



## Welcome to the Webex presentation: *Connecting People to Services Using myBenefits.NY.GOV as a Resource*

We will begin shortly!

September 2019

### Presenter Information



**BUFFALO STATE**  
The State University of New York

- Jeremy Troskowski – Training Program Coordinator
- Patty Mulberry – Senior Training and Development Specialist
- Michael Barron - Senior Training and Development Specialist

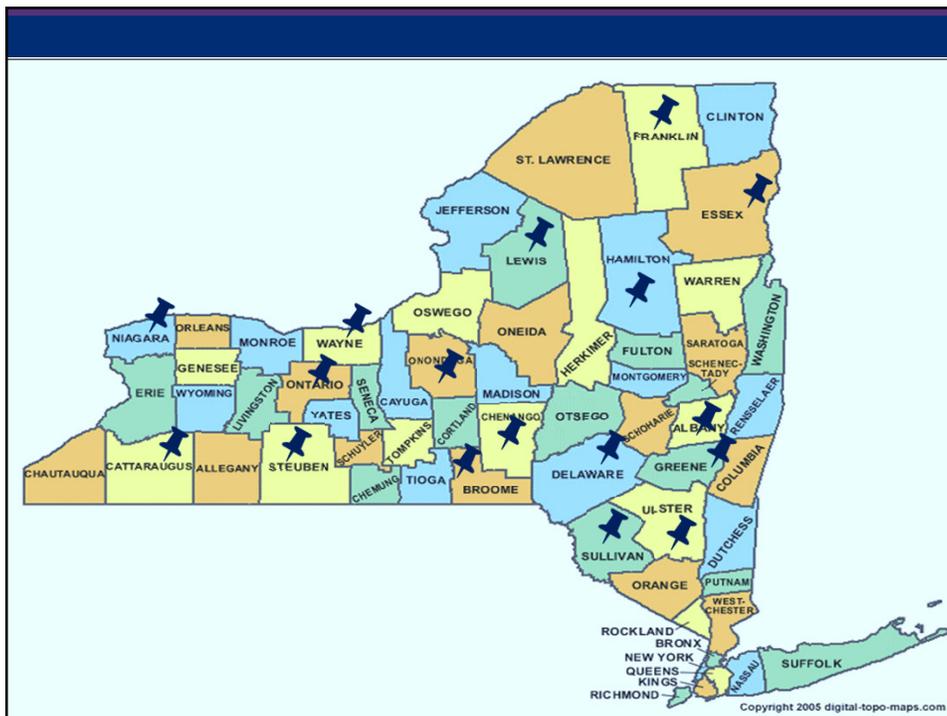
Learning, Engagement and Development Services (LEADS)

For Training Purposes Only

Please hold all questions until the end



For Training Purposes Only



# OBJECTIVES

- Answer Questions
- Discuss Advantages
- Recognize Resources

For Training Purposes Only

## Agenda

# Agenda

1. myB Background
2. myB Overview
3. Review

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New York State Office of Temporary and Disability Assistance

## Question

What is your experience with myBenefits?



- a. I'm a pro
- b. I have used it a few times
- c. I have seen the website
- d. What is myBenefits?

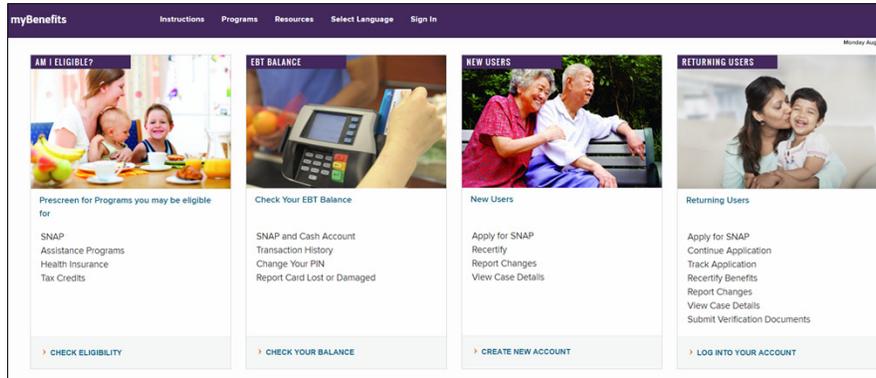
For Training Purposes Only



## myBenefits

### What is myBenefits?

**myBenefits** provides New York residents (except NYC), access to prescreen and/or apply for a number of NYS assistance programs.



