



**George E. Pataki**  
Governor

**New York State**  
**Office of Temporary and Disability Assistance**  
40 North Pearl Street - Albany, NY 12243-0001

**Robert Doar**  
Commissioner

### Administrative Directive

#### Section 1

<b>Transmittal:</b>	06-ADM-16
<b>To:</b>	Local District Commissioners
<b>Issuing Division/Office:</b>	Division of Child Support Enforcement (DCSE) and Division of Employment and Transitional Supports (DETS)
<b>Date:</b>	December 13, 2006
<b>Subject:</b>	Desk Reviews of the Distribution of Child Support Payments
<b>Suggested Distribution:</b>	Child Support Enforcement Coordinators Support Collection Unit Supervisors Temporary Assistance Workers Staff Development Coordinators Accounting Staff Resource and Recovery Staff
<b>Contact Person(s):</b>	Division of Child Support Enforcement at 1-800-343- 8859 or NYC 1-212-961-8269 Temporary Assistance Bureau at 1-800-343-8859, extension 4-9344 Office of Legal Affairs – Susanne Dolin at 1-518-474-9833
<b>Attachments:</b>	<ol style="list-style-type: none"> <li>1. Request for a First-Level Desk Review of the Distribution of Child Support Payments</li> <li>2. Information and Instructions for Completing the “Request for a First-Level Desk Review of the Distribution of Child Support Payments” Form</li> <li>3. Calculations Worksheet Desk Review of Pass-Through Payments</li> <li>4. Information and Instructions for Completing the “Calculations Worksheet Desk Review of Pass-Through Payments”</li> <li>5. Calculations Worksheet - Desk Review of Excess Support</li> <li>6. Information and Instructions for Completing the “Calculations Worksheet Desk Review of Excess Support”</li> <li>7. Determination of the Request for a First-Level Desk Review of the Distribution of Child Support Payments</li> <li>8. Request to New York State for a Second-Level Desk Review of the Distribution of Child Support Payments</li> <li>9. Information and Instructions for Completing the “Request to New York State for a Second-Level Desk Review of the Distribution of Child Support Payments”</li> <li>10. Determination of the Second-Level Desk Review</li> </ol>
<b>Attachment Available On – Line:</b>	Yes

## Filing References

Previous ADMs/INFs	Releases Cancelled	Dept. Regs.	Soc. Serv. Law & Other Legal Ref.	Manual Ref.	Misc. Ref.
90-ADM-41 97-ADM-7 99-ADM-5	Dear TA Director Letter dated January 4, 2006	347.12 347.13 347.25			LDSS-4148A Dear TA Director Letter dated November 17, 2005

## Section 2

### I. Summary

This administrative directive provides specific procedures for local district and state staff to conduct desk reviews for current or former recipients (collectively, “recipients”) of public assistance who dispute child support collections and disbursements. The term “public assistance” will be used throughout this administrative directive, and includes family assistance (temporary assistance) and safety net assistance. Implementation of these procedures will ensure that local district staff conduct desk reviews in a timely and uniform manner and, when appropriate, expedite payments to recipients. Coordination between child support and other social services district staff is critical to the success of the desk review process.

### II. Purpose

The purpose of this administrative directive is to provide the specific instructions and requirements necessary for requesting, conducting, and reporting the results of pass-through and excess support desk reviews of the distribution of child support payments as set forth in New York State Regulations, 18 NYCRR 347.25, and also includes supplemental instructions and forms for implementing the process.

### III. Background

New York State Regulations, 18 NYCRR 347.25, “Desk Reviews of the Distribution of Child Support Payments,” provides for a process for desk reviews of the distribution of child support payments.

A desk review is a procedure for current and former recipients of public assistance who are or were receiving child support services to dispute the amount of or claim non-receipt of:

- a pass-through payment;
- an excess current support payment; or
- an excess arrears payment.

The regulation provides a first-level desk review to be conducted initially by the local district Support Collection Unit or the New York City Office of Child Support Enforcement (SCU). A second-level review by the State Division of Child Support Enforcement (DCSE) is available to the recipient after completion of the first-level review by the SCU.

Desk review requests have historically been received through various avenues and through various mechanisms. Desk reviews were conducted by DCSE or the State Division of Employment and Transitional Supports (DETS) staff, and involved staff from several program areas and agencies to finalize a written response. The results were reported to the individuals requesting the review and to the local district Temporary Assistance Units (TAU), formerly called the “Income Maintenance Units.” The TAU is tasked with issuing a payment to the recipient or arranging for recoupment of an overpayment, if appropriate, through the desk review process.

Two “Dear Temporary Assistance Director” letters, dated November 17, 2005 and January 4, 2006, respectively, were issued and provided further detailed information regarding excess support desk reviews. The November 17, 2005 letter discussed the automated excess support process, the countable payments eligible to be offset by child support, and certain excess support notices. The January 4, 2006 letter discussed the procedures for handling the first and second-level excess support review processes.

Experience with the current processes has provided for a thorough understanding of the desk review process and needs. It is clear that the desk review process involves records from both the child support and the public assistance programs and, as such, desk reviews generally require contact with the other respective program. This administrative directive consolidates prior instructions given to the local Social Services District (SSD) workers and provides for a more efficient and streamlined approach. The new approach involves both the child support and public assistance programs, and provides the forms and instructions necessary for efficient first and second-level desk reviews. As such, the procedure provided in this administrative directive provides for regulatory compliance while enhancing and standardizing the process.

#### **IV. Program Implications**

The implementation of the procedures contained in this administrative directive will allow the SCU and SSD offices to satisfy the requirements of the pertinent regulations by providing a streamlined process and the forms necessary to address the pass-through and excess support desk review requests, and expedite, where appropriate, child support payments to recipients. For purposes of this directive, the term “SCU” will refer to the child support program and the term “SSD” will refer to the public assistance program.

Experience with desk review requests has demonstrated a negligible volume statewide.

#### **V. Required Action**

The SCU and SSD workers are tasked with calculating and responding to first-level pass-through payment, excess current support payment, and excess arrears support payment desk review requests. The SCU is tasked with support of first-level desk review requests by receiving and maintaining records of the desk review requests; by conducting a

conference, if requested; by providing CSMS payment and disbursement information as required on the calculation worksheets; and by taking CSMS case actions that will allow for the disbursement of payments.

The SSD is tasked with first-level desk review requests by providing WMS/BICS disbursement record information as required on the calculation worksheets; by taking any actions that would allow for the release of any held payments; and by reporting the results of the desk review request to the recipient, the SCU, and the TAU.

With respect to second-level desk reviews, DCSE staff are responsible for receiving the desk review requests and conducting review of the CSMS payment and disbursement information provided with the first-level determination. DETS staff is responsible for reviewing the WMS/BICS disbursement records and reporting the results of the second-level desk reviews to the requesting recipient, DCSE, the SCU, the SSD, and the TAU.

**A. Desk Review Defined**

A "desk review" is an accounting of the collections and disbursements made on behalf of a current or former recipient of public assistance who is or was receiving child support enforcement services.

A desk review is conducted upon the written request of a recipient who believes that the distribution of child support payments made was incorrect. It involves an examination of information contained in public assistance case records and child support enforcement accounts, and must result in a written determination to the recipient which includes an explanation of how the SCU distributed support collections received on behalf of the recipient for the month(s) reviewed and how the SSD disbursed pass-through and excess support payments.

A desk review is conducted jointly by the SCU and SSD. A second-level review is available from DCSE and DETS, only after completion of a first-level review by the SCU and SSD.

**B. Period Subject to Desk Review**

A desk review is limited to an accounting of the collections and disbursements made during the calendar year in which the desk review is requested and the calendar year preceding the calendar year in which the desk review is requested.

**C. Eligibility**

A desk review of support payments may be requested by a current or former recipient of public assistance for the month(s) during which an assignment of support rights was in effect.

**D. Request Procedures**

1. Notification of a recipient's rights to a desk review is provided through:

- Custodial Parent Handbook “What You Should Know About Your Rights and Responsibilities,” LDSS-4148A.
  - Monthly “Report of Support Collected,” OTDA Form LDSS-3677 and LDSS-3677 NYC.
  - Notices produced by the Client Notice System (CNS) as a result of the monthly automated process, such as “Excess Support (Sys. Gen.) Active Case” and “Excess Support (Worker Authorized) Active Case” letters (please refer to the November 17, 2005, “Dear Temporary Assistance Directors” letter for details).
2. Recipients who wish to request a desk review must obtain a desk review request form by telephoning the New York State Customer Service Helpline (CSH) at 1-888-208-4485 after December 8, 2006. The desk review request form and instructions will also be posted to ERS for local district access should an in person request be received.
  3. The CSH will provide the standard request form “Request for a First-Level Desk Review of the Distribution of Child Support Payments” (Attachment 1), and will provide “Information and Instructions for Completing the Request for a First-Level Desk Review of the Distribution of Child Support Payments” Form (Attachment 2) to assist in completion of this form; and a cover letter which provides the SCU address for return of the request form.
  4. The recipient must complete and submit to the SCU address provided on the cover letter the standard request form and may include documentation to support their request.
  5. The recipient must specify on the desk review request form the reason(s) for requesting the review, the month(s) for which a review is requested and the type of distribution in question, which can be one or more of the following:
    - Pass-through payments; and/or
    - Excess current support payments; and/or
    - Excess arrears support payments.

**Support pass-through payments** consist of up to the first \$50.00 per household per month of current child, current spousal, or both current child and spousal support payments collected towards the monthly support obligation by the SCU. A pass-through payment is disbursed to the public assistance household as a special payment issued through WMS/BICS. This payment is made only with respect to current support collections, not past-due support/arrears. As such, pass-through payments are not issued for support payments applied towards child support and/or spousal support arrears. A pass-through payment cannot exceed the combined monthly support obligation(s) for the household or the monthly amount of support that the noncustodial parent timely paid.

**Excess current support payments** occur when the amount of support collected and retained (kept) by the SSD for a given month, minus any pass-through payments, is greater than the total amount of countable public assistance issued to the family for that month. The result is the excess support amount. These payments must be issued to the recipient as a special payment through WMS/BICS. Please note that excess current support is not part of the automated process.

**Excess arrears support payments** occur when the amount of support collected and retained (kept) by the SSD exceeds the total amount of all countable public assistance payments, less any repayments or recoupments of countable public assistance (see the “Dear Temporary Assistance Director” letter dated November 17, 2005 for the SSD’s responsibility to identify sources of repayment or recoupment), plus issued pass-through payments and excess current support payments, over the life of the public assistance case. For purposes of an excess arrears support desk review request, the accounting period for a desk review is limited to the timeframe identified in Section V.B. above.

Excess arrears support payments are issued through an automated process. Any additional excess arrears support payments due to the recipient must be issued to the recipient as a special payment through WMS/BICS.

## **E. First-Level Desk Review**

### **1. SCU Procedures**

- a. Upon receipt of a “Request for a First-Level Desk Review of the Distribution of Child Support Payments,” the SCU and SSD jointly conduct the desk review and the SSD will issue the results of the review to the recipient no later than 45 calendar days from the date of receipt of a completed desk review request form as determined from actions identified in Section E. The SCU has 15 calendar days to complete the procedures outlined in Section E.1., herein, except as noted in Section E.1.g.
- b. The SCU worker must receive the desk review request form and review the request form to ensure that the recipient has provided the following critical information:
  - (i) all necessary information to identify the recipient and related CSMS account number(s) and public assistance case number(s);
  - (ii) current mailing address;
  - (iii) the month(s) for which the recipient requests review;
  - (iv) the type of distribution involved; and

- (v) the reason(s) or factor(s) which the recipient believes led to the recipient's non-receipt of child support payments.
- c. If critical data is missing from the desk review request form that will not enable the SCU to identify the case, the SCU will complete the "Determination of the Request for a First-Level Desk Review of the Distribution of Child Support Payments (Attachment 7) by checking the appropriate box and mailing the determination to the recipient promptly but no later than 15 calendar days from receipt of the desk review request form. This form should be reproduced on SCU letterhead for this purpose. The determination must include a copy of the original desk review request form.
- d. When critical data is missing and the case cannot be identified, the first-level desk review is concluded when the determination is mailed to the recipient. In the event the recipient obtains critical data to identify the public assistance or child support case, the recipient may resubmit the original first-level desk review request form with the missing critical data or obtain a new desk review form for submittal to the SCU by contacting the CSH at 1-888-208-4485.
- e. When the required critical data is provided on the desk review request form and the SCU worker determines the appropriate case(s), the SCU worker must enter the new status and reason code H001 RC04 "REQUEST FOR DESK REVIEW RECD" on the IVDJSI screen for the appropriate CSMS case(s) to record that the request has been made.
- f. The SCU worker must determine the types of information needed to conduct the desk review. If the recipient did not provide the necessary information, the SCU must make reasonable efforts to obtain the information. All efforts made by the SCU must be fully documented on CSMS IVDJRR, and should include, but are not limited to, the following actions:
  - (i) contact with income payors to determine dates of withholding; or
  - (ii) contact with another state's IV-D agency to determine dates of collection.
- g. If contact with another state's IV-D agency or an income payor is necessary to obtain information or documentation that the recipient has been unable to produce, the 45 calendar day first-level desk review period is extended for no more than 30 additional calendar days in order to provide sufficient time for collection of the information and response. The SCU is allowed an additional 15 calendar days to complete contact with another state or an income

payor. If there is no response, and if the recipient cannot provide the required information, the SCU should proceed with the available information.

