



NEW YORK STATE
OFFICE OF TEMPORARY AND DISABILITY
ASSISTANCE
 40 NORTH PEARL STREET
 ALBANY, NY 12243-0001
Andrew M. Cuomo
Governor

Informational Letter

Section 1

Transmittal:	11-INF-01	
To:	Local District Commissioners	
Issuing Division/Office :	Center for Employment and Economic Supports	
Date:	January 7, 2011	
Subject:	Revisions to LDSS-4230 (Conciliation Notification)	
Suggested Distribution:	Employment Coordinators Temporary Assistance Directors Staff Development Coordinators	
Contact Person(s):	Employment Services Advisor or Employment and Advancement Services Bureau at (518) 486-6106	
Attachments:		
Attachment Available On – Line:	<input type="checkbox"/>	

Filing References

Previous ADMs/INFs	Releases Cancelled	Dept. Regs.	Soc. Serv. Law & Other Legal Ref.	Manual Ref.	Misc. Ref.
		18 NYCRR §385.11	SSL §341	Temporary Assistance and Food Stamp Employment Policy Manual Section 385.11	

Section 2

I. Purpose

The purpose of this message is to inform districts of changes that have been made by the Office of Temporary and Disability Assistance to the Conciliation Notification (LDSS-4230) and the conciliation notification that can be generated from the Welfare-To-Work Caseload Management System (WTWCMS).

II. Background

Districts must offer conciliation and issue the conciliation notification (LDSS-4230) or an approved local equivalent to public assistance recipients (and applicants that are assigned to employment activities other than assessment and job search) who have refused or failed to comply with employment requirements consistent with State regulation (18 NYCRR §385.11).

III. Program Implications

The following changes have been made to the LDSS-4230 and the conciliation notification that can be generated from the WTWCMS to clarify the information that should be entered on the conciliation notice and to ensure that public assistance applicants and recipients understand the information that may be provided or required during the conciliation process.

- The reference to “willfully refused or failed” in the “Notice” and the first sentence following the “Notice” section has been adjusted to “willfully and without good cause refused or failed”, consistent with the language used in Social Services Law (SSL) §341.
- Language has been changed on the conciliation notification that can be generated from the WTWCMS to identify a period of noncompliance rather than a single date of noncompliance. More specifically, the word “beginning” has been added prior to the space that identifies the date(s) of noncompliance. This change will address instances in which the noncompliance may have continued beyond one day and, therefore, avoid the potential need to enter multiple dates of noncompliance on the conciliation notice. Workers completing the conciliation notice should continue to enter the beginning date of the noncompliance as part of the information provided to identify the specific instance of noncompliance.
- A sentence has been added to encourage the noncompliant individual who the district believes has willfully and without good cause refused or failed to comply with employment requirements to submit any evidence available to help document the reason(s) for the noncompliance by the contact date identified in the letter.
- The examples of good cause as required by SSL §341 remain the same. However, the references to documentation previously provided with each example of good cause have been replaced with a sentence to advise the individual that he/she may be required to provide documentation to support any reason(s) the individual gives for not reporting or complying

with employment requirements. Examples of documentation that may be provided are also included. The requirement to provide documentation should be evaluated on a case-by-case basis.

- A sentence has been added to inform the individual that he/she may be referred to the district's practitioner for an independent evaluation to determine whether he/she should be exempt from work requirements because of a physical or mental health condition as required by the district in accordance with SSL §332-b of the SSL and 18 NYCRR §385.2 of OTDA regulations.
- The notice has been adjusted to clarify that should the noncompliant individual not respond to the offer for conciliation a Notice of Intent will be issued to inform the household that the household's public assistance and/or food stamp benefits will be reduced or discontinued.

IV. Revised Forms

The updates to the WTWCMS generated conciliation notification are scheduled to be moved to production as of December 28, 2010. Districts that are using the manual LDSS-4230 must ensure they are using the October 2010 version. Districts may order a supply of the revised "Conciliation Notification" form (LDSS-4230) (rev. 10/10) using the forms ordering procedures described below.

The (LDSS-4230) is also available electronically via the OTDA forms website at http://otda.state.nyenet/ldss_eforms. Previous versions of the conciliation notice should be recycled.

A. Forms Ordering Information

- The revised English version of the LDSS-4230: "*Conciliation Notification*" and the LDSS-4230 SP: "Conciliation Notification-SP" are State printed and are expected to be available for ordering mid-January 2011 for the English version and February 2011 for the Spanish version.
- The above referenced document has also been posted on the OTDA Intranet website at http://otda.state.nyenet/ldss_eforms/default.htm and is available for downloading by local districts for reproduction locally.
- Any future written requests for the English and "other than English" versions of the documents, should be submitted on OTDA-876: "*Request for Forms or Publications*", and should be sent to:

Office of Temporary and Disability Assistance
BMS Document Services and Operational Support
PO Box 1990
Albany, NY 12201

Questions concerning ordering forms should be directed to BMS Document Services at 1-800-343-8859, ext. 4-9522.

- Documents may also be ordered through Outlook. To order the forms you must obtain an OTDA-876 electronically by going to the OTDA Intranet Website at <http://otda.state.ny.net/> then under Program Areas, go to Division of Operations and Program Support page, then to OPS E-forms page (this page contains the electronic OTDA-876).
- For those who do not have Outlook but who have Internet access for sending and receiving e-mail, the Internet e-mail address is: gg7359@dfa.state.ny.us .
- For a complete list of available forms, please refer to the OTDA Intranet site: http://otda.state.ny.net/ldss_eforms/default.htm .

B. Local Equivalent Forms

Districts that are using a local equivalent form to the LDSS-4230 must revise the language on the local equivalent form to be consistent with the language on the State form and submit the revised local form to the Office for approval within 45 days from the date of this INF.

Revised local equivalent forms should be submitted to the following address for review:

Ms. Jacqueline Brace
Office of Temporary and Disability Assistance
Division of Operations and Program Support
Bureau of Management Services
40 N. Pearl Street
Albany, NY 12243

Issued By

Name: Russell Sykes

Title: Deputy Commissioner

Division/Office: Center for Employment and Economic Supports