INFORMATIONAL LETTER

TRANSMITTAL: 90 INF-60

DIVISION: Income

TO: Commissioners of Social Services

DATE: November 6, 1990

SUBJECT: Revision of "MA/FS Separate Determination Input Form" (DSS-3558)

SUGGESTED DISTRIBUTION: Income Maintenance Directors
Food Stamp Directors
Medical Assistance Directors
WMS Coordinators
Staff Development Coordinators

CONTACT PERSON: Maria Eckhardt
1-800-342-3715, extension 3-6165

ATTACHMENTS: Attachment I - DSS-3558: "FS Separate Determination Input Form" (Rev. 7/90) - not available on-line.

FILING REFERENCES

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DSS-329EL (Rev. 9/89)
The purpose of this release is to inform local districts that the DSS-3558: "MA/FS Separate Determination Input Form" has been revised (copy attached).

The DSS-3558 was originally designed to support the Upstate WMS Separate Determination Process. This Process facilitates the continuation of Medical Assistance and/or Food Stamp eligibility when a PA case is closed. As of October 1, 1990, the Welfare Management System (WMS) was modified to provide automatic extensions of MA coverage, making the Separate Determination Process obsolete for MA. The DSS-3558 was revised, therefore, to collect only the information needed to conduct separate determinations for Food Stamps. WMS instructions for using the Upstate Separate Determination Process are included in Section K of the Worker's Reference Manual (WRM).

The latest revision of the DSS-3558 is dated 7/90, and it reflects the systemic changes made to the Upstate Separate Determination Process.

Listed below is a detailed summary of the changes to the 3/89 version which were incorporated into this current (7/90) revision:

I. The title was changed to "FS Separate Determination Input Form", and the Revision Date was changed to 7/90.

II. All MA sections and references to MA were removed.

III. At the top, "Case Type" was changed to "FS Case Type" and "Case Number" was changed to "FS Case Number".

IV. In Section One:
   A. The extra two boxes after the "Race" box were deleted.
   B. The "MA Authorization Period" section was deleted.
   C. The "Fisc Dist", "Office Code", "Unit ID", "Worker ID" and "Co-op Case" boxes were reordered.

V. In Section Three, the "CP", "Cat Cd" and "St/Fed" columns were deleted.

VI. In Section Five:
   A. The "Cov. Code", "MA Coverage Date", "Prin. Prov." and "MA-ID Non-Issue" columns were deleted.
   B. A "F.S. I.D." column was added.

VII. The other sections were reformatted to fit into the remaining space on the form.
Delivery of the revised DSS-3558 to the Albany Warehouse is expected in November, 1990. Your district will not automatically receive copies.

In order to ensure that usage of the revised form begins within a reasonable amount of time, you may continue to use the previous (3/89) version of the DSS-3558 until your stock is depleted, or until December 31, 1990, whichever occurs first. Reorders will be filled with the 7/90 version.

Requests for this document 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