

George E. Pataki Governor NEW YORK STATE OFFICE OF TEMPORARY AND DISABILITY ASSISTANCE 40 NORTH PEARL STREET ALBANY, NY 12243-0001

Brian J. Wing Commissioner

Administrative Directive

Section 1						
Transmittal:	01 ADM 17					
To:	Local District Commissioners					
Issuing Division/Office:	Temporary Assistance					
Date:	November 26, 2001					
Subject:	Safety Net Assistance Application for Able-Bodied Adults at the State Sixty-Month Time Limit					
Suggested	Temporary Assistance Directors					
Distribution:	Food Stamp Directors					
	Medical Assistance Directors					
	WMS Coordinators					
	Staff Development Coordinators					
	CAP Coordinators					
	Employment Coordinators					
	Domestic Violence Liaisons					
	CSEU Coodinators					
	Department of Labor Technical Advisors					
Contact Person(s):	Call 1-800-343-8859 and ask for the following: Central Team ext. 4-9344					
Attachments:	Safety Net Application Supplement Call-in Letter, Safety Net Assistance (SNA)					
	Application Supplement					
Attachment Avail Line:	able On –					

Filing References

Previous ADMs/INFs	Releases Cancelled	Dept. Regs.	Soc. Serv. Law & Other Legal Ref.	Manual Ref.	Misc. Ref.
01 ADM-3 99 ADM-7 98 ADM-3 97 ADM-24 97 ADM-23 97 ADM-21 97 ADM-20		350.4 351.2 351.20 351.21 369.4 370.4	PRWORA WRA	Source Book VIII-L	11/16/01 WMS Coordinator Letter 6/1/01- GIS 01 TA/DC019 8/30/01 - GIS 01 TA/DC032 2/14/01 - WMS Coordinator Letter

Section 2

I. Purpose

This directive explains a new application requirement for all able-bodied adults who want to continue to receive Temporary Assistance (TA) after reaching the State sixty-month time limit. The procedures for this application process are outlined in this directive. Districts were initially informed of this requirement in GIS 01 TA/DC032

II. Background

Adults will begin reaching the State sixty-month time limit at the end of November 2001. Administrative Directive 01-ADM-3 (Exemptions to the State Sixty-Month Cash Time Limit/Evaluation for Safety Net Assistance) instructed districts on the requirement to call-in those adults who are reaching the State sixty-month time limit. These adults needed a face-to-face interview to reassess their needs for self-sufficiency interventions and to evaluate them for an exemption from the time limit due to the presence of a hardship. Adults granted a time limit exemption because of a long-term inability to work would continue to receive Family Assistance (FA) for themselves and their families for as long as this hardship lasted. Adults who did not have a hardship could continue to receive Safety Net Assistance (SNA) if they had continuing need after the State sixty-month time limit.

This Administrative Directive details a change in 18 NYCRR 350.4 which now requires all able-bodied adults in a household reaching the State sixty-month time limit to apply for SNA if they want to continue to receive benefits for themselves and their families.

III. Program Implications

A. <u>Temporary Assistance</u>

Able-bodied adults who reach the State sixty-month time limit and who want to continue to receive assistance must affirm their need for continuing assistance by reporting to a SNA Application Interview and completing the SNA Application Supplement. Every able-bodied adult in the FA case or non-cash SNA-FP case (upstate) or suffix (NYC) will have to comply with this application requirement in order for the household to receive benefits. SNA application requirements remain the same and the able-bodied adults must comply with all of them for the household to be eligible for SNA.

An adult for time limit tracking purposes is an individual who is:

- Age 19+ years old
- Age 18 and not in school
- Minor head-of-household
- Spouse or unmarried parent of a child in common with the head-of-household

An able-bodied individual is one who is not exempt from participation in work activities for <u>any</u> of the reasons contained in Department of Labor Regulation 1300.2. Adults who are found qualified for a time limit exemption or who are exempt from work requirements under Department of Labor Regulation 1300.2 <u>will not</u> have to complete the SNA Application Supplement to receive benefits after the State sixty-month time limit.

B. <u>Time Limit Reassessments</u>

The requirement for a face-to-face reassessment outlined in 01-ADM-3 still applies to all non-able bodied adults who are reaching the State sixty-month time limit. If during the reassessment interview the worker determines that the adult is now able-bodied, he/she must apply for SNA. Districts can provide the SNA Application Supplement and the call-in letter (which contains information about the consequences of failing to apply) at the reassessment, explain the new application requirement and give the adult an opportunity to apply for SNA. Districts also have the option to do the SNA Application Supplement Interview through a separate call-in.

C. <u>Sanctioned Case and Suffix Members</u>

The new SNA application requirement for able-bodied adults reaching the State sixty-month time limit does not have any impact on existing sanction policies or procedures. Employment sanctions that occur in Family Assistance are recognized and continued in Safety Net Assistance. If all the able-bodied adults on the case (upstate) or suffix (NYC) comply with all SNA application procedures and requirements, including job search and employment assessment, the case will be eligible for SNA, even if a household member is currently sanctioned. If the durational limit of the FA sanction has expired and all the able-bodied members have complied with all SNA application requirements, the sanctioned individual will receive SNA benefits after the State sixty-month time limit. Sanctioned able-bodied adults cannot receive SNA until the end of the durational period of the FA employment sanction. Employment sanctions occurring in FA count toward the sanction progression in SNA.

IV-D sanctions will also follow able-bodied adults into SNA for those adults who comply with all SNA application requirements but still refuse to comply with IV-D requirements.

D <u>Food Stamp Implications</u>

Temporary Assistance time limits do not apply to the Food Stamp (FS) program. Family Assistance households that are closed at the end of the State sixty-month time limit and are denied SNA for failure to complete eligibility requirements must have continued FS eligibility for the remainder of their certification period determined separately. Failure to appear for a call-in during a certification period is not a FS eligibility requirement.

When an FA case closes and the household is denied SNA for refusing to accept a bona fide job or complete a job search, the FS separate determination must also include a determination as to whether the non-complying adult should be sanctioned for FS work rules compliance. The individual would not be sanctioned, if as an NPA-FS recipient, he/she is now work-exempt (e.g., has a child under 6).

