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 | ADMINISTRATIVE DIRECTIVE |  
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TRANSMITTAL: 90 ADM-4

DIVISION: Administration

TO: Commissioners of  
 Social Services

DATE: January 22, 1990

SUBJECT: Changes to Claiming Schedules: A, C, F, J, RF-2, RF-3, RF-5  
 and RF-6

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 SUGGESTED

DISTRIBUTION: | Accounting Supervisors  
 | Staff Development Coordinators

CONTACT

PERSON: | Irid Gordon, Bureau of Local Financial Operations  
 | Upstate Office, 1-800-342-3715, extension 4-7549  
 | Marvin Gold, Metro Office (212) 804-1108

ATTACHMENTS: | See page 5, VI. ADDITIONAL INFORMATION for listing of  
 | attachments. (Attachments not available on-line)

FILING REFERENCES

Previous ADMs/INFs	Releases Cancelled	Dept. Regs.	Soc. Serv. Law & Other Legal Ref.	Manual Ref.	Misc. Ref.
		18 NYCRR 601			

I. PURPOSE

The purpose of this directive is to inform you of the claiming form and line-by-line instruction changes to the Schedules A, C, F, J, RF-2, RF-3, RF-5, and RF-6. The new forms and line-by-line instructions are attached.

II. BACKGROUND

As a result of additional informational and data requirements set forth by the Federal and State authorities in order to better track expenditures, and in an effort to combine and facilitate common claiming criteria, extensive revisions have been made to the above-noted financial claiming forms effective for the claiming month October, 1989.

III. PROGRAM IMPLICATIONS

The impact of the forms and instruction changes should be minimal for the Local Districts which have implemented the Benefit Issuance and Control System (BICS). For those Districts which have their own Payment System, provisions will need to be made to segregate the required expenditure information so as to have the ability to properly complete the new claim forms.

IV. REQUIRED ACTION

A. The following summarize the necessary changes made to each of the claim forms:

1. SCHEDULE A (DSS-187) CONSOLIDATION OF ROLLS AND COMPUTATION OF FEDERAL AND STATE AID
  - a. Line-by-line items on revised Schedule A remain unchanged except former Line 11, Gross Grant Diversion, is now column 8, Grant Diversion.
  - b. Column 5, Vendor Payments for Home Repairs, on the current Schedule A will be Column 9 on the revised form.
  - c. Expenditures made for Family Shelters, Tiers I and II, and for Hotel/Motel Shelter payments, will now be detailed on the new Schedule A in Columns 5, 6 and 7 respectively.
  - d. New Column 10, JOBS Training Expenditures, is established for future use. It is NOT to be completed at this time.

2. SCHEDULE C (DSS-1040) ASSISTANCE AND CARE, ALL OTHER - SCHEDULE OF COSTS
  - a. Elimination of the Schedule J, Emergency Assistance for Adults Expenditures, and now reported in Total on Line 9 of the revised Schedule C. Case statistics, i.e. number of persons and cases, for EAA, now located on bottom of the revised Schedule C.
  - b. Elimination of the Schedule RF-11, Family Type Homes for Adults Special Needs, and now reported on Lines 10, 10a, 10b and 10c of the revised Schedule C.
  - c. Payments for Home Relief now segregated as follows:
    - Home Relief - Regular (Line 1a)
    - Home Relief - Interim (Line 1b)
    - Family Shelter HR TI (Line 2)
    - Family Shelter HR TII (Line 3)
    - Hotel/Motel HR (Line 4)
  - d. Adult Care and Burials (Other than ADC, ADC-U) will continue to be reported on the Schedule C, revised Lines 6 (a-c) and 7 respectively.
3. SCHEDULE F (DSS-1285), SCHEDULE OF COSTS FOR EMERGENCY ASSISTANCE TO NEEDY FAMILIES WITH CHILDREN
  - a. Extensively revised format arrangement to be similar to the revised Schedule A Claim.
  - b. The revised form does not contain what was Section B, Mass Emergency Assistance-Calculation of FP Portion, of the old form. Also removed was EAF Fuel; expenditures should be included in the category "Non-Medical Vendor Payments".
  - c. Expenditures made for Family Shelters, Tiers I and II, and for Hotel/Motel Shelter payments, will now be detailed on the new Schedule F in Columns 5, 6 and 7 respectively.
4. SCHEDULE J (DSS-2289), MONTHLY REPORT, EMERGENCY ASSISTANCE FOR ADULTS