- h. The SCU must conduct a conference with the recipient if requested by the recipient on the desk review request form. The SCU must conduct the conference by telephone or in person promptly but no later than 7 calendar days from receipt of the desk review request form and must allow the recipient to present documentation or information to support their desk review request. That documentation or information becomes part of the desk review.
- i. The SCU must review the CSMS case records and confirm that the case information is accurate. Some potential problems include:
  - (i) CAN or CIN number does not match CSMS case records: the SCU worker must review CSMS records to determine the CAN or CIN number that is being used and validate whether it is correct. If it is not, the correct CAN or CIN number must be obtained and corrected. Please refer to the “Dear Colleague” letter dated May 28, 2004, for improvements to the WMS data match process regarding CAN/CIN.
  - (ii) Public assistance status on CSMS: the SCU worker must review CSMS records to determine if there has been a change in public assistance status. If a change in public assistance status has occurred, the appropriate adjustments to CSMS, such as building a public assistance ledger or terminating a public assistance ledger (converting the account to, or deconverting the account from, public assistance) must be completed. Additionally, other CSMS adjustments such as a change in a distribution switch from a “3” to a “1” may be necessary so that any payments which have not been disbursed will be disbursed.
  - (iii) A payment is not on record: the SCU must review any proof of payment submitted to locate funds which are alleged to have not been applied to a CSMS account, and apply the funds appropriately. The SCU must also review suspense accounts to identify payments not yet applied to the intended CSMS account.
- j. If CSMS account maintenance is required, the SCU must complete the account maintenance within 2 calendar days of receipt of the desk review request and prior to completing the calculations worksheet required for the desk review.
- k. Based on the type of payment in question identified by the recipient on the desk review request form, the SCU worker must:



- (i) Complete the required steps recording the collection and disbursement information identified on either the:
  - “Calculations Worksheet Desk Review of Pass-Through Payments” (Attachment 3). Complete Steps 1, 2, and 3. Instructions are provided as Attachment 4; or
  - “Calculations Worksheet Desk Review of Excess Support” (Attachment 5). Complete Steps 1, 2, and 3. Instructions are provided as Attachment 6.
- (ii) Print the SCU worker’s name, initials, title, telephone number, and the date of the desk review.
- (iii) After completion of the appropriate steps, forward the calculations worksheet, the original desk review request, and any documentation provided to the SSD within 15 calendar days of receipt of the desk review request form. If the SCU is required to contact another state’s IV-D agency or an income payor, an additional 15 calendar day extension for providing the necessary documentation to the SSD is allowed, extending the time period to 30 calendar days from the date of the SCU’s receipt of the desk review request form. The SCU should retain a copy of the desk review documents until the desk review is completed by the SSD and the desk review determination package is received.

**Note:** When the first-level desk review process is completed by the SSD and upon receipt of a copy of the desk review determination package from the SSD (see further details in Section E.2. below), the SCU worker must review the results, enter the status and reason code of H901 RC04 “DESK REVIEW COMPLETED” on the IVDJSI screen, and enter remarks to support the desk review on the IVDJRR screen (e.g., Pass-through desk review completed. CP entitled to additional support of \$100.00 on 12/1/06).

## **2. SSD Procedures**

- a. The SSD worker must receive the calculation worksheet, the original desk review request, and any documentation provided from the SCU worker as indicated above.
- b. The SSD worker must determine the types of information needed for the desk review and make reasonable efforts to obtain the information. All efforts should include, but are not limited to, the following actions:

- (i) Contact with another state's IV-A agency to determine public assistance information; or
  - (ii) Contact with other TAU staff to determine public assistance payment information and amounts of unreimbursed assistance.
- c. The SSD worker must review the disbursement information provided by the SCU on the calculation worksheet and compare the information to the amount(s) actually received by the SSD at the end of each month and distributed to the recipient for the period in question. SSD workers can locate this information on the WMS/ BICS "Case Record of Assistance (CRA)."
- d. The SSD worker must review the WMS/BICS case records and confirm that the case and information provided by the SCU is accurate. Some examples of problems include:
  - (i) CAN or CIN number does not match: the SSD worker must review the public assistance case number (CAN) and CIN number provided by the SCU and validate that the SCU information is correct. If it is not, the SCU worker must be contacted to correct their records.
  - (ii) Public assistance records review: the SSD worker must review the IV-D Exception Report and the CSMS-8649 "Obligation and Collections Greater than Assistance Granted" to determine whether any disbursements from the SCU are on the report. Any amounts located on the report must be considered for the desk review calculation.
  - (iii) Electronic Benefit (EBT) Card Disbursement Expired: the SSD worker must review the WMS/BICS records to determine if a previous EBT card disbursement has been expunged (expired) and is due to the recipient. SSD workers may locate expunged funds on the EBT report entitled "EBT - Worker Actions Lists" or WMS/BICS "Case Record of Assistance (CRA)" for an individual's benefit information, and may need to review this with their accounting department for resolution.
- e. The SSD must complete actions above prior to completing the required steps of the appropriate calculations worksheet for the desk review.
- f. Based on the information and documentation pertaining to the release of pass-through or excess support payments for the month(s) under review, the SSD worker must:

- (i) Calculate the amount of the pass-through or excess support payments the recipient was entitled to receive by completing and finalizing the required steps as follows:
    - “Calculations Worksheet Desk Review of Pass-Through Payments” (Attachment 3). Complete Steps 4, 5, and 6. Instructions are provided as Attachment 4; or the
    - “Calculations Worksheet Desk Review of Excess Support” (Attachment 5). Complete Steps 4, 5, 6, 7, 8, and/or 9, as appropriate. Instructions are provided as Attachment 6.
  - (ii) Determine the results of the first-level desk review request. The results may include confirmation that: no additional payment is due to the recipient; an additional payment is due to the recipient; support payments have been identified for future months; the recipient has been paid too much money; the months of the desk review request are outside of the allowable time period; the recipient was not in receipt of public assistance or child support services; the matter is not related to public assistance or child support; or another social service district is handling the case.
  - (iii) Print the SSD worker’s name, initials, title, telephone number and the date of the desk review.
  - (iv) Prepare a “Determination of the Request for a First-Level Desk Review of the Distribution of Child Support Payments (Attachment 7) on SSD letterhead by checking the appropriate results box and, if applicable, providing the amount and projected date of any payment due to the recipient or the amount of any overpayment calculated.
- g. The desk review determination must be issued in writing to the recipient within 45 calendar days of the SCU's receipt of the desk review request form. If the SCU is required to contact another state’s IV-D agency or income payer, the time period for a determination is extended an additional 30 calendar days (for a total of 75 calendar days) from the date that the SCU received the desk review request form.
- h. The determination letter identified above must be reproduced on SSD letterhead for use as indicated, and must include a copy of:
- (i) completed calculations worksheet(s) used as part of the review process;
  - (ii) documentation considered in the desk review;

- (iii) “Request to New York State for a Second-Level Desk Review of the Distribution of Child Support Payments” (Attachment 8); and
  - (iv) “Information and Instructions for Completing the Request to New York State for a Second-Level Desk Review of the Distribution of Child Support Payments” (Attachment 9).
- i. The SSD must mail the desk review determination package in h. above to the recipient by first class mail, and a copy must be sent to the SCU so that the CSMS case records can be updated with the correct status and reason code, and a copy of the results of the desk review calculation must be provided to the TAU to issue a payment to the recipient or to arrange for recoupment of an overpayment, if appropriate.
- j. The TAU must disburse additional pass-through or excess support payments identified as a result of the desk review no later than 15 calendar days from the date of the determination letter. If the review determines that the recipient has received pass-through or excess support payments in error, a recoupment of the overpayment to the recipient will be accomplished through the monthly public assistance rebudgeting process and may begin within 30 calendar days from the date of the determination letter. If the recipient is no longer receiving public assistance, recoupment of the overpayment will occur through notification by SSD and a payment agreement, or through discussion with the SSD.

**Note:** The first-level desk review determination letter advises the recipient that a second-level review by DCSE may be requested if the recipient disputes specific facts contained in the desk review determination, and provides notice of the opportunity for the recipient to provide additional but previously unavailable documentation to DCSE for consideration in the second-level review.

## **F. Second-Level Desk Review**

### **1. DCSE Procedures**

- a. Recipients may request a second-level review of the SCU/SSD's desk review determination if they do not agree with the first-level findings. A request for a second-level review must be submitted in writing to DCSE by submitting a “Request to New York State for a Second-Level Desk Review of the Distribution of Child Support Payments” (Attachment 8) within 20 calendar days of the date of the SCU/SSD's desk review determination. As stated in Section E.2.h. above, the second-level desk review form and instructions

are provided to the recipient with the first-level desk review determination letter.

- b. Upon receipt of a “Request to New York State for a Second-Level Desk Review of the Distribution of Child Support Payments” form, DCSE and DETS jointly conduct the second-level desk review and DETS will issue the results of the review to the recipient no later than 30 calendar days from the date of receipt of a completed desk review request form. DCSE has 10 calendar days to complete the procedures outlined in Section F.1., herein.
- c. Upon receipt of a second-level desk review request, DCSE will enter a status and reason code of H001 RC05 “RESP REQUESTS 2<sup>ND</sup> LEVEL REVIEW” to record the request.
- d. The second-level desk review request must specify the facts in dispute and include a copy of the SCU/SSD first-level desk review determination letter and a copy of the calculations worksheet. It may also include any additional but previously unavailable documentation that supports the facts in dispute.
- e. DCSE will review the second-level desk review request form with respect to the facts in dispute, and will review any additional but previously unavailable documentation submitted by the recipient to determine the reason for the second-level desk review and what actions may be necessary.
- f. DCSE will review the accuracy of the first-level desk review determination calculations by comparing the collection and disbursement sections of the worksheet that accompanied the first-level desk review determination against the collection and disbursement information on the CSMS case records. If there are no changes, DCSE will print the name, initials, title, telephone number, and the date that the review is completed on the worksheet in the appropriate section.
- g. If review of the collection and disbursement sections of the worksheet results in necessary changes, DCSE will take any actions necessary to resolve the second-level desk review, such as contacting the SCU to locate a payment in suspense and assure that the payment is applied to the CSMS account.
- h. DCSE must cross out any information it determines is incorrect and enter any corrected information legibly to record the collection and disbursement information. The appropriate sections must be completed to finalize the second-level review and updated collection and disbursement information.
- i. DCSE must forward the original second-level desk review request, any documentation provided, and the calculations worksheet to

DETS promptly but no later than 10 calendar days from receipt of the second-level desk review request. A copy of the documents should be retained by DCSE until the determination package is received from DETS.

**Note:** When the second-level desk review is completed by DETS and upon receipt of a copy of the desk review determination package from DETS (see further details in Section F.2. below), DCSE must review the results, enter the status and reason code of H901 RC05 “2<sup>nd</sup> LEVEL REVIEW COMPLETED” on the IVDJSI screen, and enter remarks to support the desk review on the IVDJRR screen (e.g., Second-level desk review completed. Determination in agreement with first-level desk review).

## **2. DETS Procedures**

- a. DETS will receive the second-level desk review package from DCSE as specified in Section F.1.i. above.
- b. DETS will review the second-level desk review request form with respect to the facts in dispute, and will review any additional but previously unavailable documentation submitted by the recipient to determine the reason for the second-level desk review and what actions may be necessary.
- c. DETS will review the accuracy of the first-level desk review determination with respect to the facts in dispute by reviewing the WMS/BICS records and release of funds sections of the worksheet that accompanied the first-level desk review. If there are no changes, DETS will print the name, initials, title, telephone number, and the date that the review is completed on the worksheet in the appropriate section.
- d. If review of WMS/BICS sections of the worksheet result in necessary changes, DETS must cross out information it determines is incorrect and enter any corrected information legibly to record the WMS/BICS information. The appropriate sections must be completed to reflect the second-level review and updated public assistance information, through conclusion of the desk review.
- e. DETS must issue a second-level desk review determination in writing to the recipient using the “Determination of the Second-Level Desk Review” (Attachment 10) letter within 30 calendar days of receipt of the recipient's request for the second-level review.
- f. The second-level determination letter identified above must be reproduced on DETS letterhead, and must include a copy of any:
  - (i) revised or additional calculations worksheets; and

(ii) new documentation considered in the second-level desk review.

- g. The second-level desk review determination package must be mailed to the recipient by first class mail, and a copy must be sent to DCSE, the SCU (so that the CSMS case records can be updated with the correct status and reason code), and the SSD. A copy of the results of the desk review calculation must also be provided to the TAU with instructions to process a payment to the recipient or to arrange for recoupment of an overpayment, if appropriate.

**Note:** The second-level determination letter advises the recipient that a review under Article 78 of the Civil Practice Law and Rules of the DCSE/DETS determination may be requested within four months of the date of the determination letter if the recipient disputes specific facts contained in that determination. Further, the recipient will be advised that if legal assistance is required, they may wish to contact a local not-for-profit legal services corporation. The telephone number of a local not-for-profit legal services corporation will be provided.

## **VI. Systems Implications**

There are no systems implications.

## **VII. Additional Information**

The SCU will maintain the case records for all desk reviews for six (6) years from the date of either the first or second-level desk review determination, whichever is later.

## **VIII. Effective Date**

This ADM is effective immediately.

### **Issued By**

**Name:** Scott E. Cade  
**Title:** Deputy Commissioner and Director  
**Division/Office:** NYS Division of Child Support Enforcement

### **Issued By**

**Name:** Russell Sykes  
**Title:** Deputy Commissioner  
**Division/Office:** NYS Division of Employment and Transitional Supports

# Request for a First-Level Desk Review of the Distribution of Child Support Payments

**BEFORE COMPLETING THIS FORM** - Please read the other side of this form for information regarding the desk review and further instructions.

I am (check one box) ☐ a current ☐ a former public assistance recipient and I request that a desk review be conducted of the collections and disbursements made on my behalf for the type of payment(s), time period(s) and reason(s) indicated below:

**Identification:** Please provide all information requested in this section.

Recipient Name: \_\_\_\_\_ SSN/ITIN: \_\_\_\_\_

Current Mailing Address: \_\_\_\_\_  
*number and street address (or post office box) apt.*

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Telephone Number: \_\_\_\_\_ Best Time to Contact You: ☐ Daytime ☐ Evening

Public Assistance Case Number(s) (CAN): \_\_\_\_\_ CIN No. \_\_\_\_\_

Noncustodial Parent Name(s): \_\_\_\_\_

SSN/ITIN(s): \_\_\_\_\_

Child Support Case ID Number(s): \_\_\_\_\_

**Type of Payment in Question:** Please check the appropriate box(es) and identify the type of desk review request:

- ☐ pass-through payments (up to the first \$50 of current support collected during the month per public assistance family)  
☐ excess current support payments (amount in excess of total public assistance paid to you for the month)  
☐ excess arrears support payments (amount of payment in excess of total public assistance paid to you for past months)

**Time Periods of Desk Review:** Please identify the correct month(s) and year(s) of your request:

For the period \_\_\_\_\_ (month/year) through \_\_\_\_\_ (month/year)

**Reason(s) for Desk Review Request:** Please state your reason(s) for requesting a desk review. Be specific:

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Are you attaching documentation to support your reason(s) for the desk review request? ☐ yes ☐ no

If yes, please identify the documentation:

\_\_\_\_\_

A conference with SCU staff is available. Are you requesting such a conference? ☐ yes ☐ no

**Completed and Submitted By:**

\_\_\_\_\_  
 signature of person requesting desk review

\_\_\_\_\_  
 print name of person requesting desk review

\_\_\_\_\_  
 date

**Return completed form to the SCU address identified on the cover letter.**



**Information and Instructions for Completing the  
“Request for a First-Level Desk Review of the Distribution of Child Support Payments” Form**

You may request a desk review if you believe that you did not receive a child support pass-through payment or excess support payment in an amount that you believe you were entitled to receive by completing a “Request for a First-Level Desk Review of the Distribution of Child Support Payments” as follows. Note that a support payment must be received from the noncustodial parent before you can receive a child support pass-through payment or excess support payment. You may verify that a support payment was received by contacting 1-888-208-4485 or by visiting the child support website at: [newyorkchildsupport.com](http://newyorkchildsupport.com).

