



# 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 #09-03-EMP

*(This Policy Directive Replaces PD #07-45-EMP)*

### REVISIONS TO TALX/THE WORK NUMBER SERVICE

<b>Date:</b> January 7, 2009	<b>Subtopic:</b> Employment
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**AUDIENCE** The instructions in this policy directive are for all Job Center and Non Cash Assistance Food Stamp (NCA FS) Center staff and are informational for all other staff.

#### REVISIONS TO THE PRIOR DIRECTIVE

This policy directive is being revised to advise staff that TALX/The Work Number Service has enhanced the way employment and income verification can be requested.

**Attachment A** has been revised to incorporate the following changes:

- Staff may now use TALX/The Work Number Service to:
  - request multiple employment verifications at one time
  - enter a Social Security number (SSN) and see a summary listing of the applicant's/participant's employment history
  - select the employment information to be verified
- A new Pay Date Summary feature has been added to TALX/The Work Number Service, making it possible for JOS/Workers to access and verify current employment/income information from each employer listed in the Summary view.

Additionally, The Work Number Contact Information Form (**W-500PP**) and the TALX/The Work Number eXpress Services Data Sheet (**W-500QQ**) are now electronically fillable forms.

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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*

**POLICY**

As a condition of initial and continuing eligibility for Cash Assistance (CA), and Food Stamp (FS) benefits, JOS/Workers must verify factors that affect eligibility for applicants/participants, including employment income from any source.

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**BACKGROUND**

All staff responsible for making CA/FS eligibility determinations must use TALX/The Work Number Service.

An employment verification process, TALX/The Work Number Service, is now available and must be used by JOS/Workers when determining eligibility of CA/FS benefits for all applicants and participants. The verification process is a service of TALX Corporation, which provides electronic payroll services. TALX/The Work Number Service provides detailed, up-to-date employment and income verification from companies that register with TALX Corporation. It also provides other important eligibility information including the employee's address and medical insurance data.

As a result, the information obtained potentially leads to increases in the accuracy of CA/FS benefits issued and the participation rate of employable participants.

**Note:** TALX/The Worker Number Service will be referred to as TALX throughout this procedure.

The employment and income information obtained from TALX is considered "verified upon receipt" for CA and FS purposes. TALX does not replace any of the existing employment or income verification requirements. Since all employers are not registered with TALX, all current employment and income verification tools remain in effect and must be used to confirm employment if it cannot be verified through TALX.

When there is a match for an applicant/participant in TALX, some or all of the following information is displayed:

- Employer (name, headquarter's address, federal employer identification number, and division)
- Employee (name, SSN, address, telephone number, and date of birth)
- Employment status (most recent start date, original hire date, reason for termination, total time with employer, job title, union affiliation, and work location)
- Medical/dental/vision insurance
- Worker's Compensation

- Income and deductions (average hours per pay period, rate of pay, pay cycle, gross pay, payroll deduction for all insurance coverage)
- Pay period detail
- Historical pay period summary (pay period end date, pay date, hours worked, gross earnings, net earnings)

**REQUIRED ACTION**

The following are detailed responsibilities of each individual involved in TALX registration and utilization processes.

TALX Liaison Responsibilities

Each Family Independence Administration (FIA) region has a TALX liaison. The TALX liaison will register staff with TALX to allow them access to employment and income verification. See form **W-500PP** for detailed instructions on how to process requests for access to TALX.

Once the request is approved, staff members authorized to access TALX will receive:

- a State Member ID
- an Authorized User ID

All staff members requesting access to TALX must have a fax number.

The process for obtaining employment and income verification using TALX differs for application cases and recertification cases. Each process is described on the following pages.

Application Cases

Staff Responsibilities

In order to use TALX during initial application interviews, authorized staff must follow the instructions provided on the Obtaining Verifications From The TALX/The Work Number Service (**Attachment A**).

