



OFFICE OF POLICY, PROCEDURES, AND TRAINING

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POLICY BULLETIN #17-23-OPE

MULTI-SUFFIX CASE CALL-IN

<p>Date: March 1, 2017</p>	<p>Subtopic(s): SNAP household composition</p>
<p>See PD #13-27-ELI for information on legally responsible relatives</p>	<p>The purpose of this policy bulletin is to inform Special Project Center (SPC) staff of a call-in of certain Cash Assistance (CA) adult household members on multi-suffix CA/Supplemental Nutrition Assistance Program (SNAP) cases. This policy bulletin is informational for all other staff.</p> <p>Adult household members of multi-suffix CA/SNAP cases who are active for SNAP but who are not the SNAP head of household, will be mailed the You May Qualify to Receive Your Own Supplemental Nutrition Assistance Program (SNAP) Benefits (FIA-1186) letter. The FIA-1186 will only be mailed to households in which no individual in one CA suffix is legally responsible for an individual in another CA suffix.</p> <p>The FIA-1186 informs the adult household member who is not the SNAP head of household of the voluntary appointment established for them and for the head of the SNAP household to discuss the possibility of receiving their own SNAP benefits.</p> <p>When determining the SNAP household composition, all persons, even if they are members of different families, who customarily purchase and prepare meals together are to be considered members of the same SNAP household.</p> <p>In most instances, the SNAP household composition should have been determined by the household's responses to the following question on page 3 of the New York State Application for Certain Benefits and Services (LDSS-2921) or page 3 of the New York State Recertification Form for Certain Benefits and Services (LDSS-3174):</p> <ul style="list-style-type: none"> • Does this person (including minor children) buy food or prepare meals with you?

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

When determining the SNAP household composition, the household's responses to who eats and prepares meals together must be accepted without verification unless the information is questionable.

The following individuals do not qualify to be a separate SNAP household even if the individuals do not purchase and prepare meals together:

Individuals who are mandated to be in the same SNAP household. Refer to [PB #17-10-ELI](#).

- Spouses living together
- Children under 22 years of age living with their parent(s) (includes stepchildren), and if applicable, the children's spouse and their own children.
- Children under 18 (except foster children) under the parental control of an adult household member who is not the children's parent or step parent.

If the household confirms that all of the individuals in one CA suffix eat and prepare meals with the all of the individuals in the other CA suffix, the SPC Job Opportunity Specialist (JOS) must make a comment in the electronic case record to reflect that. No further action is to be taken on the case.

See [PB #13-16-SYS](#) for the CA case number reuse in WMS procedure.

However, if the household states that the individuals in one CA suffix eat and prepare meals separately from the individuals in the other CA suffix, the higher CA suffix number will need to have their CA suffix closed and a new case must be opened under a different CA case number.

Note: The above does not apply if any individuals in one CA suffix are mandated to be in the same SNAP household of an individual in another CA suffix.

If the individuals in one CA suffix do not eat and prepare meals with the individuals in the other CA suffix, have one of the adult household members complete the Change in Household Section on page 4 of the Supplemental Nutrition Assistance Program (SNAP) Change Report Form (**LDSS-3151**) and sign the back page of the **LDSS-3151**. The form must be scanned and indexed into the HRA OneViewer. Inform the household that a new CA/SNAP case will be established for the CA suffix that does not currently contain the SNAP head of household.

For the household whose case number will be changed, check to see if they have any active CA recoupments for their suffix that will need to be transferred to their new case number.

See the Authorization of Grants (AOG) Manual for instructions on closing one suffix on a multi-suffix case.

The case of the suffix that will be closed, should be closed for CA with code **Y93** (case number changed). Once the suffix has closed in WMS, a new CA/SNAP case should be opened with opening code **Y67** (Other) for CA and opening code **Y45** (other) for SNAP. The CA and SNAP benefits on the new case should be authorized to begin the day after the benefits on their previous case ended. For example, if the household received CA benefits under the previous case number through February 20th, the CA benefits on the new case number should begin on February 21st. If the household was issued SNAP benefits under the previous case through February 28th, the SNAP benefits on the new case should begin on March 1st.

The household getting a new case number must be sent a Notice of Intent to Change Benefits (**LDSS-4016 A NYC**) and a Notice of Intent to Change Benefits (**LDSS-4016 B NYC**) to inform them that a new case number has been established for them because they are now a separate SNAP household. The amount of the household's new CA and SNAP grants must be included on the notices. .

