

INFORMATIONAL LETTER

TRANSMITTAL: 00 INF-7

TO: Commissioners of
Social Services

DIVISION: Temporary
Assistance

DATE: March 15, 2000

SUBJECT: Interim printings of LDSS-2921, LDSS-2921NYC,
LDSS-3174 and LDSS-3174NYC

SUGGESTED

DISTRIBUTION: Directors of Temporary Assistance
Directors of Food Stamps
Directors of Medical Assistance
Directors of Quality Assurance and Audit
CAP Coordinators
Forms Coordinators
Staff Development Coordinators
WMS Coordinators
Directors of Services

CONTACT PERSON:

Program Questions:

Eastern Region - (518) 473-1469
Central Region - (518) 474-9344
Western Region - (518) 473-0332
Metro Region - (212) 383-1658

Forms Questions:

Bob Gullie, DTA/Information Analysis & Technology Team
1-800-343-8859, extension 4-6055 (AV1060)

ATTACHMENTS: Attachment I - Listing of all attachments on-line

FILING REFERENCES

Previous ADMs/INFs	Releases Cancelled	Dept. Regs.	Soc. Serv. Law & Other Legal Ref.	Manual Ref.	Misc. Ref.
See Attach- ment II		See Attach- ment II	See Attach- ment II	See Attach- ment II	See Attach- ment II

The purpose of this INF is to inform local districts that there has been an interim printing of the following Certification/Recertification Applications:

- LDSS-2921:** "Certification Application" (Upstate)
- LDSS-2921NYC:** "Certification Application" (New York City)
- LDSS-3174:** "Recertification Application" (Upstate)
- LDSS-3174NYC:** "Recertification Application" (New York City)

The interim printings are necessary to provide local districts with a vehicle to implement two new federally mandated requirements.

The two new federally mandated requirements are:

1. REPORTING RACIAL/ETHNIC AFFILIATION FOR MEMBERS OF TANF HOUSEHOLDS

The Final Rules and Regulations for Data Collection and Reporting for TANF cases published on April 12, 1999 require various demographic data to be reported to HHS for TANF individuals on a quarterly basis. This demographic data includes the reporting of racial/ethnic affiliation for members of TANF households. FNS has also proposed new regulations, which expand the racial/ethnic data required to be reported for Food Stamp cases. To assist in the collection of this data the applications and recertification applications have been amended to include a new racial/ethnic affiliation question. The question is to be completed for all individuals for all program areas and is designed to capture the possible multiplicity of racial/ethnic affiliation. It should be completed as follows:

For each applicant/recipient indicate in column H, by entry of a Y (yes) or N (no), whether the individual's ethnic affiliation is Hispanic or Latino. In addition, a Y (yes) or N (no) must be entered for each individual in each of the five racial affiliation columns: I (American Indian or Alaskan Native), A (Asian), B (Black or African American), P (Native Hawaiian or Other Pacific Islander), and W (White). At least one of these five racial affiliation columns must have a Y entered.

Please note that Pacific Islanders are no longer included in the same racial category as Asians. Also note that the amended, * 4/96, Applications and Recertification Applications do not clearly distinguish the ethnic affiliation column H from the five racial affiliation columns I, A, B, P and W. The next revision of these forms will more clearly make this distinction.

The WMS migration is currently scheduled for July 24, 2000. This migration will support entry of this new data on the Upstate and Downstate WMS at that time. As a result of this delay, there will be a period of time in which the Applications and Recertification Applications have more data than WMS can collect. Detailed systems instructions will be included in future WMS Upstate and WMS Downstate correspondence.

Public Assistance and Food Stamp Implications:

In the meantime, Upstate Staff may want to instruct data entry staff to leave the race fields blank when registering the application. The worker would then complete the field for data entry according to the system support at the time of case opening.

New York City Staff should review the client responses to the race and ethnic questions and code the system according to the following:

- The response of the Food Stamp head of household should be used for the case level race code required on the NAPP05 application screen.

- At the individual level where more than one question has a yes response, the worker should then evaluate and decide which one appropriate ethnic code should be entered for each line on the NAPP10 application screen.

For example: The client answers yes for white and black, worker uses his/her best guess and determines that the black code should be entered.

At the present time, there is no legal/regulatory basis for denial or discontinuance of Temporary Assistance for refusal to provide the required race/ethnic information. In such situations, local district staff must make their "best guess" in order to meet the federal reporting requirements.

MA Implications:

For Medicaid-only cases, entry of only one field is required. Multiple entries are allowed. As currently, if the Race/Ethnic Affiliation section is not completed by the applicant/recipient, the worker can complete it by observation.

If race/ethnicity is unknown, as when an application is completed by a representative and no entry is recorded, entry of "U" for unknown must be entered in one column for each applicant. Entry of "U" will be permitted for case type 20 only.

2. REPORTING HOUSEHOLD EXPENSES FOR MEMBERS OF FOOD STAMP HOUSEHOLDS

General Letter 99-16 from USDA advised states that households have the responsibility to report the facts of their food stamp case to enable the agency to certify them correctly. It is the household's responsibility to report all expenses. Failure to report or verify any household expenses will result in the loss of the household's entitlement to the corresponding deductions allowed under the Food Stamp Act. The letter additionally advises states to identify this policy as clearly as possible to applicants. Eligibility workers should be instructed to advise applicants of this policy at the certification interview. The application and recertification forms have been revised to include language advising clients that failure to report a deductible expense constitutes a statement that the household does not want to receive the deduction.