**Note:** Six-month reporters for FS are not required to report changes between certifications.

After obtaining information from TALX, staff must:

- enter a case note in the Paperless Office Systems (POS) indicating the results of the TALX inquiry. If there is no hit, the standard methods of verifying employment must be applied (e.g., Letter to the Employer).
- enter medical insurance information in the Electronic Medicaid New York (eMedNY) system if there is a hit on medical insurance. Job Center staff must consult the User Guide for Third Party Health Insurance (TPHI) in the eMedNY manual to ensure that the TPHI information is entered correctly (Job Center staff only). Refer to the [eMedNY manual](#) for quick access.
- calculate and save a new budget based on the current employment income. If the household is financially eligible for assistance, Job Center staff must initiate an **Information Only FIA-3A** in New York City Work, Accountability and You (NYCWAY). **FIA-3A** is for Job Center staff only.
- complete the application interview and take the appropriate action.
- record inquiry results on form **W-500QQ** for each individual on the case in which a TALX inquiry was done.
- scan and index form **W-500QQ** into the case record.
- submit the completed case to a Group/Unit Supervisor for approval.

### Recertification Cases

For recertification cases, access TALX/The Work Number Service when a hit is identified.

Staff will receive the Recerts – TALX/Work Number Hits spreadsheet distributed monthly by the Office of Support Services for all recertification cases scheduled for the following month. The spreadsheet contains a list of cases and individuals in which a TALX query was done. Staff must refer to the spreadsheet at the beginning of the interview and access TALX to print the verifications for recertification cases when a hit is identified. This information can also be obtained by selecting TALX RETURN FILE – PA RECERT from the Tools menu in POS.

**Note:** If the spreadsheet does not show a TALX hit for the recertification case, **staff should not access TALX.**

Additional requirement for accessing TALX/The Work Number Service

However, staff must access TALX to obtain employment and income verifications for recertification cases when the monthly spreadsheet is not provided.

After obtaining information from TALX for cases identified as a hit, staff must:

- enter a case note in POS indicating the results of the TALX inquiry.
- enter medical insurance information in the EMEDNY system if there is a hit on medical insurance. Staff must consult the User Guide for Third Party Health Insurance in the EMEDNY manual to ensure that the third-party medical insurance information is entered correctly (Job Center Staff only).
- review the Welfare Management System (WMS) to determine if the income was previously reported.
- initiate an **Information Only FIA-3A** (Job Center staff) if there is a hit and the employment income is not currently budgeted. Job Center staff must calculate a budget manually based on the verified income and process it with the Continuing Eligibility Determination (CED) to conclude the recertification.
- compare the pay periods with the benefits issued to determine if an overpayment exists. If an overpayment exists, initiate a recoupment per current procedure.
- complete the recertification interview activity and take appropriate action.
- record actions taken on the Recerts – TALX/Work Number Hits spreadsheet.
- submit the completed case to a Group/Unit Supervisor for approval.

Refer to [PD #07-11-ELI](#) for details on processing FS claims.

Code **E31** is valid for Family Assistance (FA) and Safety Net Federally Participating (SNFP) case types only.

**Note:** If a participant fails to recertify and there is an identified TALX hit, complete an **Information Only FIA-3A** in NYCWAY, calculate, and save a new budget. If the household is financially ineligible the case should be closed using code **E30** (Excess Earned Income [No TMA]) or code **E31** (Increased Employment Earnings [TMA Eligible]). If the household is financially eligible but fails to recertify, close the case with code **G10** (Failure to Recertify on [Date]) per current procedure. NCA FS cases that fail to recertify and have a TALX hit should also be closed with code **E30** (Excess Earned Income [no TMA]) if the employment income makes the household ineligible. Otherwise, close the NCA FS case with closing code **Y10** (Failure to Recertify).

Resolving Discrepancies

Refer to the WMS [Authorization of Grants manual](#) for details on resolving RFI.

Resolution of Discrepant Information

When discrepancies exist between information in WMS and information provided by TALX, prior to submitting the case to a Group/Unit Supervisor for approval, staff must:

- review and resolve the discrepant information.
- make a detailed case entry in POS explaining what documentation was used to resolve the discrepancy.
- continue to obtain and resolve Resources File Integration (RFI) clearances as appropriate. For example, employment periods must be carefully reviewed to determine whether the RFI or WMS data is more current and accurate.

If the applicant/participant disputes the TALX information, he/she must provide proof that the employment or income information is incorrect.

Refer to [PD #07-03-OPE](#) for information on fraud Referrals to BFI.