For Training Purposes Only



## How to access myBenefits

[www.mybenefits.ny.gov](https://www.mybenefits.ny.gov) News Government Local

myBenefits Instructions Programs Resources Select Language Sign In

# <https://mybenefits.ny.gov>

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Office of Temporary and Disability Assistance

## myBenefits Homepage

NEW YORK STATE Services News Government Local

myBenefits Instructions Programs Resources Select Language Sign In

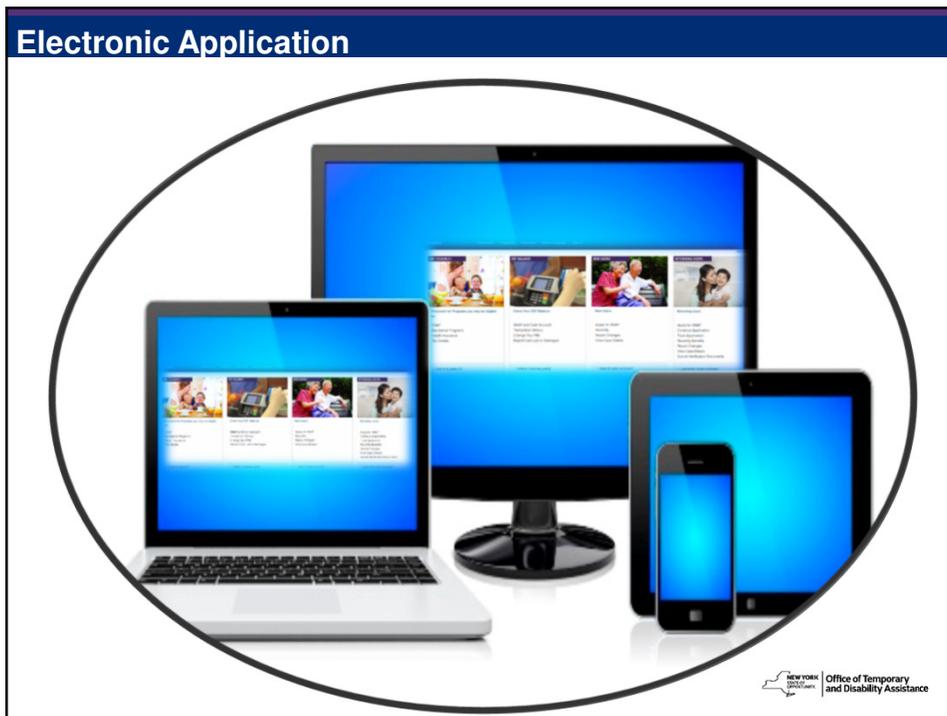
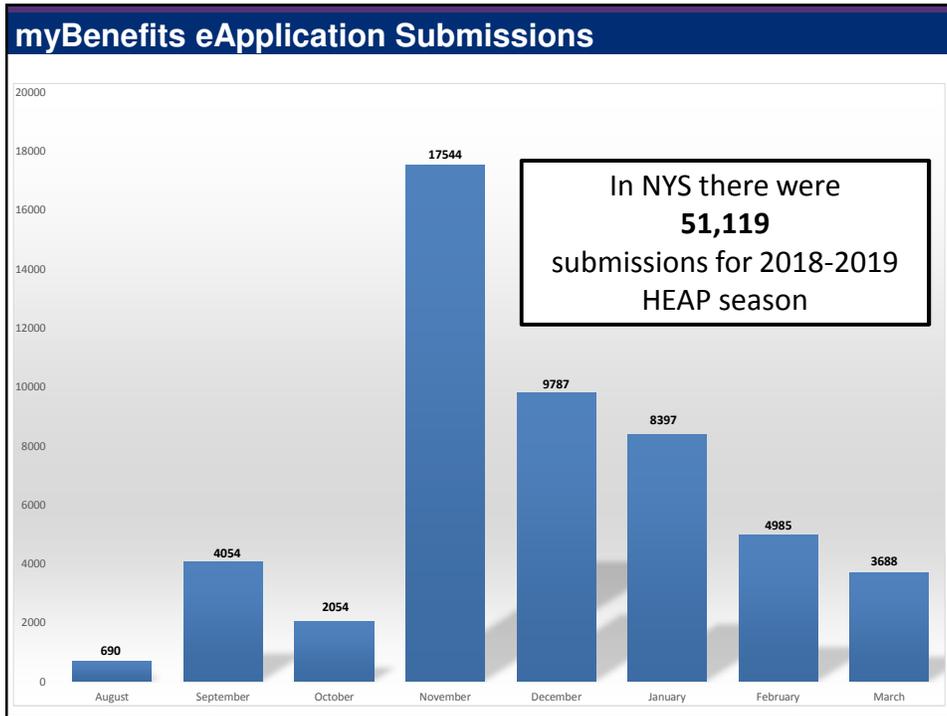
Monday August