**Public assistance recipient status:** Check the appropriate box to identify if you are a current public assistance recipient, meaning you are currently receiving assistance, or a former public assistance recipient, meaning you formerly received assistance but are not receiving it now.

**Personal information:** Enter your name, Social Security Number (SSN) or Individual Taxpayer Identification Number (ITIN), current mailing address, contact telephone number, and the best time to reach you at that number. An ITIN is a nine-digit number beginning with “9” which is issued by the Internal Revenue Service to foreign nationals and others who are required to have a U. S. taxpayer identification number but do not have, and are not eligible to obtain, an SSN from the Social Security Administration.

**Case information:** Enter your public assistance case number(s) (CAN), CIN No., and/or child support account number(s), and the identity of the noncustodial parent(s), including name(s) and SSN/ITIN(s). You must include as much of this information as you have in order to properly identify your case(s).

**Type of payment in question:** Check the appropriate box or boxes identifying the type of desk review based on the type of payments. Pass-through payments include up to the first \$50.00 of current child support collected during the month up to the amount of the obligation due for the month. Current support is support paid in the month when it is due. If current obligations are not paid timely, they become past-due and are called “arrear.” Excess support payments occur when support collected and retained exceeds the amount of public assistance paid to you. Excess support may include current support collected or collection towards arrears.

**Time period:** Enter the required month(s)/year(s) that applies to your request. Please note that if your desk review request is in regards to a payment not received in a particular month, you will need to include the preceding month in your desk review request. For example, you did not receive a \$50.00 pass-through for July 2006, so your desk review request would include the period of June 2006 through July 2006.

Note that a desk review is limited to an accounting of the collections and disbursements made during the calendar year in which the desk review is requested and the calendar year preceding the calendar year in which the desk review is requested. Your desk review time period cannot exceed this limitation.

**Reason for the desk review request:** Clearly state the reason(s) why your desk review request is being submitted. For example, you did not receive a \$50.00 pass-through payment for May 2006.

**Documentation:** You may also include documentation to support your desk review request, such as copies of the monthly “Report of Support Collected” received for each period of the review. If you wish to include documentation that supports your claim that the distribution was incorrect, select the “yes” box and describe the type of documentation you are including.

**Conference with SCU:** As part of your desk review, you may request a conference with the Support Collection Unit (SCU) by checking the “yes” box as indicated on this form. The conference may be in person or by telephone and will allow you to offer documentation and discuss the reasons why you believe that you are entitled to additional payments.

**Completed and Submitted by:** Sign and print your name and date the request for a desk review where indicated.

Once you have completed the “Request for a First-Level Desk Review of the Distribution of Child Support Payments,” **submit the completed form and documentation to the SCU at the address provided on the cover letter.** After you send in the completed form and documentation, the SCU and Social Services District (SSD) will review your case and issue you a written response within 45 calendar days of the date that your written request is received, or, under certain circumstances, within 75 calendar days.

The desk review results will determine whether you are owed an additional payment, whether you have received the correct amount of support, or whether too much support has been paid to you. If you are owed an additional payment, the SSD may distribute that payment to you on your Electronic Benefits (EBT) card or, in some circumstances, by check, not later than 15 calendar days from the determination letter. If too much support has been paid to you, the SSD may recoup the overpayment through the monthly benefits process within 30 calendar days from the date of the determination letter.

If you have questions or concerns regarding the notice or instructions provided, contact the Customer Service Helpdesk at 1-888-208-4485.

# CALCULATIONS WORKSHEET DESK REVIEW OF PASS-THROUGH PAYMENTS

☐ FIRST-LEVEL DESK REVIEW

☐ SECOND-LEVEL DESK REVIEW

**STEPS 1, 2, AND 3 ARE TO BE COMPLETED BY THE SUPPORT COLLECTION UNIT (SCU) WORKER  
AND CHECKED/CORRECTED BY THE DIVISION OF CHILD SUPPORT ENFORCEMENT (DCSE) REVIEWER**
**Step 1: DESK REVIEW ADMINISTRATIVE INFORMATION**

DATE DESK REVIEW REQUEST RECEIVED: \_\_\_\_\_

SCU NAME: \_\_\_\_\_

PERIOD COVERED BY PASS-THROUGH DESK REVIEW REQUEST: \_\_\_\_\_ TO \_\_\_\_\_

RECIPIENT NAME: \_\_\_\_\_

RECIPIENT SSN/ITIN: \_\_\_\_\_

RECIPIENT ADDRESS: \_\_\_\_\_

NONCUSTODIAL PARENT NAME(S): \_\_\_\_\_

NONCUSTODIAL PARENT SSN/ITIN(S): \_\_\_\_\_

CSMS CASE NO(S): \_\_\_\_\_

PUBLIC ASSISTANCE CASE NO(S) (CAN): \_\_\_\_\_

CIN No. \_\_\_\_\_

DATES OF PUBLIC ASSISTANCE: Start \_\_\_\_\_ End \_\_\_\_\_ ACTIVE: ☐ Yes ☐ No

**Step 2: CHILD SUPPORT COLLECTIONS AND DISBURSEMENT CALCULATIONS**

(a) Month/Year of Desk Review Request	(b) CSMS Case No (enter only if multiple CSMS Case Nos)	Current Collections Received		Disbursement of Total Current Available Collections Received		Support Payments Identified for Future Months
		(c) Amount of Current Support Collected	(d ) Receipt Date of Current Collection	(e) Amount of Pass- Through Disbursed to SSD by the SCU	(f) Date of Pass- Through Disbursement to SSD	(g) Amount of Available Future Support Payments
(h) TOTALS						

(\*) Note: Column (c) above only represents current collections for which a pass-through payment may be authorized. It does not include past-due support/arrears collections.

**Step 3: SUMMARY TOTAL DISBURSEMENTS**

Total Amount of Current Support Collected from Step 2(h), Column (c)	<input type="text"/>
Total Amount of Pass-Through Disbursed To SSD by the SCU from Step 2(h), Column (e)	<input type="text"/>
Total Amount of Available Future Support Payments Step 2(h), Column (g)	<input type="text"/>

**First-Level Desk Review Completed by:**

**Support Collection Unit**

_____ <b>Name (Please Print and Initial)</b>	_____ <b>Title</b>	_____ <b>Telephone Number</b>	_____ <b>Date</b>
---	-----------------------	----------------------------------	----------------------

**If Applicable, Second-Level Desk Review Completed by:**

**Division of Child Support Enforcement**

_____ <b>Name (Please Print and Initial)</b>	_____ <b>Title</b>	_____ <b>Telephone Number</b>	_____ <b>Date</b>
---	-----------------------	----------------------------------	----------------------

**STEPS 4, 5, AND 6 ARE TO BE COMPLETED BY THE SOCIAL SERVICES DISTRICT (SSD) WORKER  
AND CHECKED/CORRECTED BY THE DIVISION OF EMPLOYMENT AND TRANSITIONAL SUPPORTS (DETS) REVIEWER**

**Step 4: PASS-THROUGH PAYMENTS DISBURSEMENT TO RECIPIENT VIA EBT CARD/PAPER CHECK**

Carry Over Information from Step 2 Above		Pass-Through Payments Disbursed to Recipient Via the EBT Card/Paper Check		Calculation of Pass-Through Payments Due to the Recipient			Support Payments Identified for Future Months
(i)	(j)	(k)	(l)	(m)	(n)	(o)	(p)
Month/Year of Desk Review Request (from column (a) of Step 2 above)	Amount of Pass- Through Payments Disbursed to SSD by SCU (from column (e) of Step 2 above)	Amount of Pass- through Payment Disbursed to Recipient by SSD	Date Disbursed to Recipient by SSD via the EBT Card/Paper Check	Amount of Pass- through Payment Not Disbursed to the Recipient (amount in column (j) minus (k))	Disbursements that have been Expunged (Expired), if any, and are Now Due to the Recipient	Balance Due to Recipient (total of columns (m) plus (n))	Amount of Available Future Support Payments (from column (g) of Step 2 above)
(q) TOTALS							

**Step 5: TOTAL DUE TO RECIPIENT**

Total Balance Due to Recipient from Step 4, Column (o)

Total Support Payments Identified for Future Months from Step 4, Column (p)

**Step 6: RESULTS OF FIRST-LEVEL DESK REVIEW OF PASS-THROUGH PAYMENTS**

- ☐ the correct amount of pass-through payments have been paid to the recipient to date.
- ☐ an additional pass-through payment amount is owed to the recipient in the amount of \$\_\_\_\_\_.
- ☐ too much in pass-through payments have been paid to the recipient to date and the recipient now owes \$\_\_\_\_\_.

And, if applicable,

- ☐ additional support payments have been identified as available for future months in the amount of \$\_\_\_\_\_.

***Please note: If an amount appears in brackets ( ), it means that you were overpaid and that money is due to the SSD.***

The SSD worker must complete a “Determination of the Request for a First-Level Desk Review of the Distribution of Child Support Payments” and mail the determination with a copy of this worksheet and the “Request to New York State for a Second-Level Desk Review of the Distribution of Child Support Payments” and “Information and Instructions for Completing the Request to New York State for a Second-Level Desk Review of the Distribution of Child Support Payments” to the recipient. Provide a copy of the determination and worksheet to the SCU and to the Temporary Assistance Unit (formerly the Income Maintenance Unit) directing the Temporary Assistance Unit, if appropriate, to either pay the amount calculated or recoup the overpayment amount.

**First-Level Desk Review Completed by:****Social Services District:**\_\_\_\_\_  
Name (Please Print and Initial)\_\_\_\_\_  
Title\_\_\_\_\_  
Telephone Number\_\_\_\_\_  
Date**If Applicable, Second-Level Desk Review Completed by:****Division of Employment and Transitional Support**\_\_\_\_\_  
Name (Please Print and Initial)\_\_\_\_\_  
Title\_\_\_\_\_  
Telephone Number\_\_\_\_\_  
Date

## Information and Instructions for Completing the “Calculations Worksheet Desk Review of Pass-Through Payments”

The “Calculations Worksheet Desk Review of Pass-Through Payments” has been created for use by the local district Support Collection Unit (SCU) and the Social Services District (SSD) workers in properly calculating a pass-through payment desk review request. A “Calculations Worksheet Desk Review of Pass-Through Payments” must be completed for each month for which a desk review is requested.

**STEPS 1, 2, AND 3 ARE TO BE COMPLETED BY THE SCU WORKER  
AND CHECKED/CORRECTED BY THE DCSE REVIEWER**

Identify the level of desk review being performed. For the SCU workers, the box for first-level desk review must be checked. For DCSE reviewer, the box for second-level desk review must be checked.

For any information identified below, the worker must review the information provided on the “Request for a First-Level Desk Review of the Distribution of Child Support Payments” form received and compare and confirm it to the information on CSMS case records first, before entering the required information on the worksheet.

### **Step 1: DESK REVIEW ADMINISTRATIVE INFORMATION**

**Date Desk Review Request Received:** Enter the date that the “Request for a First-Level Desk Review of the Distribution of Child Support Payments” form was received by the SCU worker. Be sure to enter the appropriate status code on IVDJSI of H001RC04 “REQUEST FOR DESK REVIEW RECD” on the CSMS Case.

**SCU Name:** Enter the name of the SCU that received the desk review request form.

**Period Covered By Pass-Through Desk Review Request:** Enter the entire period covered by the desk review request form. Use month/year date format (MM/CCYY). A desk review is limited to an accounting of the collections and disbursements made during the current calendar year of the desk review request and the previous calendar year.

**Recipient Name:** Enter the name of the individual requesting a desk review. This is found on the desk review request form. Verify that the individual has/had a child support account established with the SCU in any month during the period for which a review is requested, and that the recipient was in receipt of public assistance during this same period. Verification can be done by reviewing CSMS, ASSETS, and/or the Daily IV-A/IV-D Interface Reports.

**Recipient SSN/ITIN:** Enter the recipient’s Social Security Number (SSN) or Individual Taxpayer Identification Number (ITIN) as provided on the desk review request form. An ITIN is a nine-digit number beginning with “9” which is issued by the Internal Revenue Service to foreign nationals and others who are required to have a U. S. taxpayer identification number but do not have, and are not eligible to obtain an SSN from the Social Security Administration. The SCU worker should also verify that the SSN/ITIN agrees with the IVDJCH screen on CSMS for the custodial parent. If it does not, the SCU worker should investigate and update if appropriate.

**Recipient Address:** Enter the address of the individual requesting a desk review as provided on the desk review request form. The SCU worker should also verify that it agrees with the last known address on the IVDJCH and/or IVDJCM screen on CSMS for the custodial parent and update if necessary.

**Noncustodial Parent Name(s):** Enter the name(s) of the noncustodial parent identified on the desk review request form. Verify that the individual(s) is/are the noncustodial parent(s) on the CSMS child support account(s) established with the SCU in any month during the period for which a review is requested.

**Noncustodial Parent SSN/ITIN(s):** Enter the noncustodial parent’s Social Security Number(s) (SSN) or Individual Taxpayer Identification Number(s) (ITIN) as provided on the desk review request form. An ITIN is a nine-digit number beginning with “9” which is issued by the Internal Revenue Service to foreign nationals and others who are required to have a U. S. taxpayer identification number but do not have, and are not eligible to obtain, an SSN from the Social Security Administration. The SCU worker should also verify that the SSN/ITIN agrees with the IVDJRI screen on CSMS for the noncustodial parent. The SSN would appear as the primary SSN on the IVDJRI screen; the ITIN would appear as the alternate SSN only, with no primary SSN, on the IVDJRI screen. If the SSN/ITIN does not agree, verify and correct if appropriate.