When fraud is suspected, staff must discuss the case with a Supervisor to determine if a referral to the Bureau of Fraud Investigation (BFI) is required.

Group/Unit Supervisor Responsibilities

Upon receiving a completed application or recertification case, the Group/Unit Supervisor must:

- review the case to ensure accurate processing of the required action(s).
- review for accuracy and completeness form **W-500QQ** and, for recertification cases, the annotated Recerts – TALX/Work Number Hits spreadsheet received from the Office of Support Services, including action(s) taken and effective date/cycle.
- ensure that a copy of form **W-500QQ** is scanned and indexed into the appropriate case record.
- each month, submit the completed **W-500QQ** form and the annotated Recerts – TALX/Work Number Hits spreadsheet to the Job Center/NCA FS Center designee.

Job Center/NCA FS Center Designee Responsibilities

The Job Center/NCA FS Center designee will:

- review form **W-500QQ** and the annotated Recerts – TALX/Work Number Hits spreadsheets and forward them to the appropriate regional office.

Region’s  
Responsibilities

Reporting

The designee from each region will:

- review form **W-500QQ** and the annotated Recerts – TALX/Work Number Hits spreadsheets received from the location heads and forward them to:
  - Assistant to the Executive Director  
Office of Support Services  
180 Water St., 19th Floor – Cubicle 19W094  
New York, NY 10038
- forward form **W-500QQ** and the annotated Recerts – TALX/Work Number Hits spreadsheets as follows:
  - Form **W-500QQ** should be sent no later than the second Monday of each month for all completed application cases.
  - Annotated Recerts – TALX/Work Number Hits spreadsheets should be sent no later than the fifth day of the month for all completed recertification cases from the previous month.

The regional designee will also contact the Job Center/NCA FS Center designee, as needed, to ensure that staff in the Job Centers and NCA FS Centers is using TALX.

Office of Support  
Services  
Responsibilities

When determining the cost-effectiveness of TALX, the Office of Support Services will:

- review and compare the annotated data sheets and spreadsheets to the New York City Work Number Usage report received from New York State Office of Temporary and Disability Assistance (OTDA)
- forward the results to the designee(s) from each region for follow-up, as necessary, on a quarterly basis

**PROGRAM  
IMPLICATIONS**

Model Office  
Implications

Applicants/participants reporting to a Job Center with verification of employment or proof disputing employment information obtained from TALX must report to the Front Door Receptionist to receive the appropriate ticket (e.g., CA Appointment, Customer Service and Information Center [CSIC] Document Return) and be routed to the correct service area.

Paperless Office System (POS) Implications

There are no POS implications.

Food Stamp Implications

An applicant's/participant's FS benefits may decrease when the household's income is budgeted. In instances in which the CA case is closed for excess income or increased employment a separate FS determination is required. For households subject to six-month reporting rules, staff must immediately take required actions on matches which are deemed verified upon receipt.

Medicaid Implications

When TALX/The Work Number Service indicates that the employer provides health insurance coverage, Job Center staff must follow instructions provided in [PD #05-27-ELI](#) regarding TPHI coverage. If medical insurance is provided by the employer, the information must be entered in the eMedNY system.

**LIMITED ENGLISH SPEAKING ABILITY (LESA) AND HEARING-IMPAIRED IMPLICATIONS**

For Limited English-Speaking Ability (LESA) and hearing-impaired applicants/participants, make sure to obtain appropriate interpreter services in accordance with [PD #08-18-OPE](#) and [PD #08-20-OPE](#).

**FAIR HEARING IMPLICATIONS**

Avoidance/Resolution at Job Centers

Applicants/participants are entitled to request a Fair Hearing if they believe that their case was inappropriately rebudgeted. 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.

Avoidance/Resolution at NCA FS Centers

To avoid inappropriate adverse actions, process all changes of address and address corrections immediately. Ensure that the address is complete, including any "in care of" designation, and the apartment number. Prior to initiating a case closing for inability to locate, review the case record documentation and WMS to ensure that all information corresponds.