E. <u>Medicaid Implications</u>

An able-bodied adult's failure to apply for Safety Net Assistance or non-compliance with any aspect of work requirements, including job search, employment assessment, or acceptance of a job offer does not affect Medicaid eligibility. Medicaid must continue whenever an FA case is closed solely for reaching the State sixty-month time limit. Medicaid cases may be continued for twelve months from the date of the last eligibility determination if circumstances have not changed. Eligibility will need to be redetermined if circumstances warrant. Medicaid continuation is supported by WMS.

F. <u>TANF Services</u>

Even though these cases will become SNA or close, many of these families may still be eligible for services funded through TANF and subject to eligibility criteria established by OTDA, OCFS, DOL, OASAS or other agencies using TANF block grant funds.

IV. Required Action

A. <u>Safety Net Application Appointment</u>

Effective September 17, 2001, districts must begin to call-in for a face-to-face SNA Application Interview, all able-bodied adults (including non-complying adults) who will become ineligible for FA or SNA-Federally Participating because of the State sixty-month time limit. All able-bodied adults in the FA case, or in the FA suffix in NYC must apply for SNA. Districts should, as much as practical, schedule the SNA Application Interview no later than 45-days prior to the end of the State sixty-month time limit. When scheduling the SNA Application Supplement Interview, districts should be sensitive to any special accommodations an adult would need in order to report for a SNA Application Supplement Interview. However, authorized representatives cannot report to the interview on behalf of an ablebodied adult. Good cause reasons for an able-bodied adult not reporting for a SNA Application Supplement Interview include:

- A full time work schedule that conflicts with the application interview and the district is unable to reschedule the application interview outside of normal office hours.
- Extraordinary transportation difficulties that make it impossible for the able-bodied adult to report.
- A personal or family emergency that prevents the able-bodied adult from reporting for the SNA Application Supplement Interview within the State sixty-month time limit.
- Extraordinary circumstances beyond the control of the able-bodied adult that prevents him or her from reporting for the interview within the State sixty-month time limit.

If the local district finds that the able-bodied adult has a good cause reason for not reporting for the SNA Application Supplement Interview within the State sixty-month time limit, the district can change the family's category of assistance to SNA at the end of the time limit. Another option is to allow the case to be processed by the WMS conversion. Cases that are changed to SNA without a SNA Application Supplement must be seen as soon practical after conversion to complete necessary SNA requirements. The conversion process is explained in detail in the November 16, 2001 WMS Coordinator Letter.

Since the SNA Application Supplement Interview is for the express purpose of affording able-bodied Family Assistance recipients an opportunity to apply for SNA, districts cannot use the reassessment callin letter from GIS 01 TA/DC019 of June 1, 2001. For SNA face-to-face Application Supplement Interview appointments, districts must use the call-in letter attached to GIS –01 TA/DC032, which is now supported by CNS (CNS reason code Z51 – Application Call-in). This call-in letter clearly informs the able-bodied adult that the appointment is about an application for SNA. If an able-bodied adult in the FA case or in the FA suffix in NYC fails to report for the SNA Application Supplement Interview, districts cannot immediately close the Family Assistance case. The Family Assistance case cannot be closed since the appointment was about SNA eligibility and not a requirement for FA eligibility. When an able-bodied FA recipient does not report for the SNA Application Supplement Interview, districts may take immediate action to produce the closing notice. However, the effective date of the closing cannot be earlier than first day of the month following the end of the State sixty-month time limit. The notice will inform the head-of-household that his/her case is being closed because the family has lost eligibility for FA due to the time limit and the household will not receive SNA because no application was filed. (Please see additional information: Notices.)

B. <u>Safety Net Application Supplement</u>

In upstate districts, the SNA Application Supplement is enclosed with the CNS generated (CNS Code Z51) appointment letter for SNA Application Supplement Interview. In NYC the local equivalent is enclosed with the appointment letter. The SNA Application Supplement is a short form to facilitate the required application for SNA. The focus of the SNA Application Supplement Interview is on changes in the household circumstances since the last application or recertification. Districts must not collect information they already have on file.

The SNA Application Supplement can only be used in conjunction with SNA applications made by able-bodied adults within the State sixty-month time limit (i.e., while their FA case is still open). If an able-bodied adult in the FA case or the FA suffix in NYC does not report for the initial SNA Application Supplement Interview, or reports, but refuses to file an application for SNA, districts can still use the SNA Application Supplement if the able-bodied adult files a subsequent SNA application before the end of the State sixty-month time limit. SNA Supplement Applications are not registered on WMS. All SNA application supplements filed after the FA case closes because of the State sixty-month time limit must be done on the common application form and be processed as a normal application for assistance.

C. <u>Safety Net Assistance Application Supplement Interview</u>

Although the SNA Application Supplement Interview has some elements in common with the reassessment described in 01-ADM-03, it is a separate and a distinct interview.

At the SNA Application Supplement Interview, the local district must first determine if the able-bodied adult has had a change in his/her situation that would qualify for an exemption to the State sixty-month time limit following the criteria in 01-ADM-03. Adults who qualify for a time limit exemption will not need to file an application for SNA, since they and their families remain in FA or non-cash SNA-FP upon reaching the State sixty-month time limit. These families remain in FA for as long as the adult (both adults in a two-parent household) qualifies for a time limit exemption. Districts must ensure that these adults' employability code is changed to a correct one for a time limit exemption and that a time limit exemption indicator is properly entered on WMS.

If the able-bodied adult does not qualify for a time limit exemption that would allow the family to remain in FA, the district must assess whether the adult is now exempt from work activities. Adults who are exempt from participation in work activities under DOL Regulation 1300.2 do not have to file an application for SNA. If otherwise eligible they should be categorized as cash SNA effective at the end of the State sixty-month time limit. In two-parent households, the SNA application requirement applies if at least one of the adults is able-bodied.

Districts should follow-up with adults granted time limit exemptions and/or exemptions to work activities and explore what services and interventions might be effective in helping these adults achieve some level of self-sufficiency.

