

# Monroe County Department of Human Services



## DHS 101

Updated March 2017

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## **Preface**

**The Monroe County Department of Human Services, in partnership with representatives of several Community Agencies, has developed this booklet as an educational tool for use by Case Managers in our community. The objective is for Case Managers to use this information to assist our mutual clients in becoming self-sufficient.**

**The Monroe County Department of Human Services is a complex system not easily understood by those working outside the system. Increasing the understanding of the system by Case Managers will result in improved services to the clients served by the various Community Agencies in Monroe County.**

**The information provided in this booklet addresses the most common issues encountered by community Case Managers.**

## Frequently Asked Questions

### General

**Q:** What happens once paperwork is dropped off at DHS?

**A:** All paperwork received at our offices is scanned by the Centralized Document Management unit then assigned to a worker via Annex in the appropriate workgroup. The worker will process the paperwork and notification of any action(s) taken on the application or case will be mailed directly to the client. We ask that client and community reps allow at least 10 business days after dropping off paperwork before contacting the Agency to inquire about case status.

**Q:** What is ANNEX?

**A:** Annex is the computer system that is used to manage the MCDHS task-based case processing model. Tasks are primarily assigned to workers on a “round – robin” basis, meaning that a client may not have one single worker for the duration of time that they have an open or pending case. When an action needs to be taken on a case, the task is created in Annex, and then assigned to the next available worker in the appropriate work group. The worker responsible for the task is easily identifiable in Annex.

**Q:** Is there an after-hours contact number for Child Protective Services?

**A:** Yes, you can call the New York State child abuse reporting hotline at 800-342-3720 anytime of the day or night.

**Q:** Once a case is closed, and a person is reapplying why do they have to bring information that is already in their file from their previous case?

**A:** The agency needs current information. Information that is not subject to change does not need to be submitted again. Information subject to change, shelter expenses, household composition, income and resources must be current.

**Q:** If a client’s case is closed for failure to recertify, is there a standard procedure to have benefits reinstated?

**A:** The client must re-apply; there is not a standard procedure for reinstatement.

**Q:** Is there a website that providers can access to get information regarding guidelines for services provided by your agency?

**A:** [www.mybenefits.ny.gov](http://www.mybenefits.ny.gov) and <http://www.monroecounty.gov/hs-assistance.php>

**Q:** Is there a hotline that providers can access as a resource when a client is unsure of their next steps?

- A:** Questions should be directed to the team or workgroup that is handling the client's case. Questions can be sent via phone, fax or e-mail. Contact information is provided in Chapter 14.
- Q:** What services does DHS have to offer the working poor who need support besides Supplemental Nutrition Assistance Program (SNAP) and Medicaid?
- A:** Other services offered by DHS include, Home Energy Assistance Program, Diversion Benefits, Day Care and One Time Emergency Benefits.
- Q:** What is the best way to contact an Examiner (worker assigned to review public assistance benefits) in order to ask questions regarding the status of a client's case?
- A:** E-mail. Contact information is provided in Chapter 14.
- Q:** Is there someone or somewhere to direct clients if they are not successful in getting in touch with their Examiner?
- A:** Questions should be directed to the workgroup that is handling the client's case. Questions can be sent via phone, fax or e-mail. Contact information is provided in Chapter 14.
- Q:** Whom may providers contact when they are unable to satisfactorily resolve any concerns with the case Examiner and/or their Supervisor?
- A:** Please follow the "chain of command", if they have been unable to resolve the issue with Examiner staff, contact the Supervisor. If unable to resolve with the Supervisor, contact the Coordinator.
- Q:** Does an applicant still need to fill out the job search book to get financial assistance when they are already enrolled in an employment-training program and have a job lined up for them?
- A:** If the job is full time and will start right away, the client should not need to do a job search.
- Q:** Does DHS provide any type of translation services for non-English speaking clients?
- A:** Yes. DHS is required to offer free interpreting services to applicants and recipients of all programs. It is helpful when a client indicates on their application that they need an interpreter and provides their preferred language. DHS contracts with interpreting services to communicate with individuals with Limited English Proficiency (LEP) and utilizes the Language Line (telephone interpretation) when deemed necessary.
- Q:** How can we receive a budget sheet that is more understandable to the clients and community providers?
- A:** The State Office of Temporary and Disability Assistance (OTDA) sends out the notice of decision which include an explanation of how benefits were determined. MCDHS is not able to adjust the budget sheets that are sent out by OTDA.

- Q:** What is the process to receive furniture or place household goods in storage?
- A:** If the client is in emergency housing, the MCDHS Emergency Housing Unit will process any requests for furniture and storage of household goods. Requests for furniture or storage from clients who are not in emergency housing, but are active or pending Temporary Assistance, are handled by the Intake and Care Management workgroups.
- Q:** If a person owns their home, how can they receive benefits without placing a lien on their property?
- A:** They cannot receive cash assistance unless they sign a collateral mortgage. They can receive Daycare and Supplemental Nutrition Assistance Program (SNAP) benefits. Their children can receive cash assistance. A person can own their own home for community MA, but the rules are more complicated for chronic care (permanent institutionalization) and each case must be evaluated based on the unique circumstances of their situation.
- Q:** When is a client eligible for daycare assistance?
- A:** A client is eligible for daycare assistance if they are active on Temporary Assistance and need daycare to go to work and/or participate in an *approved* Temporary Assistance program (e.g. Work Experience, a CASAC appointment, attend substance use disorder treatment, etc.).

If a client is not active Temporary Assistance they might be eligible for Income Eligible Daycare assistance if they are employed. In addition to being employed and meeting other household requirements, the eligibility is based on funding from the Title XX and Child Care Block Grant. If funding is exhausted applications will be accepted and documentation requested but may be denied for insufficient funds if grant money is not available.

## **Transportation**

- Q:** What exactly are DHS capabilities in regards to transportation assistance for clients?
- A:** See Chapter 1, Table 1 on page 10.
- Q:** How can DHS help a client that needs car repairs to get to his job in order to remain employed?
- A:** See Chapter 1, Table 1 on page 10.
- Q:** What are the requirements for clients to receive a bus pass?
- A:** See Chapter 1, Table 1 on page 10.

## **Sanctions**

**Q:** Are there different types of sanctions?

**A:** Yes, see Chapter 4.

**Q:** What can DHS or other community providers do to help when a client is seeking emergency housing if they are sanctioned?

**A:** See Chapter 4

## **Emergency Housing**

**Q:** Is there a gap for emergency housing service between DHS and the After Hours coverage?

**A:** No, see Chapter 5

**Q:** Is there a way for community providers or the police to secure emergency housing for a client over the phone during the day?

**A:** No, if a client is active or pending Temporary Assistance they contact the workgroup that is handling their case. (Contact information is provided in Chapter 14.) If they are not active or pending Temporary Assistance, they need to go to 691 St. Paul St to apply for Emergency Assistance.

## **Fair Hearing**

**Q:** Who is contacted if a worker is non-responsive to our inquiries and what is the process for resolving an issue without having to request a Fair Hearing?

**A:** Please follow the “chain of command”, if they have been unable to resolve the issue with Examiner staff, contact the Supervisor. If unable to resolve with the Supervisor, contact the Coordinator.

**Q:** Why does DHS take so long to comply when the client has won the Fair Hearing?

**A:** The Hearing Officer may tell the client that they have won the Fair Hearing but a Supervising Administrative Law Judge reviews decisions before being issued “Officially” to the client and agency. Generally, a final decision is issued within 3 to 6 weeks of the Fair Hearing and must be processed by MCDHS within 10 business days of receipt from the State. However, some cases require MCDHS to request additional or updated information from the client in order to process the decision. These situations may take longer than 10 business days to bring the issues to a final resolution.

## **Self Sufficiency/Employment**

**Q:** What is the Work Experience Program?

**A:** The Work Experience Program is a Core activity approved by New York State that allows a person to perform unpaid work in the public or non-profit sector to improve the employability of the participant.

**Q:** What is an approved activity?

**A:** See handout LDSS-4923 for family cases and LDSS-4924 for single or childless couple cases

**Q:** How long does a client have to attend substance use disorder treatment?

**A:** The client is required to attend all scheduled sessions of their treatment program. The program will be updated as appropriate by the qualified healthcare provider working with the client on recovery.

## **Domestic Violence**

**Q:** Is there a way to release individuals who are victims of Domestic Violence and are going into a shelter from employment search and/or other related Public Assistance requirements?

**A:** See Chapter 9

## **Chapter 1 Diversion Benefits**

### **General**

1. There are several Diversion Benefits available to assist clients in becoming self-sufficient that may preclude their having to apply for full benefits. \* To be eligible for Diversion Benefits the household must meet certain eligibility requirements including emergency assistance income limits and not have resources available to meet the need themselves. For Emergency Assistance for Families the household's available gross income on the day of application cannot exceed 200% of the Federal Poverty Level (FPL). For Emergency Safety Net Assistance the household's monthly gross income, regardless of availability, cannot exceed 125% of the FPL.
2. Tables 1 - 4 explain:
  - Who is eligible?
  - The action required by MCDHS.
  - Benefits that are available to the client.

### **Available Diversion Benefits**

1. Transportation related expenses:
  - a. Auto Insurance.
  - b. Auto Repairs and Fee for Estimate.
  - c. Bus Pass.
  - d. Driver's License.
  - e. Mileage.
  - f. Parking Tickets or Fines.
2. Shelter related expenses for rent or mortgage.
3. Miscellaneous items to obtain employment:
  - a. Clothing.
  - b. License Fees or Union Dues.
  - c. Grooming Expenses.
  - d. Tools.
4. Non Cash and Medical Assistance to accept employment:
  - a. Child Support.
  - b. Health Insurance through Chamber of Commerce Group Plan.
  - c. Child Care and related expenses.
  - d. Child Care in lieu of Temporary Assistance.
  - e. Safety Net Plan of Self Support.

**TABLE 1 Transportation Related Expenses**

<b>Automobile Insurance</b>	
<b>WHO'S ELIGIBLE</b>	Applicants/recipients that obtain/retain employment and own a vehicle
<b>DESCRIPTION</b>	Verify ownership of motor vehicle, driver's license, policy premium and employment/job offer
<b>BENEFIT</b>	Issue up to \$500, paid directly to the client or to the insurance company
<b>Automobile Repairs and Fee for Estimate</b>	
<b>WHO'S ELIGIBLE</b>	Applicants/recipients that have access to a vehicle which needs repair to be reliable transportation to work (when the vehicle is worth repairing) in order to obtain or retain employment
<b>DESCRIPTION</b>	Verify ownership of motor vehicle, driver's license, value of car and employment/job offer Estimate of cost of repairs and whether vehicle is worth repairing from at least 1 reputable repair shop
<b>BENEFIT</b>	Issue cost of repairing client's vehicle up to \$500 when repairs will enable client to obtain/retain employment. Pay directly to client/vendor. Over \$500 requires administrative approval
<b>Bus Pass</b>	
<b>WHO'S ELIGIBLE</b>	Applicants/recipients that obtain or retain employment
<b>DESCRIPTION</b>	Verify job offer
<b>BENEFIT</b>	Issue bus pass via Rochester Transit Services Web-based system
<b>Driver's License</b>	
<b>WHO'S ELIGIBLE</b>	Applicants/recipients that have a permit or had a license which can be renewed, and need it to obtain or retain employment
<b>DESCRIPTION</b>	Verify permit or license status, employment/job offer
<b>BENEFIT</b>	Issue the cost of obtaining/renewing driver's license to the client
<b>Mileage</b>	
<b>WHO'S ELIGIBLE</b>	Applicants/recipients that obtains/retain employment and own a vehicle
<b>DESCRIPTION</b>	Verify car ownership, driver's license, employment/job offer, and mileage to/from work
<b>BENEFIT</b>	Issue one month of mileage round trip from home to work when it will make it possible for client to obtain/retain employment that they otherwise would not have. Maximum amounts: City = \$56.00
<b>Parking Tickets or Fines</b>	
<b>WHO'S ELIGIBLE</b>	Applicant/recipients with outstanding tickets/fines (not DWI) that would allow client to drive legally to obtain/retain employment
<b>DESCRIPTION</b>	Verify ticket amounts, driver's license, registration and employment/job offer
<b>BENEFIT</b>	The cost of paying fines or tickets up to \$300

**TABLE 2 Shelter Related Expenses**

**Rent or Mortgage**

<b>WHO'S ELIGIBLE</b>	Applicants/recipients that obtain/retain employment, and will not be able to pay rent/mortgage until they receive a full month's pay
<b>DESCRIPTION</b>	Verify address, monthly shelter expense, employment/job offer, pay schedule and salary
<b>BENEFIT</b>	Issue two (2) months worth of shelter expense to the landlord. Anything over 2 months needs Administrative approval

**TABLE 3 Miscellaneous Items Required to Obtain Employment**

**Clothing**

<b>WHO'S ELIGIBLE</b>	Applicants or recipients that need clothing (including work boots, office clothing, jackets for outdoor work, etc.) in order to obtain or retain employment
<b>DESCRIPTION</b>	Verify employment or job offer
<b>BENEFIT</b>	Authorize \$150 by SAO to the client. Men and women can be referred to the VOA Working Wardrobe for professional attire (and the \$150 is paid directly to the VOA for 3 outfits and shoes)

**License Fees or Union Dues**

<b>WHO'S ELIGIBLE</b>	Applicants or recipients that can renew a trade or professional license, or to pay union dues in order to obtain or retain employment
<b>DESCRIPTION</b>	Verify cost of license or union dues and employment/job offer
<b>BENEFIT</b>	Issue the amount of fees or dues up to \$300 to the client or to the vendor

**Grooming Expenses**

<b>WHO'S ELIGIBLE</b>	Applicants that are in need of a haircut, grooming supplies, or laundry in order to job search or obtain or retain employment
<b>DESCRIPTION</b>	Verify job offer or job search
<b>BENEFIT</b>	Issue \$10.00 SAO to client for Laundromat or \$15.00 SAO to client for haircut

**Tools**

<b>WHO'S ELIGIBLE</b>	Applicants or recipients that need work-related tools in order to obtain or retain employment
<b>DESCRIPTION</b>	Verify employment or job offer, and the necessity & costs of work-related tools
<b>BENEFIT</b>	Issue a maximum of \$500.00 to the client or vendor. Anything over \$500.00 needs Administrative approval

**TABLE 4 Non Cash & Medical Assistance to Accept Employment**

**Child Support**

<b>WHO'S ELIGIBLE</b>	Applicants or recipients that will be unable to meet their needs on the income left after child support is removed.
<b>DESCRIPTION</b>	A reduction in the Child Support order will allow the client to accept or retain employment, and be able to meet their needs without public assistance.
<b>BENEFIT</b>	Refer to CSEU at 33 N. Fitzhugh St. to obtain paperwork in order to file a motion in Family Court to reduce the Child Support order until the client is able to increase their income. Client should be instructed to file paperwork in Family Court. The court date should be set right away.

