



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 DIRECTIVE #06-08-OPE (This Policy Directive Replaces CD #05-15)

FAIR HEARING DECISION COMPLIANCE PROCESS

Date: April 10, 2006	Subtopic(s): Fair Hearing
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AUDIENCE The instructions in this policy directive are for Job Center/Model Office and Non-Public Assistance Food Stamp (NPA FS) Office staff involved in processing Fair Hearing compliances. The instructions are informational for all others.

POLICY Once a Fair Hearing decision is received, the Family Independence Administration (FIA) has 30 calendar days to fully comply with Public Assistance (PA) decisions and 10 calendar days for Food Stamp (FS) decisions.

BACKGROUND Given the decision rendered by the State Hearing Officer, one of the following NYCWAY codes will autopost on the case:

- **727** Fair Hearing Decision Agency Withdrawal
- **728** Fair Hearing Decision Received – Correct When Made
- **729** Fair Hearing Decision Received – Other
- **729S** Fair Hearing Decision Received – Split
- **770** Fair Hearing Decision Received – Agency Affirmed
- **780** Fair Hearing Decision Received – Agency Reversed/
Remand

The case will then be placed on the daily **FHOUT** (Fair Hearing Outcomes) Worklist.

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*

REQUIRED ACTION

Job Center/Model Office Processing Units will now handle all Fair Hearing compliance issues for both the Job Center and collocated NPA FS Office, with the exception of the Brighton NPA FS Office. The Brighton NPA FS Office will be responsible for all the tasks outlined in this policy directive.

The Associate Job Opportunity Specialist II (AJOS II) in charge of the Processing Unit will oversee all compliance processes for both the Job Center and the NPA FS Office. The collocated NPA FS Office will designate a Principal Administrative Associate II (PAA II), who will be responsible for assisting the AJOS II with all compliance-related issues in the NPA FS Office. In the Brighton NPA FS Office, the PAA II will oversee the entire compliance process.

Family Independence Administration Operations (FIAO) Regional Managers will have citywide oversight responsibility and must monitor the compliance process to ensure timely completion, using worklist reports and other reports created specifically for this process.

Center Directors will be responsible for monitoring the compliance process and ensuring timely completion for their Centers and collocated NPA FS Offices.

All noncompliance complaints, including those from the Office of Temporary and Disability Assistance (OTDA) Office of Administrative Hearings (OAH), will be sent to the respective Center Director's office (with a copy sent to the Regional Office), which must track and monitor complaints to ensure a timely response. For these types of complaints, the Center Director's Office should respond to the OTDA on the Fair Hearing Information System (FHIS). If there is no response, the complaint stays on the withhold list.

M-186q and **M-186mm** have been made obsolete

The Food Stamp Fair Hearing Decision Tracking Sheet (**M-186q**) and the PA Fair Hearing Decision Tracking Sheet (**M-186mm**) are now obsolete and have been replaced by the Fair Hearing Tracking Sheet (**W-186E**). Center Directors/Site Managers must ensure that all **M-186q** and **M-186mm** forms are recycled.

The designated person in the Brighton NPA FS Office is responsible for all tasks outlined in this policy directive.

Compliance Process

The Job Center/Model Office Processing Unit Clerk must:

- Print out for the collocated Job Center and NPA FS Office:
 - the **FHOUT** Worklist in NYCWAY;
 - the decisions and the **FH029N** report from WEBCOINS.
- Reconcile the **FH029N** and **FHOUT** to ensure that all information is consistent;

See **Attachment A** for instructions on accessing the **FH029N** report from WEBCOINS.

- If any decisions have been assigned to the wrong Center, this must be brought to the attention of the Processing Unit AJOS I/Supervisor, who will:
 - Alert the AJOS II, who must inform the State that the Center number must be changed;
 - Access the Agency Correction form (**LDSS-524EL**) via <http://otda.state.nyenet/ah/eagencycorr.asp>. The **LDSS-524EL** should be completed electronically but must be printed and faxed to the State. The fax number appears at the top of the form;
 - Inform the correct Center to pull up the decision and process the compliance.

Note: A Center has 72 hours to alert the correct Center to pull up the decision or the receiving Center will be held responsible for completing the compliance.

- Forward the reconciled **FHOUT** Worklist and Fair Hearing decisions to the Processing Unit AJOS I/Supervisor for review.

The Processing Unit AJOS I/Supervisor must then:

See **Attachment B** for instructions on accessing the compliance subsystem.

- Access **Section I** of the **W-186E** in NYCWAY;
- Manually enter the case type in the **Program Type** field (i.e., PA, FS, medical assistance [MA]) (the **Decision Type** field will autopopulate);
- Fill in the **Remand** field to indicate whether or not the decision is a remand (see page four for the definition of a Remand);
- After annotating **Section I** on the **W-186E**, click **OK**. This will post Action Code **71CA** (Compliance Case) in NYCWAY, which will put the case on the **COMPL** Worklist;
- Forward and assign the decisions, as appropriate, to a JOS/Worker in the Processing Unit.

See **Attachment C** for the complete list of FH Compliance Process Action Codes.

Upon receipt of the decision, the JOS/Worker must:

- Access the annotated **W-186E** via the Compliance subsystem;
- Review and interpret the Fair Hearing decision to determine what action(s) are required.

Decision Types and JOS/Worker Action

Affirmed or Other

If the Agency was upheld (Affirmed) or the Hearing Officer lacked jurisdiction (Other) and Aid-to-Continue (ATC) was not granted, no action needs to be taken because the Agency won the Fair Hearing and the adverse action remains in place. If ATC was granted, the JOS/Worker must:

- Prepare the Fair Hearing Update Data Entry form (**LDSS-3722**) to change the Fair Hearing status from Code **2** (Aid Continuing) to Code **5** (Client Lost Fair Hearing Agency Upheld). This will initiate the original action that prompted the Fair Hearing request;
- Complete the PA Recoupment Data Entry Form (**LDSS-3573**). All cash benefits received from the date ATC was initiated must be recouped in accordance with the Fair Hearing decision. As a result of this recoupment action, the appropriate notice will be generated via the Client Notice System (CNS); For recoupment of Food Stamp benefits, the JOS/Worker must complete the Discrepant Information Tracking Form (**W-140M**) and forward it and supporting documentation to the Office of Fiscal Operations per current procedure.
- If ATC was initiated by reopening the case with Code **097** (Aid Continuing - Case Awaiting Fair Hearing decision), close the case using the original closing code and enter an **M3E** indicator of **A** (adequate) in Element **053** of the Turn-Around Document (TAD) to suppress the notice. Recoupment of cash benefits is required. Do not prepare and send a manual notice.

Agency Withdrawal, Reversal, Remand, Correct When Made and Split Decisions

Agency Withdrawal If the Agency agreed at the Hearing to withdraw (Agency Withdrawal) on the issue, the JOS/Worker must take all action necessary to restore assistance and benefits lost by the appellant, retroactive to the date of the Agency’s adverse action.

Reversal If the appellant was upheld (Reversal), the JOS/Worker must issue any skipped assistance as per current procedure and, if necessary, reevaluate employability status.

Remand or Correct When Made If the issue needs to be reevaluated (Remand) or, if circumstances have changed in the appellant’s case causing the Agency to reevaluate the original decision (Correct When Made), the JOS/Worker must reevaluate the case.

In addition to taking any action required by the decision directives for the above decision types, if the case is in receipt of ATC the Fair Hearing status code must be updated. The JOS/Worker must:

- Review the Welfare Management System (WMS) for Fair Hearing Status Code **2**. If there are any occurrences of Code **2**, prepare the **LDSS-3722** to change Code **2** to Code **6** (Client Won Fair Hearing, Client Upheld).

Note: If the case only involved one issue, WMS should automatically update the Fair Hearing status code. If it does, preparation of the **LDSS-3722** will not be necessary.

Split

If the decision contains a combination of outcomes (Split), the JOS/Worker must discern which outcomes were determined and process the case according to those determinations. For example: if an appellant wins one issue and loses another, the JOS/Worker must determine which actions s/he must complete in order to comply with *both* issues. Additionally, if applicable, the Fair Hearing status must be updated with the appropriate code (i.e., Client Won Fair Hearing, Client Upheld [code 6] or Client Lost Fair Hearing, Agency Upheld [code 5]). The code is updated in accordance with the directions given for the decision type above.

Processing Unit JOS/Worker

Appointment for an Interview or Document Return is Not Required

If it is determined that the compliance does not require an appointment for an interview or document return, annotate the automated **W-186E** accordingly and click **OK**. This will post Action Code **71CB** (Compliance Initiated) in NYCWAY. For the rest of the compliance process, proceed to the instructions on page 8 of this procedure.

Appointment for an Interview or Document Return is Required

If an appointment for either an interview or for documentation is required in order to complete the compliance process, the Processing Unit JOS/Worker must:

- Select the appointment type (interview or document return) on **Section IIb** of the **W-186E** in NYCWAY;
- Enter the appointment date on the **W-186E**. This will autopost a **71CI** (Compliance Appointment Sent/Documents) or **71II** (Compliance Appointment Sent/Interview), as appropriate. The case will then be placed on the **COMPA** Worklist with a Future Action Date (FAD) corresponding to the appointment date;
- Manually complete and send the applicant/participant a Fair Hearing Compliance Request (**W-186D**). The applicant/participant has 7 to 10 calendar days to respond. Since Workers must complete Food Stamp compliances within 10 calendar days, applicants/participants must respond within seven calendar days of the notice date for Food Stamp issues. Enter information in FHIS, indicating that a request for contact has been sent.
- Upon completion of **Section IIa**, click **OK**. Action Code **71CB** (Compliance Initiated) will post if it is indicated that no appointment is required; Action Code **71II** will post if it is indicated that an appointment for an interview is required; or Action Code **71CI** will post if it is indicated that a document return appointment is required.