All able-bodied adults who do not qualify for time limit exemptions or who are not exempt from work activities must file an application for SNA if they want benefits after the State sixty-month time limit. In FA households with more than one able-bodied adult in the case (upstate) or suffix (NYC), one application must be filed, but all able-bodied adults must sign the application. All SNA application requirements, including applicant employment requirements, must be complied with. During the SNA Application Supplement Interview the eligibility worker must complete the following actions:

- Explain the new requirement to complete the SNA Application Supplement and what it means (including the fact that previously excluded dependent children and their parent if residing in the household, along with their income, must be included in the SNA case. This may make the family ineligible for SNA).
- Take the completed SNA Application Supplement.
- Obtain documentation of any changes in circumstances since the last application or recertification.
- Do a FEDS referral if a FEDS indicator is present.
- Explain to any adult on an IV-D sanction that if they are still unwilling to comply with IV-D requirements, the sanction will continue in SNA. Adults who express willingness to comply should be referred to IV-D.
- Require the adults to sign the Repayment Agreement (DSS-4529) and the Assignment of Future Earnings (DSS-4530).
- Require the adults to include on the SNA Application Supplement any children that were not on the FA case (except those who are receiving SSI, are ineligible aliens or are receiving foster care), and the parent who lives in the household of any applying child.
- Do the required drug and alcohol screening.
- Offer domestic violence screening.
- Obtain information on landlords and utility companies, if necessary.
- Assign a job search as appropriate in accordance with Department of Labor regulations 1300.6, 1300.9.
- Schedule an appointment for an employment assessment in accordance with Department of Labor regulation 1300.6. If an individual has been recently assessed and is participating in a work activity in accordance with his or her employability plan, there is no need to conduct another assessment.

• When appropriate, offer the adult a bona fide employment opportunity as an available resource. The eligibility worker must ensure that childcare or transportation issues would not prevent the adult from accepting a bona fide job.

When making employment activity assignments, districts should carefully evaluate the reasons why the able-bodied adult was unable to achieve self-sufficiency within the State sixty-month time limit. Districts, to the extent local resources permit, should offer services to these adults that could eliminate the barriers that have preventing self-sufficiency. Districts are strongly encouraged to enhance their employment activities and services with intensive case management that could be the critical difference that enables these adults to finally break free of dependency from TA.

D. Family Members Not on the Family Assistance Case

Upstate:

Family members who live with the recipient and who must apply to be included in the SNA case must complete the common application (LDSS-2921). It is not necessary to register the application. The family members can be added to the LDSS-3209 of the active family member(s) during an undercare transaction of 05 - Change or 06- Recertification.

To add an individual, do the following:

Enter all required fields including name, sex, date of birth, SSN code and SSN, all six race/ethnic indicators. Leave the CLIENT ID field blank. Other required fields for adding an individual are relationship code, category code, employment code, citizenship code, education status, highest degree and veteran status.

After entering the appropriate data, send the 3209 to data entry. A new Authorization Change Form (3209) will be returned to you. It will be accompanied by a Clearance Report for the individual being added.

Evaluate the Clearance Report to determine if the individual being added is known to WMS.

Based on your evaluation, make one of the following entries in the CLIENT ID field on the new 3209:

1. If the applicant is not known to WMS, enter the letters ASSIGN.

2. If the applicant is known to WMS and already has a CIN, enter the CIN as it appears on the Clearance Report.

Note: When adding an individual, always obtain a Clearance Report by leaving the Client ID field blank.

NYC

Family members who live with the recipient and who must apply to be included in the SNA case must complete the common application (LDSS-2921) or the Applicant job Profile (W680B). It is not necessary to register the application.

To add applying members to an active case in NYC, workers should use Worker Case update Function "Add New Clients to Suffix". The required fields for this screen are first name, last name, birthdate, sex, SSN (if known), and all six race/ethnic indicators. Once this is done, a new budget must be saved and the individual should be activated through undercare.

Evaluate the Clearance Report to determine if the individual being added is known to WMS.

Based on your evaluation, make one of the following entries in the CLIENT ID field on the new 3517 (TAD):

1. If the applicant is not known to WMS, workers must use the temporary CIN which is generated for all applying lines and which appears on the top part of the clearance report.

2. If the applicant is known to WMS and already has a CIN, enter the CIN as it appears on the Clearance Report.

E. <u>Finger Imaging</u>

Finger imaging <u>is not required</u> as part of the SNA Application Supplement process. However, adults previously not included in the FA case and who must now be included in SNA case must be finger imaged.

F. <u>Substance Abuse Screening</u>

There is no change to the requirement that all heads-of-household and adult applicants for TA be screened for substance abuse that makes them unable to work. Districts must follow the current screening and assessment requirements outlined in 01-ADM-10.

G. <u>Domestic Violence Screening</u>

There is no change to the requirements for districts to offer domestic violence screening

H. Forty-five Day Wait

SNA Supplement Applications filed before the end of the State sixty-month time limit <u>do not</u> have a forty-five day wait. The forty-five day wait is waived on the assumption that it could cause an emergency because of the disruption of benefits.

The forty-five day wait will apply to SNA applications made by able-bodied adults after the FA case has closed. SNA applications filed after the Family Assistance case closes must be made on the common application. The district, as with all other SNA applications, can determine if SNA benefits must be provided before the forty-fifth day to meet emergency needs.

If the district has sent a closing notice because the an able-bodied adult failed to report for the initial SNA Application Interview, and the able-bodied adult subsequently files for SNA before the FA closing date, the district must allow the adult to apply using the SNA Application Supplement and:

- If the applicant is able to comply with the eligibility requirements and the district is able to make a determination that the SNA application will be accepted before the end of the sixtieth month, the closing should be cancelled and the case re-categorized to SNA. The authorization from date should be the first day of the sixty-first month, <u>OR</u>
- If the application is filed so late that the adult cannot meet the requirements and the district cannot determine eligibility for SNA, the case closing must proceed. Once eligibility is determined and established, the FA case must be reactivated. After reactivation, the case type change, the new SNA budget, new authorization period, entry of state federal charge code 63 (or 64 for those on Indian reservations) can be processed on WMS. To insure that the Medicaid dates will properly extend, workers must use WMS transaction 06 (Recertification/Reauthorization). Districts will have the usual amount of time to make a decision on the SNA Application Supplement as on any other application. However, if eligible, those families who qualified to use the SNA Application Supplement must receive benefits back to first day of the sixty-first month. Additionally, a reactivation can be done up to thirty days after the closing. After the thirtieth day, full data entry would have to be done.

