



FAMILY INDEPENDENCE ADMINISTRATION

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POLICY BULLETIN #12-88-OPE

(This PB obsoletes PB #11-36-OPE and PB #12-17-OPE)

REVISIONS TO FORMS M-90C, M-90D, M-90E

<p>Date: August 24, 2012</p>	<p>Subtopic: Forms</p>
<p> This procedure can now be accessed on the FIAweb.</p> <p>NOTE: As of August 29, 2012, any reference to the Food Stamp Program in this notice shall mean the Supplemental Nutrition Assistance Program (SNAP), and any reference to Food Stamps shall mean SNAP benefits.</p>	<p>The purpose of this Policy Bulletin is to inform all Job Center Staff and Non Cash Assistance Supplemental Nutrition Assistance Program (NCA SNAP) Center staff that the Helping Hands for People in Need (PUB-4916) brochure issued by the New York State Office of Temporary and Disability Assistance is no longer required in NCA SNAP and Cash Assistance application/recertification kits because the information provided in the brochure is now available on other notices. As a result, the brochure was removed from the following forms, which have been revised accordingly:</p> <ul style="list-style-type: none"> • Cash Assistance Application Kit Forms (M-90c) • Cash Assistance Recertification Kit Forms (M-90d) • NCA SNAP Application/Recertification Kit Forms (M-90e) <p>Job Center Directors and NCA SNAP Directors must ensure that all previous versions of these forms are removed from circulation and recycled. In addition, as per 12-INF-12, the brochure will remain an option distributed upon request.</p> <p>Samples of the forms are attached.</p> <p><i>Effective Immediately</i></p> <p>Reference: 12-INF-12</p>

HAVE QUESTIONS ABOUT THIS PROCEDURE?
Call 718-557-1313 then press 3 at the prompt followed by 1 or
send an e-mail to *FIA Call Center Fax* or fax to: (917) 639-0298

 Please use Print on Demand to obtain copies of forms.

Attachments:

M-90c

Cash Assistance Application Kit Forms
(Rev. 8/24/12)

M-90d

Cash Assistance Recertification Kit Forms
(Rev. 8/24/12)

M-90e

Non Cash Assistance Supplemental Nutrition
Assistance Program (NCA SNAP)
Application/Recertification Kit Forms (Rev.8/24/12)

Cash Assistance Application Kit Forms

Forms included in the Cash Assistance Application Kit:

Item	Title	Form Number	Agency
1	Non-Parent Caregivers Caring for Children	Attachment A ****	State
2	Revised Assignment of Support Rights Language for LDSS 2921	Attachment 1 ****	State
3	Statewide Common Application	LDSS-2921 *	State
4	Food Stamp Change Report Form	LDSS-3151 *	State
5	New York State What You Should Know About Your Rights And Responsibilities	LDSS-4148A *	State
6	New York State What You Should Know About Social Services Programs	LDSS-4148B *	State
7	New York State What You Should Know If You Have An Emergency	LDSS-4148C *	State
8	Notice Of Responsibilities And Rights For Support	LDSS-4279 **	State
9	Domestic Violence Screening Form	LDSS-4583 *	State
10	Domestic Violence Palm Card	LDSS-4583A **	State
11	DFR Legal Residence Statement	LDSS-4733	State
12	Domestic Violence Information for all Temporary Assistance Applicants	LDSS-4905 *	State
13	It's Tax Time. Go Get Your Refund!	Palm Card *	DCA
14	New York State How To Complete The Temporary Assistance (TA) - Medical Assistance (MA) - Medical Savings Program (MSP) - Food Stamp Benefits (FS) - Services (S), including Foster Care (FC) - Child Care Assistance (CC) Application	PUB-1301 *	State
15	How To Use Your Benefit Card To Get Food Stamp and/or Cash Benefits	PUB-4596 *	State
16	Keep the Heat On With HEAP Pamphlet	PUB-4735	State
17	Notice to All Applicants	EXP-75Q ***	FIA
18	Notice to Non-Citizens Who Entered the United States or Had Their Status Changed Via Sponsorship	FIA-1068 *	FIA
19	I Speak Card (Instructional)	HRA-101 *** (FIA-1043)	FIA
20	Absent Parent Questionnaire	M-384k *	FIA
21	Your Interview with the Office of Child Support Enforcement	M-384t *	FIA

*Denotes forms that are available in multiple languages. Job Center staff must include the appropriate foreign language version of the forms in the foreign language version of the CA Application Kit.