**CSMS Case No(s):** Enter the unique 9-character alphanumeric (e.g., AA12345K1) identifier(s) assigned to each custodial parent/noncustodial parent relationship. If the custodial parent has more than one CSMS Case Number, the SCU worker should determine whether each CSMS case is relevant to the desk review request. A relevant CSMS Case Number should reflect the

relationship to the public assistance case by matching the CAN entered on the PA CAN field on the IVDJCH screen with the CAN entered on the desk review request form. The CSMS cases included may involve a payment which impacted more than one CSMS Case Number, or a case that may involve more than one local district. Please note that if there is more than one CSMS account, the support collected for each account will be counted towards the maximum total of \$50.00 per month for each household that may be issued as a pass-through payment. Please note that the amount of the pass-through payment cannot exceed the combined support obligation amounts for all relevant CSMS Case Numbers.

**Public Assistance Case No(s) (CAN):** Enter the unique WMS case identifier assigned to each recipient of services. This may be found in the PA CAN field on the IVDJCH screen on CSMS.

**CIN No.:** Enter the Client Identification Number(s) (CIN) for the public assistance case head. The CIN number is an eight position identifier code which is assigned to each member of a public assistance case household. A CIN is unique to an individual and there can be many CINs associated to one CAN. The CIN for each household member can be located on CSMS IVDJCH screen on CSMS. (Please refer to the "Dear Colleague" letter dated May 28, 2004, for changes to the WMS data match process regarding CIN numbers.)

**Dates of Public Assistance:** Enter the beginning and ending date of the public assistance grant(s) involved.

**Active:** Check the appropriate box to identify whether the CAN is active on CSMS. The information may be located on the IVDJCH screen in CSMS for each custodial parent and child record. Active public assistance case statuses are 07, 10, and 17. Every member of the public assistance household does not need to be active in order to consider the case to be active, but at least one party or child must have an active status. If the custodial parent and each child do not have an active case status, then the case status is considered closed. (Please refer to the "Dear Colleague" letter dated May 28, 2004, for changes to the WMS data match process regarding CAN/CIN.)

## **Step 2: CHILD SUPPORT COLLECTIONS AND DISBURSEMENT CALCULATIONS**

(a) **Month/Year of Desk Review Request:** Enter each month/year included in the desk review request. For example, the desk review is requested for January through June of 2006. Therefore, you would enter 01/2006, 02/2006, 03/2006, 04/2006, 05/2006, and 06/2006, in this column. Please note that a desk review is limited to an accounting of the collections and disbursements made during the calendar year in which the desk review is requested and the calendar year preceding the calendar year in which the desk review is requested. If the total time period identified on the desk review request exceeds the space allowed in the table for Step 2, make a copy of the page and incorporate it into the desk review calculation.

(b) **CSMS Case No (enter only if multiple CSMS Case Numbers):** See above information in Step 1 regarding CSMS Case Numbers. Enter CSMS Case Number(s) if multiple cases are involved.

## **CURRENT COLLECTIONS RECEIVED**

(c) **Amount of Current Support Collected:** For each month of the review period, enter the amount of current support collected up to the amount of current support due for each month as it appears on the account tab, MONEY screen, on ASSETS. You may also locate the information on the IVDHTM, or if applicable, IVDITM (most current three months), and IVDHTO, or if applicable, IVDITO (nine months prior) screens on CSMS, if the time period of the review is limited to these records. ASSETS contains an account document generator tool which allows for easy identification of payments and disbursements for a set period of time.

Current support due and/or paid and applied to a charging eligible ledger indicates the recipient is due a pass-through payment. Eligible pass-through payment ledgers are: 21A\_, 23A\_, 21BP, 23BP, 21BR, 23BR, 21CP, 23CP, 21CR, 23CR, 21CA, and 23CA, with a retained FIPS code. SCU workers can determine if there are active charging current support ledgers as identified above by reviewing IVDQFS and checking the first and last charge dates with an obligation amount greater than zero and a ledger status of 01 for active.

Current support means support which is paid (or withheld from the child support payer's wages) in the month when the support is due. Collections would appear as batch 50, 53, 54, 55, 56, 57, and positive batch 71, 72, 74, 75 and 77 transactions for the month in question.

Please note that no pass-through will be allowed for payments received towards past-due support/arrears, such as tax refund offsets, and as such, only current support payments are to be reported. Federal tax refund offset collections would appear on CSMS as batch 55 and positive batch 75 transactions for the month in question. Other payments received toward past-due support/arrears would appear as batch 53 and 54, and may appear as positive batch 71, 72, and 74. SCU workers must consider the batch type payment along with the ledger type to determine payments applied to current support and payments applied to past-due support/arrears.



(d) **Receipt Date of Collection:** Enter the date that each current payment was received for the batches identified above.

### **DISBURSEMENT OF TOTAL AVAILABLE COLLECTIONS RECEIVED**

(e) **Amount of Pass-Through Disbursed to SSD by the SCU:** Enter the amount of any pass-through (disregard) distribution transactions created at month end to the SSD. These will appear as a batch 98 or 97 transaction on the account tab, MONEY screen, on ASSETS, or on the IVDHTM, or if applicable, IVDITM (most current three months), or IVDHTO, or if applicable, IVDITO (nine months prior) screens on CSMS, if the time period of the review is limited to these records.

Pass-through payment authorization to the SSD is indicated by a batch 98 transaction. A batch 97 transaction in a subsequent month or months indicates additional pass-through for a prior month. This occurs typically when an employer withholds child support in the month it is due to be paid but the payments are received for the prior month or not processed on CSMS until the following month or later. The batch 97 transaction will only be created for payments dated within three months prior to the current month. No batch 97 transaction will be entered for any payment that was withheld over three months prior to the date it was processed on CSMS. Additionally, in some instances, paper case records reflecting month end authorization transactions or adjustments to the month end authorization transactions may be required.

(f) **Date of Pass-Through Disbursement to DSS:** Enter the date that the month end pass-through (disregard) payments were authorized to the SSD by the SCU. This will be the date that the batch 98 or 97 transaction was created on CSMS, or in some instances, the date of the paper case record reflecting month end authorization transactions or adjustments to the month end authorization transactions.

### **SUPPORT PAYMENTS IDENTIFIED FOR FUTURE MONTHS**

(g) **Amount of Available Future Support Payments:** Enter the amount of any known support payments available for future month disbursements, including any payments identified during account maintenance which are to be authorized at month end by the SSD. Examples of this situation may occur when a desk review request is submitted and conducted prior to month end (e.g., a batch 79 entry indicates application of a payment but a batch 98 has not been created yet), or if an SCU worker makes ledger adjustments which will result in a Batch 98 disregard disbursement entry at month end.

(h) **TOTALS:** Enter the totals for columns (c), (e), and (g).

### **Step 3: SUMMARY TOTAL DISBURSEMENTS**

**Total Amount of Current Support Collected from Step 2(h), Column (c):** Enter the total amount calculated in step 2, column (c) as entered in the total column (h).

**Total Amount of Pass-Through Disbursed to SSD by the SCU from Step 2(h), Column (e):** Enter the total amount calculated in step 2, column (e) as entered in the total column (h).

**Total Amount of Future Disbursements Identified by the SCU from Step 2(h), Column (g):** Enter the total amount calculated in step 2, column (g) as entered in the total column (h).

### **First-Level Desk Review Completed By**

**Support Collection Unit:** Enter the name and initials, title, and telephone number of the SCU worker who completed the worksheet and the date completed.

**If Applicable, Second-level Desk Review Completed by:** If a second-level desk review has been requested through the State Division of Child Support Enforcement (DCSE), a DCSE reviewer will confirm the information provided on the worksheet by entering the name and initials, title, and telephone number of the DCSE reviewer who completed the second-level review and confirms the information. If the first-level review contains errors, or new information is provided with the second-level desk review request that modifies the calculations, the DCSE reviewer will cross out any incorrect information and enter any correct information legibly, carry that correction forward in the calculations for Steps 1, 2, and 3 of the calculation worksheet, and forward the worksheet to the Division of Employment and Transitional Supports (DETS) to complete the second-level desk review.

**NOTE:** Account maintenance of the CSMS case and ledgers may be required prior to completing this section of the worksheet. Examples include determining whether the CSMS case ledger(s) accurately reflect the status of public assistance; whether the CAN and CIN numbers on CSMS are in agreement with WMS/BICS records (refer to the May 28, 2004 "Dear Colleague" letter for changes to the process); and whether the recipient SSN/ITIN and address on CSMS matches what was provided with the desk

review request. Be sure to review each Batch 79 transaction on IVDHST in the month and for a specific ledger or ledgers to confirm what has been applied is correct.

The SCU worker may verify public assistance information by utilizing the IV-A/IV-D Interface Reports; by accessing public assistance records through CSMS (select F-12 (upstate) or F-2 (New York City) to determine whether the CAN or CIN information on CSMS is in agreement with WMS/BICS records); or by reviewing public assistance records through ASSETS (from the CASE tab, enter Client or Child tabs, locate the link for the CAN or CIN fields on the page, and click on the link to bring up the public assistance information.

The SCU worker must review the case records and reports to determine whether updates to CSMS are appropriate and complete any updates before proceeding with the desk review and forwarding the complete package to the SSD.

**Once the SCU worker completes the CSMS case review and Parts 1, 2, and 3 of the worksheet, the worksheet must be forwarded to the SSD worker so that they may complete Parts 4, 5, and 6, and provide with the final determination:**

- 1) The "Calculations Worksheet Desk Review of Pass-Through Payments" with Parts 1, 2, and 3 completed and signed by the SCU worker and a supervisor;
- 2) The "Instructions for Completing the Calculation Worksheet Desk Review of Pass-Through Payments" for reference only; and
- 3) The original "Request for First-Level Desk Review of the Distribution of Child Support Payments" form.

**STEPS 4, 5, AND 6 ARE TO BE COMPLETED BY THE SSD WORKER  
AND CHECKED/CORRECTED BY THE DETS REVIEWER**

**Step 4: PASS-THROUGH PAYMENTS DISBURSEMENT TO RECIPIENT VIA EBT CARD/PAPER CHECK**

**CARRY OVER INFORMATION FROM STEP 2 ABOVE**

(i) **Month/Year of Desk Review Request (from column (a) of Step 2 above):** Enter each month/year included in the desk review request as it corresponds to the month/year identified in Section 2, column (a), for consistency. The format is MM/CCYY.

(j) **Amount of Pass-Through Payments Disbursed to SSD (from column (e) of Step 2 above):** Enter the amount identified in Step 2, column (e), by the SCU as disbursed to the SSD.

**PASS-THROUGH PAYMENTS DISBURSED TO RECIPIENT VIA EBT CARD/PAPERCHECK**

(k) **Amount of Pass-through Payment Disbursed to Recipient by SSD:** Enter the amount of any pass-through payments which were disbursed to the recipient by public assistance on an EBT card. Pass-through payments are paid to a recipient when current support has been collected on their behalf by the SCU during the previous month and disbursed at month end to the SSD. By law, up to the first \$50.00 per month of current support collected is passed-through to a recipient. Please note that the maximum total of \$50.00 per month of pass-through payments may be disbursed for each public assistance family. SSD workers can locate this information on the WMS/BICS "Case Record of Assistance (CRA)." Pass-through payments are identified by WMS/BICS payment types D1 or D2 (upstate) and payment types 70 or 54 (New York City).

(l) **Date Disbursed to Recipient by SSD via the EBT Card/Paper Check:** Enter the date that the pass-through disbursement amount was disbursed to the recipient by the SSD on their EBT card or by paper check.

**CALCULATION OF PASS-THROUGH PAYMENTS DUE TO THE RECIPIENT**

(m) **Amount of Pass-through Payment Not Disbursed to the Recipient (amount in column (j) minus column (k):** Enter the difference between column (j) minus column (k). This is the total amount of pass-through payments that are due to the recipient based on the desk review.

(n) **Disbursement that has been Expunged (Expired), if any, and are Now Due to the Recipient:** Enter any amount of pass-through payments that were expunged (expired). Expunged payments are payments which were issued to the recipient but were not picked up in full or were only partially picked up and access to the funds has now expired. The expired funds may be due

to the recipient. SSD workers may locate expunged funds on the EBT report entitled “EBT - Worker Actions Lists” or WMS/BICS “Case Record of Assistance (CRA)” for an individual’s benefit information.

(o) **Balance Due to Recipient (total of columns (m) plus (n):** Enter the total amount of pass-through payments that are now due to the recipient. This amount is the total of columns (m) plus (n). This includes the total amount of pass-through payments determined due to the recipient through the desk review and any funds being held by the SSD because payments issued to the recipient have now expired.

#### **SUPPORT PAYMENTS IDENTIFIED FOR FUTURE MONTHS**

(p) **Amount of Available Future Support Payments From Column (g) of Step 2 above:** Enter the amount of support payments that the SCU has determined may be available for future disbursements to the SSD. This amount can be found in Step 2, column (g).

(q) **TOTALS:** Enter the totals for columns (j), (k), (m), (n), (o) and (p).

#### **Step 5: TOTAL DUE TO RECIPIENT**

**Total Balance Due to Recipient from Step 4(q), Column (o):** Enter the total amount calculated in step 4, column (o), as entered in the total column (q).

**Total Support Payments Identified for Future Months from Step 4(q), Column (p):** Enter the total amount calculated in step 4, column (p), as entered in the total column (q).

#### **Step 6: RESULTS OF FIRST-LEVEL DESK REVIEW OF PASS-THROUGH PAYMENTS**

The SSD worker must check the box which accurately reflects the results of the desk review. There are three options boxes available: 1) the correct amount of pass-through payments have been paid to the recipient to date; 2) an additional pass-through payment amount is owed to the recipient in the amount of \$\_\_\_\_; or 3) too much in pass-through payments have been paid to the recipient to date and the recipient now owes \$\_\_\_\_.

Enter dollar amounts where indicated. If too much money has been paid to the recipient, indicate the overpayment by entering brackets around the dollars entered.

Additionally, if support payments have been identified by the SCU as available for future disbursements, this needs to be reported to the recipient as well. If an amount has been carried down to column (p) by the SSD, check the option box and enter the amount.

#### **First-Level Desk Review Completed By**

**Social Services District:** Enter the name and initials, title, and telephone number of the SSD worker who completed the worksheet, and the date completed.

