



**George E. Pataki**  
*Governor*

**NEW YORK STATE**  
**OFFICE OF TEMPORARY AND DISABILITY ASSISTANCE**  
40 NORTH PEARL STREET  
ALBANY, NY 12243-0001

**Brian J. Wing**  
*Commissioner*

## **Local Commissioners Memorandum**

### **Section 1**

<b>Transmittal:</b>	02 LCM 6
<b>To:</b>	Local District Commissioners
<b>Issuing Division/Office:</b>	Temporary Assistance
<b>Date:</b>	July 25, 2002
<b>Subject:</b>	Food Stamp Management Evaluation Procedures
<b>Contact Person(s):</b>	Paul Rickard at (518) 473-6354
<b>Attachments:</b>	Food Stamp Application Processing - Case File Review Document Food Stamp Application Processing - Interview/Observation Instrument
<b>Attachment Available On – Line:</b>	X

### **Section 2**

#### **I. Purpose**

The purpose of this release is to modify the way that Food Stamp Management Evaluation (ME) Reviews are conducted in local districts outside of New York City.

#### **II. Background**

Program Access ME's are a portion of the annual report submitted by the Office of Temporary and Disability Assistance (OTDA) Division of Temporary Assistance (DTA) to the United States Department of Agriculture (USDA). In previous years, the OTDA required districts to retrieve a state-selected sample of 30 cases, pre-review these cases, provide time and space for State case reviewers and staff interviews, pre-complete an interview instrument, respond to individual case findings, and if indicated, submit a Corrective Action Plan (CAP) to address deficiencies.

#### **III. Program Implications**

OTDA is introducing the ME self-assessment process to simplify current administrative practices while allowing local districts to assess, evaluate and, when necessary, adjust their own management practices. Under USDA-approved procedures, districts will now be allowed to self-assess key areas of program access, using 25 cases currently under process and their own knowledge of internal processes. Completed forms will be sent to OTDA, and if indicated, a CAP will be submitted for areas identified as needing improvement.

All districts except for New York City will commence annual ME self-assessment in July of 2002. Completed findings on the attached forms will be returned to OTDA by August 30, 2002. Districts

will then provide their Corrective Action Plans to OTDA where they will be used for statewide program analysis.

### **REVIEW GUIDELINES**

Districts will select 25 cases, including each of the following categories: temporary assistance (TA) case openings, denials, withdrawals and closings; and non-temporary assistance/food stamp (Non-TA/FS) case openings, denials, withdrawals and closings. Areas under review remain unchanged and will include application processing standards, provision of expedited services and separate determinations of food stamp eligibility. One recording form will be completed for each case and the reviewer may be either designated centrally or may be any supervisor who did not sign the original case action. In addition, each district will complete a structured Interview Guide to assess other pertinent areas of operation. The guide remains largely unchanged from prior years and should be sent to OTDA with the case review forms.

Copies of the review sheets, the interview/observation instrument, and the proposed CAP will be sent to:

New York State OTDA/DTA  
Eastern Regional Team  
40 North Pearl Street  
Albany, NY 12243

### **CORRECTIVE ACTIONS**

Although the sample reviewed by districts does not constitute a valid statistical sample, the review of FS processing in the several areas listed above will provide local managers with indications of those actions that were taken in error and how best to correct them. Districts experiencing significant errors in any of the review areas will submit a corrective action plan with the case review forms.

After reviewing local findings, the district will determine if administrative deficiencies are evident and submit a plan addressing how they are to be corrected. Plans may include remedies such as: topical training, communications improvements, recordkeeping changes, staff realignments or any other locally developed processes or resources required to improve the problem area. Districts should include dates by which activities are to be conducted.

### **STATE OVERSIGHT**

The DTA will review the materials submitted and prepare a statewide ME report on program access to be submitted to USDA. In the first year of this process, DTA will visit 26 districts to review CAP progress and local evaluations. It is anticipated that the second year this modified review will require fewer ME's from districts and consequently fewer DTA re-reviews.