As described in 92-ADM 26, there is no forty-five day wait for Medicaid. Medicaid must be authorized as soon as eligibility is confirmed, effective the first of the month of application and for the three month retroactive period, if needed. When an individual has been determined eligible and expresses an immediate need for medical services, Medicaid must be authorized immediately.

I. Offer of a Job as an Available Resource

Local districts have long-standing authority under 18 NYCRR 351.2(e), 351.20(a), and 351.21 to require applicants and recipients to accept a bona fide job offer, which might be a resource that would eliminate or reduce need, as a condition of eligibility for the Family Assistance or Safety Net Assistance household. A bona fide job opportunity is an actual offer of a job by an employer that the particular adult is able to engage in, with all necessary supportive services available and in place.

- All job refusals that occur at initial eligibility determination, recertification, or as the result of a specific call-in for actual job opportunities are eligibility issues that result in the entire case being closed or denied.
- If, during the first five (5) days in which an applicant/recipient holds a job, he/she voluntarily quits or causes their own discharge, the action must be treated as an eligibility requirement and the case must be denied or closed. If the applicant/recipient voluntarily quits the job after the fifth day, the job quit is treated per normal job quit sanctions.
- Regardless of which staff (including employment) directs the recipient to a job opportunity, the key is that the employer makes an actual job offer that the recipient can perform. By applying this standard there is no ambiguity that this was an available resource and that failure to accept the job is a condition of eligibility under 351.2(e).
- The only offer of employment that would be excluded from this policy would be those that occurred from the direct participation in employment activities (work experience, on-the-job training, etc.). Job referrals that are made as part of the general job search requirement are also excluded from this policy.

• Districts are cautioned not to confuse an actual job opportunity with a job referral. Employment programs routinely make job referrals to employers when no definite job opportunity exists. A job referral only means that the employer is probably taking applications or doing interviews for possible future job openings. There is no definite resource in this situation. Job referrals are an issue of employment non-compliance under DOL Regulations 1300.11 and 1300.12 and must remain so. Districts must only close or deny the entire case when an applicant/recipient refuses to utilize what is clearly an available resource.

If an able-bodied adult refuses to accept an available job without good cause as part of the continuing eligibility process, the appropriate action would be to close the FA case. If a SNA application is pending it should be denied. CNS Case Closing Code P32 Close FA/Deny SNA – Refusal to take a job should be used for this action. In both instances, Medicaid must be continued. A separate determination for FS is required. Good cause reasons for refusing a job include:

- The job offer was not bona fide, was not made in good faith (the job did not exist, or was already taken or promised to someone else);
- The individual did not have the required skills to be able to engage in the job;
- The salary or wages offered by the employer were less than New York State minimum wage of \$5.15 a hour;
- A strike, lockout or other public or private industrial controversy was in progress at the place in which employment was offered;
- The job would be hazardous to the individual's life, health, or there was absence, if appropriate, of worker's compensation;
- Necessary and supportive services are unavailable;
- The job involves illegal activity or the conditions are otherwise contrary to law;
- The refusal is caused by circumstances beyond the participant's control such as, but not limited to, illness of the individual or illness of another household member or the presence of the individual required for jury duty, or court dates;
- Accepting a job would result in the net loss of cash income for the household and a supplemental grant is not issued pursuant to 18 NYCRR 352.7(m) to prevent a net loss of cash income;
- A personal or family emergency, of substantial nature, prevents the participant from being available to work and the participant has notified his/her worker with reasonable promptness;
- The individual may be excused from accepting a job offer if at the time of the offer appropriate, accessible and affordable childcare:
 - is not available or cannot be arranged during the hours the participant is required to work
 - does not meet the special needs of the child as identified in the case record
 - has been temporarily disrupted, making it necessary for the participant to remain at home with the child until child care is restored.

• is not within a distance that meets the district's definition of reasonable distance in their Consolidated Services Plan or Integrated County Plan.

Districts may only close cases when an able-bodied adult refuses a job offer that was made through the eligibility process (application, recertification, and specific call-in as part of on-going eligibility). Refusal of job offers made as the result of participation in employment activities, or made by districts' contracted employment activities providers in the course of providing employment activities and services are subject to employment non-compliance procedures (including conciliation) as set forth in DOL Regulations 1300.11 and 1300.12.

V. Systems Implications

A. Temporary Assistance

As a protection for local districts, selected cases that reach the State sixty-month time limit will be automatically converted to SNA. This conversion process is being done to ensure that cases that have reached the time limit will not be claimed as TANF-funded, thereby avoiding federal penalties. The conversion process will only change the case category; workers will still need to review these cases to insure that SNA requirements have been fulfilled. All cases that are converted will receive a system generated adequate notice on the change of category.

The conversion will result in the following changes:

- A change in case category from FA to either cash SNA (case type 16) or non-cash SNA (case type 17), depending upon the Employability Code of the adult.
- For cases changed to Case Type 16, the System will generate an "S" (Safety Net Cash/24 month exemption) Time Limit Exempt Indicator on Screen 3. For cases changed to Case Type 17, the System will generate a Safety Net Indicator of "C" (Cash Limit) on Screen 1 (TAD in NYC).
- A State/Federal Charge Code of 63 or 64 will be added to indicate MOE status for these cases.
- Budget Case Type, Version Number, Storage Date will be changed and recoupment balances will be recalculated, if present.

The following cases will be excluded from this conversion process:

- Family Assistance (FA) cases where all adults have a Time Limit Exemption Indicator "T" or "A" in the LMT EXM field on the individual's line on Screen 3. (NYC will have a "X" or "A" indicator in the time limit exemption field.
- Cases that are in Pending Status or are clocking down.
- Cases with invalid Authorization Dates (ending prior to, or starting after, the conversion).

Upstate districts and NYC will receive exception lists. After the case is converted, the worker must take action at the next case contact to restrict the shelter and the fuel/utilities in non-cash SNA, if they have not already been restricted. The worker must also require the adults in the case to sign the Repayment Agreement (DSS-4529) and Assignment of Future Earnings (DSS-4530). Refusal to sign these forms must result in the closing of the SNA case. The worker must also examine household composition and

determine if a child (and the child's parent) must apply, and explore other transition issues addressed in 01 ADM-3.