If the household whose case number is being changed is receiving CA benefits under the Safety Net Cash Assistance (SNCA) category, they are not subject the 45 day CA waiting period.

See [PD #04-31-ELI](#) for the shelter allowance procedure.

When determining the shelter allowance, the schedule with children must be used for the separating households, if the residential unit contains a child under age 18 or under age 19 and a full time student regularly attending a secondary school or contains a pregnant individual. If neither household contains such an individual, the shelter allowance without children must be used.

Effective Immediately

Reference:

16-INF-16

Related Items:

[PB #17-10-ELI](#) Revisions to the Supplemental Nutrition Assistance Program (SNAP) Benefits Household Composition Desk Guide (LDSS-4314)

[PD #13-27-ELI](#) CA, SNAP, and Employment Requirements for Individuals 16 Through 20 Years of Age

[PB #13-16-SYS](#) Cash Assistance Case Number Reuse in WMS

[PD #04-31-ELI](#) Shelter Allowances and Related Changes

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

Attachments:

- FIA-1186 (E)** You May Qualify to Receive Your Own Supplemental Nutrition Assistance Program (SNAP) Benefits (01/18/2017)
- FIA-1186 (S)** You May Qualify to Receive Your Own Supplemental Nutrition Assistance Program (SNAP) Benefits (Spanish) (01/18/2017)



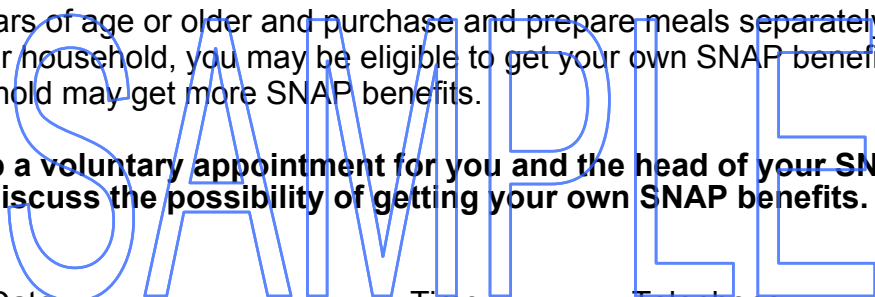
Date: _____
Case Number: _____
Case Name: _____
Center: _____

You May Qualify to Receive Your Own Supplemental Nutrition Assistance Program (SNAP) Benefits

You are currently a member of a household receiving SNAP benefits. Since you are not the head of this household, you cannot use the SNAP benefits yourself.

If you are 22 years of age or older and purchase and prepare meals separately from other members of your household, you may be eligible to get your own SNAP benefits. This means that your household may get more SNAP benefits.

We have set up a voluntary appointment for you and the head of your SNAP household to discuss the possibility of getting your own SNAP benefits.



Appointment Date: _____ Time: _____ Telephone: _____

Center Name: _____

Center Address: _____

City: _____ State: _____ Zip Code: _____

For travel directions, please call the New York City Transit Authority at **(718) 330-1234** or **511**.

**THIS IS A VOLUNTARY APPOINTMENT.
YOU ARE NOT REQUIRED TO KEEP THIS APPOINTMENT!**



Fecha: _____
Número del Caso: _____
Nombre del Caso: _____
Centro: _____

Usted Puede Cualificar para Recibir Sus Propios Beneficios del Programa de Asistencia de Nutrición Suplementaria (SNAP)

Actualmente usted es miembro de un hogar que recibe beneficios de SNAP. Puesto que usted no es jefe de este hogar, no puede usar los beneficios de SNAP usted mismo.

Si usted tiene 22 años de edad o más y compra y prepara comidas aparte de los demás miembros de su hogar, puede ser elegible para recibir sus propios beneficios de SNAP. Esto significa que su hogar puede recibir más beneficios de SNAP.

Le hemos programado una cita voluntaria a usted y al jefe de su hogar de SNAP para tratar de la posibilidad de que usted reciba sus propios beneficios de SNAP.

Fecha de la Cita: _____ Hora: _____ Teléfono: _____

Nombre del Centro: _____

Dirección del Centro: _____

Ciudad: _____ Estado: _____ Código Postal: _____

Para indicaciones de viaje, favor de llamar a la New York City Transit Authority al **(718) 330-1234** o al **511**.

**ESTA CITA ES VOLUNTARIA.
¡NO ES OBLIGATORIO QUE USTED CUMPLA ESTA CITA!**