**If Applicable, Second-level Desk Review Completed by:** If a second-level desk review has been requested and a DCSE reviewer has forwarded the second-level request to DETS, a DETS reviewer will confirm the information provided on the worksheet by entering the name and initials, title, and telephone number of the DETS reviewer who completed the second-level review and confirms the information. If the first-level review contains errors, or new information is provided with the second-level desk review request that modifies the calculations, the DETS reviewer will cross out any incorrect information and enter any correct information legibly, carry that correction forward in steps 4, 5, and 6, of the calculation worksheet, and complete the second-level desk review.

**Note:** Account maintenance of the WMS case and records may be required prior to completing this section of the worksheet. Examples include determining whether the WMS case record CAN and CIN agree with the CSMS numbers reported above; whether the recipient address on WMS is the same address as provided with the desk review request; whether any pass-through payments disbursed to the SSD require review as reported on the IV-D Exception Report; or whether previous pass-through disbursements on a recipient EBT card have been expunged (expired) and funds remain due through the accounting department. SSD workers must review the case records and reports to determine whether updates to WMS must be completed and accomplish those updates before proceeding with the desk review.

**Once the SSD worker completes the WMS/BICS case review and Parts 4, 5, and 6 of the worksheet, they must finalize the first-level final determination by completing a “Determination of the Request for a First-Level Desk Review of the Distribution of Child Support Payments.” A copy of each of the following must be attached and become part of the final determination package:**

- 1) The original “Request for a First-Level Desk Review of the Distribution of Child Support Payments” form and any documentation provided by the recipient for the desk review;
- 2) The “Calculation Worksheet Desk Review of Pass-Through Payments” with Parts 1, 2, and 3 completed and signed by the SCU worker, and Parts 4, 5, and 6 completed and signed by the SSD worker;
- 3) A “Request to New York State for a Second-Level Desk Review of the Distribution of Child Support Payments” form; and
- 4) Information and Instructions for Completing the “Request to New York State for a Second-Level Desk Review of the Distribution of Child Support Payments.”

## CALCULATIONS WORKSHEET - DESK REVIEW OF EXCESS SUPPORT

☐ FIRST-LEVEL DESK REVIEW

☐ SECOND-LEVEL DESK REVIEW

**Check Appropriate Box Identifying Type of Desk Review:**

- ☐ **Excess Current Support Payments Desk Review** (SCU workers complete Steps 1, 2, 3 only; SSD workers complete Steps 4, 5, 8, 9 only)  
☐ **Excess Arrears Support Payments Desk Review** (SCU workers complete Steps 1, 2, 3 only; SSD workers complete Steps 6, 7, 8, 9 only)  
☐ **Excess Current and Arrears Support Payments Desk Review** (SCU and SSD workers must complete all sections)

**STEPS 1, 2, AND 3 ARE TO BE COMPLETED AS IDENTIFIED ABOVE BY THE SUPPORT COLLECTION UNIT (SCU) WORKER  
AND CHECKED/CORRECTED BY THE DIVISION OF CHILD SUPPORT ENFORCEMENT (DCSE) REVIEWER**

### Step 1: DESK REVIEW ADMINISTRATIVE INFORMATION

DATE DESK REVIEW REQUEST RECEIVED: \_\_\_\_\_ SCU NAME: \_\_\_\_\_  
 PERIOD COVERED BY EXCESS SUPPORT DESK REVIEW REQUEST: \_\_\_\_\_ TO \_\_\_\_\_  
 RECIPIENT NAME: \_\_\_\_\_ RECIPIENT SSN/ITIN: \_\_\_\_\_  
 RECIPIENT ADDRESS: \_\_\_\_\_  
 NONCUSTODIAL PARENT NAME(S): \_\_\_\_\_  
 NONCUSTODIAL PARENT SSN/ITIN(S): \_\_\_\_\_  
 CSMS CASE NO(S): \_\_\_\_\_  
 PUBLIC ASSISTANCE CASE NO(S) (CAN): \_\_\_\_\_  
 CIN No. \_\_\_\_\_  
 DATES OF PUBLIC ASSISTANCE: Start \_\_\_\_\_ End \_\_\_\_\_ ACTIVE: ☐ Yes ☐ No

**Step 2: CHILD SUPPORT COLLECTIONS AND DISBURSEMENT CALCULATIONS**

(a)	(b)	Collections Received			Distribution from Current Support Collected			Distribution from Past-Due Support/Arrears Collected			Support Payments Identified for Future Months
		(c)	(d)	(e)	(f)	(g)	(h)	(i)	(j)	(k)	(l)
Month/ Year of Desk Review Request	CSMS Case Nos (enter only if multiple CSMS Case Nos)	Amount of Current Support Collected	Amount of Past-Due Support/ Arrears Collected(*)	Receipt Date of Collections in Columns (c) plus (d)	Amount of Pass- Through Disbursed to SSD by the SCU	Amount of Current Support Disbursed to SSD	Amount of Current Support Disbursed to the Custodial Parent	Amount of Past-Due Support/ Arrears Disbursed to SSD	Amount Disbursed to Custodial Parent Past-Due Support/ Arrears	Date of Disbursements in Columns (f) through (j)	Amount of Available Future Support Payments
(m) TOTALS											

Note: Column (c) above represents current collections only for which a pass-through or excess current support payment may be authorized.

(\*)Column (d) represents past-due support/arrears collections, including amounts collected through enforcement actions such as federal tax refund offsets. For collections received and applied to past-due support/arrears, a pass-through payment and excess current support payments are not authorized.

### Step 3: SUMMARY TOTAL DISBURSEMENTS

Total Amount of Current Support Collected from Step 2(m), Column (c)

Total Amount of Pass-Through Disbursed to SSD by the SCU from Step 2(m), Column (f)

Total Amount of Current Support Disbursed to SSD from Step 2(m), Column (g)

Total Amount of Current Support Disbursed to Custodial Parent from Step 2(m), Column (h)

Total Amount of Past-due Support/Arrears Collected from Step 2(m), Column (d)

Total Amount Disbursed to SSD Past-due Support/Arrears from Step 2(m), Column (i)

Total Amount Disbursed to Custodial Parent Past-due Support/Arrears from Step 2(m), Column (j)

Total Amount of Available Future Support Payments Identified by the SCU from Step 2(m), Column (l)

**First-Level Review Desk Review Completed by:**

**Support Collection Unit**

\_\_\_\_\_  
Name (Please Print and Initial)

\_\_\_\_\_  
Title

\_\_\_\_\_  
Telephone Number

\_\_\_\_\_  
Date

**If Applicable, Second-Level Desk Review Completed by:**

**Division of Child Support Enforcement**

\_\_\_\_\_  
Name (Please Print and Initial)

\_\_\_\_\_  
Title

\_\_\_\_\_  
Telephone Number

\_\_\_\_\_  
Date

**STEP 4, 5, 6, 7, 8, AND/OR 9 ARE TO BE COMPLETED AS IDENTIFIED ABOVE BY THE SOCIAL SERVICES DISTRICT (SSD) WORKER AND CHECKED/CORRECTED BY THE DIVISION OF EMPLOYMENT AND TRANSITIONAL SUPPORTS (DETS) REVIEWER**

**Step 4: PASS-THROUGH PAYMENTS DISBURSEMENT TO RECIPIENT VIA EBT CARD/CHECK**

Carry Over Information from Step 2 Above		Pass-Through Payments Disbursed to Recipient Via the EBT Card/Check		Calculation of Pass-Through Payments Due to the Recipient			Support Payments Identified for Future Months from Step 2 Above
(n)	(o)	(p)	(q)	(r)	(s)	(t)	(u)
Month/Year of Desk Review Request (from column (a) above)	Amount of Pass-Through Payments Disbursed to SSD by SCU (from column (f) above)	Amount of Pass-through Payment Disbursed to Recipient by SSD	Date Disbursed to Recipient by SSD via the EBT Card/Check	Amount of Pass-through Payment Due to the Recipient (total of column (o) minus (p))	Disbursements that have Expunged (Expired), if any	Balance Due to Recipient (total of columns (r) plus (s))	Amount of Available Future Support Payments (from Column (l) above)
(v) TOTALS							



**Step 5: EXCESS CURRENT SUPPORT CALCULATION**

Month/Year of Review:	From:	<input type="text"/>	To:	<input type="text"/>
Total Unreimbursed Public Assistance Amount at the First of the Month/Year for the Period				<input type="text"/>
Total Pass-Through Amount Disbursed to the Recipient on EBT Card/Check for Period from Step 4 (v), Column (p)	-			<input type="text"/>
Countable Public Assistance Amount at the First of the Month/Year for the Period	=			<input type="text"/>
Total Current Support Collected from Step 3, First Box				<input type="text"/>
Enter the Countable Public Assistance Amount at the First of the Month/Year for the Period, as calculated above	-			<input type="text"/>
Excess Current Support	=			<input type="text"/>
Excess Current Support Amount Already Disbursed to the Recipient on EBT Card/Check by SSD	-			<input type="text"/>
Remaining Excess Current Support Due to Recipient with this Desk Review	=			<input type="text"/>
<u>ADDITIONAL PAYMENTS, IF APPLICABLE:</u>				
Amount of Pass-through Payment Due to the Recipient from Step 4(v), Column (r)	=			<input type="text"/>
Amount of Available Future Support Payments from Step 4(v), Column (u)	=			<input type="text"/>

**Step 6: REPAYMENTS TO TEMPORARY ASSISTANCE**

**Period of Public Assistance Grant Review: From \_\_\_\_\_ To \_\_\_\_\_**

Type of Repayment	Date of Repayment	Amount of Repayment to be Credited
SSI Interim Assistance Amount		
Lottery Amount		
Lien/Mortgage/Judgment Amount		
Cash Repayment Amount (after Temporary Assistance closed)		
Lawsuit Settlement Amount		
Other Repayment Type (Describe on line(s) below):		
<b>TOTAL REPAYMENT</b>		

**Step 7: EXCESS PAST-DUE SUPPORT/ARREARS CALCULATION**

Month/Year of Review:	From:	<input type="text"/>	To:	<input type="text"/>
Unreimbursed Public Assistance Amount for Period				<input type="text"/>
Total Pass-Through Amount Disbursed to the Recipient on EBT Card/Check from Step 4(v), column (p)	-			<input type="text"/>
Total Repayments from Step 6	-			<input type="text"/>
Total Countable Public Assistance Amount for Period	=			<input type="text"/>
Total Past-due Support/Arrears Collected for Desk Review Period from Step 3, Fifth Box				<input type="text"/>
Enter the Total Countable Public Assistance Amount for Period, as calculated above	-			<input type="text"/>
Excess Arrears Support	=			<input type="text"/>
Excess Arrears Support Amount Already Disbursed to the Recipient	-			<input type="text"/>
Remaining Excess Arrears Support Due to Recipient with this Desk Review	=			<input type="text"/>
<u>ADDITIONAL PAYMENTS, IF APPLICABLE:</u>				
Amount of Pass-through Payment Due to the Recipient from Step 4(v), Column (r)	=			<input type="text"/>
Amount of Available Future Support Payments from Step 4(v), column (u)	=			<input type="text"/>

**Step 8: TOTAL DUE TO RECIPIENT**

Total Remaining Excess Current Support Due to Recipient with this Desk Review from Step 5	<input type="text"/>
Total Remaining Excess Arrears Support Due to Recipient with this Desk Review from Step 7	<input type="text"/>
<u>ADDITIONAL PAYMENTS, IF APPLICABLE:</u>	
Total of Additional Pass-Through Balance Due to Recipient from Step 5 or 7	<input type="text"/>
Total Amount of Available Future Support Payments from Step 5 or 7	<input type="text"/>

**Step 9: RESULTS OF FIRST-LEVEL REVIEW OF CALCULATIONS FOR EXCESS SUPPORT PAYMENTS**

- ☐ the correct amount of excess support payments have been paid to the recipient to date.
- ☐ an additional excess support payment amount is owed to the recipient in the amount of \$\_\_\_\_\_.
- ☐ too much in excess support payments have been paid to the recipient to date and the recipient now owes \$\_\_\_\_\_.

And, if applicable:

- ☐ additional pass-through payments are owed to the recipient in the amount of \$\_\_\_\_\_.
- ☐ additional support payments have been identified as available for future months in the amount of \$\_\_\_\_\_.

*Please note: If an amount appears in brackets ( ), it means that you were overpaid and that money is due to the SSD.*

The SSD worker must complete a “Determination of the Request for a First-Level Desk Review of the Distribution of Child Support Payments” and mail the determination with a copy of this worksheet and the “Request to New York State for a Second-Level Desk Review of the Distribution of Child Support Payments” and “Information and Instructions for Completing the Request to New York State for a Second-Level Desk Review of the Distribution of Child Support Payments” to the recipient. Provide a copy of the determination and worksheet to the SCU and to the Temporary Assistance Unit (formerly the Income Maintenance Unit) directing the Temporary Assistance Unit, if appropriate, to either pay the amount calculated or recoup the overpayment amount.

**First-Level Review Desk Review Completed by:**

**Social Services District:**

\_\_\_\_\_  
Name (Please Print and Initial)

\_\_\_\_\_  
Title

\_\_\_\_\_  
Telephone Number

\_\_\_\_\_  
Date

**If Applicable, Second-level Desk Review Completed by:**

**Division of Employment and Transitional Support**

\_\_\_\_\_  
Name (Please Print and Initial)

\_\_\_\_\_  
Title

\_\_\_\_\_  
Telephone Number

\_\_\_\_\_  
Date

## **Information and Instructions for Completing the “Calculations Worksheet Desk Review of Excess Support”**

The “Calculations Worksheet Desk Review for Excess Support” has been created for use by the Support Collection Unit (SCU) and the Social Service District (SSD) workers in properly calculating excess support desk review requests. An excess support review may include a review of both current support and arrears payments. A “Calculations Worksheet for Excess Support Desk Review” must be completed to include each month for which an excess current support desk review is requested and each period in which an arrears excess support desk review is requested by completing the appropriate sections.

**STEPS 1, 2, AND 3 ARE TO BE COMPLETED AS IDENTIFIED ABOVE BY THE SCU WORKER  
AND CHECKED/CORRECTED BY THE DCSE REVIEWER**

Identify the level of desk review being performed. For the SCU workers, the box for first-level desk review must be checked. For DCSE reviewer, the box for second-level desk review must be checked.