If an appointment is required to complete the compliance, the case will be on the **COMPL** Worklist and the **COMPA** Worklist at the same time.

Job Centers/Brighton
NPA FS Office only

Process to Prepare for Return Appointments

The **COMPA** Worklist identifies applicants/participants with scheduled appointments for interviews (**71II**) and compliances requiring document submission (**71CI**).

- The AJOS II/Supervisor in charge of the Processing Unit will be responsible for printing and forwarding the **COMPA** Worklist to the Receptionist before the close of business each day.
- The following business day the Receptionist will annotate the worklist, indicating whether the applicant/participant kept the appointment.
- At the end of the day, the AJOS II/Supervisor will be responsible for ensuring that the annotated list, as well as all documentation submitted at interviews and document drop-offs, is forwarded to the Processing Unit AJOS I/Supervisor or designated staff person at the Brighton NPA FS Office.
- The Processing Unit AJOS I/Supervisor will provide the Processing Unit JOS/Worker/designated staff at the Brighton NPA FS Office with the information regarding appointments kept and not kept, as well as the documents submitted.
- The Processing Unit JOS/Worker/designated staff at the Brighton NPA FS Office will be responsible for any further action necessary for timely completion of the compliance, including the scanning and indexing of documents.

Interview appointment

Appointment – Interview (Interview Kept)

When an applicant/participant arrives with a **W-186D** and an interview is required, the Receptionist must contact the AJOS II/Supervisor in charge of the Processing Unit, who will assign the interview to a Computer Match Unit (CMU) JOS/Worker. This JOS/Worker must review the case decision directives found in **Section IIa** of the **W-186E** in NYCWAY before meeting with the applicant/participant to conduct the interview. The JOS/Worker must then conduct the appropriate interview (e.g., recertification), and obtain the necessary documentation and forward the information back to the AJOS II in charge of the processing unit.

Document return

Appointment – Document Return Only (Appointment Kept)

- When the applicant/participant arrives with the **W-186D**, the Receptionist will contact the Processing Unit to request that someone pick up the documents.
- The Processing Unit must review the **W-186D**, collect the documents listed from the applicant/participant and give him/her the Documentation Receipt (**EXP-76R**), indicating the receipt of documents submitted.

If an additional return appointment is required, the Worker must select the appointment type required (interview or document return) in **Section IIa** of the **W-186E** in NYCWAY and enter the appointment date, then complete a **W-186D** and give it to the applicant/participant. *Please be mindful to ensure that the additional appointment date does not go beyond the compliance due date.*

Model Offices only

Process to Prepare for Return Appointments Model Offices

The **COMPA** Worklist identifies applicants/participants with scheduled appointments for interviews (**71II**) and compliances requiring document submission (**71CI**).

- The Customer Service Information Centers (CSIC) AJOS II/ Supervisor will be responsible for printing and forwarding the **COMPA** Worklist to the receptionist in Front Door Reception (FDR) area before the close of business each day.
- The following business day the Receptionist will annotate the worklist, indicating whether the applicant/participant kept the appointment.
- At the end of the day, the AJOS II/Supervisor will be responsible for ensuring that the annotated list, as well as all documentation submitted at interviews, be forwarded to the Processing Unit AJOS I/Supervisor.
- The Processing Unit AJOS I/Supervisor will provide the Processing Unit JOS/Worker with the information regarding appointments kept and not kept, as well as the documents submitted at interviews.
- The Processing Unit JOS/Worker will be responsible for any further action necessary for timely completion of the compliance, including the scanning and indexing of documents.

When the applicant/participant comes in with a **W-186D** appointment, the FDR receptionist will route the applicant/participant to CSIC Express.

Interview appointment

Appointment – Interview (Interview Kept)

When an applicant/participant arrives with a **W-186D** and an interview is required, the CSIC Express JOS/Worker must contact the CSIC AJOS II/Supervisor, who will assign the interview to a CSIC JOS/ Worker. This JOS/Worker must review the case decision directives found in **Section IIa** of the **W-186E** in NYCWAY before meeting with the applicant/participant to conduct the interview. The JOS/Worker must then conduct the appropriate interview (e.g., recertification), and obtain the necessary documentation and forward the information back to the AJOS II.

Document return

Appointment – Document Return (Appointment Kept)

The CSIC Express JOS/Worker must:

- Review the **W-186D**, collect the documents listed from the applicant/participant and give him/her the **EXP-76R**, indicating receipt of documents submitted;
- Forward the documents to the Processing Unit AJOS I/Supervisor, who will give them to the Processing Unit JOS/Worker for compliance completion.

If an additional return appointment is required, the CSIC Worker must select the appointment type required (interview or document return) by accessing the **W-186E** in NYCWAY and enter the appointment date, then complete a **W-186D** and give it to the applicant/participant. *Please be mindful to ensure that the additional appointment date does not go beyond the compliance due date.*

Applies to all Centers

Documents Returned Via Fax or Mail

Documents that are returned to the Job Center by applicants/ participants via mail or fax must be forwarded to the Processing Unit AJOS I/Supervisor immediately upon receipt. S/he will distribute the documents to the appropriate Processing Unit JOS/Worker, who will complete the compliance accordingly.

Appointment (Interview or Document Return) Not Kept

The compliance process cannot continue until the necessary document(s) and/or appointment requirements are satisfied. If the applicant/participant fails to respond to the **W-186D**, the Processing Unit JOS/Worker must annotate the **W-186E (Section IIb)** accordingly and click **OK**. The JOS/Worker must also enter this information in FHIS.

These actions must be completed for all Fair Hearing compliances

For All Fair Hearing Compliances

Once all necessary steps have been taken (whether no appointment was required or once all appointments for interviews and/or document returns have been satisfied or if an appointment was not kept) the compliance process continues.

Processing Unit
JOS/Worker

The Processing Unit JOS/Worker must:

- Indicate all actions taken, including benefit amounts/dates and employment-related actions (i.e., employment call-in) where applicable, and annotate them in **Section IIb** of the **W-186E**;
- Click **OK** to post Action Code **71CC** (Compliance Processed) in NYCWAY;
- Complete the Fair Hearing Compliance Statement (**W-186C**);
- Forward the case to the Supervisor for review and sign-off.

Processing Unit
AJOS I/Supervisor

Upon receipt of the compliance work, the AJOS I/Supervisor must:

- Review the **W-186E** in NYCWAY to ensure that all transactions have been properly annotated;
- Review the case record and WMS to ensure that the appropriate actions have been taken;
 - If the compliance work is incomplete, select **NO** to the Compliance Completed question in Section III of the **W-186E** accordingly. This will autopost Action Code **71CD** (Case Requires Further Action) in NYCWAY. The case should be returned to the JOS/Worker for correction and completion.
- Once complete, make an entry in FHIS indicating the action taken. This must be done prior to data entry in NYCWAY;
- Complete the information in **Section III** (Supervisor Sign-Off) of the **W-186E**. Any narrative information entered into the **W-186E** will be stored via Action Code **100A** (Case Note);
- Click **OK** and Action Codes **71CE** (Compliance Complete) and **100A** (Case Note) will post, removing the case from the **COMPL** Worklist.

Fair Hearing
Compliance Review

The Fair Hearing Tracking, Monitoring and Review Unit (FHTMRU) is responsible for reviewing a statistically significant sample of completed compliances from the COGNOS database. The review will confirm the timeliness, accuracy and completeness of compliances reported as completed.

NPA FS decisions are not covered by Piron, but must be completed within 10 days according to State and Federal regulations.

Each Wednesday a sample will be drawn from decisions issued the previous week. The sample will contain decisions with the Piron clock (PA decisions requiring a response within 30 days) on days 5–9. The FHTMRU will review the cases from the sample to see if Action Code **71CE** was posted in NYCWAY. If Action Code **71CE** was posted, FHTMRU will review the action(s) for accuracy and remove the case from the list. If the compliance has not been completed, the case will remain on the list for the following week. The following Wednesday, FHTMRU will review the remaining cases on the list for a compliance completion code. For completed compliances, the FHTMRU will review the case for accuracy, as indicated above.

