



OFFICE OF POLICY, PROCEDURES, AND TRAINING

POLICY DIRECTIVE #23-07-SYS

WELFARE MANAGEMENT SYSTEM (WMS) SOFTWARE RELEASE VERSION 2023.2

Date: July 3, 2023	Subtopic(s): WMS
AUDIENCE	The instructions in this policy directive are for all Welfare Management System (WMS) users in Benefits Access Centers (BAC), Non-Cash Assistance (NCA) Supplemental Nutrition Assistance Program (SNAP) Centers, and HIV/AIDS Services Administration (HASA) Centers, and ancillary sites. They are informational for all other staff.
POLICY	New York State's (NYS) WMS is updated on a regular basis to reflect changes in City, State, and Federal regulations. The WMS Software Release Version 2023.2 migrated into production on June 17, 2023.
SYSTEM ENHANCEMENTS	Changes that became effective with the June 17, 2023 release of WMS Software Release Version 2023.2 include the following topics: <ul style="list-style-type: none">• New Issuance Code (N8) for the Stewart vs Roberts Lawsuit.• New Restored Benefit Reason Code X06 for the Stewart vs Roberts Lawsuit Notice.• Changes to the Family Homelessness and Eviction Prevention Supplement (FHEPS).• Eliminate Initial Six (6) Month Cash Assistance (CA)/SNAP Recertification.• 2023 Earned Income Disregard and Poverty Level Changes Mass Rebudgeting (MRB).• Change Definition of CA Reason Code E18 and change one paragraph of the E18 CA Closing Notice.• Reinstate Old Medicaid (MA) Rules for V30 Sanction and Create New MA Individual Reason Closing Code 682.

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

- New CNS Notice for **V30** (OCSS) CA Sanction When Someone on the Case is Simultaneously being Removed from MA.
- New SNAP Single Issuance Codes **RC**, **RD** – Replacement for Skimmed Electronic Benefit SNAP and a new CA Single Issuance Code **RE** – Replacement for Skimmed Electronic Benefit.
- New CA Single Issuance Code **T8** (Replacement of Skimmed SNAP Benefits – TANF).
- New Budget Reason Code **BB1** Language.
- New Client Notification System (CNS) Language Internal Reason Code **640**.

New Issuance Code (N8) for the Stewart vs Roberts Lawsuit

Refer to [PD #23-04-ELI](#)

Previously: Individuals who were determined otherwise eligible for CA but were denied, because they owned a vehicle with a fair market value over the exempt vehicle resource level.

With this release: As a result of the decision in the Stewart vs Roberts Lawsuit some individuals who were previously determined ineligible for CA, due to ownership of a vehicle with a fair market value over a specified level, may now be eligible for retroactive relief, provided that the vehicle's equity value and the applicant's other countable resources are less than the statutory resource limit.

A new Issuance Code **N8** (STEWART LAWSUIT) will be used for retroactive CA Benefit Issuance. The **N8** code will only be data entered manually by a worker.

Payment Criteria:

- Case Type: Family Assistance (FA), Safety Net Federally Participating Non-Cash Assistance (SNFP), Safety Net Cash Assistance (SNCA), or Safety Net Non-Cash Assistance (SNNC).
- Pickup Code: **9** (EBT) or **1** (Special Roll Check for Center **052**).
- Payment Type: **N8**.
- Maximum Payment Amount: \$8,260.00.
- Routing Location: Blank.
- Restriction Indicator: **1** (EBT) or **2** (Paper check).
- **N8** Payments will be made to each eligible class member.
- Case Status: Only Active (Case Status **10**).
- Individual Status: Only Active (Ind. Status **07**).