**Check Appropriate Identifying Type of Desk Review:** Identify the type of excess support desk review being conducted by checking the appropriate box for either excess current support or excess arrears support payments desk review, or both, as follows:

- Excess Current Support Payments Desk Review: SCU workers complete Steps 1, 2, and 3; SSD workers complete Steps 4, 5, 8, and 9 only.
- Excess Arrears Support Payments Desk Review: SCU workers complete Steps 1, 2, and 3; SSD workers complete Steps 6, 7, 8, and 9 only.
- Excess Current and Arrears Support Payments Desk Review: SCU and SSD workers must complete all sections.

By selecting the appropriate box, SCU and SSD workers will be able to identify what steps require completion. Please note that an excess current support review should include a review of pass-through payments, if appropriate.

For any information identified below, the worker must review the information provided on the “Request for a First-Level Desk Review of the Distribution of Child Support Payments” form received and compare and confirm it to the information on CSMS case records first, before entering the required information on the worksheet.

### **Step 1: DESK REVIEW ADMINISTRATIVE INFORMATION**

**Date Desk Review Request Received:** Enter the date that the “Request for a First-Level Desk Review of the Distribution of Child Support Payments” form was received by the SCU worker. Be sure to enter the appropriate status code on IVDJSI of H001RC04 “REQUEST FOR DESK REVIEW RECD” on the CSMS Case.

**SCU Name:** Enter the name of the SCU that received the desk review request form.

**Period Covered By Desk Review Request:** Enter the entire period covered by the desk review written request form. Use month/year date format (MM/CCYY). A desk review is limited to an accounting of the collections and disbursements made during the current calendar year of the desk review request and the previous calendar year.

**Recipient Name:** Enter the name of the individual requesting a desk review. This is found on the desk review request form. Verify that the individual has/had a child support account established with the SCU in any month during the period for which a review is requested, and that the recipient was in receipt of public assistance during this same period. Verification can be done by reviewing CSMS, ASSETS, or the Daily IV-A/IV-D Interface Reports.

**Recipient SSN/ITIN:** Enter the recipient’s Social Security Number (SSN) or Individual Taxpayer Identification Number (ITIN) as provided on the desk review request form. An ITIN is a nine-digit number beginning with “9” which is issued by the Internal Revenue Service to foreign nationals and others who are required to have a U. S. taxpayer identification number but do not have, and are not eligible to obtain, an SSN from the Social Security Administration. The SCU worker should also verify that the SSN/ITIN agrees with the IVDJCH screen on CSMS for the custodial parent. If it does not, the SCU worker should investigate and update if appropriate.

**Recipient Address:** Enter the address of the individual requesting a desk review as provided on the desk review request form. The SCU worker should also verify that it agrees with the last known address on the IVDJCH or IVDJCM screen on CSMS for the custodial parent and update if necessary.

**Noncustodial Parent Name(s):** Enter the name(s) of the noncustodial parent identified on the desk review request form. Verify that the individual(s) is/are the noncustodial parent(s) on the CSMS child support account(s) established with the SCU in any month during the period for which a review is requested.

**Noncustodial Parent SSN/ITIN(s):** Enter the noncustodial parent's Social Security Number(s) (SSN) or Individual Taxpayer Identification Number(s) (ITIN) as provided on the desk review request form. An ITIN is a nine-digit number beginning with "9" which is issued by the Internal Revenue Service to foreign nationals and others who are required to have a U. S. taxpayer identification number but do not have, and are not eligible to obtain, an SSN from the Social Security Administration. The SCU worker should also verify that the SSN/ITIN agrees with the IVDJRI screen on CSMS for the noncustodial parent. The SSN would appear as the primary SSN on the IVDJRI screen; the ITIN would appear as the alternate SSN only, with no primary SSN, on the IVDJRI screen. If the SSN/ITIN does not agree, verify and correct if appropriate.

**CSMS Case No(s):** Enter the unique 9-character alphanumeric (e.g., AA12345K1) identifier(s) assigned to each custodial parent/noncustodial parent relationship. If the custodial parent has more than one CSMS Case Number, the SCU worker should determine whether each CSMS case is relevant to the desk review request. A relevant CSMS Case Number should reflect the relationship to the public assistance case by matching the CAN entered on the PA CAN field on the IVDJCH screen with the CAN entered on the desk review request form. The CSMS cases included may involve a payment which impacted more than one CSMS Case Number, or a case that may involve more than one local district.

**Public Assistance Case No(s) (CAN):** Enter the unique WMS case identifier assigned to each recipient of services. This may be found in the PA CAN field on the IVDJCH screen on CSMS.

**CIN No.:** Enter the Client Identification Number(s) (CIN) for the public assistance case head. The CIN number is an eight position identifier code which is assigned to each member of a public assistance case household. A CIN is unique to an individual and there can be many CINs associated to one CAN. The CIN for each household member can be located on CSMS IVDJCH screen on CSMS. (Please refer to the "Dear Colleague" letter dated May 28, 2004, for changes to the WMS data match process regarding CIN numbers.)

**Dates of Public Assistance:** Enter the beginning and ending date of the public assistance grant(s) involved.

**Active:** Check the appropriate box to identify whether the CAN is active on CSMS. The information may be located on the IVDJCH screen in CSMS for each custodial parent and child record. Active public assistance case statuses are 07, 10, and 17. Every member of the public assistance household does not need to be active in order to consider the case to be active, but at least one party or child must have an active status. If the custodial parent and each child do not have an active case status, then the case status is considered closed. (Please refer to the "Dear Colleague" letter dated May 28, 2004, for changes to the WMS data match process regarding CAN/CIN.)

## **Step 2: CHILD SUPPORT COLLECTIONS AND DISBURSEMENT CALCULATIONS**

Information for Step 2 must be recorded for each separate month of the review using a separate line for each month. If the number of payments received and recorded exceeds the capacity allowed in Step 2 of the worksheet, please make a copy of the page and insert it with the worksheet package. Continue recording payments as required and bring the total of the multiple pages forward.

This step is for child support collections and disbursements only.

**(a) Month/Year of Desk Review Request:** Enter each month/year included in the desk review request. For example, the desk review is requested for January through June of 2006. Therefore, you would enter 01/2006, 02/2006, 03/2006, 04/2006, 05/2006, and 06/2006, in this column. Please note that a desk review is limited to an accounting of the collections and disbursements made during the calendar year in which the desk review is requested and the calendar year preceding the calendar year in which the desk review is requested.

**(b) CSMS Case Nos (enter only if multiple CSMS Case Numbers):** See above information in Step 1 regarding CSMS Case Numbers. Enter CSMS Case Number(s) if multiple cases are involved.

## **COLLECTIONS RECEIVED**

**(c) Amount of Current Support Collected:** For each month of the review period, enter the amount of current support collected up to the amount of current support due for each month as it appears on the account tab, MONEY screen, on ASSETS. You may also locate the information on the IVDHTM, or if applicable, IVDITM (most current three months), or

IVDHTO, or if applicable, IVDITO (nine months prior) screens on CSMS, if the time period of the review is limited to these records. ASSETS contains an account document generator tool which allows for easy identification of payments and disbursements for a set period of time.

Current support means support which is paid (or withheld from the child support payor's wages) in the month when the support is due. Please note that no pass-through will be allowed for payments received towards past-due support/arrears, such as tax refund offsets, and as such, only current support payments are to be reported. To identify payments for past-due support/arrears, see (d).

Please note that collections for both current and arrears would appear in the PAID column on the money screens as noted above as batches 50, 53, 54, 55, 56, and 57 transactions, and will appear in the APPL (Applied) column on the money screens as noted above as positive batches 71, 72, 74, 75 and 77 transactions, for the month in question.

Current support due and/or paid and applied to a charging eligible ledger indicates the recipient is due a pass-through payment. Eligible pass-through payment ledgers are: 21A\_, 23A\_, 21BP, 23BP, 21BR, 23BR, 21CP, 23CP, 21CR, 23CR, 21CA, and 23CA, with a retained FIPS code.

Excess current support only requires a review of all charging ledgers with a 21A\_, 23A\_, 21BI, 23BI, 21BP, 23BP, 21BR, 23BR, 21CA, or 23CA ledger types. All eligible excess support ledgers are 2\_A\_, 2\_BJ\_, 2\_BI\_, 2\_BP\_, 2\_BR\_, 2\_CA\_, 24AX, or 24BX. SCU workers can determine if there are active charging current support ledgers as identified above by reviewing IVDQFS and checking the first and last charge dates with an obligation amount greater than zero and a ledger status of "01" for active.

Because excess support involves current and former recipients of public assistance, all ledgers will require review in this process.

SCU workers must consider the batch type payment along with the ledger type to determine payments applied to current support and payments applied to past-due support/arrears.

**(d) Amount of Past-Due Support/Arrears Collected (\*):** Enter the amount of past-due support/arrears collected as it appears on the account tab, MONEY screen, on ASSETS. You may also locate the information on the IVDHTM, or if applicable, IVDITM (most current three months), or IVDHTO, or if applicable, IVDITO (nine months prior) screens on CSMS, if the time period of the review is limited to these records. ASSETS contains an account document generator tool which allows for easy identification of payments and disbursements for a set period of time.

When the current support is not paid timely, past-due support has accrued and is enforceable. Enforcement actions may consist of income withholding, federal tax refund offset, Property Execution (PEX), New York State tax refund offset, and Lottery Intercept. Collections would appear as batch 50, 53, 54, 55, 56, 57, and positive batch 71, 72, 74, 75 and 77 transactions for the past months in question.

Because excess support involves current and former recipients of public assistance, all ledgers will require review in this process. Eligible excess arrears support ledgers are 2\_A\_, 2\_BJ\_, 2\_BI\_, 2\_BP\_, 2\_BR\_, 2\_CA\_, with a "2" or "4" in the second position, and 24AX\_, or 24BX\_. SCU workers can determine if there are active charging current support ledgers as identified above by reviewing IVDQFS and checking the first and last charge dates with an obligation amount greater than zero and a ledger status of 01 for active. Excess support review may also include review of all ledgers with a "1" in the first position for custodial parents as beneficiaries.

The amount of past-due support/arrears collected can be determined by: (1) comparing the collections for each month during the review period identified as batch 79 APP transactions to the batch 69 DUE transactions for each current support ledger listed above; (2) if the comparison results in the batch 79 APP transaction being equal to or less than the batch 69 DUE transaction for the ledger, no collection of past-due support/arrears was made on that ledger for that month; (3) if the comparison results in the batch 79 APP transaction being greater than the batch 69 DUE transaction for the ledger, then the amount of the difference (batch 79 minus batch 69) for that ledger is the amount collected for past-due support/arrears that was made on that ledger for that month; and (4) sum the batch 79 APP transactions for all past-due support/arrears ledgers listed above (second ledger position of 2 or 4) for each month of the review period as this sum is the amount which was/should be distributed as past-due support/arrears.

**(e) Receipt Date of Collections in Columns (c) plus (d):** Enter the date that each current and arrears payment was received for the batches identified above.

**DISTRIBUTION FROM CURRENT SUPPORT COLLECTED**

**(f) Amount of Pass-Through Disbursed to SSD by the SCU:** This may also include the amount of any pass-through (disregard) distribution transactions created at month end to the SSD. These will appear as a batch 98 or 97 transaction on the account tab, MONEY screen, on ASSETS, or on the IVDHTM, or if applicable, IVDITM (most current three months), or IVDHTO, or if applicable, IVDITO (nine months prior) screens on CSMS, if the time period of the review is limited to these records.

Pass-through payment authorization to the SSD is indicated by a batch 98 transaction. A batch 97 transaction in a subsequent month or months indicates additional pass-through for a prior month. This occurs typically when an employer withholds child support in the month it is due to be paid but the payments are received for the prior month or not processed on CSMS until the following month or later. The batch 97 transaction will only be created for payments dated within three months prior to the current month. No batch 97 transaction will be entered for any payment that was withheld over three months prior to the date it was processed on CSMS. Additionally, in some instances, paper case records reflecting month end authorization transactions or adjustments to the month end authorization transactions may be required.

**(g) Amount of Current Support Disbursed to SSD:** Enter the amount of any distribution transaction during the month to the SSD. These would appear as batch 89 transactions with a beneficiary indicator of -2- in the BATCH NO. field on the account tab, MONEY screen, on ASSETS, or on the IVDHTM, or if applicable, IVDITM (most current three months), or IVDHTO, or if applicable, IVDITO (nine months prior) screens on CSMS, if the time period of the review is limited to these records.

**(h) Amount of Current Support Disbursed to the Custodial Parent:** Enter the amount of any distribution transaction during the month to the custodial parent (recipient). These would appear as batch 89 transactions with a beneficiary indicator of -1- or -5- in the BATCH NO. field on the account tab, MONEY screen, on ASSETS, or on the IVDHTM, or if applicable, IVDITM (most current three months), or IVDHTO, or if applicable, IVDITO (nine months prior) screens on CSMS, if the time period of the review is limited to these records.

**DISTRIBUTION FROM PAST-DUE SUPPORT/ARREARS COLLECTED**

**(i) Amount Disbursed to SSD Past-Due Support/Arrears:** Enter the amount of any distribution transaction during the month to the SSD. These would appear as batch 89 transactions with a beneficiary indicator of -2- in the BATCH NO. field on the account tab, MONEY screen, on ASSETS, or on the IVDHTM, or if applicable, IVDITM (most current three months), or IVDHTO, or if applicable, IVDITO (nine months prior) screens on CSMS, if the time period of the review is limited to these records.

**(j) Amount Disbursed to the Custodial Parent Past-Due Support/Arrears:** Enter the amount of any distribution transaction during the month to the custodial parent (recipient). These would appear as batch 89 transactions with a beneficiary indicator of -1- or -5- in the BATCH NO. field on the account tab, MONEY screen, on ASSETS, or on the IVDHTM, or if applicable, IVDITM (most current three months), or IVDHTO, or if applicable, IVDITO (nine months prior) screens on CSMS, if the time period of the review is limited to these records.

**(k) Date of Disbursements in Column (f) through (j):** Enter the date that the payments were disbursed and/or authorized to the SSD or to the custodial parent.

**SUPPORT PAYMENTS IDENTIFIED FOR FUTURE MONTHS**

**(l) Amount of Available Future Support Payments:** Enter the amount of any known support payments available for future month disbursements, including any payments identified during account maintenance which are to be authorized at month end by the SSD. Examples of this situation may occur when a desk review request is submitted and conducted prior to month end (e.g. a batch 79 entry indicates application of a payment but a batch 98 has not been created yet), or if an SCU worker makes ledger adjustments which will result in a Batch 98 disregard disbursement entry at month end.