**Health Insurance – Chamber of Commerce Group Plan**

<b>WHO'S ELIGIBLE</b>	Applicants or recipients that have a job offer, but the employer does not offer medical benefits. The A/R may be able to afford health insurance at a group rate through the Chamber after they have a full quarter income.
<b>DESCRIPTION</b>	Verify employment/job offer, salary and the benefit package offered by employer. If health insurance is not available, contact the Chamber of Commerce. (Greece Chamber has the best rates)
<b>BENEFIT</b>	Issue the membership fee to join and the 1 <sup>st</sup> quarter's Health Insurance premium. (Blue Choice Plus)

**Child Care and Related Expenses**

<b>WHO'S ELIGIBLE</b>	Applicants that need childcare in order to obtain or retain employment, and need child care to eliminate the need for Temporary Assistance. *Income limits for Income Eligible Day Care are listed on page 34.
<b>DESCRIPTION</b>	Verify employment/ job offer. Have client return a completed day care request. Copy application and send to IEDC team for DC determination.
<b>BENEFIT</b>	Childcare necessary for employment at contracted rate. Day care fees necessary to be able to enroll child in center.

**Child Care in Lieu of Temporary Assistance**

<b>WHO'S ELIGIBLE</b>	Applicants or recipients that are financially eligible for Temporary Assistance (TA) and have a need for Child Care (CC) for a child under the age of 13 in order to obtain or retain employment.
<b>DESCRIPTION</b>	Fill out an application (DSS 2921) and choose to receive CC in lieu of TA. Verify employment/job offer.
<b>BENEFIT</b>	Eligible families must pay the family share of the CC in the amount of \$1.00 per week.

## Safety Net Plan of Self Support

### WHO'S ELIGIBLE

Applicants or recipients of Safety Net (SN) whose medical cost needs are preventing them from going to work but who are not eligible for Social Security Income. The individual should have a job offer.

### DESCRIPTION

Verify the employment and the medical need such as insulin for diabetes, medication for hypertension, mental health etc. Explore whether the employer offers medical benefits and how/when, the client can become eligible for them. Write a plan with client, with the goal of self-sufficiency. This includes being able to afford health insurance and medication. Enter a budget in Able using client's gross earned income. Deduct just enough money to keep the case open for Medicaid. A SN plan for self-support can last up to one year.

### BENEFIT

The SN plan of self-support is a written plan made with worker and client. Some or all of the client's income can be disregarded, which will allow the client's case to remain active for Medicaid Coverage until client has the means to meet their own medical needs. This would generally be until the client can receive health benefits or until they earn enough to cover medication costs.

## **Chapter 2 The Application Process**

### **Temporary Assistance**

A completed application signed by the client or their Authorized Representative is required before an appointment can be scheduled.

### ***How and Where to Apply:***

1. Applications are available on line at <http://www.otda.state.ny.us/main/apps/2921.pdf>. at both DHS offices and at many area community service agencies. Client may call the appointment line at 753-6960 to have an application mailed to them.
2. Take the completed application to the DHS office located at 691 St. Paul St. The application will be screened for emergency needs and ongoing eligibility.

### ***Appointments:***

1. After screening, the client is handed an appointment letter for the next available in-depth interview if eligible for ongoing application processing.
2. Clients who are ineligible for cash assistance will receive a notice of ineligibility in the mail and their eligibility for assistance through Medicaid and the Supplemental Nutrition Assistance Program will be determined separately.
3. Appointments missed for good cause can be rescheduled by the applicant or authorized representative within 30 days of the application date by submitting Reschedule Form (LDSS 008). An LDS008 can be obtained by calling 753-6011.

### ***Interviews and Application Processing:***

Client comes in for scheduled face-to-face interview.

1. A Documentation Requirements Form (LDSS-2642) is issued to client (if necessary) at the interview.
2. Documentation required for eligibility is due to the Agency within 10 days. If additional time is needed, an extension may be requested prior to the due date by contacting the Agency.
3. Referrals are made as needed for the correct employment path.

## **Supplemental Nutrition Assistance Program (SNAP)**

### ***How and Where to Apply:***

If you are not applying for Temporary Assistance and only wish to apply for Supplemental Nutrition Assistance Program (SNAP), or Supplemental Nutrition Assistance Program (SNAP) and Medicaid there are three ways that you can obtain a Supplemental Nutrition Assistance Program application.

1. Online at – [www.mybenefits.ny.gov](http://www.mybenefits.ny.gov)
2. By calling 753-6960, to have an application mailed to you
3. In person at one of the DHS buildings
4. Completing a face-to-face interview is NOT required for Supplemental Nutrition Assistance Program applicants. Interviews can be conducted by Telephone. Applicants wishing to be screened in person for expedited Supplemental Nutrition Assistance Program (SNAP) should bring their application in to the DHS office located at 691 St. Paul St.

### ***Appointments:***

Applicants who apply online, through the mail or drop off an application will receive a letter scheduling a telephone eligibility interview. If a telephone number is not provided with the application a face-to-face interview will be scheduled.

### ***Interviews and Application Processing:***

Client completes their scheduled telephone or face-to-face interview.

1. A Documentation Requirements Form (LDSS-2642) is issued to client (if necessary).
2. Documentation required for eligibility is due to the Agency within 10 days.
3. Referrals are made as needed for the correct employment path.

### ***SNAP Benefits and ABAWDS (Able Bodied Adults without Dependents)***

Individuals in receipt of SNAP benefits who do not meet the federal government criteria to qualify for an ABAWD waiver or exclusion are required to be in compliance with ABAWD employment and training requirements in order to continue to receive SNAP benefits past an initial 3 month grace period. Throughout 2017, the County of Monroe is approved to waive ABAWD requirements for SNAP recipients who live in the City of Rochester, and residents in the Towns of Gates and Irondequoit. In addition to the ABAWD waivers, we are able to apply a set of exclusions to certain individuals through the community.

## **Medicaid**

**Community Medicaid for MAGI** – for persons under age 65 not receiving Medicare, single and childless couples, children, pregnant women, parents and caretaker relatives living in the community.

### ***How and Where to Apply:***

1. Applicants apply at the New York Health Exchange:
  - On-line at <https://nystateofhealth.ny.gov>
  - By phone 1-855-355-5777
2. Application assistance for New York Health Exchange is available through Navigators:
  - Coordinated Care Services Inc. at 585-613-7662
  - Community Service Society of New York at 585-613-7662
  - LawNY at 855-250-7748

**Community Medicaid for NON-MAGI** – for persons age 65 or older, blind, disabled, receiving Medicare living in the community.

**Chronic Care Medicaid** – for persons of any age residing in a nursing home facility.

### ***How and Where to Apply:***

1. Client may call the appointment line at 753-6960 to have an Access NY application and Supplement A mailed to them.
2. Applications are available at both DHS offices, many area community service agencies, and on-line at [http://www.health.ny.gov/health\\_care/family\\_health\\_plus/application.htm](http://www.health.ny.gov/health_care/family_health_plus/application.htm)
3. Application assistance is available through:  
Coordinated Care Services, Inc.  
1099 Jay Street Building J  
Appointment line phone number: (585) 613-7662 press 3
4. Applicant should mail or drop off the completed Access NY application and Supplement A to  
Dept. of Human Services  
111 Westfall Road  
Rochester, NY 14620  
Attention: CDM Westfall
5. Although completing a face to face interview is NOT required for Medicaid applicants, a face-to face interview is strongly encouraged for persons needing nursing home coverage. If you desire an appointment for an interview, please indicate this on the front page of the application.

### ***Medicaid Application Processing:***

1. DHS mails an acknowledgement letter to the applicant and/or their authorized representative upon receipt of the completed Medicaid application.
2. Applicants also applying for Supplemental Nutrition Assistance Program (SNAP) are advised by the acknowledgement letter that they will be contacted for a phone interview. The Senior Examiners on the team screen the applications for expedited SNAP processing.
3. The application is assigned to an Examiner for eligibility determination.
4. An appointment letter is mailed to the applicant and/or authorized representatives who are requesting application assistance (face to face interview).
5. Request for necessary documentation indicating “due” date is handed to applicants during the application assistance interview OR mailed to all other applicants.
6. Once the requested documentation is received and reviewed, the Examiner make the eligibility determination.

## Chapter 3 Employment Requirements

### Disability Information for Temporary Assistance

Clients who report barriers to self-sufficiency due to a physical or mental health condition must provide verification of their disability.

The preferred disability forms are the PSYCHOLOGICAL ASSESSMENT FOR DETERMINATION OF EMPLOYABILITY and the PHYSICAL ASSESSMENT FOR DETERMINATION OF EMPLOYABILITY, also known as the PADE or “yellow” forms. Other written methods of documentation are acceptable (Doctor’s note, other medical records) as long as they include information regarding the client’s functional limitations. Any documentation verifying a client’s disability must be signed by a medical professional and dated within 30 days of submission.

Medical documentation is generally required to be provided within ten days of the request, extensions may be granted on a case-by-case basis.

Clients who do not have a doctor, or cannot connect with a doctor may be referred to Industrial Medicine Associates (IMA) for a medical or psychological assessment and completion of the PADE form.

Clients who are completely disabled are exempt from employment activities for the duration of the documented disability, however, they are still required to complete a worker assisted employment assessment. Clients who are partially disabled will be required to have an employment assessment and participate in work activities to the extent that they are able to do so, based on the medical documentation.

Clients are required to provide updated medical documentation at the end of the duration of the documented disability and at recertification.

Clients who have a documented disability that is expected to last 6 months or less or are deemed “permanently disabled” but are not yet SSI appropriate may be required to enter into a Restoration to Self Sufficiency Plan (RSSP.) The RSSP is an agreement between The Monroe County Department of Human Services (MCDHS) and Temporary Assistance recipient with a disability that will assist our client(s) in achieving a higher level of self-sufficiency by requiring the client(s) to follow treatment recommendations which may include:

- Regularly schedule, attend, and comply with scheduled physical therapy sessions.
- Regularly schedule, attend, and comply with scheduled mental health therapy sessions.
- Regularly take prescribed medications for physical illness
- Regularly take prescribed medications for mental health illness
- Keep all follow up appointments
- Schedule and attend all specialist appointments as directed by the primary health practitioner or by the district’s practitioner.

Clients who have a documented disability which is expected to last 6 months or longer may be required to meet with our Disability Assessment Review Team (DART) and apply for SSI. Clients who apply for SSI will be represented by Monroe County’s SSI Advocacy Office.

## **Applicant Job Search**

Monroe County is a Work First County. Applying for Temporary Assistance is the last alternative after all other options have been exhausted to obtain Self Sufficiency. All individuals are expected to achieve their highest level of self-sufficiency. Clients deemed employable or partially employable are expected to job search throughout the application process until they find employment. The minimum number of job contacts is 15 per week for singles and 10 per week for families; up to ½ may be on-line applications. Clients must be actively seeking employment at places that are hiring. If applicants have not found employment prior to the opening of their case they will be expected to continue job searching until they find a job. The purpose for a job search is not simply to meet the TA requirements, but to find employment. Clients must keep their Job Club appointments as a condition of eligibility.

## **Substance Use**

Client that screen positive for substance use disorder must attend an appointment with a DHS Certified Alcohol and Substance Abuse Counselor (CASAC) for an assessment.

