



OFFICE OF POLICY, PROCEDURES, AND TRAINING

James K. Whelan, Executive Deputy Commissioner

Adam Waitzman, Assistant Deputy Commissioner

Office of Procedures

POLICY DIRECTIVE #19-04-EMP

CONCILIATION / REENGAGEMENT PROCESS AND SANCTIONS FOR FAILING TO COMPLY

Date: May 1, 2019	Subtopic(s): Employment, Sanctions
-----------------------------	--

Table of Contents

AUDIENCE 3

BACKGROUND 3

POLICY 4

 CA Sanctions 5

 SNAP Sanctions 5

 Lifting A Sanction 5

REQUIRED ACTION 5

 Pre-Conciliation Review 5

 Infraction Excused 9

 Infraction Correct 11

 Conciliation/Reengagement Notice 13

Conciliation Process 13

 Determining Good Cause 14

 Determining Willfulness 17

Reengagement Process 19

 Reengagement 19

 Failure to Reengage / Refusal of Offer to Reengage 22

Sanctions 22

 Essential Persons 24

 Multi-Suffix Example 24

 Reminder Notice 24

 Lifting a CA Sanction - Reengagement 24

 Lifting a CA Sanction - Exemption 26

 Child Care 26

 Lifting a CA Sanction – Agency Error 26

 Lifting a SNAP Sanction 27

 Reminder 27

 Sanction Ends 27

 Household size = 1 27

 Reapplies with more than 30 days left remaining on SNAP sanction 28

 Pending Actions in WMS When Attempting to Lift a Sanction 29

PROGRAM IMPLICATIONS 30

 Paperless Office System (POS) Implications 30

 Paperless Alternate Module (PAM) Implications 30

 Supplemental Nutrition Assistance Program (SNAP) Implications 30

 Medicaid Implications 31

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

LIMITED ENGLISH PROFICIENT (LEP) AND DEAF or HARD-OF-HEARING IMPLICATIONS 31
FAIR HEARING IMPLICATIONS 31
 Avoidance/ 31
 Resolution..... 31
 Conferences 32
 Good Cause..... 32
 FH&C staff must complete transcan in PAM 33
 Conference by Phone 33
REFERENCES..... 33
RELATED ITEMS 34
ATTACHMENTS..... 34

AUDIENCE This policy directive is for all Family Independence Administration (FIA) and Customized Assistance Services (CAS) staff involved in the conciliation / reengagement process of Cash Assistance (CA) participants.

BACKGROUND The purpose of this policy directive is to inform FIA and CAS staff of the new conciliation / reengagement process. This includes the new procedure to review cases of individuals who did not report to or comply with a mandatory work or employment-related appointment or assignment.

Based on changes to New York State law, this new case review process is required in order to begin the conciliation and reengagement requirements for any person that HRA initially identifies as having infringed to any employment-related appointment or assignment. The new process also allows individuals who infract and do not have good cause, to reengage in employment related activities in order to avoid a sanction.

After HRA initially determines that an employment-related infraction may have occurred, the case review process is designed to ensure that individuals are not sanctioned erroneously and have an opportunity to reengage with their work requirements.

This policy directive details the steps and processes for designated FIA staff to review CA cases for alleged infractions. This directive also provides instructions for the conciliation / reengagement process itself, including the steps staff must take when an individual who is sanctioned wishes to comply and reengage in order to have their sanction lifted.

POLICY

If a CA participant has failed or refused to comply with agency work requirements, or voluntarily quit or reduced earnings, HRA must determine several factors before issuing a conciliation / reengagement notice. HRA must verify that:

- the participant is not exempt from agency work requirements;
- child care was in place, if needed;
- carfare was issued in order to comply with agency requirements,
- any reasonable accommodations, either approved or provided provisionally, were honored
- the mailing address of the appointment notice was correct (based on Welfare Management System [WMS] records);
- the mail was not returned (based on NYCWAY Action Code history);
- there were no known conflicting appointments;
- the appointment notice was in the appropriate language (based on the participant's preference indicated in WMS);
- there were at least two (2) days of unexcused absence from an assigned activity (systemically verified through NYCWAY to ensure case does not even get to pre-conciliation review)

If all of the above factors are verified, HRA must send a notice to the participant offering an opportunity to present a good cause reason, or show a lack of willingness, for failing to comply as well as offer an opportunity to reengage in order to avoid a sanction. The notice must also indicate that even if the participant does not have good cause and the failure to comply was willful, the participant may still avoid a sanction through reengagement.

The letter must explain that in order to avoid a pro-rata reduction of benefits (a sanction) the participant must have had a good cause reason for not-complying, and/or demonstrate that the failure to comply was not willful. The letter must also explain that in absence of good cause and despite willfulness, the participant may still avoid a sanction by reengaging with an agency assigned work activity, if not otherwise exempt. In this instance, reengage means that the participant must comply with the assigned work activity for at least five business days.

CA Sanctions	If the participant does not report for conciliation, or there was a finding of willfulness and no good cause and the participant did not successfully reengage, the participant will be subject to a non-durational CA sanction.
SNAP Sanctions	<p>If the participant is subject to SNAP work requirements, a durational SNAP sanction will be imposed with the following durations:</p> <ul style="list-style-type: none"> • 1st instance – 1 month • 2nd instance – 3 months • 3rd and any subsequent instances – 6 months
Lifting A Sanction	<p>An individual will be able to have the CA sanction lifted either by complying with agency work rules for at least 5 business days or by demonstrating that they are exempt from CA work requirements. For a household size of 1, generally the individual must submit a new application for CA and will remain subject to application timeframes based on case category, unless the individual completes demonstrated compliance within 30 days of the closing. This includes single adults on a multi-suffix case.</p> <p>Note: For single adult households, including single individuals on a multi-suffix case, to reopen their CA case without requiring a new application, they must be able to complete their 5 days of demonstrated compliance prior to the 30th day from closing. If a participant cannot demonstrate compliance for 5 business days prior to the 30th day from closing or, reports more than 30 days after the case/suffix closing, they would have to reapply in order to have the sanction lifted and will be subject to SNCA application rules, including a 45 day wait for their first benefit.</p> <p>An individual with a SNAP sanction on a CA case may request to be reinstated for SNAP after the duration of the sanction period has expired and the individual is now in compliance with SNAP work requirements. An individual who can demonstrate that they are no longer subject to SNAP work requirements may do so at any time, and the sanction may be lifted, even if the duration period has not expired.</p>

REQUIRED ACTION

Pre-Conciliation Review

When an individual is identified as having failed to report to an engagement related appointment, the New York City Work Accountability and You (NYCWAY) system will temporarily hold the suspected infraction and post Action Code **1PCR** to indicate that a conciliation review must be completed. This will place the case on the **PRCON** worklist.

If the individual fails to comply with agency work requirements after being in an assignment (including an insufficient number of hours), NYCWAY will post Action Code:

- **1PCU** for potential Career Services infractions
- **1PCT** for potential Education Services infractions
- **1PCN** for potential Wage Subsidy/Job Search infractions

- **1PCY** for potential Wellness, Comprehensive Assessment, Rehabilitation and Employment (WeCARE) Vocational Rehabilitation Services (VRS) infractions

These codes will also place the cases on the **PRCON** worklist. Designated Job Center staff must pull the worklist to review the cases. Staff will have up to 10 days to complete the pre-conciliation review.

Initiate Review

To initiate the case review, staff must enter the case number and then transmit on the conciliation review at the bottom of the master menu (see the screen shot below). This will open the new Conciliation Review Screen that contains all the necessary information staff will need to determine if the infraction is valid, and whether to continue with an infraction where a conciliation / reengagement notice will be generated and sent.

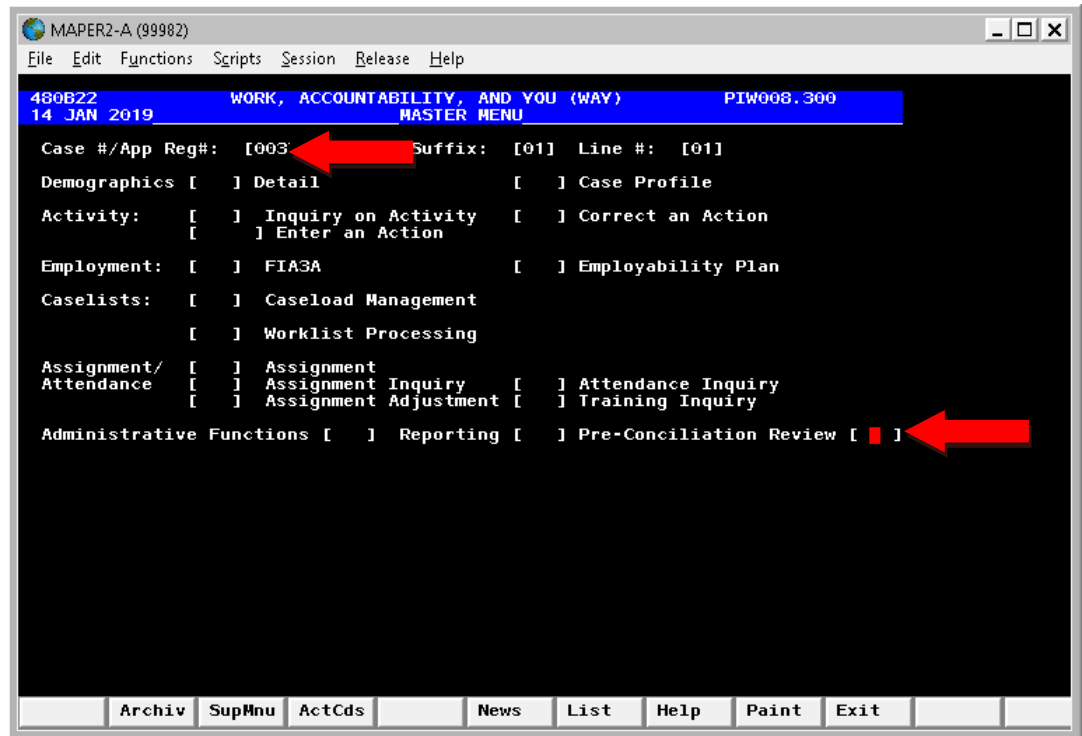
Note: The Client Services Screen will open prior to the Conciliation Review Screen if the participant has any known Reasonable Accommodations.

When conducting the pre-conciliation review, staff should have two sessions of NYCWAY open, allowing staff to toggle between the pre-conciliation review screens and the Activity Inquiry screen. This will prevent staff from having to go into and out of the pre-conciliation review.

Master Menu

Enter the case number

Transmit on Pre-Conciliation Review



After transmitting, the Conciliation Review Screen opens. This screen will display:

- Employability Status (ES)
- Reasonable Accommodation information
- Child Care information
- Carfare information
- Open Action Codes
- Closed Action Codes (within the past 10 days)

Initial pre-conciliation review screen

Hit the F2 key or select the RollFwd button to get to the next screen

```

Months on PA [end JAN] : 02
01/17/2019 New York City - Work, Accountability and You (NYC-WAY) CR2133.300
09:02 Pre-Conciliation Review User Id:500BN

Case 001 01 KH 3A Case Status AC Type FA
Household Size 02 Shelter Type 03-Own Home Office U9A
Form Language: English

Ln Last Name First D.o.B. S S.S.N. Rl Es PStat In Income
*03 KH SA 0 BROOKLYN NY 112350000 0.00
Resid: 3B 32 Y BROOKLYN NY 112350000
Mail: 3B 32 Y BROOKLYN NY 112350000

Status: WORK ACTIVITY Internship Placement Services (IPS) Nxt FFR 04/2019
Child Care: No Open Actions
R.A.R. : None in effect

Next Case _____ Suffix _ Line No. _
    
```

RollFwd INFRCT Excusd ActInq MnMenu

Second pre-conciliation review screen

```

Months on PA [end SEP] : 03
01/14/2019 New York City - Work, Accountability and You (NYC-WAY) CR2133.300
16:49 Pre-Conciliation Review User Id:480BZ

Case 003. . . . . 01 Test CareOfName Case Status SI Type FA
Household Size 00 Shelter Type - Office B66
Form Language: English

Ln Last Name First D.o.B. S S.S.N. Rl Es PStat In Income
003 S SA n F 2 3 01 20 WOR10 SI 0.00
Resid: 100 7 BROOKLYN NY 112070000
Mail: City of NY NY 10000

Assigns: Act Site Start On Jb Assignment/Agency Hrs Mnts
U2B4 U2B41 01/14/19 6C DB Grant CareerAdvance Site C 19 0
T701 T7015 01/14/19 W0 DOE- BROOKLYN ADULT LEARNING CENT 11 0

Carfare in Place: Yes

Appts: Act Description Act Date Appt Date
1G1M CC ALTERNATIVE ENG REFRL 01/04/19 01/07/19

Next Case _____ Suffix _ Line No. _
    
```

RollFwd RollBk INFRCT Excusd ActInq MnMenu

Staff will use the information on these screens, in addition to information on other NYCWAY screens and documents in the HRA OneViewer to make a determination if the alleged infraction should move forward to conciliation / reengagement. If child care, carfare and RARs (that would impact compliance) were not in place when they should have been, or the participant was in an exempt status, staff must select **Excusd** to indicate that the infraction should not go forward.

Note: If “No Open Actions” is displayed in the Child Care section, and the alleged infraction is for an assignment, and the household contains children, staff should review the Activity Inquiry to determine if child care was put in place during the EP and if so, were there any intervening actions, such as notification from the Women’s Housing and Economic Development Corporation (WHEDCO) that the legally-exempt provider was not approved, to indicate that child care fell out of place. If so, staff must excuse the infraction.