AM I ELIGIBLE?	EBT BALANCE	NEW USERS	RETURNING USERS
			
Prescreen for Programs you may be eligible for	Check Your EBT Balance	New Users	Returning Users
SNAP Assistance Programs Health Insurance Tax Credits	SNAP and Cash Account Transaction History Change Your PIN Report Card Lost or Damaged	Apply for SNAP Recertify Report Changes View Case Details	Apply for SNAP Continue Application Track Application Recertify Benefits Report Changes View Case Details Submit Verification Documents
<a href="#">CHECK ELIGIBILITY</a>	<a href="#">CHECK YOUR BALANCE</a>	<a href="#">CREATE NEW ACCOUNT</a>	<a href="#">LOG INTO YOUR ACCOUNT</a>

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Office of Temporary and Disability Assistance



### Steps to apply

1. Log in or create a myBenefits account
2. Complete a myBenefits application
3. Submit the application
4. Upload any necessary documents



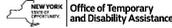
## myBenefits Advantages

### Eight languages available



English, Spanish, Arabic, Chinese, Russian, Haitian-Creole, Korean, and Italian

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### Prescreening for Potential Eligibility

Welcome to myBenefits. This website is a prescreening tool which provides a quick and easy way for people who live in New York State to find out if they might be able to receive:

- ✓ Help with buying food
- ✓ Temporary Assistance (TA)
- ✓ Special tax credits
- ✓ Home Energy Assistance
- ✓ Weatherization Assistance Program (WAP)
- ✓ Various Health Insurance programs for individuals, families, children, and sole proprietors
- ✓ WIC - Women, Infants and Children
- ✓ HIV Uninsured Care Program
- ✓ A wide variety of services for older New Yorkers, including:
  - ✓ Health insurance information, counseling and assistance (HIICAP)
  - ✓ NY Connects-Information on long term care services and supports and assistance in linking to these services
  - ✓ Legal assistance
  - ✓ Nutritional services
  - ✓ Help with the purchase of prescription drugs

This website will take you about 10 minutes to use. We'll ask you to tell us about the people in your home, the money you get from a job or other places, your housing costs and a few other bills. What you tell us will stay private and secure. Some advantages of using myBenefits include: the privacy of working at home, the ability to use any internet connected computer anytime or anywhere, the flexibility to work at your own pace and easily accommodate your busy schedule.

