



FAMILY INDEPENDENCE ADMINISTRATION

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POLICY DIRECTIVE #12-03-SYS

WELFARE MANAGEMENT SYSTEM (WMS) SOFTWARE RELEASE VERSION 2012.1

Date: March 2, 2012	Subtopic(s): WMS
AUDIENCE	The instructions in this policy directive are for all Welfare Management System (WMS) users in Job Centers, Non Cash Assistance Food Stamp (NCA FS) 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 for 2012.1 migrated to production on February 21, 2012.
SYSTEM ENHANCEMENTS	<p>Changes that became effective with the February 21, 2012, release of WMS software version 2012.1 include:</p> <ul style="list-style-type: none"> • Update to FS Budget Calculation for MKB Cases in Transitional Housing. • Update to FS Budget Calculation for MKB Cases in Non-Transitional Housing. • Prevent Case Going to AC Status Without Valid Automated Finger Imaging System (AFIS) Indicator. • Identifying Field for FS and Medicaid (MA) Only Online Recertifications. • Change to Clock-Down Processing for Y10. • Abbreviated Client Notice System (CNS) Notice Indicator. • Delete SSN from Reports. • New Birth Verification Indicator (BVI) Code for Medicare Recipient Scr #217. • Pass FH Aid Status Values on Basis File. • Update to Earned Income Disregard (EID) Criteria.

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

Update to FS Budget Calculation for MKB Cases in Transitional Housing

WMS has been updated to correctly calculate the FS budgets for MKB Cases (multi suffix or single suffix) who reside in Transitional Housing shelter types listed below and have income (earned or unearned) that results in a zero CA grant. Although the CA grant calculates out to zero for CA, the CA for FS income calculation results in an amount greater than zero. This fix will correctly allocate the CA for FS income to be used in the FS calculation.

- **06** (Hotel/Motel Temporary)
- **30** (Scatter Site Homeless Housing Non Tier I/Non Tier II)
- **33** (Homeless Shelter – Tier I or Tier II)
- **34** (Homeless Shelter – Tier II)

Update to FS Budget Calculation for MKB Cases in Non-Transitional Housing

MKB cases are either one or multi-suffix cases with at least one individual who is a FS ineligible alien because of having less than five (5) years in a qualified alien status. The FS ineligible alien is identified with an **INV** (Financial/Alien Involvement) code of **Y** on the Individual Income/Needs Screen (**NSBL06**) and an Income Source code of **92** (FS Ineligible Alien – Contributes to Shelter Costs)

When the only citizen is a child on the FA suffix of an MKB multi suffix case becomes eligible for SSI, the suffixes are merged. The new case has the FS Ineligible alien on CA and the SSI child on FS. Previously, in calculating the FS benefits for the merged single suffix SN MKB case, the entire CA grant of the FS ineligible alien was used, resulting in incorrect FS allotments. Effective with this release, WMS is now programmed to use the prorated portion of the FS ineligible alien’s CA grant to calculate the FS benefit.

Prevent Case Going to AC Status Without Valid AFIS Indicator

A system edit has been implemented to prevent a case from going to **AC** status without a valid AFIS indicator. For both CA and NCA FS cases, any attempt to place an individual or suffix in **AC** status will error out if there is an individual 18 years or older on the case on the date of the action and the individual’s AFIS indicator is “blank” or **P** (Purged). The error message “Valid AFIS Indicator REQUIRED” will be displayed if attempted.

Refer to [Worker’s Guide to Codes](#) for AFIS-EX Indicator codes.

For CA, the “Head-of-Household” under age 18 must be finger-imaged.

For CA cases only, any attempt to place an individual or suffix in **AC** status will also error out if the “head of the household” is under 18 years of age on the date of the action and the individual’s AFIS indicator is “blank” or **P** (Purged).

The edit includes the prevention of a case going from Single Issue (**SI**) to **AC** status.

Note: The edits do not apply to CA or NCA FS “recertification only” transactions.