Infraction Excused

Months on PA [end JAN] : 02
 01/17/2019 New York City - Work, Accountability and You (NYC-WAY) CR2133.300
 09:31 Pre-Conciliation Review User Id:500BN

Case 000 Household Size 02 Shelter Type 03-Own Home Case Status AC Type FA
 Form Language: English Office U9A

Ln	Last Name	First	D.o.B.	S	S.S.N.	R1	Es	PStat	In	Income
03	KI		05			01	20	WORWD	AC	0.00
Resid:	3B				BROOKLYN					NY 112350000
Mail:	3B				BROOKLYN					NY 112350000

Status: WORK ACTIVITY
 INTERNSHIP PLACEMENT SERVICES (IPS) Nxt FFR
 04/2019

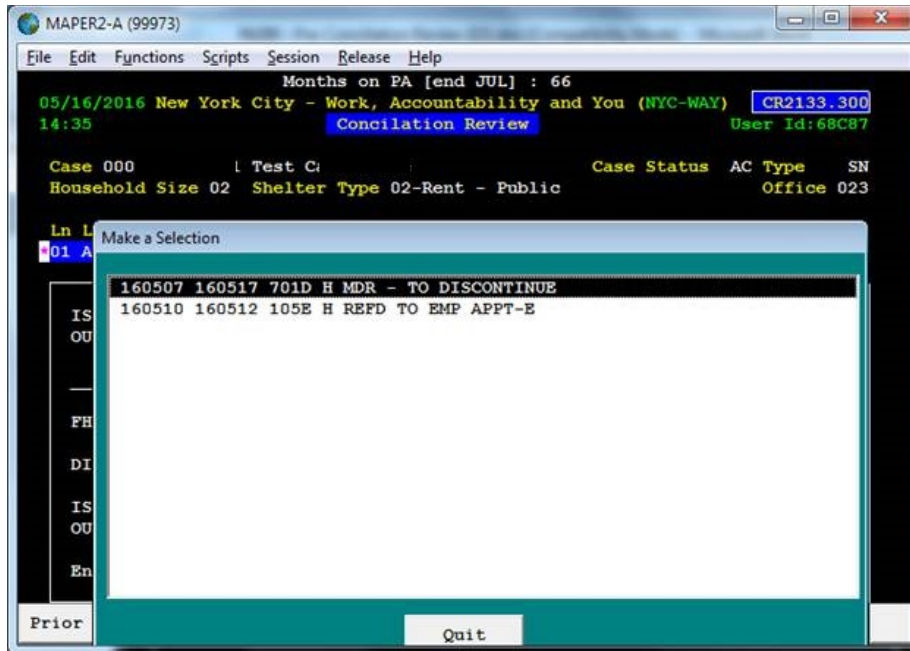
Child Care: No Open Actions

R.A.R. : None in effect

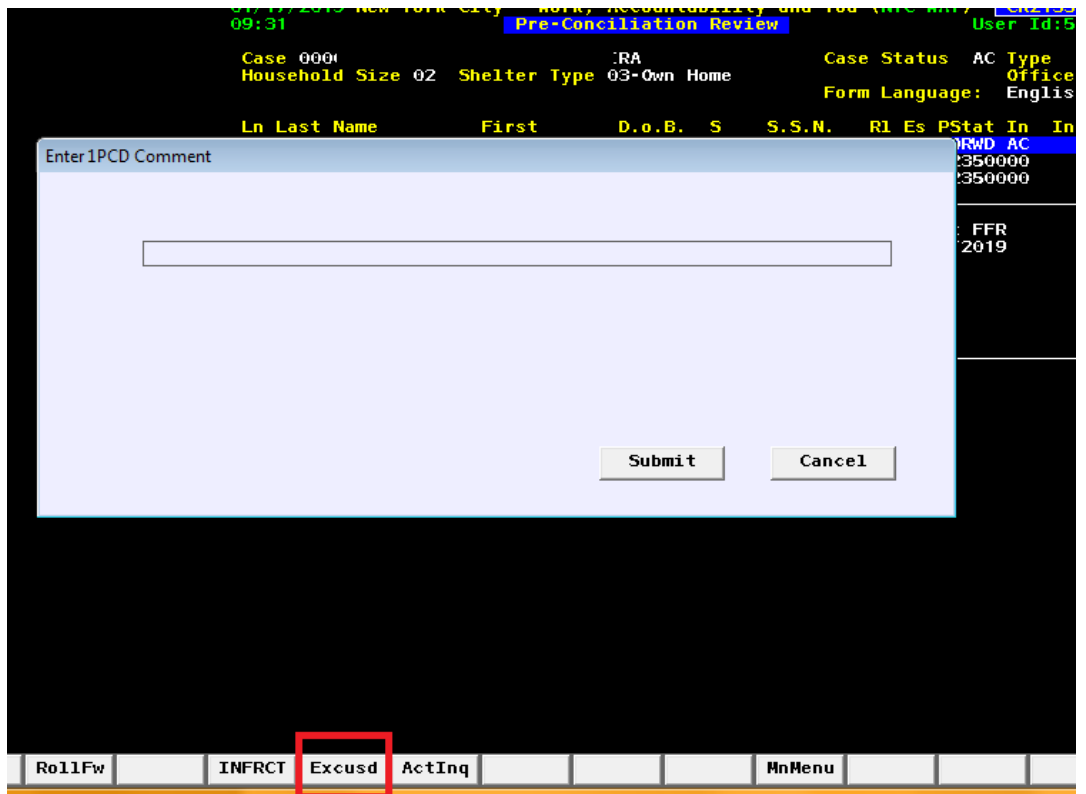
Next Case _____ Suffix _ Line No. _

RollFw
INFRCT
Excusd
ActInq
MnMenu

After selecting **Excusd**, staff will have to select the appointment/activity type for which conciliation will not be going forward.



After that selection, staff must enter a comment explaining the reason for not allowing the infraction to post.

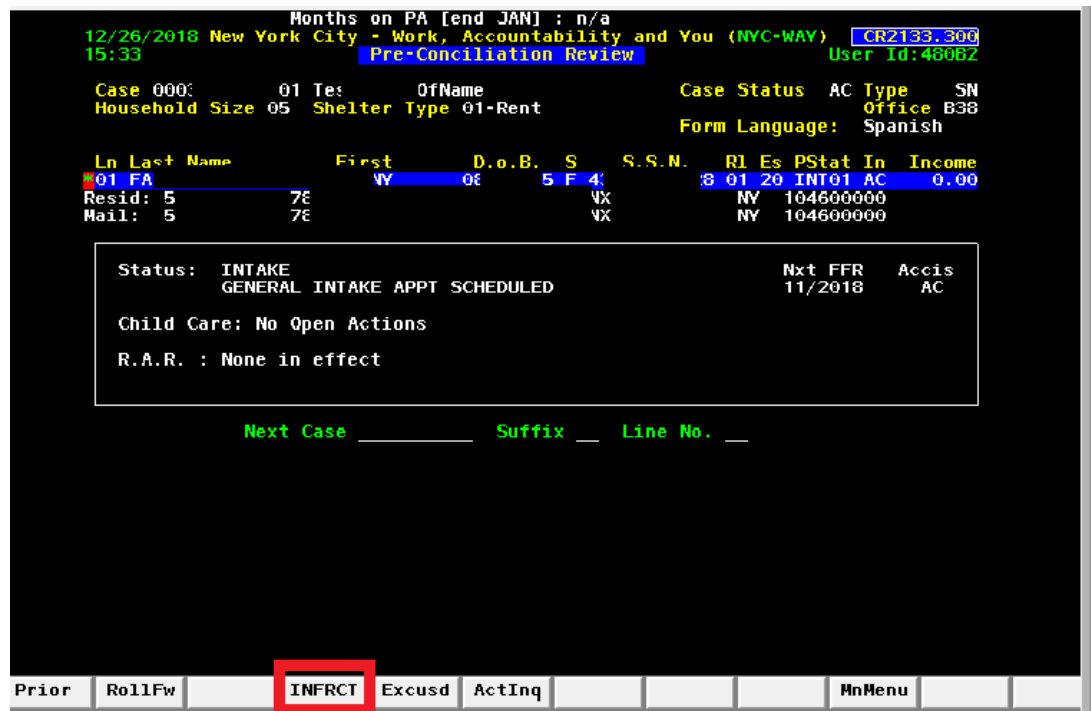


NYCWAY will then post Action Code **1PCE** for appointments or **1PCD** for assignments, followed by Action Code **113W**. The **113W** will place the individual on the unengaged worklist which will use systemic filters to call the participant back into the proper location, with a new call-in notice.

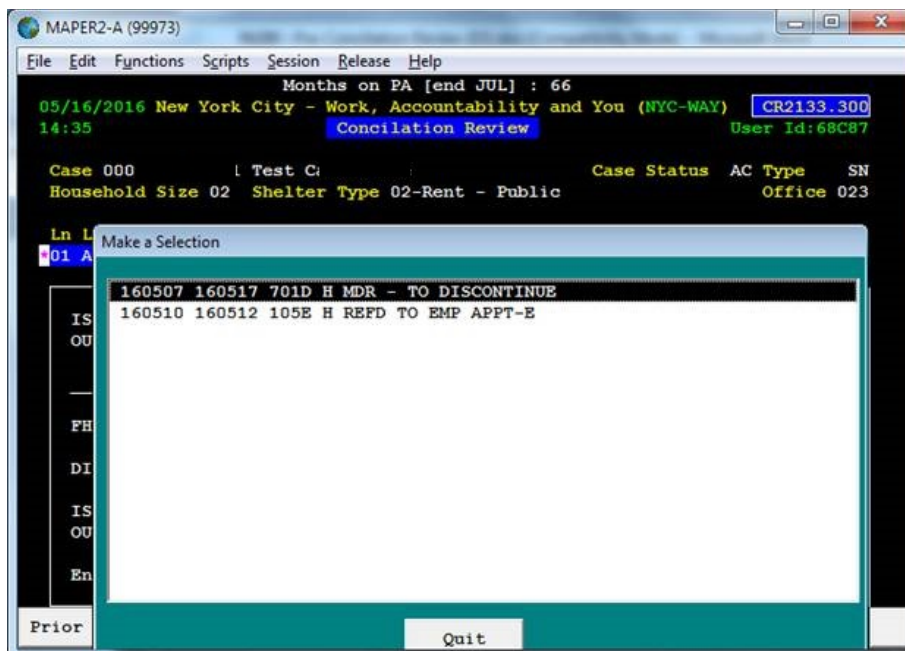
Note: For WeCARE cases, a distinct pool code will post to return participants to the WeCARE provider.

Infraction Correct

During the review, if determined that child care, carfare, and RARs were all in place and properly honored at the time of the infraction (i.e., appointments not scheduled on days the participant cannot attend appointments), when necessary, and the participant was not exempt from engagement related activities at the time of the alleged infraction, staff must select **INFRCT** to indicate that infraction was correct and should move to conciliation / reengagement.



After selecting **INFRCT**, staff will have to select the appointment/activity type for which conciliation will be going forward.



New Reengagement
and Conciliation
Notice - LDSS-5087

After that selection, NYCWAY will post Action Code **1PCA** for appointment infractions and **1PCB** for assignment infractions, followed by the original infraction code that was intercepted. This alerts NYCWAY to generate and mail the Temporary Assistance (TA) and Supplemental Nutrition Assistance Program (SNAP) Reengagement and Conciliation Notice (**LDSS-5087 NYC**).

These reviews are required for each potential infraction.

Note: If staff attempts to enter an infraction manually, the conciliation review screen will pop-up before the infraction code can be posted. Staff must follow the steps outlined above and determine if the infraction they intend to post is correct.

After the file review, if it is determined that the identified infraction was correct, the conciliation / reengagement process will be initiated by the generation of the **LDSS-5087**. Once an outcome of the conciliation / reengagement process is reached, the participant will either be engaged, deemed exempt from work requirements, or proceed through the sanction process where a timely notice will be issued to the participant informing them of the agency's intent to impose a pro-rata sanction (or discontinuance for cases with a household size of one).

For individuals who infract at an appointment, the original appointment is closed out when the **LDSS-5087** is generated. For individuals who infract while in an assignment, some assignments will remain open and some will close. Those that will remain open are Career Services activities and Education Services/Training Assessment Group (TAG) assignments.

All other assignments, including but not limited to Community Service, Job Search (a/k/a Parks II), Wage Subsidy, Alternative Engagement, and Independent Job Search will be closed out. What this means is that for those that remain open, the individual may reengage simply by directly returning to that assignment. For those that are closed, the individual may be reengaged but will have to first be re-assigned by HRA staff.

Conciliation/Reengagement Notice

After the **1PCA** or **1PCB** is posted, NYCWAY will generate the Temporary Assistance (TA) and Supplemental Nutrition Assistance Program (SNAP) Reengagement and Conciliation Notice (**LDSS-5087**). This notice includes the following required information:

- the specific instance or instances of willful refusal or failure to comply without good cause including where the infraction occurred
- affirmative statement that HRA reviewed and verified that appropriate supportive services were in place and that reasonable accommodations, if any, were properly honored at the time of the infraction
- information on how the participant may avoid a pro-rata reduction in benefits:
 - establish good cause/lack of willingness
 - re-engage in work activities
 - demonstrate a reason they should be exempt from agency work requirements

The notice also contains a scheduled appointment date even though the participant may report any time during the conciliation period (10 days). The location of the appointment will depend on where the infraction occurred. For participants who infract with Career Services Providers, the conciliation appointment will be with the HRA Representative at either Career Compass or YouthPathways.

If the infraction occurred either with Education Services or with attendance in a training or education program, the conciliation appointment will be with Education Services.

For all other infractions, the conciliation appointment will be scheduled for the Job Center.

Conciliation Process

Upon determining and verifying that a participant failed or refused to comply with their employment requirements, that individual must be offered a conciliation to provide reasons for the non-compliance. Participants are provided a 10 day period in which to contact the agency and conduct their conciliation.

Conciliation staff will be responsible for mediating any dispute between what the agency has indicated as an infraction or deficiency in engagement hours and/or review any claims for good cause and non-willful infractions with the participant. Staff must complete the conciliation when the participant reports. If the individual reports for their conciliation, as long as the 10 day conciliation period has not ended, staff must conduct the conciliation even if it is prior to the conciliation appointment date.

For individuals who fail to report to conciliation within the 10 day period, NYCWAY will do a systems check to see if the participant has reengaged, become employed, or is now exempt (including recent claims of exemption). If any of those are found, NYCWAY will resolve the infraction and no notice of intent will be issued. If none of those are found, the sanction process will start with the issuance of a notice of intent to reduce or discontinue benefits.

Note: For certain cases involving WeCARE Vocational Rehabilitation Services (VRS) an additional pre-NOI review consisting of an outreach attempt and thorough file review will be conducted by designated staff.

Determining Good Cause

Good Cause

Reminder:
Documentation is not required to determine good cause

If the participant appears for Conciliation within the conciliation period, conciliation staff must review the participant’s reasons and/or statements, and review any documentation provided, to determine if there was a good cause reason for the infraction.