1. If client is in need of substance use disorder treatment and unable to work in any capacity, an evaluation appointment is made once all other requirements are met. Clients must comply with the evaluation and keep their first substance use disorder treatment appointment before the case can be opened.
2. If the client is in need of substance use disorder treatment, but is also able to work, an evaluation appointment will be made once all other requirements are met. The client must go to the evaluation, keep their first substance use disorder treatment appointment and attend an employment assessment before the case can be opened.
3. If the client is not in need of substance use disorder treatment, they will be assigned to an appropriate employment activity.

## **Core and Non-Core Work Activities**

1. Mandated Employment activities for applicants and recipients of Temporary Assistance are grouped into “Core” and “Non-Core” work activities.
2. TANF and SN MOE recipients (families) are required to participate in a minimum of 30 hours of work activities per week if they are a single parent family with youngest child 6 years of age or older or if they are a two parent family in which one parent is disabled. TANF and SN MOE recipients are required to participate in a minimum of 20 hours of work activities if they are a single parent family with a child less than 6 years of age and not to exceed 40 hours total per week.
3. Work activities considered “Core” can count for all hours of participation.

## Core Work Activities

1. Vocational Education Programs:
  - a. Cannot exceed 12 months in the individual's lifetime.
  - b. Include short term career or job oriented certificate programs such as:
    - i. Certified Nursing Assistant training.
    - ii. Commercial Drivers License training.
    - iii. 2-year degree programs can count for a core work activity for up to 12 months.
2. Job Readiness Training (JRT):
  - a. JRT counts for employment participation for up to 4 consecutive weeks per fiscal year.
  - b. JRT counts for employment participation for up to 12 weeks per fiscal year (depending on NYS's total unemployment rate).
  - c. Provides instruction on how to obtain and retain employment.
3. Job Search Programs (JS):
  - a. JS counts for employment participation for up to 6 consecutive weeks per fiscal year.
  - b. JS counts for employment participation for up to 12 weeks per fiscal year (depending on NYS's total unemployment rate).
  - c. JS participants may provide job matching or individual job search with a specified number of employer contacts made in person or via internet or FAX.
4. Unsubsidized Employment (Paid Employment).
5. Subsidized Employment:
  - a. MCDHS subsidizes employment by diverting an individual's Temporary Assistance cash grant to the employer through TEAP contracts.
  - b. TEAP - The individual retains his/her full Medicaid coverage, childcare and possibly Supplemental Nutrition Assistance Program (SNAP) for the duration of the contract.
  - c. OJT – Pays the employer directly to employ Temporary Assistance recipients and wages are budgeted the same as unsubsidized employment. Participants who are closed due to excess income can be eligible for transitional benefits. On the Job Training must be paid in order to count for participation
6. Work Experience Program:
  - 1) Unpaid on the job training conducted at public or non-profit agencies.
  - 2) Provides current experience and references for individuals on Temporary Assistance.
7. Community Service:
  - 1) Consists of volunteer activities.
  - 2) Must be supervised and attendance must be reported weekly to count.

## **Non-Core Work Activities Include**

These activities only count for hours of participation once the individual has already participated for 20 hours per week in a “Core” work activity. Individuals are generally assigned 10 to 15 hours of non-core activities, which include:

1. Job skills training directly related to employment such as:
  - a. Computer training
  - b. Cardio Pulmonary Resuscitation training.
  - c. The second 12 months of a two-year Vocational Education program
  
2. Educational training such as:
  - a. General Education Diploma.
  - b. English for Speakers of Other Languages.
  - c. Adult Basic Education.
  
3. High School education for adult students 18 and older.

## Chapter 4 Sanctions

**Program Areas:** A sanction may be imposed in one of four (4) program areas

1. Temporary Assistance [Cash]
2. Supplemental Nutrition Assistance Program (SNAP)
3. Medicaid
4. Emergency Housing

Sanctions may be imposed when a public benefit program recipient failed to comply with a required element of the benefit program rules. Each program area has its own set of rules and regulations. The imposition of a sanction on one program area does not automatically result in a sanction in one of the other program areas. For example, a client might be sanctioned from Temporary Assistance but still be eligible for Supplemental Nutrition Assistance Program (SNAP) and Medicaid. Communicating with DHS regarding any barriers that prevent compliance with program specific requirements, preferably prior to any failures, can help to mitigate the consequences that accompany sanctions on public benefit recipients.

### ***Sanctions Are Until Compliance***

1. That means the individual is ineligible until they comply, or it has been determined that they are no longer required to comply.
2. Some sanctions have a durational period attached to them. In these situations, the individual will have to serve out the durational period and comply before the sanction can be lifted. However, drug and alcohol sanctions can be “cured” if the client enters a Congregate Level II facility **and** the DHS CASAC determines that level of care is appropriate.

### ***Rules and Regulations***

1. All Medicaid sanctions are until compliance
2. There are no employment rules for Medicaid
3. There are no rehabilitation requirements for Medicaid or Supplemental Nutrition Assistance Program
4. An individual who is sanctioned from receiving Temporary Assistance is not eligible for Emergency Assistance. [Utility emergencies are not included.]
5. If there are children in the household, they will not be sanctioned. Their eligibility for Temporary Assistance, Emergency Assistance, Medicaid and Supplemental Nutrition Assistance Program will be evaluated.
6. The individual’s status as an applicant or a recipient, or the presence of a child in the household may affect the type of action that is taken.
7. In Temporary Assistance, a case or individual may receive multiple sanctions, if so these will run concurrently.

### ***Most Common Sanctions***

1. Failure to comply with a work activity assignment, refer to Table 5.
2. Failure to comply with Drug and Alcohol screening, assessment or treatment requirements, refer to Table 6.
3. Failure to cooperate with Child Support Enforcement Unit (CSEU) requirements, refer to Table 7.
4. Emergency Housing Sanctions, refer to Table 8.

**TABLE 5 Employment Sanction**

**Temporary Assistance (TA)**

Failure to comply with TA Employment requirements may result in the following individual sanctions:

Applicant/Recipient with dependent children	1st – until compliance 2nd – 90 days and until compliance 3rd – 180 days and until compliance *The remaining household members may continue to receive assistance. The household’s budget is reduced by removing the sanctioned individual’s pro-rated needs.
Applicant /Recipient without dependent children	The case will be closed and the following progressive sanction imposed: 1st – 90 days and until compliance 2nd – 150 days and until compliance 3rd – 180 days and until compliance

**NOTES:**

If a TA Applicant fails to complete Job Search activities or fails to keep and complete the Assessment Appointment the entire case is denied.

If a TA Recipient fails to complete Job Search activities or fails to keep and complete the Assessment Appointment the durational sanctions listed above will apply.

**Voluntary Job Quit Sanctions:**

<u>APPLICANT</u> FA SN	Individual is sanctioned 90 days from the date of quit
<u>RECIPIENT</u> HOUSEHOLDS WITH DEPENDENT CHILDREN	1st – until compliance 2nd – 90 days and until compliance 3rd – 180 days and until compliance
<u>RECIPIENT</u> HOUSEHOLDS WITHOUT DEPENDENT CHILDREN	1st – 90 days and until compliance 2nd – 150 days and until compliance 3rd – 180 days and until compliance

**Medicaid (MA)**

There are no employment rules for Medicaid

**Supplemental Nutrition Assistance Program (SNAP)**

Supplemental Nutrition Assistance Program Applicants or Recipients who voluntarily quit a job may be sanctioned individually as follows:

1st – 60 days and until compliance  
 2nd – 120 days and until compliance  
 3rd – 180 days and until compliance

An individual who has been sanctioned due to a voluntary job quit must be permitted to receive SNAP benefits during the sanction period if he/she becomes exempt from work requirements.

An example of this would be an individual who during their sanction period is involved in an accident that results in an injury, which leaves them unable to work.

**TABLE 6 Substance Use Disorder Treatment Sanction**

**Temporary Assistance (TA)**

When the head of household and/or other adult household member fails to comply with drug and alcohol screening or assessment requirements, take the following case action:

Single: Close or deny case and sanction until compliance.

Family: Individual is ineligible until compliance. The household’s budget is reduced by the individual’s prorated needs.

When the head of the household and/or other adult household member fails to participate in mandatory substance use treatment or fails to document participation, the sanctions are as follow:

Single: Close or deny case, impose a durational and until compliance sanction.

1st failure - 45 days and until compliance  
 2nd failure -120 days and until compliance  
 3rd failure - 180 days and until compliance

Family: Individual is ineligible for a specific period and until compliance. The household’s budget is reduced by the individual’s prorated needs.

**or**  
 Until entry/reentry into an OASAS Certified level II or VA operated in-patient treatment facility if deemed appropriate by DHS.

**Medicaid (MA)**

There are no “rehabilitation” requirements to receive Medicaid.

**Supplemental Nutrition Assistance Program (SNAP)**

There are no “rehabilitation” requirements to receive Supplemental Nutrition Assistance Program

**TABLE 7 Child Support Enforcement Sanction - IV-D Sanction**

**Temporary Assistance (TA)**

An individual who refuses or fails to cooperate with CSEU requirements and does not have good cause for such failure is ineligible to receive TA until compliance.

For IV-D sanctions:

The non-compliant individual is included in the household and TA case count, but the total monthly TA needs amount is reduced by 25% for each non-complying individual whether they receive TA or not.

The non-complying individual’s 25 % share of the TA benefit is counted as FS income and all of their non-exempt income is counted.

This sanction can be imposed concurrent with other sanctions. This would result in a further reduction of client’s grant.

**Medicaid (MA)**

If a parent or individual fails to comply with support related requirements, only that individual loses their MA coverage. A child may never be denied or discontinued from MA because a parent or individual is non-compliant

When that parent or individual complies with the requirements of the Child Support Enforcement Unit the MA coverage shall be authorized if otherwise eligible.

Failure to cooperate with IV-D requirements makes an individual ineligible for MA until compliance unless the person is pregnant or in the 60 day post partum period.

**Supplemental Nutrition Assistance Program (SNAP)**

There are no IV-D requirements to receive Supplemental Nutrition Assistance Program

## TABLE 8 Emergency Housing Sanctions

### Ineligible for Emergency Housing Assistance

Single individuals with a Temporary Assistance sanction (for example Failure to Attend Rehab) are ineligible for emergency housing placement through DHS.

Single parent households where the adult is sanctioned can be placed in emergency housing. DHS cannot provide payment for the sanctioned individual.

### Emergency Housing Sanctions

#### Excessive After Hours Use

In cases where an individual utilizes the After Hours Placement Line consistently without following through, the individual may be barred from utilizing After Hours until they comply by following through (i.e.: Applying for Emergency and Temporary Assistance).

Cases are evaluated individually before a sanction is imposed to determine if perhaps there are underlying causes for a failure to follow through.

#### Failure to Accept Permanent Housing

The workers in the Emergency Housing Unit gather lists of available, affordable permanent housing that is free of health and safety violations. These lists are updated at least once or twice a week, and distributed to each client in Emergency Housing as they meet with the DHS shelter worker.

Clients are encouraged to use these lists in their housing search and to locate housing on their own if they so desire.

If after a period of time the client has not chosen a permanent housing situation, or located one on their own, the client is ineligible for placement through DHS for 30 days and until compliance. (In this situation, compliance would be defined as having located and secured permanent housing).

Cases are evaluated individually before a sanction is imposed to determine if there may be an underlying cause for not locating permanent housing.

#### Endangering the Health and Safety of Others

If a client violates a shelter rule that endangers the health and safety of others in the shelter (i.e., fighting, using drugs), the client is ineligible for placement through DHS for 30 days and until compliance. (The situation is evaluated after 30 days to determine if the sanction can be removed without endangering the safety of shelter staff and residents).

Cases are evaluated individually before a sanction is imposed to determine if there may be an underlying cause for the non-compliance.

## Chapter 5 Emergency Assistance

### *Emergency Assistance Situations*

1. No Food.
2. Homeless.
3. Eviction/Foreclosure Prevention and First Month's Rent.
4. No Heat or Utilities.

### *Documentation Required*

1. Identification.
2. Verification of Social Security Number.
3. Verification of income and resources.

### **No Food**

1. An application for Supplemental Nutrition Assistance Program can be made at the DHS office at 691 St Paul St between the hours of 8:00 am and 4:00 pm. It is best to come in as early as possible. Applicants arriving after 3:00 may be asked to return the next day however the original application date is preserved.
2. Submitted applications are screened to determine if the household is eligible for Expedited Supplemental Nutrition Assistance Program processing.
  - a. The household's gross income and liquid resources are compared to their shelter expense and State utility allowances.
  - b. The shelter expenses must exceed the household's gross monthly income and liquid resources to be eligible for Expedited Supplemental Nutrition Assistance Program processing. (A copy of the screening form is attached.)
  - c. If liquid resources (cash or readily available savings) do not exceed \$100 and they have received less than \$150 in gross income during the calendar month in which they are applying SNAP;
  - d. If they are a migrant or seasonal farm worker household who have liquid resources of \$100 or less and meet SNAP requirements for being destitute.
3. If the household is found eligible for Expedited Supplemental Nutrition Assistance Program processing a full Supplemental Nutrition Assistance Program interview is conducted.
  - a. The person applying:
    - i. Must provide valid identification.
  - b. If the household is determined to be eligible for Expedited Supplemental Nutrition Assistance Program the benefits must be issued with-in five days but benefits are typically available the next day after 10:00 am.
4. If the household is determined to be ineligible for Supplemental Nutrition Assistance Program processing:
  - a. Applicants screened in person will receive an appointment letter at the time of the screening.

