TO: Commissioners of Maintenance

Social Services

DATE: February 8, 1991

SUBJECT: Introduction of Continuous Pinfeed

Version of "Notice of Intent to Change Benefits: PA, FS, MA Coverage and Services (Timely and Adequate)"

(DSS-4015-C)

SUGGESTED

DISTRIBUTION: Income Maintenance Directors

Food Stamp Directors

Medical Assistance Directors

Family and Children Services Directors

Corrective Action Coordinators Staff Development Coordinators

CONTACT PERSON: Maria Eckhardt

1-800-342-3715, extension 3-6165

ATTACHMENTS: Attachment - DSS-4015-C: "Notice of Intent to Change

Benefits: PA, FS, MA Coverage and Services (Timely and Adequate)" (Rev. 2/91) - not available on-line.

## FILING REFERENCES

Previous ADMs/INFs	Releases   Cancelled	Dept. Regs.	Soc. Serv.  Law & Other	Manual Ref. Misc. Ref.
			Legal Ref.	
	i		İ	
89 ADM-21				PASB
		1		<del>VI-C</del> -2.3,
				2.4
				FSSB
		1		<del>VII-</del> C-2.3,
				2.4

This is to introduce the continuous pinfeed version of the DSS-4015: "Notice of Intent to Change Benefits: PA, FS, MA Coverage and Services (Timely and Adequate)". This new form will be designated "DSS-4015-C" and will have a Revision Date of 2/91".

The DSS-4015-C is different from the DSS-4015 (01/90) version of this client notice only in the pinfeed format. This version was developed as a result of a New York Public Welfare Association Systems Committee survey in which a significant number of districts indicated that if continuous pinfeed notices were made available, they (the districts) would utilize them either with a personal computer program or to assist in manually typing notices. Because of the high usage of the DSS-4015, and the ability, therefore, to print a large enough quantity for it to be cost-effective, it has been selected to be printed in a continuous format in addition to its regular format.

Delivery of the DSS-4015-C to the Albany warehouse is expected in late February 1991. Your district will  $\underline{not}$  automatically receive copies.

Requests for these documents should be submitted on Form WMS-47 (Rev. 9/89): "WMS Order Form" and should be sent to:

New York State Department of Social Services
Welfare Management System
PO Box 1990
Albany, New York 12201
Attention: Office of Systems Development (OSD)

Questions concerning ordering forms should be directed to the Office of Systems Development by calling 1-800-342-3715, extension 6-6223.

Oscar R. Best, Jr.
Deputy Commissioner
Division of Income Maintenance