Office of Administrative Hearings (OAH)	Transmittal Number: 98-16a
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Distribution:	
ALB OAH Staff [X] UPS ALJs/[] Upstate LDSS []  SUP ALJs []	Subject: Revised FHIS Issue Codes (Annotated Version)
NYC OAH Staff [X] NYC ALJs/ [] NYC Agencies [] SUP ALJs []	

The Fair Hearing Information System (FHIS) issue codes have been revised in conjunction with changes in the categories of assistance and other programmatic changes due to the implementation of Welfare Reform in New York State. Certain codes have been deleted when it was established that they were no longer necessary either from a program or reporting perspective and certain codes were necessarily added. The changes in the Public Assistance, Food Stamp, and Medical Assistance codes are enumerated below. A revised set of all Issue Codes is attached, and will be available for use on March 30, 1998.

## DELETE

- 010 PART-TIME PRESENCE IN HOUSEHOLD (Use 001)
- 011 TEMPORARY ABSENCE FROM HOUSEHOLD (Use 014)
- 012 ELIMINATION OF GRANT OF LESS THAN \$10 (Use 008)
- 028 CONTRIBUTIONS FROM PERSONS IN THE HOUSEHOLD (Combined under 027)
- 029 BUDGETING PERSON'S INCOME AGAINST NEEDS OF ANOTHER PERSON IN HOUSEHOLD (Combined under 027)
- 033 DEEMING OF STEP-PARENT INCOME/GRANDPARENT INCOME (Eliminated)
- 039 LOSS OF DEDUCTIONS/EXEMPTIONS LATE SUBMISSION QUARTERLY REPORT (Combined under 038)
- 046 ALLOWANCES TO REPAIR/REPLACE ESSENTIAL HOUSEHOLD EQUIPMENT (Use 045)
- 061 DISABLED PARENT LOSS OF SUPPORT (Eliminated and replaced by 061, Allegation of Placement in Wrong Category)

- 147 FAILURE TO ESTABLISH PAST MAINTENANCE (Eliminate and use 126)
- 158 UNDERPAYMENTS TO FORMER HR RECIPIENTS (TAMBE)
  (Combined with 159 and wording changed to Underpayments to Former Recips)
- 209 NEED TO UTILIZE SURPLUS INCOME AS A CONDITION TO PAYMENT (Combined under 210)
- 259 MANAGED CARE (Eliminated. Use 229-239)
- 408 DEDUCTIONS FOR UTILITIES, FUEL, OR TELEPHONE (Combined under 407)
- 409 DEDUCTIONS FOR MEDICAL EXPENSES (Combined under 407)
- 413 INELIGIBILITY BASED ON RESOURCES, OTHER THAN AUTOMOBILES (Combined under 412)
- 414 INELIGIBILITY BASED UPON 130% GROSS INCOME TEST (Eliminate and use 405)
- 447 BUDGETING OF EDUCATIONAL INCOME (Eliminate and use 406)
- 449 EXCESS NET INCOME (Eliminate and use 405)
- 452 FOOD STAMP REDUCTION WITHOUT NOTICE OR EXPLANATION (Use 425)
- 458 DENIAL OF FOOD STAMPS NO NOTICE OR REASON (Use 425)