WMS will also require an AFIS indicator to be present when an Emergency Assistance to Families (EAF) case is changed to Family Assistance (FA)/Safety Net Federally Participating (SNFP)/Safety Net Cash Assistance (SNCA)/SN Non-Cash (SNNC) case via Undercare action to **AC** the case.

Identifying Field for FS and MA Only Online Recertifications

The **RCRT-SRC** (Recertification Source) field has been created to identify and track FS and MA only online recertifications filed through MyBenefits and ACCESS NYC.

The following RCRT-SRC codes will be used to identify online FS recertification applications:

- **E** – Recertification filed through MyBenefits – Worker entered or System generated
- **N** – Recertification filed through ACCESS NYC - Worker entered or System generated
- **I** – Recertification received through IVRS (Interactive Voice Response System) – System generated

A “Blank” **RCRT-SRC** field will be used to indicate a recertification filed in person.

The **RCRT-SRC** field will be added to the following WMS Screens:

- **NQCS01** – Case Composition Suffix/Individual Summary
- **NQCS02** – Case Composition Suffix Summary
- **NQCS3A** – Current Case Composition-Historical Suffix Info
- **NQCS3B** – Case Composition Individual Summary
- **NQCP01** – Pending Case Level Data

See [PB #12-15-SYS](#) FS POS Release Notes.

The **RCRT-SRC** field will also be added to the Turn Around Document (TAD) as **Item #063**. The WMS Data Section will be updated in POS.

Screen examples with the new **RCRT-SRC** field are included in **Attachment A** (Recertification Source [RCRT SRC] Field Screen Examples).

Change to Clock-Down Processing for **Y10**

Previously, the FS-only closing code **Y10** (Failure to Recertify) was an adequate (immediate) closing code. This immediate closing was problematic because it required workers to hold off on the closing until the last day of the month.

See PB #12-15-SYS FS
POS Release Notes.

Effective with this release, FS closing code **Y10** will now “clock down” and close on the last day of the FS Authorization Period.

Y10 should be entered in the last month of the certification period. If code **Y10** is entered prior to the last calendar month of the “FS Authorization To Date”, the error message “Y10 not in Last Month Auth Period” will appear.

If the last day of the FS Authorization Period is a holiday or a Sunday, the WMS closing will process on the next business day but still reflect the last day of the period.

Y66 Processing

Cases with closing code **Y66** (Overdue Recertification [System Generated]) are processed on the first day of every month. **Y10** closings may also be processed on the first day of the month if the last day of the prior month is a Sunday or holiday. Effective with this release, if both **Y66** and **Y10** processing falls on the first day of the month, the **Y10** closing will process and the **Y66** closing will not occur. For example:

- **Y10** is entered on March 10 with a “FS Authorization To Date” of Sunday March 31.
- WMS will systematically schedule the **Y10** processing for Monday April 1; however, the “FS Authorization To Date” remains Sunday March 31.
- **Y66** is *also* scheduled to be processed on Monday April 1.
- The **Y10** closing will process on Monday April 1 and the **Y66** closing will not occur.

Note: If a **Y10** closing is not entered, the **Y66** closing will still occur.

M3E Indicator with Y10

Refer to [PB #09-38-SYS](#)
Use of the M3E
Indicator.

An M3E Indicator entered with a **Y10** closing on a case that does not have an expired FS Authorization period will result in the error message “M3E With Y10 – Auth Not Expired” (An M3E of **A** [Manual notice - adequate action] or **1** [Immediate action for administrative reasons] will make the **Y10** closing immediate). Staff should not enter an M3E Indicator Code when using **Y10** to close the case.

**Abbreviated CNS
Notice Indicator**

In an effort to conserve paper, abbreviated CNS Notices will be sent to households who indicate they would like to receive them. The new field, “**ABBR-CNS**”, has been created to identify households who have chosen to receive the abbreviated notices.

A value of “**X**” in the **ABBR-CNS** field indicates the household chose to receive an abbreviated CNS notice.

