

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

Informational Letter

Section 1

Transmittal:	02 INF 37				
To:	Local District Commissioners				
Issuing Division/Office:	Division of Temporary Assistance (TA)				
Date:	November 8, 2002				
Subject:	Temporary Assistance Periodic Reporting Regulation Filing				
Suggested	Temporary Assistance Directors				
Distribution:	Medical Assistance Directors				
	Food Stamps Directors				
	CAP Coordinators				
	Staff Development Coordinators				
Contact Person(s):	TA Questions: Central Team at 1-800-343-8859, extension 4-9344				
Attachments:	None				
Attachment Available On – Line:					

Filing References

Previous ADMs/INFs	Releases Cancelled	Dept. Regs.	Soc. Serv. Law & Other Legal Ref.	Manual Ref.	Misc. Ref.
01 ADM-14		351.24			GIS 01 TA/DCO31

Section 2

I. Purpose

This is to advise districts that amendments to 18 NYCRR 351.24 were filed on September 30, 2002. These amendments officially rename "quarterly reporting" as "periodic reporting" and provide that districts may choose not to require TA clients to submit periodic (quarterly) reports.

II. Background

Prior to the regulatory amendment noted above, districts were required to request a waiver from this Office to 18 NYCRR 351.24 if the district did not want to adhere to the quarterly reporting requirements. Districts were informed of this process in 01 ADM-14. A total of 38 districts have requested and received waiver approval to the requirements of 18 NYCRR 351.24.

For food stamp (FS) program purposes, most households are now subject to six-month reporting rules. As described in 02 ADM-7, certain households that are subject to food stamp six-month reporting rules and are certified for seven full months or more are required to return a completed periodic report or a change report form in their sixth month. TA/FS six-month reporters with earned income budgeted are sent a periodic mailer (LDSS-4310), which they must complete and return. Districts must process changes reported in the returned mailers, and must send timely notice of intent to terminate food stamp benefits of households who fail to complete the required mailer. For a TA/FS household without earned income and certified for 12 months, the six-month reporting requirement is fulfilled when the household completes and returns their TA six-month eligibility questionnaire.

III. Program Implications

There is no action required for those districts that previously requested and received waivers from quarterly reporting. The filing of this regulation simply codifies that districts must request and receive Office approval prior to eliminating the periodic reporting requirements. Districts that were originally given authority to waive the quarterly reporting requirements of 351.24 are still considered to have Office approval under this revised regulation.

Any of the 20 districts that have not already received Office approval to eliminate periodic reporting for TA must follow the guidelines originally outlined for waiver requests in GIS 01 TA/DC031 and 01 ADM 14 if they decide at some future date that they would also like to eliminate TA periodic reporting. These requests are no longer "waiver" requests since the revised regulation now provides this Office the authority to approve district requests to eliminate periodic reporting.

Written requests for Office approval to eliminate TA periodic reporting requirements may be submitted to me:

Patricia A. Stevens, Deputy Commissioner Division of Temporary Assistance Office of Temporary and Disability Assistance 40 North Pearl Street Albany, 12243-0001

Requests to eliminate periodic reporting may also be faxed to me at (518) 474-5281.

Districts should also be aware that for administrative reasons, Office approval providing district's authority to eliminate TA periodic reporting requirements will only be granted once per year. The next earliest date that Office approval would be considered is **January 1**, **2003**. Systems constraints may influence the date upon which periodic reporting can be eliminated.

Issued By

Name: Patricia A. Stevens Title: Deputy Commissioner

Division/Office: Division of Temporary Assistance