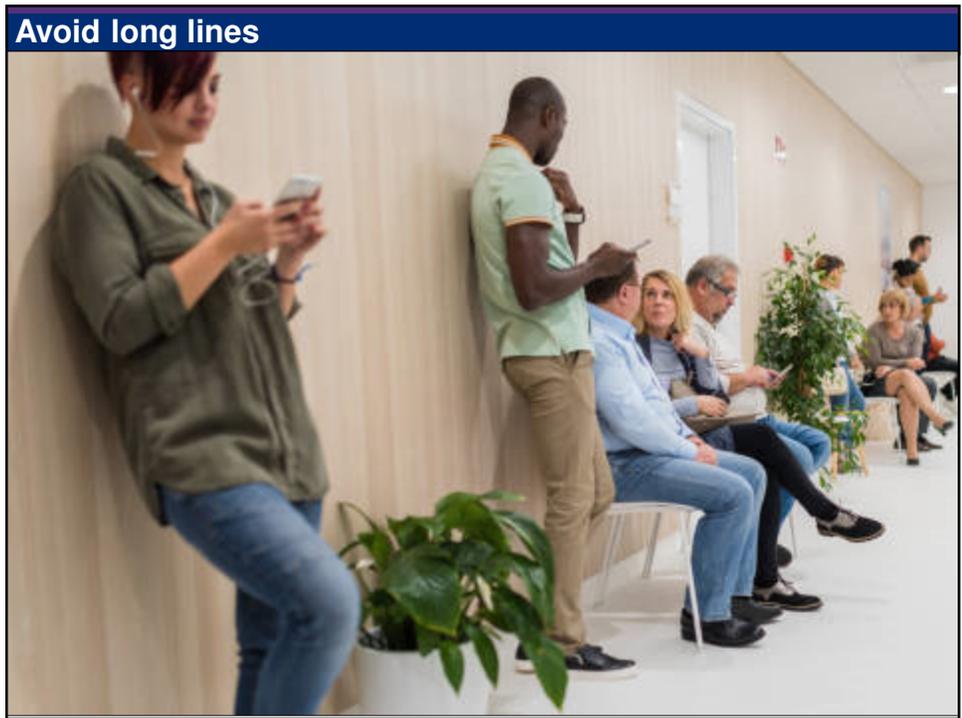
When you're finished, we'll tell you if you might be able to receive help through programs such as Supplemental Nutrition Assistance Program.

**Submit HEAP Early Outreach**

# November 2019

Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
					1	2
3	4	5	6	7	8	9
10	11	12 <i>HEAP Season Opens</i>	13	14	15	16
17	18	19	20	21	22	23
24	25	26	27	28	29	30

© BlankCalendarPages.com



**No Transportation issues**



**24 Hour Access**



## Upload documentation with your myBenefits Application

Select a Document

To upload a document as proof of Identity, select a document type from the dropdown then click the Browse button to choose a file.

**Document Type**

< click here to choose >

- Adoption Papers
- Birth Certificate
- Baptismal Certificate
- Driver's License
- Naturalization Certificate
- Photo I.D.
- Statement from Another Person
- U.S. Passport

The New York State Office of Temporary and Disability Assistance (OTDA) is strongly committed to protecting your personal and confidential information (such as your name, address, social security number, and date of birth) against unauthorized access, use and or disclosure. OTDA's website myBenefits.ny.gov has security measures in place to protect against the loss, misuse, alteration or destruction of personal, private, sensitive information in the agency's custody. OTDA cannot insure the extent to which your personal information may be protected from unauthorized use, access, or disclosure where such information resides upon your own personal computer, a publicly-accessed computer, or one owned by a third party organization that is assisting you in filing your application. Please note that you can always complete and submit your application in person at a social services district office, or by mail. Should you choose to apply online using either your own personal computer, a publicly-accessed computer, or one owned by a third party organization assisting you with the filing of your application, OTDA strongly encourages you to make sure the computer being used has an up-to-date internet browser and anti-virus/security software available. OTDA is not

Office of Temporary and Disability Assistance

## Help Feature

myBenefits https://mybenefits.ny.gov/screening/ScreeningHelp\_input.nysmybw?screenId=OtherIncome

**More About Other Types of Income**

We're asking this question to find out how much money the people in your home receive from places other than a job. If you don't know the exact answer to these money questions, give the best answer you can. Keep in mind that by giving us more accurate information, we can give you a more accurate answer. To answer the question, please type in the amounts each person in your home receives from any of these sources.

The most important thing to keep in mind is that we need to know the amount each person receives before any taxes or other deductions are taken out. This amount is called "gross amount".