The **ABBR-CNS** field is displayed on WMS screens **NQCS02** (Case Composition – Suffix Summary), **NCEM10** (Suffix Program Status), and **NQCP02** (Pending Suffix Level Data). Refer to **Attachment B** (Abbreviated CNS Notice [ABBR-CNS] Field Screen Examples) for screen examples.

See [PB #12-14-SYS](#) CA POS Release Notes and [PB #12-15-SYS](#) FS POS Release Notes.

The **ABBR-CNS** field is also displayed as **Item #259** on the TAD and on the WMS data section of the **POS TAD**.

The language for the Abbreviated CNS Notice has yet to be determined and will be implemented in the near future.

Delete SSN From Reports

The Social Security Number (SNN) has been eliminated from the following reports:

- **WINR0125** – Active SNCA Cases with Children Containing Two or More Adults
- **WINR0216** – Detailed Listing of SNCA Cases with Children Containing One or No Adults

New BVI Code for Medicare Recipient Scr #217

The new BVI code **6** (Verified Medicare Clients) has been created and assigned to Medicare accepted individuals. Effective with this release, BVI code **6** has been systematically assigned to Medicare recipients via one time conversion.

See [PB #11-63-OPE](#) for more information on the BVI process and codes.

BVI code **6** also can be manually entered to replace BVI values “Blank” and **B**. BVI code **6** can also be manually deleted.

BVI code **6** can be found on all valid WMS and POS screens as previous BVI codes (Refer to [PB #11-63-OPE](#)).

Pass FH Aid Status Values on Basis File

Previously, Fair Hearing (FH) Aid status codes **2** (Aid Continuing), **3** (Non-Aid Continuing), and **4** (Conditional Aid-Continuing) were systematically updated monthly. Multiple changes in the FH status within a calendar month were not recorded. Effective with this release, *all* Fair Hearing Aid-Status codes are passed to a daily file for daily updates ensuring more accurate historical information.

See [Worker's Guide to Codes Manual](#) for FH Aid Status codes.

Update to Earned Income Disregard (EID) Criteria

Previously, the WMS conducted a FS suffix/individual status check in the processing of the Earned Income Disregard (EID) for Safety Net (SN) cases when the only child on the case is inactive for CA.

Effective with this release, the FS suffix/individual status check has been replaced by another system routine.

Inactive individual 18 years of age in the household.

WMS will apply the EID to SN cases with a CA inactive individual between 18 and 19 years of age; when there is an “X” is indicated in the CHILD field and Income Source Code:

The CHILD field is located on WMS **NSBL02** (Household Suffix Financial Data) Screen.

- **31** (SSI) is on the CA inactive line; or
- **13** (Adoption Subsidy) is on another individual with status **AC**, **SI**, or **AP**.

New Child Indicator value “E”.

A new Child Indicator, “E” (Eligible for EID), has also been created to indicate the existence of a CA inactive individual in the household under 18 years of age.

Inactive individual under 18 years of age in the household.

WMS will apply the EID to SN cases when Child Indicator “E” is present.

There is no change the EID calculation methodology.

REQUIRED ACTION

Identifying Field for FS and MA Only Online Recertifications

RCRT-SRC values **E**, **N**, and **I** are system generated, but workers must enter them if the:

- online recertification process fails; or
- the recipient recertifies online but prints the recertification application and either faxes or mails it to the NCA FS center.

Change to Clock-Down Processing for **Y10**

If the FS household fails to keep the scheduled recertification appointment, the worker must close the case with Y10. The action can be taken at any point during the last month of the certification period.

Abbreviated CNS Notice Indicator

The JOS/Worker must ask applicants/participants if they would like to receive the Abbreviated CNS notices. When a household indicates they wish to receive abbreviated CNS notices the JOS/Worker must enter “X” in the **ABBR-CNS** field on the TAD. The pound sign (#) entered in the field will delete the indicator. Any other value will display the message “Invalid Entry in ABBR-CNS Field”.

