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NEW YORK STATE
OFFICE OF TEMPORARY AND DISABILITY ASSISTANCE
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Informational Letter

Section 1

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| Transmittal: | 02 INF 10 |
| To: | Local District Commissioners |
| Issuing Division/Office: | Division of Temporary Assistance |
| Date: | March 29, 2002 |
| Subject: | Revision to the Periodic Reporting Process using a Systems-Generated Report (LDSS-4310) and Revisions to the Printed Follow-Up to the Periodic Report (LDSS-4310A and LDSS-4310A NYC) |
| Suggested Distribution: | Temporary Assistance Staff Food Stamp Benefits Staff CAP Staff, TOP Coordinators Medicaid Directors Employment Coordinators, WMS Coordinators Staff Development Coordinators |
| Contact Person(s): | Forms Questions: Bob Gullie 1-800-343-8859 Extension 4-6055 Program Questions: Eastern Region/Food Stamp Policy – (518) 473-1469 Central Region/Public Assistance Policy – (518) 474-9344 Western Region/Heap Policy – (518) 473-0332 Metro Region – (212) 383-1658 WMS Questions: (518) 474-8749 |
| Attachments: | Attachment - I - Sample of Systems-Generated LDSS-4310: “Periodic Report” (Statewide) Attachment - II - Sample of Systems-Generated LDSS-4310-S: “Periodic Report” (Statewide) (Spanish) Attachment – III – LDSS-4310A: “Follow-Up to the Periodic Report” (3/02) (Upstate) Attachment – IV – LDSS-4310A-S: “Follow-Up to the Periodic Report” (3/02) (Upstate) (Spanish) Attachment – V – LDSS-4310A NYC: “Follow-Up to the Periodic Report” (3/02) (New York City) Attachment – VI – LDSS-4310A-S NYC: “Follow-Up to the Periodic Report” (3/02) (New York City) (Spanish) |
| Attachments Available On – Line: | <input checked="" type="checkbox"/> |

Filing References

| Previous ADMs/INFs | Releases Cancelled | Dept. Regs. | Soc. Serv. Law & Other Legal Ref. | Manual Ref. | Misc. Ref. |
|---|--------------------|------------------------------|-----------------------------------|---|--------------------------------------|
| 01 ADM-14 01 ADM-9 93 ADM-9 99 INF-12 95 INF-51 94 INF-47 94 INF-13 | 99 INF - 12 | 387.17 351.24 366.4(g) | | PASB: V-E-4 FSSB: XIII-A-5 MARG:p.8.3 | 92 LCM – 175; GIS 93 ES/DC003; |

Section 2

I. Purpose

The purpose of this release is to introduce the revised process and mandated forms used for the Periodic Reporting Process, formerly known as the Quarterly Reporting Process.

II. Background

The former quarterly report was developed in place of monthly reporting and served to enforce the quarterly reporting rules. Now that Quarterly Reporting has been replaced by six-month reporting rules for food stamps (see 01-ADM-9), the report has been renamed to more accurately reflect the periodic nature of its use. This new format was designed by an advisory group of districts under the Empire State Payment Rate Initiative Team (ESPRIT).

The ESPRIT Team designed the periodic report to be easier for clients and workers to use. Section 1 of the report requests the household to list all income information, and proof of all income for the identified report month. Section 2 allows the household to respond “Yes” or “No” to the question: “Have there been any other changes (read boxes below) since your last Report, or do you expect any changes?” and follows with boxes to check specific change items along with a narrative space to describe the change.

The new periodic report will be in full page, laser-printed format instead of the impact data mailer that sometimes produced unclear copies. Initially, the new periodic report will contain an informational paragraph to introduce the revised form to recipients. CNS language is being modified to reflect the changes in terminology and content of the report and the follow-up report.

III. Program Implications

Food Stamps:

Most food stamp households with earnings are subject to six-month reporting rules, as specified in 01-ADM 09. Households that are subject to six-month reporting rules and are assigned a certification period of seven full months or more, must complete a periodic report between recertifications. These typically would be households that were assigned certification periods of seven full months or greater because they had no earnings at case opening or recertification. With the exception of Monroe and Rockland Counties, all districts must assign households with

earnings certification periods of six months or less, unless they receive written approval from OTDA to assign longer certification periods.

Temporary Assistance:

There has been no change in Temporary Assistance (TA) procedures regarding what had previously been called the Quarterly Reporting system and is now called Periodic Reporting. The only change for TA is that the form that will be used has been revised and simplified (including the name change from quarterly to periodic).

However, for TA, only 20 of the 58 districts Statewide and Child Assistance Program (CAP) districts are subject to the Periodic (Quarterly) Reporting Process. These districts must continue to adhere to the guidelines outlined in 18 NYCRR 351.24 for TA and in 18 NYCRR 366.4 (g) for CAP. TA procedures for those districts that currently have a waiver to the Quarterly Reporting regulations at 18 NYCRR 351.24 will not be impacted by this change.

IV. Distribution of Periodic Reporting Forms

A. LDSS-4310: “Periodic Report” (Statewide) LDSS-4310-S: “Periodic Report” (Spanish) (Statewide)

These system-generated 3/02 versions of the Periodic Reports will be used for the first time Upstate in the March 2002 production run and, it is anticipated, for NYC in April 2002.

In those limited instances where a local district would need a manual English or Spanish Periodic Report, the respective follow-up forms (LDSS-4310A, LDSS-4310A-S, LDSS-4310A NYC or LDSS-4310A-S NYC) must be used.

B. LDSS-4310A: “Follow-Up To The Periodic Report” (Upstate), LDSS-4310A NYC: “Follow-Up To The Periodic Report” (New York City) and LDSS-4310A-S NYC: “Follow-Up To The Periodic Report” (New York City) (Spanish)

The vendor-printed 3/02 versions of the Follow-Up to the Periodic Report (LDSS-4310A, LDSS-4310A NYC and LDSS-4310A-S NYC) are expected to be delivered to the Upstate (Albany) and the NYC/HRA warehouses at the end of April 2002. Distribution of the Upstate form (LDSS-4310A) to the local districts will begin upon receipt of the forms in Albany.

Your district will automatically receive supplies of the Follow-up to the Periodic Report forms based on previous ordering practices. The existing 3/98 versions of the LDSS-4310A, LDSS-4310A NYC and LDSS-4310A-S NYC are made obsolete by the new versions, and all existing copies of the old versions must be destroyed once shipments of the new forms have been received.

C. LDSS-4310A-S: “Follow-Up To The Periodic Report” (Upstate) (Spanish)

The Spanish Upstate version of the LDSS-4310A-S is not printed, but a clear, 3/02 master copy will be available to those local districts that may need to photocopy it.

V. **Additional Information**

Details of FS Periodic Reporting are still being worked out with NYC and they will begin using this form at a future date.

Forms Requests

Future Requests for 3/02 versions of the LDSS-4310A (Upstate), the Spanish master copy for LDSS-4310A-S (Upstate), the LDSS-4310A NYC (New York City) and the Spanish printed LDSS-4310A-S NYC (New York City) should be submitted on Form 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

Questions concerning ordering forms should be directed to Document Services at 1-800-343-8859 ext. 2-0164.

Issued By

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Title: Deputy Commissioner

Division/Office: Division of Temporary Assistance