**Supplemental Security Income (SSI)** - SSI is a monthly payment for people with very low incomes who are at least 65 or blind or disabled. SSI is not a retirement benefit and it is not the same as Social Security.

**Social Security** - By Social Security, we mean retirement payments and some disability payments. Don't include SSI income in this box.

**Child Support** - Child support is the money that you or your children receive from a parent who is not living in your home.

**Unemployment payments** - Unemployment payments are payments you may receive from the state if you have recently lost your job.

**Other sources** -

- Countable: Some examples are workers' compensation, veterans' benefits, pensions, any regular money given to any member of your household interest or dividends.
- Non-Countable: Some sources of money don't count at all. If someone receives income from one of these sources, you don't have to tell us about it:
  - o Income from a loan
  - o One-time payments such as an income tax refund, a one-time insurance settlement, a security deposit refund, or an emergency assistance payment
  - o Heating assistance payments

Keep in mind that there are many other kinds of income that may not count. If you receive a type of income that isn't listed here, it's a good idea to ask your caseworker about it when you apply for benefits.

Close Window

myBenefits – The Website

myBenefits

Instructions Programs Resources Select Language Sign In

Tuesday March 10, 2019

**AM I ELIGIBLE?**

Prescreen for Programs you may be eligible for

- HEAP
- SNAP
- Assistance Programs
- Health Insurance
- Tax Credits

> CHECK ELIGIBILITY

**EBT BALANCE**

Check Your EBT Balance

- SNAP and Cash Account
- Transaction History
- Change Your PIN
- Report Card Lost or Damaged

> CHECK YOUR BALANCE

**NEW USERS**

New Users

- Apply for HEAP
- Apply for SNAP
- Recertify
- Report Changes
- View Case Details

> CREATE NEW ACCOUNT

**RETURNING USERS**

Returning Users

- Apply for HEAP
- Apply for SNAP
- Continue Application
- Track Application
- Recertify Benefits
- Report Changes
- View Case Details
- Submit Verification Documents

> LOG INTO YOUR ACCOUNT

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new york state Office of Temporary and Disability Assistance

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myBenefits  
Homepage

new york state Office of Temporary and Disability Assistance

myBenefits – www.myBenefits.ny.gov

NEW YORK STATE

Services News Government Local

myBenefits Instructions Programs Resources Select Language Sign In

Monday August 05, 2019

**AM I ELIGIBLE?**

Prescreen for Programs you may be eligible for

SNAP  
Assistance Programs  
Health Insurance  
Tax Credits

**1**

CHECK ELIGIBILITY

**EBT BALANCE**

Check Your EBT Balance

SNAP and Cash Account  
Transaction History  
Change Your PIN  
Report Card Lost or Damaged

**2**

CHECK YOUR BALANCE

**NEW USERS**

New Users

Apply for SNAP  
Recertify  
Report Changes  
View Case Details

**3**

CREATE NEW ACCOUNT

**RETURNING USERS**

Returning Users

Apply for SNAP  
Continue Application  
Track Application  
Recertify Benefits  
Report Changes  
View Case Details  
Submit Verification Documents

**4**

LOG INTO YOUR ACCOUNT

**PLEASE NOTE**

IMPORTANT! To login to myBenefits or to create an account, you MUST use a computer and internet capable smartphone for myBenefits. You cannot use an internet capable for another NYC corporation with an unemployment insurance. Dept. of Motor Vehicles or DMV.

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NEW YORK STATE Office of Temporary and Disability Assistance

myBenefits – www.myBenefits .ny.gov

myBenefits

**Instructions**

myBenefits Home → Instructions

## Instructions Using myBenefits

### About myBenefits

myBenefits is an online tool for New York State residents. Users can check **possible** eligibility for multiple human services benefit programs; apply online for the Supplemental Nutrition Assistance Program (SNAP) and the Home Energy Assistance Program (HEAP); recertify for SNAP or Temporary Assistance; Report Changes; and View Case Details.

