUA	\$736	\$725	\$685	\$675	\$608	\$599	
Basic Utility SUA	\$291	\$287	\$269	\$265	\$246	\$242	
Phone SUA	\$33 (Unchanged for all Counties)						

(Note: SUA values other than the Phone SUA include amounts for water, sewage and trash collection.)

These changes may affect the amount of SNAP benefits you get. Depending on your individual circumstance the amount of your monthly SNAP benefit may not change or it may decrease or increase as a result of these changes.

The maximum SNAP benefit amount per household size, known as the "Thrifty Food Plan" amount, will not change.

The minimum SNAP benefit amount that a one or two person household can receive, \$16.00 per month, will not change.

The State Regulations which allow us to do this are 18 NYCRR 387.10, 387.12 and 387.15.

Reporting Rules:

Most SNAP households with income only have to report changes every six months. Every six months, you either will be asked to recertify, or will be mailed a form for you to use to report changes. The one exception to this rule is if your household's gross monthly income becomes more than 130% of the federal poverty level. Your gross income includes all income any member of your household receives during the calendar month before taxes and other deductions are taken out.

<u>See Chart below</u>: The dollar amount shown under your household's size shows the new 130% of poverty income limit for your household, <u>as of October 1, 2012</u>. If your household's gross monthly income becomes more than this amount, you must report the new, higher income amount to your social services office by phone, in writing, or in person within 10 days after the end of the month.

Report Household G	ross Inco	me Over I	ncome Li	imits Belo	w on You	r Househ	old Size:			
HOUSEHOLD SIZE	1	2	3	4	5	6	7	8	9	10
Report if Gross Household Income Goes Over:	\$1,211	\$1,640	\$2,069	\$2,498	\$2,927	\$3,356	\$3,785	\$4,214	\$4,643	\$5,072

If you think we made a mistake in figuring your October SNAP benefits due to above noted changes, you may ask for a state fair hearing, within 90 days of when your October 2012 SNAP benefits become available. You can ask for a fair hearing by writing to: Office of Administration Hearings, New York State Office of Temporary and Disability Assistance, P.O. Box 1930, Albany New York 12201 or you may call toll free: 1-800-342-3334.

LEGAL ASSISTANCE: If you think that you need a lawyer to assist you with this problem, you may be able to get a lawyer at no cost to you by contacting your local Legal Aid Society or other legal advocate group.

MASS NOTICE OF INTENT TO CHANGE SNAP OCTOBER 2012/NYC

Case Number: Loc.Off./Unit/Worker:

General Telephone No. for Questions or Help:

Dear SNAP Recipient:

ATTN: Supplemental Nutrition Assistance Program (SNAP) is the new name for the Food Stamp Program.

Beginning October 1, 2012, some items used to figure the amount of SNAP benefits a household gets will change. These changes are the result of federally-required changes to the following standards and deductions. The Standard Deduction for households of 1 to 3 persons will increase by \$2, from \$147 to \$149. The Standard Deduction for households of 4 persons will increase by \$5, from \$155 to \$160. The Standard Deduction for households of 5 persons will increase by \$6, from \$181 to \$187. The Standard Deduction for households of six or more persons will increase by \$6, from \$208 to \$214. The SNAP Maximum Excess Shelter Deduction will increase by \$10, from \$459 to \$469.

The new Standard Utility Allowance (SUA) amounts, as of October 1, 2012 are:

New York City	Old SUA Values	New SUA Values
Heating / Air Conditioning SUA Values	\$736	\$725
Basic Utility SUA Values	\$291	\$287
Phone SUA	\$33 (Unchanged)	

Note: The SUA values other than the Phone SUA include amounts for water, sewage, and trash collection.

These changes may affect the amount of SNAP benefits you get. Depending on your individual circumstance the amount of your monthly SNAP benefit may not change, or it may decrease or increase as a result of these changes.

The maximum amounts of SNAP benefits per household size, known as the "Thrifty Food Plan" amounts, will not change.

The minimum SNAP benefit amount that a one or two-person household currently can receive, \$16.00 per month, will not change.

The Regulations which allow us to do this are 18 NYCRR 387.10, 387.12 and 387.15.

Reporting Rules:

Most SNAP households with income only have to report changes every six months. Every six months, you either will be asked to recertify, or will be mailed a form for you to use to report changes. The one exception to this rule is if your household's gross monthly income becomes more than 130% of the federal poverty level. Your gross income is the amount of income before taxes and other deductions are taken out, not the amount you receive when you receive your check. Your total gross monthly income includes all income any member of your household receives during the calendar month.

See Chart below: The dollar amount shown under your household size shows the new 130% of poverty income limit for your household, as of October 1, 2012. If your household's gross monthly income is greater than this amount, you must report the new gross monthly income amount to your social services office by phone, in writing, or in person within 10 days after the end of the month.