Second review;
compliance has not been
completed

For incomplete compliances (no evidence of Action Code **71CE** in NYCWAY), the FHTMRU will notify FIA Operations (FIAO) of the decisions that require actions by posting Action Code **71CH** (Fair Hearing Compliance Completion Required). This will place the case on the **COMPL** Worklist. (Note: These cases will also continue to be on the **COMPL** Worklist because the **71CE** has not been posted). In order to provide feedback within the established Piron timeframes, oldest cases will be reviewed first. To ensure thoroughness of the review, the FHTMRU Worker must:

- Review the completed **W-186E** to determine compliance action taken by FIAO staff;
- Determine actions required in the “Discussion,” “Decision and Order” sections of the Fair Hearing decision;
- Determine when appropriate compliance codes and corresponding actions were entered in FHIS;
- Determine whether the benefits due as a result of compliance are actually in the system and review the facts relevant to both the case and the decision via the appropriate screens in WMS;
- Review NYCWAY to ensure appropriate compliance codes were entered;
- Compare compliance completion dates in WMS, NYCWAY and FHIS to confirm timeliness;
- Determine if the actions required to comply with decisions appear both on the tracking sheet and in the automated systems;
- Upon completion of the review, enter Action Code **71CG** (Fair Hearing Complete) in NYCWAY for cases that were reviewed and the compliance action was timely, accurate and complete;
- Enter Action Code **71CF** (Fair Hearing Review Return) in NYCWAY for cases requiring further action. This will place the case back on the **COMPL** Worklist; a FAD of no later than day 28 of the Piron clock will be posted. The FHTMRU will use the **W-186E** to annotate any further actions required (see **Attachment B** for instructions on accessing the subsystem).

Job Center/Brighton NPA
FS Office staff

Compliances Identified as Requiring Further Action by the Fair Hearing Review Process

Cases determined by the Fair Hearing Review Process to be incomplete must be handled by the Processing Unit AJOS I/ Supervisor immediately. S/he must check the **COMPL** Worklist daily for Action Code **71CF** returns. If any returns are found, s/he must print the worklist and access the **W-186E** to view what actions the FHTMRU indicates need to be taken in order to complete the compliance.

The Processing Unit AJOS I/Supervisor is responsible for taking the action necessary to correct and complete these compliances. After doing so, s/he must:

- Access the **W-186E** to enter the new compliance action taken and sign off on case completion;
- Make a compliance entry in FHIS;
- Complete the information in **Section III** (Supervisor Sign-Off) of the **W-186E**, which will autopost Action Code **71CE** in NYCWAY. This removes the case from the **COMPL** Worklist.

PROGRAM IMPLICATIONS

Paperless Office System (POS) Implications

Cases are processed in POS in accordance with current procedure.

Food Stamp Implications

Food Stamp benefits may increase or decrease depending on the outcome of the Fair Hearing decision.

Medicaid Implications

Continued Medicaid eligibility is based on the Fair Hearing decision if the Fair Hearing issue was related to Medicaid.

LIMITED ENGLISH SPEAKING ABILITY (LESA) AND HEARING IMPAIRED IMPLICATIONS

For Limited English Speaking Ability (LESA) and hearing-impaired applicant/participants, make sure to obtain appropriate interpreter services in accordance with PD #05-37-OPE and PD #05-40-OPE.

ATTACHMENTS

- Attachment A** Accessing WEBCOINS
- Attachment B** Using the Compliance Subsystem
- Attachment C** Action Codes Associated with the Fair Hearing Compliance Process
- W-186C** Fair Hearing Compliance Statement (Rev. 4/10/06)
- W-186C (S)** Fair Hearing Compliance Statement (Spanish) (Rev. 4/10/06)
- W-186D** Fair Hearing Compliance Request (Rev. 04/10/06)
- W-186D (S)** Fair Hearing Compliance Request (Spanish) (Rev. 04/10/06)
- W-186E** Fair Hearing Tracking Sheet (04/10/06)

Obsolete

M-186q

Food Stamp Fair Hearing Decision Tracking Sheet
(Rev. 01/10/97)

M-186mm

PA Fair Hearing Decision Tracking Sheet
(Rev. 01/10/97)

INSTRUCTIONS TO RETRIEVE FH029's FROM COLD Introduction

COLD (**C**omputer **O**utput to **L**aser **D**isc) is the system that the Districts use to obtain copies of Fair Hearing issued decisions and to view a copy of the Client Notice System (CNS) Notice and to view copies of the FH029 which lists fair hearing decisions issued on a particular day for a particular agency. The decisions and FH029's are available on COLD on the issuance date.

Once you are signed in, the screen shown on the following page appears. There may be more entries (data groups), depending on your rights and what has been added to the COLD system. The most recent FH029's must be searched by the link "Fair Hearing – FH029N (New System)". Between May 13, 2005 and November 9, 2005, decisions were being issued on both the new system and the old system so that in order to retrieve all the FH029's for a particular time one must search "Fair Hearing – FH029N (New System)" and "Fair Hearing – FH029N (Old System)"

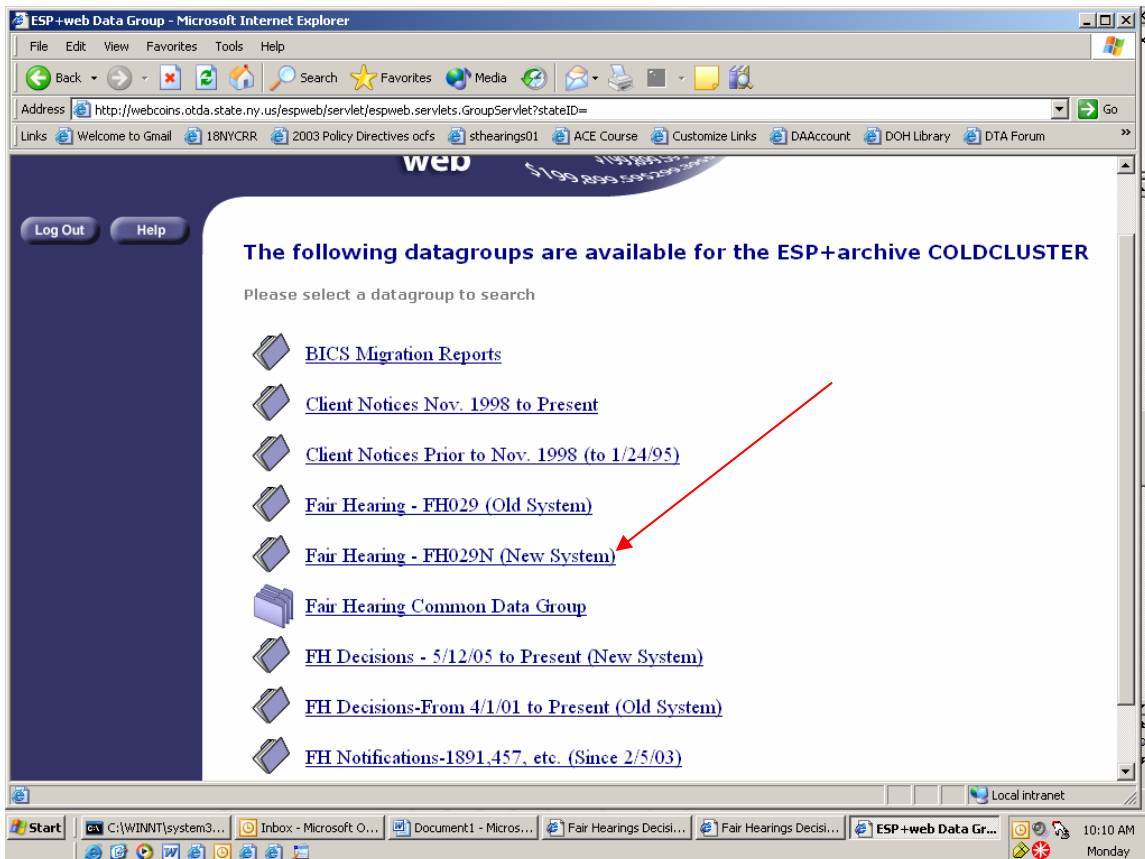
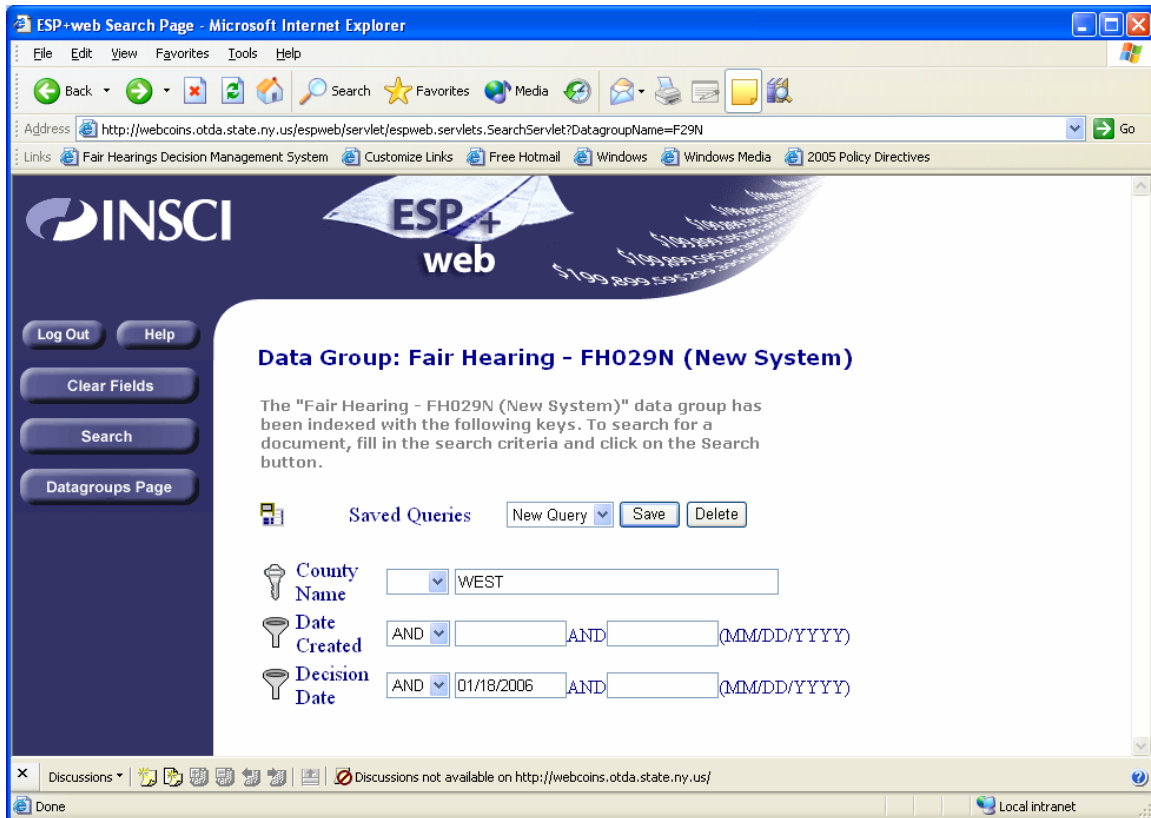


