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 | INFORMATIONAL LETTER |
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TRANSMITTAL: 93 INF-13

TO: Commissioners of
 Social Services

DIVISION: Economic
 Security

DATE: April 13, 1993

SUBJECT: Revision of the DSS-2287: "Notice of Placement Into
 and Out of a DSS Certified Family Type Home
 (Congregate Care Level I)"

SUGGESTED

DISTRIBUTION: Income Maintenance Directors
 Adult Services Staff
 Forms Coordinator
 Staff Development Coordinator
 Family Type Home Coordinators

CONTACT PERSON: Abe Anolik at 1-800-342-3715, extension 4-7218

ATTACHMENTS: DSS-2287 (Rev. 8/92) - not available on-line

FILING REFERENCES

Previous ADMs/INFs	Releases Cancelled	Dept. Regs.	Soc. Serv. Law & Other Legal Ref.	Manual Ref.	Misc. Ref.
73 PWD-209	73 PWD-209				91 LCM-44

The DSS-2287, formerly entitled "Placement Notification for SSI State Supplement", has been revised and retitled "Notice of Placement Into and Out of a DSS Certified Family Type Home (Congregate Care Level I)" (see attachment).

The DSS-2287 is used by Social Services Districts (SSDs) to formally notify the Social Security Administration (SSA) that:

1. an SSI recipient has been placed into a family type home at a specific address (and that the specific operator of the home is certified as a family type home operator at the specified address) by a Social Services District (SSD);
2. the SSI recipient has permanently left the certified home or the certification of the family type home has been terminated and the home is no longer a Congregate Care Level I facility;
3. the SSI recipient has entered a medical facility; or
4. the SSI recipient has returned to the family type home after a temporary absence.

The DSS-2287 has been revised to more clearly delineate its function and to eliminate obsolete references. In the revised DSS-2287:

1. Part I provides client identification information including the SSI recipient's new address (generally includes the name and location of the family type home);
2. Part II specifies the nature and effective date of the change being reported to SSA and includes an "other" category; and
3. Part III provides the name and SSD of the person who authorized the placement into the family type home or who reported the other change.

As with the earlier versions of the DSS-2287, one copy of the DSS-2287 should be forwarded to the appropriate SSA field office and one copy retained in the SSD case record. As noted in 91 LCM-44, this Department no longer needs to receive a copy of the DSS-2287.

SSDs will not automatically receive copies of the DSS-2287 (Rev. 8/92). Requests for forms should be submitted on the DSS-876: "Request for Forms and Publication" and sent to:

NYS Department of Social Services
Forms and Publication Section
40 North Pearl Street
Albany, NY 12243

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Upon receipt of the revised DSS-2287, the earlier versions should be discarded.

Oscar R. Best, Jr.
Deputy Commissioner
Division of Economic Security