No longer required.
5. SCHEDULE RF-2 (DSS-1272), MONTHLY STATEMENT OF EXPENDITURES AND CLAIMS FOR FEDERAL AND STATE AID
  - a. Revised to reflect the changes for the Schedule A, C and F.
  - b. Line 4, formerly "Other Assistance", has been changed to record expenditures for "Home Relief, Adult Care and Burials".

c. Line 5, "Special Needs", has been added to the revised form. This will accommodate the new Schedule C reporting of Family Type Homes for Adult Special Needs. "Total Other Assistance" has also been added to record the total net expenditures on the new Schedule C.

B. The following summarize the necessary changes made to the instructions for each of the claim forms:

1. SCHEDULE RF-3 (DSS-843) , INSTRUCTIONS, ADJUSTMENT CLAIM FOR ADDITIONAL STATE AID ON EXPENDITURES 100% REIMBURSABLE.

Line references to other claim forms, which have changed the RF-3 instructions as a result of this Administrative Directive, have been updated accordingly.

2. SCHEDULE RF-5 (DSS-3391), INSTRUCTIONS, ADJUSTMENT CLAIM FOR ADDITIONAL STATE AID ON EXPENDITURES FOR ENERGY GRANTS

Line references to other claim forms, specifically the Schedules A and C, which have changed the RF-5 instructions as a result of this Administrative Directive, have been updated accordingly.

3. SCHEDULE RF-6 (DSS-1047), INSTRUCTIONS, MONTHLY CLAIM FOR REIMBURSEMENT AND STATISTICAL REPORT - ASSISTANCE TO RESETTLED REFUGEES

a. Referenced Schedule J, on Line 5 of the RF-6 form, should reference the Schedule C, for EAA.

b. Line references to other forms, specifically Schedules A, C and F, which have changed the RF-6 instructions as a result of this Administrative Directive, have been updated accordingly.

4. SCHEDULE RF-11 (DSS-3682), INSTRUCTIONS AND FORM, FAMILY TYPE HOMES FOR ADULTS SPECIAL NEEDS

No longer required

V. SYSTEMS IMPLICATIONS

A. Welfare Management System (WMS)

Two (2) new payment Types will be available for use and authorization coding on Screen 6 of the Non-Service Authorization DSS-3209, effective October 31, 1989.

Q1 = Family Shelter Tier I  
Q2 = Family Shelter Tier II

B. Benefit Issuance and Control System (BICS)

All changes have been made in BICS which will allow the acceptance of the new WMS Payment Types, and provide Line Item category classifications, on the Monthly Composite Summaries, of those expenditure totals needed to complete the revised claim forms.

C. Automated Claiming System (ACS)

For supplemental claims prior to October 1, 1989 the old versions of the schedule claim forms that were in effect for these periods will appear on the Automated Claiming System. For claims equal to, or greater than, October, 1989, ACS will support the new versions promulgated as a result of this Administrative Directive.

VI. ADDITIONAL INFORMATION

We have attached copies of the new forms and line-by-line claiming instructions as follows:

- |                |   |                                                                                         |
|----------------|---|-----------------------------------------------------------------------------------------|
| ATTACHMENT I   | - | Instructions for Schedule A,<br>Aid to Dependent Children (ADC)                         |
| ATTACHMENT II  | - | Instructions for Schedule C,<br>Home Relief (HR)                                        |
| ATTACHMENT III | - | Instructions for Schedule F,<br>Emergency Assistance to needy<br>Families with Children |
| ATTACHMENT IV  | - | Instructions for Schedule RF-2                                                          |
| ATTACHMENT V   | - | Instructions for Schedule RF-3                                                          |
| ATTACHMENT VI  | - | Instructions for Schedule RF-5                                                          |
| ATTACHMENT VII | - | Instructions for Schedule RF-6                                                          |

VII. EFFECTIVE DATE

The effective date of this release is October 1, 1989 and revised claim forms are to be used effective with the October, 1989 Claim.

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John M. Sweeney  
Assistant Commissioner  
Office of Financial Management