## Conferences at a Job Center

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 Job 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 needs to be withdrawn for other reasons, the FH&C AJOS/Supervisor I will Settle in Conference (SIC), enter detailed case notes in NYCWAY, and forward all verifying documentation submitted by the applicant/participant to the appropriate JOS/Worker for corrective action. 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 CA Recoupment Data Entry Form ([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 in an NCA FS Center

If an applicant/participant comes to the NCA FS Center and requests a conference, the Receptionist must alert the Center Manager'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 Manager's designee. In Model Center, the Receptionist at Main Reception will issue a FS Conf/ Appt/ Problem ticket to the applicant/participant to route him/her to the NCA Reception area and does not need to verbally alert the Site Manager. The receptionist will alert the Site Manager once the applicant/participant is called to the NCA FS Reception desk.

The Center Manager's designee will listen to and evaluate the applicant's/participant's complaint regarding the adverse action. 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 Site Manager's designee will make a decision. The Center Manager's designee will decide to resolve or defend the case based on all factors and on whether the adverse action was correct.

The Center Manager'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" screens, History Sheet [\[W-25\]](#)), copies of relevant WMS screen printouts, the detailed TALX employment verification printouts or manual employment verification information, 06-ADM-13, notices sent, and other documentation relevant to the action taken).

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## REFERENCES


[06-ADM-13](#)  
[Temporary Assistance Source Book](#) – Ch. 5, § D & Ch. 6, § C  
[WMS Authorization of Grants manual](#)

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## RELATED ITEMS


[PD #05-27-ELI](#)  
[PD #07-03-OPE](#)  
[PD #07-11-ELI](#)  
[PD #07-39-OPE](#)  
[TM # 05-11](#)

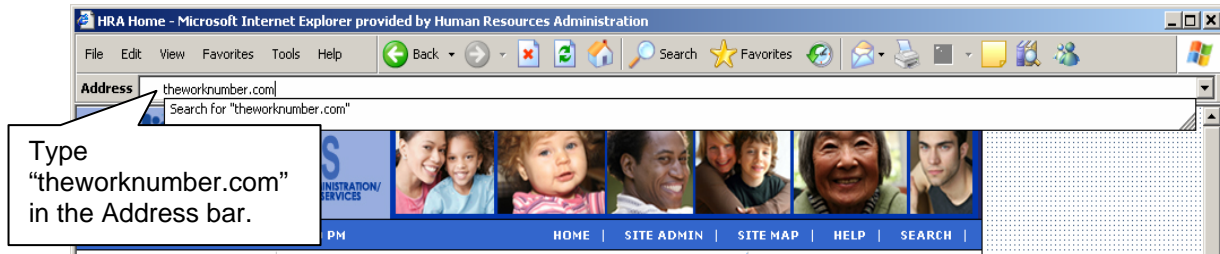
**ATTACHMENTS**

 Please use Print on Demand to obtain copies of forms.

- Attachment A** Obtaining Verification From The TALX/The Work Number Service (Rev. 1-7-09)
- W-500PP** The Work Number Contact Information Form (Rev. 1-7-09)
- W-500QQ** TALX/The Work Number eXpress Services Data Sheet (Rev. 1-7-09)

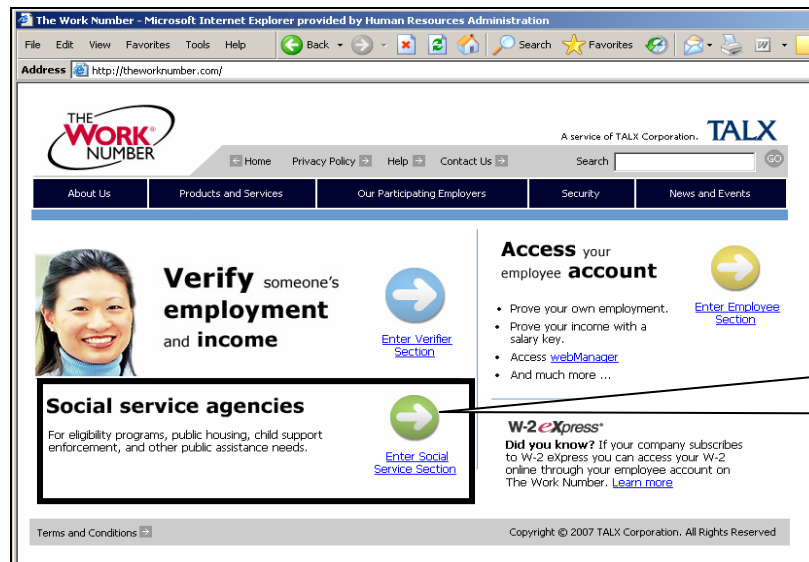
## OBTAINING VERIFICATIONS FROM THE TALX/THE WORK NUMBER SERVICE

- Double-click the Internet Explorer icon  on the desktop to access the HRA home page
- In the Address bar, type (with no spaces): theworknumber.com