We have incorporated these two new federally mandated requirements in the forms by making the following changes:

- I. GENERAL- In order to distinguish the existing (Rev.4/96) LDSS-2921, 2921NYC; LDSS-3174 and 3174NYC from the interim (Rev.4/96) versions, an (*) asterisk has been added after each of the form numbers. The form numbers on all pages of the forms now read:
- LDSS-2921* (Rev. 4/96)
 - LDSS-2921NYC* (Rev. 4/96)
 - LDSS-3174* (Rev. 4/96)
 - LDSS-3174NYC* (Rev. 4/96)

II. The "RACE/ETHNIC AFFILIATION FOR APPLICANT ONLY" section was deleted

On Page 7 of LDSS-2921
On Page 7 of LDSS-2921NYC
On Page 12 of LDSS-3174
On Page 12 of LDSS-3174NYC

III. The following new "RACE/ETHNIC" information was added between the "DATE SIGNED" column and the "INDIVIDUAL LINE NUMBER (LN)" Column.

On Page 3 of the LDSS-2921*
On Page 3 of the LDSS-2921NYC*
On Page 3 of the LDSS-3174*
On Page 3 of the LDSS-3174NYC*

ENTER Y (YES) OR
N (NO) FOR EACH
RACE/ETHNIC
AFFILIATION

H I A B P W

RACE/ETHNIC
AFFILIATIONS CODES

H Hispanic or Latino
I American Indian or
Alaskan Native
A Asian
B Black or African
American
P Native Hawaiian or
Other Pacific
Islander
W White

IV. The following new "REQUIREMENT TO REPORT/VERIFY HOUSEHOLD EXPENSES" information was added:

On Page 7 of LDSS-2921*
On Page 7 of LDSS-2921NYC*
On Page 12 of LDSS-3174*
On Page 12 of LDSS-3174NYC*

REQUIREMENT TO REPORT/VERIFY HOUSEHOLD EXPENSES

I understand that my household must report child care and utility expenses in order to get a FS deduction for these expenses. I further understand that my household must report and verify rent/mortgage payments, property taxes, insurance, medical expenses and child support paid to a non-household member in order to get a FS deduction for these expenses.

I understand that failure to report/verify the above expenses will be seen as a statement by my household that I/we do not want to receive a deduction for those unreported/unverified expenses. A deduction for these expenses may make you eligible for FS or may increase your FS benefit. I understand that I may report/verify these expenses at any time in the future. This deduction would then be applied to the calculation of FS benefits in future months in accordance with the rules for change reporting.

It is recommended that you begin using the interim versions of the Certification/Recertification Applications for Public Assistance and Food Stamp Programs immediately upon receipt and for all other Programs by March 20, 2000. Spanish versions of these forms will also follow.

Any future requests for the LDSS-2921*; LDSS-2921NYC*; LDSS-3174* and LDSS-3174NYC* (Rev.4/96) or their Spanish versions should be submitted on OTDA-876 (Rev. 6/98): "Request For Forms or Publications" form , and should be sent to:

**Office of Temporary and Disability Assistance
Document Services
P.O. Box 1990
Albany, New York 12201
Attention: Document Supply Control & Distribution**

Questions concerning ordering forms should be directed to Document Services at 1-800-343-8859, extension 6-6223.

Patricia A. Stevens
Deputy Commissioner
Division of Temporary Assistance

Attachment I

Attachment I - Listing of Attachments

Attachment II - Filing References - available on-line.

Attachment III - DSS-2921*: "Certification Application" - not available on-line

Attachment III - DSS-2921NYC*: "Certification Application" (NYC) - not available on-line

Attachment IV - DSS-3174*: "Recertification Application" (Upstate) - not available on-line

Attachment V - DSS-3174NYC*: "Recertification Application" (NYC) - not available on-line

Attachment II

FILING REFERENCES

Previous ADMs/INFs	Releases Cancelled	Dept. Regs.	Soc. Serv. Law & Other Legal Ref.	Manual Ref.	Misc. Ref.
89 ADM-21		350.5,351.22	SSL 22	FSSB	GIS 89
89 ADM-8		351.23	SSL 366-a	Section	MA007
89 ADM-6		352.31(d)		VI-A,B	GIS 99
88 ADM-4		355,358-3.3,		VII-all	TA/DC024
87 ADM-4		359,360-2.4,		XV-C	
86 ADM-10		2.5,2.6,6.4			89 LCM-155
86 ADM-7		7.5		PASB	89 LCM-92
85 ADM-45		369.6		Section	
85 ADM-17		387.19		VI-all	
82 ADM-55		387.20		IX-I-7	
81 ADM-55		505.14(b)(5)			
80 ADM-90		(v),(viii),			
93 INF-45		(x)			
92 INF-46		385.3		Local	
92 INF-34		385.14		District	
90 INF-57				Manager's	
89 INF-53				Guide	
88 INF-83				pp. 12-1	
88 INF-28				through	
				12-5	