Note: Documentation submitted in support of a reasonable accommodation may be used as a basis for a good cause determination.

Below is a non-exhaustive list of possible examples of good cause reasons and suggested documentation that may be provided to support the claim.

Non-exhaustive list of examples

Typical Good Cause Reasons for Infraction	Supporting Documentation (Not always Required)
Doctor’s appointment or emergency medical visit for participant or child	Note from doctor or hospital (Must indicate number of days)
Jury duty or court appointment	Court documentation (Must indicate number of days)
Disruption in transportation system	Transportation carrier documentation
Death in the family	Death certificate; obituary, memorial or service program
Domestic violence incident	Police, shelter or caseworker report
Child care not available	Letter from child care provider indicating unavailability (Must be consistent with infraction period)
Needed at home for disabled household member	Note from doctor or hospital Family Care Assessment (W-582A) form completed by a physician
Limitation on ability to work not previously known to HRA	Medical/clinical documents

Granting good cause

If during the Conciliation, a determination is made that the participant had a good cause reason for infracting, Conciliation staff at the Job Center must post Action Code **810** (Good Cause Granted) (**810H** [Good Cause Granted – WeCARE] if the infraction is WeCARE related) and select the appropriate reason from the drop menu.

Note: For Career Services and Education Services Infractions, Action Code 810B and 810T will post respectively.

If the **810** series code is being posted for the reason of “other” or if another reason is selected but no supporting documentation has been provided, conciliation staff must enter detailed case comments explaining the decision.

Once good cause is granted, Conciliation staff must reengage the participant, through the Employment Plan (EP). Individuals, who infringed with WeCARE, must be referred back to WeCARE.

New Reasonable Accommodation	<p>If an individual presents at conciliation and either indicates, or staff observes, that a reasonable accommodation (RA) or the need for an RA may exist, staff must offer the participant the Help With Disabilities form (HRA-102c) and offer to assist the participant with completing the document. Staff must print their name, sign, scan and index the document, provide the original back to the participant and either fax or e-mail the Office of Constituent Communication (OCC) at (212) 331-4685 or constituentaffairs@hra.nyc.gov to make them aware that the new request has been made.</p> <p>In NYCWAY, staff must grant good cause by posting Action Code 810. If the RA requested is tied to a physical or mental health barrier that would make it hard for the individual to comply a work activity, refer the participant to WeCARE through the EP. Staff must be mindful to honor the newly requested RA even though it will not yet be available on the client services screen. The participant should be advised that, whenever possible, the Agency will honor their request for an RA provisionally until a final determination is made. The final determination will be mailed to the participant with language advising them of their rights related to the determination.</p> <p>Note: Not all RA requests will require a referral to WeCARE nor should a participant be forced to accept a WeCARE referral just because a request for an RA is made.</p>
Example Question Set to Elicit RAs	<p>To assist staff in making the proper determinations of good cause when there is a question of Reasonable Accommodations, the Example Question Set to Elicit Reasonable Accommodations (FIA-1187a) has been created. The FIA-1187a provides scenarios and examples of questions designed to accurately ascertain if a participant's infraction was indeed related to either a known disability being addressed through an RA or a previously undisclosed situation that should potentially be addressed through an RA. This is not an exhaustive list and is only intended to be a basic guide.</p>
New Exemption Claimed	<p>If during the conciliation the participant makes a claim of a new employment exemption, the conciliation worker must grant good cause by posting Action Code 810 and then complete a new assessment through the EP. Referrals and documentation requirements are unique based on the claimed exemption and current policy for each exemption should be applied. The individuals will be temporarily exempt and their ES Code will be changed to 70 pending the outcome of the individual's claim of a barrier. No sanctions will be imposed for these individuals.</p>
Single Appointment	<p>If the infraction was for refusing or failing to comply with a single appointment or work requirement if the individual is otherwise participating in work activities as assigned by HRA, good cause must be granted.</p>

Voluntary
Quit/Reduced
Earnings

If the conciliation is because the participant either voluntarily quit a job or reduced their earnings, staff must use different criteria for determining good cause. These include but are not limited to:

- Illness
- Discrimination by an employer
- Sexual Harassment
- The job offer was not made in good faith
- The job involves illegal activity
- The work site is subject to a strike or lockout at the time of the offer

See **Attachment B** for a more comprehensive, while still not exhaustive, list of possible good cause reasons for individuals who voluntarily quit their jobs or reduced their earnings.

Determining Willfulness

If it is determined that the participant does not have a good cause reason, including any related to RAs and does not make a claim for a new exemption, staff must still determine if the infraction was willful.

Willfulness, for the purpose of imposing an employment sanction, is determined on a case-by-case basis by considering whether the participant intentionally, knowingly, or deliberately refused or failed to comply with CA and SNAP employment requirements.

Any steps that the participant took to address issues within their control which prevented compliance with the employment requirement may establish that the participant's failure to comply was not willful and must be explored in each instance of non-compliance.

In determining willfulness, staff must consider the following:

- **Steps Participant Took to Prevent or Address Infraction Indicate Lack of Willfulness.** Any steps that the participant took to try and prevent or address the infraction may establish that the participant's failure to comply was not willful and must be explored in each instance of non-compliance.
 - For example, if the participant tried to reschedule their appointment, called their worker, etc., then the infraction was not willful.

Note: If the participant does not allege that they tried to reschedule their appointment or call their worker, it cannot be assumed that the infraction was willful. In addition, if there is no evidence to document that a participant tried to reschedule their appointment or call their worker, it cannot be assumed that the infraction was willful.

- **If the Conciliation Staff Can Not Establish a Lack of Willfulness, the Case Will Be Provided to a Supervisor to Evaluate Whether There is a Pattern of Willfulness Evident from the Case Record.**
 - The higher level Supervisor will review the case record and look for patterns that may or may not be signs of willfulness. A pattern of general compliance can be used to credit a participant to show that they were not willful in infracting.

A pattern of non-compliance could show willfulness, for example:

- A participant failed to attend the assignment on 5 occasions during the months of January and February. On each occasion the participant stated the alarm clock did not function. Each time the participant was settled and re-assigned. Failure to attend a March assignment (6th occasion), using the same reason, would constitute willful noncompliance.

After reviewing the information available and exercising Supervisory discretion and judgment, including but not limited to accepting an earlier or more recent pattern of compliance as sufficient to establish good cause or a lack of willfulness, the Supervisor may find that there is good cause or that the infraction was not willful. The Supervisor should settle the case at Conciliation. The participant must be reassessed and reassigned for full engagement.

Refer to **Attachment A** for examples in determining conduct that is Without Good Cause and Willful.

Receipts for Good Cause

Whether the participant has good cause or, is determined not to be willful in their infraction, a receipt indicating the agency's determination must be provided. When the staff post the **810** series code to indicate good cause/not willful the Good Cause Notice (**FIA-1187**) will be generated and must be provided to the participant along with any referrals or new assignments.

Good Cause Not Granted/Willfulness

If based on the participant's statements, case history, and/or documents, if any provided, it is determined that the infraction was both willful **and** without good cause, staff must inform the participant that a sanction can still be avoided if they agree to reengage in work activities.

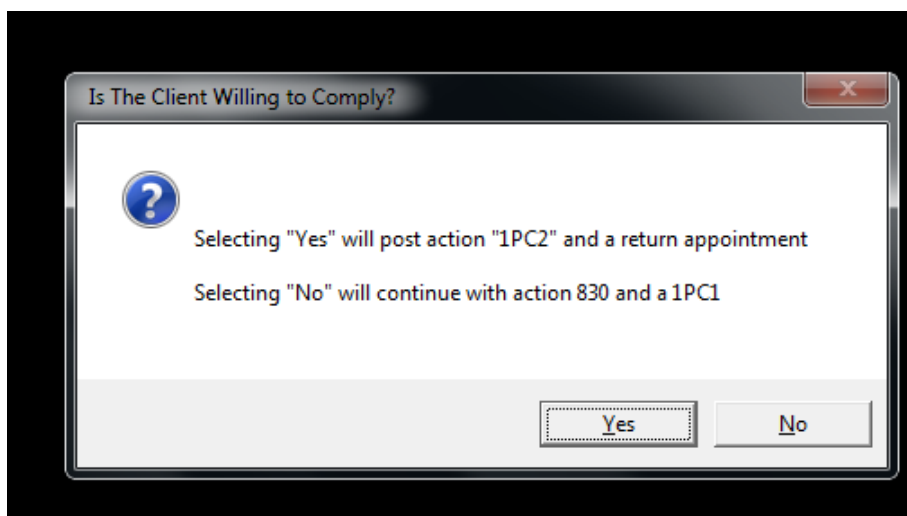
Reengagement Process

After Conciliation staff review and determine that a participant lacked good cause to excuse their failure or refusal to comply with their work requirements and that the noncompliance was willful, Conciliation staff must then offer the noncompliant participant an opportunity to avoid an employment sanction through the reengagement process. The reengagement process allows the participant to prevent a reduction in benefits by demonstrating their agreement to comply with CA and SNAP work requirements.

Note: CA and SNAP work requirements differ. Some individuals will only be subject to CA work requirements and will not be in jeopardy of having their SNAP benefits reduced/terminated.

Reengagement
Career Services
Reengagement

If the participant agrees to reengage, Conciliation staff must enter Action Code **830** and the system will display a Pop-up with question "Is The Client Willing to Comply?" See screen shot below.



If the user selects "Yes", the system will post **1PC2** to generate a referral code appointment to send the participant to a 5-day demonstrated compliance assignment activity with their Career Services provider. NYCWAY will also generate the Appointment to Demonstrate Compliance with Your Work, Education, and Training Requirements to Stop or End Your Sanction (**FIA-1187b**).

During this process no employment sanction for the underlying infraction will be imposed. If the participant reports to the assignment and complies for at least 5 business days, they are considered to be reengaged and the entire infraction process is closed out in NYCWAY by the posting of Action Code **810U**. Any subsequent infractions will restart the conciliation / reengagement process, including a new file review prior to an infraction posting.

If the user selects “No” to the willing to comply question, the system will post a **1PC1** to indicate the client is not willing to comply and Action Code **830** will post to initiate the NOI process. At this point NYCWAY will do a systems check behind the scenes for engagement, employment, or exemption and if none are found, the NOI will post.

Education
Services/TAG
Reengagement

When Education Services/TAG staff offer the participant the chance to reengage during conciliation, they must enter Action Code **830** and the system will display a Pop-up with question “Is the client willing to comply, (Yes/No)?”

If the user enters “No”, the system will post a **1PC1** to indicate the client is not willing to comply and Action Code **830** will post to initiate the NOI process. At this point NYCWAY will do a systems check behind the scenes for engagement, employment, or exemption and if none are found, the NOI will post.

When the participant reports to Education Services/TAG, and has no good cause but is willing to comply or is already in sanction status, they will be granted the option to Demonstrate Compliance (DC). Action Code **1PC2** will be posted in NYCWAY. The Supervisor I or higher will explain the DC process, specifically emphasizing that in order to Demonstrate Compliance the participant must be engaged in their approved training/education activity, where the infraction occurred, for at least 5 business days starting within 2 business days.

CUNY Students and Participants in Jewish Community Council of Greater Coney Island (JCCGCI) Internship Placement Services (IPS) Program

The Education Services/TAG worker will:

- Enter any child care (if needed);
- Process the training enrollment/IPS assignment;
- Complete the top portion of the Education Services Demonstrated Compliance Letter (**FIA-1064k**) form; scan and index the original form; provide one copy to the participant and email another copy to the CUNY school/IPS representative (see Attachment **C** Email Template: Initial Outreach to schools);
- Add the participant’s information to the Education Services Demonstrated Compliance Tracking (**FIA-1064L**) form.

After the initial email is sent to CUNY/IPS notifying of the DC period for the participant, the Education Services/TAG worker will outreach on **Day 6** if the **FIA-1064k** form has not been received. The Education Services/TAG worker will record each outreach, whether successful or not, on the **FIA-1064L** form.

Non-CUNY Students enrolled with Participating Providers

The Education Services/TAG worker will:

- Enter any child care (if needed);
- Process the training enrollment;
- Complete the top portion of the **FIA-1064k** form; scan and index the original form; provide one copy to the participant and email another copy to the school representative (see Attachment **C** Email Template: Initial Outreach to schools);
- Add the participant's information to **FIA-1064L** form.

After the initial email is sent to participating provider notifying of the DC period for the participant, Education Services/TAG worker will outreach to the provider and/or the participant on **Day 2** and **Day 6** and record each outreach, whether successful or not on the **FIA-1064L** form.

Tracking

Daily, a designated Education Services/TAG worker will export the Education Services Demonstrated Compliance Worklist to the Education Services Demonstrated Compliance Tracking form. At the end of each day, the designated Education Services/TAG worker will:

- Update the form with the participants DC dates;
- Inform participating schools via email of the participants who are granted a DC and their dates. Provide scanned copies of the **FIA-1064k** form for each participant, or provide copies of the **FIA-1064j** form for each participant;
- Record outreach to participants and participating schools on the Education Services Demonstrated Compliance Tracking form. The form is kept on the internal shared drive at Education Services/TAG.
- Initial all outreaches or attempts to outreach on the **FIA-1064L** form.
- Enter the appropriate action code into NYCWAY.

All correspondence from participating schools and participants will be received at TAGAttendance@hra.nyc.gov.

Demonstrated Compliance

Upon determination that the participant has successfully demonstrated compliance, either via receipt of the **FIA-1064j** or **FIA-1064k**, or via other confirmation from participating school or the participant, the Education Services/TAG worker will post **810U** (Successful Completion of Demonstrated Compliance) or **134H** (Request to Lift Sanction for Demonstrated Compliance during Sanction).

No documentation of Demonstrated Compliance

If Education Services/TAG does not receive documentation of Demonstrated Compliance by **Day 6**, the Education Services/TAG worker should email No Response Outreach to schools Email Template (see Attachment **D**). In each instance the worker must make a **minimum of three (3)** additional attempts to outreach to the participant or participating school during weeks 2 and 3 from the first day of DC to obtain the document and record each attempt on the Education Services Demonstrated Compliance Tracking form. If after three weeks no documentation of Demonstrated Compliance has been received, and minimum attempts to obtain documentation have been unsuccessful, then the Education Services/TAG worker will post **830P** (Failed to Demonstrate Compliance Conciliation) or **438N** (FTR/FTC Sanctioned Employment Referral) to start the Notice of Intent (NOI) process.

Failure to Reengage / Refusal of Offer to Reengage

If the participant fails to report back to the assignment after agreeing to comply, Action Code **830P** will be posted to initiate the Notice of Intent (NOI) process. The NOI will contain information, in plain language, informing the participant of the Agency's proposed negative case action and alerting them that there is a ten (**10**) day period in which they may request a conference to contest the findings of no good cause and willfulness as well as failure to reengage. The NOI will also provide the individual their rights related to Fair Hearings.

If during the conciliation the participant does not have good cause and the action was willful, and refuses the offer of reengagement to avoid a sanction, the Conciliation worker must enter a detailed case comment explaining the situation and post Action Code **830** allowing the case to proceed to NOI.

Sanctions

Once it is determined that the individual must be sanctioned, NYCWAY will first do a systems check to ensure that the individual has not become exempt, is not employed, nor is currently engaged in an activity. If any of these are found, then NYCWAY will post Action Code **810A** if the participant is found to be employed or is exempt or actively engaged. These codes will shut down the infraction process. Any future infractions would start the entire process over again.

If NYCWAY does not find an exemption, employment, or engagement, a file will be passed to WMS to initiate the sanction transaction. In doing so, NYCWAY will filter individuals who are and who are not subject to SNAP work requirements. For those that are subject to the SNAP work requirements, a CA and SNAP sanction will be passed to WMS. For those that are not, only a CA sanction will be passed. This will trigger the issuance of the NOI and start the ten day clock down period.

Manual NOI
Refer to CD #19-06

In some instances, NYCWAY is unable to process the sanction through the transfer to WMS. In these instances NYCWAY will flag the cases with Action Code **411N** and placing the cases on the NOI worklist. Staff working on that worklist must process the sanction using CNS and POS following the instructions in CD #19-06 and utilizing the Desk Guide for Manual Sanctions on a Single Suffix Case (**FIA-1187c**). Once the NOI is sent and the action processed in POS, staff must post Action Code **412N** in NYCWAY

If after the clock down period, the individual has not requested a fair hearing, successfully reengaged, or documented an exemption from work requirements, the individual will be sanctioned.

The table below shows the potential codes for CA sanctions. Even though CA employment sanctions are now non-durational, the sanction reason codes continue to reflect the correct sanction processing depending on the type of infraction, size of the CA household and the number of times an individual has been sanctioned for noncompliance with CA work requirements.

H/H Size = 1 and Not Subject to SNAP Work Requirements	H/H Size = 1 and Subject To SNAP Work Requirements	H/H Size > 1 (Line Level Codes)
WX1	WX4	WE1
WX2	WX5	WE2
WX3	WX6	WE3

For a household size of 1, the sanction codes are actually closing codes. The individual status in WMS will be **CL**. This includes single individuals on a multi-suffix case.

Note: When the WX4, WX5, or WX6 are processed in WMS, an automatic SNAP suffix level closing code of WE1, WE2, or WE3 will be systemically processed to sanction the SNAP portion of the case and ensure SNAP benefits do not continue on the closed CA case.

Essential Persons Essential persons who are the subject of the sanction cannot negatively impact the remainder of the household. These individuals must be sanctioned and then removed from the household as no longer essential persons. Refer to PD #10-11-ELI

Multi-Suffix Example For example, in a two-suffix case where suffix 1 contains two citizen children receiving Family Assistance (FA) and suffix 2 contains one Lawful Permanent Resident (LPR) with only 2 years in that status receiving Safety-Net Cash Assistance (SNCA), suffix 2 will show CL in WMS. If the individual reports to the Job Center, and agrees to comply and demonstrates compliance for at least 5 business days within 30 days of the closing, their case/suffix can be reopened without a new application. Staff must initiate a new EP on the closed suffix to reengage the participant. Once the individual successfully demonstrates compliance, they will be placed on a worklist to have their sanction lifted (suffix reactivated) and benefits restored to the date the individual agreed to comply.

If the individual cannot demonstrate compliance for at least 5 business days prior to the 30th day from closing or, reports more than 30 days after the case/suffix closing, they would have to reapply in order to have the sanction lifted and will be subject to SNCA application rules, including a 45 day wait for their first benefit.

Reminder Notice For individuals that have been sanctioned for 30 days or more, the Office of Temporary and Disability Assistance (OTDA) will send out a reminder notice. This notice will inform the CA head-of-household that the sanctioned individual may end their sanction by complying with employment requirements or by documenting that they are now exempt. If the sanctioned individual's household size was equal to 1 at the time of the sanction, the individual must also submit a new application and would be subject to application timelines based on case category at the time of reapplication.

In addition to OTDA sending out a notice, NYCWAY will also send out the Option to End a Temporary Assistance Sanction – NYC (**LDSS-4231**) to all individuals remaining (and sanctioned/discontinued single-person CA households) that remain sanctioned after 60 days.

Lifting a CA Sanction - Reengagement

Once a CA sanction is in place, an individual has the ability to have that sanction lifted at any time by complying with an agency assigned work activity for at least 5 business days.

When the sanctioned individual reports to the Job Center and indicates that they wish to reengage to have their sanction lifted, the JOS must initiate the EP. If no barriers to employment are raised, NYCWAY will post the appropriate assignment code and generate the **FIA-1187b** to refer the participant to the Career Services provider for them to reengage.

After the fifth business day of compliance, NYCWAY will post Action Code **134H** to place the case on the SLIFT worklist. Designated Job Center staff must pull the worklist daily and take appropriate actions to lift the sanction and restore benefits back to the date the participant initially reported to the Job Center and agreed to reengage. Staff must ensure the sanction is lifted within 5 business days of the participant successfully completing demonstrated compliance.

CA HH Size = 1

For a CA household size of one, including a single adult on a multi-suffix case, the case/suffix will be in closed status. These individuals do not have to reapply if they successfully complete the demonstrated compliance process within 30 days of the closing. Individuals who report to the Job Center and agree to reengage but insufficient time exists for them to complete the demonstrated compliance process before the 30th day after closing must reapply for assistance. The individual is subject to all Safety-Net Assistance (SNA) rules, including the 45-day application period before a benefit may be issued. These individuals will be considered to have demonstrated compliance by participating in their applicant engagement requirements.

For example, an individual who has their case closed WX4 on 3/1 reports to a Job Center on 3/29 and indicates that they agree to reengage. As 3/31 would be the 30th day after case closing, there would not be 5 days available for the individual to successfully demonstrate compliance. The individual should be informed of this and given the opportunity to apply for assistance.

Note: If the individual was also sanctioned for SNAP, the SNAP portion of the case must not be reactivated unless the durational period has expired or the individual is now exempt from SNAP work rules.

If the individual reports 30 days or more after the closing, they must reapply for CA and are subject to all Safety-Net Assistance (SNA) rules, including the 45 day application period before a benefit may be issued. These individuals will be considered to have demonstrated compliance by participating in their applicant engagement requirements.

Lifting a CA Sanction - Exemption

A sanction must also be lifted at the time an individual documents or claims a new exemption. This includes at the time a medical barrier is claimed and the individual is being referred to WeCARE. The sanction must be lifted within 5 business days of the individual documenting or claiming the exemption.

Child Care

Refer to PD #16-08-EMP for necessary child care actions

If the participant wants to have the sanction lifted but is in need of child care, staff must initiate the EP and give the participant a child care return appointment along with all of the necessary child care forms.

Once the participant finds child care, the Child Care Specialist must take the necessary actions in ACCIS to ensure it is in place when providing the participant the appropriate reengagement referral. This includes the following steps required in ACCIS:

- Removing the suspension;
- Removing the Child Care end date;
- Enrolling the child(ren) with the provider;
- Ensuring that the Reason for Care (RFC) code is **18** (Demonstrated Compliance) for all children; and
- Providing the participant the **FIA-1100e** which informs the participant that they are only being provided child care in order to demonstrate compliance to have their sanction lifted.

After child care is put in place, staff must continue the EP and refer the individual to the appropriate Career Services provider. NYCWAY will post Action Code **1G3D** for Career Compass or **1G4D** for YouthPathways, and generate the **FIA-1187b**.

Once the individual successfully reengages, NYCWAY will post Action Code **134H** putting the case on the SLIFT worklist. The sanction must be lifted and benefits restored back to the day the individual first reported to the Job Center to request the sanction be lifted. This must be completed within 5 business days of the successful reengagement.

Lifting a CA Sanction – Agency Error

If an individual reports to a Job Center after a sanction has been imposed, and it is determined that the sanction was imposed in error (i.e., error in the pre-conciliation review, data entry error in time keeping system, etc.) staff must lift the sanction and restore all lost benefits.

Additionally, staff must post Action Code 1AEC in NYCWAY prior to re-engaging the participant. Action Code 1AEC will allow for re-engagement of the participant on the same day they are in the Job Center with their line still in SN status without imposing the demonstrated compliance requirements on the individual.

Lifting a SNAP Sanction

Exemption	<p>SNAP sanctions remain durational and cannot be lifted until the end of the sanction period and after the participant has complied for at least 5 business days. If the individual is already in compliance with their CA work requirements, no additional demonstrated compliance is needed.</p> <p>SNAP sanctions may also be lifted during the durational period if the individual documents a new exemption from the SNAP work requirements. If an individual becomes exempt, the SNAP sanction should be lifted at that time. If it is not removed at that time, NYCWAY will post Action Code 134E and place the case on the SLIFT worklist. Job Center staff must then lift the SNAP sanction and post Action Code 134Y in NYCWAY to close out the 134E. Benefits must be restored back to the date the individual first reported/became exempt.</p>
Reminder	<p>Note: If the individual reports employment that would make them exempt from SNAP work requirements (employed or self-employed 30 or more hours per week, OR earning at least the equivalent of 30 times the federal minimum wage on a weekly basis) then the sanction must be lifted along with the income budgeted and the SNAP ES code changed to 28.</p>
Sanction Ends Household size greater than 1	<p>For households of more than one individual where the household is already receiving SNAP benefits, NYCWAY will post Action Code 134L to indicate that the SNAP sanction has expired and move the case on to the SLIFT worklist for Job Center staff to lift the SNAP sanction. After SNAP has been reactivated, staff must post Action Code 134Y to close out the 134L in NYCWAY.</p>
Household size = 1 Reapplies within 30 days of SNAP sanction expiration	<p>For households containing only one individual, if the individual was sanctioned for SNAP and the duration of that SNAP sanction expires within 30 days of the individual agreeing to comply and successfully demonstrating compliance, the SNAP portion of the CA case may be reactivated if the individual has filed an application for SNAP benefits and is otherwise eligible for SNAP benefits. However, SNAP benefits may only be issued following the date the SNAP durational sanction expired, not the date the individual agreed to comply.</p>

Reapplies with more than 30 days left remaining on SNAP sanction

If the individual reapplies with more than 30 days remaining on the SNAP duration, when the eligibility determination is made to accept the CA, and the individual is exempt from SNAP work requirements, the SNAP portion of the application may be activated and benefits issued from the date the exemption was verified. If the individual is still subject to SNAP work requirements then the SNAP portion of the CA case must be denied with reason code **Y99**. When workers select **Y99** on the POS TAD, they will be prompted to select a reason for using this code. Staff must select “yes” for the third reason from the display that states, “Are any of the SNAP individuals on a durational sanction that will not expire during the application period?” which will allow the case to proceed.

Staff must also ensure that proper language is used on the Action Taken On Your Application: Part B Public Assistance, Supplemental Nutrition Assistance Program (SNAP) And Medical Assistance Coverage (NYC) (**LDSS-4013B NYC**) notice to inform the individual that they are being denied SNAP benefits because they are still under a durational sanction by entering the following text:

“You are still under a durational SNAP sanction.”

The regulatory citation that must be entered is 18 NYCRR 387.12(e).

Thirty days prior to the expiration of the SNAP sanction, NYCWAY will post Action Code **134L** to indicate that the SNAP sanction is nearing expiration for these individuals.

When the individual reports, if they have no other appointments, they will be routed to the Case Management Unit (CMU) section of the Job Center. CMU staff will start the CA Application intake activity and register a new application for CA/MA/SNAP. CMU staff will conduct an interview and confirm/verify if any information already known to the agency on the active CA case is incorrect or has changed.

After completion of the interview, staff will confirm in WMS that the SNAP sanction has expired, and in NYCWAY that the individual is actively engaged in work activities. If these requirements are met, and the individual is otherwise eligible for SNAP, staff must reject the entire application with WMS reason code **M66** for both CA and SNAP. A detailed case note must be made to indicate that the individual’s SNAP sanction has expired and that they are now eligible for SNAP benefits on their CA case. The active CA case number must be included in the case note but staff must not link the new application back to the active CA case number as that will force the transaction to error out in WMS.

Do not link the new application back to the active CA case.

Staff must follow up the rejection of the application case with the activation of the SNAP benefits on the active CA case using WMS reason code **A30** in a Change Case Data activity.

SNAP benefits must be issued from the date of application, but not earlier than the first day after the end of the durational sanction period.

Example:

John Doe was sanctioned on 2/1 for both CA and SNAP for failure to comply with employment requirements. As a household size of 1, John's CA was closed with WX6 which also initiated a SNAP closing code of WE3 (six month duration) because this was his third infraction. John reports to a Job Center on 3/15 and reapplies for both CA and SNAP. John has complied with all requirements and the Job Center processes the eligibility determination on 4/8. Because John has complied with all requirements, the CA can be activated (although no benefit issued until 4/28). However, John's SNAP durational sanction does not expire until 7/31. The Job Center staff must reject the SNAP portion of the CA case with reason code Y99 and explain on the notice that the SNAP is rejected because the SNAP durational sanction has not yet expired.

On 8/15 John goes back to his Job Center to apply for SNAP benefits. Job Center staff will have John complete the LDSS-2921 and register the case across the board. After the interview, the Job Center staff checks WMS and sees that John's SNAP sanction expired and that John is in compliance with his engagement requirements. The worker will process a rejection on the new application with reason code M66 and must enter a detailed case note indicating that the individual's SNAP sanction has expired and that they are now eligible for SNAP benefits on their CA case. The active CA case number must be included in the case note. Additionally, the Job Center worker will perform a Change Case Data activity in POS on the open CA case to activate the SNAP portion of the case with reason code A30. Pro-rated SNAP benefits must be issued from 8/15.

Pending Actions in WMS When Attempting to Lift a Sanction

If a budgetary transaction is clocking down in WMS when the sanction (CA or SNAP) is due to be lifted, staff must take the following steps to ensure that there is no delay in processing of the sanction lift:

- review the pending budget to identify all changes being made;
- incorporate those changes into one budget that includes the lifting of the sanction;
- prepare a Transaction Cancellation Data Entry form ([LDSS-3652](#)) to cancel the current pending action in the Paperless Alternate Module (PAM);
- if there is a supplement in benefits required due to the delay in the effective date of the cancelled action, issue a supplement for CA and/or SNAP benefits appropriately: and
- enter a case comment in POS to indicate the action taken, including the reason for the cancelled transaction and any supplementations provided.

Refer to PB #11-22-ELI

If the action clocking down does not contain a budget (i.e. **G10** closing for failure to recertify) staff must review the case and determine if the pending action is still appropriate. If the pending action should not go through, staff must prepare a [LDSS-3652](#) to cancel the current pending action.

**PROGRAM
IMPLICATIONS**

Paperless Office System (POS) Implications When a manual sanction must be processed on a single suffix case, staff must process the action through POS. Staff must select the appropriate sanction level code on the POS Turn-Around-Document (TAD) and then calculate a new budget. Staff must ensure that income source code **46** is used on the budget when the individual is only being sanctioned for CA and income source code **47** on the budget when the individual is being sanctioned for both CA and SNAP.

Staff must ensure they go into the Client Notice System (CNS) to create the CNS notice. The notice number created in CNS must be authorized on the POS TAD.

Note: Even though CA sanctions are not durational, staff must still utilize the correct sanction code for the CNS Notice based on the infraction history in WMS. For example, when creating a notice for an individual on a multi-person case who has had two prior engagement related sanctions, the JOS/Worker must enter WE3 into the CNS system when entering the reason code for generating the NOI. This will have no impact on the length of the sanction as they are not durational but will properly track the infraction history

Paperless Alternate Module (PAM) Implications For multi-suffix cases, staff are reminded that the actions taken to either sanction or to lift the sanction must be processed through PAM.

If there is only one household member active on the suffix that the infraction occurred on, the sanction must be processed as a closing using the appropriate **WX** WMS closing code.

Supplemental Nutrition Assistance Program (SNAP) Implications Cash Assistance / Supplemental Nutrition Assistance Program (CA/SNAP) participants who have been identified as failing to comply with an assigned work activity must be offered an opportunity at their Conciliation / Reengagement appointment to avoid a SNAP sanction, if subject to SNAP work rules, by demonstrating compliance with a SNAP Employment & Training (SNAP E&T) work requirement.

Individuals who are determined not to have good cause and whose infraction is deemed to be willful must be offered the opportunity to reengage in order to avoid a CA and a SNAP sanction. If the individual successfully reengages, there will be no negative case actions taken against the CA or SNAP.

If the individual does not successfully reengage after being offered the opportunity to do so, they will be subject to both a CA and SNAP sanction, if subject to SNAP work requirements or a CA sanction only if not subject to SNAP work requirements.

Medicaid
Implications

There are no work requirements for Medicaid.

**LIMITED
ENGLISH
PROFICIENT
(LEP) AND
DEAF or HARD-
OF-HEARING
IMPLICATIONS**

For Limited English Proficient (LEP) and deaf or hard-of-hearing applicants/participants, make sure to obtain appropriate interpreter services in accordance with [PD # 16-14-OPE](#) and [PD # 17-19-OPE](#).

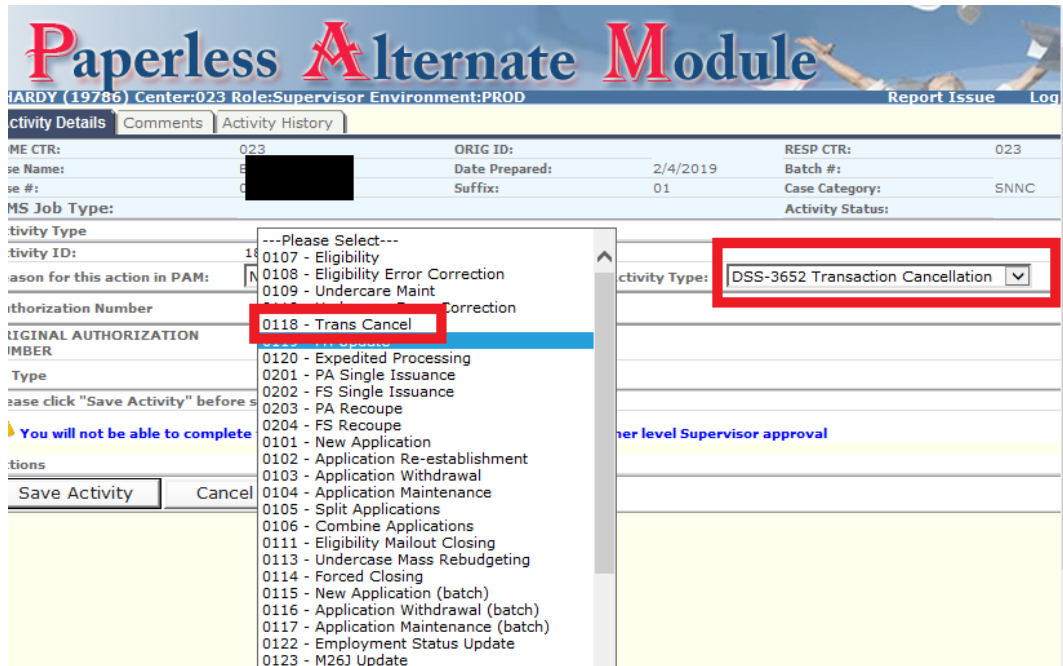
**FAIR HEARING
IMPLICATIONS**

Avoidance/
Resolution

Ensure that all case actions are processed in accordance with current procedures and that electronic case files are kept up to date. Workers are reminded that adequate or timely notification must be sent to all applicants/participants when an adverse action is taken. In addition, the applicant/participant should be given the opportunity to resolve the infraction issue without having to resort to a Fair Hearing.

Conferences	<p>Individuals may request a conference either in person or by phone with the Fair Hearing and Conference (FH&C) unit. In both instances, FH&C will discuss with the participant the reasons for infraction and make a determination as to whether or not there is good cause. FH&C staff will review all appointment notices, case notes, and other relevant parts of the case record, including the Client Services Screen for an evaluation of RAs.</p> <p>If FH&C determines that there was good cause for the infraction, or if there is another reason why the infraction should be settled (i.e. agency error, defective notice, etc.) they must settle the infraction by indicating in NYCWAY that there is good cause.</p>
Good Cause	<p>For Conferences in person, FH&C staff must post Action Code 820 to indicate good cause and to settle the pending NOI. They must also post Action Code 10FH for a same day in-center referral to the Job Center to reengage the participant. If the NOI was automated (Action Code 410 – Automated NOI Sent) no further action is required by FH&C staff. If the NOI was manual, Action Codes in the 411 and 412 series, FH&C staff must also submit a Fair Hearing Update Data Entry Form (LDSS-3722) through PAM utilizing Fair Hearing Code 1 to indicate that the participant has settled the infraction in conference.</p> <p>If at the time of the conference the participant is already sanctioned, FH&C staff must post Action Code 702W and send a W-270 to the Job Center to process a sanction lift. FH&C staff must indicate in the NYCWAY comments as well as on the W-270 that there was good cause for the infraction and that the sanction must be lifted with benefits restored back to the date the sanction took effect.</p>
No Good Cause	<p>If the individual reports to a conference and good cause cannot be established, and the infraction was willful, FH&C staff must still provide the individual an opportunity to reengage through demonstrated compliance. FH&C staff will post Action Code 830 and then indicate in the pop-up if the individual is willing to comply. If “Yes” is selected, NYCWAY will post Action Code 1PC2 and NYCWAY will generate and mail the FIA-1187b referring the individual to the appropriate activity to reengage. FH&C staff must then transcan the pending WMS action to stop the negative action from clocking down while the individual is in the process of demonstrating compliance. To transcan the pending action, FH&C staff must submit the LDSS-3652 through the Paperless Alternate Module (PAM) and select 0118 Trans Cancel from the Activity ID drop down and DSS-3652 Transaction Cancellation from the Activity Type drop down (see screen shot below).</p>

FH&C staff must complete transcan in PAM



If the participant successfully reengages for 5 days, NYCWAY will post Action Code **810A** and the infraction will be settled.

If the individual does not successfully reengage, NYCWAY will post an alleged infraction that will be intercepted so that a new pre-conciliation review can occur, prior to the issuance of another 10 day clock-down notice.

Conference by Phone

Participants may also request a conference by phone. The same steps will be followed as an in person conference. Refer to PB #17-03-OPE for additional information on the Conference by Phone process.

Evidence Packets

All evidence packets must contain relevant copies of appointment notices, assignment letters, employment declarations, and employment assessments.

REFERENCES

- SSL §341-a
- SSL §342-a
- 19-ADM-01

**RELATED
ITEMS**

PD #10-11-ELI	Essential Persons
PB #17-03-OPE	Conference by Phone
PB #19-25-OPE	Reasonable Accommodations and Their Role in Resolving Potential Negative Case Actions
PB #19-26-OPE	Pre-Notice of Intent (NOI) / Notice of Decision (NOD) Case Review Process

ATTACHMENTS

Attachment A	Examples in Determining Conduct that is Without Good Cause and Willful
Attachment B	Examples of Good Cause Reasons for Voluntary Quit/Reduced Earnings
Attachment C	Email Template: Initial Outreach to schools
Attachment D	Email Template: No Response Outreach
Attachment E	Email Template: Initial Outreach to Participant
LDSS-3652	Transaction Cancellation Data Entry Form
LDSS-5087 NYC	Re-Engagement and Conciliation Notice (Rev.12/18)
LDSS-4231 NYC	Option to End a Temporary Assistance Sanction – NYC (Rev. 10/18)
FIA-1064j (E)	Participant Verification of Demonstrated Compliance (02/25/2019)
FIA-1064j (S)	Participant Verification of Demonstrated Compliance (Spanish) (02/25/2019)
FIA-1064k (E)	Education Services Demonstrated Compliance Letter (02/25/2019)
FIA-1064k (S)	Education Services Demonstrated Compliance Letter (Spanish) (02/25/2019)
FIA-1064L (E)	Education Services Demonstrated Compliance Tracking (02/25/2019)
FIA-1100e (E)	Providing Child Care for your Demonstrated Compliance to Remove Your Cash Assistance Sanction (09/25/18)
FIA-1100e (S)	Providing Child Care for your Demonstrated Compliance to Remove Your Cash Assistance Sanction (Spanish) (09/25/18)
FIA-1187 (E)	Good Cause Notice (01/27/2017)
FIA-1187 (S)	Good Cause Notice (Spanish) (01/27/2017)
FIA-1187a	Example Question Set to Elicit Reasonable Accommodations (10/04/18)
FIA-1187b (E)	Appointment to Demonstrate Compliance with your Work Requirements (11/05/18)
FIA-1187b (S)	Appointment to Demonstrate Compliance with your Work Requirements (Spanish) (11/05/18)

ATTACHMENT A

Attachment A

Examples in Determining Conduct that is Without Good Cause and Willful

The following are examples to assist in determining whether or not a participant's conduct was *both* without good cause *and* willful:

Example #1

A non-exempt Safety Net (SN) participant was assigned to participate in a vocational training program from 9am to 3pm daily for a three month period beginning July 6. On July 19 and 20, the participant did not attend the training program. During the conciliation appointment, the participant stated that she understood she was expected to attend the training program and did not attend on July 19 and 20 because she went to visit a friend over the weekend and decided to stay a few extra days. The participant indicated that the visit was not for any emergency situation.

If this was a single instance of unexcused non-compliance and the participant is willing to comply, Conciliation staff should advise the participant that such conduct may result in a finding of non-compliance if it occurs again and note that discussion in the case file. Conciliation staff should determine the non-compliance is not willful and the matter should be settled in the Conciliation process. If this conduct was part of a pattern of non-compliance, the Conciliation worker should determine that the participant's failure to participate in the training program was without good cause and willful as the participant intentionally chose not to attend for a reason that did not constitute good cause.

Example #2

A non-exempt SN participant was referred to a work assignment to begin on September 8. On September 8, the participant notified his employment vendor that he missed the first day because he missed the bus and did not have other transportation on that day. He also stated that he will show the next day to participate in the assignment.

The vendor must advise the participant to report to the worksite the next business day and document the incident/discussion in the case record.

Should the recipient subsequently receive a Conciliation Notice(s) for subsequent instances of a missed bus, the worker at Conciliation will need to evaluate whether or not the participant's non-compliance with assigned work requirements is without good cause and rises to level of willfulness.

ATTACHMENT A

Note: Each non-compliance, including the discussion, must be noted in the case record. This information may be needed at future Conciliation appointments to evaluate whether any subsequent failure to comply constitutes noncompliance without good cause and that is willful for future Conciliation appointments and for possible subsequent fair hearings.

Example #3

A non-exempt FA participant failed to report to a work assignment and was sent a Conciliation Notice. The participant responded to the Conciliation Notice and informed the Agency that he did not appear at the work assignment because the party he attended the night before extended into the next morning. He stated he did not want to attend the work assignment on that day. This is not the first instance in which the participant missed a work assignment for this reason.

Based on these circumstances, the Conciliation staff should determine the participant's conduct was without good cause and willful because he deliberately chose to attend the party that may have prevented him from complying and knowingly failed to attend his work assignment.

Example #4

A non-exempt SN participant complied with an employment assessment and was assigned to participate in a vocational education program starting September 1. On September 3, the participant did not appear for the assignment. During the conciliation appointment, the participant stated that he did not attend the assignment because his alarm clock did not work.

The Conciliation staff should grant good cause and need not determine whether the conduct was willful.

Example #5

On March 5, the HRA Career Services Representative referred a non-exempt FA participant to Internship Placement Services (IPS) orientation. The IPS orientation was scheduled for March 10. The participant did not report to the orientation nor did the participant contact the Job Center or the IPS orientation site.

A conciliation notice was generated. During the conciliation appointment, the participant stated that she simply forgot about the appointment.

Based on these individual circumstances, the Conciliation staff should grant good cause. In this case the Conciliation staff need not evaluate willfulness, because a claim of forgetting an appointment in and of itself does not rise to the level of a willful refusal or failure to comply.

ATTACHMENT A

Example #6

A non-exempt SN participant failed to appear at a work assignment from September 1 through September 7. During the conciliation appointment, the participant stated that he did not attend the work assignment because he was hospitalized. The participant provided documentation that indicated he was hospitalized from September 1 through September 6.

Even though the hospital documentation does not cover September 7, it is reasonable to infer that the participant was still recovering from the incident/illness that caused the six-day hospital stay on September 7. Conciliation staff should grant good cause and need not determine whether the conduct was willful.

ATTACHMENT B

GOOD CAUSE EXAMPLES – VOLUNTARY QUIT/REDUCED EARNINGS (18 NYCRR 385.13)

- Discrimination by an employer
- Sexual Harassment
- Work demands or conditions that made continued employment unreasonable, such as not being paid on schedule
- The wages offered, including the wages offered on a piece-rate basis, are less than the prevailing minimum wage
- Necessary supportive services are unavailable
- The job offer was not made in good faith
- The participant has mental and physical limitations that prevent them from performing the duties of the job
- The participant was asked to participate in antiunion activities, or join, resign from, or refrain from joining a union
- The job involves illegal activity
- The work site is subject to a strike or lockout at the time of the offer
- Appropriate, accessible and affordable child care is not available during the hours the individual is required to work
- The conditions of employment or the job are otherwise contrary to law
- Daily commuting time exceeds two hours per day
- The distance to the place of employment makes walking prohibitive and neither public nor private transportation is available
- Accepting a job would result in a net loss of cash income for the household
- Court dates: this can be family court appearances, jury duty, criminal or civil court proceedings
- Any applicant or participant, who quits a job, secures a new job and through no fault of their own, loses the new job, must not be considered as a voluntary quit
- Leaving a job in connection with patterns of employment in which workers frequently move from one employer to another such as construction work
- The job represents a physical danger and health hazard to the individual or there is an absence, if appropriate, of workers' compensation
- Circumstances beyond a participant's control such as but not limited to, illness of the individual, illness of another household member requiring the presence of the member, a household emergency, or lack of adequate child care

Email Template: Initial Outreach to schools

The following student(s) have infringed to a TAG activity, and are required to demonstrate compliance with HRA's work requirements by participating in training and/or work related activities for five (5) consecutive days during the period indicated below.

Student's Responsibility:

Attend the training and/or work related activity(s) for five (5) consecutive days during the period indicated below.

Program Responsibility:

- Monitor the student(s) attendance to the training and/or work related activity(s) for five (5) consecutive days during the period indicated below.
- Respond to TAG's phone, and/or email inquiries to verify the student(s) attendance to the TAG approved activity indicated below. And,
- Complete the Education Services Demonstrated Compliance letter (attached), and forward it to TAG at tagattendance@HRA.nyc.gov by: **(Add due date)**.

School Name:			Vendor Code:	
Student's First Name	Student's Last Name	Student's Case Number	Demonstrated Compliance Period	Total Weekly Hours

Email Template: No Response Outreach

You recently received a request to complete the Education Services Demonstrated Compliance letter for the following student(s). We have not received it. For your convenience, we have attached a blank letter to this email. Please forward the completed letter to TAG at tagattendance@HRA.nyc.gov by: **(Add due date)**.

School Name:				Vendor Code:	
Student's First Name	Student's Last Name	Student's Case Number	Demonstrated Compliance Period	Total Weekly Hours	

Email Template: Initial Outreach to Participant

You have infringed to a TAG activity, and are required to demonstrate compliance with HRA's work requirements by participating in training and/or work related activities for five (5) consecutive days during the period indicated below.

Student's Responsibility:

- Attend the training and/or work related activity(s) for five (5) consecutive days during the period indicated below.
- Respond to TAG's phone, and/or email inquiries to verify attendance to the TAG approved activity indicated below. And,
- Complete the Education Services Demonstrated Compliance letter (attached), and forward it to TAG at tagattendance@HRA.nyc.gov by: **(Add due date)**.

School Name:		Vendor Code:		
Student's First Name	Student's Last Name	Student's Case Number	Demonstrated Compliance Period	Total Weekly Hours

TRANSACTION CANCELLATION DATA ENTRY FORM

CASE NAME	<input type="text"/>	ORIGINATING ID	<input type="text"/>
-----------	----------------------	----------------	----------------------

CASE NUMBER	<input type="text"/>	TRANSACTION CANCELLATION AUTHORIZATION NO.	<input type="text"/>	AUTHORIZATION NUMBER	<input type="text"/>	TX TYPE	<input type="text"/>
-------------	----------------------	--	----------------------	----------------------	----------------------	---------	----------------------

IM/MA SPECIALIST	DATE	SUPERVISOR'S SIGNATURE	DATE
------------------	------	------------------------	------

CONTROL CLERK	DATE	CRT OPERATOR	DATE
---------------	------	--------------	------

Date: _____

Case Number: _____

Case Name: _____

Job Center: _____

Action Code: _____

RE-ENGAGEMENT AND CONCILIATION NOTICE

IMPORTANT: Failure to respond to this notice may cause your Temporary Assistance (TA) and/or Supplemental Nutrition Assistance Program (SNAP) benefits to be reduced or stopped.

You may be able to avoid a sanction or reduction in your benefits by coming to this appointment.

Your appointment is:

Appointment Date:	Time:	Telephone:
Location Name:		
Address:	City:	State: Zip:

If you have a disability and you need help to attend this appointment, please call us at (212) 331-4640 and let us know. We will help you.

Why am I getting this notice?

You did not show up for or cooperate with a mandatory appointment/work assignment.

You should keep the appointment above. If you cannot keep that appointment, you must go to the location above by _____. At the location you will be assigned to a work activity or you can explain what happened to avoid a sanction and having your TA and/or SNAP benefits reduced or stopped. You can also tell us if you are unable to participate in work activities because of a physical or mental health condition.

We want to talk to you about any problems you may have with work requirements. Please tell us why on or beginning on _____ at _____ you:

What do I have to do to avoid a sanction and prevent my benefits from being reduced or stopped?

Come to your appointment to talk with us. This is called a re-engagement and conciliation appointment. During the appointment, we will try to help you resolve any problems you may have with your work activity so you may avoid a sanction and continue your benefits.

When you come in, show this paper or ask to speak to a re-engagement/conciliation worker.

If you do not keep this appointment or do not contact us by _____, a sanction may be imposed. This means your TA and SNAP benefits may be reduced or stopped. **READ THE NEXT PAGE TO FIND OUT MORE ABOUT THIS APPOINTMENT AND HOW TO KEEP YOUR BENEFITS.**

How can I avoid a sanction and having my benefits reduced or stopped?

There are three different ways you can avoid a sanction and having your benefits reduced or stopped.

1. Come to the re-engagement and conciliation appointment and show that you are not required to participate in work activities.

You may avoid a sanction and having your benefits reduced or stopped if we determine you are not required to participate in a work activity to receive benefits. Some examples of why you may not be required to participate in a work activity include:

- You are younger than 16 years of age, 60 years of age or older, or
- You have a physical or mental health condition that prevents you from participating.
- You are needed to care of an incapacitated household member.

2. Come to the re-engagement and conciliation appointment and show “good cause” or that the noncompliance was not intentional by explaining why you did not participate.

Another way you can avoid a sanction and having your benefits reduced or stopped is to explain to the Job Center worker why you did not go to or cooperate with the appointment or assignment that we believe you missed. This will help us understand what happened and determine if the reason was not intentional or not your fault. If you did go to the work assignment/appointment you can let us know. Some examples of good cause reasons for not going to or cooperating with a mandatory appointment or assigned work activity include:

- You were working
- You or your child was sick
- You had an emergency
- You have a domestic violence situation
- You did not have child care for you child
- You were unable to work as assigned due to a physical or mental health condition
- You had another required appointment at the same time

You are responsible for telling us the reason(s) why you did not report or cooperate, and for providing any information that you feel will help document what happened. You should bring any documentation to your appointment which helps explain why you did not go to or cooperate with the work assignment/appointment. Here are some examples of what you can bring:

- A letter from your doctor
- A letter from your child’s school
- a letter from the court
- other documents that explain why you did not go to or cooperate with the work requirement/appointment

3. Come to the re-engagement and conciliation appointment and then participate in an assigned work activity.

At the appointment, the HRA worker will tell you how you can do this. Even if you did not have good reason for why you did not comply, you can demonstrate compliance to avoid a sanction and having your benefits reduced or stopped. Demonstrating compliance means that you will go to your assigned work activity and fully participate as assigned by this Agency for at least five (5) business days.

Case Record Review

Before sending this notice, we reviewed your case record. We did this to make sure that at the time you did not show up for or cooperate with the mandatory appointment or work assignment you were not determined to be exempt from work requirements. We also made sure that any necessary child care and transportation supports as were known to the agency were available to you, along with any accommodations for a known disability. If you tell us that you do not/did not have the supports you need to participate, we will help you.

Discrimination Complaints

If you feel that you are discriminated against in your work assignment, you can make a complaint. Here are some of the ways you can file a complaint:

- tell the supervisor at your work site; or
- tell the worker at the re-engagement /conciliation appointment; or
- call the Human Resources Administration (HRA) complaint line at 718-291-4141.

If your complaint is related to a SNAP work assignment, you should call (518) 473-8555 or write to the New York State Office of Temporary and Disability Assistance’s Bureau of Equal Opportunity Development, 40 North Pearl Street, Albany, New York 12243-0001.

What happens if I don’t respond to this notice?

If you do not come to your re-engagement/conciliation appointment listed on page 1 or contact us by _____, we may send you a Notice of Intent. This notice may say that we will impose a sanction and reduce or stop your Temporary Assistance and/or SNAP benefits. The notice will give you information about asking for a conference. A conference gives you another chance to solve the problem. After you get the Notice of Intent, you can also ask for a Fair Hearing if you do not agree with our decision. You can ask for a Fair Hearing even if you do not ask for a conference.

Important note about Medicaid: Not showing up or cooperating with a work requirement does not change your eligibility for Medicaid benefits.

OPTION TO END TEMPORARY ASSISTANCE SANCTION

NOTICE DATE:		NAME AND ADDRESS OF AGENCY/CENTER OR DISTRICT OFFICE		
CASE NUMBER		CIN NUMBER		
CASE NAME (And C/O Name if Present) AND ADDRESS				
<div style="border: 1px solid black; width: 100%; height: 100%; position: relative;"> ┌ ┐ └ ┘ </div>				
OFFICE NO.	UNIT NO.	WORKER NO.	UNIT OR WORKER NAME	TELEPHONE NO.

Your household's temporary assistance (TA) benefit was reduced or stopped because you or someone in your temporary assistance household failed to comply with a temporary assistance work requirement or voluntarily quit a job or reduced earnings.

How can a sanctioned individual end a TA employment sanction and restore TA benefits after the required sanction time period?

- The sanctioned individual may end his/her employment sanction after the required sanction time period by demonstrating compliance with a work requirement as assigned by the social services district.
- The employment sanction may also end after the required sanction time period if the sanctioned individual documents that he/she is now exempt from temporary assistance work requirements. Some examples of why an individual may not be required to participate in a work activity (exempt) include: being 60 years of age or older; needed to care for an incapacitated household member; or, having a physical or mental health condition that prevents participation in work activities. If the individual believes that he/she is exempt from work requirements for any reason they should contact their social services district to discuss their circumstances.

The sanctioned individual must otherwise be eligible for temporary assistance benefits.

If the sanctioned individual would like to end his/her TA employment sanction at the end of the required sanction time period, you (or the sanctioned individual in your household) should contact the social services district office at the telephone number provided above to discuss what must be done to end the TA employment sanction.



Participant Verification of Demonstrated Compliance

Name: _____ Case Number: _____

Address: _____

Primary Phone #: _____ Email: _____

College/School Name: _____ Degree Pursued: _____

Course of Study/Major(s): _____ Total Weekly Hours: _____

Semester Start Date: _____ Semester End Date: _____

You are required to Demonstrate Compliance with HRA's work requirements by participating in training and/or work related activities for five (5) consecutive days during the following period: _____ . An Education Services worker will be contacting you for updates on your compliance during this period. Additionally, you must record each date of participation below and return via email to TAGattendance@hra.nyc.gov or fax to 212-835-0187 by _____ .

DAY 1						Date _____	
	Class	FWS	Internship	CUNY HRA Fellowship	Homework	IPS	Employment
Place an "X" under the activity							

I attest that I have complied with Day 1 engagement requirements.

Participant Signature: _____

DAY 2						Date _____	
	Class	FWS	Internship	CUNY HRA Fellowship	Homework	IPS	Employment
Place an "X" under the activity							

I attest that I have complied with Day 2 engagement requirements.

Participant Signature: _____

(Turn page)

DAY 3						Date _____	
	Class	FWS	Internship	CUNY HRA Fellowship	Homework	IPS	Employment
Place an "X" under the activity							

I attest that I have complied with Day 3 engagement requirements.

Participant Signature: _____

DAY 4						Date _____	
	Class	FWS	Internship	CUNY HRA Fellowship	Homework	IPS	Employment
Place an "X" under the activity							

I attest that I have complied with Day 4 engagement requirements.

Participant Signature: _____

DAY 5						Date _____	
	Class	FWS	Internship	CUNY HRA Fellowship	Homework	IPS	Employment
Place an "X" under the activity							

I attest that I have complied with Day 5 engagement requirements.

Participant Signature: _____

Participant Authorization

I certify that the information provided above is true and accurate to the best of my knowledge.

Participant Signature

Date

Do you have a medical or mental health condition or disability? Does this condition make it hard for you to understand this notice or to do what this notice is asking? Does this condition make it hard for you to get other services at HRA? **We can help you.** Call us at 212-331-4640. You can also ask for help when you visit an HRA office. You have a right to ask for this kind of help under the law.