Figure 1: Available Data Groups

1. Click on the choice **"Fair Hearing – FH029N (New System)"**.
2. The following screen appears.

Attachment A



3. Enter the 4 character acronym for your county or center; i.e. N013 or WEST (for Westchester). Enter the issuance date of the decisions to be listed on the FH029.
4. Click Search.
5. The following screen appears.

Attachment A

ESP+web Hitlist Page - Microsoft Internet Explorer

Address: <http://webcoins.otda.state.ny.us/espweb/servlet/espweb.servlets.RecordServlet?MoreDocs=0>

Links: Fair Hearings Decision Management System, Customize Links, Free Hotmail, Windows, Windows Media, 2005 Policy Directives

INSCI ESP+ web

Log Out Help

Search Page

Datagroups Page

Download Documents

Search Results for Data Group: Fair Hearing - FH029N (New System)

Retrieved 1 document(s). No more documents found.

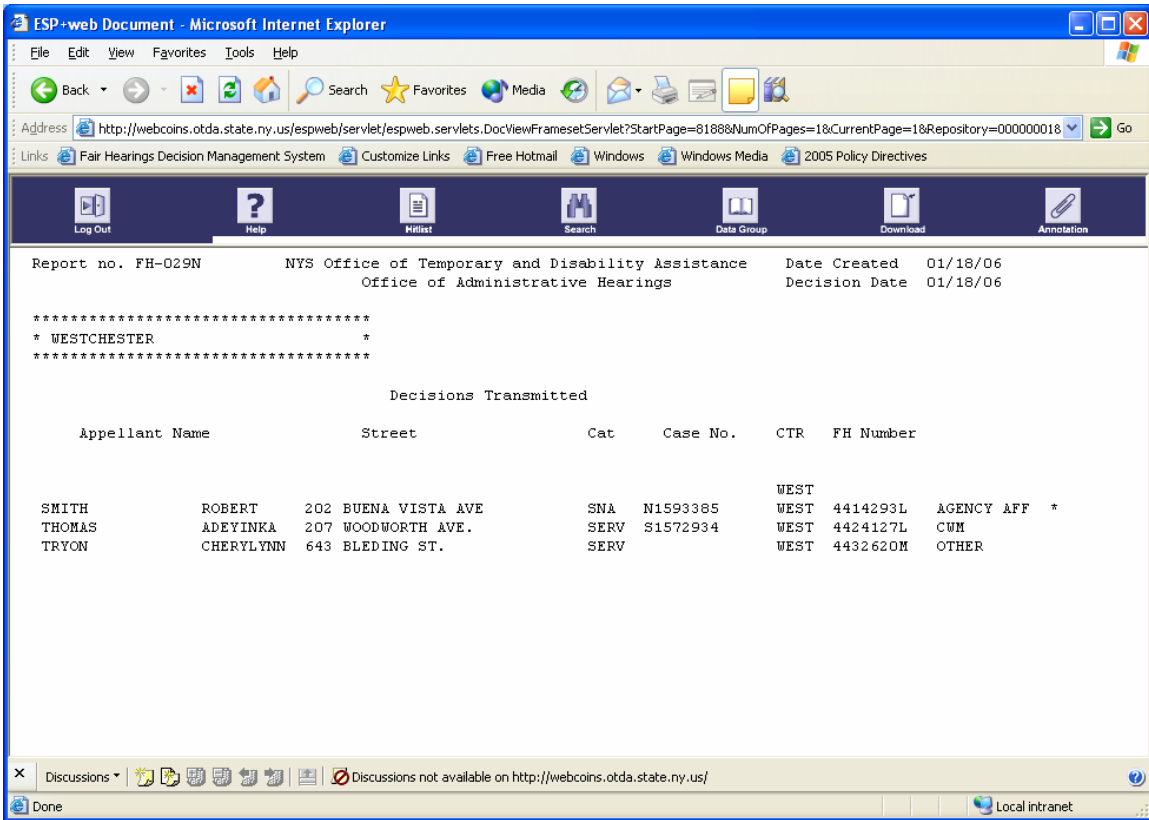
Doc Page Link	Annotation	County Name	Date Created	Decision Date	Rep Name	Doc Type	St.Pg	No. of Pgs
<input type="checkbox"/>		WEST	01/18/2006	01/18/2006	00000001	Text	8188	1

Discussions not available on <http://webcoins.otda.state.ny.us/>

(4 items remaining) Downloading picture <http://webcoins.otda.state.ny.us/espweb/images/BNoMoreHits.gif...> Unknown Zone

6. To see a document, **click the document symbol**.
7. The next screen appears.

Attachment A



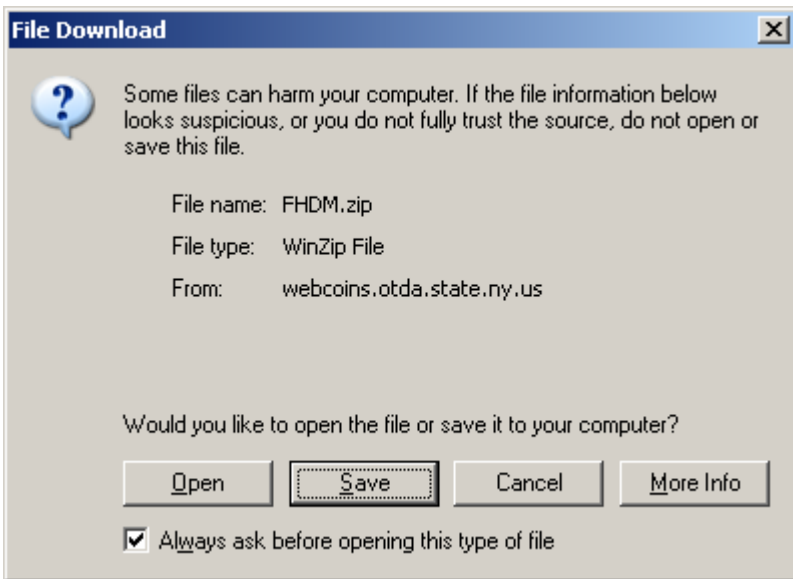
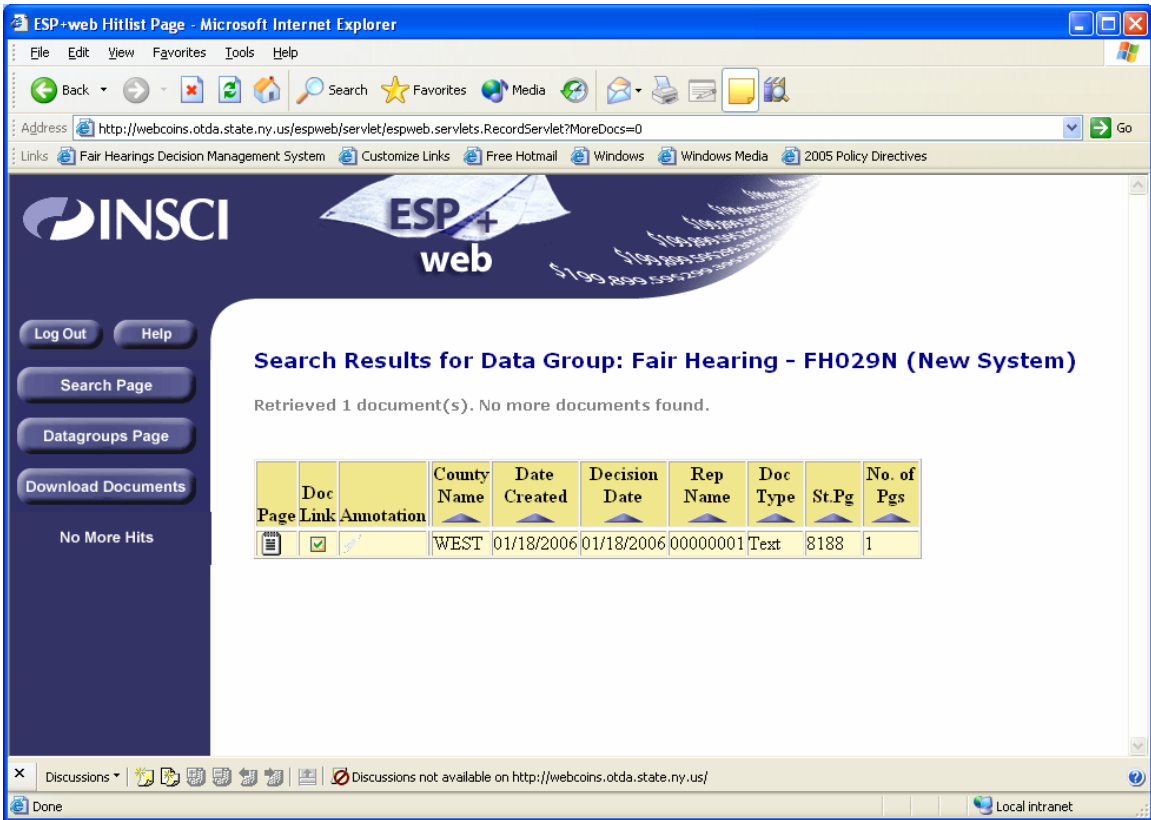
Explanation of the FH029P

1st Column on the left – An * means that the Subcategory is PAFS.