The first conversion is scheduled for November 17 for NYC and November 24 for upstate districts. Subsequent conversions are anticipated to be scheduled for the third weekend of the month. Complete details of the Conversion process will be explained in a "Dear WMS Coordinator" Letter.

The timing of the conversion means that cases reaching the 60-Month Time Limit on November 30 <u>must be scheduled to come in for a Safety Net Application Supplement Interview,</u> <u>interviewed and case action taken prior to the conversion date</u>. Once the conversion date is <u>reached, a SNA application supplement cannot be required</u>. Districts can still make an offer of a bona fide job to a FA case after the conversion date and to SNA cases that have been converted. If the offer is not accepted, the FA or SNA case can be closed for failure to accept the offer as an available resource.

Districts need to keep the date of the conversion in mind when scheduling able-bodied adults for a SNA application interview.

B. Medicaid Systems

The State sixty-month time limit and work requirements do not affect Medicaid eligibility. When the TA case is closed in upstate districts, CNS Medicaid Insert Reason Code 756. "We will continue Medical Assistance coverage unchanged for..." will be system generated for the 7 closing codes specified below. Consistent with current policy, WMS will generate Medicaid coverage for the transaction month and the following month.

Districts must extend coverage to allow for twelve months of coverage from the date of the last FA eligibility determination when case circumstances have not changed. If circumstances have changed, information must be requested to allow for a separate Medicaid determination.

New York City systems instructions will be provided separately.

VI. Additional Information

A. <u>Family Assistance Closing Codes – Ineligible for Safety Net Assistance</u>

CNS and WMS will support single codes for both Family Assistance closings due to the State sixty-month time limit and a denial of Safety Net Assistance. There are different codes depending on the reason for the Safety Net Assistance denial reason.

Please note that only one of the following reason codes is used to close the FA case prior to the end of the 60th month and deny the SNA application. The reason in that instance is refusal to accept a job (code P32). That is the only reason that should have an effective date of ten days after transaction date.

For all of the other codes in this section, the closing should be the last day of the sixtieth month, but can be no earlier than 10 days before the last day of the sixtieth month. The notice should be provided as soon as the failure to comply with the application process/requirements occurs, but no earlier than two months before the effective date of the action.

Workers should use the correct reason code from the following list to generate a CNS notice to clients. In the event that a manual notice is used, the district must use the State mandated manual notice or the approved local equivalent. For example, if the adult failed to comply with the employment assessment requirement and a manual notice is being prepared, the worker must include the reason language associated with CNS code P31 below. The appropriate case level closing code must be used. Correct coding is important to monitor time limit related administrative fair hearing activity.

Medicaid will continue unchanged for all cases for the codes listed in this section. Notices will include language to that effect.

1. CNS Code G30 - Close FA – No SNA Application Filed

Use this code when the able-bodied adult (or all able-bodied adults in the case/suffix) fails to keep the appointment to apply for SNA and does not reschedule. Use this code also when the adult(s) does keep the appointment but refuses to apply. (*In NYC this code, at least for the cases reaching the time limit on November 30, 2001, will be system generated using a tape sub-script sent from EVR to WMS. Workers will not have to input this closing code in WMS undercare).*

Reason Text:

Your Family Assistance is ending because your family includes a member who will have had 60 months of cash assistance as of (Date). The Welfare Reform Act of 1997 limits eligibility for cash assistance to 60 months in a lifetime unless an exemption exists.

You were required to apply for Safety Net Assistance to see if you and your family are eligible for assistance in that program. You did not apply for Safety Net Assistance.

If you want to receive Public Assistance, you must file an application. You may apply at any time. However, if you file an application BEFORE the effective date of this notice, and you are eligible, you will not have to wait 45 days for your benefits to begin.

This decision is based on Social Services Law 158 and 18 NYCRR 350.4.

The following information will help you to understand some of the reasons why a family may be exempt from the 60-month cash limit and can remain in Family Assistance.

EXEMPTION RULES FOR FAMILY ASSISTANCE: A family must remain in Family Assistance if the adult family member is unable to work because of one of the following reasons:

- 1. A physical or mental impairment that is expected to last more than 6 months.
- 2. A physical or mental impairment that is the result of domestic violence and is expected to last <u>three or more</u> months.
- 3. A physical or mental impairment of a child that is the result of domestic violence that requires the adult family member to remain in the home to care for the child.
- 4. A physical or mental impairment of another household member that requires the adult family member to remain in the home to provide care.

If you think you meet any of these conditions, you should tell your worker. If you have an impairment that prevents you from working you will have to provide medical documentation to verify the impairment as required by the regulations of the Department of Labor. You may provide any documentation that you have to your worker; however, you may also be required to be evaluated by the district's health care practitioner.

If you or your children are victims of domestic violence and have physical or mental impairments as described in 2 or 3 above that were directly caused by domestic violence that prevent you from working or participating in a training activity, you can contact your social services agency domestic violence liaison to discuss your situation. Anything you tell the liaison about your situation will be kept confidential, with the exception of child abuse and neglect. Disclosure of impairments that are the result of domestic violence is purely voluntary on your part. You would only need to tell us that your disability was caused by domestic violence if you needed a time limit exemption for a short-term disability lasting between three and six months. If you do not wish to disclose that your impairment was the result of domestic violence, you can still qualify for a time limit exemption if you have an impairment that is expected to last more than six months that prevents you from working or there is another household member with a physical or mental impairment that requires you to remain in the home to provide care when you reach the sixty month limit.

2. CNS Code G31 - Close FA – Deny SNA Application (Separate SNA Notice Required)

Use this code <u>ONLY</u> when the case is closing due to time limits and the other combined codes provided in this section do not correctly explain the reason for SNA ineligibility. A manual notice to explain the reason for SNA ineligibility will be required. For example, a case reaches the State sixty-month time limit and the income of a new applying household member causes financial ineligibility.

Notice Text:

Your Family Assistance is ending because your family includes a member who will have had 60 months of cash assistance as of (Date). The Welfare Reform Act of 1997 limits eligibility for cash assistance to 60 months in a lifetime unless an exemption exists.

You were required to apply for Safety Net Assistance because you received the maximum number of months of Family Assistance. You were required to apply for Safety Net Assistance to see if you and your family are eligible for assistance in that program.

This decision is based on Social Services Law 158 and 18 NYCRR 350.4.