#### **Issued By**

**Name: Patricia A. Stevens**

**Title: Deputy Commissioner**

**Division/Office: Temporary Assistance**

**FFY 2002 Food Stamp Management Evaluation  
Food Stamp Application Processing  
Interview/Observation Instrument**

District: \_\_\_\_\_

Date of Review: \_\_\_\_\_

Reviewers: \_\_\_\_\_

**Name**

**Title**

**Phone #**

<b>Name</b>	<b>Title</b>	<b>Phone #</b>

## PROGRAM ACCESS:

### INTERVIEWS WITH STAFF

Complete the remaining sections based on interviews with staff.

- 1) Days and hours of operation? Are applications taken all day, Monday through Friday? If not, explain limitations (e.g., applications only taken up to 1:00 p.m., etc.)

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- 2) Are there any restrictions on the number of applications taken in a day?

No

Yes, Please explain \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

- 3) Do people usually have to wait in line when they come to this office to apply?

No

Yes. Can you estimate the average waiting time before clients are provided with an application kit? How long before they are screened?

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- 4) Are applications available on request?  Yes  No

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

- 5) Are there any limitations/conditions to obtaining an application? (e.g., – client must live in a certain zip code)?

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- 6) Are applicants encouraged to file their application on initial day of contact?

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7) Which application(s) is available?

- A/JP – “Application/Job Profile“ W-680 B (NYC Only)
- DSS-2921 – Common Application
- DSS-2921S-Common Application (Spanish)
- DSS--3035 – Application For SSI And Group Living Residents

8) What is the average waiting time to be seen by a “worker” Day #1? (for screening or pre-screening)?

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9) Are application logs or sign-in sheets maintained? Describe what information is collected and where kept.

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10) What is the average number of days between pre-screening (Day #1) and the eligibility interview appointment?

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11) Are special accommodations made for individuals with special needs (e.g. employed, elderly or disabled)

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12) What are your procedures when individuals inform you that they cannot represent themselves?

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Program Access/Limited English Proficiency:

13) What are your procedures for serving individuals with limited or no English speaking proficiency who come in to apply for benefits (assuming that they have not brought their own interpreter)?

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14) Do you have posters, signs or other client handouts available in other languages?

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15) What are your procedures when an individual informs you that he/she is a non-citizen and wishes to apply for Food Stamps? Is he or she scheduled for an eligibility interview?

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**APPLICATION PROCESSING:**

16) Is the filing date for Food Stamps the date an application is received?

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17) What are your procedures if an incomplete application is submitted?(Interviewer: reinforce correct procedure of accepting an application with only a name, address if they have one and signature)

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18) What internal controls are in place to ensure that all Food Stamp applicants are approved or denied within 30 days of application filing?

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19) Describe procedures for registering applications in WMS and for tracking disposition, including withdrawals. Attach sample logs, if any.

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Expedited Processing:

20) Are all PA FS applicants screened using the Expedited Screening Sheet (DSS-3938 or W140K) on the 1<sup>st</sup> day of contact?

Yes       No

21) Are all NPA FS applicants screened using the Expedited Screening Sheet (Dss-3938 or W140K) on the 1<sup>st</sup> day of contact?

Yes       No

22) When is the food stamp eligibility interview conducted for those individuals found eligible to receive expedited processing?

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Separate Determinations:

23) What is the procedure when a client withdraws an application for cash assistance but wants to continue the application for Food Stamps?

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24) How is the Food Stamp filing date protected?

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25) How do line staff know the procedure?

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26) What is the procedure for a separate determination of Food Stamp eligibility when a client's application for cash assistance is denied?

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27) What are the procedures for ensuring that separate determinations are made for Food Stamps when the TA case is closed?

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28) What are the procedures for ensuring that households closing FA or SNA-FP are reviewed for transitional Food Stamp Benefits?

