

<u>TRANSMITTAL NO:</u> AOG-2019.2	<u>PAGE :</u> 1 of 1	<u>DATE:</u> 06/16/19
<u>AFFECTED PROGRAMS:</u> PA, MA, SNAP	<u>AFFECTED SUBSYSTEMS:</u> Eligibility, Undercare	
<u>SUBJECT:</u> Page Replacements for the Authorization of Grants Manual	<u>CONTACT PERSON:</u> Catherine Waterman (212) 961-8161	

Title Page

The software version is 2019.2. The release date is 06/16/19. All replacement pages are dated 06/16/19.

General

Page 31

Modified definitions of SNAP Employability Codes 38 and 63. Removed obsolete SNAP Employability Codes 24, 31, 40, and 64.

Page 263

Added PA Single Issuance code G4.

Page 270

Added PA Single Issuance code G4.



Welfare Management System IM Operational Handbook Authorization of Grants

Software Version 2019.2
06/16/2019



**Office of Temporary
and Disability Assistance**

Welfare Management System IM Operational Handbook Authorization of Grants

**Written By:
Catherine Waterman**

Software Version 2019.2

06/16/2019

As of August 29, 2012, any reference to the Food Stamp Program in this manual shall mean the Supplemental Nutrition Assistance Program (SNAP) and any reference to Food Stamp benefits or Food Stamps (FS) shall mean SNAP benefits.

This document is provided under a contractual agreement between the
New York State Office of Temporary and Disability Assistance
Division of Administrative Services
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AND

The Institute for Community Health Promotion (ICHP)/
Learning, Engagement, and Development Services (LEADS)/
SUNY Buffalo State

IM OPERATIONAL HANDBOOK-AUTHORIZATION OF GRANTS

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PREPARATION OF FORM DSS-3517 (TAD)Section 15 – Individual Information (cont'd)SNAP EMP – 370 (cont'd)

<u>Code</u>	<u>Definition</u>
16	Work limited/Non-exempt
20	Work required/Non-exempt
27	Employed or self-employed less than 30 hours per week and earning less than the equivalent of 30 hours times the federal minimum wage on a weekly basis (currently \$217.50 per week)/Non-exempt
28	Employed or self-employed 30 or more hours per week OR earning at least the equivalent of 30 hours times the federal minimum wage on a weekly basis (currently \$217.50 per week or higher)/Exempt
29	A parent or household member who is responsible for care of a child under age 6 in the household/Exempt
30	Younger than age 16/Exempt
32	60 years of age or older/Exempt
35	A person age 16 or 17 who is not the head of household OR 16 or 17 who is attending school or an employment training program on at least a half time basis/Exempt
36	Incapacitated/disabled (more than 6 months)/Exempt
38	Responsible for the care of an incapacitated person (the incapacitated person does NOT need to live in the household)/Exempt
41	Temporary illness or incapacity (1-3 months exemption)/Exempt
42	Temporary illness or incapacity (4-6 months exemption)/Exempt
43	Incapacitated/disabled (SSI application filed)/Exempt (based on medical documentation) OR an applicant for or pending SSI recipient (only under joint processing)/Exempt
44	Incapacitated/disabled - in receipt of Social Security income (SSI)/Exempt
45	Full employment waiver/Exempt
52	Receiving or pending receipt of Unemployment Insurance Benefits (UIB)/Exempt
54	In receipt of Social Security Disability Income (SSDI)/Exempt
63	Regular participant in drug or alcohol treatment or rehabilitation
70	Exemption claimed pending medical documentation/Exempt
72	A student enrolled in a recognized school, job skills training or institution of higher education at least half time (meets student eligibility requirements listed in 18 NYCRR 387.1)/Exempt

02/19/2017

PREPARATION OF FORM DSS-3517 (TAD)Section 15 – Individual Information (cont'd)**ABAWD IND CODE - 371**

The new ABAWD Ind Code is required for all PA/SNAP and SNAP-only eligibility transactions only if Active (AC), Single Issue (SI), or Sanctioned (SN) for SNAP.

CODES

- A ABAWD/Non-waived area
- X ABAWD/Excluded
- W ABAWD/Waived area
- N Non-ABAWD (Exempt from ABAWD requirements)

TPHI/MCR

This is displayed as a combined field in the individual data area of the TAD. The 1st position in the field is TPHI, the 2nd position is MCR.

CODES

TPHI - Third Party Health Insurance

- Y Client Has TPHI
- N Client Does Not Have TPHI

MCR - Medicare

- Y Yes
- N No

SSI – 320

The Supplemental Security Income Indicator may appear on the TAD if previously entered for individuals who have been referred to SSI. An SSI Code must be entered if Categorical Code 10, 11, 12, or 14 appears in element 372 for that individual on an SNCA case.

