



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

## Local Commissioners Memorandum

### Section 1

<b>Transmittal:</b>	10-LCM-04 <i>Revised</i>	
<b>To:</b>	Local District Commissioners	
<b>Issuing Division/Office:</b>	Office of Budget, Finance & Data Management	
<b>Date:</b>	June 11, 2010	
<b>Subject:</b>	Claiming Deadlines for State Reimbursement (Revision)	
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<b>Attachments:</b>	None	
<b>Attachment Available On – Line:</b>		Not applicable

### Section 2

#### I. Purpose

The purpose of this Local Commissioners Memorandum (LCM) is to notify social services districts of the implementation of a provision in the State Fiscal Year (SFY) 09-10 State Budget which provides a claiming deadline for the State Share of eligible program expenditure claims.

In addition, with the shift of funding from the Local Administration Fund (LAF) to the Flexible Fund for Family Services (FFFS) effective January 2009, districts should not enter amounts as State share for claim schedule items previously reimbursed through the LAF.

## II. Background

Social services districts are advised that pursuant to Chapter 53 of the Laws of 2009, SFY 09-10 appropriation authority is available for reimbursement of eligible program expenditure claims based on the claiming deadlines noted below in the Program Implications section of this LCM.

## III. Program Implications

Subject to this provision, State reimbursement claims for eligible program expenditures paid during the period January 1, 2009 through December 31, 2009 must be final accepted on the Automated Claiming System (ACS) by March 31, 2010 to obtain State share reimbursement. The normal federal share of reimbursement will continue to be available for federally allowable program categories subject to existing federal guidelines.

Also, since SFY 09-10 budget authority is only available for calendar year 2009 claims submitted in accordance with the noted deadlines, claims for expenditures prior to January 2009 were only able to be paid using SFY 08-09 budget authority. Only those applicable claims final accepted on the ACS through August 3, 2009 were able to be paid before the lapsing of SFY 08-09 budget authority.

Payment of the State share of expenditures reported on the Schedules noted below is subject to the limits of these deadlines and available appropriation:

- Schedule A Expenditures For Family Assistance (LDSS-187)
  - Line 6 - State Share
  - Column 2 - Grand Total
- Schedule B Claiming for Adult Care, EAA and Guide Dogs (LDSS-4744)
  - Line 4 - State Share
  - Column 3 - Private Institutions
  - Column 4 - Public Homes
  - Column 6 - Family Type Home for Adults Special Needs
  - Column 7 - EAA
  - Column 8 - Guide Dogs
- Schedule C Expenditures for Safety Net Assistance (LDSS-1040)
  - Line 6 - State Share
  - Column 2 - Grand Total
- Schedule F Schedule of Costs for Emergency Assistance to Needy Families With Children (LDSS-1285)
  - Line 6 - State Share
  - Column 2 - Total

Monthly claims for certified Tier II shelters are included in the time limitation noted above. However, certified Tier II shelters are also subject to the deadline in Part 900 of Social Services Regulations. Final claims for certified Tier II shelters are due 90 days from the close of the district's fiscal year.

Reimbursement amounts should not be recorded as due from New York State for claims accepted after the deadlines noted above.

Instructions for completing the Schedules A, B, C and F are found in the Fiscal Reference Manual (FRM) Volume 2, Chapter 3 available at <http://otda.state.nyenet/bfdm/finance/docs/Vol02.pdf>.

#### **IV. Additional Reporting Considerations for Administrative Claims**

With the shift of funding from the Local Administration Fund (LAF) to the Flexible Fund for Family Services (FFFS) effective January 2009, districts should not enter amounts as State share for claim schedule items previously reimbursed through the LAF.

The applicable claim schedule fields are as follows:

- Schedule D-1 Claiming of Intake/Case Maintenance (I/CM) Expenditures (LDSS-2347A)
  - Section 1, Line 12 - State Share
    - Column 2 - Family Assistance
    - Column 3 - Safety Net MOE
    - Column 4 - EAF
    - Column 5 - EAA
    - Column 6 - Safety Net Assistance
    - Column 7 - NPA
- Schedule D-3 Allocation and Claiming of Administrative Costs for Employment Programs (LDSS-2347-B1)
  - Section 1, Line 14 - State Share
    - Column 2 - TANF Program
    - Column 3 - TANF Admin
    - Column 5 - FS E&T - Admin 50%
    - Column 6 - FS E&T - Participant Reimbursement
    - Column 7 - Dependent Care
    - Column 8 - Non Federal Employment Program
- Schedule D-6 Reimbursement Claim for Training (LDSS-2347-C)
  - Section 2, Line 16 - Additional State Share
    - Column 14 - Food Stamp E & T - 50%
- Schedule D-7 Distribution of Food Stamp Expenditures to Activities (LDSS-2347E)
  - Section 1, Line 11 - State Share
    - Column 2 - Certification
    - Column 3 - Fair Hearings
    - Column 5 - Other
- Schedule D-10 Claiming of Fraud and Abuse Administrative Costs (LDSS-2347F)
  - Section 1, Line 9 - State Share
    - Column 2 - Family Assistance (TANF)
    - Column 3 - Safety Net/FAP (FNP Programs)
    - Column 4 - Food Stamps

If amounts are entered in these fields, they should not be recorded as due from New York State as there will be no State reimbursement for these amounts.

Instructions for completing Schedules D-1, D-3, D-6, D-7, and D-10 are found in FRM Volumes 3 and 4 (New York City) available at <http://otda.state.nyenet/bfdm>.

**Issued By**

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