## **Homeless**

1. An application for Emergency Housing Assistance can be made at the DHS office at 691 St Paul St between the hours of 8:00 am and 4:00 pm. It is best to come in as early as possible. Placement should be the option of last resort. The worker will explore other options and the client's ability to meet the emergency on their own.
2. During normal business hours:
  - a. If the client is already active or pending Temporary Assistance, they should contact the workgroup assigned to their case.
  - b. If the client is not currently active or pending Temporary Assistance and is unable to meet the emergency on their own they can apply for Emergency Assistance.
3. After Hours Placement:
  - a. Clients should call After Hours Placement at 442-1742 during non-business hours. This number is answered:
    - From 5:00 PM through 7:00 am on business days
    - From 5:00 pm Friday through 7:00 am on Monday.
  - b. If a placement is done after hours, the client will only be placed until the next business day.
  - c. The client will be instructed to contact their worker (for active cases and applicants who have a pending TA application and have been assigned a worker) or come in to 691 St. Paul St. the morning of the next business day.
4. If DHS is unable to place the client, they will give the client information on community resources.
5. Identification is not required for placement.

## **Eviction/Foreclosure Prevention and First Month's Rent**

1. An application for assistance can be made at the DHS office at 691 St Paul.
2. A client that is already active or pending on Temporary Assistance should contact their workgroup.
3. Some common factors to be evaluated when evaluating an Eviction or Foreclosure Prevention are:
  - a. Can the client pay future shelter expenses to maintain the dwelling?
  - b. What is the condition of the dwelling and are there building code violations?
  - c. Did the client cause their own emergency by spending their money on non-essentials instead of paying the rent? To determine this we will want to look at the client's last two months of income and expenses.
  - d. What is cost effective and what will happen if the application is denied?
  - e. The County's Legal Department will have the client execute a lien on the property if the County makes a payment to prevent foreclosure.
    - i. A repayment agreement may be required.
    - ii. The Agency may not be able to help with foreclosure prevention, but may be able to help with first month's rent for a new dwelling
    - iii. A client that is facing eviction will not be placed into emergency housing until the Marshall has come to evict them.

4. If a client applies for first month's rent, the reason for the move will be reviewed in addition to evaluating their income and resources. (For example, an individual who has a medical condition that has worsened and now requires them to be in a dwelling with no stairs.)

## **No Heat or Utilities**

1. If a client is already active or pending Temporary Assistance, they should contact the workgroup that is handling their case. Their eligibility for HEAP and Emergency Assistance will be assessed. Contact information is provided in Chapter 14.
2. If a client has an active Supplemental Nutrition Assistance Program (food stamps) case that is handled by Team 41 (Community SNAP), which is located at our St Paul St office, they should call 238-8620 to apply for assistance through HEAP. If HEAP benefits are not available, they can apply for Emergency Assistance through the HEAP/Energy Unit located at 111 Westfall Rd. by calling 753-6477.
3. Individuals not receiving Temporary Assistance and/or SNAP are encouraged to call the HEAP Information/Appointment Line at 753-6477 to schedule an appointment to come in and apply for HEAP and/or Emergency Utility Assistance. The HEAP/Energy Unit is located at 111 Westfall Road. It handles applications for HEAP and applications for assistance with heat and utility emergencies.
4. Individuals not receiving Temporary Assistance can apply as a walk-in at 111 Westfall Road when their emergency situation will not allow them to wait;
  - a. Utilities are already shut-off.
  - b. Utilities will be shut-off or without heating fuel within 24-48 hours.
  - c. Denial of Service has been issued by Utility company.
5. Please advise clients to come as early as possible during HEAP season. The office opens at 8:00 a.m.
6. Please note that individuals who receive Emergency Assistance may be required to enter into a repayment agreement and that all household members between the ages of 18 and 60 will need to come in and be finger imaged if they are not receiving SSI or have a medically documented reason why they cannot come in.
7. Common information that will be required is:
  - a. Proof of identity for all household members.
  - b. Picture identification for all household members over the age of 18.
  - c. Social Security numbers verification.
  - d. Proof of address: Rent receipt, Lease, Landlord Statement, Deed, Tax Bill or Water Bill.
  - e. Proof of Income: Last 4 weeks' pay stubs for HEAP and for Emergency Assistance.
  - f. Proof of last 4 weeks' expenses for Emergency Assistance.
  - g. Employer's Statement

- h. Verification of the last 3 months income if self-employed
- i. Resources - Current Bank/Credit Union statements or ATM receipt.
- j. Fuel Oil – Copy of last bill or delivery receipt.
- k. RG&E, National Grid or municipal electric - Last months' bill and shut off notice.

Individuals who are without heat or utilities may be eligible for placement in emergency housing. These situations are reviewed on a case-by-case basis taking into account the current weather and household composition such as an infant or an older adult (age 60 and over) in the household.

## Chapter 6 Fair Hearing

1. Monroe County Department of Human Services (MCDHS) receives an average of 1,082 requests for Fair Hearings (FH) each month (average for the first three quarters of 2014.) All fair hearing information (requests, decisions, continued aid, etc.) is tracked in a database.
2. Information on Recipient and Applicant Rights to a Fair Hearing can be found in the Temporary Assistance Source Book (TASB), Chapter 4. The link to TASB is:  
  
<http://otda.state.ny.net/dta/Manuals/TASB.pdf>
3. Fair Hearing is defined in the source book as a formal procedure provided by the office upon a request made for an applicant or recipient to determine whether an action taken or failure to act by a local district was correct.
4. Monroe County staff attempts to resolve questions and concerns about case actions as efficiently as possible. Staff is encouraged to manage client concerns with a goal of providing excellent service and to reduce unnecessary Fair Hearings. Clients are encouraged to contact the customer service team or a task group supervisor to conference any decisions they believe are incorrect. If we made a mistake, we will correct it. We often find that clients have questions about how their budget was calculated so they may request a Fair Hearing to discuss them. Most client questions can be easily answered by the customer service Examiner. These types of questions do not require a formal Fair Hearing.
5. Applicants and recipients can request a fair hearing in a variety of ways. **All requests must go to the Office of Administrative Hearings (OAH) in Albany, not the local DHS office.** OAH accepts mail in requests at The Office of Administrative Hearings, New York State Office of Temporary and Disability Assistance, P. O. Box 1930, Albany, NY 12201. Requests may be faxed to (518) 473-6735 or completed online at <http://www.otda.state.ny.us/oah/forms.asp> , or called in to (800) 342-3334. The information about fair hearing rights and case conferences is included in every CNS (client notice system) notice that is produced.
6. Every CNS notice also advises the applicant/recipient about continued aid and the specific time periods they have to request a fair hearing.
7. Monroe County receives a file of new Fair Hearing request from OAH every day. The local Fair Hearing Office (FHO) assigns the hearings to the responsible task group and to the correct MON pool. The task group reviews the scanned documents (file) and the hearings are tracked in our database. The requests come to us on a form called the 1891. Approximately 2 - 3 weeks after the request, OAH sends a notice of the FH to the applicant/recipient. The agency receives this same information in a daily file on the form 457.
8. The 457 is the form that the OAH uses to tell us about the FH “calendar.” We usually have nine to ten fair hearing calendars scheduled every week in Monroe County. Each calendar is scheduled with approximately twenty cases; ten are scheduled at 9:00 or 9:30 am and ten are scheduled at 1:00 pm. The calendar may also contain a number of cases adjourned from previous calendars or emergency issues added on.

9. The fair hearing database produces reports that alert the task group to all new requests for fair hearings, and lets them know whether the client has requested “aid continuing” (see definition from TASB pages). The task group is also advised of all cases that are overdue for continued aid. It is the responsibility of the task group to make sure that the cases eligible for continued aid receive it within five business days of the notification from OAH. The task group receives lists for cases where OAH has issued a decision on the hearing and is responsible to make sure that the agency complies with the decision within the specified time period.
10. Task groups are required to review the requests for FH that come in every day on the form 1891. The task group can review the case file at that time and contact the client to discuss the request. The agency encourages the task groups to conduct a case conference whenever possible in an attempt to resolve the issue before the fair hearing.
11. If the task groups FH liaison and client are unable to resolve the issue, the client has the right to pursue the fair hearing.
12. The Senior Examiner assigned to present the case will review the complete case file and prepare a packet of evidence to submit at the hearing. If the Senior Examiner has questions about the agency action, they contact the processing Examiner to discuss the case. Sometimes the agency Examiner or other individual comes to the hearing to testify about the agency’s actions.
13. All FHs are held at 691 St. Paul St. and at 111 Westfall Road. On the date of the hearing, clients are logged into the agency’s WRATS (Waiting room appointment tracking system) as they sign in with the case aide. Clients should come prepared with any evidence they have to support their case. This will avoid unnecessary delays and adjournments. The Hearing Officers determine the order in which cases will be called. Generally, they call cases on a first come first served basis but may make exceptions depending on special needs.
14. The Hearing Officer introduces him or herself and gathers basic information from the client. The hearing is digitally recorded over the telephone. The agency is asked to present its case to support the action first. The client is given the same copy of agency evidence as the Hearing Officer is given. The agency representative goes through the evidentiary packet page by page explaining the reasons for the agency actions. The Hearing Officer and client may ask questions about the agency’s case. Then the client is given the opportunity to present his/her case. The Hearing Officer and agency representative has the opportunity to ask questions of the client. Once all evidence has been heard, the Hearing Officer “closes the record”.
15. The Hearing Officer reviews the evidence and writes a decision. Decisions are reviewed by a Supervising Administrative Law Judge before being issued to the client and agency.
16. Generally, final decisions are issued within 3 to 6 weeks of the Fair Hearing and must be processed by MCDHS within 10 business days of receipt from the State. However, some cases require MCDHS to request additional or updated information from the client in order to process the decision. These situations may take longer than 10 business days to bring the issues to a final resolution.

## Chapter 7 Daycare

### General

1. Daycare subsidy (DC) payments can be authorized for parents to attend Temporary Assistance employment-related activities only.
2. Rehabilitation appointments can be included as long as they are part of the client's Employment Development Plan (EDP).

### Daycare Application Process for Temporary/Cash Assistance clients

1. Client and DC provider complete a CHILD CARE STATEMENT (form MCDSS 932) and submit to the Monroe County Department of Human Services. The agency will evaluate for need and eligibility and inform client and daycare provider of outcome of request.
2. If DC will be provided by a Center, Group or Registered provider the Examiner checks to make sure the provider is currently licensed and in active status. If provider checks out, daycare can be authorized for Job Search or any other approved employment related program including substance use disorder treatment. **No authorization for payment is guaranteed until both client and Provider have received a Notice of Decision issued by MCDHS.**
3. If DC provider is an informal/legally exempt provider, the provider and client must fill out the current version of the ENROLLMENT FORM FOR PROVIDER OF LEGALLY-EXEMPT FAMILY CHILD CARE AND LEGALLY-EXEMPT IN-HOME CHILD CARE (OCFS-LDSS-4699), and return it to the Child Care Council (CCC). CCC will process the enrollment form and may inspect the home where daycare is to be provided. Payment will be authorized **ONLY** when CCC approves and enrolls the provider and the client is proved eligible by MCDHS & **a notice of decision is received by both provider and client issued by MCDHS.**
4. If the provider/client does not return the OCFS-LDSS-4699 to CCC and receive enrollment approval no daycare payment will be authorized.

If you have general daycare questions email the daycare mailbox;

[Dfa2a26.sm.monroe.childcare-dhs@dfa.state.ny.us](mailto:Dfa2a26.sm.monroe.childcare-dhs@dfa.state.ny.us)

## Available Daycare Subsidy Programs for working Parents/Guardians:

1. Income Eligible Daycare (IEDC)\*
2. Transitional Child Care (TCC)
3. Child Care Dollars (CC\$) This program is administered by the Workforce Development Institute, clients may apply via:\*

**Corinne Zajac**  
**czajac@wdiny.org**  
**Phone: 585-530-2402**  
**Fax: 585-546-3352**  
**30 North Union Street, First Floor**  
**WDI Child Care Office**  
**Rochester, NY 14607**

\*\**Income Ceiling Limits* for these subsidies as of **June 2016** are shown in table below\*\*

Ceiling	IEDC 165%		TCC 200%		CC \$ 275%	
	Annual	Monthly	Annual	Monthly	Annual	Monthly
2	\$26,433	\$2,203	\$32,040	\$2,670	\$44,055	\$3,671
3	\$33,264	\$2,772	\$40,320	\$3,360	\$55,440	\$4,620
4	\$40,095	\$3,342	\$48,600	\$4,050	\$66,825	\$5,568
5	\$46,926	\$3,911	\$56,880	\$4,740	\$78,210	\$6,517
6	\$53,757	\$4,480	\$65,160	\$5,430	\$89,595	\$7,466

### **Eligibility Information applicable to all of these Daycare subsidy programs:**

1. Parents/guardians must be **actively working at a job weekly**.
2. Hours of care being requested **must coincide** with the Parents/Guardians work hours (There are times when MCDHS will pay for up to 6 hours of sleep time, but need must be verified and then approved by administration).
3. The hours of care authorized for payment is equal to the **actual work hours added to the travel time allowed** (Up to an hour from provider to job site and then up to an hour from job site to provider).
4. Childcare payment can be authorized for Teen parents **ACTIVELY** attending high school **with no work requirement**.
5. Child care payment can be authorized for Parents/Guardians **ACTIVELY** attending college with **at least a 2.0** grade point average (limited to a 2 year degree or up to 24 months of a training course, *No 2 plus 2 programs or 4 year programs are eligible*) in Addition: **The Parent/Guardian student must work an average of 17.5 hours per week**.
6. The client is required to pay a weekly family share (parent fee) to the provider; this amount is calculated when eligibility is determined and will be noted on the notice of decision sent to client & provider by MCDHS.