SSI CODES

- 1 Active (Do not use for SNCA individuals whose Categorical Code is 09.)
- 2 Pending
- 3 Closed, Denied, or Suspended (Appeals Exhausted)
- 4 Deemed Eligible (Do not use for SNCA individuals whose Categorical Code is 09.)
- 5 Closed SSI, Continue RSDI (Do not use for SNCA individuals whose categorical Code is 09.)

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PA SINGLE ISSUANCE GRANTS (CONT'D)
ISSUANCE CODES (CONT'D)

- B6 - Tenant-Based Rental Assistance (TBRA) program. Amount issued cannot exceed \$5,000 for any one payment. A B6 payment will not be allowed if it has the exact same dollar amount and payment period of another rent/shelter type payment.
- B7 - SEPS Payment. Recurring rent allowance for single individuals or adult families residing in shelters or in substandard living conditions outside the shelter system. Minimum payment is \$1223. Maximum payment is \$5000.
- B8 - SEPS Bonus. Issued to broker. Allow a single check of up to \$5,000.
- D0 - One-shot deal rent replacement check (non-recoupable).
- D5 - Diversion payment used for a specific crisis situation or episode of immediate need (four months or less). Can be issued on active cases or closed cases with TB indicator.
- D7 - Transition Services Payment used to authorize employment related expenses. Can only be issued closed cases (TB) Indicator.
- D8 - Diversion Rental Payment For specific short term payment (four months to deal with specific crisis situation that requires a rental payment can be issued on active cases or closed case with TB indicator.
- D9 - Diversion Transportation Payment used to issue a non-recurring payment for employment related transportation expenses can be issued on active cases or close cases with TB indicator.
- EP - Eviction Prevention for Vulnerable Adults. Maximum payment is \$5,000.
- F1 - Legally Exempt In-Home Child Care Non-Relative (Full Time). Not data enterable.
- F2 - Day Care Family Home (Full Time). Not data enterable.
- F3 - Day Care Group Family (Full Time). Not data enterable.
- F4 - Day Care Center (Full Time). Not data enterable.
- F5 - Legally Exempt In-Home Child Care Relative (Full Time). Not data enterable.
- F6 - Legally Exempt Family Child Care Relative (Full Time). Not data enterable.
- F7 - Legally Exempt Family Child Care Non-Relative (Full Time). Not data enterable.
- F8 - School Age Child Care Program (Full Time). Not data enterable.
- F9 - Legally Exempt Group Child Care (Full Time). Not data enterable.
- G2 - Emergency clothing voucher for cases included in the Reynolds lawsuit.
- G4 - Camp fees. Amount cannot exceed \$400 annually per child.
- H0 - Heating equipment repair/replacement estimates
- H5 - HEAP emergency benefit - repair heating equipment
- H7 - HEAP emergency benefit - replace heating equipment
- L7 - Lovely H. lawsuit
- L9 - Hercules lawsuit
- MR - Medicaid Redesign Team. Maximum payment is \$5,000.
- N2 - Child support due client - period of ineligibility
- N7 - Smith lawsuit
- P1 - Legally Exempt In-Home Child Care Non-Relative (Part Time). Not data enterable.
- P2 - Day Care Family Home (Part Time). Not data enterable.
- P3 - Day Care Group Family (Part Time). Not data enterable.
- P4 - Day Care Center (Part Time). Not data enterable.
- P5 - Legally Exempt In-Home Child Care Relative (Part Time). Not data enterable.

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PA SINGLE ISSUANCE GRANTS (CONT'D)
ISSUANCE CODES (CONT'D)

