



# Office of Temporary and Disability Assistance

**ANDREW M. CUOMO**  
Governor

**SAMUEL D. ROBERTS**  
Commissioner

**SHARON DEVINE**  
Executive Deputy Commissioner

## Informational Letter

### Section 1

<b>Transmittal:</b>	15-INF-07-T
<b>To:</b>	Local District Commissioners
<b>Issuing Division/Office:</b>	A&QI
<b>Date:</b>	March 31, 2016
<b>Subject:</b>	Investigative Unit Operations Plan (Revised)
<b>Suggested Distribution:</b>	Temporary Assistance Directors SNAP Directors Fraud Directors FEDS Coordinators
<b>Contact Person(s):</b>	Stephen Bach(A&QI) (518) 402-0117 or Stephen.Bach@otda.ny.gov
<b>Attachments:</b>	<a href="#">Investigative Unit Operations Plan Form</a> <a href="#">Protocol for DCA Interview</a> <a href="#">DCA Interview Acknowledgement</a> <a href="#">DCA Interview Acknowledgement (Spanish version)</a>
<b>Attachment Available Online:</b>	<input checked="" type="checkbox"/>

### Filing References

Previous ADMs/INFs	Releases Cancelled	Dept. Regs.	Soc. Serv. Law & Other Legal Ref.	Manual Ref.	Misc. Ref.
93-ADM-8 91-ADM-51 06-INF-28	14-INF-03	18 NYCRR 348.2, 359.4	145 145-c	FSSB Section 6	7 CFR 273.16(g)(1)

### Section 2

#### I. Purpose

This Informational Letter (INF) supersedes 14-INF-03 and requires each social services district (SSD) to submit to the Office of Temporary and Disability Assistance (OTDA) for review and approval a revised Investigative Unit Operations Plan (IUOP). Such plans

must be submitted to OTDA within 60 days of this INF. The purpose of this INF is to update the conditions and clarify the requirements regarding portions of the IUOP. Specifically, OTDA is providing additional guidance concerning appropriate procedures, with particular attention to the procedures required when administering a Disqualification Consent Agreement (DCA).

It is critical that SSDs maintain a clear delineation between the process for referrals to the prosecuting authority which could or could not result in a DCA, and the process for referrals for an administrative hearing which could or could not result in a waiver of the administrative hearing. These are two distinct processes and that distinction must be maintained to preserve the integrity of the overall structure for pursuing Intentional Program Violations (IPVs).

Included with this INF is an IUOP template for your use (Attachment 1) and you are encouraged to provide sufficient detail to demonstrate that the Plan is consistent with all applicable regulations and policy guidance. Also provided to assist in completing the IUOP, and to use when conducting DCA interviews, is a sample "Protocol for DCA Interview" (Attachment 2) and a sample "DCA Interview Acknowledgement" form (Attachment 3).

## **II. Background**

93-ADM-8 requires that SSDs file an IUOP with OTDA. The administration of DCAs, specifically, is addressed in 91-ADM-51 and at 18 NYCRR 359.4.

## **III. Program Implications**

Each SSD must submit an updated IUOP to OTDA within 60 days of the date of this INF.

The plan must include:

- (1) A description of the organizational unit(s) responsible for the investigation of allegations of client fraud;
- (2) A description of any claims establishment (recoupments) and collection activities for which the Fraud referral unit also may be responsible;
- (3) Procedures for the referral of fraud cases for administrative hearings;
- (4) A description of the organizational unit(s) responsible for the prosecution of allegations of client fraud;
- (5) Detailed procedures for the referral of fraud cases to the prosecuting authority;
- (6) A detailed, step by step description of the DCA process following the guidelines set forth in 91-ADM-51 and 18 NYCRR 359.4. Additionally, attached for your reference are the "Protocol for DCA Interview" (Attachment 2) and "DCA Interview Acknowledgement" (Attachment 3) forms. These forms are not mandatory, but are included for your consideration and their use is encouraged;

- (7) An explanation of how it is proven that the individual was advised on the record of the court of the disqualification provision prior to entering any plea; and
- (8) A copy of or a statement of the agreement with the prosecuting authority's office in accordance with 18 NYCRR 348.2(c) and 359.4, and the federal regulation 7 CFR 273.16(g)(1). This agreement must include information on how, and under what circumstances, cases will be accepted for possible prosecution and the criteria set by the prosecutor for accepting cases for prosecution. The criteria should include, but not be limited to, the dollar threshold and the type of violation.

In our effort to update and standardize SSD plans, please submit your IUOP using the attached template (Attachment 1), answering all sections completely and in detail. All plans must be submitted to Stephen Bach at: [Stephen.Bach@otda.ny.gov](mailto:Stephen.Bach@otda.ny.gov) or submitted by mail to:

New York State Office of Temporary & Disability Assistance  
Audit and Quality Improvement – Program Integrity  
Riverview Center 4th Floor  
40 North Pearl Street  
Albany, NY 12243

If you have any questions, please contact Mr. Bach prior to submitting your plan.

**Issued By**

**Name: Kevin Kehmna**

**Title: Director**

**Division/Office: OTDA/A&QI**