- There will be no designated authorization number that will be associated with this payment.
- Duplicate payments are not allowed but payments with overlapping dates will be allowed.
- **N8** payments will always have a '**From**' and '**To**' date less than the current date.
- '**From**' date issuances cannot be prior to 07/20/2015.
- '**To**' date issuances cannot be after 05/10/2020.
- Payments to class members in Residential Treatment Centers (RTC) Center (**052**), must be issued by check. CA CTR=**052**, PUC=**1**, Restriction Indicator=**2**, routing loc=spaces and Payee name and address fields must be included. Center **052** is the only center to allow checks.

New Restored Benefit Reason Code X06 for the Stewart vs Roberts Lawsuit Notice.

With this release: A new restored benefit reason code **X06** for the Stewart vs Roberts lawsuit notice was created. Reason code **X06** is a case level reason code. Valid case types are FA, SNFP, SNCA, or SNNC.

CNS will generate restored benefit notices for Stewart vs Robert class members, when CA reason code is **X06**, the Medical Assistance (MA) reason code is **756** (CA/MA Continue Unchanged), and the SNAP reason code is **Y20** (no action taken against SNAP).

Changes to the Family Homelessness and Eviction Prevention Supplement (FHEPS)

Refer to [PB #23-15-ELI](#)

Previously: The New York State Fiscal Year (SFY) 2022-2023 Enacted Budget limited reimbursement for the Family Homelessness and Eviction Prevention Supplement (FHEPS) in New York City (NYC) to the maximum rental amounts in place as of January 1, 2021. Additional language added in the Enacted Budget provides for future annual adjustments of this reimbursement amount, equal to the annual increase in Fair Market Rent (FMR), with no downward adjustment if FMR decreases year-to-year.

With this release: For FHEPS A, NYC will still be responsible for paying costs over 100% FMR (and up to the 110% FMR amount noted in the approved FHEPS plan). However, now there will be three distinct funding sources which will be separated and identifiable in the system. Two are already in existence; the State

restricted shelter amount which is the shelter allowance combined with the state funded supplement – payment type code **10**, and the NYC supplement – payment type code **WE**. A new suffix level field and payment codes were created in NYC WMS Budgeting for the new Rent Supplement Program (RSP), the third funding source for FHEPS A. This new field will contain the dollar difference amount between the 100% FMR and the State maximum payment.

Eliminate Initial Six (6) Month CA/SNAP Recertification

Previously: Newly accepted CA/SNAP cases begin their recertification cycle four months from the initial eligibility determination. The actual SNAP authorization period for these newly accepted cases is six months. This presents a burden on processing staff by requiring a new eligibility redetermination in such close proximity to the initial one.

Moved to production off-release: The first initial CA/SNAP recertification authorization period moved from 6 to 12 months. Rules for all related recertification processes remain unchanged, including rules for generating the 6-month mailer and high-risk processing. This went into effect February 10, 2023.

2023 Earned Income Disregard and Poverty Level Changes Mass Rebudgeting (MRB)

Refer to [PD #23-05-ELI](#)

Annually on June 1, as required by Social Services Law Section 131-a (8)(a)(iii), the percentage of earned income disregarded from a CA case must be adjusted to reflect changes in the most recently issued poverty guidelines of the United States Bureau of the Census. This change also requires that income thresholds for the amount of earned income subject to the disregard be updated.

With this release: For budgets with Effective Dates of **06/A/2023** or later, the earned income disregard is changed from 50% to 62%. Budgets with Effective Dates prior to **06/A/2023** should continue to use 50%.

For budgets with Effective Dates of **06/A/2023** or later, the following table look-up amounts should be used to determine the amount of income that can be disregarded as part of the earned income disregard. Budgets with Effective Dates prior to **06/A/2023** should continue to use current table amounts.

HH Size	100% Federal Poverty Level (monthly)
01	\$1,215.00
02	\$1,643.33
03	\$2,071.67
04	\$2,500.00
05	\$2,928.33
06	\$3,356.67
07	\$3,785.00
08	\$4,213.33
09	\$4,641.67
10	\$5,070.00
11	\$5,498.33
12	\$5,926.67
13	\$6,355.00
14	\$6,783.33
15	\$7,211.67
16	\$7,640.00
17	\$8,068.33
18	\$8,496.67
19	\$8,925.00
20	\$9,353.33

For budgets with Effective Dates of **06/A/2023** or later, the formatted field on Report **WINR0146** should display 62% instead of 50%. Budgets with Effective Dates prior to **06/A/2023** should continue to display the 50% format.