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29) What WMS systems procedures does your district use to process households for transitional food stamp benefits? Are these cases processed through the WMS separate determination process or is an NPA FS case opened to continue the households FS benefits unreduced ?

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30) What internal or systems controls are in place to ensure that TBA households are sent a request for contact 30 days prior to the end of the transition period?

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31) How has your district trained workers on the eligibility criteria for the TBA? What problems were encountered in implementing the new provision? What problems still exist?

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32) What management/supervisory controls are in place to insure that households eligible for the TBA are processed according to policy directive 01 ADM 16?

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33) How do line staff know the procedure? Check all that apply.

- Written Instruction       Verbal Instruction       Training Session  
 Other - describe \_\_\_\_\_



**Undercare Maintenance:**

**Earned Income Budgeting Procedures:**

34) Please describe the systems the district uses to receive reports of obtained employment from clients, and from other units both within the district (employment units) and external (Dept. of Labor, or JTPA.)? How is this information conveyed to the eligibility worker to budget on a timely basis? Are there management controls (such as logs of received information done at reception, or change report units) to insure that workers are able to budget this information on a timely basis, and what are they?

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35) How has your district trained workers on the new reporting rules as outlined in Six-Month Reporting Rules (01 ADM 09)? What problems were encountered in implementing these new reporting requirements? What problem areas still exist regarding the district's ability to accurately process earned income changes? Did the district do any second or third level sample reviews to evaluate how well workers are processing cases under this new reporting system?

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36) 01-ADM-09 specifies that households must be notified of the 130% gross income limit by giving the household Attachment A when the household first reports earned income, recertifies or applies with earned income. What process assures that workers are handing out Attachment A to households when they first report earned income, recertify, and newly apply as an earned income household? What worker discussion of reporting requirements take place to assure that households know what monthly gross income level they must report if they exceed it? Does this discussion explain what we mean about **gross** income and explain how soon they have to report an excess?

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37) What management/supervisory controls do you have to insure periodic reports have been processed when they are required (for certification periods of 7 months or greater and have been automatically issued by the WMS system)?

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38) What management/supervisory controls do you have to insure that the information, particularly verified income is processed on time?

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39) [Mandated only for districts which have received OTDA permission to certify earned income cases (under six-month reporting rules) for periods up to twelve months.] What management controls have been put in place to assure that periodic reports are being processed including new budgets generated when appropriate for the last six-months in the certification period ? What percentage of cases have been processed correctly as determined by management review?

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**Complaint Procedures:**

40) Describe procedures for responding to pre-application inquiries about Food Stamp eligibility:

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41) How are complaints recorded / tracked?

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42) Are civil rights and non civil rights complaints recorded/tracked separately? Are separate logs maintained?

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43) How many civil rights complaints were processed last year? How many were resolved? How timely are they investigated? (Ask to see files)

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44) How are individuals/ organizations informed of the local district complaint procedures?

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45) Have written complaint procedures been developed for both civil and non-civil rights complaints?(Ask for a copy)

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46) How is management review of complaints (to determine if there are problems/patterns) accomplished?

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**OBSERVATIONS:**

47) Is there a line of applicants waiting?

Yes

No

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

48) General Condition of Office

Poor

Average

Good

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

49) Waiting Area – describe conditions (e.g., crowded, noisy, sufficient seats, clean, etc.)

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50) How do applicants know where to go?

(Check all that apply)

Security Guard at door       Signs       Receptionist

Other – explain \_\_\_\_\_

\_\_\_\_\_

51) Are the days and hours of operation posted?

No

Yes, Where? \_\_\_\_\_

\_\_\_\_\_

52) Attitude/behavior of staff toward clients – describe based on interactions you observe

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

53) The following forms are required to be provided in the application kit (NYC only).

Are the following client booklets contained in the application kit?