- P6 - Legally Exempt Family Child Care Relative (Part Time). Not data enterable.
- P7 - Legally Exempt Family Child Care Non-Relative (Part Time). Not data enterable.
- P8 - School Age Child Care Program (Part Time). Not data enterable.
- P9 - Legally Exempt Group Child Care (Part Time). Not data enterable.
- QA - Supplement FHEPS Rent Arrears (Recoupable)
- QB - Supplement FHEPS Rent Arrears (Non-Recoupable)
- QC - Supplement FHEPS A City
- QD - Supplement FHEPS A State
- QE - Supplement FHEPS B City
- QF - Supplement FHEPS B City Additional
- QG - Supplement FHEPS A Landlord Bonus. Allow a single check of up to \$5,000.
- QH - Supplement FHEPS B Landlord Bonus. Allow a single check of up to \$5,000.
- QI - Supplement FHEPS City (Multi-suffix).
- QJ - FHEPS Unit Hold. Issued to the landlord to ensure that the apartment will be held for the client while initial processing is taking place. Maximum amount of any single payment is \$4,297.
- RA - Landlord Repair. Single issue grant to landlord for repairs and/or unpaid rent above the HRA security deposit. Maximum payment is \$3,000.
- S0 - LINC2 rent program supplement subsidy - DHS and HRA shelter vulnerable population. The S0 payment is in addition to the S5 payment and represents the amount of subsidy that exceeds the standard table amount. Used for CLOSED (RJ or CL) PA cases.
- S1 - LINC1 rent program initial subsidy - DHS and HRA shelter families with employment.
- S2 - LINC2 rent program initial subsidy - DHS and HRA shelter vulnerable population. Used for ACTIVE PA cases.
- S3 - LINC3A rent program initial subsidy - HRA DV (Domestic Violence) population residing in HRA shelters.
- S4 - LINC3B rent program initial subsidy - HRA DV (Domestic Violence) population residing in DHS shelters.
- S5 - LINC2 rent program initial subsidy - DHS and HRA shelter vulnerable population. Used for CLOSED (RJ or CL) PA cases.
- S6 - LINC1 rent program supplement subsidy - DHS and HRA shelter families with employment. The S6 payment is in addition to the S1 payment and represents the amount of subsidy that exceeds the standard table amount.
- S7 - LINC2 rent program supplement subsidy - DHS and HRA shelter vulnerable population. The S7 payment is in addition to the S2 payment and represents the amount of subsidy that exceeds the standard table amount. Used for ACTIVE PA cases.
- S8 - LINC3A rent program supplement subsidy - HRA DV population residing in HRA shelters. The S8 payment is in addition to the S3 payment and represents the amount of subsidy that exceeds the standard table amount.
- S9 - LINC3B rent program supplement subsidy - HRA DV population residing in DHS shelters. The S9 payment is in addition to the S4 payment and represents the amount of subsidy that exceeds the standard table amount.

10/21/2018

PA SINGLE ISSUANCE GRANTS (CONT'D)
ISSUANCE CODES (CONT'D)

CODE	CAT	FROM DATE	TO DATE	RESTRICT	PUC
A6****	FA SNFP SNNC SNCA	First day of effective month	Last day of effective month		
A7****	FA SNFP SNNC SNCA	First day of effective month	Last day of effective month		
BB	ALL	SKIP	SKIP	2	1, 5, 6
B1****	FA SNFP SNNC SNCA	First day of effective month	Last day of effective month		
B2****	FA SNFP SNNC SNCA	First day of effective month	Last day of effective month		
B3	ALL	No earlier than 04/01/14	No more than five months from current month	1, 2, 8, 9	1, 9
B4	ALL	Within period of B3 issuance that's being replaced	Within period of B3 issuance that's being replaced, but not earlier than From Date	2	1, 5, 6
B6	ALL	No earlier than three months before system date, and no earlier than 07/01/15.	12 months from system date	2	1, 5, 6
B7	ALL	No more than 90 days before system date	No more than 150 days after system date	2	1, 5, 6
B8	ALL	SKIP	SKIP	2	1, 5, 6
D0	ALL	Effective date of need	Through effective period	2	1
D5	FA SNFP EAF	Prior to To Date	Through effective period, but no more than 4 months from "From Date"	1, 2,8,9	All

**** CODES A6, A7, B1 AND B2 ARE SYSTEM-GENERATED

06/16/2019

PA SINGLE ISSUANCE GRANTS (CONT'D)
ISSUANCE CODES (CONT'D)

CODE	CAT	FROM DATE	TO DATE	RESTRICT	PUC
D7	FA SNFP SNCA SNNC EAF	Prior to "To Date"	Through Effective period	1, 2, OR 9	All
D8	FA SNFP EAF	Prior to "To Date"	Through effective period, but no more than 4 months from "From Date"	1, 2, 8, 9	All
D9	FA SNFP EAF	Prior to "To Date"	Through effective period, but no more than 4 months from "From Date"	1, 2, 8, 9	All
EP	FA SNFP SNCA SNNC	No earlier than 18 months before issuance date	No later than 12 months after issuance date	2	1, 5, 6
G2	SNNC SNCA SNFP FA	Equal to or prior to "To Date"	Prior to current date	1	1
G4	ALL	No earlier than 4/1/19	Not prior to From Date	2	1
H0	ALL	SKIP	SKIP	1, 2, 8, 9	All
H5	ALL	SKIP	SKIP	1, 2, 8, 9	All
H7	ALL	SKIP	SKIP	1, 2, 8, 9	All
L7	ALL	Equal to or greater than 11/01/2004.	Equal to or less than 01/31/2007.		1
L9	ALL	Prior to current date but no earlier than 08/24/2007.	Prior to current date.		1
MR	FA SNFP SNCA SNNC	No earlier than 18 months before issuance date	No later than 12 months after issuance date	2	1, 5, 6
N2	FA SNFP SNCA SNNC	Greater than 06/30/2009	Not prior to "From Date". Month cannot be greater than current month + 1.	1, 9	1, 9
N7	FA SNFP SNCA SNNC	Prior to current date but no earlier than 07/08/2007	Prior to current date and no later than 12/22/2015	1	9