The MRB was completed to ensure that participants who are in receipt of earned income are budgeted with the correct income disregard.

Automated notices were created via CNS informing participants of the grant changes.

Change Definition of CA Reason Code E18 and change one paragraph of the E18 CA Closing Notice

Previously: The WMS Worker's Guide to Codes (WGC) had the following definition for CA Closing Reason Code **E18**:

Failed to Keep BEV Office Appointment

Public Assistance has been discontinued because the client failed to keep an office appointment with Bureau of Eligibility Verification Investigator.

MA Separate Determination, SNAP Separate Determination (See Note).

PA: 18 NYCRR 351.4; MA: 360-2.2; SNAP: 18 NYCRR 387.17

With this release: Since the Bureau of Eligibility Verification (BEV) is not necessarily conducting these interviews, the definition of **E18** in the WMS WGC should be changed to the following:

Failed to Keep Agency Investigatory Appointment

Public Assistance has been discontinued because the client failed to keep an appointment with Agency Investigator.

MA Separate Determination, SNAP Separate Determination (See Note).

PA: 18 NYCRR 351.4; MA: 360-2.2; SNAP: 18 NYCRR 387.17

Previously: In the CNS Notice for Closing Reason Code **E18** on page 2, the second paragraph in the CA section reads as follows:

This is because you did not keep the appointment with the Bureau of Eligibility Verification (BEV) investigator on (Date) between 9am — 5pm at 253 Schermerhorn St., Brooklyn, NY 11217. We told you about this appointment in advance.

With this release: This paragraph has changed to the following:

This is because you did not keep an interview appointment with the agency investigator on (Date). We told you about this appointment in advance.

Reinstate Old MA Rules for V30 Sanction and Create New MA Individual Reason Closing Code 682.

Previously: During the Public Health Emergency, individuals in receipt of Medicaid were not to lose coverage for any reason other than death, moving out of state, or at their own request.

Refer to [PD #14-20-ELI](#)

With this release: Beginning on July 1, 2023, the Medicaid denial/closing rules are changing. Individuals in receipt of Medicaid must comply with the Office of Child Support Services (OCSS) or risk losing coverage. When an applicant/participant fails to comply with OCSS, they are subject to a sanction which reduces their needs by 25% and makes them ineligible for Medicaid (unless pregnant or who are within 12 months of their Expected Date of Confinement [EDC]). The **V30** (non-cooperation with Office of Child Support Services) sanction process will revert to the old pre pandemic rules. This should take effect as of the **7A2023** budget.

The new MA Closing Reason Code of **682** will be used and passed to CNS only for the **V30** individuals that are being removed from MA at the same time as the **V30** sanction.

New CNS Notice for V30 (OCSS) CA Sanction When Someone on a Case is Simultaneously being Removed from MA

Previously: The Medical Assistance section of the **V30** CNS notice, the sentence that explained why the individual was removed from MA states: '*This is for the same reason as your Temporary Assistance is being discontinued*'. This sentence is not valid for the **V30** MA removals because the Temporary Assistance is not being discontinued. It is just being reduced. See the sample of the notice:

MEDICAL ASSISTANCE

We will discontinue your Medicaid effective (Date) for:

Name *Client I.D.*

This is for the same reason as your Temporary Assistance being discontinued.

If Medicaid is paying health insurance premiums, including Medicare, for you, payment of these premiums will be discontinued.

This decision is based on Social Services Law 366(1)(a).

With this release: The above notice will change to:

MEDICAL ASSISTANCE

We will discontinue your Medicaid effective (Date) for:

Name Client I.D.