- Go to **Social service agencies** on the bottom-left of The Work Number home page and click the green arrow

As an alternative, click the "Enter Social Service Section" link to log on to the Social Service section

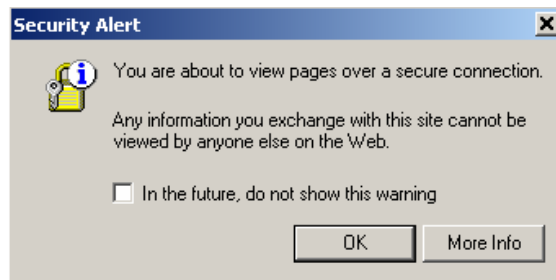


- Enter the appropriate fax number in the **Social Services Login** section and click the **Go** button (see screenshot on the following page)



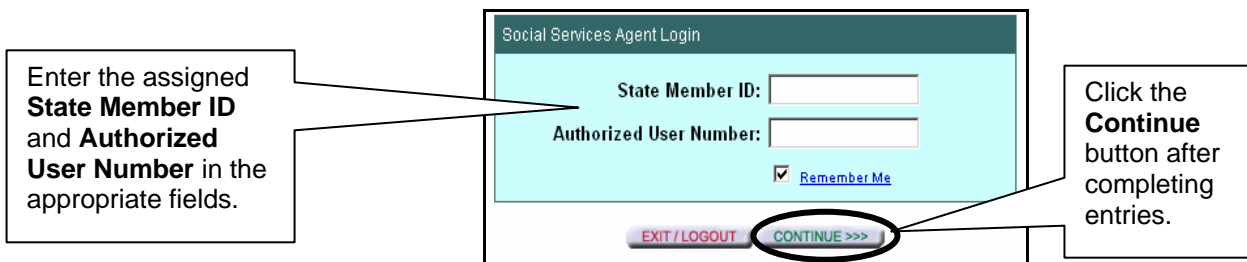
**Note:** The “Remember my ID on the Computer” checkbox below the **Fax Number** field will automatically be checked. When entered, the fax number will be saved on the computer after the **Go** button is clicked. Removing the checkmark by clicking inside the field will require entry of the fax number at each login.

- When the **Security Alert** pop-up window appears, click the **OK** button to proceed



- Next, enter the **State Member ID**, **Authorized User Number**, and click the **Continue** button

**Note:** The “Remember Me” checkbox below the **Authorized User Number** field will automatically be checked. When entered, the **State Member ID** only will be saved on the computer after the **Continue** button is clicked. Removing the checkmark by clicking inside the field will require entry of the **State Member ID** at each login.



- Click inside the radio button beside the applicable purpose for accessing the verification information. JOS/Workers must:
  - select “Employee’s eligibility for a benefit granted by a governmental agency; - we are required by law to consider the employee’s financial responsibility or status”
  - click the **Continue** button

Select the applicable purpose for accessing the verification information.

Click the **Continue** button after selecting the applicable purpose.

- The **Request a Social Services Verification** window will appear. Enter the applicant/participant’s SSN without hyphens or spaces and click the **Continue** button


**Note:** If hyphens or spaces are entered with the SSN, the system displays the message, “Invalid Format of Social Security Number, right format should be 123456789” (see screen shot on next page):



- If the SSN is not found, the system displays the message, “The Work Number was unable to find that Social Security Number: XXX-XX-1234.” (This is an example. The last four digits will be those of the number you entered).

**Note:** When no information is found it means that The Work Number Service does not have employment information for the SSN entered. In these instances, use other resources, such as RFI, to continue the income verification process.

