



Office of Temporary and Disability Assistance

ANDREW M. CUOMO
Governor

SAMUEL D. ROBERTS
Commissioner

BARBARA C. GUINN
Executive Deputy Commissioner

Informational Letter

Section 1

Transmittal:	18-INF-10
To:	Social Services District Commissioners
Issuing Division/Office:	Integrated Family Assistance Programs / Employment and Income Support Programs
Date:	July 16, 2018
Subject:	Revisions to LDSS-4887 "Mail-In Recert/Eligibility Questionnaire"
Suggested Distribution:	Supplemental Nutrition Assistance Program (SNAP) Staff Temporary Assistance (TA) Staff MA Directors CAP Coordinators WMS Coordinators Staff Development Coordinators
Contact Person(s):	Temporary Assistance Policy Questions: TA Bureau at: (518) 474-9344 Employment Policy Questions: Bureau of Employment and Advancement Services at: (518) 486-6106 SNAP Policy Questions: SNAP Bureau at: (518) 473-1469 Forms Questions: Kelly Whitney at: 1-800-343-8859, ext. 3-7991
Attachments:	Attachment 1: Revised LDSS-4887 Mail-In Recert/Eligibility Questionnaire
Attachment Available Online:	<input checked="" type="checkbox"/>

Filing References

Previous ADMs/INFs	Releases Cancelled	Dept. Regs.	Soc. Serv. Law & Other Legal Ref.	Manual Ref.	Misc. Ref.
16-ADM-03 08-ADM-07 07-ADM-01 06-ADM-10 12-INF-15 11-INF-15 10-INF-15 09-INF-21		351.21(c) 353 385 387.17	SSL. 134-a SSL 158(2) SSL 211	TAB, Chapter 6, Section C	

Section 2

I. Purpose

The purpose of this release is to inform social service districts (districts) of revisions to the [LDSS-4887](#) "Mail-In Recert/Eligibility Questionnaire".

II. Background

Under Office of Temporary Disability Assistance (OTDA) regulation 18 NYCRR 351.21(c) districts may use a mail-in recertification form as a substitute for one of the two mandatory semi-annual Temporary Assistance (TA) face-to-face recertifications for certain TA cases. [06-ADM-10](#), "Revised Temporary Assistance (TA) Mail-in Recertification Process" introduced the district optional model LDSS-4887 "Mail-In Recert/Eligibility Questionnaire". Districts may use this model form or an approved local equivalent in the mail-in recertification process.

The LDSS-4887 has been revised to support various changes including new reporting requirements for certain Supplemental Nutritional Assistance Program (SNAP) households, changes to the SNAP resource limits for households with an elderly or permanently disabled individual and updated SNAP minimum unearned income changes. Additionally, a new paragraph has been added to inform SNAP households that include an Able-Bodied Adult Without Dependents (ABAWD) of the reporting requirements changes. These changes are described below.

- Page 1, under section 4; "*Have there been any changes in the following since you last reported to us,*" the following change was added:
 - "F. Have any medical conditions that limit their ability to work or the type of work they can perform? Name: _____"
- Page 2, Under SNAP, (third bullet) the amount of change in unearned income from a public source that one must report was updated to \$100.
- Page 2 Under SNAP, (eighth bullet), the resource limit for a household with an elderly or permanently disabled member was updated to \$3,500.
- Page 2 under **SNAP** (last bullet) the ABAWD language was updated to the following:

"If anyone in your SNAP household is an Able-Bodied Adult Without Dependents (ABAWD), he/she MUST tell the district if their hours go below 80 hours each month within 10 days after the end of that month. The ABAWD can request a qualifying work activity from the district to help him/her meet the federal ABAWD requirement. If anyone in your SNAP household is an ABAWD, he/she should also report if your household has moved to an area with a federally approved ABAWD waiver or if the ABAWD believes he/she should be exempt from the ABAWD requirement."

III. Program Implications

Districts that have an approved mail-in recertification waiver or who have submitted a Notification of Recertification Waiver(s) Form and use an OTDA approved local equivalent form in place of the optional model LDSS-4887 must immediately amend their local form to correspond with the required revisions found in this informational letter.

New York City (NYC)

NYC does not use the [LDSS-4887](#). While NYC possesses an OTDA approved mail-in recertification form and procedures for using the form, the mail-in form and approved procedures are distinct for NYC. Changes to NYC's approved recertification mail-in form must be made to support the required revisions found in this informational letter.

IV. Forms Ordering Information

The revised English version of the LDSS-4887: *"Mail-In Recert/Eligibility Questionnaire"* and the [LDSS-4887-SP](#) (Spanish) versions are state printed.

The above referenced documents have also been posted on the OTDA Intranet website at: http://otda.state.nyenet/ldss_eforms/default.htm and are available for downloading by local districts for reproduction locally.

Upon the release of this INF all previous versions of the LDSS-4887 *"Mail-In Recert/Eligibility Questionnaire"* **must immediately be destroyed** and replaced with the revised 3/18 version.

Any future written requests for master camera ready copies of the English and Spanish versions of the documents should be submitted on [OTDA-876](#): *"Request for Forms or Publications"*, and sent to:

Office of Temporary and Disability Assistance
BMS Document Services and Operational Support
PO Box 1990
Albany, NY 12201

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

Documents may also be ordered through Outlook. To order the forms you must obtain an OTDA-876 electronically by going to the OTDA Intranet Website at: <http://otda.state.nyenet/> then under Program Areas, go to Division of Operations and Program Support page, then to OPS E-forms page (this page contains the electronic OTDA-876).

For a complete list of available forms, please refer to the OTDA Intranet site: http://otda.state.nyenet/ldss_eforms/default.htm.

Issued By

Name: Nancy P. Maney
Title: Deputy Commissioner
Division/Office: Integrated Family Assistance Programs