

Date: _____

Case Number: _____

Case Name: _____

Job Center: _____

RE-ENGAGEMENT AND CONCILIATION NOTICE

IMPORTANT: Not responding to this notice may cause your Cash Assistance (CA) (also known as Public Assistance (PA)) and/or Supplemental Nutrition Assistance Program (SNAP) benefits to be reduced or stopped.

Why are you getting this notice?

Our records show that you did not participate in your assigned work activity or comply with a mandatory NYC Human Resources Administration (HRA) appointment with _____ on or beginning on _____.

Unless you give us a "good cause" reason why you _____ or explain why you believe you are exempt from the work requirement by _____, your CA and/or SNAP benefits may be reduced or stopped.

What are some of the reasons you may be exempt from work requirements?

- You are younger than 16 years of age or 60 years of age or older.
- You have a physical or mental health condition that prevents you from participating.
- You are needed to care for an incapacitated household member.

What is "good cause"?

"Good cause" is an event or issue beyond your control that stopped you from participating in or going to your appointment or assignment. This includes a physical or mental health condition that prevents or prevented you from participating in work activities. Please see page 2 for more examples of good cause.

What do you need to do?

Report your good cause reason before _____ by any of these ways:

- Emailing us at: _____
 - Please be sure to include your full name and case number or Client Identification Number (CIN) in your email as well as a phone number where you can be reached at.
- Calling us at: _____ and letting us know when we can call you back to discuss your re-engagement/conciliation. You can call Monday through Friday 8:30am to 5:00pm.
- Reporting to: _____

READ THE NEXT PAGE TO FIND OUT MORE ABOUT HOW TO KEEP YOUR BENEFITS

What else should you give HRA?

You should give us enough information and/or proof of why you were unable to report to or participate in either your mandatory HRA appointment or your assigned work activity site for the date(s) listed above. See below for some examples.

Proof can be any documents and/or pictures of documents that support your good cause claim that your absence was not planned or on purpose.

You must also let us know if you agree to comply with your work requirements going forward to continue your CA and SNAP benefits. Or, you can tell us if you are unable to participate in work activities. Some reasons why you may not be required to participate are listed below.

If you have a physical or mental health condition and you need help to participate in this re-engagement/conciliation, please call us at (212) 331-4640 and let us know. We will help you.

What do you have to do to avoid a sanction and prevent your benefits from being reduced or stopped?

Contact us before _____. This is called the re-engagement and conciliation process. We will try to help you resolve any problems you may have with your work activity so you may avoid a sanction and continue your benefits.

How can you avoid a sanction and having your benefits reduced or stopped?

There are three different ways you can avoid a sanction and having your benefits reduced or stopped.

1. **Participate in the re-engagement and conciliation process by contacting us (email, phone or in person) and show that you are not required to participate in work activities.**

You may avoid a sanction and having your benefits reduced or stopped if we determine you are not required to participate in a work activity to receive benefits. Some examples of why you may not be required to participate in a work activity include:

- You are younger than 16 years of age or 60 years of age or older.
- You have a physical or mental health condition that prevents you from participating.
- You are needed to care for an incapacitated household member.

2. **Participate in the re-engagement and conciliation process and show “good cause” or that the noncompliance was not intentional by explaining why you did not participate.**

Another way you can avoid a sanction and having your benefits reduced or stopped is to explain why you did not go to or cooperate with the appointment or work assignment that we believe you missed. This will help us understand what happened and determine if the reason was not intentional or not your fault. If you did go to the work assignment/appointment you can let us know. Some examples of good cause reasons for not going to or cooperating with a mandatory appointment or assigned work activity include:

- You were working
- You or your child was sick
- You had an emergency
- You have a domestic violence situation
- You did not have child care for your child
- You were unable to work as assigned due to a physical or mental health condition
- You had another required appointment at the same time

You are responsible for telling us the reason(s) why you did not report or cooperate and for providing any information that you feel will help show what happened. You should send us any documents which will help explain why you did not go to or cooperate with the work assignment/appointment. Here are some examples:

- A letter from your doctor
- A letter from your child's school
- A letter from the court
- Other documents that explain why you did not go to or cooperate with the work requirement/appointment

3. **Participate in the re-engagement and conciliation appointment and then participate in an assigned work activity.**

After you contact us, we will tell you how you can do this. Even if you did not have good cause for why you did not comply, you can demonstrate compliance to avoid a sanction and having your benefits reduced or stopped. Demonstrating compliance means that you will go to your assigned work activity and fully participate as assigned by this Agency for at least five (5) business days.

Case Record Review

Before sending this notice, we reviewed your case record. We did this to make sure that at the time you did not show up for or cooperate with the mandatory appointment or work assignment, you were not determined to be exempt from work requirements. We also made sure that any necessary child care and transportation supports as were known to the Agency were available to you, along with any accommodations for a known physical or mental health condition. If you tell us that you do not/did not have the supports you need to participate, we will help you.

Discrimination Complaints

If you feel that you are discriminated against in your work assignment, you can make a complaint. Here are some of the ways you can file a complaint:

- tell the supervisor at your work site; or
- tell the worker during the re-engagement /conciliation process; or
- call the HRA complaint line at 718-291-4141.

If your complaint is related to a SNAP work assignment, you should call (518) 473-8555 or write to the New York State Office of Temporary and Disability Assistance's Bureau of Equal Opportunity Development, 40 North Pearl Street, Albany, New York 12243-0001.

What happens if you don't respond to this notice?

If you do not contact us or otherwise participate in the re-engagement/conciliation process listed on page 1, we may send you a Notice of Intent. This notice may say that we will impose a sanction and reduce or stop your CA and/or SNAP benefits. The notice will give you information about asking for a conference. A conference gives you another chance to provide information about why you missed your appointment or assigned work activity. After you get the Notice of Intent, you can also ask for a Fair Hearing if you do not agree with our decision. You can ask for a Fair Hearing even if you do not ask for a conference.

Important note about Medicaid: Failing or refusing to appear for a work related appointment or comply with/participate in an assigned work activity does not change your eligibility for Medicaid benefits.