- When the SSN entered is found, the system displays available employment record(s) for the individual including the following data:
  - Last four digits of the SSN
  - Company code
  - Company name
  - Employment status
  - Last Pay Date



We Found These Records for Social Security Number: XXX-XX-7949

**You are now able to view multiple employment and income verifications from this page!**  
 Simply choose the employers you want to view by checking the boxes in the "Get Verification" column. All verifications you choose will be available on the next page. Use your scroll bar to move down the page to view all verifications.

The following information was provided by employers to The Work Number® to act as their official agent for issuing employment verifications. If information is not given by an employer "Not Available" will appear.

Check one or more boxes and click 'Submit' to order the Social Service Verification(s) listed below.

Company Code	Company Name	Employment Status	Last Pay Date	Get Verification
10127	Pathmark Stores Incorporated	Active	12/27/2007	<input type="checkbox"/>
12168	Great A & P Tea Co.	Active	12/04/2008	<input type="checkbox"/>
10448	Sprint	Inactive	11/28/2008	<input type="checkbox"/>

- Click the box next to the employment record(s) you wish to retrieve and click **Submit** to retrieve the employment verification for each applicable record.
- The **Request a Social Services Verification** window reappears with the **Company Code** pre-filled. Re-enter the applicant/participant's SSN in the **Social Security Number** field and click the **Continue** button.

The screenshot shows the 'Request a Social Services Verification' form. The form is titled 'Request a Social Services Verification' and is part of 'THE WORK NUMBER' website. The form includes the following fields and buttons:

- Company Code:** 70128 (pre-filled, circled in red)
- Company Name:** (empty field)
- Social Security Number:** (empty field, circled in red)
- Your Tracking #:** Not Required (with a link '< What's this?>')
- Verification Type:** Social Services Verification (dropdown menu)
- Buttons:** EXIT / LOGOUT, RESET FORM, and CONTINUE >>> (circled in red)


Callout boxes provide instructions:

- 'The Company code is pre-filled.' points to the Company Code field.
- 'Re-enter the SSN and click the **Continue** button.' points to the Social Security Number field and the CONTINUE >>> button.

- When the **Social Service Verification** screen is displayed (see page 6), click **Print This Verification** on the top-right corner of the window
  - Scan and index the document to the applicant/participant's case record
  - To obtain another verification, click the **Get another verification** link, enter a new SSN and repeat the steps outlined above
- Note:** JOS/Workers must be sure to print verification data as needed and scan and index the verification to the appropriate applicant/participant's case record in the event that the printed verification is misplaced.
- To exit, click **Exit/Logout**




SAMPLE SOCIAL SERVICE VERIFICATION SCREEN



**THE WORK NUMBER**  
America's Leader in  
Employment & Income  
Verification

The following information is provided in response to your request on: [REDACTED].  
The employer provided this information to The Work Number to act as their official agent for  
employment and income verification. Any inconsistency between the most recent start date and  
the total time with the employer is due to a prior work period. If you have questions, please call  
our Client Service Center at 1-800-996-7566 (Voice) / 1-800-424-0253 (TTY/Deaf).

**Information not provided by the employer is shown as "Data not provided."**  
Employment and Income Information current as of: [REDACTED]  
Reference Number for this verification: [REDACTED]



Where can I go?

- [Print This Verification](#)
- [Back to previous page](#)
- [Get another verification](#)
- [Exit/Logout](#)

S A M P L E

**Social Service Verification**

**EMPLOYER**  
Employer: 70128 - Central Parking Corporation  
Headquarters Address: 2401 21st Ave. South  
Ste. 200  
Nashville, TN 37212  
Federal Employer Identification Number (FEIN): [REDACTED]  
Division: Data not provided

**EMPLOYEE**  
Employee: [REDACTED]  
Social Security Number: XXX-XX-3289  
Address: [REDACTED]  
Employee Phone Number: [REDACTED]  
Date of Birth: [REDACTED]

**EMPLOYMENT**  
Employment Status: Active  
Most Recent Start Date: 02/01/2007  
Original Hire Date: 02/01/2007  
Reason for Termination: Data not provided  
Total Time with Employer: 0 Years, 5 Months  
Job Title: ATTENDANT  
Union Affiliation: Unknown  
Work Location (Job Site): Data not provided