Value “X” will remain when a case has been recertified, but will not be brought back upon reapplying. The JOS/Worker must enter “X” when an applying household opts to receive abbreviated CNS notices.

Update to Earned Income Disregard (EID) Criteria

To ensure that the EID is applied appropriately, in the **CHILD** field on the **NSBL02** screen, staff must enter :

- “X” when the household includes a child between age 18 and 19 and the child is not active on the CA case;
- “X” when the household includes a child between age 18 and 19 in school fulltime; or
- “E” when the household includes a child under 18 and the child is not active on the CA case.

PROGRAM IMPLICATIONS

Paperless Office System (POS) Implications

Refer to CA POS Release Notes [PB #12-14-SYS](#) and FS POS Release Notes [PB #12-15-SYS](#).

Food Stamp Implications

The Food Stamp Implications are incorporated in this policy directive.

Medicaid Implications

The Medicaid Implications are incorporated in this policy directive.

LIMITED ENGLISH PROFICIENCY (LEP) AND HEARING-IMPAIRED IMPLICATIONS

For Limited English Proficiency (LEP) and hearing-impaired applicants/participants, make sure to obtain appropriate interpreter services in accordance with [PD #11-33-OPE](#) and [PD #08-20-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 Job 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 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 (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 FS Centers

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 Offices, the Receptionist at Main Reception will issue an FS Conf/Appt/Problem ticket to the applicant/participant to route him/her to the NCA FS Reception area and does not need to verbally alert the Site Manager. The NCA Receptionist will alert the Center 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 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 Manager’s designee will decide to resolve or defend the case based on all factors and whether the case was closed correctly.

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,” History Sheet [\[W-25\]](#)), copies of relevant WMS screen printouts, notices sent, and other documentation relevant to the action taken.

REFERENCES


- | | |
|-----------------|---|
| SPP #2010-00520 | Update to FS Budget Calculation For MKB Cases in Transitional Housing |
| SPP #2011-00063 | Prevent Case Going to AC Status without valid AFIS Indicator |
| SPP #2011-00113 | Identifying Field For FS and MA Only Online Recertifications |
| SPP #2011-00127 | Change to Clock-Down Processing for Y10 |

SPP #2011-00249	Abbreviated CNS Notice Indicator
SPP #2011-00346	Delete SSN From Reports
SPP #2011-00493	Update to FS Budget Calculation For MKB Cases in Non-Transitional Housing
SPP #2011-00662	New BVI Code for Medicare Recipient SCR #217
SPP #2011-00714	Pass FH Aid Status Values on Basis File
SPP #2011-00730	Update to Earned Income Disregard (EID) Criteria

RELATED ITEMS

- [PB #09-38-SYS](#)
 - [PB #11-63-OPE](#)
 - [PB #12-14-SYS](#)
 - [PB #12-15-SYS](#)
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ATTACHMENTS

 Please use Print on Demand to obtain copies of forms.

- Attachment A** Recertification Source (RCRT SRC) Field Screen Examples
- Attachment B** Abbreviated CNS Notice (ABBR-CNS) Field Screen Examples

Attachment A

Recertification Source (RCRT SRC) Field Screen Examples

Screen NQCS01 - Case Composition - Suffix/Individual Summary

```

NQCS01 (Z)   Case Composition - Suffix/Individual Summary           01/04/12
Case #   Ctr U/W   MRS   FS Rent   0.00 RVI   TI           Pg 1 of 01
000000000E 599 RADAM           PA Rent   0.00 APP SRC   RCRT SRC W

      Address                City                Zip                Phone No.
67 MAIN                                ALBANY                12345                ( )- -

      Case Name                LFLN                Case Name                LFLN
TESTRA                                SF-NET                SF-NET

SUF 01 FS SUF 00 Case MA   Lang SP E | SUF   FS SUF   Case   Lang SP
Pg Stat   Type   Lang Read E |   Pg Stat   Type   Lang Read
PA   NA                                TB Ind   | PA                                TB Ind
MA   AP                                Parent   TB Date | MA                                Parent   TB Date
FS   NA                                Ind     / /   | FS                                Ind     / /

NEXT RECERT / / FSINTW -----
LAST PA RCT / / LAST MA RCT / / Next check / / Next ATP / / M
      Suffix                Individual Data                Status CA S
Sel PA MA FS LN   CIN   First Name M   Last   Sex Birth   PA MA FS ES CD P
      01 01 00 01 RJ00009T MARY           K JONES           F 14/14/14 NA AP NA
  
```

Screen NQCS02 - Case Composition - Suffix Summary

```

NQCS02 (Z)   Case Composition - Suffix Summary           01/04/12
                                           Page 01 of 01

Case # 000000009E   Center 599   Unit/Worker RADAM   MA Resp AG
Address 67 MAIN                                Mail addr: N
City ALBANY           St NY ZIP 12345   CD/B 00 0 Phone No. ( ) -
                                           NYCHA: Proj #   Acct #

-----
Last Auth Budget # 00000   # Budgetable Clients 00   # Budgetable suffixes 00
HEAP                                # Persons In PA HH 00   PA No LRR 0 RCRT SRC W
CASE Restr Inds: Shelter   Water   Fuel   Addl Needs           Alt Payee
Monthly Reporting: Type           Code           State           Util Gar 0
Next Avail Suffix: 2 Next Avail Line No 2 FSINTW   TI   APP SRC

-----
O   Number of Suffixes 1                                Elig. -Suffix-
P                                WFF LF Case SPN ABR Applictn Deter -Status-
t Suf Case Name                SI LN Type IND CNS   Date   Date   PA MA FS
      01 ZXCVB                                MA   E   21/21/21   / /   NA AP NA
  
```

Attachment A

Screen NQCS3A – Current Case Composition – Historical Suffix Information

```

NQCS3A (Z)Current Case Composition - Historical Suffix Information      01/04/12
* --Case #--Suff ----Case Name----- Ctr -U/W- -----
C 000000009E 01  TESTRA                599 RADAM | EAF/EAA Ind:
U Contact - Agency                      Sf-Net | From Date: / /
R LFLN      Name                          | To Date: / /
R WFFSI     Phone ( ) - APP SRC  RCRT SRC W -----
* ----- CED | ---- Recertification Dates ----
* QR Ind.- Code: Desc. / / LAST PA: / / LAST MA: / /
|----- NEXT: / / FSINTW: TI:
*
* - Authorization - Case
* Suffix | Pgm Stat Reason - From - -- To -- Amplification Type
H Information | PA: NA / / / / / / MA
I As Of | MA: AP / / / / / / MA
S 01/04/12 | FS: / / / / / /
T
O Residence | Street 67 MAIN
R Address | City ALBANY State NY Zip 12345 CD/B 00 0
Y | Phone ( ) - Utility Guarantee 0
*
* Mailing | Street Apt
* Address | City State Zip DIN
* 60 MO: 24 MO: -----Facility Name
Next: | Case: Suffix: Date: 01/04/12 CMD

```

Screen NQCS3B - Case Composition - Individual Summary

```

NQCS3B (Z) Case Composition - Individual Summary as of 01/04/12      01/04/12
Case # 000000009E Suffix 01 Center 599 Unit/Wkr RADAM Page 01 of 01

Case Name TESTRA Lang SP E Lang Read E FS Payee 00
                Ctr Hmbd Fcl 60 24
Number of Lines in Suffix: 01 LFLN: Orig 599 Ind Dist MO MO
                Resp 599 N 66
Number of Suffixes in Case: 01 APP SRC  RCRT SRC W
Appl Date 11/21/11 Date Opened / / Date Closed / /
Individual Data: FSINTW -Status- Ca
Ln CIN First Name M Last Sex SSN Birth Date PA MA FS Cd
01 RJ31609T MARY K JONES F - - 14/14/2014 NA AP NA

