

<b>Office of Administrative Hearings (OAH) Procedures Transmittal</b>	<b>Transmittal Number:</b>	03-22
<b>Distribution:</b>	<b>Date:</b>	September 15, 2003
	<b>Page:</b>	1 of 1
	<b>Subject:</b>	Revised OAH-4420, Acknowledgement of Fair Hearing Request and Confirmation of Aid Status
ALB OAH Staff <input checked="" type="checkbox"/> UPS ALJs <input checked="" type="checkbox"/> Upstate LDSS <input checked="" type="checkbox"/>		
	SUP ALJs <input checked="" type="checkbox"/>	
NYC OAH Staff <input checked="" type="checkbox"/> NYC ALJs <input checked="" type="checkbox"/> NYC Agencies <input checked="" type="checkbox"/>		
	SUP ALJs <input checked="" type="checkbox"/>	

The Office of Administrative Hearings has revised the OAH-4420, Acknowledgement of Fair Hearing Request and Confirmation of Aid Status. A copy of the revised form is attached. The changes were effective with OAH-4420s generated August 25, 2003. The following details the changes that were made.

Additions to the front of the form are in italics:

1. If you need to contact this office to inquire about this request, the aid status of your case, *or to inform this office of a change of address or phone number*, you may call 518-474-8781 or write to:

2. ISSUES TO BE ADDRESSED AT FAIR HEARING...

*If you requested a fair hearing because the local agency has changed your assistance, benefits or services, you may be entitled to receive your assistance, benefits or services unchanged until the Commissioner issues a decision.*

THE STATE COMMISSIONER (HAS/HAS NOT) DIRECTED THE LOCAL...

Changes to the reverse are in italics (those words with a line running through have been removed):

3. If the local district has been directed to continue your assistance unchanged, but your case has nevertheless been closed, or your benefits have been reduced or restricted despite this directive, *New York City appellants* should contact the *FH&C (Fair Hearing and Conciliation)* unit at your local center *or* the fair hearing unit at your Food Stamp *or* Medicaid, ~~OES or Begin~~ site, and make an "aid continuing complaint." **APPELLANTS OUTSIDE NEW YORK CITY SHOULD CONTACT THEIR CASEWORKERS.**


You may also contact the state agency at the telephone number and address listed on the front of this notice and ask them to redirect the local district to restore your assistance. If you live in New York City, you may call (212) 417-6550 or visit the New York State Office of *Temporary* and Disability Assistance, Office of Administrative Hearings, 1<sup>st</sup> floor, at 14 Boerum Place, Brooklyn, NY. ~~The telephone number for the state agency in New York City is (212) 417-6550.~~

For Food Stamp issues, when *aid continuing* has been directed, your Food Stamps...

The changes were also made to the Spanish language sections of the form.

Attached you will find a copy of the revised OAH-4420.

If there are any questions with respect to this transmittal, you may contact your supervisor or Sue Fiehl at (518) 473-4779 or via email [90J029@dfa.state.ny.us](mailto:90J029@dfa.state.ny.us).

  
Mark Lacriva, Director of Administration  
Office of Administrative Hearings

Attachment



**ACKNOWLEDGEMENT OF FAIR HEARING REQUEST  
AND CONFIRMATION OF AID STATUS**

XLO308 (08/03)  
OAH- 4420

**RECONOCIMIENTO DE SOLICITUD DE VISTA IMPARCIAL Y  
CONFIRMACION DE CONDICION DE AYUDA**

OFFICE OF TEMPORARY AND DISABILITY ASSISTANCE  
OFICINA DE INCAPACIDAD TEMPORANIA Y ASISTENCIA

STATE OF NEW YORK  
ESTADO DE NUEVA YORK

<b>FAIR HEARING # / #DE VISTA IMPARCIAL :</b>	
Case # / #De Caso	:
Category / Categoria	:
Agency/Center / Agencia/Centro	:
Date of Request / Fecha de Solicitud	:
Notice Number / Numero Del Aviso	:
Notice Date / Fecha Del Aviso	:
Effective Date / Fecha Efectiva	:

This is to advise you that a Fair Hearing Request has been received for:  
Esto es para notificarle que una Solicitud de Vista Imparcial ha sido recibido por:

If you need to contact this office to inquire about this request, the aid status of your case, or to inform this office of a change of address or phone number, you may call (518) 474-8781 or write to:  
Si usted necesita comunicarse con esta oficina en relacion a su solicitud o la condicion de su asistencia o para informar un cambio de direccion o numero de telefono, puede llamar al (212) 417-6550, o escriba a:

Office of Administrative Hearings P.O. Box 1930 Albany, NY 12201

This is to inform you of the issues to be discussed at your Fair Hearing and the aid status of each issue.  
Esto es para informarle de los asuntos para discusi3n en su Vista Imparcial y la condici3n de ayuda.