### Prescreen Eligibility

To get a quick idea of what programs you may be eligible for, click on **"Prescreen Eligibility"**

Answer a series of basic questions about you and your household

- The questions will take about 10 minutes to answer
- Your personal information is not saved after you leave the website

myBenefits will tell you if you **may be** able to get help with the following programs:

- SNAP (Supplemental Nutrition Assistance Program)
- Temporary Assistance (TA)
- HEAP (Home Energy Assistance Program)
- Weatherization Assistance Program
- Special Tax Credits

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myBenefits – www.myBenefits .ny.gov

myBenefits Instructions Programas Recursos **Select Language** Sign In

Monday August 12, 2019

**AM I ELIGIBLE?**



Prescreen for Programs you may be eligible for

- SNAP
- Assistance Programs
- Health Insurance
- Tax Credits

[CHECK ELIGIBILITY](#)

**EBT BALANCE**



Check Your Balance

- SNAP and Transaction History
- Change Your PIN
- Report Card Damage

[CHECK YOUR BALANCE](#)

**RETURNING USERS**



Returning Users

- Apply for SNAP
- Continue Application
- Track Application
- Recertify Benefits
- Report Changes
- View Case Details
- Submit Verification Documents

[LOG INTO YOUR ACCOUNT](#)

English

**Español (Spanish)**

العربية (Arabic)

中文 (Chinese)

русский (Russian)

Kreyòl Ayisyen (Haitian-Creole)

한국어 (Korean)

Free Language Assistance

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myBenefits – www.myBenefits .ny.gov

myBenefits Instrucciones Programas Recursos **Seleccione el Idioma** Inicie Sesión

Lunes agosto 12, 2019

**¿CUMPLE LOS REQUISITOS?**



Preseleccione los programas para los cuales podría habilitar

- SNAP
- Programas de Asistencia
- Seguro de Salud
- Créditos Tributarios

[VERIFIQUE SI CUMPLE LOS REQUISITOS](#)

**SALDO EBT**



Verifique su saldo EBT

- SNAP y cuenta en efectivo
- Historial de transacciones
- Cambiar el número PIN
- Reportar que la tarjeta se ha dañado o extraviado

[VERIFIQUE SU SALDO](#)

**NUEVOS USUARIOS**



Nuevos usuarios

- Solicitar SNAP
- Revalide
- Notificar los cambios
- Ver detalles del caso

[CREE NUEVA CUENTA](#)

**USUARIOS YA REGISTRADOS**



Usuarios ya registrados

- Solicitar SNAP
- Continuar la solicitud
- Hacerle seguimiento a la solicitud
- Revalidación de beneficios
- Notificar los cambios
- Ver detalles del caso
- Someta Documentos de Verificación

[INGRESE A SU CUENTA.](#)

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**myBenefits – User Resources**

**PLEASE NOTE**  
 IMPORTANT!!! To Login to myBenefits or to Create an Account, you MUST use a username and password created specifically for myBenefits. You cannot use an account created for another NYS application such as unemployment insurance, Dept. of Motor Vehicles or Child Support.

**Select Language**

- English
- Español (Spanish)
- العربية (Arabic)
- 中文 (Chinese)
- русский (Russian)
- Kreyòl Ayisyen (Haitian-Creole)
- 한국어 (Korean)
- Free Language Assistance

**Programs**

- SNAP
- Nutrition Education
- Temporary Assistance
- HEAP
- WIC
- School Meals
- Summer Meal Program
- SSI State Supplemental Program
- Veterans' Affairs

**Legal**

- Accessibility
- Privacy Policy
- Disclaimer
- Notice under ADA
- Freedom of Information Law (FOIL)
- Contact Us

**Agencies Services** | **App Directory** | **Counties** | **Events** | **Programs**

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 **Office of Temporary and Disability Assistance**

**myBenefits – User Resources**

**Office of Temporary and Disability Assistance** | About | Programs & Services | Laws & Policies | Resources | Forms | How to Apply | Search OTDA

**Contact OTDA**

OTDA Home → About OTDA → Contact OTDA

**Contact OTDA**

New York State Office of Temporary and Disability Assistance  
 40 North Pearl Street  
 Albany, New York 12243  
 Email: [nysinfo@otda.ny.gov](mailto:nysinfo@otda.ny.gov)  
 General Telephone: 518-473-1090