**(m) TOTALS:** Enter the totals for columns (c), (d), (f), (g), (h), (i), (j), and (l).

**Step 3: SUMMARY TOTAL DISBURSEMENTS**

**Total Amount of Current Support Collected from Step 2(m), Column (c):** Enter the total amount calculated in step 2, column (c), as entered in the total column (m).



**Total Amount of Pass-Through Disbursed to SSD by the SCU from Step 2(m), Column (f):** Enter the total amount calculated in step 2, column (f), as entered in the total column (m).

**Total Amount of Current Support Disbursed to SSD from Step 2(m), Column (g):** Enter the total amount calculated in step 2, column (g), as entered in the total column (m).

**Total Amount of Current Support Disbursed to Custodial Parent from Step 2(m), Column (h):** Enter the total amount calculated in step 2, column (h), as entered in the total column (m).

**Total Amount of Past-Due Support/Arrears Collected from Step 2(m) Column (d):** Enter the total amount calculated in step 2, column (d), as entered in the total column (m).

**Total Amount Disbursed to SSD Past-Due Support/Arrears from Step 2(m), Column (i)** Enter the total amount calculated in step 2, column (i), as entered in the total column (m).

**Total Amount Disbursed to Custodial Parent Past-Due Support/Arrears from Step 2(m), Column (j):** Enter the total amount calculated in step 2, column (j), as entered in the total column (m).

**Total Amount of Available Future Support Payments Identified by the SCU from Step 2(m), Column (l) Total:** Enter the total amount calculated in step 2, column (l) as entered in the total column (m).

#### **First-Level Desk Review Completed By**

**Support Collection Unit:** Enter the name and initials, title, and telephone number of the SCU worker who completed the worksheet and the date completed.

**If Applicable, Second-level Desk Review Completed by:** If a second-level desk review has been requested through the State Division of Child Support Enforcement (DCSE), a DCSE reviewer will confirm the information provided on the worksheet by entering the name and initials, title, and telephone number of the DCSE reviewer who completed the second-level review and confirms the information. If the first-level review contains errors, or new information is provided with the second-level desk review request that modifies the calculations, the DCSE reviewer will cross out any incorrect information and enter any correct information legibly, carry that correction forward in the calculations for Steps 1, 2, and 3 of the calculation worksheet, and forward the worksheet to the Division of Employment and Transitional Support (DETS) to complete the second-level desk review.

**NOTE:** Account maintenance of the CSMS case and ledgers may be required prior to completing this section of the worksheet. Examples include determining whether the CSMS case ledger(s) accurately reflect the status of public assistance; whether the CAN and CIN numbers on CSMS are in agreement with WMS records (refer to the May 28, 2004 “Dear Colleague” letter for changes to the process); and whether the recipient SSN/ITIN and address on CSMS matches what was provided with the desk review request. Be sure to review each Batch 79 transaction on IVDHST in the month and for a specific ledger or ledgers to confirm what has been applied is correct.

The SCU worker may verify public assistance information by utilizing the IV-A/IV-D Interface Reports; by accessing public assistance records through CSMS (select F-12 (upstate) or F-2 (New York City) to determine whether the CAN or CIN information on CSMS is in agreement with WMS/BICS records); or by reviewing public assistance records through ASSETS (from the CASE tab, enter Client or Child tabs, locate the link for the CAN or CIN fields on the page, and click on the link to bring up the public assistance information).

The SCU worker must review the case records and reports to determine whether updates to CSMS are appropriate and complete any updates before proceeding with the desk review and forwarding the complete package to the SSD.

**Once the SCU worker completes the CSMS case review and Parts 1, 2, and 3 of the worksheet, the worksheet must be forwarded to the SSD worker so that they may complete Parts 4, 5, 6, 7, 8, and/or 9, and provide with the final determination:**

- 1) The “Calculations Worksheet Desk Review of Excess Support” with Parts 1, 2, and 3 completed and signed by the SCU worker and a supervisor;

- 2) The "Instructions for Completing the Calculation Worksheet Desk Review of Excess Support" for reference only; and
- 3) The original "Request for First-Level Desk Review of the Distribution of Child Support Payments" form.

**STEPS 4, 5, 6, 7, 8, AND/OR 9 ARE TO BE COMPLETED AS IDENTIFIED ABOVE BY THE SSD WORKER AND CHECKED/CORRECTED BY THE DETS REVIEWER**

**Excess current support** cases appear on the monthly report, the CSMS-8649, "Obligation and Collections Greater than Assistance Granted." The report is based on the ABEL budget stored/authorized as of the date of the report pull down, and is available by the first Friday of every month. Upstate BICS' operators must print the monthly CSMS 8649 for immediate distribution to SSD workers. If the SSD worker determines that the countable public assistance (plus the child support pass-through) issued in the month is less than the support collected in the month, the worker must issue the excess current support using payment type D3 upstate with special claiming code N (Non-reimbursable), and 71 (NYC). This report is also an important tool for determining when a case with regular collections of assigned support may become ineligible for TA based on excess income.

**Excess past-due support/arrears** is the automated process in which the total of all countable public assistance payments (plus issued pass-through or excess current support payments) over the life of the public assistance case are measured against the total child support retained by the SSD agency for the same period. The automated process captures most, but not all necessary case financial information. For example, repayments from sources such as lawsuit settlements, liens on real property, cash repayments by SSI interim assistance reimbursement, etc. are not considered in the automated process. Excess past-due support/arrears payments are made using D4 with special claiming code N (Non-reimbursable) upstate, and 72 in NYC.

**Step 4: PASS-THROUGH PAYMENTS DISBURSEMENT TO RECIPIENT VIA EBT CARD**

**CARRY OVER INFORMATION FROM STEP 2 ABOVE**

(n) **Month/Year of Desk Review Request (from column (a) above):** Enter each month/year included in the desk review request as it corresponds to the month/year identified under Step 2, column (a), for consistency. The format is MM/CCYY.

(o) **Amount of Pass-Through Payments Disbursed to SSD (from column (f) above):** Enter the amount identified in Step 2, column (f) by the SCU as disbursed to the SSD.

**PASS-THROUGH PAYMENTS DISBURSED TO RECIPIENT VIA EBT CARD/CHECK**

(p) **Amount of Pass-through Payment Disbursed to Recipient by SSD:** Enter the amount of any pass-through payments which were disbursed to the recipient by public assistance on an EBT card or by check. Pass-through payments are paid to a recipient when current support has been collected on their behalf by the SCU during the previous month and disbursed at month end to the SSD. By law, up to the first \$50.00 per month of current support collected is passed-through to a recipient. Please note that the maximum total of \$50.00 per month of pass-through payments may be disbursed for each public assistance family. SSD workers can locate this information on the WMS/BICS "Case Record of Assistance (CRA)."

(q) **Date Disbursed to Recipient by SSD via the EBT Card/Check:** Enter the date that the pass-through disbursement amount was disbursed to the recipient by the SSD on their EBT card or by check.

**CALCULATION OF PASS-THROUGH PAYMENTS DUE TO THE RECIPIENT**

(r) **Amount of Pass-through Payment Due to the Recipient (total of column (o) minus (p):** Enter the difference between column (o) minus column (p). This is the total of final amount of pass-through payments that are due to the recipient based on the desk review.

(s) **Disbursement that has been Expunged (Expired), if any:** Enter any amount of pass-through payments that were expunged (expired). Expunged payments are payments which were issued to the recipient but were not picked up in full or were only partially picked up and access to the funds has now expired. The expired funds may be due to the recipient. SSD workers may locate expunged funds on the EBT report entitled "EBT - Worker Actions Lists" or WMS/BICS "Case Record of Assistance (CRA)" for an individual's benefit information.

(t) **Balance Due to Recipient (totals of columns (r) plus (s):** Enter the total amount of pass-through payments due to the recipient with the desk review, if any. This amount is the total of columns (r) plus (s).

**SUPPORT PAYMENTS IDENTIFIED FOR FUTURE MONTHS FROM STEP 2 ABOVE**

(u) **Amount of Available Future Support Payments (from column (l) above):** Enter the amount that the SCU has determined will be disbursed to the SSD at month end. This amount can be found in Step 2, column (l).

(v) **TOTALS:** Enter the totals for columns (o), (p), (r), (s), (t), and (u).

**Step 5: EXCESS CURRENT SUPPORT CALCULATION**

**Month/Year of Review:** Enter the beginning (FROM) and ending (TO) month/year included in the desk review request. The format is MM/CCYY.

**Total Unreimbursed Public Assistance Amount at the First of the Month/Year for the Period:** SSD workers may locate this on the WMS/BICS “Case Record of Assistance (CRA)” which provides individual’s benefit information.

**Total Pass-Through Amount Disbursed to the Recipient on EBT Card/Check for Period from Step 4(v), Column (p):** Enter the amount of pass-through disbursed to the recipient on the EBT card calculated in Step 4, column (p), and entered in the total column (v).

**Countable Public Assistance Amount at the First of the Month/Year for the Period:** Enter the difference between the Total Unreimbursed Public Assistance at the First of the Month/Year for the Period (minus) the Total Pass-Through Amount Disbursed to the Recipient on the EBT card/check for the Period.

**Total Current Support Collected from Step 3, First Box:** Enter the total amount of current support collected from Step 3.

**Enter the Countable Public Assistance Amount at the First of the Month/Year for the Period, as calculated above:** Enter the calculated amount from above.

**Excess Current Support:** Enter the difference between the Total Amount of Current Support Collected from Step 3, First Box, (minus) Countable Public Assistance Amount at the First of the Month/Year for the Period

**Excess Current Support Amount Already Disbursed to the Recipient on EBT Card/Check by SSD:** Enter the amount of excess current support already disbursed to the recipient. SSD workers may locate this on the WMS/BICS “Case Record of Assistance (CRA)” for an individual’s benefit information.

**Remaining Excess Current Support Due to Recipient with this Desk Review:** Enter the difference between the Excess Current Support (minus) Excess Current Support Amount Already Disbursed to the Recipient. This is the amount of excess current support now due to the recipient via the desk review calculation.

**ADDITIONAL PAYMENTS, IF APPLICABLE:**

**Amount of Pass-Through Due to Recipient from Step 4(v), Column (r):** Enter the amount of additional pass-through payments due to the recipient from Step 4, column (r), as entered in total column (v). This amount of pass-through is now due to the recipient based upon the desk review calculation.

**Amount of Available Future Support Payments from Step 4(v), Column (u):** Enter the amount of any future payments calculated by the SCU for future disbursements as entered in Step 4, column (u), as entered in total column (v).

**Step 6: REPAYMENTS TO TEMPORARY ASSISTANCE**

This step is established to identify any repayments made to temporary assistance towards recouping benefits administered. The SSD will need to inquire through their accounting department to determine if any of the items listed (SSI Interim Assistance Amount; Lottery Amount; Lien/Mortgage/Judgment Amount; Cash Repayment Amount; Lawsuit Settlement Amount; or any other repayments) have occurred and record the date and amount of the repayments. Any repayments made that effect the desk review grant period must be included below in the below past-due support/arrears final calculations.

**Step 7: EXCESS PAST-DUE/ARREARS SUPPORT CALCULATION**

**Month/Year of Review:** Enter the beginning (FROM) and ending (TO) month/year included in the desk review request. The format is MM/CCYY.

**Unreimbursed Public Assistance Amount for the Period:** Enter the amount of unreimbursed public assistance for the period.  
SSD workers may locate this on the WMS/BICS “Case Record of Assistance (CRA)” which provides individual’s benefit information.

**Total Pass-Through Amount Disbursed to the Recipient on EBT Card/Check for Period from Step 4(v), Column (p):** Enter the amount of pass-through disbursed to the recipient on the EBT card/check calculated in Step 4, column (p), as entered in total column (v).

**Total Repayments From Step 6:** Enter the total amount of any repayments calculated in Step 6 that effect the amount of public assistance during the period identified for the desk review. This information is available through the accounting department of the SSD.

**Total Countable Public Assistance Amount for the Period:** Enter the difference between the Unreimbursed Public Assistance for the Period (minus) the Total Pass-Through Amount Disbursed to the Recipient on the EBT card/check for the Period (and minus) the Total Repayments from Step 6.

**Total Past-Due Support/Arrears Collected for Desk Review Period from Step 3, Fifth Box:** Enter the total of the past-due support/arrears collected as calculated by the SCU in Step 3, fifth box.

**Enter the Total Countable Public Assistance Amount for the Period, as calculated above:** Enter the calculation from above.

**Excess Arrears Support:** Enter the difference between the Total Past-Due Support/Arrears and Enforcement Support Collected for Desk Review Period (minus) Countable Public Assistance Amount for the Period.

**Excess Arrears Support Amount Already Disbursed to the Recipient:** Enter the amount of excess arrears support already disbursed to the recipient. SSD workers may locate this on the WMS/BICS “Case Record of Assistance (CRA)” which provides individual’s benefit information.

**Remaining Excess Arrears Support Due to Recipient with this Desk Review:** Enter the difference between the Excess Arrears Support (minus) Excess Arrears Support Amount Already Disbursed to the Recipient. This is the amount of arrears support now due to the recipient via the desk review calculation.

ADDITIONAL PAYMENTS, IF APPLICABLE:

**Amount of Pass-Through Due to Recipient from Step 4(v), Column (r):** Enter the amount of pass-through payments due to the recipient from Step 54 column (r), and entered in total column (v). This amount of pass-through is now due to the recipient via the desk review calculation.

**Amount of Available Future Support Payments from Step 4(v), Column (u):** Enter the amount of any available future support payments calculated by the SCU in Step 4, column (u), and entered in total column (v).

**Step 8: TOTAL DUE TO RECIPIENT**

**Total Remaining Excess Current Support Due to Recipient with this Desk Review from Step 5:** Enter the total amount of excess current support due to recipient as calculated in step 5.

**Total Remaining Excess Arrears Due to Recipient with this Desk Review from Step 7:** Enter the total amount of excess arrears due to the recipient as calculated in step 8.

ADDITIONAL PAYMENTS, IF APPLICABLE:

**Total Pass-Through Balance Due to Recipient from Step 5 or 7:** Enter the total amount calculated in step 5, for current, or 7, for arrears, as appropriate.