**\*An application for childcare must be submitted along with day care request for these programs.**

## INSTRUCTIONS FOR DAYCARE PROVIDERS

- Daycare subsidies will only be paid for actual daycare services provided at the approved location. Monroe County will not pay for the cost of transporting children nor time spent transporting children.
- Web submittal through CCTA is the preferred method of submission for all attendance. Web submittal will result in more accurate and timely payment processing. When using web submittal you must print a copy of the completed attendance record for each child and have the parent sign it. This signed copy should be kept at the program. Providers using Biometric (fingerprint) attendance tracking do not have to obtain and retain parent signatures unless they choose to do so for their own records.
- Make sure your attendance sheets are filled out completely and accurately **before** asking the parent to sign their approval. You should never require that a parent sign a blank or partial attendance sheet or sign prior to the last day their child attends in any month.
- Attendance sheets should be signed by you and the parent before submitting them to Monroe County. Submitting unsigned attendance sheets could delay or disallow payment. Completed and signed attendance sheets must be submitted to Monroe County by the 5<sup>th</sup> of each month to ensure timely processing of payment.
- Attendance sheets should reflect the actual time of day that care begins and ends. If a child did not attend daycare due to illness, vacation, or any other reason, that child should be marked on the attendance sheet as absent for that day. Monroe County's approved Child Care Plan does not allow payment for absences.
- If you ask parents to sign a contract for your daycare services, please understand that Monroe County is not a party to that contract and therefore is not responsible for compliance with the terms of that contract.
- If a child in your care attends another program (such as Universal Pre-K) you cannot bill the daycare subsidy program for the same hours the child spends in the other program.
- Overpayments due to billing errors on your part will require repayment back to Monroe County. Intentional misrepresentation of daycare services provided could result in a 5 year disqualification from receiving daycare subsidy payments, licensing sanctions, or prosecution for fraud.
- If a parent is required by Monroe County to pay a weekly parent fee, you **must** collect the parent fee directly from the parent. Failure to collect the weekly parent fee may adversely impact your ability to receive future payments from Monroe County. The monthly payment amount made by the County to the provider (or parent if care is provided in the child(ren)'s home) may vary based on the kind of rate, number of days in a month, number of days for which care is provided, and/or pro-ration of the parent fee.
- If you submit attendance sheets that include overtime, please make include a note explaining the reason for the overtime and, if possible, the name of the person at DHS with whom you discussed the need for overtime.

## INSTRUCTIONS FOR PARENTS IN AN APPROVED ACTIVITY

- Monroe County can only pay for actual daycare services provided and only for care provided during the hours of your employment or your participation in an approved activity (plus a maximum of 60 minutes of your travel to and from your job or activity). **You will be liable for payment to your provider for any care provided not payable by the subsidy program.**
- Only sign an attendance sheet after your provider has filled it out completely and accurately. Attendance sheets are used to bill Monroe County for daycare services provided to your child, therefore you and your provider are responsible for the attendance sheet's accuracy and completeness. Never sign a blank attendance sheet. Never sign an attendance sheet prior to the last day that your child attended that month (eg. signing on the 25<sup>th</sup> but the child attended until the 30<sup>th</sup>).
- If you sign a contract with your provider for daycare services, please understand that Monroe County is not a party to that contract and therefore is not responsible for compliance with the terms of that contract. **You will be liable for payment to your provider for any care provided that is not billable to the subsidy program.**
- Monroe County cannot pay for any daycare absences, whether due to illness, vacation, or program closures.
- You must notify Monroe County within ten (10) days of any changes that may affect your subsidy case (change in income, household composition, address, employment, etc). Overpayments resulting from a failure to notify us of changes will need to be repaid by you to Monroe County. Intentional misrepresentations may lead to program sanctions and/or prosecution for fraud.

## Chapter 8 Transportation

1. A monthly unlimited ride bus pass is provided for all clients who are assigned to an employment related activity.
2. If the client provides a valid title and registration for their automobile, current insurance and a driver's license, a gas allowance can be authorized for employment related activities.
3. Employed clients who receive Temporary Assistance will have a bus pass sent to them in the mail each month.
4. Clients attending a substance use disorder treatment program will get a bus pass from the treatment provider.
5. Clients in an approved training or school will receive a monthly bus pass.

## Chapter 9 Domestic Violence

1. Domestic Violence is a pervasive problem that affects people from all walks of life, including Temporary Assistance clients.
2. Victims of domestic violence often enter the Social Services system with a unique set of needs that may be very different from those of other clients. Safety is a primary concern that can subsequently affect the client's ability to meet and comply with Temporary Assistance Program requirements.
3. The Federal Family Violence Option allows States to address the safety needs of domestic violence victims and their children within the State's Temporary Assistance for Needy Families (TANF) plan.
4. All Temporary Assistance clients are screened for domestic violence at the time of application, recertification and at any other time that it is identified.
5. When a client discloses information regarding domestic violence they are given the opportunity to meet with a Domestic Violence Liaison. The Domestic Violence Liaison makes a **confidential** assessment of safety issues and the client's ability to comply with Temporary Assistance Program requirements. Information disclosed during this **confidential** assessment is not included in the client's Case Record; it is stored in a separate and secure location to ensure confidentiality.

## Chapter 10 Work Pay\$- Tax Credits, Transitional and Other Assistance

**TABLE 09 - Income Comparison for a 2 Person Household (Parent & 1 Child)**

Source	\$ Monthly		\$ Monthly		\$ Monthly	
	No Wages	Wages \$145.00 Per Week	No Wages	Wages \$200.00 Per Week	No Wages	Wages \$227.50 Per Week
Wages	0.00	628.00	0.00	866.00	0.00	985.00
Cash Grant	643.00	373.00	643.00	254.00	643.00	195.00
SNAP	357.00	292.00	357.00	270.00	357.00	259.00
Day Care	None	Available	None	Available	None	Available
Transportation	None	Bus Pass	None	Bus Pass	None	Bus Pass
Sub Total	1,000.00	1,293.00	1,000.00	1,390.00	1,000.00	1,439.00
Yearly Total	12,000.00	15,516	12,000.00	16,680	12,000.00	17,268
Difference	\$293.00/mo or \$3,516.00 annually		\$390.00/mo or \$4,680.00 annually		\$439.00/mo or \$5,268.00 annually	

### Earned Income Tax Credit

The Earned Income Tax Credit is a refundable credit. This means you can get this money when you had earned income whether you paid taxes or not. It is based on a percentage of your income and how many children you claim. (2 children is the maximum for this credit). This money can be used to catch up bills, buy a car, get a washer and dryer or any other purchase for which you may not have been able to save. This money doesn't count against your grant.

### Advanced Earned Income Tax Credit

This is a process where you can get part of your Earned Income Tax Credit each week in your paycheck (if your employer participates). It is based on the same factors as Earned Income Tax Credit and you can get up to \$31.00/week. This money also does not count against your grant. Why would you want to get Advanced Earned Income Tax Credit? Let us say you are eligible to receive \$25.00/week. This might be your car insurance bill each month or your utility bill; it is intended to help you make ends meet. Be aware that any amount you receive as Advanced Earned Income Tax Credit will be subtracted from the tax return you file the following year.

**TABLE 10 - Income Comparison for a 3 Person Household (Parent & 2 Children)**

Source	\$ Monthly		\$ Monthly		\$ Monthly	
	No Wages	Wages \$145.00 Per Week	No Wages	Wages \$200.00 Per Week	No Wages	Wages \$227.50 Per Week
Wages	0.00	628.00	0.00	866.00	0.00	985.00
Cash Grant	786.00	516.00	786.00	397.00	786.00	338.00
SNAP	472.00	403.00	472.00	381.00	472.00	370.00
Day Care	None	Available	None	Available	None	Available
Transportation	None	Bus Pass	None	Bus Pass	None	Bus Pass
Sub Total	1,258.00	1,547.00	1,258.00	1,644.00	1,258.00	1,693.00
Yearly Total	15,096.00	18,564.00	15,096.00	19,728.00	15,096.00	20,316.00
Difference	\$289.00/mo or \$3,468.00 annually		\$386.00/mo or \$4,632.00 annually		\$435.00/mo or \$5,220.00 annually	

**Earned Income Tax Credit**

The Earned Income Tax Credit is a refundable credit. This means you can get this money when you had earned income whether you paid taxes or not. It is based on a percentage of your income and how many children you claim. (2 children is the maximum for this credit). This money can be used to catch up bills, buy a car, get a washer and dryer or any other purchase for which you may not have been able to save. This money doesn't count against your grant.

**Advanced Earned Income Tax Credit**

This is a process where you can get part of your Earned Income Tax Credit each week in your paycheck (if your employer participates). It is based on the same factors as Earned Income Tax Credit and you can get up to \$31.00/week. This money also does not count against your grant. Why would you want to get Advanced Earned Income Tax Credit? Let us say you are eligible to receive \$25.00/week. This might be your car insurance bill each month or your utility bill; it is intended to help you make ends meet. Be aware that any amount you receive as Advanced Earned Income Tax Credit will be subtracted from the tax return you file the following year.

## **Transitional Assistance**

1. Child Care:
  - a. Assists with affordable child care for up to one year.
  - b. Fees are on a sliding scale.
  - c. Available to those whose Temporary Assistance case has been closed due to excess earned income.
  - d. For more information, call 753-2750.
  
2. Medicaid:
  - a. Provides health insurance coverage for medical and pharmacy needs
  - b. Based on income and resources.
  - c. Eligibility lasts up to 12 months.
  - d. Contact assigned Temporary Assistance worker for more information.
  
3. Supplemental Nutrition Assistance Program:
  - a. Stretches food dollars.
  - b. Based on income and needs.
  - c. Contact assigned Temporary Assistance worker for more information.

## **Other Assistance**

1. Home Energy Assistance Program (HEAP).
  - a. Financial assistance with high fuel costs to prevent shut offs and heating fuel outages.
  - b. Eligibility is based on income, family size and fuel type.
  - c. For HEAP information, call 753-6477.
  
2. Home Weatherization:
  - a. Reduces fuel costs.
  - b. Owners and renters can have property weatherized.
  - c. Eligibility is based on income and household size.
  - d. For more information about the Weatherization Program:
    - For properties located within the City of Rochester call Action for a Better Community at 442-4160
    - For properties located outside the City of Rochester call PathStone at 442-2030
  
3. Child Support:
  - a. Increases income to the household.
  - b. Children not living with both parents are eligible.
  - c. The absent parent pays support for their child.
  - d. For information, call (888) 208-4485.