(Turn page)

FOR HRA USE ONLY:

Demonstrated Compliance Completed: _____

Demonstrated Compliance **Not** Completed: _____

Comments: _____

Worker Name (print): _____ Title: _____

Signature: _____

Date: _____

SAMPLE



Verificación del Participante de Demostración de Cumplimiento

Nombre: _____ Número de caso: _____

Dirección: _____

Núm. de teléfono principal: _____ Correo electrónico: _____

Nombre de la universidad/escuela: _____ Título de carrera: _____

Programa de estudio/concentración: _____ Total de horas semanales: _____

Fecha de inicio del semestre: _____ Fecha de finalización del semestre: _____

Se requiere que usted demuestre cumplimiento de los requisitos de trabajo de la HRA participando cinco (5) días consecutivos en programas de capacitación o actividades relacionadas al trabajo, durante el siguiente plazo de tiempo: _____.
Un trabajador de Servicios de Educación se comunicará con usted para actualizar su cumplimiento durante este período. Además, usted debe anotar a continuación todas las fechas de participación y devolver la información por correo electrónico a TAGattendance@hra.nyc.gov o enviar fax a 212-835-0187, de aquí al _____.

DÍA 1							Fecha _____
	Clases	FWS	Pasantía	Beca de CUNY de la HRA	Tareas	IPS	Empleo
Ponga "X" bajo cada actividad							

Doy fe de que he cumplido los requisitos de participación del día 1.

Firma del participante: _____

DÍA 2							Fecha _____
	Clases	FWS	Pasantía	Beca de CUNY de la HRA	Tareas	IPS	Empleo
Ponga "X" bajo cada actividad							

Doy fe de que he cumplido los requisitos de participación del día 2.

Firma del participante: _____

DÍA 3							Fecha _____
	Clases	FWS	Pasantía	Beca de CUNY de la HRA	Tareas	IPS	Empleo
Ponga "X" bajo cada actividad							

Doy fe de que he cumplido los requisitos de participación del día 3.

Firma del participante: _____

(Voltee página)

DÍA 3						Fecha _____	
	Clases	FWS	Pasantía	Beca de CUNY de la HRA	Tareas	IPS	Empleo
Ponga "X" bajo cada actividad							

Doy fe de que he cumplido los requisitos de participación del día 3.

Firma del participante: _____

DÍA 4						Fecha _____	
	Clases	FWS	Pasantía	Beca de CUNY de la HRA	Tareas	IPS	Empleo
Ponga "X" bajo cada actividad							

Doy fe de que he cumplido los requisitos de participación del día 4.

Firma del participante: _____

DÍA 5						Fecha _____	
	Clases	FWS	Pasantía	Beca de CUNY de la HRA	Tareas	IPS	Empleo
Ponga "X" bajo cada actividad							

Doy fe de que he cumplido los requisitos de participación del día 5.

Firma del participante: _____

Autorización del Participante

Certifico que la información proporcionada arriba es veraz y exacta, según mi leal saber y entender.

Firma del participante

Fecha

¿Padece usted una discapacidad o afección médica o psiquiátrica? ¿Le dificulta la misma entender o cumplir este aviso? ¿Le dificulta la afección recibir otros servicios de la HRA? Nosotros podemos prestarle ayuda. Llámenos al 212-331-4640. Usted también puede pedir asistencia al visitar las oficinas de la HRA. Conforme a la ley, usted tiene el derecho de solicitar este tipo de ayuda.

(Voltee página)

FOR HRA USE ONLY:

Demonstrated Compliance Completed: _____

Demonstrated Compliance **Not** Completed: _____

Comments: _____

Worker Name (print): _____ Title: _____

Signature: _____

Date: _____

SAMPLE



Education Services Demonstrated Compliance Letter

Participant's Name: _____ Case Number: _____

Address: _____

School Name: _____ Vendor Code: _____

Course of Study: _____ Total Weekly Hours: _____

Semester Start Date: _____ Semester End Date: _____

You are required to Demonstrate Compliance with HRA's work requirements by participating in training and/or work related activities for five (5) consecutive days during the following period: _____.

DAY 1						Date _____	
	Class	FWS	Internship	CUNY HRA Fellowship	Homework	IPS	Employment
Place an "X" under the activity							

The undersigned attests that participant has complied with Day 1 engagement requirements.

Representative Signature: _____

Phone: _____

Representative Name (print): _____

Email: _____

DAY 2						Date _____	
	Class	FWS	Internship	CUNY HRA Fellowship	Homework	IPS	Employment
Place an "X" under the activity							

The undersigned attests that participant has complied with Day 2 engagement requirements.

Representative Signature: _____

Phone: _____

Representative Name (print): _____

Email: _____

(Turn page)

DAY 3						Date _____	
	Class	FWS	Internship	CUNY HRA Fellowship	Homework	IPS	Employment
Place an "X" under the activity							

The undersigned attests that participant has complied with Day 3 engagement requirements.

Representative

Signature: _____ Phone: _____

Representative

Name (print): _____ Email: _____

DAY 4						Date _____	
	Class	FWS	Internship	CUNY HRA Fellowship	Homework	IPS	Employment
Place an "X" under the activity							

The undersigned attests that participant has complied with Day 4 engagement requirements.

Representative

Signature: _____ Phone: _____

Representative

Name (print): _____ Email: _____

DAY 5						Date _____	
	Class	FWS	Internship	CUNY HRA Fellowship	Homework	IPS	Employment
Place an "X" under the activity							

The undersigned attests that participant has complied with Day 5 engagement requirements.

Representative

Signature: _____ Phone: _____

Representative

Name (print): _____ Email: _____

Do you have a medical or mental health condition or disability? Does this condition make it hard for you to understand this notice or to do what this notice is asking? Does this condition make it hard for you to get other services at HRA? **We can help you.** Call us at 212-331-4640. You can also ask for help when you visit an HRA office. You have a right to ask for this kind of help under the law.

(Turn page)

FOR HRA USE ONLY:

Demonstrated Compliance Completed: _____

Demonstrated Compliance **Not** Completed: _____

Comments: _____

Worker Name (print): _____ Title: _____

Signature: _____

Date: _____

SAMPLE



Carta de Demostración de Cumplimiento para Servicios de Educación

Nombre del participante: _____ Número de caso _____

Dirección: _____

Nombre de la escuela: _____ Código del proveedor: _____

Programa de estudio: _____ Total de horas semanales: _____

Fecha de inicio del semestre: _____ Fecha de finalización del semestre: _____

Se requiere que usted demuestre cumplimiento de los requisitos de trabajo de la HRA participando cinco (5) días consecutivos en programas de capacitación o actividades relacionadas al trabajo, durante el siguiente plazo de tiempo: _____.

DÍA 1							Fecha: _____	
	Clases	FWS	Pasantía	Beca de la HRA para CUNY	Tareas	IPS	Empleo	
Maque con "X" cada actividad:								

El firmante da fé de que el participante ha cumplido con los requisitos de deberes del día 1.

Firma del representante: _____ Teléfono: _____

Nombre del representante: _____ Correo electrónico: _____

DÍA 2							Fecha: _____	
	Clases	FWS	Pasantía	Beca de la HRA para CUNY	Tareas	IPS	Empleo	
Maque con "X" cada actividad:								

El firmante da fé de que el participante ha cumplido con los requisitos de deberes del día 2.

Firma del representante: _____ Teléfono: _____

Nombre del representante: _____ Correo electrónico: _____

(Voltee la página)

DÍA 3						Fecha: _____	
	Clases	FWS	Pasantía	Beca de la HRA para CUNY	Tareas	IPS	Empleo
Maque con "X" cada actividad:							

El firmante da fé de que el participante ha cumplido con los requisitos de deberes del día 3.

Firma del representante: _____ Teléfono: _____

Nombre del representante: _____ Correo electrónico: _____

DÍA 4						Fecha: _____	
	Clases	FWS	Pasantía	Beca de la HRA para CUNY	Tareas	IPS	Empleo
Maque con "X" cada actividad:							

El firmante da fé de que el participante ha cumplido con los requisitos de deberes del día 4.

Firma del representante: _____ Teléfono: _____

Nombre del representante: _____ Correo electrónico: _____

DÍA 5						Fecha: _____	
	Clases	FWS	Pasantía	Beca de la HRA para CUNY	Tareas	IPS	Empleo
Maque con "X" cada actividad:							

El firmante da fé de que el participante ha cumplido con los requisitos de deberes del día 5.

Firma del representante: _____ Teléfono: _____

Nombre del representante: _____ Correo electrónico: _____

¿Padece usted una discapacidad o afección médica o psiquiátrica? ¿Le dificulta la misma entender o cumplir este aviso? ¿Le dificulta la afección recibir otros servicios de la HRA? Nosotros podemos prestarle ayuda. Llámenos al 212-331-4640. Usted también puede pedir asistencia al visitar las oficinas de la HRA. Conforme a la ley, usted tiene el derecho de solicitar este tipo de ayuda.

(Voltee la página)

FOR HRA USE ONLY:

Demonstrated Compliance Completed: _____

Demonstrated Compliance **Not** Completed: _____

Comments:

Worker Name (print): _____ Title: _____

Signature: _____

Date: _____

SAMPLE

Education Services Demonstrated Compliance Tracking

#	Date Seen by TAG	Demographic Data					Initial Outreach							
		Client's First Name	Client's Last Name	Case Number	School Name	School Vendor Code	Rep Name	Rep Phone	Rep Email	DC form sent (DC or 1064)			DC Start Date	DC End Date
										Date	Form Type	Staff Initials		
1														
2														
3														
4														
5														
6														
7														
8														
9														
10														
11														
12														
13														
14														
15														
16														
17														
18														
19														
20														

SAMPLE

#	DC Outreach Attempts (3X's)						DC Tracking					DC Outcome	No Response Outreach Attempts (3X's)						No Response Outcome (Form Received/830P)	Comments
	Attempt #1		Attempt #2		Attempt #3		Day 1	Day 2	Day 3	Day 4	Day 5	Compliance Met (Y/N)	Attempt #1		Attempt #2		Attempt #3			
	Date	Staff Initials	Date	Staff Initials	Date	Staff Initials							Date	Staff Initials	Date	Staff Initials	Date	Staff Initials		
1																				
2																				
3																				
4																				
5																				
6																				
7																				
8																				
9																				
10																				
11																				
12																				
13																				
14																				
15																				
16																				
17																				
18																				
19																				
20																				

SAMPLE

Date: _____
Case Number: _____
Case Name: _____
ACCIS Number: _____
Caseload: _____

Providing Child Care for your Demonstrated Compliance to Remove Your Cash Assistance Sanction

You agreed to comply with your Cash Assistance (CA) work rules.

We are giving you temporary child care to participate in your work-related activity to remove your CA sanction. We call this demonstrated compliance. You must participate for at least five (5) business days to have your sanction removed under New York State law and regulation.

Child care will begin when you start your demonstrated compliance. Child care will continue while you prove to us that you are participating for five (5) business days by going to the assigned work activity.

After the five (5) business days, we will remove your CA sanction. Child care will continue for as long as you comply with your work requirements. You must also remain eligible for CA and continue to need child care.

If you do not participate for at least five (5) business days, your sanction will stay and your child care will end on the same date you stop participating.

We are only providing temporary child care as a supportive service to sanctioned individuals so they can reengage with their work requirements and demonstrate compliance to remove their sanction. We can do this under: 18 NYCRR§ 385.4(a).

Do you have a medical or mental health condition or disability? Does this condition make it hard for you to understand this notice or to do what this notice is asking? Does this condition make it hard for you to get other services at HRA? **We can help you.** Call us at 212-331-4640. You can also ask for help when you visit an HRA office. You have a right to ask for this kind of help under the law.

Fecha: _____

Número del caso: _____

Nombre del caso: _____

Número de ACCIS: _____

Unidad de casos: _____

Proveimiento de Cuidado Infantil para Demostración de Cumplimiento para Levantar su Sanción de Asistencia en Efectivo

Usted acordó cumplir las reglas de trabajo de la Asistencia en Efectivo (CA, por sus siglas en inglés).

Nosotros le estamos otorgando cuidado infantil para que usted pueda participar en actividades relacionadas con el trabajo, a fin de levantar la sanción de CA. A esto le llamamos demostración de cumplimiento. Usted debe participar durante por lo menos cinco (5) días laborables para que se levante la sanción, conforme a la ley y al reglamento del Estado de Nueva York.

El cuidado infantil comenzará cuando usted inicie la demostración de cumplimiento. El cuidado infantil continuará mientras usted nos pruebe que está participando durante cinco (5) días laborables, presentándose a su actividad de trabajo asignada.

Después de cinco (5) días laborables, nosotros levantaremos la sanción de CA. El cuidado infantil continuará mientras usted cumpla los requisitos de trabajo. Además, usted debe seguir siendo elegible para recibir CA y seguir necesitando el cuidado infantil.

Si usted no participa durante por lo menos cinco (5) días laborables, la sanción seguirá en vigor y el cuidado infantil terminará en la misma fecha en que usted haya dejado de participar.

Nosotros solo estamos proveyendo cuidado infantil temporario como servicio de apoyo a las personas sancionadas, para que éstas vuelvan a cumplir con sus requisitos de trabajo y demuestren cumplimiento para que se levante la sanción. Esto lo hacemos conforme a 18 NYCRR § 385.4(a).

¿Padece usted una discapacidad o afección médica o psiquiátrica? ¿Le dificulta la misma entender o cumplir este aviso? ¿Le dificulta la afección recibir otros servicios de la HRA? Nosotros podemos prestarle ayuda. Llámenos al 212-331-4640. Usted también puede pedir asistencia al visitar las oficinas de la HRA. Conforme a la ley, usted tiene el derecho de solicitar este tipo de ayuda.



Date: _____

Case Number: _____

Case Name: _____

Telephone: _____

Job Center: _____

Action Code: _____

Good Cause Notice

When you do not meet an HRA requirement, it is called an infraction. An infraction can sometimes reduce or end your benefits. This notice is about the infraction that happened on _____.

We are giving you Good Cause for what happened that day. Good Cause means that we do **NOT** think it was your fault. We will **NOT** reduce or end your benefits because of what happened on that day.

Please keep this Good Cause Notice for your records.

We will let you know if you need to do anything else.