Right Columns following the FH Number (1) There will be an outcome such as “Agency Reversed” or Agency Affirmed”. If this outcome is followed by a *, the outcome is only for the first issue code listed on the case. If there is no *, then all outcomes are the same as the one listed after the FH Number; (2) # means the case has been remanded for further action by the Agency.

8. If you wish to download the FH029, click the Doc Link box and then click the **Download Documents** button.

Attachment A



9. Click the **Save** button and then save the document to a file of your choice..

Attachment A

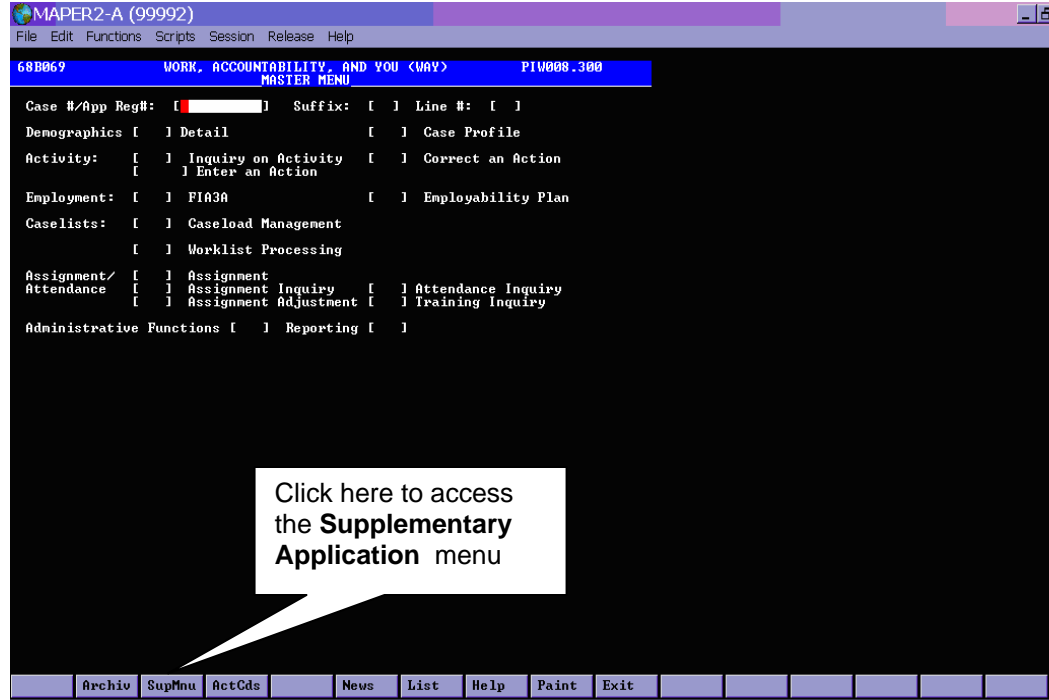
Logging Off

On almost any screen there is an option to **Log Off** Click on the button.

Attachment B

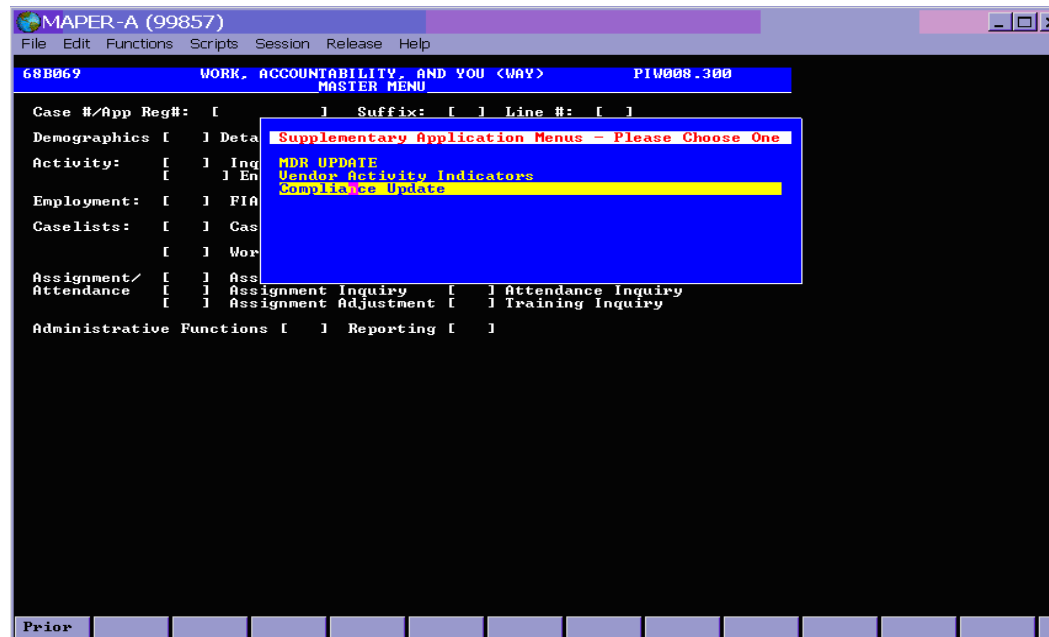
Using the Fair Hearing Compliance Subsystem

Access the **Supplementary Application** menu from the **NYCWAY Master** menu:



Select **Compliance Update**:

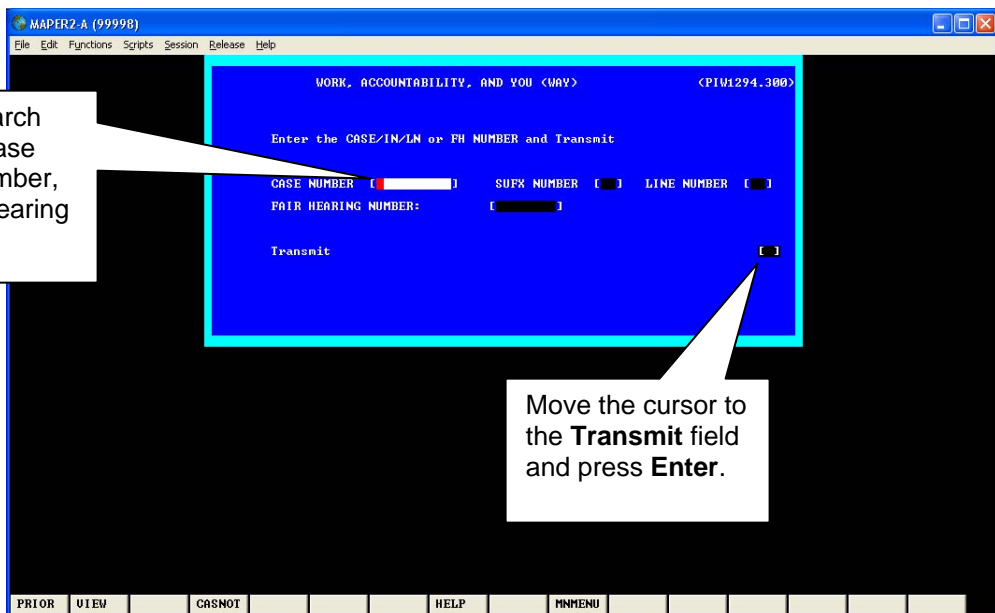
Supplementary Application menu screen



The **Case Search** screen will follow. Enter the **Case Number** and the **Fair Hearing Number**:

Case Search screen

Enter the case search information: the Case number, Suffix number, and Line or Fair Hearing number.