**Total Amount of Future Support Payments from Step 5 or 7:** Enter the total amount calculated in step 5, for current, or step 7, for arrears, as appropriate.

**Step 9: RESULTS OF FIRST-LEVEL DESK REVIEW OF EXCESS SUPPORT PAYMENTS**

The SSD worker must check the box which accurately reflects the results of the desk review. There are three options boxes available: 1) the correct amount of excess support payments have been paid to the recipient to date; 2) an additional amount of excess support payments is owed to the recipient in the amount of \$\_\_\_\_\_; or 3) too much in excess support payments have been paid to the recipient to date and the recipient now owes \$\_\_\_\_\_.

Enter dollar amounts where indicated. If too much money has been paid to the recipient, indicate the overpayment by entering brackets around the dollars entered.

Additionally, if a pass-through payment has been identified by the SCU as being due to the recipient, this needs to be reported to the recipient as well. If an amount has been carried down to Step 5 or 7, check the option box and enter the amount. If a future support payment has been identified by the SCU, this needs to be reported to the recipient as well. If an amount has been carried down to Step 5 or 7, check the option box and enter the amount.

**First-Level Desk Review Completed By**

**Social Services District:** Enter the name and initials, title, and telephone number of the SSD worker who completed the worksheet, and the date completed.

**If Applicable, Second-level Desk Review Completed by:** If a second-level desk review has been requested and a DCSE reviewer has forwarded the second-level request to DETS, a DETS reviewer will confirm the information provided on the worksheet by entering the name and initials, title, and telephone number of the DETS reviewer who completed the second-level review and confirms the information. If the first-level review contains errors, or new information is provided with the second-level desk review request that modifies the calculations, the DETS reviewer will cross out any incorrect information and enter any correct information legibly, carry that correction forward in steps 4, 5, 6, 7, 8, and/or 9, as appropriate, on the worksheet, and complete the second-level desk review.

**Note:** Account maintenance of the WMS case and/or records may be required prior to completing this section of the worksheet. Examples include determining whether the WMS case record CAN and CIN agree with the CSMS numbers reported above; whether the recipient address on WMS is the same address as provided with the desk review request; whether any pass-through payments disbursed to the SSD require review as reported on the IV-D Exception Report; and/or whether previous pass-through disbursements on a recipient EBT card have been expunged (expired) and funds remain due through the accounting department. SSD workers must review the case records and reports to determine whether updates to WMS must be completed and accomplish those updates before proceeding with the desk review.

Once the SSD worker completes the WMS/BICS case review and Parts 4, 5, 6, 7, 8, and/or 9 of the worksheet, as appropriate, they must finalize the first-level final determination by completing a "Determination of the Request for a First-Level Desk Review of the Distribution of Child Support Payments." A copy of each of the following must be attached and become part of the final determination package:

- 1) The original "Request for a First-Level Desk Review of the Distribution of Child Support Payments" form and any documentation provided by the recipient for the desk review;
- 2) The "Calculation Worksheet Desk Review of Excess Support Payments" with Parts 1, 2, and 3 completed as appropriate and signed by the SCU worker, and Parts 4, 5, 6, 7, 8, and/or 9 completed, as appropriate, and signed by the SSD worker;
- 3) A "Request to New York State for a Second-Level Desk Review of the Distribution of Child Support Payments" form; and
- 4) Information and Instructions for Completing the "Request to New York State for a Second-Level Desk Review of the Distribution of Child Support Payments."

[SCU or SSD LETTERHEAD]

**TO:**

---

---

---

**Date:** \_\_\_\_\_

**PA Case No.(s).** \_\_\_\_\_

---

**CSMS Case ID No.(s)** \_\_\_\_\_

---

## Determination of the Request for a First-Level Desk Review of the Distribution of Child Support Payments

Dear \_\_\_\_\_:

The request for a desk review for the distribution of child support for your public assistance case(s) identified above has been completed. The period of review you requested was from \_\_\_\_\_ (month/year) to \_\_\_\_\_ (month/year), or for the following individual months: \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_, (month/year).

The result(s) of the desk review for the period identified above is(are) as follows:

- ☐ Your request did not include adequate information to identify the public assistance case or the child support case. No action can be taken unless you provide us with better identifying information. You may submit a new desk review request form with adequate information to identify your public assistance case or the child support case by contacting the New York State Customer Service Helpline at 1-888-208-4485.
- ☐ The correct amount of support to date has been distributed to you.
- ☐ Additional support is owed to you in the amount of \$\_\_\_\_\_. The additional amount owed to you will be available no later than \_\_\_\_\_ and will be disbursed to you ☐ on your Electronic Benefit Transfer (EBT) card or ☐ through a check.
- ☐ The SCU has identified support payments that may be available in future months in the amount of \$\_\_\_\_\_. If you are still eligible to receive these payments, they will be distributed to you as they come due. The payment will be placed on your Electronic Benefit Transfer (EBT) card or be disbursed through a check.
- ☐ It has been determined that too much support has been issued to you and you now owe \$\_\_\_\_\_. Please note that your public assistance grant amount may be recalculated to incorporate the overpayment amount, and this may occur within 30 calendar days.
- ☐ The months for which you requested a review are not within the calendar year in which you requested the review or the prior calendar year. (Desk reviews are limited to the calendar year in which the review is requested and the prior calendar year.)
- ☐ You were not a recipient of public assistance or you had no support account established with the Support Collection Unit at any time during the months for which you requested a review.
- ☐ Your request does not involve a matter that can be addressed by the local support collection unit or the social services district. Therefore, no action can be taken by these agencies.
- ☐ All current support collected on your behalf was forwarded to another social services district for distribution. For a desk review of your account with that social services district, you will need to submit your desk review request to:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

- ☐ Other (specify)

\_\_\_\_\_

\_\_\_\_\_

Detailed information for each month of the period of the desk review regarding the child support payments received and the distribution of those payments is shown on the enclosed worksheet. A copy of any documentation considered in the desk review is also enclosed.

Sincerely,

\_\_\_\_\_  
SSD Desk Review Unit  
Telephone Number: \_\_\_\_\_

NOTE: If you dispute specific facts contained in this desk review determination, you may request a second-level review by the New York State Division of Child Support Enforcement by submitting a written request on the enclosed "Request to New York State for a Second-level Desk Review of the Distribution of Child Support Payments" within 20 calendar days of the date of the above SSD determination. You must have received an SSD determination of a desk review request **before** you request a second-level review. Your request must specify the facts in dispute and must include a copy of this SSD determination complete with all enclosures. You may include any additional but previously unavailable documentation that may support your claim. Send the request to:

NYS Division of Child Support Enforcement  
ATTN: Bureau of Program Operations, Second-level Desk Review  
40 N. Pearl Street, 13<sup>th</sup> Floor,  
Albany, NY 12243-0001



Name: \_\_\_\_\_ SSN: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

*apt.*

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Telephone Number: \_\_\_\_\_ Best Time to Contact You: ☐ Daytime ☐ Evening

Public Assistance Case Number(s): \_\_\_\_\_

Child Support Case ID Number(s): \_\_\_\_\_

---

---

---

---

---

**Documentation:** You must attach a copy of the SCU/SSD desk review determination letter and any additional but previously unavailable documentation in support of your claim that distribution was incorrect. Please confirm this by checking the appropriate boxes:

- ☐ I have attached a copy of the SCU/SSD determination and it is dated within 20 calendar days of this request.
- ☐ I have also attached additional documentation to support my claim which was previously unavailable.

signature of person requesting second-level desk review

---

print name of person requesting desk review

\_\_\_\_\_

date

New York State Division Child Support Enforcement  
ATTN: Bureau of Program Operations, Second-Level Desk Review  
40 N. Pearl Street, 13<sup>th</sup> Floor  
Albany, New York 12243-0001

## Information and Instructions for Completing the “Request to New York State for a Second-Level Desk Review of the Distribution of Child Support Payments”

You may request a second-level desk review of the distribution of your child support payments if you dispute specific facts contained in the Support Collection Unit (SCU) and Social Services District (SSD) **Determination of the Request for a First-Level Desk Review of the Distribution of Child Support Payments** provided in this package. If you wish to request a second-level desk review, you must complete this form, attach a copy of the SCU/SSD **Determination of the Request for a First-Level Desk Review of the Distribution of Child Support Payments** and any attachments such as the worksheet and documentation provided, and a copy of any additional but previously unavailable documentation that supports your claim that the distribution was incorrect, and return it to the New York State Division of Child Support Enforcement (DCSE) within 20 calendar days of the date of the SCU/SSD’s determination at the address shown at the bottom of this form. DCSE will work with the New York State Division of Employment and Transitional Supports (DETS) to issue a written determination on your request within 30 calendar days of the date that your written request is received.

If you wish to request a second-level desk review, you must complete this form as follows:

**Personal information:** Enter your name, Social Security Number (SSN) or Individual Taxpayer Identification Number (ITIN), current mailing address, contact telephone number, and the best time to reach you at that number. An ITIN is a nine-digit number beginning with “9” which is issued by the Internal Revenue Service to foreign nationals and others who are required to have a U. S. taxpayer identification number but do not have, and are not eligible to obtain, an SSN from the Social Security Administration.

**Case information:** Enter your public assistance case number(s) (CAN), and/or child support account number(s). You must include as much of this information as you have in order to properly identify your case(s).

**Facts in Dispute:** Clearly state the fact(s) identifying why you disagree with the first-level desk review determination. You must be specific (for example, an additional payment in the amount of \$100.00 is missing from the calculation).

**Name of the County Social Services District (SSD):** Please state the name of the county SSD that provided the **Determination of the Request for a First-Level Desk Review of the Distribution of Child Support Payments**. This can be located on the determination letterhead.

**Documentation:** You must attach to this form a copy of the SCU/SSD **Determination of the Request for a First-Level Desk Review of the Distribution of Child Support Payments**, and any attachments such as the worksheet and documentation provided with the first-level desk review. You may also provide a copy of any additional but previously unavailable documentation that supports your claim that the distribution was incorrect (for example, if you dispute the facts based on a missing payment, you may include a copy of the missing payment instrument). Please confirm the type of documentation included by checking the appropriate box(es).

**Certification:** Complete the certification for the second-level desk review request by entering the name of the county SSD office that issued the SCU/SSD **Determination of the Request for a First-Level Desk Review of the Distribution of Child Support Payments** letter and the date of the determination letter. You must sign, print your name, and date the request for a second-level desk review.

Once you have completed the **Request to New York State for a Second-Level Desk Review of the Distribution of Child Support Payments**, submit the completed form and documentation to DCSE at the address shown at the bottom of the form. After you send in the **Request to New York State for a Second-Level Desk Review of the Distribution of Child Support Payments** and any new documentation, DCSE and DETS will review your case and the results of the SCU/SSD’s first-level determination. The review and results will determine if an adjustment is necessary and you are owed an additional payment or if too much support has been paid to you, or if no adjustment is necessary and you have received the correct amount of support. If you are owed an additional payment, the DETS may direct the SSD to distribute that payment to you on your Electronic Benefits (EBT) card or, in some circumstances, by check. If too much support has been paid to you, the DETS may direct the SSD to recoup the overpayment through the monthly benefits process within 30 calendar days from the date of the determination letter. Once the second-level desk review is completed, the DETS will issue a written response to you within 30 calendar days of the date that your written request is received.

If you have questions or concerns regarding the notice or instructions provided, contact the Customer Service Helpdesk at 1-888-208-4485.



New York State

**Office of Temporary and Disability Assistance**  
**Division of Employment and Transitional Supports**
Excess Support Desk Review Unit - 40 N. Pearl Street, 11<sup>th</sup> Floor - Albany, NY 12243**TO:****Date:** \_\_\_\_\_**PA Case No.** \_\_\_\_\_**CSMS Case No.** \_\_\_\_\_

## Determination of the Second-Level Desk Review

Dear \_\_\_\_\_:

The request for a second-level desk review submitted for the distribution of child support payments received on the case(s) identified above conducted by the \_\_\_\_\_ Social Services District (SSD), dated \_\_\_\_\_, has been completed. In your request you stated that you disputed the following specific facts contained in the SSD **Determination of the Request for a First-Level Desk Review of the Distribution of Child Support Payments**:

---



---



---



---

Your **Request to New York State for a Second-Level Desk Review of the Distribution of Child Support Payments** ☐ included ☐ did not include additional but previously unavailable documentation to support your claim. The New York State Division of Child Support Enforcement (DCSE) and Division of Employment and Transitional Supports (DETS) staff reviewed the accuracy of the SSD **Determination of the Request for a First-Level Desk Review of the Distribution of Child Support Payments** with respect to the facts you identified to us that you dispute, and reviewed any additional but previously unavailable documentation you provided to us.

The result of the second-level desk review is as follows:

- ☐ NYS DCSE/DETS agrees with the determination of the SSD.
- ☐ NYS DCSE/DETS does not agree with the determination of the SSD.

SCU/SSD determination      DCSE/DETS determination

- |   |          |          |
|---|----------|----------|
| 1. Total amount of pass-through payments and/or excess support payments you <b>were entitled to receive</b> : | 1. _____ | 1. _____ |
| 2. Total amount of pass-through payments and/or excess support payments <b>previously sent to you</b> :       | 2. _____ | 2. _____ |
| 3. Balance owed to you (line 1 minus line 2);   | 3. _____ | 3. _____ |

or

4. Amount you were overpaid (line 2 minus line 1)      4. ( )      4. ( )

Additional Information: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

A copy of any revised and/or additional calculation worksheets and any new documentation considered in the second-level desk review is enclosed. A copy of this second-level determination has been provided to the SCU and the SSD. A copy has also been provided to the local district Temporary Assistance Unit with direction to issue a payment or initiate recoupment action, if applicable.

Sincerely,

\_\_\_\_\_  
New York State Division of  
Employment and Transitional Supports  
Desk Review Unit

NOTE: This is the final decision as issued by New York State. If you dispute specific facts contained in the **Determination of Second-Level Desk Review** conducted by the New York State Division of Child Support Enforcement and the Division of Employment and Transitional Supports, you may request a review of this second-level determination under Article 78 of the New York State Civil Practice Law and Rules within four months of the date of this decision.

Legal Assistance may be available to you through a local not-for-profit legal services corporation such as:

\_\_\_\_\_

\_\_\_\_\_

which can be reached at the following telephone number: \_\_\_\_\_