Report Household Gross Income Over Income Limits Below Based on Your Household Size:										
HOUSEHOLD SIZE	1	2	3	4	5	6	7	8	9	10
Report if Gross Household Income Goes Over:	\$1211	\$1640	\$2069	\$2498	\$2927	\$3356	\$3785	\$4214	\$4643	\$5072

Some households still must report changes affecting their eligibility for or the amount of their SNAP benefits within 10 days of the month following the month in which the change occurred. You must follow this reporting rule, if your household receives Temporary Assistance, or if your household has no income at all, or if your household has no income earned from employment and all adults are either over age 60 or disabled, or if you receive SSI/SSD and you live in a state-certified group home. Also, if your household has a seasonal migrant farm worker, or if your household is certified for fewer than four months, or if your household is homeless ("undomiciled", without any shelter).

YOU HAVE THE RIGHT TO APPEAL THIS DECISION. READ BELOW ON HOW TO APPEAL THIS DECISION.

CONFERENCE AND FAIR HEARING SECTION - DO YOU THINK WE ARE WRONG?

If you think our decision was wrong, you can ask for a review of our decision. You can do both 1 and 2:

- 1. Ask for a meeting (conference) with one of our supervisors;
 2. Ask for a State fair hearing with a State hearing officer.
- 1. <u>CONFERENCE</u> (Informal meeting with us) If you think our decision was wrong, or if you do not understand our decision, please call us to set up a meeting. To do this, call the conference phone number on the **front** of this notice or write to us at the address on the **front** of this notice. Sometimes this is the fastest way to solve any problem you may have. We encourage you to do this even when you have asked for a fair hearing.
- STATE FAIR HEARING YOU HAVE 90 DAYS FROM THE DATE YOUR OCTOBER 2012 SNAP BENEFITS BECOME AVAILABLE TO ASK FOR A FAIR HEARING.

THE DATE YOUR OCTOBER FOOD STAMP BENEFITS BECOME AVAILABLE IS THE DATE YOU CAN ACCESS YOUR OCTOBER SNAP BENEFITS WITH YOUR PLASTIC ID CARD.

HOW TO ASK FOR A FAIR HEARING: You can ask for a fair hearing by mail, by phone, by fax, by walk-in or online.

Mail: Send a copy of the notice completed to the Office of Administrative Hearings, New York State Office of Temporary and Disability Assistance, P.O. Box 1930, Albany, New York 12201. Please keep a copy for yourself.
I want a fair hearing. I do not agree with the agency's action. (You may explain why you disagree below, but you do not have to include a written explanation.)

Phone: 800-342-3334 (PLEASE HAVE THIS NOTICE WITH YOU WHEN YOU CALL.)

Fax: Fax a copy of the front and reverse of this notice to: (518) 473-6735.

<u>Walk-In</u>: Bring a copy of this entire notice to the New York State Office of Temporary and Disability Assistance at 14 Boerum Place, Brooklyn, New York

Online: Complete an online request form at: http://www.otda.ny.gov/oah/forms.asp.

If you cannot reach the New York State Office of Temporary and Disability Assistance by phone, by fax, by walk-in or online, please write to ask for a fair hearing before the deadline.

WHAT TO EXPECT AT A FAIR HEARING: The State will send you a notice that tells you when and where the fair hearing will be held.

At the hearing, you will have a chance to explain why you think our decision is wrong. You can bring a lawyer, a relative, a friend or someone else to help you do this. If you cannot come yourself, you can send someone to represent you. If you are sending someone who is not a lawyer to the hearing instead of you, you must give this person a letter to show the hearing officer that you want this person to represent you at the hearing.

At the hearing, you and your lawyer or other representative will have a chance to explain why we are wrong and a chance to give the hearing officer written papers that explain why we are wrong.

To help you explain at the hearing why you think we are wrong, you should bring any witnesses who can help you. You should also bring any papers you have, such as: pay stubs, leases, receipts, bills, doctor's statements.

At the hearing, you and your lawyer or other representative can ask questions of witnesses which we bring or which you bring to help your case.

LEGAL ASSISTANCE: If you think you need a lawyer to help you with this problem, you may be able to get a lawyer at no cost to you by contacting your local Legal Aid Society or other legal advocate group. For the names of other lawyers, check your Yellow Pages under "Lawyers".

ACCESS TO YOUR FILE AND COPIES OF DOCUMENTS: To help you get ready for the hearing, you have a right to look at your case file. If you call, write or fax to us, we will send you free copies of the documents from your files, which we will give to the Hearing Officer at the Fair Hearing. Also, if you call, write or fax to us, we will send you free copies of other specific documents from your files which you think you may need to prepare for your Fair Hearing. To ask for documents or to find out how to look at your file, call (718) 722-5012, or fax (718) 722-5018 or write to HRA Division of Fair Hearing, 14 Boerum Place, Brooklyn, New York 11201.

If you want copies of documents from your case file, you should ask for them ahead of time. They will be provided to you within a reasonable time before the date of the hearing. Documents will be mailed to you only if you specifically ask that they be mailed.

INFORMATION: If you want more information about your case, how to ask for a fair hearing, how to see your file, or how to get additional copies of documents, call us at the phone numbers on the **front** of this notice or write to us at the address on the **front** of this notice.