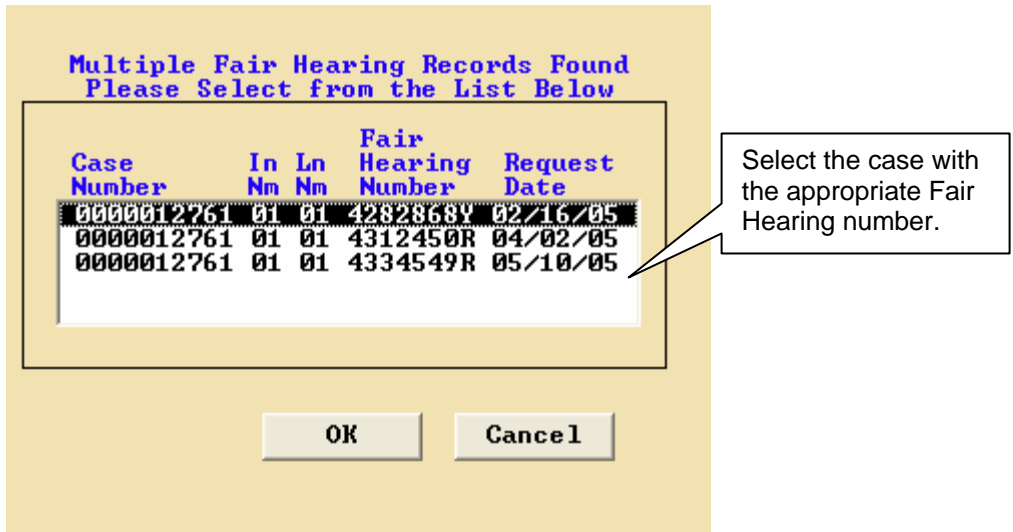


Move the cursor to the **Transmit** field and press **Enter**.

Move the cursor to the **Transmit** field and press **Enter** and either the **Multiple Fair Hearing Records** screen or the **Fair Hearing Tracking Sheet (W-186E)** screen will appear.

Multiple Fair Hearing Records Found Please Select from the List Below screen

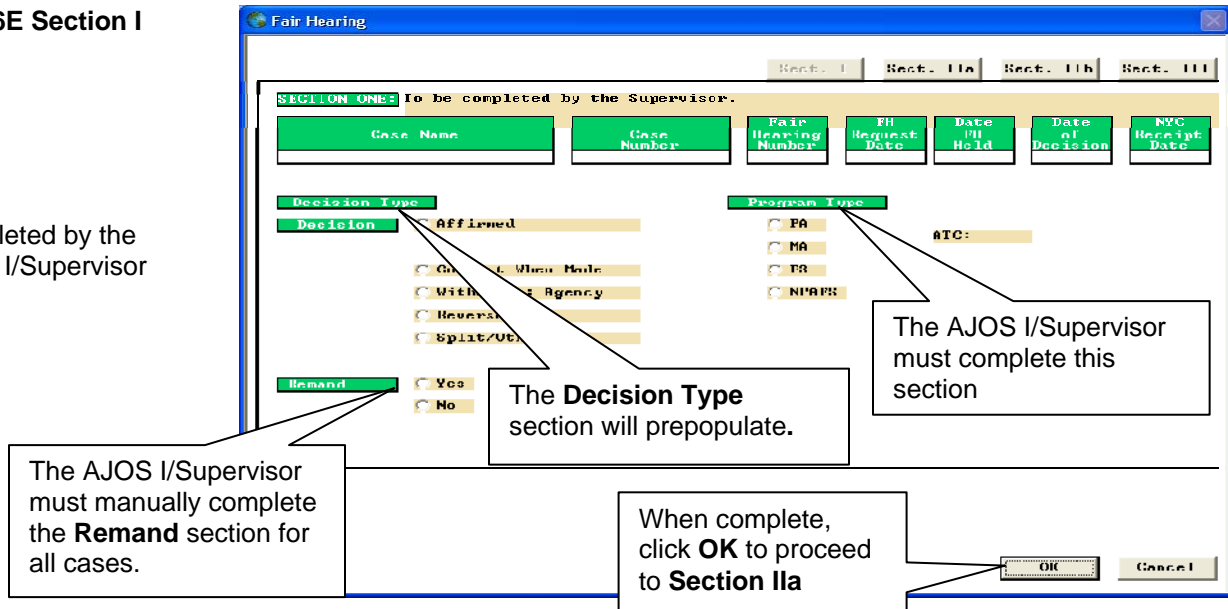
The **Multiple Fair Hearing Records** screen will only appear when a search based on case number is done *and* multiple Fair Hearing numbers exist.



Once the appropriate Fair Hearing number is selected, the **W-186E** will appear:

W-186E Section I

Completed by the AJOS I/Supervisor



The **Decision Type** field will be prepopulated except for remands. In all instances **Yes** or **No** must be selected in the **Remand** field.

The JWS/Worker must respond to all questions in **Section IIa**. The free-form narrative text option is available to answer the questions. Action Code **100A** posts to store the text.

W-186E Section IIa

Once **Section IIa** is completed, click **OK**. Action Code **71CB** will post if no appointment is required; Action Code **71II** will post if an appointment for an interview is required; or Action Code **71CI** will post if a document return appointment is required.

The system will then proceed to the **Section IIb** screen:

W-186E Section IIb must be completed after an interview has been conducted and/or documentation received.

The JOS/Worker must respond to all relevant questions in **Section IIb**. After **Section IIb** has been completed, click **OK**. Action Code **71CC** will post in NYCWAY and the system will proceed to **Section III**.

Section III is completed by the AJOS I/Supervisor, who must review the entries made by the JOS/Worker and the case record for supporting documentation. The AJOS I/Supervisor then indicates whether or not

the compliance is completed and, if necessary, enters free-form narrative text in the space provided.

W-186E Section III

The screenshot shows a software window titled "Fair Hearing" with a yellow background. At the top, there are tabs for "Sect. I", "Sect. 11a", "Sect. 11b", and "Sect. 111". The main content area is titled "SECTION THREE: To be completed by the Supervisor." and contains the following fields and controls:

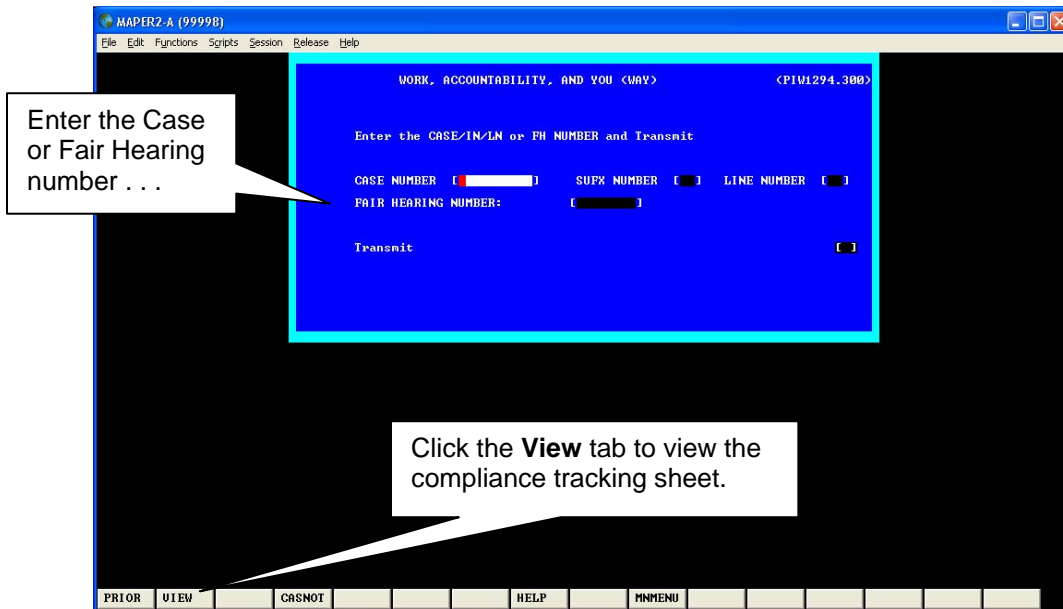
- Review Findings:** A large text input area.
- Compliance Completed?:** Radio buttons for "Yes" and "No". A callout box points to the "No" button with the text: "Click **No** if the compliance is incomplete, **Yes** if it is complete."
- If No, Indicate Reasons Below:** A text input area.
- FHIS Entry Date:** Three small input boxes for day, month, and year. A callout box points to these boxes with the text: "Enter the FHIS entry date."
- Supervisor:** A text input field. A callout box points to it with the text: "Supervisor sign-off".
- Buttons:** "OK" and "Cancel" buttons at the bottom right. A callout box points to the "OK" button with the text: "Click **OK** to finish."

If any corrections need to be made, the AJOS I/Supervisor can return the case to the JOS/Worker to make corrections. In this case, Action Code **71CD** will post in NYCWAY. Once the compliance is complete and no further corrections need to be made, the AJOS I/Supervisor must review and sign off on the case, prompting Action Code **71CE** to post in NYCWAY.

Fair Hearing Compliance Review

The Fair Hearing Tracking, Monitoring and Review Unit (FHTMRU) Worker must select **Compliance Update** from the **Supplementary Application** menu from the **NYCWAY Master** menu. The **Case Search** screen will appear:

The **Case Search** screen



Enter the appropriate case or Fair Hearing number and then click on **View**.

The **Fair Hearing – View Information** screen

The **Fair Hearing – View Information** screen will appear:

To print the **W-186E** click the **Print** button.

The screenshot shows the 'Fair Hearing - View Information' window with the following data:

Case Name	Case Number	Fair Hearing Number	FH Request Date	Date FH Held	Date of Decision	NYC Receipt Date
TEDREVS, ANRRENCE	464345-1-1	42016867	10/04/04	11/01/04	03/07/05	04/08/05

Decision Type: Decision, Affirmed, Correct When Made, Withdrawn: Agency, Reversed, Split/Other

Remand: Yes, No

Program Type: PA, MA, FS, NPAFS. ATC: No

Buttons: Print, FH - Return, OK, Cancel

Callout: To return to the FH – Return Entry screen, click the FH – Return button.