4. Working Men and Women's Wardrobe:
  - a. Assist with establishing a suitable wardrobe for work.
  - b. A wide range of high quality professional clothing is available.
  - c. Client must meet income guidelines.
  - d. For an appointment, call the Volunteers of America

## Chapter 11 Income Guidelines and Cash Grant Tables

<b>TABLE 11 - 2016 Income Guidelines for Day Care Programs</b>						
<b>Ceiling</b>	<b>IEDC 165%</b>		<b>TCC 200%</b>		<b>CC \$</b>	
<b>Household of</b>	<b>Annual</b>	<b>Monthly</b>	<b>Annual</b>	<b>Monthly</b>	<b>Annual</b>	<b>Monthly</b>
<b>2</b>	<b>\$26,433</b>	<b>\$2,203</b>	<b>\$32,040</b>	<b>\$2,670</b>	<b>\$44,055</b>	<b>\$3,671</b>
<b>3</b>	<b>\$33,264</b>	<b>\$2,772</b>	<b>\$40,320</b>	<b>\$3,360</b>	<b>\$55,440</b>	<b>\$4,620</b>
<b>4</b>	<b>\$40,095</b>	<b>\$3,342</b>	<b>\$48,600</b>	<b>\$4,050</b>	<b>\$66,825</b>	<b>\$5,568</b>
<b>5</b>	<b>\$46,926</b>	<b>\$3,911</b>	<b>\$56,880</b>	<b>\$4,740</b>	<b>\$78,210</b>	<b>\$6,517</b>
<b>6</b>	<b>\$53,757</b>	<b>\$4,480</b>	<b>\$65,160</b>	<b>\$5,430</b>	<b>\$89,595</b>	<b>\$7,466</b>

<b>Table 12 – 10/1/2016 Income Guidelines for Supplemental Nutrition Assistance Program (SNAP)</b>					
<b>Household Size</b>	<b>Maximum Gross Monthly Income 165% of Poverty</b>	<b>Maximum Gross Monthly Income 150% of Poverty</b>	<b>Maximum Gross Monthly Income 130% of Poverty</b>	<b>Maximum Net Monthly Income 100% of Poverty</b>	<b>Maximum Monthly Allotment</b>
<b>1</b>	<b>\$1,634</b>	<b>\$1,485</b>	<b>\$1,287</b>	<b>\$990</b>	<b>\$194</b>
<b>2</b>	<b>\$2,203</b>	<b>\$2,003</b>	<b>\$1,736</b>	<b>\$1,335</b>	<b>\$357</b>
<b>3</b>	<b>\$2,772</b>	<b>\$2,520</b>	<b>\$2,184</b>	<b>\$1,680</b>	<b>\$511</b>
<b>4</b>	<b>\$3,342</b>	<b>\$3,038</b>	<b>\$2,633</b>	<b>\$2,025</b>	<b>\$649</b>
<b>5</b>	<b>\$3,911</b>	<b>\$3,555</b>	<b>\$3,081</b>	<b>\$2,370</b>	<b>\$771</b>
<b>6</b>	<b>\$4,480</b>	<b>\$4,073</b>	<b>\$3,530</b>	<b>\$2,715</b>	<b>\$925</b>
<b>7</b>	<b>\$5,051</b>	<b>\$4,592</b>	<b>\$3,980</b>	<b>\$3,061</b>	<b>\$1,022</b>
<b>8</b>	<b>\$5,623</b>	<b>\$5,112</b>	<b>\$4,430</b>	<b>\$3,408</b>	<b>\$1,169</b>
<b>Each add'l member</b>	<b>+ \$572</b>	<b>+ \$520</b>	<b>+ \$451</b>	<b>+ \$347</b>	<b>+ \$146</b>

**TABLE 13 - Monthly Temporary Assistance Cash Grant - Effective 10/1/12**

<b>Family Size</b>	<b>Basic \$</b>	<b>Rent \$</b>	<b>Heat \$ Gas</b>	<b>Heat \$ Oil</b>	<b>Heat \$ PSC</b>	<b>Monthly \$ Heat Included</b>	<b>Total Monthly \$ Gas Heat</b>	<b>Total Monthly \$ Oil Heat</b>	<b>Total Monthly \$ PSC</b>
1	183	257	54	69	107	440	494	509	547
2	291	298	54	69	107	589	643	658	696
3	389	343	54	69	107	732	786	801	839
4	501	374	56	72	111	875	931	947	986
5	618	405	58	75	117	1,023	1,081	1,098	1,140
6	714	420*	63	81	125	1,134*	1,197*	1,215	1,259
7	811	438*	67	87	134	1,249*	1,316*	1,336	1,383
8+	909	477	71	92	142	1,386	1,457	1,478	1,528
Each Added	97.50								

**\* If no children are in the household, reduce these amounts by \$2.00.**

**When the actual rent exceeds the rent allowance funds from the client's basic allowance make up the difference. The client must pay their monthly heating costs from the total grant when they reside in a unit where heat is not included in the rent.**

## Chapter 12 Links to Web Sites

**Online Supplemental Nutrition Assistance Program application, Prescreen for other benefits, check your EBT account:** <https://www.mybenefits.ny.gov/selfservice/>

*Application Forms* (Forms cannot be completed on line, but can be printed)

1. To apply for Temporary Assistance (TA), Medical Assistance (MA), Medicare Savings Program (MSP), Supplemental Nutrition Assistance Program (SNAP), Services (S) and Child Care (CC) use Statewide Application Form (LDSS-2921). <http://otda.ny.gov/programs/applications/>
2. Medical Assistance (MA), Prenatal Care Assistance Program (PCAP) and Women, Infants and Children (WIC) use Access NY Health Care (DOH-4220).  
[http://www.health.ny.gov/health\\_care/family\\_health\\_plus/application.htm](http://www.health.ny.gov/health_care/family_health_plus/application.htm)  
**OR**  
<http://healthbenefitexchange.ny.gov/>
3. To apply or recertify for Supplemental Nutrition Assistance Program (SNAP), use Supplemental Nutrition Assistance Program Benefits Application/Recertification (LDSS-4826).  
<http://otda.ny.gov/programs/applications/>

### Source Books and Reference Guides

1. Supplemental Nutrition Assistance Program Source Book:  
<http://otda.state.nyenet/dta/Manuals/FSSB.pdf>
2. Medicaid Reference Guide:  
[http://www.health.state.ny.us/health\\_care/medicaid/reference/mrg/index.htm](http://www.health.state.ny.us/health_care/medicaid/reference/mrg/index.htm)
3. Temporary Assistance Source Book (TASB): <http://www.otda.state.ny.us/main/ta/TASB.pdf>

### New York State Department of Health

1. Child Health Plus - <http://www.health.state.ny.us/nysdoh/chplus/index> .
2. Prescription Drug Price Search - <http://rx.nyhealth.gov>

### New York State Office of Temporary and Disability Assistance

1. Fair Hearing Request: <http://www.otda.state.ny.us/oah/forms.asp>
2. How to apply for services: <http://www.otda.state.ny.us/main/apply.asp#disability>
3. Policy directives : <http://www.otda.state.ny.us/main/directives/2009/>

### Federal Government

1. Social Security Online: <http://www.socialsecurity.gov/>

## Chapter 13 - Definitions for Abbreviated Terms

<b>AB</b>	<b>Abortion</b>
<b>ABAWD</b>	<b>Able bodied Adult w/o Dependents</b>
<b>ABEL</b>	<b>Automated Budgeting And Eligibility Logic – creates Temporary Assistance and Food Stamp budgets</b>
<b>ABW</b>	<b>Alternatives for Battered Women</b>
<b>A/C</b>	<b>Aid Continuing</b>
<b>ACCESSVR</b>	<b>Adult Continuing Career Educational Service/Vocational Rehabilitation</b>
<b>AD</b>	<b>Aid to the Disabled</b>
<b>ADA</b>	<b>American’s with Disabilities Act</b>
<b>ADC</b>	<b>Aid to Dependent Children</b>
<b>ADC-EP</b>	<b>ADC Essential Person</b>
<b>ADC-FC</b>	<b>ADC-Foster Care</b>
<b>ADC-U</b>	<b>ADC-Unemployed Parent</b>
<b>ADM</b>	<b>Administrative Directive</b>
<b>AFA</b>	<b>Anticipated Future Action</b>
<b>AFIS</b>	<b>Automated Finger Imaging System</b>
<b>AIDS</b>	<b>Acquired Immune Deficiency Syndrome</b>
<b>AP</b>	<b>Absent Parent</b>
<b>APP-REG</b>	<b>Application Registration</b>
<b>APP-TAD</b>	<b>Application Turnaround Document</b>
<b>A/R</b>	<b>Applicant/Recipient</b>
<b>ARES</b>	<b>Addiction Recovery Employability System – tracks rehab participation</b>
<b>ASAP</b>	<b>As Soon As Possible</b>
<b>BC</b>	<b>Birth Certificate</b>
<b>BEDS</b>	<b>Back End Detection System</b>
<b>BICS</b>	<b>Benefit Issuance &amp; Control System</b>
<b>BOCES</b>	<b>Board of Cooperative Educational Services</b>
<b>BRIA</b>	<b>Bureau of Refugee and Immigration Assistance</b>
<b>CA</b>	<b>Number in Case – depending on context of comment</b>
<b>CA</b>	<b>Continued Aid – depending on context of comment</b>
<b>CAMS</b>	<b>Cash Assistance Management Subsystem</b>
<b>CASAC</b>	<b>Credentialed Alcohol and Substance Abuse Counselor</b>
<b>CASE NO</b>	<b>Case Number</b>
<b>CAT</b>	<b>Category</b>
<b>CBIC</b>	<b>Common Benefit Identification Card</b>
<b>CC</b>	<b>Child Care</b>
<b>CCII</b>	<b>Congregate Care Level II</b>
<b>CCIII</b>	<b>Congregate Care Level III (Adult Home)</b>
<b>CCC</b>	<b>Child Care Council</b>
<b>CE</b>	<b>Categorically Eligible</b>
<b>CFC</b>	<b>Catholic Family Center</b>
<b>CHP A</b>	<b>Child Health Plus A</b>
<b>CHP B</b>	<b>Child Health Plus B</b>
<b>CIN</b>	<b>Client Identification Number</b>
<b>CIP</b>	<b>Crisis Intervention Program</b>
<b>CL</b>	<b>Client</b>

<b>CNS</b>	<b>Client Notice System – State’s system that produces and mails client notices</b>
<b>COLA</b>	<b>Cost of Living Adjustment</b>
<b>COV</b>	<b>Coverage</b>
<b>CPS</b>	<b>Child Protective Services</b>
<b>CS</b>	<b>Child Support</b>
<b>CSEU</b>	<b>Child Support Enforcement Unit</b>
<b>CSMS</b>	<b>Cash Support Management System</b>
<b>CSR</b>	<b>Case Supervisory Review</b>
<b>CT</b>	<b>Case Type</b>
<b>D/A</b>	<b>Drug/Alcohol</b>
<b>DC</b>	<b>Day Care</b>
<b>DE</b>	<b>Data entry</b>
<b>DFAS</b>	<b>Defense Accounting and Finance Services</b>
<b>DFR</b>	<b>District of Fiscal Responsibility</b>
<b>DFY</b>	<b>Division for Youth</b>
<b>DMV</b>	<b>Department of Motor Vehicles</b>
<b>DOB</b>	<b>Date of Birth</b>
<b>DOH</b>	<b>Department of Health – responsible for Medicaid regulations</b>
<b>DOL</b>	<b>Department of Labor</b>
<b>DSSNET</b>	<b>Dept of Social Services Network</b>
<b>EAA</b>	<b>Emergency Assistance for Adults</b>
<b>EAF</b>	<b>Emergency Assistance to Families</b>
<b>EAPP</b>	<b>Employment Alternatives Partnership Program</b>
<b>EBICS</b>	<b>Electronic Benefit Issuance and Control System</b>
<b>EBT</b>	<b>Electronic Benefit Transfer – system allows for payment of grants and food stamps at point of sale</b>
<b>EDC</b>	<b>Expected Date of Confinement</b>
<b>EDP</b>	<b>Employability Development Plan</b>
<b>EFF</b>	<b>Effective</b>
<b>EHP</b>	<b>Enriched Housing Program</b>
<b>EIC</b>	<b>Earned Income Credit</b>
<b>EMedNY</b>	<b>Electronic (online) Medicaid Management System for NYS</b>
<b>EMEVS</b>	<b>Electronic Medicaid Eligibility Verification System</b>
<b>EOC</b>	<b>Educational Opportunity Center</b>
<b>EOP</b>	<b>Educational Opportunity Program</b>
<b>EP</b>	<b>Essential Person</b>
<b>ERT</b>	<b>Employment Related Training</b>
<b>ESN</b>	<b>Emergency Safety Net</b>
<b>ESOL</b>	<b>English as a Second Language</b>
<b>EU</b>	<b>Employment Unit</b>
<b>FA</b>	<b>Family Assistance</b>
<b>FC</b>	<b>Foster Care</b>
<b>FCP</b>	<b>Financial Care Path</b>
<b>FCU</b>	<b>Federal Credit Union</b>
<b>FDC</b>	<b>Family Day Care</b>
<b>FE</b>	<b>Facilitated Enrollment/Enroller</b>

