

George E. Pataki Governor

NEW YORK STATE OFFICE OF TEMPORARY AND DISABILITY ASSISTANCE **40 NORTH PEARL STREET** ALBANY, NY 12243-0001

**Robert Doar** Acting Commissioner

# **Informational Letter**

Section 1						
Transmittal:	04-INF-03					
To:	Local District Commissioners					
Issuing Division/Office:	Division of Temporary Assistance					
Date:	February 6, 2004					
Subject:	Revision of the LDSS-4403: "Determination of Eligibility For Emergency					
	Assistance to Families (EAF)" (7/03 Revision)					
Suggested	Temporary Assistance Directors					
<b>Distribution:</b>	Food Stamp Benefits Directors					
	HEAP Coordinators					
	Medicaid Directors					
	Employment Coordinators					
	CAP Coordinators					
	TOP Coordinators					
	WMS Coordinators					
	Staff Development Coordinators					
Contact	Forms Questions:					
<b>Person(s):</b>	Bob Gullie 1-800-343-8859 Extension 6-1095Program Questions:					
	Central Region - (518) 474-9344					
Attachments:	LDSS-4403:"Determination of Eligibility For Emergency Assistance to Families					
	(EAF)"					
Attachment Avail Line:	able On –					

## **Filing References**

Previous ADMs/INFs	Releases Cancelled	Dept. Regs.	Soc. Serv. Law & Other Legal Ref.	Manual Ref.	Misc. Ref.
03 ADM-11 00 INF-21 95 INF-4		369.1 372.2(a)(4) 372.4(d)		TASB 2.C	GIS02 TA/DC 030 GIS03 TA/DC 005

# Section 2

#### I. Purpose

The purpose of this release is to introduce the mandated revised LDSS-4403: "Determination Of Eligibility For Emergency Assistance To Families (EAF)"(Rev. 7/03).

The primary reason for the revision is changes to Part 372 of the Office Regulations and to the TANF State Plan regarding eligibility criteria for Emergency Assistance to Needy Families.

### **II. Background**

EAF is a federally participating program designed to deal with crisis situations threatening a family with children under age 18, or age 18 and attending full-time secondary school or the equivalent level and to meet needs resulting from a sudden occurrence or a set of circumstances demanding immediate attention. The LDSS-4403 is designed to aid workers in correctly using the EAF program at case acceptance.

#### **III. Program Implications**

The revisions to this form are:

- 1. The Revision Date was changed to 7/03.
- 2. Line 1 in the "EAF Eligibility Determination Checklist" section was changed to read:

"Is there at least one child under the age of 18, or age 18 and attending full-time secondary school who is currently residing with a caretaker who is related by blood, marriage or adoption?"

3. Line 3 in the "EAF Eligibility Determination Checklist" section was changed to read:

"Does the family have resources to meet their needs or available income at or above 200% of the most recently published federal poverty guidelines, as transmitted by State OTDA, on the date of application for that family size?"

- 4. The line 4 question about "mismanagement of the TA Grant" was deleted and questions 5 and 6 were renumbered to 4 and 5.
- 5. A new instructional sentence for numbers 3-5 was added directly below question 5 that reads:

"If you check "No" to all of the answers to Numbers 3-5 above, proceed"

6. Two additional questions with instructions were added. These new questions and instructions appear as follows:

6. Is the necessary payment a diversion payment?		□NO
If you check "Yes" to Number 6, Stop - EAF eligible		
If you check "No" to Number 6, Go to Number 7.		
7. Is the emergency the result of a sudden occurrence or situation, unforeseen and beyond the individual's control?		□NO
If you check "Yes" to Number 7, Stop - EAF eligible		
If you check "No" to Number 7, Ineligible for EAF		

7. The answer to the Section III question, "Is this case eligible for EAF?" was changed to read:

In accordance with 18NYCRR 372.4(d), services which can be determined as necessary to cope with the emergency situation include counseling, securing family shelter, if available, and any other services which meet needs attributable to the emergency situation.

#### **IV.** Forms Information

The 7/03 revised forms have been printed and were delivered to the Albany warehouse. However, your district will **not** automatically receive copies.

Requests for supplies of the LDSS-4403: "Determination of Eligibility For Emergency Assistance to Families (EAF)" (Rev.7/03) 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

Questions concerning ordering forms should be directed to Document Services at 1-800-343-8859, ext. 4-9522.

In addition, for local district staff, an electronic PDF version of this form in this INF can be accessed on the OTDA Intranet website at <u>http://sdssnet5/otda/ldss\_eforms/default.htm</u>.

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