You will receive a separate notice to tell you why you cannot get Safety Net Assistance.

The following information will help you to understand some of the reasons why a family, if eligible, may be exempt from the 60-month cash limit and can remain in Family Assistance.

EXEMPTION RULES FOR FAMILY ASSISTANCE: A family must remain in Family Assistance if the adult family member is unable to work because of one of the following reasons:

- 1. A physical or mental impairment that is expected to last more than 6 months.
- 2. A physical or mental impairment that is the result of domestic violence and is expected to last <u>three or more</u> months.

- 3. A physical or mental impairment of a child that is the result of domestic violence that requires the adult family member to remain in the home to care for the child.
- 4. A physical or mental impairment of another household member that requires the adult family member to remain in the home to provide care.

If you think you meet any of these conditions, you should tell your worker. If you have an impairment that prevents you from working you will have to provide medical documentation to verify the impairment as required by the regulations of the Department of Labor. You may provide any documentation that you have to your worker; however, you may also be required to be evaluated by the district's health care practitioner.

If you or your children are victims of domestic violence and have physical or mental impairments as described in 2 or 3 above that were directly caused by domestic violence that prevent you from working or participating in a training activity, you can contact your social services agency domestic violence liaison to discuss your situation. Anything you tell the liaison about your situation will be kept confidential, with the exception of child abuse and neglect. Disclosure of impairments that are the result of domestic violence is purely voluntary on your part. You would only need to tell us that your disability was caused by domestic violence if you needed a time limit exemption for a short-term disability lasting between three and six months. If you do not wish to disclose that your impairment was the result of domestic violence, you can still qualify for a time limit exemption if you have an impairment that is expected to last more than six months that prevents you from working or there is another household member with a physical or mental impairment that requires you to remain in the home to provide care when you reach the sixty month limit.

3. CNS Code P30 - End FA/Deny SNA – Job Search

Use this code when the able-bodied adult(s) has applied for SNA but has failed to comply with the applicant job search requirements.

Notice Text:

This is to tell you that your public assistance will be DISCONTINUED. You will no longer get public assistance beginning _(date)_____.

Your Family Assistance is ending because your family includes a member who will have had 60 months of cash assistance as of (... beginning month minus 1 month). The Welfare Reform Act of 1997 limits eligibility for cash assistance to 60 months in a lifetime unless an exemption exists.

You were required to apply for Safety Net Assistance to see if you and your family are eligible for assistance in that program.

Your application for Safety Net Assistance has been DENIED.

This is because applicants for public assistance who are not exempt from participation in work activities must actively look for work and show that they are doing so. This requirement includes, but is not limited to, an ongoing search for work and providing proof of job search when requested, keeping or completing a job search appointment or assignment, attending a job interview, and accepting a job when one is offered. This is a condition of eligibility for the entire household. Our records show that (Name) has failed to look for work and to provide the

necessary proof. Since (Name) has not done this, the entire public assistance household is ineligible for public assistance. This decision is based on Regulation 12 NYCRR 1300.9(e), 18 NYCRR 350.4 and 369.4(d).

The following information will help you to understand some of the reasons why a family may be exempt from the 60-month cash limit and can remain in Family Assistance.

EXEMPTION RULES FOR FAMILY ASSISTANCE: A family must remain in Family Assistance if the adult family member is unable to work because of one of the following reasons:

- 1. A physical or mental impairment that is expected to last more than 6 months.
- 2. A physical or mental impairment that is the result of domestic violence and is expected to last <u>three or more</u> months.
- 3. A physical or mental impairment of a child that is the result of domestic violence that requires the adult family member to remain in the home to care for the child.
- 4. A physical or mental impairment of another household member that requires the adult family member to remain in the home to provide care.

If you think you meet any of these conditions, you should tell your worker. If you have an impairment that prevents you from working you will have to provide medical documentation to verify the impairment as required by the regulations of the Department of Labor. You may provide any documentation that you have to your worker; however, you may also be required to be evaluated by the district's health care practitioner.

If you or your children are victims of domestic violence and have physical or mental impairments as described in 2 or 3 above that were directly caused by domestic violence that prevent you from working or participating in a training activity, you can contact your social services agency domestic violence liaison to discuss your situation. Anything you tell the liaison about your situation will be kept confidential, with the exception of child abuse and neglect. Disclosure of impairments that are the result of domestic violence is purely voluntary on your part. You would only need to tell us that your disability was caused by domestic violence if you needed a time limit exemption for a short-term disability lasting between three and six months. If you do not wish to disclose that your impairment was the result of domestic violence, you can still qualify for a time limit exemption if you have an impairment that is expected to last more than six months that prevents you from working or there is another household member with a physical or mental impairment that requires you to remain in the home to provide care when you reach the sixty month limit.

4. CNS Code P31 - Close FA/Deny SNA – Employment Assessment

Use this code when the able-bodied adult(s) has filed the SNA application but refuses to cooperate with the employment assessment requirements.

Notice Text:

This is to tell you that your public assistance will be DISCONTINUED. You will no longer get public assistance beginning _(date)_____

Your Family Assistance is ending because your family includes a member who will have had 60 months of cash assistance as of (Date). The Welfare Reform Act of 1997 limits eligibility for cash assistance to 60 months in a lifetime unless an exemption exists.

You were required to apply for Safety Net Assistance to see if you and your family are eligible for assistance in that program.

Your application for Safety Net Assistance has been DENIED.

This is because you did not keep an appointment to complete an employment assessment on (Date). We told you about this appointment ahead of time.

We must review your work abilities and other factors so we can decide what steps you must take to become employed. We have decided that without a good reason you failed to or refused to comply with the requirement to keep an appointment to complete an employment assessment. This decision is based on Regulation 12 NYCRR 1300.6(a), 18 NYCRR 350.4 and 369.4(d).

The following information will help you to understand some of the reasons why a family may be exempt from the 60-month cash limit and can remain in Family Assistance.

EXEMPTION RULES FOR FAMILY ASSISTANCE: A family must remain in Family Assistance if the adult family member is unable to work because of one of the following reasons:

- 1. A physical or mental impairment that is expected to last more than 6 months.
- 2. A physical or mental impairment that is the result of domestic violence and is expected to last <u>three or more</u> months.
- 3. A physical or mental impairment of a child that is the result of domestic violence that requires the adult family member to remain in the home to care for the child.
- 4. A physical or mental impairment of another household member that requires the adult family member to remain in the home to provide care.