This is because you failed to cooperate with the Office of Child Support Services (OCSS).

If Medicaid is paying health insurance premiums, including Medicare, for you, payment of these premiums will be discontinued.

This decision is based on Social Services Law 366 (1) (d) (3).

New SNAP Single Issuance Codes RC, RD - Replacement for Skimmed Electronic Benefit SNAP, and a new CA Single Issuance Code RE – Replacement for Skimmed Electronic Benefit.

With this release: Two new SNAP Single Issuance Codes **RC** and **RD** were created for replacement of skimmed electronic SNAP benefits. Issuance Code **RC** will be used for replacement of skimmed electronic SNAP benefits for CA/SNAP cases, and Issuance Code **RD** will be used for replacement of skimmed electronic SNAP benefits for NCA SNAP cases. A new CA Single Issuance Code **RE** was created for replacement for skimmed electronic CA benefits for CA cases.

The definition for **RC** will be "Replacement for Skimmed Electronic Benefit CA-SNAP".

The definition for **RD** will be "Replacement for Skimmed Electronic Benefit NCA-SNAP".

The definition for **RE** will be "Replacement for Skimmed Electronic Benefit CA".

Payment Criteria:

- Payment Type code **RC** and **RE** will be used for Case Types: FA, SNFP, SNCA, SNNC.
- Payment Type code **RD** will be used for Case Type: NCA SNAP.

- Case status: AC, SI, CL.
- Routing Location: EBT.
- Payment from date cannot be prior to 10/01/22.
- Payment From and To Dates must be the current Federal Fiscal Year (FFY), regardless of the FFY of skimmed benefit.

Examples:

For FFY 2023: The system will only allow: 10/01/22 – 09/30/23.

For FFY 2024: The system will only allow: 10/01/23 – 09/30/24.

For FFY 2025: The system will only allow: 10/01/24 – 09/30/25.

- Payment From and To Dates may be prior to or after the authorization period.
- There will be no system edits against payment amount.
- The maximum SNAP issuance amount is \$5,000 for a single-issue payment.
- There will be no system edits against the number of payments authorized in the FFY.
- Code **RC**, **RD**, and **RE** will be used for mass authorizations and worker entered transactions.

Note: No replacement of funds may occur until additional guidance is provided. Once provided, staff will not use those codes unless directed by a Fair Hearing as part of Fair Hearing compliance to replace the skimmed benefits. Additional guidance will be issued on the replacement process once it is finalized by the State.

New CA Single Issuance Codes T8 (Replacement of Skimmed SNAP Benefits -TANF)

With this release: A new CA Single Issuance Code **T8** was created. Issuance Code **T8** will be used for replacement of skimmed electronic SNAP benefits for CA/SNAP cases and SNAP only cases. The definition for **T8** will be " Replacement of Skimmed SNAP Benefits-TANF". **T8** will be used for mass authorizations and worker entered transactions.

Payment Criteria:

- Payment Type code **T8** will be used for Case Types: FA, SNFP, SNCA, SNNC, Emergency Assistance for Adults (EAA), Emergency Assistance to Families (EAF), and NCA SNAP.

- Case status: AC, SI, CL.
- Routing Location: Blank.
- Restriction Indicator: **1**.
- PUC codes of **1 & 9**.
- Payment from date cannot be prior to 01/01/22.
- When the payment from date is 01/01/2022, the payment to date must be 9/30/2022, except for payments with a payment from date of 01/01/2022, the system will require payment from dates to be = to 10/01/2022 of the current FFY and payment to dates = to 09/30/2023 of the current FFY.
- Payment From and To Dates may be prior to or after the authorization period.
- There will be no system edits against payment amount.
- The maximum CA issuance amount is \$ 9,999.99 for a single-issue payment.
- There will be no system edits against the number of payments authorized.
- Code **T8** will be used for mass authorizations and worker entered transactions.
- Payment for the payment period 01/01/22 – 09/30/22 should not be allowed after the FFY 10/01/22 – 09/30/23.