**Child Support Enforcement**

Website: [Child Support Enforcement](#)  
 Phone: 1-888-208-4485  
 For the Hearing Impaired, TTY Phone number: 1-866-875-9975

**HEAP, SNAP or Temporary Assistance**

Website: [Home Energy Assistance Program \(HEAP\)](#)  
 Website: [Supplemental Nutrition Assistance Program \(SNAP\)](#)  
 Website: [Temporary Assistance \(TA\)](#)  
 Phone: 1-800-342-3009

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 **Office of Temporary and Disability Assistance**

### myBenefits – User Interface

The screenshot shows the myBenefits user interface. At the top, there is a navigation bar with the New York State logo and links for Services, News, Government, and Local. Below this is a secondary navigation bar with myBenefits, Instructions, Programs, Resources, Select Language, and Sign In. The main content area features four service tiles: 1. 'AM I ELIGIBLE?' with a family eating, listing SNAP, Assistance Programs, Health Insurance, and Tax Credits, and a 'CHECK ELIGIBILITY' button. 2. 'EBT BALANCE' with a hand at an EBT terminal, listing SNAP and Cash Account, Transaction History, Change Your PIN, and Report Card Lost or Damaged, and a 'CHECK YOUR BALANCE' button. 3. 'NEW USERS' with an elderly couple, listing Apply for SNAP, Recertify, Report Changes, and View Case Details, and a 'CREATE NEW ACCOUNT' button. 4. 'RETURNING USERS' with a woman and child, listing Apply for SNAP, Continue Application, Track Application, Recertify Benefits, Report Changes, View Case Details, and Submit Verification Documents, and a 'LOG INTO YOUR ACCOUNT' button. The date 'Monday August 05, 2019' is in the top right. At the bottom, it says 'For Training Purposes Only' and includes the New York State Office of Temporary and Disability Assistance logo.

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## myBenefits Overview

- Prescreening Tool

This slide provides an overview of the myBenefits interface, specifically highlighting the 'Prescreening Tool'. It features a large blue box with the text 'myBenefits Overview' and a bullet point '• Prescreening Tool'. To the right is a thumbnail of the 'AM I ELIGIBLE?' tile, which includes a family eating, a list of programs (SNAP, Assistance Programs, Health Insurance, Tax Credits), and a 'CHECK ELIGIBILITY' button. The slide number '32' is in the top right corner, and the New York State Office of Temporary and Disability Assistance logo is in the bottom right corner.

## myBenefits – User Interface



[Services](#) [News](#) [Government](#) [Local](#)

myBenefits

[Instructions](#) [Programs](#) [Resources](#) [Select Language](#) [Sign In](#)

Monday August 05, 2019

AM I ELIGIBLE?



Prescreen for Programs you may be eligible for

- SNAP
- Assistance Programs
- Health Insurance
- Tax Credits

[CHECK ELIGIBILITY](#)

EBT BALANCE



Check Your EBT Balance

- SNAP and Cash Account
- Transaction History
- Change Your PIN
- Report Card Lost or Damaged

[CHECK YOUR BALANCE](#)

NEW USERS



New Users

- Apply for SNAP
- Recertify
- Report Changes
- View Case Details

[CREATE NEW ACCOUNT](#)

RETURNING USERS



Returning Users

- Apply for SNAP
- Continue Application
- Track Application
- Recertify Benefits
- Report Changes
- View Case Details
- Submit Verification Documents

[LOG INTO YOUR ACCOUNT](#)

For Training Purposes Only


Office of Temporary and Disability Assistance

## myBenefits - prescreening

**Welcome**

Welcome to myBenefits. This website is a prescreening tool which provides a quick and easy way for people who live in New York State to find out if they might be able to receive:

- ✓ Help with buying food
- ✓ Temporary Assistance (TA)
- ✓ Special tax credits
- ✓ Home Energy Assistance
- ✓ Weatherization Assistance Program (WAP)
- ