

ANDREW M. CUOMO

Governor

MICHAEL P. HEIN
Commissioner

**BARBARA C. GUINN** 

**Executive Deputy Commissioner** 

#### **Informational Letter**

#### Section 1

| Transmittal:                 | 19-INF-05  |  |  |  |  |
|------------------------------|--|--|--|--|--|
| To:                          | Social Services District Commissioners   |  |  |  |  |
| Issuing                      | Employment and Income Support Programs   |  |  |  |  |
| Division/Office:             |  |  |  |  |  |
| Date:                        | July 24, 2019  |  |  |  |  |
| Subject:                     | Revision to the LDSS-5062A Supplemental Nutrition Assistance Program (SNAP)<br>Employability/ABAWD Code Desk Guide |  |  |  |  |
| Suggested                    | Employment Coordinators  |  |  |  |  |
| Distribution:                | Temporary Assistance Directors   |  |  |  |  |
|                              | SNAP Directors   |  |  |  |  |
|                              | Staff Development Coordinators   |  |  |  |  |
| Contact                      | OTDA Employment Services Advisor or Employment and Advancement Services  |  |  |  |  |
| Person(s):                   | Bureau at (518) 486-6106   |  |  |  |  |
| Attachments:                 | <u>LDSS-5062A</u>  |  |  |  |  |
| Attachment Available Online: |  |  |  |  |  |

# **Filing References**

| Previous<br>ADMs/INFs | Releases<br>Cancelled | Dept.<br>Regs.    | Soc. Serv.<br>Law &<br>Other Legal<br>Ref. | Manual Ref.   | Misc. Ref.  |
|-----------------------|-----------------------|-------------------|--|---|---|
| 16-ADM-01             |                       | 18 NYCRR<br>385.3 |  | TA and SNAP<br>Employment<br>Policy Manual<br>Section 3 | 7 CFR 273.7<br>7 CFR 237.24<br>GIS 16 TA/DC026<br>GIS 19 TA/DC014 |

#### Section 2

#### I. Purpose

The purpose of this directive is to inform social services districts (districts) of revisions to the Supplemental Nutrition Assistance Program (SNAP) Employability/Able-Bodied Adults Without Dependents (ABAWD) Desk Guide (LDSS-5062A) and to inform districts that they are to no longer use the Temporary Assistance (TA) / SNAP Employability Determination Desk Guide (LDSS-5062B) effective immediately.

## II. Background

Federal regulations require that districts determine the employability status of each SNAP applicant and recipient. An individual's SNAP employability status indicates if they are subject to

SNAP work requirements. Further, ABAWDs are subject to additional special work requirements to maintain their SNAP benefits beyond three-months in a given 36-month period. OTDA strongly recommends that districts use the LDSS-5062A or a similar document as a tool to assist staff with making correct SNAP employability determinations and so as to properly code individual ABAWD status.

The policies applied to make SNAP employability determinations and with respect to properly coding an individual's ABAWD status are not changed by this informational letter.

### **III. Program Implications**

Districts are required to correctly determine the employability status of each individual applying for or receiving SNAP benefits, including those individuals who are concurrently applying for or receiving temporary assistance. Each individual's employability status and proper ABAWD coding must also be reviewed at recertification and any time there is a reason to believe that the employability and/or ABAWD status may have changed. The criteria that would render an individual exempt from SNAP work requirements and the criteria with respect to who is subject to ABAWD work requirements is listed in 18 NYCRR § 385.3.

The <u>LDSS-5062A</u> may be completed by TA/SNAP and Non-TA(NTA)/SNAP eligibility workers during the interview with the household to, among other purposes, inform the household of the exemptions from the SNAP work requirements and ABAWD requirements, and to identify the most appropriate SNAP employability code and ABAWD status code.

The LDSS-5062A has been updated to include the following adjustments:

- SNAP employability code "24", pregnant (within 30 days of medically verified date of delivery)—exempt, has been removed from the desk guide and is discontinued as a SNAP employability code. Federal regulations as 7 CFR 273.7 do not include "pregnant within 30 days of medically verified date of delivery" as an exemption from work requirements. Employability code "24" remains a valid TA employability code.
- The description for SNAP employability code "70" has been revised to remove "includes "obviously unfit" for employment due to a physical or mental health condition". SNAP employability code "70" should continue to be used as a short-term employability code assigned when a SNAP applicant or recipient is claiming an exemption from the work requirement while pending medical documentation. The reference to "obviously unfit" for employment due to a physical or mental health limitation" has been added to the bottom section of the LDSS-5062A under the ABAWD code determination section. This change was made as individuals claiming an exemption from the SNAP work requirements must provide documentation of the claimed exemption in order to be assigned an exempt SNAP employability code. Individuals who do not claim an exemption, or fail to provide documentation of a claimed exemption from the SNAP work requirements and are assigned a non-exempt SNAP employability code may be exempt from the ABAWD work requirements if the district determines the individual to be "obviously unfit" for employment due to a physical or mental health limitation. The designation of "obviously unfit" for employment due to a physical or mental health limitation is an exemption from the ABAWD requirements, (ABAWD status code of N), but is not an exemption from the general SNAP work requirements.
- The description for SNAP employability code "63" has been revised to "a regular participant in drug or alcohol treatment rehabilitation—exempt." The previous description reference of