If you think you meet any of these conditions, you should tell your worker. If you have an impairment that prevents you from working you will have to provide medical documentation to verify the impairment as required by the regulations of the Department of Labor. You may provide any documentation that you have to your worker; however, you may also be required to be evaluated by the district's health care practitioner.

5. CNS Code P32 - Close FA/Deny SNA – Refusal to Take a Job

Use this code when the able-bodied adult(s) will not take a job that the eligibility worker referred him/her to and which the adult can do, and only when a SNA application has already been filed. (If a SNA application has not been filed, use the N13-"Failure to Use/Apply for Benefit/Resource".)

Of these new codes, this is the only one that may have an effective date prior to the end of the sixtieth month. This is because it is also a reason to close the FA case.

Notice Text: This is to tell you that your public assistance will be DISCONTINUED. You will no longer get public assistance beginning (T + 10 days date).

Your Family Assistance is ending because available benefits and/or resources must be used so the household will not need public assistance or will need less public assistance. You were offered a job that you can do at (employer name). You refused to accept the job. You did not tell us a good reason why you did not take the job.

You cannot get public assistance unless you are willing to accept a job that you can do.

Your application for Safety Net Assistance has been DENIED for the same reason.

This decision is based on Department Regulation 351.2.

<u>6. CNS Code G32 - FA Closing – Recipient Non-Compliant Safety Net</u> Repayment/Assignment of Future Earnings

Use this code when the adult(s) (able-bodied or not) who is required to sign the repayment agreement/assignment of future earnings as a condition of eligibility for SNA but refuses to do so.

Notice Text:

This is to tell you that your public assistance will be DISCONTINUED. You will no longer get public assistance beginning _(date)_____

Your family cannot get public assistance in the Safety Net Assistance category because a requirement of the Safety Net Assistance category is that the head of household must sign an agreement to repay public assistance overpayments and an assignment of future earnings to secure the repayment of any overpayments.

We asked you to sign both a repayment agreement and an assignment of future earnings. We explained that these forms would allow us to recover only public assistance that was overpaid. You would not sign the repayment agreement or the assignment of future earnings or both.

Your Family Assistance is ending because your family includes a member who will have had 60 months of cash assistance as of (Date). The Welfare Reform Act of 1997 limits eligibility for cash assistance to 60 months in a lifetime unless an exemption exists.

This decision is based on Department Regulations 369.4(d) and 370.2(c)(11).

The following information will help you to understand some of the reasons why a family may be exempt from the 60-month cash limit and can remain in Family Assistance.

EXEMPTION RULES FOR FAMILY ASSISTANCE: A family must remain in Family Assistance if the adult family member is unable to work because of one of the following reasons:

- 1. A physical or mental impairment that is expected to last more than 6 months.
- 2. A physical or mental impairment that is the result of domestic violence and is expected to last three or more months.

- 3. A physical or mental impairment of a child that is the result of domestic violence that requires the adult family member to remain in the home to care for the child.
- 4. A physical or mental impairment of another household member that requires the adult family member to remain in the home to provide care.

If you think you meet any of these conditions, you should tell your worker. If you have an impairment that prevents you from working you will have to provide medical documentation to verify the impairment as required by the regulations of the Department of Labor. You may provide any documentation that you have to your worker; however, you may also be required to be evaluated by the district's health care practitioner.

If you or your children are victims of domestic violence and have physical or mental impairments as described in 2 or 3 above that were directly caused by domestic violence that prevent you from working or participating in a training activity, you can contact your social services agency domestic violence liaison to discuss your situation. Anything you tell the liaison about your situation will be kept confidential, with the exception of child abuse and neglect. Disclosure of impairments that are the result of domestic violence is purely voluntary on your part. You would only need to tell us that your disability was caused by domestic violence if you needed a time limit exemption for a short-term disability lasting between three and six months. If you do not wish to disclose that your impairment was the result of domestic violence, you can still qualify for a time limit exemption if you have an impairment that is expected to last more than six months that prevents you from working or there is another household member with a physical or mental impairment that requires you to remain in the home to provide care when you reach the sixty month limit.

7. CNS Code G33 - FA Closing – Recipient Refuses to Apply for their Child

Use this code when the adult (able-bodied or not) will not agree to include his/her child(ren) who lives in the household and who he/she previously chose to exclude from the application, such as a child on whose behalf an absent parent is paying support, or a child whose second parent is also in the household and does not want to apply.

Notice Text:

This is to tell you that your public assistance will be DISCONTINUED. You will no longer get public assistance beginning _(date)_____.

Your family cannot get public assistance in the Safety Net Assistance category because you will not apply for your child or children. At least one of your children who lives with you is under age 18 or, is age 18 and a full time student attending high school or a similar secondary school. You must apply for your child (ren) unless the child or children receive Supplemental Security Income (SSI).

Adults with a dependent child living with them cannot get Safety Net Assistance. However, if the family applies and is otherwise eligible, the family can get Safety Net Assistance.

This decision is based on Department Regulation 369.4(d) and 370.2(c)(6).

Your Family Assistance is ending because your family includes a member who will have had 60 months of cash assistance as of (Date). The Welfare Reform Act of 1997 limits eligibility for cash assistance to 60 months in a lifetime unless an exemption exists.

The following information will help you to understand some of the reasons why a family may be exempt from the 60-month cash limit and can remain in Family Assistance.

EXEMPTION RULES FOR FAMILY ASSISTANCE: A family must remain in Family Assistance if the adult family member is unable to work because of one of the following reasons:

- 1. A physical or mental impairment that is expected to last more than 6 months.
- 2. A physical or mental impairment that is the result of domestic violence and is expected to last <u>three or more</u> months.
- 3. A physical or mental impairment of a child that is the result of domestic violence that requires the adult family member to remain in the home to care for the child.
- 4. A physical or mental impairment of another household member that requires the adult family member to remain in the home to provide care.

If you think you meet any of these conditions, you should tell your worker. If you have an impairment that prevents you from working you will have to provide medical documentation to verify the impairment as required by the regulations of the Department of Labor. You may provide any documentation that you have to your worker; however, you may also be required to be evaluated by the district's health care practitioner.