Click on **Print** to get a printable version of the **W-186E**. Click **OK** on the **Fair Hearing Compliance – Print** screen to print the **W-186E**. Clicking on **Cancel** exits the print process without printing the result and returns to the screen titled **Sect. I**.

The screenshot shows the 'Fair Hearing Compliance - Print' window with the following text:

```

Section I
Case Name      Case Number    FH Numbr.  Reg Date    Date Held
-----
[REDACTED]    [REDACTED]    [REDACTED]  10/04/04   11/01/04

Decision Date: 09/01/04   NYC Receipt Date: 08/01/04

Decision: Withdrawn: Appellant   Remand: Yes   Program Type: MA   ATC: No

Section IIa
The Decision & Order Section of the Fair Hearing
decision directs the Agency to:
test1

After review of the case and WMS, are any actions
necessary to comply with above? No (If no, explain)
test2

Was appointment required? Yes - Doc Drop Off
If yes, appointment date: 12/30/2005

Section IIb
Is the case employment related? Yes
If yes, indicate Actions taken:
Employment related actions taken text
  
```

Buttons: Print, FH - Return, OK, Cancel

Callout: Click OK to print the report as displayed.

The FHTMRU Supervisor must review the **W-186E** in its entirety by clicking **OK** on each screen to move to the next screen and enter in

Section III the review findings and indicate whether or not the compliance is accurate and/or complete.

W-186E Section III

If the compliance is incomplete, the FHTMRU must enter the reason(s) why it is not complete in the **If no, Indicate Reasons Below** field and then click on the **FH – Return** button. This will return the case to Center staff for correction/completion. The system will post Action Code **71CF**.

After clicking on the **FH – Return** button, the FHTMRU Supervisor will see the following screen:

Fair Hearing – Return screen

S/he must enter comments in the **Indicate Reason(s) for Return** field and click on **OK**. Action Code **71CH** will post in NYCWAY. This page can now be viewed by Center staff to determine why the case was returned for correction by FHTMRU.

After clicking on the **FH – Complete** button, the FHTMRU Supervisor will see the following screen:

**Fair Hearing –
Complete screen**

Fair Hearing - View Information

Sect. I Sect. IIa Sect. IIb Sect. III

Fair Hearing - Complete

Comments <Required>

Print FH - Return FH - Complete OK Cancel

If the case is complete and without error, the FHTMRU Supervisor must enter comments in the **Comments <Required>** field and click **OK**. Action Code **71CG** will post in NYCWAY.

Attachment C

Action Codes Associated with the Fair Hearing Compliance Process

Action Code	Definition
71CA	Compliance Case
71CB	Compliance Initiated
71CC	Compliance Processed
71CD	Case Requires Further Action
71CE	Compliance Complete
71CF	Fair Hearing Review Return
71CG	Fair Hearing Complete
71CH	Fair Hearing Compliance Completion Required
71CI	Compliance Appointment Sent/Documents
71II	Compliance Appointment Sent/Interview



Date: _____
Case Number: _____
Case Name: _____
Center: _____
FH Number: _____
FH Decision Date: _____

Fair Hearing Compliance Statement

Dear _____ :

Here is how we have complied with the Fair Hearing decision:

Public Assistance

Immediately before your Fair Hearing request, your semimonthly public assistance grant was \$ _____.

We are issuing you \$ _____ as a nonrecurring or retroactive semimonthly public assistance grant for _____.
(period covered or special grant type)

This benefit will be available to you after _____.
(date)

Your restored benefits are being offset against an existing outstanding public assistance claim(s) against you, reducing the benefit balance owed to you. If the claim is satisfied and a balance is still owed, that balance will be issued.

Effective _____, your semimonthly public assistance grant will be \$ _____.
(date)

You did not lose any public assistance benefits because you received aid-continuing public assistance during the Fair Hearing process. Therefore your public assistance benefits remain the same.

We have reevaluated your eligibility for public assistance and have determined that you are not eligible. You will be sent a separate notice of our determination.

Your public assistance benefits remain unchanged.

Food Stamps

Immediately before your Fair Hearing request, your monthly Food Stamp benefits were \$ _____.

We are issuing you \$ _____ in retroactive food stamps for _____.
(period covered or special grant type)

These food stamps will be available to you after _____.
(date)

You have an outstanding Food Stamp claim of \$ _____ against you.

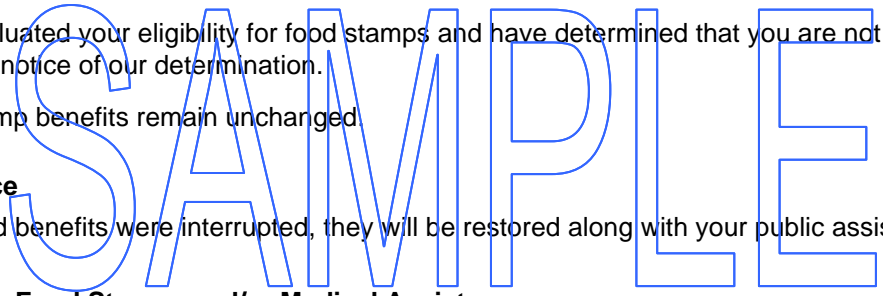
Your restored benefit has been reduced to offset the claim against you. We are issuing you the balance in the amount of \$ _____, which will be available to you on or after _____.
(date) If the claim is satisfied and a balance is still owed, that balance will be issued.

Effective _____, your monthly Food Stamp benefits will be \$ _____.
(date)

You did not lose any Food Stamp benefits because you received food stamps during the Fair Hearing process. Therefore, your Food Stamp benefits remain the same.

We have reevaluated your eligibility for food stamps and have determined that you are not eligible. You will be sent a separate notice of our determination.

Your Food Stamp benefits remain unchanged.



Medical Assistance

If your Medicaid benefits were interrupted, they will be restored along with your public assistance benefits.

Public Assistance, Food Stamps and/or Medical Assistance

We have been unable to determine if you are eligible for the benefits that were the subject of your Fair Hearing. We mailed you a letter on _____, asking you to come in for an interview and/or bring the following to the Job Center/Brighton NPA FS Office by _____.
(date)

Because you have failed to respond to our letter, we cannot complete any compliance action until you come in and/or supply the requested information. If you come in and/or bring the information to the Job Center/Brighton NPA FS Office within ten (10) days from the date of this notice, we will consider the information in accordance with the Fair Hearing decision.

Worker's Name

Date

Supervisor's Name

Date



Fecha: _____
Número del Caso: _____
Nombre del Caso: _____
Centro: _____
Número de FH: _____
Fecha de la
Decisión de FH: _____

Declaración de Cumplimiento de la Audiencia Imparcial

Estimado(a) _____ :

Hemos tomado la(s) siguiente(s) medida(s) en cumplimiento de la decisión de la Audiencia Imparcial:

Asistencia Pública

Inmediatamente antes de su solicitud de Audiencia Imparcial, su concesión quincenal era de \$ _____.

Le hemos asignado una concesión quincenal de asistencia pública de \$ _____ no recurrente o retroactiva para el _____
(período de cobertura o tipo especial de concesión).

Este beneficio estará a su disposición después del _____
(fecha).

Se le ha(n) deducido de sus beneficios restituidos la(s) reclamación(es) de asistencia pública pendiente(s) en contra suya, lo que resulta en la reducción del saldo de beneficios que le corresponde. En caso de que la reclamación se haya cumplido, y que aún se le deba un balance, dicha cantidad se le pagará.

A partir de _____, su concesión quincenal de asistencia pública será de \$ _____
(fecha).

Usted no perdió beneficios de asistencia pública dado que durante el trámite de la Audiencia Imparcial usted recibía asistencia pública continua (aid-continuing). Por lo tanto, sus beneficios de asistencia pública permanecerán sin cambios.

Tras reevaluar su elegibilidad de asistencia pública, hemos determinado que usted no es elegible. Le enviaremos por separado un aviso de dicha determinación.

Su asistencia pública permanecerá sin cambios.

Cupones para Alimentos

Inmediatamente antes de su solicitud de Audiencia Imparcial, su beneficio de Cupones para Alimentos mensual era de \$ _____.

Le hemos otorgado una concesión retroactiva de cupones para alimentos por la cantidad de \$ _____
por _____.
(período de cobertura o tipo especial de concesión)

Esta concesión de cupones para alimentos estará a su disposición después del _____.
(fecha)

Sigue pendiente contra usted una reclamación de Cupones para Alimentos de \$ _____.

Sus beneficios restituidos han sido reducidos para compensar la cantidad que se le reclama. Le hemos otorgado el balance por la cantidad de \$ _____, que estará a su disponibilidad el _____ o
(fecha)

después de esta fecha. Si la cantidad del reclamo es saldada y aún se le debe una diferencia, un pago en esa cantidad será expedido.

A partir del _____, la cantidad de sus beneficios de Cupones para Alimentos será \$ _____.
(fecha)

Usted no perdió beneficios de Cupones para Alimentos dado que durante el trámite de la Audiencia Imparcial usted recibía cupones para alimentos. Por lo tanto, sus beneficios de Cupones para Alimentos permanecerán sin cambios.

