

[SCU or SSD LETTERHEAD]

TO: _____

Date: _____

PA Case No.(s) _____

CSMS Case ID No.(s) _____

Determination of the Request for a First-Level Desk Review of the Distribution of Child Support Payments

Dear _____:

The request for a desk review for the distribution of child support for your temporary assistance case(s) identified above has been completed. The type of desk review you requested included a pass-through payment review an excess current support payment review and/or an excess arrears support payment review. The period of review you requested was from _____ (month/year) to _____ (month/year), or for the following individual months: _____, _____, _____, _____, (month/year).

The result(s) of the desk review for the period identified above is(are) as follows:

- Your request did not include adequate information to identify the temporary assistance case or the child support case. No action can be taken unless you provide us with better identifying information. Once you obtain the identifying information, you may request a new desk review request form by contacting the **NYS Child Support Helpline toll-free at 1-888-208-4485 (TTY 1-866-875-9975)**, Monday through Friday from 8:00 AM to 7:00 PM. A listing of recognized Video Relay Service providers can be found at: http://www.fcc.gov/cgb/dro/trs_providers.html). You may then submit the new desk review request form with the adequate identifying information.
- Based on facts presented at the conference conducted on _____ by telephone call an in-person meeting, it was agreed by all in attendance that the type of desk review to be conducted should be different from that indicated on your desk review request form, as noted above. The type of desk review(s) conducted as a result of the conference included a pass-through payment review an excess current support payment review and/or an excess arrears support payment review, and accurately identifies the type(s) of payment(s) to which you may be entitled.
- Additional support for the desk review period of _____ to _____ is owed to you in the amount of \$_____. The additional amount owed to you will be available no later than _____ and will be disbursed to you on your Electronic Benefit Transfer (EBT) card or through a check.
- The SCU has identified support payments that may be available in future months in the amount of \$_____. Support received by the Support Collection Unit (SCU) before the month it is due cannot be distributed until the month it is due. If you are still eligible to receive these payments, they will be distributed to you as they come due.
- It has been determined that too much support has been issued to you and you now owe \$_____. Please note that your temporary assistance grant amount may be recalculated to incorporate the overpayment amount, and this may occur within 30 calendar days.
- No additional support is owed to you. The correct amount of support to date has been distributed to you.

ATTACHMENT 9

- The pass-through payment is based on the amount of current support collected each month, and limited to (1) an amount up to the first \$50.00 of current child support collected during the month through September 30, 2008, or the current support obligation amount for the month, whichever is less; and (2) an amount up to the first \$100 of current support collected during the month effective October 1, 2008, or the current support obligation amount for the month, whichever is less. Your current support obligation amount is \$_____ per month, and therefore the amount of pass-through payment that you were entitled to and received is limited to this amount. No additional support is owed to you.
- The budgeting of the temporary assistance benefits provided to you included the pass-through disregard amount. Therefore, you are not also entitled to a pass-through payment for the same month.
- For the period, or a portion of the period, for which you requested a review, no payment was received, or the payment received was not appropriate for the type of payment you are requesting. For a pass-through payment, a current support payment must be received from the noncustodial parent in the month due before you can receive a child support pass-through payment for that month. For an excess current support payment, a current support payment for the month must be received to be considered in the calculation of money due to you for that month. For an excess arrears support payment, a support payment for "past-due/arrears" must be received to be considered in the calculation of money due to you. Therefore, no additional support is due to you.
- Desk reviews are limited to the calendar year in which the review is requested and the prior calendar year. The period, or a portion of the period, for which you requested a desk review is not within the calendar year in which you requested the review or the prior calendar year. Therefore, no desk review was conducted for the disallowed period, and no support is due to you for that period.
- Review of the case records does not support the type of desk review request that you submitted. Records indicate that a pass-through payment review an excess current support payment review an excess arrears support payment review is inappropriate at this time, and therefore, no desk review was conducted and no support is due to you.
- Review of the case records does not support the type of desk review request that you submitted. An excess current support payment is only available for collections which are credited toward a current monthly support obligation through June 30, 2009. Your desk review involved collections pertaining to a current support obligation after July 1, 2009. Therefore a desk review for the period, or a portion of the period, requested is inappropriate at this time and no desk review was conducted.
- You were not a recipient of temporary assistance or you had no support account established with the Support Collection Unit at any time during the months for which you requested a review. Therefore, no support is due to you.
- Your request does not involve a matter that can be addressed by the local support collection unit or the social services district. Therefore, no action can be taken by these agencies.
- All current support collected on your behalf was forwarded to another social services district for distribution. For a desk review of your account with that social services district, you will need to submit your desk review request to:

Other (specify):

Detailed information for each month of the period of the desk review regarding the child support payments received and the distribution of those payments is shown on the enclosed worksheet. A copy of any documentation provided to support your desk review request and considered in the desk review conducted is also enclosed.

Sincerely,

SCU/SSD First-Level Desk Review Unit

Telephone Number: _____

NOTE: If you dispute specific facts contained in this desk review determination, you may request a second-level review by the New York State Center for Child Well-Being by submitting a written request on the enclosed "Request to New York State for a Second-level Desk Review of the Distribution of Child Support Payments" within 20 calendar days of the date of the above SSD determination. You must have received an SSD determination of a desk review request **before** you request a second-level review. Your request must specify the facts in dispute and must include a copy of this SSD determination complete with all enclosures. You may include any additional but previously unavailable documentation that may support your claim. Send the request to:

NYS Center for Child Well-Being
ATTN: Bureau of Program Operations, Second-level Desk Review
40 N. Pearl Street, 13th Floor,
Albany, NY 12243-0001