



FAMILY INDEPENDENCE ADMINISTRATION

Seth W. Diamond, Executive Deputy Commissioner



James K. Whelan, Deputy Commissioner
Policy, Procedures, and Training

Lisa C. Fitzpatrick, Assistant Deputy Commissioner
Office of Procedures

POLICY BULLETIN #08-154-OPE

(This Policy Bulletin Replaces PB #08-143-OPE)

REVISION TO THE REMINDER TO STAFF REGARDING THE ISSUANCE OF AN IMMEDIATE NEEDS GRANT FOR FOOD-RELATED EMERGENCIES

<p>Date: December 8, 2008</p>	<p>Subtopic(s): Same-day Issuance of Food Stamps, Code 44</p>
<p> This procedure can now be accessed on the FIAweb.</p> <p>Evaluate eligibility for code 44 when an applicant is ineligible for a same-day issuance of food stamps.</p> <p>See PD #08-07-OPE and PD #08-08-SYS for additional information on Expedited FS and Same-day FS issuances.</p>	<p>Revision to the Original Policy Bulletin:</p> <p>This policy bulletin has been revised to correct the time of the last daily transmission from 7:00 PM to 8:00 PM.</p> <p>Purpose:</p> <p>The purpose of this policy bulletin is to remind Job Center staff that they must evaluate an applicant’s eligibility for a food-related immediate needs grant (special grant code 44) when the applicant expresses a need for food but is determined to be ineligible for a same-day issuance of food stamps (FS). The instructions are informational for all other staff.</p> <p>When an applicant expresses a need for food but is determined to be ineligible for a same-day issuance of FS, the JOS/Worker must evaluate the applicant’s eligibility for a food-related immediate needs grant (code 44).</p> <p>For example, if the applicant expresses a need for food but is in an immigration status that is ineligible for food stamps, the Worker should issue an immediate needs grant. Additionally, if a same-day issuance of food stamps cannot be authorized to an eligible household for any reason, a code 44 must be issued and must last until the same-day issuance of FS can be processed.</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*

Revised information:
Ensure no same-day FS grants are pending prior to last daily transmission at **8:00 PM**.

Supervisors must ensure that there are no pending same-day FS grants prior to the last daily transmission at 8:00 PM. If a same-day FS grant is not approved and the approval cannot be granted prior to the last daily transmission, or if a same-day FS grant is in error status and cannot be corrected prior to the last daily transmission, the Supervisor must ensure that a code **44** is issued to cover the household until the same-day FS grant is processed.

For example, if a case is in error status on Friday evening, and Monday is a holiday, staff must issue a code **44** to cover the household for four calendar days.

Reminder:
A case record entry is required for every action taken on a case.

Supervisors must also ensure that a case record entry is made explaining why the code **44** was issued and that a copy of the Notice of Decision on Assistance to Meet an Immediate Need or Special Allowance (For Applicants Only) form ([W-145HH](#)) is completed, issued to the applicant, and saved in the electronic record.

The Notice of Special Cash Assistance and/or Food Stamp Benefit form (**EBT-23**) has been revised to include the Electronic Benefit Transfer (EBT) hotline/telephone number which allows applicants to find out if their benefits are available before attempting to redeem them.

Job Center Directors must ensure that all previous versions of form **EBT-23** and its multilingual equivalents are removed from circulation and recycled.

A sample of form **EBT-23** has been attached to this policy bulletin.

Effective Immediately

Related Items:

[PD #08-08-SYS](#)
[PD #08-07-OPE](#)

Attachments:

- EBT-23** Notice of Special Cash Assistance and/or Food Stamp Benefit (Rev. 11/20/08)
- EBT-23 (S)** Notice of Special Cash Assistance and/or Food Stamp Benefit (Spanish) (Rev. 11/20/08)

☞ Please use Print on Demand to obtain copies of forms.

Date: _____
Case Number: _____
Case Name: _____
Category: _____
Suffix: _____
Center Number: _____
Center Telephone Number: _____

Notice of Special Cash Assistance and/or Food Stamp Benefit

This is to advise you that we are authorizing a special Cash Assistance benefit(s) in the amount of:

\$ _____ from: _____ to: _____ for the following reasons:

\$ _____ from: _____ to: _____ for the following reasons:

These grant(s) will be available for you on or after _____. If they are not available at that time, please inquire at your Job Center only.

This is to advise you that we are authorizing a special Food Stamp Benefit in the amount of:

\$ _____ from: _____ to: _____ for the following reasons:

\$ _____ from: _____ to: _____ for the following reasons:

These grant(s) will be available for you on or after _____. If they are not available at that time, please inquire at your Job Center or Food Stamp Center only.

You will need a CBIC photo ID card to pick up this benefit. If you do not have a CBIC photo ID card, call the center number indicated above for more information on how to obtain one. To find out if your benefits are available before attempting to redeem them, please call the Electronic Benefit Transfer (EBT) hotline at (888) 328-6399.

Authorized by

Date

Fecha: _____
Número del Caso: _____
Nombre del Caso: _____
Categoría: _____
Sufijo: _____
Número del Centro: _____
Núm. de Teléfono del Centro: _____

Aviso de Beneficio Especial de Asistencia en Efectivo y/o Cupones para Alimentos

Por la presente le informamos de que hemos autorizado un(os) beneficio(s) especial(es) de Asistencia en Efectivo por la cantidad de:

\$ _____ de: _____ a: _____ por las siguientes razones:

SAMPLE

\$ _____ de: _____ a: _____ por las siguientes razones:

SAMPLE

Esta(s) concesión(es) estará(n) disponible(s) el _____ o después. Si no está(n) disponible(s) en las fechas indicadas, favor de llamar y preguntar a su Centro de Trabajo solamente.

Por la presente le informamos de que hemos autorizado un(os) beneficio(s) especial(es) de Cupones para Alimentos por la cantidad de:

\$ _____ de: _____ a: _____ por las siguientes razones:

\$ _____ de: _____ a: _____ por las siguientes razones:

Esta(s) concesión(es) estará(n) disponible(s) para usted el _____ o después. Si no está(n) disponible(s) en las fechas indicadas, favor de llamar y preguntar a su Centro de Trabajo o Centro de Cupones para Alimentos solamente.

Usted necesitará una tarjeta de identificación con foto de CBIC para recoger este beneficio. Si no tiene una, llame al número del centro indicado más arriba para más información sobre cómo obtenerla. Para averiguar si sus beneficios están disponibles antes de cobrarlo, favor de llamar a la Electronic Benefit Transfer (EBT) hotline at (888) 328-6399.

Autorizado por

Fecha