```

Attachment A

NQCP01 (Z) Pending Case Level Data 01/04/12

Case: 000000009E

----- Control Information -----

Auth #	Trns	-- Forwarding	-- -Involved	-- Form	- Tx	Action	M3E
Typ	- Date	- - Time	- Org	Rsp	Ent	Prepared	St Date Ind Batch
00000001	0109	01/04/12	15:21:34	599	599	A81	01/04/12 00 01/04/12 RDA01

----- Transaction -----

Registry	Auth.	---PA---	---FS---	Unit	Budget	Fiscal	MA
Case no.	Number	Eff Date	Eff Date	Ctr	Worker	No.	Dist Resp TI
	00000001	/ /	/ /				

NYCHA	Proj #	Acct #	APP SRC	RCRT SRC W
Residence	House #	Street		Apt.
Address	City/Town	State	ZIP	
	Phone ()	-	Utility Guarantee	

Mailing			Apt.	Notice/Budg #
Address	City/Town	State	ZIP	
	Din	Facility Name		
Contact	Agency			
Agency	Name		Phone ()	-

Recert Info|Last Recert Date / / CED Worksheet Req Date / / FSINTW

Attachment B

Abbreviated CNS Notice (ABBR-CNS) Field Screen Examples

Screen NCEM10 – Suffix Program Status

```

NCEM10 (Z)                SUFFIX PROGRAM STATUS                01/04/12
CASE # 000000002I        L                                01 OF 01
                           F
                           L          FS          CASE LANG          LANG          SPN ABR
CASE NAME                N SUFFIX  SUFFIX  TYPE    SP  RVI  READ  HMBND  IND  CNS
                           01      01                                X

NOTICE NO  SF-NET
STATUS     REASON      AUTHORIZATION DATE      AMPLIFICATION  ROUTING
          CODE        FROM          TO
PA:        AC          12/01/11
MA:                / /          / /
FS:                / /
          EAA/EAF
    
```

Screen NQCP02 – Pending Suffix Level Data

```

NQCP02 (Z)                Pending Suffix Level Data                01/04/12
Case: 000000002I
----- Control Information -----
Auth #  Trns -- Forwarding -- -Involved - - Form - Tx  Action M3E
      Typ  - Date - - Time - Org Rsp Ent Prepared St   Date  Ind Batch
00000001 0107 01/04/12 15:37:53 099 099 A81 00/00/00 00 01/04/12  RDA03

----- Pending Transaction Data -----
Case Name                Sf-Net    RVI    LFLN    ABBR CNS X
Suffix 01  FS-Suffix 01  Case Type          Lang SP    Lang Read    Hmbd
Suffix                -- Authorization --
Disposition  Status  Reason  - From -  -- To --  Amplification  Routing
      PA          AC          12/01/11  99/99/99          / /
                / /          / /          / /
                / /          / /          / /

Date MA Recert  -----EAF/EAA-----          Spn  Notice/Vers
Completed      Ind  - From -  -- To --  T.B. Date  Ind  Number
      / /          / /          / /          / /
    
```

Attachment B

Screen NQCS02 – Case Composition – Suffix Summary

NQCS02 (Z) Case Composition - Suffix Summary 01/04/12

Page 01 of 01

Case # 000000002I Center 099 Unit/Worker RADAM MA Resp
Address Mail addr: N
City ALBANY St NY ZIP 12345 CD/B 00 0 Phone No. () -
NYCHA: Proj # Acct #

Last Auth Budget # 00000 # Budgetable Clients 00 # Budgetable suffixes 00
HEAP # Persons In PA HH 00 PA No LRR 0 RCRT SRC
CASE Restr Inds: Shelter Water Fuel Addl Needs Alt Payee
Monthly Reporting: Type Code State Util Gar 0
Next Avail Suffix: 2 Next Avail Line No 2 FSINTW TI APP SRC

O Number of Suffixes 1 Elig. -Suffix-
p WFF LF Case SPN **ABR** Applictn Deter -Status-
t Suf Case Name SI LN Type IND **CNS** Date Date PA MA FS
01 zxcvbn FA E **X** 12/29/11 / / AP AP AP