If you or your children are victims of domestic violence **and have physical or mental impairments as described in 2 or 3 above that were directly caused by domestic violence that prevent you from working or participating in a training activity, you can contact your social services agency domestic violence liaison to discuss your situation.** Anything you tell the liaison about your situation will be kept confidential, with the exception of child abuse and neglect. Disclosure of impairments that are the result of domestic violence is purely voluntary on your part. You would only need to tell us that your disability was caused by domestic violence if you needed a time limit exemption for a short-term disability lasting between three and six months. If you do not wish to disclose that your impairment was the result of domestic violence, you can still qualify for a time limit exemption if you have an impairment that is expected to last more than six months that prevents you from working or there is another household member with a physical or mental impairment that requires you to remain in the home to provide care when you reach the sixty month limit.

B. <u>Category Change Language</u>

If the worker is only changing the case category, the case level reason code B50 will be used.

If the worker is doing more than just changing the case category, the appropriate case level reason code for the change should be used; for example, the worker would use B20 when authorizing a new budget in addition to the case category change. A systems comparison from the case type previously entered on screen one of WMS to the current case type will recognize when a case type change is also happening even if B50 is not used.

Because there are a number of reasons why a case category change may happen, WMS will then look further at case coding to determine why the category change is happening.

When a case is going from Family Assistance (Case Type 11) or Safety Net Assistance (SNA) (Case Type 12), to either SNA Cash (Case Type 16) non-Cash SNA (Case Type 17), WMS will recognize that the reason for the category change is due to the family reaching the end of the State sixty-month limit when State/federal charge code 63 is present. Since State/federal charge code 63 should be entered on the line of each case member that would be TANF eligible except that the 60-month time limit has been reached, WMS will drive CNS language describing use of the maximum months as the reason for the case category change.

1. From FA or non-cash SNA (FP) to Cash SNA:

Notice Text:

We are changing your category of assistance to Safety net Assistance.

Families with at least one adult who has received sixty-months of assistance through one or some combination of Family Assistance (FA), Child Assistance Program (CAP), cash Safety Net Assistance (SNA), or non-cash Safety Net Assistance federal participating (SNA/FP) must be evaluated for Safety Net Assistance federal non-participating.

There is at least one adult in the case who has received sixty months of assistance through some combination of the assistance programs listed above. The adult does not qualify for an exemption from the time limit.

This decision is based on regulation 18 NYCRR 369.4(d)(5).

The following information will help you to understand some of the reasons why a family may be exempt from the 60-month cash limit and can remain in Family Assistance.

EXEMPTION RULES FOR FAMILY ASSISTANCE: A family can remain in Family Assistance if the adult family member is unable to work because of one of the following reasons:

- 1. A physical or mental impairment that is expected to last more than 6 months.
- 2. A physical or mental impairment that is the result of domestic violence and is expected to last three or more months.
- 3. A physical or mental impairment of a child that is the result of domestic violence that requires the adult family member to remain in the home to care for the child.
- 4. A physical or mental impairment of another household member that requires the adult family member to remain in the home to provide care for the other household member.

If the adult becomes unable to work for one of the above reasons, the family may return to FA or non-cash SNA (FP). Let your worker know about that change in the adult's ability to work. Also let your worker know if the adult begins receiving Supplemental Security Income (SSI) or State Supplemental Payments (SSP) because he or she is aged, blind or disabled.

When an adult thinks he or she would be eligible for an exemption due to impairment caused by domestic violence, the adult can contact the social services agency domestic violence liaison to discuss the situation in strictest confidence. If the adult does not wish to disclose that the impairment was the result of domestic violence, the adult may still qualify for one of the other exemptions.

This decision is based on regulation 18 NYCRR 369.4(d)(5).

2. From FA or non-cash SNA (FP) to non-Cash SNA:

We are changing your category of assistance to non-cash Safety net Assistance.

Families with at least one adult who has received sixty-months of assistance through one or some combination of Family Assistance (FA), Child Assistance Program (CAP), cash Safety Net Assistance (SNA), or non-cash Safety Net Assistance federal participating (SNA/FP) must be evaluated for Safety Net Assistance federal non-participating.

In this category, most of the temporary assistance benefit is paid directly to service provides such as your landlord, utility company, and heating fuel dealer.

There is at least one adult in the case who has received sixty months of assistance through some combination of the assistance programs listed above. The adult does not qualify for an exemption from the time limit.

This decision is based on regulation 18 NYCRR 369.4(d)(5).

The following information will help you to understand some of the reasons why a family may be exempt from the 60-month cash limit and can remain in Family Assistance.

EXEMPTION RULES FOR FAMILY ASSISTANCE: A family can remain in Family Assistance if the adult family member is unable to work because of one of the following reasons:

- 1. A physical or mental impairment that is expected to last more than 6 months.
- 2. A physical or mental impairment that is the result of domestic violence and is expected to last <u>three or more</u> months.
- 3. A physical or mental impairment of a child that is the result of domestic violence that requires the adult family member to remain in the home to care for the child.
- 4. A physical or mental impairment of another household member that requires the adult family member to remain in the home to provide care for the other household member.

If the adult becomes unable to work for one of the above reasons, the family may return to FA or non-cash SNA (FP). Let your worker know about that change in the adult's ability to work. Also let your worker know if the adult begins receiving Supplemental Security Income (SSI) or State Supplemental Payments (SSP) because he or she is aged, blind or disabled.

When an adult thinks he or she would be eligible for an exemption due to impairment caused by domestic violence, the adult can contact the social services agency domestic violence liaison to discuss the situation in strictest confidence. If the adult does not wish to disclose that the impairment was the result of domestic violence, the adult may still qualify for one of the other exemptions.

EXEMPTION RULE FOR CASH SAFETY NET ASSISTANCE: If you do not meet one of the exemption reasons above, you may qualify for cash safety Net Assistance if the head of household is HIV positive or exempt from employment requirements for a reason other than alcohol or substance abuse.

This decision is based on regulation 18 NYCRR 369.4(d)(5).

VI. Effective Date

The provisions of this directive are effective September 17, 2001.

Issued By Name: Patricia A. Stevens Title: Deputy Commissioner Division/Office: Division of Temporary Assistance