SAMPLE



Fecha: _____
Número del Caso: _____
Nombre del Caso: _____
Teléfono: _____
Centro de Trabajo: _____
Código de Acción: _____

Aviso de Motivo Justificado

Al usted no satisfacer un requisito de la HRA, se da una infracción, lo que a veces puede reducir o terminar sus beneficios. Este aviso concierne la infracción ocurrida el _____.

Nosotros le hemos otorgado motivo justificado por lo ocurrido ese día, lo que significa que **NO** consideramos que usted sea responsable. Por tanto, **NO** reduciremos ni terminaremos sus beneficios por lo ocurrido ese día.

Favor de guardar el presente Aviso de Motivo Justificado para sus archivos.

Nosotros le informaremos en caso de que usted tenga que tomar paso adicional.

Example Question Set to Elicit Reasonable Accommodations

(This is not an exhaustive list)

EXAMPLE QUESTION FLOW	POSSIBLE RESPONSE AND NEXT STEP
<p>Did you understand the appointment letter/referral letter/program requirements that you got?</p>	<p>NO — Identify the reason and determine if it is related to a medical/mental health condition (e.g. the participant has a hard time reading or completing forms). If issue is determined to be a known RA that was not honored, grant good cause and re-engage/refer participant based on EP ensuring that the RA is honored. If presented as a new RA need, grant good cause, follow procedure in assisting participant with completion of HRA-102c to request the new RA, and re-engage/refer participant based on EP ensuring that RA is honored. If the reason for not understanding the letter or requirements is not related to a medical/mental health condition, continue to try and identify potential RAs through discussion with participant. Go to Next Question.</p> <p>YES — Continue to try and identify potential RAs through discussion with participant. Go to Next Question.</p>
<p>Was there something that kept you from coming to your appointment? Was there something that made it hard for you to meet the requirements?</p>	<p>NO — Continue to try and identify potential RAs through discussion with participant. Go to Next Question.</p> <p>YES — Identify the reason and determine if it is related to a medical/mental health condition (e.g. participant suffers from anxiety when they wait for too long in line). If issue is determined to be a known RA that was not honored, grant good cause and re-engage/refer participant based on EP, ensuring that the RA is honored. If presented as a new RA need, grant good cause, follow procedure in assisting participant with completion of HRA-102c to request the new RA, and re-engage/refer participant based on EP, ensuring that RA is honored. If the reason for not appearing is not related to a medical/mental health condition, continue to try and identify potential RAs through discussion with participant. Go to Next Question.</p>
<p>Was the appointment on a day or time that does not work for you?</p>	<p>NO — Does not appear that RA played a role in participant's infraction. Continue standard process for determining whether or not participant had good cause reason for missing appointment.</p> <p>YES — Identify the reason and determine if it is related to a medical/mental health condition (e.g. participant can only travel when accompanied by someone). If issue is determined to be that a known RA is known that was not honored, grant good cause and re-engage/refer participant based on EP, ensuring that the RA is honored. If presented as a new RA, grant good cause, follow procedure in assisting participant with completion of HRA-102c to request the new RA, and re-engage/refer participant based on EP, ensuring that the RA is honored. If the reason is not related to a medical/health condition, then it does not appear that RA played a role in participant's infraction. Continue standard process for determining whether or not participant had good cause reason for missing appointment.</p>



Date: _____

Case Number: _____

Case Name: _____

Case Type: _____

Caseload: _____

Appointment to Demonstrate Compliance with Your Work, Education, and Training Requirements to Stop or End Your Sanction

You told us that you want to reengage and participate in your employment services program. This letter explains how to avoid or stop a Cash Assistance sanction. You can stop or end your Cash Assistance sanction by reengaging and fully complying with your work requirements. Reengaging means going back to your work, education, or training assignment(s). By reengaging and fully complying with your Supplemental Nutrition Assistance Program (SNAP) work requirements, you could also stop a SNAP sanction.

We can stop or end your Cash Assistance sanction, but you must first participate in your assigned employment, education, or training services program and comply with its requirements for five (5) business days. This is called Demonstrated Compliance. You can also use Demonstrated Compliance to stop a SNAP sanction. On Page 2, there is more information on how stop or end your sanction.

We scheduled a mandatory appointment for you to go to _____ to start your reengagement process. You must go to this appointment and comply for 5 business days. We will pay for your child care services and MetroCard for you to participate if needed. If you need to reschedule, you must call the telephone number below before your appointment date. **Save this letter!**



Appointment Date: _____



Time: _____



Telephone: _____



Location Name: _____

Location Address: _____

City: _____ State: _____ Zip Code: _____

Travel Directions: Please call the MTA at **718-330-1234** or visit **<http://www.mta.info>**.

(Turn Page)

Do you have a medical or mental health condition or disability? Does this condition make it hard for you to understand this notice or to do what this notice is asking? Does this condition make it hard for you to get other services at HRA? **We can help you.** Call us at 212-331-4640. You can also ask for help when you visit an HRA office. You have a right to ask for this kind of help under the law.

FREQUENTLY ASKED QUESTIONS ON DEMONSTRATING COMPLIANCE AND REENGAGING WITH YOUR WORK, EDUCATION, AND TRAINING REQUIREMENTS

What happens if you do not go to this appointment?

If you do not go to this appointment, or comply with other program requirements, your Cash Assistance sanction will begin or continue. Also, your Supplemental Nutrition Assistance Program (SNAP) benefits may also stop or go down if you do not go to this appointment. If you are already sanctioned, and you do not comply with your assigned employment, education, or training services program for 5 business days, the sanction will stay on your case.

No changes will happen to your Medicaid.

What is reengaging and Demonstrating Compliance?

Reengagement with your assigned work, education, or training requirements and demonstrating compliance is a way for you to show us that you are willing to comply with the Cash Assistance and SNAP work rules. By going back to your assigned program, you can prevent a Cash Assistance or SNAP sanction, or you can end your Cash Assistance sanction if you already have one.

How long do I have to demonstrate compliance?

You must fully participate with the assigned activities for five (5) business days.

What if I have to be absent after I have already started my demonstrated compliance because of sickness or another good reason?

If you have to be absent after you have started the demonstrated compliance process, you must call _____ to ask that your absence be excused. If your absence is excused, you will receive credit for that day. Your absence may not be excused if you do not call. If you are still absent after the demonstrated compliance period ends, you may not get credit for completing demonstrated compliance.

(Turn Page)

What if I have a problem with my demonstrated compliance assignment? What do I do?

Some Cash Assistance and SNAP recipients are exempt from work, education and training requirements because they face barriers to employment. Some examples of barriers are:

- a medical or mental health condition that affects the ability to work;
- a safety concern due to domestic violence;
- a disabled family member at home who needs them; or,
- a drug or alcohol addiction that requires treatment.

If you believe you cannot participate in your demonstrated compliance assignment, you should tell a worker at your appointment.

What happens after I finish my 5 days of demonstrated compliance?

After you finish the 5 days of demonstrated compliance, you must continue complying with your assigned work, education, or training services program. If you stop complying with your assigned activities after the 5 business days, this process will start all over.

If I am already sanctioned and I fully comply with my work requirements for 5 business days, when will HRA remove the sanction?

We will start working on removing your Cash Assistance employment sanction as soon as you finish complying for 5 business days. It may take us a few days to remove the sanction, but you will get your Cash Assistance benefits back to when you told us you were willing to comply.

What about SNAP? If I have a SNAP sanction, can I demonstrate compliance to get my regular SNAP benefits back? The rules for SNAP are different. You received a notice that told you how long your SNAP sanction would last. We cannot remove that SNAP sanction until after that date, unless you are exempt from SNAP work requirements and you tell us. In order to receive your full SNAP benefits, you must be meeting your work, education, or training requirements after your SNAP sanction period ends.



Fecha: _____

Número de caso: _____

Nombre del caso: _____

Tipo de caso: _____

Unidad de casos: _____

Cita para Demostrar Cumplimiento del Requisito de Trabajo, Educación y Capacitación para Parar o Levantar su Sanción

Usted nos informó que desea volver a colaborar y a participar en el programa de servicios de empleo. Esta carta le explica cómo evitar o parar una sanción de la Asistencia en Efectivo. Usted puede parar o levantar con la sanción de Asistencia en Efectivo volviendo a colaborar y cumpliendo de lleno con los requisitos de trabajo. Volver a colaborar significa volver a la(s) asignación(es) de trabajo, educación y capacitación. Al volver a colaborar y cumplir de lleno con los requisitos de trabajo del Programa de Asistencia de Nutrición Suplementaria (SNAP, por sus siglas en inglés), usted también podría parar la sanción de SNAP.

Nosotros podemos parar o levantar la sanción de Asistencia en Efectivo pero primero usted tiene que participar en el programa de servicios de empleo, educación y capacitación y cumplir con sus requisitos durante cinco 5 días laborales. A esto se le llama demostración de cumplimiento. Usted también puede utilizar la demostración de cumplimiento para parar en la sanción de SNAP. Encontrará más información en la página 2 sobre cómo usted puede parar o terminar la sanción.

Nosotros le hemos programado una cita obligatoria para que vaya al _____ para volver a iniciar el proceso de colaboración. Usted tiene que ir a esta cita y cumplir durante cinco 5 días laborales. Nosotros le pagaremos los servicios de cuidado infantil y la MetroCard para que usted participe, si es necesario. Si tiene que reprogramar la cita, usted tiene que llamar al número de teléfono que sigue a continuación, antes de la fecha de la cita. **¡Guarde esta carta!**



Fecha de la cita: _____



Hora: _____



Teléfono: _____



Nombre del local: _____

Dirección del local: _____

Ciudad: _____ Estado: _____ Código postal: _____

Indicaciones de viaje: Favor de llamar a la MTA al **718-330-1234** o visite el sitio web <http://www.mta.info>.

(Voltee la página)

¿Padece usted una discapacidad o afección médica o psiquiátrica? ¿Le dificulta la misma entender o cumplir este aviso? ¿Le dificulta la afección recibir otros servicios de la HRA? Nosotros podemos prestarle ayuda. Llámenos al 212-331-4640. Usted también puede pedir asistencia al visitar las oficinas de la HRA. Conforme a la ley, usted tiene el derecho de solicitar este tipo de ayuda.

PREGUNTAS FRECUENTES SOBRE LA DEMOSTRACIÓN DE CUMPLIMIENTO Y CÓMO VOLVER A CUMPLIR LOS REQUISITOS DE TRABAJO, EDUCACIÓN Y CAPACITACIÓN

¿Qué pasa si no me presento a la cita?

Si usted no va a la cita o no cumple con los requisitos del programa, se le dará inicio a la sanción de la Asistencia en Efectivo o continuará en pie. También se podrían parar o reducir los beneficios del Programa de Asistencia de Suplemento Nutricional (SNAP), si usted no se presenta a esta cita. Si usted ya ha sido sancionado(a) y no cumple durante 5 días laborales con el programa de servicios de trabajo, educación y capacitación, la sanción seguirá vigente en su caso. No habrá cambios en el Medicaid.

¿Qué es la demostración de cumplimiento y volver a colaborar?

La demostración de cumplimiento y el volver a colaborar con los requisitos de la asignación de trabajo, educación y capacitación, es la manera en que usted nos puede demostrar que está dispuesto(a) a cumplir con las reglas de trabajo de la Asistencia en Efectivo y de SNAP. Al usted regresar al programa asignado, usted puede prevenir la sanción de la Asistencia en Efectivo o de SNAP, o si ya tiene una sanción de la Asistencia en Efectivo, la puede terminar.

¿Cuánto tiempo tengo para la demostración de cumplimiento?

Usted tiene que participar de lleno en las actividades asignadas durante cinco (5) días laborales.

¿Qué tal si tengo que faltar una vez haya iniciado la demostración de cumplimiento debido a enfermedad u otra buena razón?

Si tiene que faltar después de haber iniciado el proceso de demostración de cumplimiento, usted tiene que llamar al _____ para solicitar que su ausencia sea excusada. Si su ausencia es excusada, usted recibirá crédito por ese día. Su ausencia no puede ser excusada si usted no llama. Si usted sigue ausente después que termine el plazo de demostración de cumplimiento, puede que usted no reciba crédito por terminar la demostración de cumplimiento.

(Voltee la página)

¿Qué tal si tengo algún problema con la asignación de demostración de cumplimiento? ¿Qué hago?

Algunos beneficiarios de la Asistencia en Efectivo y de SNAP, están exentos del requisito de trabajo, educación y capacitación porque ellos se enfrentan a ciertas barreras de empleo.

Algunas de estas barreras son:

- tener alguna condición médica o de salud mental que afecte su capacidad de trabajar;
- tener alguna preocupación sobre su seguridad debido a violencia doméstica;
- tener a algún familiar discapacitado que le necesite en casa; o
- tener alguna adicción al alcohol o a las drogas que requiera tratamiento.

Si usted piensa que no puede participar en la asignación de demostración de cumplimiento, debe comunicárselo al trabajador durante su cita.

¿Qué pasa después que termine los 5 días de demostración de cumplimiento?

Después que termine los 5 días de demostración de cumplimiento, usted tiene que seguir cumpliendo con su asignación de trabajo, educación o capacitación. Si usted deja de cumplir con las actividades asignadas después de los 5 días laborales, este proceso se iniciará de nuevo.

¿Si ya estoy sancionado(a) y cumplo de lleno con los requisitos de trabajo durante 5 días laborables, cuándo levantará la HRA la sanción?

Nosotros comenzaremos a levantar la sanción de empleo de la Asistencia en Efectivo tan pronto usted termine de cumplir los 5 días laborales. Puede que nos tome algunos días levantar la sanción pero usted volverá a recibir sus beneficios de la Asistencia en Efectivo a partir de la fecha en que nos dijo que estaba dispuesto(a) a cumplir.

¿Qué me dice sobre SNAP? ¿Si tengo una sanción de SNAP, puedo yo demostrar cumplimiento para así volver a recibir mis beneficios normales de SNAP?

Las reglas de SNAP son diferentes. Usted recibió un aviso comunicándole cuánto duraría la sanción de SNAP. Nosotros no podemos levantar la sanción de SNAP hasta esa fecha, a menos que usted esté exento(a) de cumplir los requisitos de trabajo de SNAP y nos lo comunique. Para recibir todos los beneficios de SNAP, usted tiene que estar cumpliendo con el requisito de trabajo, educación o capacitación, después de que termine el plazo de sanción de SNAP.