Tras reevaluar su elegibilidad de Cupones para Alimentos y hemos determinado que usted no es elegible. Le enviaremos por separado un aviso de dicha determinación.

Sus beneficios de Cupones para Alimentos permanecerán sin cambios.

Asistencia Médica

Si sus beneficios de Medicaid fueron suspendidos, dichos beneficios serán restituidos junto con sus beneficios de asistencia pública.

Asistencia Pública, Cupones para Alimentos y/o Asistencia Médica.

No hemos podido determinar si usted tiene derecho a los beneficios que fueron disputados en su Audiencia Imparcial. Le enviamos una carta el _____, pidiéndole que se presente a una entrevista y/o
(fecha)

traiga al Centro de Trabajo (Job Center)/Oficina de Cupones para Alimentos no de Asistencia Pública Brighton (Brighton NPA FS Office) los documentos indicados más abajo antes del _____.
(fecha)

Debido a que usted no contestó a nuestra carta, no podemos llevar a cabo ninguna medida de cumplimiento hasta que usted proporcione los datos necesarios. Si usted trae dichos datos al Centro de Trabajo/Oficina de Cupones para Alimentos no de Asistencia Pública Brighton dentro de diez (10) días de la fecha de este aviso, tomaremos los datos en cuenta, conforme a la decisión por parte de la Audiencia Imparcial.

Nombre del Trabajador

Fecha

Nombre del Supervisor

Fecha



Notice Date: _____
Case Number: _____
Case Name: _____
FH Number: _____
FH Decision Date: _____
Center: _____

Fair Hearing Compliance Request

In order to comply with your Fair Hearing decision, you must provide the documentation listed below and/or come in to the Job Center for an interview.

Please report to:

Location Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Appointment Date: _____ Time: _____ Telephone: _____

Please bring the following documents:

An in-person interview is not necessary. Please provide the following documents by mail, fax or in-person drop-off.

The documents listed above must be received by _____ .

Please submit in person or mail or fax all documents to:

Location Name: _____

Attention: _____

Address: _____

City: _____ State: _____ Zip: _____

Fax: _____

Worker's Signature

Date

Supervisor's Signature

Date

SAMPLE



Fecha del Aviso: _____
Número del Caso: _____
Nombre del Caso: _____
Número de la
Audiencia Imparcial: _____
Fecha de la
Decisión de la
Audiencia Imparcial: _____
Centro: _____

Petición de Cumplimiento de la Audiencia Imparcial

Para cumplir con la decisión de su Audiencia Imparcial, usted tiene que proveer los documentos indicados más abajo y/o presentarse al Centro de Trabajo para una entrevista.

Favor de presentarse a:

Nombre del Local: _____

Dirección: _____

Ciudad: _____ Estado: _____ Código Postal: _____

Fecha de la cita: _____ Hora: _____ Teléfono: _____

Favor de traer los siguientes documentos a su entrevista:

Una entrevista en persona no es necesaria. Favor de proporcionar los siguientes documentos por correo, por fax o por entrega personal:

Los documentos listados más arriba deben recibirse a más tardar el _____.

Por favor entregue en persona o envíe por correo o fax a:

Nombre del Local: _____

Atención: _____

Dirección: _____

Ciudad: _____ Estado: _____ Código Postal: _____

Fax: _____

Firma del Trabajador

Fecha

Firma del Supervisor

Fecha

SAMPLE



Fair Hearing Tracking Sheet Center Number: _____ Tracking and Monitoring Due Date: _____

SECTION ONE: To be completed by the AJOSI/Supervisor.																																							
Case Name	Case Number	Fair Hearing Number	FH Request Date	Date FH Held	Date of Decision	NYC Receipt Date																																	
Decision Type		Program Type																																					
Affirmed		PA		ATC: <input type="checkbox"/> Yes <input type="checkbox"/> No																																			
Correct when made		MA																																					
Withdrawn: Agency		NPA FS																																					
Reversed																																							
Split/Other		Remand: <input type="checkbox"/> Yes <input type="checkbox"/> No																																					
SECTION TWO: To be completed by the AJOSI/Supervisor.																																							
The Decision & Order Section of the Fair Hearing decision reflects Agency to _____																																							
After review of the case and WMS, the AJOSI/Supervisor needs to complete with above? <input type="checkbox"/> Yes <input type="checkbox"/> No If Yes, proceed with case actions. If no, explain: _____																																							
Is an appointment required? <input type="checkbox"/> Yes - Interview <input type="checkbox"/> Yes - Doc Return <input type="checkbox"/> No If Yes, appointment date: _____																																							
Is the case employment related <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, indicate actions taken: _____																																							
Does case require reopening? <input type="checkbox"/> Yes <input type="checkbox"/> No																																							
<table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th style="width:15%;"></th> <th style="width:15%;">Amount</th> <th style="width:15%;">Period(s) Covered</th> </tr> </thead> <tbody> <tr> <td>PA</td> <td> </td> <td> </td> </tr> <tr> <td> </td> <td> </td> <td> </td> </tr> <tr> <td> </td> <td> </td> <td> </td> </tr> <tr> <td> </td> <td> </td> <td> </td> </tr> <tr> <td>FS</td> <td> </td> <td> </td> </tr> <tr> <td> </td> <td> </td> <td> </td> </tr> <tr> <td>Special Grant</td> <td> </td> <td> </td> </tr> </tbody> </table>				Amount	Period(s) Covered	PA												FS						Special Grant			<table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th>List Documents, additional Benefits Issued and/or Other Actions taken:</th> </tr> </thead> <tbody> <tr><td> </td></tr> <tr><td> </td></tr> <tr><td> </td></tr> <tr><td> </td></tr> <tr><td> </td></tr> <tr><td> </td></tr> <tr><td> </td></tr> <tr><td> </td></tr> </tbody> </table>				List Documents, additional Benefits Issued and/or Other Actions taken:								
	Amount	Period(s) Covered																																					
PA																																							
FS																																							
Special Grant																																							
List Documents, additional Benefits Issued and/or Other Actions taken:																																							
Was the required documentation return appointment kept? <input type="checkbox"/> Yes <input type="checkbox"/> No																																							
Indicate Affirm Actions taken: _____																																							
Please ensure that current, ongoing and retroactive benefits are issued.																																							
Employment Status Code Change? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A If Yes, code change from _____ to _____																																							
Fair Hearing Compliance Statement (W-186C): Sent to Client? <input type="checkbox"/> Yes <input type="checkbox"/> No																																							
Worker: _____ Date: _____																																							

SECTION THREE:

Supervisor Final Review and Sign-Off

Review Findings: _____

Compliance Completed? Yes No If No, Indicate reasons: _____

Pending Compliance Date _____ FHIS Entry Date: _____

Signature: _____ Date: _____

To be completed by the Fair Hearing Tracking, Monitoring & Review Unit

Compliance completed? Yes No Date Received: _____

Supervisor's Signature (AJOS II): _____ Date: _____

SAMPLE

Food Stamp Fair Hearing Decision Tracking Sheet

To: Director
IS Center No. _____

Return To: Fair Hearing Coordination and Control Unit
250 Church St., 8th Floor
New York, N.Y. 10013

Section I (completed by Decision Review Specialist)

Case Name	Case Number	FH #	Date Fair Hearing Requested	Date Fair Hearing Held	Date of Decision	Date Decision Received by N.Y.C.

Section II (Completed by Fair Hearing Facilitator)

The attached Fair Hearing directs the Agency to _____

OBSOLETE

A. Was compliance Action Required? _____

Check

Yes

No

If no, Explain _____

B. If YES:

1. Date Fair Hearing Facilitator Processed Decision: _____

2. Benefits Issued

Amount

Periods Covered

3. Other Action(s) Processed: _____

4. Date Sent to Control: _____

5. Date FHF Responded _____

FHF Signature and Telephone #

Section III (Completed by Decision Compliance Group)

A. Date benefit appears on the WMS _____

B. Date of other action _____

C. Days elapsed from date Decision received by N.Y.C. until date of compliance: _____

Decision Compliance Specialist

PA Fair Hearing Decision Tracking Sheet

To: Director
IS Center No. _____

Return To: Fair Hearing Coordination and Control Unit
250 Church Street, 8th Floor
New York, N.Y. 10013

Date Response Due _____

Section I (Completed by Decision Compliance Group)

Case Name	Case Number	FH #	Date Fair Hearing Requested	Date Fair Hearing Held	Date of Decision	Date Decision Received by N.Y.C.

Section II (Completed by Fair Hearing Facilitator)

The attached Fair Hearing decision directs the agency to: _____

OBSOLETE

A. Was compliance Action Required? Check Yes No

If No, Explain: _____

B. If Yes.

1. Date Fair Hearing Facilitator Processed Decision _____

2. Benefits Issued

PA Grants Issued

Food Stamps Issued

Amount(s)

Period(s)
Covered

Date(s)
Issued

3. Other Action(s) Processed: _____

4. Date Sent to Control: _____

5. Date FHF Responded: _____

Signature/Phone No. of FHF Supervisor

Section III (Completed by Decision Compliance Group)

A. Date benefit appears on WMS _____

B. Date of other action _____

C. Days elapsed from date Decision received by N.Y. C. until date of compliance _____

Decision Compliance Specialist