## NEW

- 020 CHILD CARE ALLOWANCE NOT SUPPORTIVE SERVICES
- 061 ALLEGATION OF PLACEMENT IN WRONG CATEGORY OF ASSISTANCE (Used to be Disabled Parent (Deprivation Factor)
- 062 CHANGE FROM CASH ASSISTANCE TO NON-CASH ASSISTANCE NOT 2 YEAR LIMIT
- 064 5 YEAR LIMIT FAMILY ASSISTANCE
- 065 2 YEAR LIMIT CASH SNA
- 115 DOMESTIC VIOLENCE WAIVER
- 116 FLEEING FELON
- 117 MINOR PARENT LIVING ARRANGEMENT
- 118 TEEN PARENT EDUCATION PARTICIPATION
- 119 PARENTAL FAILURE TO NOTIFY DSS OF MINORS ABSENCE
- 149 FAILURE TO COOPERATE WITH DRUG/ALCOHOL SCREENING/ASSESSMENT
  (Used to code this under 150, Failure to Participate in Rehab--now 149
  150 are two distinct codes)
- 179 REOPEN FOR GOOD CAUSE/NO NOTICE HEARING ADH
- 201 185% GROSS INCOME LIMIT
- 203 100% POVERTY LEVEL (Used to be Non-Chronic Care Budgeting of SSI-Related Individuals)
- 211 MANAGED LONG TERM CARE
- 229 DENIAL, REDUCTION, DISCONTINUANCE OF A SERVICE UNDER MANDATORY MANAGED CARE
- 230 DISENROLLED FROM MANDATORY MANAGED CARE MANDATORY EXCLUSION
- 231 REENROLLED IN MA, PUT BACK IN PREVIOUS MANDATORY MANAGED CARE PLAN
- 232 APPROVAL/DENIAL OF REQUEST NOT TO JOIN MANDATORY MANAGED CARE PLAN
- 233 ENROLLED IN MANDATORY MANAGED CARE PLAN CHOSEN BY DISTRICT SINCE CLIENT DID NOT PICK PLAN
- 234 APPROVAL/DENIAL OF REQUEST TO DISENROLL FROM MANDATORY MANAGED CARE HEALTH PLAN FOR GOOD CAUSE
- 235 APPROVAL/DENIAL OF A MANDATORY MANAGED CARE PLAN'S REQUEST TO DROP CLIENT AS A MEMBER OF PLAN (by district or DOH)
- 236 DENIAL OF ENROLLMENT IN A MANDATORY MANAGED CARE PLAN
- 237 ENROLLED IN SAME MANDATORY MANAGED CARE PLAN AS OTHER MEMBERS OF CASE

- 238 CHANGE TO GUARANTEE COVERAGE UNDER MANDATORY MANAGED CARE
- 239 END OF MANDATORY MANAGED CARE GUARANTEE COVERAGE PERIOD
- 436 IPV DISQUALIFICATION: REOPEN FOR GOOD CAUSE/NO NOTICE HEARING

## NEW LANGUAGE

- 021 BUDGETING EARNED INCOME
- 024 EARNED INCOME DISREGARD
- 026 BUDGETING OF COLLEGE GRANTS AND LOANS
- 027 BUDGETING CONTRIBUTIONS FROM OTHERS

  (Used to be Contributions from Persons Outside the Household/Combined with old 028, Contributions from Persons in the Household and old 029, Budgeting Person's Income Against Needs of Another Person in HH)
- 032 100% OF POVERTY LEVEL (Used to be Budgeting of Earned Income Credit)
- 038 INCOME ISSUES RELATED TO QUARTERLY REPORT
  (Used to be Quarterly Report Supplement/Combined with old 039, Loss of Deductions/Exemptions-Late Submission Quarterly Report)
- 041 ALLOWANCE FOR REPAIR/REPLACEMENT OF REAL PROPERTY/EQUIPMENT
- 060 ELIGIBILITY OF CHILD FOR FAMILY ASSISTANCE (Used to be Eligibility of Child Age 18 for ADC)
- 154 FAILURE TO ALLOW SNA APPL TO APPLY 45 DAYS PRIOR TO SANCTION END
- 156 FAILURE TO ALLOW FA APPL TO APPLY 30 DAYS PRIOR TO SANCTION END
- 207 EXCESS MONTHLY INCOME
- 210 MANNER OF UTILIZATION OF SURPLUS INCOME
- 268 IPRO DENIAL FOR DRUGS AND ELECTIVE SURGERY
- 405 DISCONTINUANCE/REDUCTION/DENIAL BASED UPON EXCESS INCOME (Used to be Reduction Based Upon Increased Net Income)
- 412 DISCONTINUANCE/DENIAL BASED UPON RESOURCES (Used to be Availability of Automobile as a Resource)
- 425 DISCONTINUANCE/REDUCTION/DENIAL OF FOOD STAMPS NO NOTICE INCLUDING DELAYED ISSUANCE
- 454 FOOD STAMP DISCONTINUANCE/REDUCTION DUE TO INCREASE IN SS, PA, SSI

## GENERAL CHANGES:

All references to HR have been changed to SNA and all references to ADC have been changed to FA.

Any questions can be directed to your supervisor or to Lisa Hauth at (518) 474-2453 or via e-mail 89A110.

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Mark Lacivita, Director of Administration Office of Administrative Hearings

Attachment