<b>FEDS</b>	<b>Front End Detection System</b>
<b>FEMA</b>	<b>Federal Emergency Management Assistance</b>
<b>FFY</b>	<b>Federal Fiscal Year</b>
<b>FH</b>	<b>Fair Hearing</b>
<b>FHO</b>	<b>Fair Hearing Office</b>
<b>FHP</b>	<b>Family Health Plus</b>
<b>FICA</b>	<b>Federal Insurance Contributions Act</b>
<b>FMV</b>	<b>Fair Market Value</b>
<b>FNP</b>	<b>Federally Non-Participating</b>
<b>FP</b>	<b>Federally Participating</b>
<b>FPBP</b>	<b>Family Planning Benefit Program</b>
<b>FP-SNA</b>	<b>Federally Participating Safety Net</b>
<b>FS</b>	<b>Food Stamps</b>
<b>FSDP</b>	<b>Food Stamp Disaster Plan</b>
<b>FSET</b>	<b>Food Stamp Employment &amp; Training</b>
<b>FSS</b>	<b>Family Self Sufficiency Program</b>
<b>FT</b>	<b>Full Time</b>
<b>FTF</b>	<b>Face to Face</b>
<b>FTP</b>	<b>Failed to Provide</b>
<b>FTR</b>	<b>Failed to Recertify</b>
<b>FV</b>	<b>Furniture Voucher</b>
<b>FYI</b>	<b>For your Information</b>
<b>GFDC</b>	<b>Group Family Day Care</b>
<b>GIS</b>	<b>General Information System</b>
<b>GIT</b>	<b>Gross Income Test</b>
<b>GPP</b>	<b>Guarantee Payment Plan</b>
<b>HAP</b>	<b>Housing Assistance Payment</b>
<b>HCBS</b>	<b>Home &amp; Community Based Services</b>
<b>HEA</b>	<b>Home Energy Allowance</b>
<b>HEAP</b>	<b>Home Energy Assistance Program</b>
<b>HEFPA</b>	<b>Home Energy Fair Practices Act</b>
<b>HH</b>	<b>Household</b>
<b>HIV</b>	<b>Human Immunodeficiency Virus</b>
<b>HMO</b>	<b>Health Maintenance Organization</b>
<b>HO</b>	<b>Hearing Officer</b>
<b>HUD</b>	<b>Housing and Urban Development</b>
<b>ICE</b>	<b>Immigration and Customs Enforcement</b>
<b>ID</b>	<b>Identification Card</b>
<b>IDA</b>	<b>Individual Development Account</b>
<b>IEDC</b>	<b>Income Eligible Day Care</b>
<b>IEDR</b>	<b>Imaging and Enterprise Document Repository</b>
<b>IHE</b>	<b>Inadvertent Household Error</b>
<b>IMA</b>	<b>Industrial Medicine Associates</b>
<b>INF</b>	<b>Department Informational Letter</b>
<b>INA/INS</b>	<b>Immigration and Nationality Act/Services</b>
<b>IPV</b>	<b>Intentional Program Violation</b>
<b>IRA</b>	<b>Individual Retirement Account</b>
<b>IRS</b>	<b>Internal Revenue Service</b>
<b>IV-D</b>	<b>Funding Stream for Child Support – refers to Child Support</b>

<b>JOBS</b>	<b>Job Opportunities &amp; Basic Skills Training Program</b>
<b>JRT</b>	<b>Job Readiness Training</b>
<b>JS</b>	<b>Job Search – or JSO – job search orientation</b>
<b>LIF</b>	<b>Low Income Families</b>
<b>LCM</b>	<b>Local Commissioners Memorandum</b>
<b>LDSS</b>	<b>Local Department of Social Services</b>
<b>LLS</b>	<b>Landlord Statement</b>
<b>LTA or LLTA</b>	<b>Landlord Tenant Agreement</b>
<b>LPR</b>	<b>Lawful Permanent Resident (alien status)</b>
<b>LRR</b>	<b>Legally Responsible Relative</b>
<b>LTR</b>	<b>Lawful Temporary Resident</b>
<b>MA</b>	<b>Medicaid/Medical Assistance</b>
<b>MABEL</b>	<b>Medical Assistance Budget Eligibility Program</b>
<b>MAGI</b>	<b>Modified Adjusted Gross Income</b>
<b>MARG</b>	<b>Medical Assistance Reference Guide</b>
<b>MBIWD</b>	<b>Medicaid Buy-In for the Working Disabled</b>
<b>MC</b>	<b>Managed Care</b>
<b>MCC</b>	<b>Monroe Community College</b>
<b>MCDHS</b>	<b>Monroe County Department of Human Services</b>
<b>MCH</b>	<b>Monroe Community Hospital</b>
<b>MED A</b>	<b>Medicare A</b>
<b>MED B</b>	<b>Medicare B</b>
<b>MED D</b>	<b>Medicare D</b>
<b>MIR</b>	<b>Mail in Review</b>
<b>MLTC</b>	<b>Managed Long Term Care</b>
<b>MMIS</b>	<b>Medicaid Management Information System</b>
<b>MMMNA</b>	<b>Minimum Monthly Maintenance Needs Allowance</b>
<b>MOE</b>	<b>Maintenance of Effort</b>
<b>MRB/A</b>	<b>Mass Re-budgeting/Reauthorization</b>
<b>MSP</b>	<b>Medicare Savings Program</b>
<b>NA</b>	<b>Not Applicable</b>
<b>NAMI</b>	<b>Net Available Monthly Income</b>
<b>NDA</b>	<b>Non-Dependent Relative</b>
<b>NH</b>	<b>Nursing Home</b>
<b>NHTDWP</b>	<b>Nursing Home Transition Diversion Wavier Program</b>
<b>NLU</b>	<b>Non Legal Union</b>
<b>NOD</b>	<b>Notice of Decision</b>
<b>NPA/FS</b>	<b>Non-Public Assistance Food Stamps</b>
<b>NPC</b>	<b>Non Parent Caretaker</b>
<b>NYC</b>	<b>New York City</b>
<b>NYCRR</b>	<b>NY Codes of Rules and Regulations</b>
<b>NYS</b>	<b>New York State</b>
<b>NYSNIP</b>	<b>New York State Nutrition Improvement Program - food stamps for SSI clients</b>
<b>OACES</b>	<b>Office of Adult and Career Education Services</b>
<b>OAH</b>	<b>Office of Administrative Hearings</b>
<b>OASAS</b>	<b>Office of Alcohol and Substance Abuse Services</b>
<b>OASDI</b>	<b>Old-Age, Survivors Disability Insurance</b>
<b>OCFS</b>	<b>Office of Children and Family Services</b>
<b>OHIP</b>	<b>Office of Health Insurance Programs</b>

<b>OJT</b>	<b>On the Job Training</b>
<b>OMH</b>	<b>NYS Office of Mental Health</b>
<b>OMRDD</b>	<b>NYS Office of Mental Retardation/Developmental Disabilities</b>
<b>OPM</b>	<b>Office of Professional Management</b>
<b>OPT</b>	<b>Online Paper Trail</b>
<b>OSS</b>	<b>On Site Scanning</b>
<b>OTDA</b>	<b>Office of Temporary and Disability Assistance</b>
<b>PA</b>	<b>Public Assistance</b>
<b>PAR</b>	<b>Parent</b>
<b>PASB</b>	<b>Public Assistance Source Book</b>
<b>PCP</b>	<b>Pre-paid Capitation Plan (HMO)</b>
<b>PE</b>	<b>Presumptive Eligibility</b>
<b>PEPR</b>	<b>Process of Energy Payment Reconciliation</b>
<b>PHA</b>	<b>Public Housing Authority</b>
<b>PIA</b>	<b>Personal Incidental Account</b>
<b>PIN</b>	<b>Personal Identification Number</b>
<b>PNA</b>	<b>Personal Needs Allowance</b>
<b>PNG</b>	<b>Persona Non Grata</b>
<b>POS</b>	<b>Point of Sale</b>
<b>PNOTE</b>	<b>Promissory Note</b>
<b>PRWORA</b>	<b>Personal Responsibility &amp; Work Opportunity Recon Act</b>
<b>PRUCOL</b>	<b>Permanently Residing in the US under color of the law</b>
<b>PSC</b>	<b>Public Service Commission</b>
<b>PT</b>	<b>Part Time</b>
<b>PTR</b>	<b>Paths to Recovery</b>
<b>QC</b>	<b>Quality Compliance</b>
<b>QMB</b>	<b>Qualified Medicare Beneficiary</b>
<b>QR</b>	<b>Quarterly Reporting for TA purposes</b>
<b>QRT</b>	<b>Quality Review Team</b>
<b>RAP</b>	<b>Refugee Assistance Program</b>
<b>REGS</b>	<b>Regulations</b>
<b>RFC</b>	<b>Returned For Corrections</b>
<b>RFI</b>	<b>Resource File Integration</b>
<b>RGE</b>	<b>Rochester Gas and Electric</b>
<b>RSDI</b>	<b>Retirement Survivors Disability Insurance</b>
<b>RTW</b>	<b>Returned to worker (for corrections) OR Return to Work (for clients)</b>
<b>RVI</b>	<b>Resource Verification Indicator</b>
<b>SAO</b>	<b>Single Authorization Order</b>
<b>SAV</b>	<b>Savings Account</b>
<b>S/CC</b>	<b>Single/Childless Couple</b>
<b>SDX</b>	<b>State Data Exchange – gives us information on SSI benefits</b>
<b>SH</b>	<b>Sojourner House</b>
<b>SHEA</b>	<b>Supplemental Home Energy Allowance</b>
<b>SIR</b>	<b>Service Issue Resolution – our internal customer service database</b>
<b>SIU</b>	<b>Special Investigations Unit</b>
<b>SLIMB</b>	<b>Specified Low Income Medicare Beneficiary</b>

<b>SM</b>	<b>Semi-monthly</b>
<b>SN</b>	<b>Safety Net</b>
<b>SNAP</b>	<b>Supplemental Nutrition Assistance Program – formerly known as food stamps</b>
<b>SNF</b>	<b>Skilled Nursing Facility</b>
<b>SOLQ</b>	<b>State On-Line Query – gives us information on SSI benefits</b>
<b>SSA</b>	<b>Social Security Administration</b>
<b>SSD</b>	<b>Social Security Disability</b>
<b>SSI</b>	<b>Supplemental Security Income</b>
<b>SSN</b>	<b>Social Security Number</b>
<b>Stip</b>	<b>Stipulation (in a Fair Hearing)</b>
<b>SUA</b>	<b>Standard Utility Allowance</b>
<b>TA</b>	<b>Temporary Assistance</b>
<b>T/A</b>	<b>Turn-around</b>
<b>TANF</b>	<b>Temporary Assistance for Needy Families</b>
<b>TAP</b>	<b>Tuition Assistance Program</b>
<b>TASB</b>	<b>Temporary Assistance Source Book</b>
<b>TB</b>	<b>Transitional Benefits</b>
<b>TEAP</b>	<b>Training &amp; Employment Assistance Program</b>
<b>TMA</b>	<b>Transitional Medicaid Assistance</b>
<b>TPHI</b>	<b>Third Party Health Insurance</b>
<b>TPR</b>	<b>Third Party Resource</b>
<b>TRO</b>	<b>Temporary Restraining Order</b>
<b>UIB</b>	<b>Unemployment Insurance Benefits</b>
<b>UVR</b>	<b>Utility Verification Request</b>
<b>VA</b>	<b>Veteran’s Administration</b>
<b>VESID</b>	<b>Vocational Educational Services for Individuals with Disabilities</b>
<b>VISTA</b>	<b>Volunteers in Service to America</b>
<b>VITA</b>	<b>Volunteer Income Tax Assistance</b>
<b>V#</b>	<b>Vendor Number</b>
<b>VOCED</b>	<b>Vocational Education</b>
<b>WC</b>	<b>Worker’s Compensation</b>
<b>WCP</b>	<b>Wilson Commencement Park</b>
<b>WEP</b>	<b>Work Experience Program</b>
<b>WFSNAPI</b>	<b>Working Families Supplemental Nutrition Assistance Program Initiative</b>
<b>WIC</b>	<b>Women, Infants and Children</b>
<b>WIN</b>	<b>Work Incentive Program</b>
<b>WMS</b>	<b>Welfare Management System – State’s computer system for welfare</b>
<b>WRATS</b>	<b>Waiting Room Appointment Tracking System</b>
<b>WTW</b>	<b>Welfare to Work</b>
<b>WTWCMS</b>	<b>Welfare to Work Caseload Management System</b>
<b>YIP</b>	<b>Youth Internship Program</b>
<b>YOP</b>	<b>Youth Opportunity Program</b>
<b>YWCA</b>	<b>Young Women’s Christian Association</b>

## Chapter 14 Financial Assistance Points of Contact

<b>Questions On Pending Temporary Assistance (Cash Benefits) and Supplemental Nutrition Assistance Program Cases</b>	
<ul style="list-style-type: none"><li>• By phone – call 753-2780</li><li>• By e-mail- <a href="mailto:dfa2a26.sm.monroe.intakeII@dfa.state.ny.us">dfa2a26.sm.monroe.intakeII@dfa.state.ny.us</a></li><li>• By fax – 753-5315</li></ul>	
<b>Questions On Active Temporary Assistance (Cash Benefits) Cases</b>	
<ul style="list-style-type: none"><li>• By phone- 753-2750</li></ul>	<u>Care Management</u>
Last name of case starts with A-DZ	753-2766
Last name of case starts with E-LE	753-2767
Last name of case starts with Lf-Rod	753-2768
Last name of case starts with Roe-Z	753-2769
To reschedule your TA recert appointment – 753-6229	
<ul style="list-style-type: none"><li>• By e-mail – <a href="mailto:dfa2a26.sm.TA.Customer.Service@dfa.state.ny.us">dfa2a26.sm.TA.Customer.Service@dfa.state.ny.us</a></li><li>• By fax:<ul style="list-style-type: none"><li>○ 753-6305 to the Care Management Workgroup</li><li>○ 753-6924 to the Self Sufficiency Workgroup</li></ul></li></ul>	
<b>Questions On Active Supplemental Nutrition Assistance Program Cases ( Not in receipt of Cash Assistance)</b>	
<ul style="list-style-type: none"><li>• By phone – call 753-2740</li><li>• By e-mail at- <a href="mailto:dfa2a26.sm.Monroe.Team41@dfa.state.ny.us">dfa2a26.sm.Monroe.Team41@dfa.state.ny.us</a></li><li>• By fax – 753-6306</li></ul>	
<b>Questions On Active Medicaid Cases ( Not in receipt of Cash Assistance or SSI )</b>	
<ul style="list-style-type: none"><li>• By phone – call 753-2760</li><li>• By e-mail at- <a href="mailto:dfa2a26.sm.Monroe.Team40@dfa.state.ny.us">dfa2a26.sm.Monroe.Team40@dfa.state.ny.us</a><ul style="list-style-type: none"><li>○ If you need to contact us regarding a child support issue, please e-mail: <a href="mailto:dfa2a26.sm.monroe.Child.Support.Liason@dfa.state.ny.us">dfa2a26.sm.monroe.Child.Support.Liason@dfa.state.ny.us</a></li><li>○ If you have a question regarding a nursing home or hospital bill for the aforementioned population, please e-mail: <a href="mailto:dfa2a26.sm.monroe.Medicaid.Specialty@dfa.state.ny.us">dfa2a26.sm.monroe.Medicaid.Specialty@dfa.state.ny.us</a></li></ul></li><li>• By fax – 753-5029</li></ul>	