**MEDICAL INSURANCE**  
Medical Coverage: Data not provided  
Medical Carrier Name: Data not provided

**DENTAL INSURANCE**  
Dental Coverage: Data not provided  
Dental Carrier Name: Data not provided

**VISION INSURANCE** - Data not provided

**INCOME AND DEDUCTIONS**  
Average Hours per Pay Period: Data not provided  
Rate of Pay: \$8.25 / Hourly  
Pay Cycle: Weekly

	2007	2006	2005
Total Gross:	\$6,264.95		
Payroll Deduction for All Insurance Coverage:			

**HISTORICAL PAY PERIOD SUMMARY**

Pay Period End Date	Pay Date	Hours Worked	Gross Earnings	Net
06/15/2007	06/22/2007	0	\$325.88	\$228.21
06/08/2007	06/15/2007	0	\$301.12	\$235.93
06/01/2007	06/08/2007	0	\$376.41	\$263.23
05/25/2007	06/01/2007	0	\$330.00	\$229.10
05/18/2007	05/25/2007	0	\$330.00	\$231.10
05/11/2007	05/18/2007	0	\$330.00	\$256.10
05/04/2007	05/11/2007	0	\$438.28	\$305.25
04/27/2007	05/04/2007	0	\$330.00	\$229.10
04/20/2007	04/27/2007	0	\$330.00	\$231.10
04/13/2007	04/20/2007	0	\$330.00	\$256.10
04/06/2007	04/13/2007	0	\$330.00	\$231.10
03/30/2007	04/06/2007	0	\$342.38	\$237.73
03/23/2007	03/30/2007	0	\$330.00	\$256.10
03/16/2007	03/23/2007	0	\$325.88	\$253.21
03/09/2007	03/16/2007	0	\$330.00	\$256.10
03/02/2007	03/09/2007	0	\$320.00	\$249.12
02/23/2007	03/02/2007	0	\$318.00	\$247.72
02/16/2007	02/23/2007	0	\$323.00	\$251.21
02/09/2007	02/16/2007	0	\$224.00	\$181.47

Click the appropriate link to print the displayed information, return to the previous page, obtain another verification or exit.

Date Hired

Medical coverage

Pay dates, Gross Pay and Net Pay listed



## INSTRUCTIONS FOR COMPLETING THE WORK NUMBER CONTACT INFORMATION FORM

When the TALX liaison receives a request for access to TALX/The Work Number Service from a Job Center, Non-Cash Assistance (NCA) Food Stamp (FS) Center or Program Area, she/he will:

- ensure the following information is recorded on The Work Number Contact Information Form (see reverse):
  - current date
  - name of the Job Center, NCA FS Center or Program Area
  - contact person's name and telephone number
  - JOS/Workers' names (last and first)
  - JOS/Workers' fax number
  - JOS/Workers' e-mail address
- e-mail the completed form to Gloria Clyburn, Assistant to the Executive Director, Office of Support Services
- once approved, receive a modified The Work Number Contact Information Form from the Office of Support Services listing the following for each authorized user:
  - State Member ID (~~42001101~~ [the same for all HRA users])
  - Authorized User ID
  - Fax number
  - E-mail address
  - State User ID Number

**Note:** Staff is only required to enter the State Member ID, Authorized User ID and fax number to login to TALX/The Work Number Service.

- provide each JOS/Worker with the required user IDs
- inform the Office of Support Services when a staff member:
  - is no longer employed with the Agency
  - is new to the Job Center or NCA FS Center
  - has transferred to a different Job Center or NCA FS Center

### TALX/The Work Number eXpress Services Data Sheet

Center/Office/Program:				Data Sheet Preparation Date:			
JOS/Worker's Name:				Case Name:			
JOS/Worker's Telephone Number:				Case Number:		Case Type:	
Case Status (check <input checked="" type="checkbox"/> one): Application (AP) <input type="checkbox"/> Active (AC) <input type="checkbox"/> Closed <input type="checkbox"/>				Household Size:		CA Suffix:	FS Suffix:

