



FAMILY INDEPENDENCE ADMINISTRATION

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POLICY BULLETIN #04-138-OPE

REVISION TO THE COMPLETE AND RELEVANT CASE FOLDER/EVIDENCE PACKET CHECKLIST AND FAIR HEARING SUMMARY (FORM M-186QQ)

Date: August 5, 2004	Subtopic(s): Fair Hearing Forms
This procedure can now be accessed on the FIAweb.	<p>The purpose of this policy bulletin is to inform all Fair Hearing and Conference (FH&C) Unit staff that the Complete and Relevant Case Folder/Evidence Packet Checklist & Fair Hearing Summary (form M-186qq) has been revised.</p>
Form M-186qq	<p>The M-186qq was previously four pages in length and is now two pages. The following items were removed:</p> <ul style="list-style-type: none"> • The “Fair Hearing Issue” and the “Evidence Required” columns. • The text explaining instances of when it is inappropriate to withdraw/stipulate due to a missing Notice of Intent (NOI) or other relevant documentation. • Instructions on preparing the Fair Hearing Resolution Form (M-186y) when the issue has been resolved and all benefits were received prior to the scheduling of the Fair Hearing.
New format	<p>Page one, previously page four, reminds the Fair Hearing Representative that the statute of limitations must be cited for Fair Hearing requests as follows:</p> <ul style="list-style-type: none"> • For public assistance issues more than 60 days from the date of the notice of intent. • For Food Stamp issues more than 90 days from the date of the notice of intent. • For contesting employability issues more than 10 days following the issuance of the Notification of Work Requirement and Right to Contest (W-574YY) form.

HAVE QUESTIONS ABOUT THIS PROCEDURE?
Call (718) 557-1313 then press 2 at the prompt followed by 765 or
send an e-mail to *FIA Call Center*


FH&C staff must indicate on the **M-186qq** the documentation required to defend or resolve a particular issue. The relevant documents must be included in the packet. In addition, the specific action taken must be annotated at the bottom of page one.

Page two must be completed by the FH&C AJOS I to document when an employment infraction has occurred. S/he must indicate the contents of the Employment Evidence Packet on the bottom portion of the page.

Recycle prior versions

FH&C staff must ensure that all previous versions of the **M-186qq** are recycled.

Effective Immediately

 Please use Print on Demand to obtain copies of forms.

Attachment:

M-186qq Complete and Relevant Case Folder/Evidence Packet Checklist and Fair Hearing Summary (Rev. 8/5/04)

Job Center: _____ Case Name: _____ Case Number: _____ Fair Hearing No.: _____

Employment Infraction(s)

Failed to Report (FTR) to appointment on _____ or Failed to Comply (FTC) with appointment or _____
Date Date

Failed to Report (FTR) to WEP/PRIDE/Job Search Assignment on _____
Date

FTC WEP/Job Search/PRIDE/Insufficient Hrs – work cycle beginning _____
Date Dates Absent

FTR Initial Medical Assessment

FTR/FTC Return Appointment

FTC Wellness Plan

Failed to Comply (FTC) with Drug/Alcohol Program

Failed to Report (FTR) to SACC appointment _____
Date

Refused (FTC) to accept CASAC recommendation _____
Date

Failed to Report (FTR) to treatment program _____
Date

Discharged from treatment program _____
Date

SAMPLE

This Employment Evidence Packet Contains:

Notice of Intent date: _____ Statute of Limitation (SOL) expired? No Yes _____
Fair Hearing Request Date

NYCWAY History Printout

Appointment Letter

Notice of Conciliation

Activity Record FTR/FTC Screens

Assignment Information Summary (AIS) (**W-500G**)

Assignment Inquiry/Attendance and Payment Inquiry Screens

Notice of Work Requirement date: _____ SOL expired? No Yes _____
Fair Hearing Request Date

Medical Report

Wellness Plan

WMS Inquiry Screens (Options **22, 04, 03, 01, 06**)

WMS Budget Calculation Screens (Options **05** and **10**)

Other: _____

AJOS/Supervisor I Signature

Date

Fair Hearing Representative Signature

Date