Note: No replacement of funds may occur until additional guidance is provided. Once provided, staff will not use those codes unless directed by a Fair Hearing as part of Fair Hearing compliance to replace the skimmed benefits. Additional guidance will be issued on the replacement process once it is finalized by the State.

New Budget Reason Code BB1 Language

With this release: A new budget reason code **BB1** (No Surplus/Spenddown to Surplus/Spenddown) and CNS paragraph language were created. The **BB1** CNS paragraph notices are triggered with budget change to Medicaid Automated Budgeting Eligibility Logic (MABEL) and during renewal. The **BB1** code will clock the case for 14 days.

New Client Notification System (CNS) Language Internal Reason Code 640

With this release: Add new CNS language for a new system-generated internal case-level reason code **640** (Extend MA coverage

for Disabled, Aged and Blind (DAB) and Medicaid Buy-In (MBI) program for working people with disabilities). Reason code **640** will only be visible through the CNS Inquiry Screen. This reason code should display following the case closing reason code. When reason code **640** is displayed, no further processing should be done.

PROGRAM IMPLICATIONS

Paperless Office System (POS) Implications	For POS Implications see PB #23-34-SYS and PB #23-35-SYS .
SNAP Implications	SNAP Implications are included within this policy directive.
Medicaid Implications	Medicaid Implications are included within this policy directive.

LIMITED ENGLISH PROFICIENT AND DEAF/HARD-OF-HEARING IMPLICATIONS

For Limited English Proficient (LEP) and Deaf/Hard-of-Hearing applicants/participants, make sure to obtain appropriate interpreter services in accordance with [PD #18-10-OPE](#), [DSS-PB-2021-007](#), and [PD #17-19-OPE](#).

FAIR HEARING IMPLICATIONS

Avoidance/Resolution	Ensure that all case actions are processed in accordance with current procedures and that electronic case files are kept up to date. Remember that applicants/participants must receive either adequate or timely and adequate notification of all actions taken on their case.
Conferences at Benefits Access Centers	An applicant/participant can request and receive a conference with a Fair Hearing and Conference (FH&C) AJOS/Supervisor I at any time. If an applicant/participant comes to the Benefits Access Center requesting a conference, the Receptionist must alert the FH&C Unit that the individual is waiting to be seen. In Model Offices, the Receptionist at Main Reception will issue an FH&C ticket to the applicant/participant to route him/her to the FH&C Unit and does not need to verbally alert the FH&C Unit staff.

The FH&C AJOS/Supervisor I will listen to and evaluate any material presented by the applicant/participant, review the case file and discuss the issue(s) with the JOS/Worker responsible for the case and/or the JOS/Worker's Supervisor. The AJOS/Supervisor I will explain the reason for the Agency's action(s) to the applicant/participant.

If the determination is that the applicant/participant has presented good cause for the infraction or that the outstanding Notice of Intent (NOI) needs to be withdrawn for other reasons, the FH&C AJOS/Supervisor I will Settle in Conference (SIC), post Action Code **820** (Good Cause Granted) or **820H** (Good Cause Granted for Wellness, Comprehensive Assessment, Rehabilitation and Employment [WECARE] infractions), refer the applicant/participant back to the JOS/Worker by posting Action Code **10FH** or **16FH** (for referrals back to WeCARE), and enter detailed case notes in New York City Work, Accountability and You (NYCWAY). The AJOS/Supervisor I will forward all verifying documentation submitted by the applicant/participant to the appropriate JOS/Worker for corrective action to be taken.

In addition, if the adverse case action still shows on the "Pending" (**08**) screen in WMS, the AJOS/Supervisor I must prepare and submit a Fair Hearing/Case Update Data Entry Form ([LDSS-3722](#)), change the **02** to **01** if the case has been granted Aid to Continue (ATC), or prepare and submit a PA Recoupment Data Entry Form – WMS ([LDSS-3573](#)) to delete a recoupment. The AJOS/Supervisor I must complete a Conference Report ([M-186a](#)).