**Available in English and Spanish only.

***Multiple languages are contained on one form.

****Denotes forms that must be manually printed until made available on the OTDA website. Only available in English at this time.

Cash Assistance Application Kit Forms

Forms included in the Cash Assistance Application Kit:

Item	Title	Form Number	Agency
22	Child Care Guarantee Informational	M-528m **	FIA
23	Attention: Applicants/Participants	W-116U *	FIA
24	Important: Using Common Benefit Identification Cards (CBIC) for Medical Services	W-126E *	FIA
25	Services for Victims of Sexual Assault	W-131 **	FIA
26	Cash Assistance Additional Allowances	W-137C *	FIA
27	Notice of Benefits and Services Available from the HIV/AIDS Services Administration (HASA)	W-139E **	FIA
28	Troubled? Frustrated? Angry? Don't Take It Out On Your Children!	W-273A **	FIA
29	Did You Know That The City of New York Will Pay for Your Child Care For Your Children Under 13 and For Children With Special Needs?	CS-273E **	ACS
30	Notice to Applicants and Participants Regarding Third Party Health Insurance	W-299 *	FIA
31	What To Do If You Have Been Sexually Assaulted	BRC-100B **	Mayor's Office
32	Welfare Fraud (BFI Bureau of Fraud Investigation)	BRC-151M **	BFI
33	Guide to Work Supports	BRC-504 **	FIA
34	Interpretation Services Notice for the Application/Recertification Kits (Insert)	W-515W ***	FIA
35	Eligibility Verification Review Questionnaire	W-532T *	FIA
36	Cash Assistance & Child Support	W-549D **	OCSE
37	Child Care Fact Sheet and Planner	CS-574EE **	ACS
38	Language Questionnaire	W-680FF *	FIA
39	Are You Disabled?	W-681A *	FIA
40	Notice to Applicants/Participants	W-904DD *	FIA
41	Essential Persons	W-912KK **	FIA
42	List of Participating Clinics and Hospitals	MAP-58k ***	FIA
43	Explanation of the Medicaid Buy-In Program For Working People with Disabilities (MBI-WPD)	MAP-252 *	MAP
44	Child/Teen Health Program (C/THP) Fact Sheet	MAP-1096 *	MAP
45	Your Guide To Public Health and Eligibility	MAP-2020N	MAP

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

Cash Assistance Recertification Kit Forms

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

Forms included in the standard Cash Assistance Recertification Kit:

Item	Title	Form Number	Agency
1	Food Stamp Change Report Form	LDSS-3151*	State
2	Recertification Form For: Temporary Assistance (TA) – Medical Assistance (MA) – Medicare Savings Program (MSP) – Food Stamp Benefits (FS)	LDSS-3174*¹	State
3	Revised Assignment of Support Rights Language for LDSS-3174	Attachment 2****	State
4	New York State What You Should Know About Your Rights And Responsibilities	LDSS-4148A*	State
5	New York State What You Should Know About Social Services Programs	LDSS-4148B*	State
6	New York State What You Should Know If You Have An Emergency	LDSS-4148C*	State
7	Notice Of Responsibilities And Rights For Support	LDSS-4279**	State
8	Domestic Violence Information for all Temporary Assistance Applicants	LDSS-4905*	State
9	It's Tax Time. Go Get Your Refund!	Palm Card*	DCA
10	How to Complete the Temporary Assistance (TA) – Medical Assistance (MA) – Medical Savings Program (MSP) – Food Stamp Benefits (FS) Recertification Form	PUB-1313*	State
11	Explanation of the Medicaid Buy-In Program For Working People with Disabilities (MBI-WPD)	MAP-252*	MAP
12	What To Do If You Have Been Sexually Assaulted	BRC-100B**	Mayor's Office
13	Welfare Fraud (BFI Bureau of Fraud Investigation)	BRC-151M**	BFI
14	Guide to Work Supports	BRC- 504**	FIA
15	Are You Disabled?	W-681A*	FIA
16	Attention: Applicants/Participants	W-116U*	FIA

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¹ Included in the kit for homebound interviews and when POS is down.