## Long Term Care Medicaid

<b>Coordinator</b>	Barbara Bloomer	<a href="mailto:Barbara.bloomer@dfa.state.ny.us">Barbara.bloomer@dfa.state.ny.us</a>	753-6248
<p><b>Senior Plus</b> - This office handles Community Medicaid for individuals age 65 years and older residing in the community as well as Chronic Care Medicaid for those individuals residing in a nursing home regardless of age.</p>			
<b>Senior Plus Undercare</b>	<a href="mailto:dfa2a26.sm.monroe.senior.plus@dfa.state.ny.us">dfa2a26.sm.monroe.senior.plus@dfa.state.ny.us</a>		<ul style="list-style-type: none"> <li>• By phone 753-6559</li> <li>• By fax- 753-6981</li> </ul>
<b>Senior Plus Eligibility</b>	<a href="mailto:dfa2a26.sm.monroe.senior.plus@dfa.state.ny.us">dfa2a26.sm.monroe.senior.plus@dfa.state.ny.us</a>		<ul style="list-style-type: none"> <li>• By phone -753-6485</li> <li>• By fax – 753-6916</li> </ul>
<p><b>SSI – Medicaid</b></p>			
<b>Team 49 – SSI MA</b>	<a href="mailto:dfa2a26.sm.monroe.MA-SSI@dfa.state.ny.us">dfa2a26.sm.monroe.MA-SSI@dfa.state.ny.us</a>		<ul style="list-style-type: none"> <li>• By phone - 753-5118</li> <li>• By fax – 753-6163</li> </ul>
<p><b>Home Care Services Unit</b> - This unit conducts social and medical assessments to determine eligibility for home care services for chronically ill Medicaid clients to enable them to live safely in the community as well as approval for Title XX chore services. This unit also provided oversight of the community based services after the approved services are granted.</p>			
<b>Home Care Services Unit</b>	For general information regarding home care services call 753-5119		

## Chapter 15 Child and Family Services Points of Contact

<b>Child Protective Services</b>
New York State Child Abuse Hotline - <b>1-800-342-3720</b>
<b>Adult Protective Services (APS)</b>
<b>During business hours, if the individual lives:</b>
West of the Genesee River call - <b>753-6554</b>
East of the Genesee River call - <b>753-6535</b>
❖ An APS after hours worker is available on Saturday, Sunday, and Holidays – for the APS After Hours worker call - <b>461-5698</b>

## Chapter 16 – DHS Administration

<b>Commissioner</b>	Corinda Crossdale	<a href="mailto:corinda.crossdale@dfa.state.ny.us">corinda.crossdale@dfa.state.ny.us</a>	753-6430
<b>Director, Financial Assistance</b>	Denise Read	<a href="mailto:denise.read@dfa.state.ny.us">denise.read@dfa.state.ny.us</a>	753-6519
<b>Director, Child and Family Services</b>	Amy Natale-McConnell	<a href="mailto:amy.natale-mcconnell@dfa.state.ny.us">amy.natale-mcconnell@dfa.state.ny.us</a>	753-6431

### Financial Assistance

<b>Director, Financial Assistance</b>	Denise Read	<a href="mailto:denise.read@dfa.state.ny.us">denise.read@dfa.state.ny.us</a>	753-6519
<ul style="list-style-type: none"> <li>• <b>Emergency Housing</b></li> <li>• <b>After Hours Coverage Program</b></li> <li>• <b>Transitional Housing</b></li> </ul>			
<b>Financial Assistance Coordinator</b>	Randy Scott	<a href="mailto:randy.scott@dfa.state.ny.us">randy.scott@dfa.state.ny.us</a>	753 - 6775
<ul style="list-style-type: none"> <li>• <b>Assessment Unit</b></li> <li>• <b>Centralized Document Management Unit</b></li> <li>• <b>Day Care</b></li> <li>• <b>Westfall Road and St Paul Street Waiting Rooms</b></li> <li>• <b>Out of County Applications</b></li> </ul>			
<b>Financial Assistance Coordinator</b>	Lisa Connors	<a href="mailto:lisa.connors@dfa.state.ny.us">lisa.connors@dfa.state.ny.us</a>	753-6119
<ul style="list-style-type: none"> <li>• <b>Intake I Workgroup</b> <ul style="list-style-type: none"> <li>○ Screening</li> <li>○ Emergency Assistance</li> <li>○ In-depth Interviews</li> </ul> </li> <li>• <b>Intake II Workgroup</b> <ul style="list-style-type: none"> <li>○ Processing of Pending Applications</li> </ul> </li> <li>• <b>Domestic Violence Liaison</b></li> </ul>			
<b>Financial Assistance Coordinator</b>	Elizabeth O'Brien	<a href="mailto:elizabeth.obrien@dfa.state.ny.us">elizabeth.obrien@dfa.state.ny.us</a>	753-6024

<ul style="list-style-type: none"> <li>• <b>Self Sufficiency Task Group</b> - This group answers questions regarding employment, chemical dependency, mental health issues, etc. This workgroup is also responsible for conducting scheduled interviews on active Temporary Assistance cases for recertification, add-ons, Etc., as well as scheduled interviews related to employment activities.</li> </ul>			
<b>Financial Assistance Coordinator</b> <ul style="list-style-type: none"> <li>• <b>Quality Review Team</b></li> <li>• <b>Fair Hearings</b></li> </ul>	Christine Couchman	<a href="mailto:Christine.couchman@dfa.state.ny.us">Christine.couchman@dfa.state.ny.us</a>	753-1245
<b>Financial Assistance Coordinator</b> <ul style="list-style-type: none"> <li>• <b>Care Management Task Group-</b> This group handles requests for emergency assistance on active Temporary Assistance Cases, and processes the work for; address changes, add-ons, RG&amp;E issues, benefit and budget changes, etc.</li> </ul>	Kim Rebstock	<a href="mailto:kim.rebstock@dfa.state.ny.us">kim.rebstock@dfa.state.ny.us</a>	753-6390
<b>Financial Assistance Coordinator</b> <ul style="list-style-type: none"> <li>• <b>HEAP &amp; Non-Temporary Assistance Energy Related Emergency Assistance</b></li> <li>• <b>Care Management of Active SNAP Only Cases</b></li> </ul> <p>* These households are not in receipt of Cash Assistance</p>	Deb Hill	<a href="mailto:deborah.hill@dfa.state.ny.us">deborah.hill@dfa.state.ny.us</a>	753-5243
<b>Assistant Manager</b> <ul style="list-style-type: none"> <li>• <b>Child Support Enforcement Unit</b> – This group is responsible for establishing paternity and support and to enforce the collection and disbursement of child support</li> </ul>	Donald Pronti	<a href="mailto:Donald.pronti@dfa.state.ny.us">Donald.pronti@dfa.state.ny.us</a>	753-1427

payments. Clients are interviewed to obtain information for the filing of a petition with Family Court to establish an order.			
<b>Financial Assistance Coordinator</b> <ul style="list-style-type: none"> <li>• <b>Long Term Care Medicaid</b> <ul style="list-style-type: none"> <li>○ Senior Plus (eligibility &amp; maintenance)</li> <li>○ Non-MAGI Intake</li> <li>○ SSI- Medicaid/</li> <li>○ Home Care Services Unit</li> <li>○ AD Unit</li> <li>○ Community MA (maintenance)</li> <li>○ Managed Care</li> <li>○ Managed Long Term Care</li> </ul> </li> </ul>	Barb Bloomer	<a href="mailto:barbara.bloomer@dfa.state.ny.us">barbara.bloomer@dfa.state.ny.us</a>	753-6248

### Child and Family Services

<b>Director, Child and Family Services</b>	Amy Natale-McConnell	<a href="mailto:amy.natale-mcconnell@dfa.state.ny.us">amy.natale-mcconnell@dfa.state.ny.us</a>	753-6431
<b>Administrative Caseworker</b> <ul style="list-style-type: none"> <li>• CPSI - Intake</li> <li>• CPS - After Hours</li> <li>• CPS - Investigation <ul style="list-style-type: none"> <li>○ #1 (Unit 63)</li> <li>○ #3 (Unit 88)</li> <li>○ #6 (Unit 62)</li> <li>○ #8 (Unit 81)</li> </ul> </li> <li>• CPS - Impact Team</li> <li>• Training Team</li> </ul>	Tom Corbett	<a href="mailto:tom.corbett@dfa.state.ny.us">tom.corbett@dfa.state.ny.us</a>	753-5806
<b>Administrative Caseworker</b> <ul style="list-style-type: none"> <li>• CPS - Management <ul style="list-style-type: none"> <li>○ CPS Management A</li> <li>○ CPS Management D</li> <li>○ CPS Management F</li> </ul> </li> </ul>	Diane Barbato	<a href="mailto:diane.barbato@dfa.state.ny.us">diane.barbato@dfa.state.ny.us</a>	753-6771

<ul style="list-style-type: none"> <li>○ <b>CPS Management G</b></li> <li>○ <b>CPS Management K</b></li> <li>○ <b>Visitation Team</b></li> </ul>			
<b>Administrative Caseworker</b> <ul style="list-style-type: none"> <li>● <b>CPS - Investigation</b> <ul style="list-style-type: none"> <li>○ #2</li> <li>○ #10</li> <li>○ #11</li> <li>○ #14</li> <li>○ #15</li> </ul> </li> <li>● <b>Adult Protective East</b></li> <li>● <b>Adult Protective West</b></li> </ul>	Yvonne Plain	<a href="mailto:yvonne.plain@dfa.state.ny.us">yvonne.plain@dfa.state.ny.us</a>	753-5401
<b>Administrative Caseworker</b> <ul style="list-style-type: none"> <li>● <b>CPS - Investigation</b></li> <li>● #7</li> <li>● #12</li> <li>● <b>Preventive Service</b></li> <li>● <b>Preventive Day Care</b></li> <li>● <b>Family Access &amp; Connection Team</b></li> <li>● <b>ATD/JDAI</b></li> <li>● <b>Non Secure Detention</b></li> </ul>	Kathy Cardilli	<a href="mailto:Kathy.cardilli@dfa.state.ny.us">Kathy.cardilli@dfa.state.ny.us</a>	753-5439
<b>Administrative Caseworker</b> <ul style="list-style-type: none"> <li>● <b>CPS – Management</b> <ul style="list-style-type: none"> <li>○ E</li> <li>○ H</li> </ul> </li> <li>● <b>Foster Care Intake</b></li> <li>● <b>Youth Opportunity</b></li> <li>● <b>Residential Services</b></li> </ul>	Jackie Sofia	<a href="mailto:jackielynn.sofia@dfa.state.ny.us">jackielynn.sofia@dfa.state.ny.us</a>	753-6053
<b>Administrative Caseworker</b> <ul style="list-style-type: none"> <li>● <b>CPS – Management</b> <ul style="list-style-type: none"> <li>○ C</li> <li>○ J</li> <li>○ L</li> </ul> </li> <li>● <b>Adoption Unit</b></li> <li>● <b>Permanency Planning</b></li> </ul>	Sue Johnson	<a href="mailto:sue.johnon@dfa.state.ny.us">sue.johnon@dfa.state.ny.us</a>	753-6624

<ul style="list-style-type: none"> <li>• <b>Fatherhood Initiative</b></li> </ul>			
<p><b>Administrative Caseworker</b></p> <ul style="list-style-type: none"> <li>• <b>Foster Care Home Finding</b></li> <li>• <b>Child Welfare Trainers</b></li> <li>• <b>Staff Development</b></li> <li>• <b>Community Coach &amp; Trainer</b></li> <li>• <b>CPS Investigations</b> <ul style="list-style-type: none"> <li>○ #5</li> <li>○ #9</li> <li>○ #13</li> </ul> </li> </ul>	Ellen Merkel	Ellen.merkel@dfa.state.ny.us	753-5763