



**George E. Pataki**  
*Governor*

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

**Robert Doar**  
*Commissioner*

## Local Commissioners Memorandum

### Section 1

<b>Transmittal:</b>	04-LCM-11
<b>To:</b>	Local District Commissioners
<b>Issuing Division/Office:</b>	Temporary Assistance (DTA); Program Support and Quality Improvement (PSQI)
<b>Date:</b>	July 28, 2004
<b>Subject:</b>	AFIS Plan / Exemptions for FS Finger Imaging
<b>Contact Person(s):</b>	DTA Eastern Regional Team at 1-800-343-8859, ext. 3-1469 Audit and Quality Control - Diane Ley at 1-800-343-8859, ext 2-0132
<b>Attachments:</b>	"AFIS Food Stamp Exemptions" form
<b>Attachment Available On – Line:</b>	Yes

### Section 2

#### I. Purpose

The Office of Temporary and Disability Assistance (OTDA) shares with local districts a commitment to maintain and promote access to the Food Stamp (FS) program for eligible households in New York State. As one means of promoting FS program access, the OTDA encourages you to exempt certain groups from the Automated Finger Imaging System (AFIS) requirements for FS eligibility (see attachment). In order to assist your district in accomplishing this goal, OTDA has simplified the process for amending your AFIS plans.

#### II. Applicability

This memorandum applies to the FS program and Food Assistance Program (FAP) only; it does not affect the Temporary Assistance (TA) or Medicaid portions of your AFIS Plan of Operation. Individuals who are subject to, but fail to comply with, TA AFIS requirements must have their FS eligibility separately determined using FS standards, including your district's FS AFIS exemptions as applicable.

### III. Background

Districts have been required to finger image all FS household members age 18 or older and all heads of FS households since 1998, in accordance with State regulation 18 NYCRR 387.9(c). The purpose of finger imaging in the FS program is to prevent an individual from receiving FS benefits as part of more than one household at the same time. As such, ineligible/disqualified/sanctioned household members are not subject to FS AFIS. Each district has been required to submit an AFIS Plan of Operation for compliance with the AFIS program to the OTDA Division of Program Support and Quality Improvement, Bureau of Audit and Quality Control. Districts have been asked to indicate in their plans which groups the district chooses to exempt from the finger imaging requirements. Districts have to provide justification and population estimates for each of the exempt groups they include in their plan submittals. In addition, districts can exempt other individuals on a case-by-case basis for good cause reasons. In order to promote FS program access, we are now encouraging further exemptions from FS AFIS requirements.

### IV. Program Implications

For many groups of FS households, the finger imaging requirement may pose a hardship. Individuals who are elderly, disabled, homebound, institutionalized, employed during your district office hours or who have transportation difficulties may be exempted. In addition, FS households for whom the in-office interview is waived, can be exempted. Some districts already have implemented one or more of these exemptions pursuant to their previously approved AFIS plans. The OTDA urges you to exercise your option to exempt FS households from these requirements.

#### Completing the “AFIS Food Stamp Exemptions” form:

In order to simplify the process for amending your AFIS plan, we have developed a checklist form (see attached “AFIS Food Stamp Exemptions” form). Each district is requested to return a completed form **by September 30, 2004** to either expand your FS AFIS exemptions or to affirm your current FS AFIS exemptions. Districts also may use this form to amend their AFIS plan for FS exemptions at any time subsequent to their initial completion of the form.

In the attached “AFIS Food Stamp Exemptions” form, each of the groups described in items #1 – 7 are considered pre-approved exemptions. Please check “YES” or “NO” for each recommended exemption to indicate whether your amended AFIS plan includes the listed exemption for FS. You do not need to submit any further justification or caseload estimates for any box in which you check “YES”. The District Commissioner must sign and date the form. Exemptions #1 – 7 for which you check “YES” will be considered to be in effect as of the date you submit the form. You may also propose, in item #8, to exempt additional groups, but must supply further justification for your request. Any requests to exempt additional groups in #8 cannot be implemented without written approval from OTDA.

WMS Instructions:

All individuals that are determined, based on the approved amended AFIS Plan of Operation for FS, to be exempt from AFIS requirements will require an AFIS Indicator on screen 5 of WMS. The presence of an AFIS Indicator will ensure that these individuals are not included on the Upstate AFIS/WMS Reconciliation Report that is generated monthly. The Upstate AFIS/WMS Reconciliation Report lists all Family Assistance, Safety Net Assistance, and FS applicants/recipients currently active in WMS who are 18 years old or older and have not yet been enrolled in AFIS. It also lists all Medicaid applicants/recipients currently active in WMS who are 21 years old or older who have not yet been enrolled in AFIS. Districts should use AFIS Indicator code A, County Specific Exemption for the clients being exempted in response to this LCM.

Questions about FS policy may be directed to the Division of Temporary Assistance at 1-800-343-8859, ext. 3-1469. Questions about the exemption form should be addressed to Ms. Diane Ley, Division of Program Support and Quality Improvement, Audit and Quality Control, at 1-800-343-8859, ext. 2-0132.

**Issued By** \_\_\_\_\_

**Name:** Robert Doar  
**Title:** Commissioner  
**Division/Office:** Office of Temporary and Disability Assistance