Cash Assistance Recertification Kit Forms

Forms included in the standard Cash Assistance Recertification Kit:

Item	Title	Form Number	Agency
17	Important: Using Common Benefit Identification Cards (CBIC) for Medical Services	W-126E *	FIA
18	Services for Victims of Sexual Assault	W-131 **	FIA
19	Cash Assistance Additional Allowances	W-137C *	FIA
20	Notice of Benefits and Services Available from the HIV/AIDS Services Administration (HASA)	W-139E **	FIA
21	Notice to Applicants and Participants Regarding Third Party Health Insurance	W-299 *	FIA
22	Interpretation Services Notice for the Application/Recertification Kits (Insert)	W-515W ***	FIA
23	Language Questionnaire	W-680FF *	FIA
24	Notice to Applicants/Participants	W-904DD *	FIA
25	Essential Persons	W-912KK **	FIA

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SAMPLE

Cash Assistance Recertification Kit Forms

Recertification Kits for households with children include the forms on the first two pages and those listed below. Do not include the forms on this page for households without children.

Item	Title	Form Number	Agency
1	Enrollment Form for Provider of Legally-Exempt Family Child Care and Legally-Exempt In-Home Child Care	OCFS LDSS-4699**	State
2	Employment of Minors Form	OCFS LDSS-4699.1**	State
3	Employment of Minors Information	OCFS LDSS-4699.1A	State
4	Legally-Exempt In-Home Child Care Provider Agreement Form	OCFS LDSS-4699.2**	State
5	Parental Responsibilities When Employing a Legally-Exempt In-Home Child Care Provider	OCFS LDSS-4699.2A	State
6	Enrollment Form for Provider of Legally-Exempt Group Child Care	OCFS LDSS-4700**	State
7	Did you know that The City of New York Will Pay For Your Child Care for your children under 13 and for children with special needs?	CS-273E	ACS
8	Child Care Fact Sheet and Planner	CS-574EE**	ACS
9	Recertification Absent Parent Questionnaire	M-384d*	FIA
10	Child Care Guarantee Informational	M-528m**	FIA
11	Cash Assistance & Child Support	W-549D**	OCSE

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Non Cash Assistance Supplemental Nutrition Assistance Program (NCA SNAP) Application/Recertification Kit Forms

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

Forms included in the NCA SNAP Application/Recertification Kit:

Item	Title	Form Number	Agency
1	Non-Parent Caregivers Caring for Children	Attachment A	State
2	Domestic Violence Palm Card	LDSS-4583A **	State
3	Food Stamp Benefits Application/Recertification	LDSS-4826 *	State
4	How To Complete The Food Stamp Benefits Application/Recertification	LDSS-4826A *	State
5	It's Tax Time. Go Get Your Refund	Palm Card *	DCA
6	How To Use Your Benefit Card To Get Your Food Stamp and/or Cash Benefits	PUB-4596 *	State
7	List of Participating Clinics and Hospitals	MAP-58k ***	FIA
8	Child/Teen Health Program (C/THP) Fact Sheet	MAP-1096 *	MAP
9	I Speak Card (Instructional)	HRA-101 *** (FIA-1043)	FIA
10	Supplemental Nutrition Assistance Program Documentation Guide	W-129G *	FIA
11	Services for Victims of Sexual Assault	W-131 **	FIA
12	Interpretation Services Notice for the Application/Recertification Kits (Insert)	W-515W ***	FIA
13	Finger Imaging Notice	W-519 *	FIA
14	Language Questionnaire	W-680FF *	FIA
15	Are You Disabled?	W-681A *	FIA
16	What To Do If You Have Been Sexually Assaulted	BRC-100B **	Mayor's Office
17	Guide to Work Supports	BRC-504 **	FIA

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NCA SNAP Center staff must include the appropriate foreign language version of the forms in the foreign language version of the NCA SNAP Application/Recertification Kit.