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**ISSUES TO BE ADDRESSED AT FAIR HEARING / LOS ASUNTOS QUE SE DIRIGIR EN LA VISTA IMPARCIAL**

If you requested a fair hearing because the local agency has changed your assistance, benefits or services, you may be entitled to receive your assistance, benefits or services unchanged until the Commissioner issues a decision.

Si usted solicito una Vista Imparcial porque la agencia local ha cambiado su asistencia, beneficios o servicios, usted puede tener derecho a que su asistencia, beneficios o servicios continuen hasta que el Comisionado emita una decision.

You will receive a separate notice advising you of the date, time and place of your Fair Hearing.  
Usted recibirá una notificación separada informándole de la fecha, la hora y el lugar de la Vista Imparcial.

**PLEASE READ OTHER SIDE  
POR FAVOR LEA EL OTRO LADO**

If the local district has been directed to continue your assistance unchanged, but your case has nevertheless been closed, or your benefits have been reduced or restricted despite this directive, New York City appellants should contact the FH&C (Fair Hearing and Conciliation) unit at your local center or the fair hearing unit at your Food Stamp or Medicaid site, and make an 'aid continuing complaint'. **APPELLANTS OUTSIDE NEW YORK CITY SHOULD CONTACT THEIR CASEWORKERS.** You may also contact the state agency at the telephone number and address listed on the front of this notice and ask them to redirect the local district to restore your assistance. If you live in New York City, you may call (212) 417-6550 or visit the New York State Office of Temporary and Disability Assistance, Office of Administrative Hearings, 1st floor, at 14 Boerum Place, Brooklyn, NY.

For Food Stamp issues, when aid-continuing has been directed, your Food Stamp benefits will be continued at the same level only until your certification period ends. After that, you must recertify and be found eligible in order to continue receiving Food Stamps. You will receive Food Stamps in the amount determined by the recertification process.

NOTE: IF THE DECISION SAYS THAT YOU MUST PROVIDE INFORMATION OR DOCUMENTS TO THE AGENCY, OR IF THE AGENCY ASKS YOU FOR ADDITIONAL INFORMATION TO COMPLY WITH THE FAIR HEARING DECISION, YOU SHOULD GIVE IT TO THE AGENCY AS SOON AS POSSIBLE. IF YOU DO NOT PROVIDE THE INFORMATION PROMPTLY, THE AGENCY MAY NOT BE ABLE TO COMPLY WITH THE DECISION WITHIN NORMAL TIME FRAMES.

Si se le ha ordenado al distrito local que continúe su asistencia, y el distrito local ha cerrado, reducido o restringido sus beneficios a pesar de esta orden, los apelantes en la ciudad de Nueva York deben comunicarse con la Unidad de Vistas Imparciales y Conciliación (FH&C) de su centro local o con la Unidad de Vistas Imparciales en su centro de Cupones de Alimento (Food Stamps) o Medicaid, y radicar una querrela por incumplimiento de la orden de ayuda continua. LOS APELANTES QUE NO RESIDEN EN LA CIUDAD DE NUEVA YORK DEBEN COMUNICARSE CON EL/LA TRABAJADOR/A ASIGNADO/A A SU CASO. También puede comunicarse con la agencia estatal en la dirección y número telefónico indicados en la primera página de este aviso y pedir que se le vuelva a ordenar al distrito local restaurar su asistencia. Si usted reside en la ciudad de Nueva York puede llamar al (212) 417-6550 o visitar la Oficina de Vistas Imparciales de la Oficina de Asistencia Temporal y de Incapacidad, 1er. piso, en el 14 de Boerum Place, Brooklyn, NY.

Para asuntos relacionados con Cupones de Alimentos (Food Stamp), cuando se ha ordenado ayuda continua, sus cupones de alimentos continuarán al nivel actual hasta que el período de recertificación expire. Usted tendrá que recertificar y establecer su elegibilidad para poder continuar recibiendo cupones de alimentos. Los cupones de alimentos después de la recertificación se determinan por su elegibilidad en ese momento.

NOTA: SI LA DECISION DEL COMISIONADO DICE QUE USTED TIENE QUE PROVEER INFORMACION O DOCUMENTOS A LA AGENCIA, O LA AGENCIA LE PIDE INFORMACION ADICIONAL PARA PODER CUMPLIR CON LA DECISION DEL COMISIONADO, USTED DEBE PROVEER LA INFORMACION LO MAS PRONTO POSIBLE. SI USTED NO SOMETE LA INFORMACION CON PRONTITUD, LA AGENCIA NO PODRA CUMPLIR CON LA DECISION PRONTAMENTE.