If the participant fails to show good cause for the infraction or if it is determined that the Agency's action(s) should stand, the AJOS/Supervisor I will explain to the applicant/participant why he/she cannot SIC. The AJOS/Supervisor I must complete Form **M-186a**.

Should the applicant/participant elect to continue his/her appeal by requesting a Fair Hearing or proceeding to a hearing already requested, the FH&C AJOS/Supervisor I is responsible for ensuring that further appeal is properly controlled, and that appropriate follow-up action is taken in all phases of the Fair Hearing process.

Conferences at NCA SNAP Centers

If an applicant/participant comes to the NCA SNAP Center and requests a conference, the Receptionist must alert the Center Director's designee that the applicant/participant is to be seen. If the applicant/participant contacts the Eligibility Specialist directly, advise the applicant/participant to call the Center Director's designee.

In Model Offices, the Receptionist at Main Reception will issue a SNAP Conf/Appt/Problem ticket to the applicant/participant to route him/her to the NCA SNAP Reception area and does not need to verbally alert the Site Manager. The SNAP Receptionist will alert the Center Director once the applicant/participant is called to the NCA/SNAP Reception desk.

The Center Director’s designee will listen to and evaluate the applicant’s/participant’s complaint regarding the case closing. The applicant/participant must provide current verification of address to resolve the issue. After reviewing the documentation, case record, and discussing the issue with the Group Supervisor/Eligibility Specialist, the Center Director’s designee will decide to resolve or defend the case based on all factors and whether the case was closed correctly.

The Center Director’s designee is responsible for ensuring that further appeal by the applicant/participant through a Fair Hearing request is properly controlled and that appropriate follow-up action is taken in all phases of the Fair Hearing process.

Evidence Packets All Evidence Packets must contain a detailed history (e.g., copies of POS “Case Comments” and/or NYCWAY “Case Notes,” History Sheet [\[W-25\]](#)), copies of relevant WMS screen printouts, notices sent, and other documentation relevant to the action taken.

REFERENCES

Authorization of Grants
 Worker’s Guide to Codes
 GIS #21 TA/DC020
 21-INF-04T
 SPP #2022-00045 New Issuance Code (**N8**) for the Stewart vs Roberts Lawsuit
 SPP #2022-00056 New Restored Benefit Reason Code **X06** for the Stewart vs Roberts Lawsuit Notice
 SPP #2022-00105 Changes to the Family Homelessness and Eviction Prevention Supplement (FHEPS)
 SPP #2022-00216 Eliminate Initial Six (6) Month CA/SNAP Recertification
 SPP #2023-00033 2023 Earned Income Disregard and Poverty Level Changes Mass Rebudgeting (MRB)
 SPP #2023-00046 Change Definition of CA Reason Code **E18** and change one paragraph of the **E18** CA Closing Notice

SPP #2023-00063	Reinstate Old MA Rules for V30 Sanction and Create New MA Individual Reason Closing Code 682
SPP #2023-00074	New CNS Notice for V30 (OCSS) CA Sanction When Someone on a Case is Simultaneously being Removed from MA
SPP #2023-00095	New SNAP Single Issuance Codes RC, RD - Replacement for Skimmed Electronic Benefit SNAP and a new CA Single Issuance Code RE – Replacement for Skimmed Electronic Benefit.
SPP #2023-00125	New CA Single Issuance Code T8 (Replacement of Skimmed SNAP Benefits - TANF)
SPP #2021-00203	New Budget Reason Code BB1 Language
SPP #2023-00011	New CNS Language Internal Reason Code 640

RELATED ITEMS

- [PD #14-20-ELI](#)
- [PD #23-04-ELI](#)
- [PD #23-05-ELI](#)
- [PB #23-15-ELI](#)