"determined unable to work due to substance abuse" no longer applies for SNAP purposes. As outlined in <u>GIS 19-TA/DC014</u>, districts must consider all SNAP recipients who are regularly participating in a drug or alcohol treatment program as exempt from SNAP work requirements.

- SNAP employability code "31", parent or caretaker relative of a child in the household under 12 months of age—exempt, has been removed from the desk guide and is discontinued as a SNAP employability code. SNAP employability code "29" a parent or household member who is responsible for care of a child under age 6 in the household—exempt, is the more appropriate SNAP employability code to assign to a parent or caretaker of a child in the household under 12 months of age, as the exemption applies from birth through age six. Employability code "31" remains a valid TA employability code.
- The phrase "full time" has been removed from the description for SNAP employability code 38, "responsible for the care of an incapacitated person (the incapacitated person does not need to live in the household), Exempt."
- SNAP employability code "64", substance abuser (determined able to work)—non-exempt has been removed from the desk guide and is discontinued as a SNAP employability code. Employability code "64" remains a valid TA employability code.
- SNAP employability code "40", responsible for the care of an incapacitated person part-time—non-exempt has been removed from the desk guide and is discontinued as a SNAP employability code. Federal regulations at 7 CFR 273.7 provides an exemption from SNAP work requirements for a parent or other household member responsible for the care of an incapacitated person, regardless of full or part time. Employability code "40" remains a valid TA employability code.
- The following revisions have been made to the section entitled "The ABAWD code would be "N" (Non-ABAWD) if any of the following (check below ✓):"
  - The bullet "unable to work in competitive employment at least 80 hours per month due to physical or mental limitation" has been removed and replaced with "obviously mentally or physically unfit for employment (notate in case record the basis for this status. Review status at recertification)"
  - A new bullet has been added, "unfit for employment at least 80 hours per month due to a physical or mental health limitation (medical statement or other documentation required)."

Changes to the codes and code descriptions listed in the Welfare Management System (WMS) Code Cards will be reflected at the next update.

The LDSS-5062B TA/SNAP Employability Desk Guide (Rev. 10/16) has been discontinued immediately. Temporary Assistance eligibility workers should continue to utilize the LDSS-4925 TANF & SN MOE Employability Code Desk Guide (Rev. 5/15) and the LDSS-4926 SNA MOE Employability Code Desk Guide (household without dependent children) (Rev. 5/15) for assigning the appropriate TA employability code. Temporary Assistance eligibility workers should use the LDSS-5062A SNAP Employability/ABAWD Code Desk Guide (Rev. 6/19) for assigning the appropriate SNAP employability and ABAWD status code for the SNAP portion of a TA/SNAP case.

## IV. Forms Ordering Information

- The revised English version of the LDSS-5062A: "SNAP Employability/ABAWD Code Desk Guide" is a Web Only form:
- The above referenced document has been posted on the OTDA Intranet website at: <a href="http://otda.state.nyenet/ldss\_eforms/default.htm">http://otda.state.nyenet/ldss\_eforms/default.htm</a> and is available for downloading by local districts for reproduction locally.
- Upon the release of this INF all previous versions of the LDSS-5062A "SNAP Employability/ABAWD Code Desk Guide" must immediately be destroyed and replaced with the revised 6/19 version.
- Upon the release of this INF all copies of the LDSS-5062B "TA/SNAP Employability Desk Guide (Rev. 10/16) must immediately be destroyed.
- This document is a Web posted only form, therefore, it is only available online and is not available in hard copy from the New York State Office of Temporary and Disability Assistance (OTDA).
- Questions concerning Web posted only forms should be directed to BMS Document Services at: (518) 474-9522.
- Any previously approved Local Equivalent of this form should be resubmitted, reflecting the current updates, to the mailing address below for review and approval.

oda.sm.Local.Equivalent.Requests@otda.ny.gov

**Issued By** 

Name: Jeffrey Gaskell

Title: Deputy Commissioner

Division/Office: Employment and Income Support Programs/Office of Temporary and

**Disability Assistance**