Yes    No

    Application (W-680B or DSS-2921)

    How To Complete The Application (W-680AA or DSS-2921-I)

    What You Should Know About Your Rights and  
Responsibilities Book 1 (DSS-4148A)

    What You Should Know About Social Services Programs Book 2  
(DSS –4148B)

    What You Should Know If You Have An Emergency Book 3 (DSS-4148C)

    New Information About Public Assistance and Food Stamps (LDSS-4148D)

    New Information About Medical Assistance (Medicaid) (LDSS –4148E)

    Yes! You Can Still Apply for Medicaid- MA Brochure

- Food Stamps- FS Brochure
- The Job Center Welcomes You Brochure

Are the Spanish packets complete?

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54) The following forms are required to be provided in the application packet (Upstate Only).  
Are the following client booklets contained in the application packet:

Yes    No

- Application (DSS-2921)
- How To Complete the Application (DSS-2921-I)
- What You Should Know About Your Rights And Responsibilities Book 1 (DSS-4148A)
- What You Should Know About Social Services Programs Book 2 (DSS-4148B)
- What You Should Know If You Have An Emergency Book 3 (DSS –4148C)
- New Information About Public Assistance And Food Stamps (LDSS-4148D)
- New Information About Medical Assistance (Medicaid) (LDSS-4148E)

55) The following posters are required to be posted in the client waiting areas:

- Food Stamp Complaint Procedures (LDSS-8036, revised 2/00)
- And Justice for All (AD-475B, revised 12/99)

Are these two mandated posters posted in the client waiting areas?

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56) Local District Concerns/Issues – Please explain.

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FFY 2002 Food Stamp Management Evaluation (Outside NYC)

Review Finding

Correct

Error  Reason: \_\_\_\_\_

FOOD STAMP APPLICATION PROCESSING  
CASE FILE REVIEW DOCUMENT

District: \_\_\_\_\_ Date of Review: \_\_\_\_\_

Case Name: \_\_\_\_\_ Reviewer: \_\_\_\_\_

Case Number: \_\_\_\_\_ Case Type \_\_\_\_\_

Case Status:

- PA acceptance (Section I & IIB)  NPA-FS acceptance (Section I)
- PA denial (Section I & IIA)  NPA-FS denial (Section IA, IC & IIB)
- PA withdrawal (Section I & IIA)  FS withdrawal (Section IA & B)
- PA closing (Section IIC)

(For PA denials, withdrawals and closings, look up corresponding NPA cases.)

Comments/Findings:

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**I. Application Processing** Note to Reviewer: Gray Areas = System Look-Up or Info. Available on Case list

- | A. Application Date Agreement   | Yes                      | No                       | N/A                      |
|---|--------------------------|--------------------------|--------------------------|
| 1. Completed DSS-2921 in casefile?  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 2. Date application was filed _____   |                          |                          |                          |
| <input type="checkbox"/> Date stamp on application  |                          |                          |                          |
| <input type="checkbox"/> Date written on top of application                               |                          |                          |                          |
| <input type="checkbox"/> Application log date   |                          |                          |                          |
| <input type="checkbox"/> Other: _____   |                          |                          |                          |
| 3. <span style="background-color: #cccccc;">Application date recorded on WMS</span> _____ |                          |                          |                          |
| 4. Are the dates in 2 and 3 the same?   | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| • if no, explain why _____  |                          |                          |                          |
| _____   |                          |                          |                          |
| _____   |                          |                          |                          |

**B. Withdrawal From Program**

- |   |                          |                          |                          |
|---|--------------------------|--------------------------|--------------------------|
| 1. Did client withdraw from PA?                                 | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 2. Did client withdraw from FS? <b>STOP HERE IF FS WITHDRAW</b> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

**C. Expedited Processing Timeframes**

- |   |                          |                          |                          |
|---|--------------------------|--------------------------|--------------------------|
| 1. Is completed Expedited Service Worksheet (DSS-3938) in casefile?                           | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| <input type="checkbox"/> Complete    Date LDSS 3938 was completed _____/_____/_____           |                          |                          |                          |
| <input type="checkbox"/> Date filled out missing  |                          |                          |                          |
| <input type="checkbox"/> Incomplete; Two or more items missing                                |                          |                          |                          |
| <input type="checkbox"/> 3938 missing; Reviewer must complete one and attach it to this sheet |                          |                          |                          |
| 2. Does the date in 1 = the Application Date in A above?                                      | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |



3. Determination Yes    No    N/A

Eligible for expedited processing (Complete No. 4 and go to Section D)

Not eligible for expedited processing (Complete No. 4 and go to Section E. If ongoing FS were denied, SKIP to Section IIB)

4. Was determination correct? If not, why not -- (or other comments).        

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**D. Expedited Processing Benefit Issuance**

(Pay Type 91 = Expedited; Pay Type 93 = Single Issue but sometimes used inappropriately for expedited issuance.)

1. Date of initial food stamp issuance (on BICS) ( / / ) PayType-

2. Application Date:

3. Is the date of initial issuance within 5 calendar days of application date?        

4. Date of Notice LDSS-3152 (manual notice) \_\_\_\_\_

5. Is the date of the notice within 5 days of application date?        

6. Notice certification period established ( / / ) - ( / / )

7. WMS Certification period ( / / ) - ( / / )

8. Are the dates in 6 & 7 the same?        

**E. Non-Expedited Processing Benefit Issuance**

(Pay Type 91 = Expedited; Pay Type 93 = Single Issue but sometimes used inappropriately for expedited issuance.)

1. Date of initial food stamp issuance (on BICS) ( / / ) PayType-

2. Application Date:

3. Is the date of initial issuance within 30 calendar days of application date?        

4. Date of Notice LDSS-3152 (manual notice) \_\_\_\_\_

5. Is the date of the notice within 30 days of application date?        

6. Notice certification period established ( / / ) - ( / / )

7. WMS Certification period ( / / ) - ( / / )

8. Are the dates in 6 & 7 the same?        

**STOP HERE IF FS ACCEPTANCE**

**II. FS Separate Determinations/FS Denials**

**A. PA Denials/Withdrawals**

1. Status of food stamps
  - Denied (PA/FS code might equal 03)
  - Accepted (PA/FS code might equal 70 or 71)
2. Was determination correct?  
Date of NPA case acceptance \_\_\_\_\_
3. Was notice issued   
  - case denial notice, month/date \_\_\_\_/\_\_\_\_
  - LDSS-3152 "Action Taken" notice date \_\_\_\_\_

**B. FS Denials (including denied FS when PA is approved)**

1. Was determination correct?
2. Was a notice issued?    
LDSS 3152 "Action Taken Notice" Date \_\_\_\_\_
3. Was FS Application denied prior to the 30<sup>th</sup> day for interview no-show?    
If yes, explain \_\_\_\_\_
4. Was FS application denied for FTC with a non-food stamp requirement such as FTC with Medical or Drug/Alcohol Evaluation?    
If yes, explain \_\_\_\_\_

**C. TA Closing (This might include denials of TA Case Types opened only for Exp. FS)**

- TA case type: \_\_\_\_\_
- TA closing reason code \_\_\_\_\_
- Was the case determined eligible for Transitional Food Stamp Benefits?
- Was the determination correct?
- Was the transitional food stamp separate determination processed using the WMS separate determination process or was an NPA FS case opened? \_\_\_\_\_
- Was the household notified of TBA through CNS/manual notice?
1. If not eligible for transitional benefits, was there information in the case file to make a determination on food stamps ?     
Was a request for contact sent to the household?
  2. Were food stamps closed? PA/FS code might equal 08, 09, 80, 81, 90 or 91 \_\_\_\_\_

- 3. Was determination correct?  
If no, why \_\_\_\_\_
- 4. Were food stamps continued until end of original certification period?  
If no, why \_\_\_\_\_
- 5. What notice was issued on the food stamps action? (Possibly pertinent CNS notice type/detail?)
  - CNS
  - Action taken
  - Notice of intent

6. Was this correct?