1 Name <small>(Last name, First name, Middle initial)</small>	2 Social Security Number	3 Relationship to Casehead	4 TALX/The Work Number Inquiry Results			5 RFI	6 FIA-3a	7 Recoupment Amount <small>(Only enter if initiating a recoupment)</small>		8 Case Action Initiated <small>(Action = Reject [RJ], Close [CL] or No Action [NA])</small>				
			Hit (H) or No Hit (NH)	Medical Insurance Coverage				CA	FS	Action	Last CA Grant	Amount of CA Budget Change	Last FS Benefit	Amount of FS Budget Change
				<small>(Enter Provider name or N/A [not available])</small>	<small>Enrolled?</small>									
SAMPLE														

Comments: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

## Instructions for Completing the TALX/The Work Number eXpress Services Data Sheet

To determine the cost-effectiveness of utilizing TALX/The Work Number Service, data pertaining to case actions (e.g., closing, budget reduction and recoupment) initiated as a result of current income verifications obtained from The Work Number Service will be recorded. A data sheet should be completed for each case where TALX/The Work Number Service is used to obtain income verification. (**Note:** Do not record the inquiry results for recertification cases on the Data Sheet. For those cases, use the spreadsheet received from the Office of Support Services.)

For each case enter the following information:

- **Center/Office/Program:** Enter the Job Center, NCA FS Center, or Program designation
- **JOS/Worker's Name/Telephone Number:** Enter the name and telephone number of the Worker completing the Data Sheet
- **Case Status:** Check the appropriate status (e.g., application, active, or closed)
- **Data Sheet Preparation Date:** Enter the current date
- **Case Name:** Enter the name of the case (as it appears in WMS)
- **Case Number:** Enter the complete case number
- **Case Type:** Indicate as FA (Family Assistance), SNCA (Safety Net Cash Assistance), SNNC (Safety Net Non-Cash), SNFP (Safety Net Federally Participating), NCA FS (Non-Cash Assistance Food Stamps)
- **Household Size:** Enter the number of applying household members for the CA and FS suffixes

**Section 1: Name** – Enter the last name, first name and middle initial of each applying individual 18 years of age and older.

**Section 2: Social Security Number** – Enter the individual's complete Social Security Number.

**Section 3: Relationship to Casehead** – Enter each individual's relationship to the casehead (e.g., self, mother, etc.).

### Section 4: TALX/The Work Number Service Inquiry Results

- **Hit/No Hit** – Enter "H" (Hit) to indicate whether a match was found or "NH" (No Hit) if a match was not found:
  - **Hit**
    - (a) Employer and income verification returned by TALX/The Work Number Service is not known to the Agency
    - (b) Employer and income verification returned by TALX/The Work Number Service is known to the agency, but the income currently on the budget is incorrect.
  - **No Hit**
    - (a) TALX/The Work Number Service was unable to find a Social Security Number match
    - (b) Income verification returned by TALX/The Work Number Service was prior to case opening
    - (c) Employer and income verification returned by TALX/The Work Number Service is known to the Agency and currently on the budget.

• **Medical Insurance Coverage** – For each individual:

- **Enter Provider Name or N/A** – Indicate the name of the medical insurance provider or "N/A" (not available) if no medical insurance coverage data is available.
- **Enrolled?** – If medical coverage displayed, enter "Y" (Yes) to indicate if the individual is enrolled with the medical provider or "N" (No) if not enrolled.

**Section 5: RFI** – Enter "Y" (Yes) if data is available on the Resource File Integration subsystem for the individual or "N" (No) if no RFI data is available.

**Section 6: FIA-3a** – Enter "Y" (Yes) if an FIA-3a was completed for the individual or "N" (No) if no FIA-3a was completed.

**Section 7: Recoupment Amount** – Fill in the amount of the CA and/or FS recoupment **only** if the JOS/Worker is initiating a recoupment.

**Section 8: Case Action Initiated** – Indicate the case action to be taken by the JOS/Worker.

- **Action** – Enter "RJ" if the case will be rejected, "CL" if closed or "NA" if no action taken.
- **Last CA Grant/FS Benefit** – Enter the amount of the semi-monthly CA grant and monthly FS benefit at the time of the rejection or closing in the appropriate columns.
- **Amount of CA/FS Budget Change** – Enter the amount of the CA grant and/or FS benefit reductions in the appropriate columns.

**Comments** – Record additional details relevant to the employment and/or income verification for the application case.

SAMPLE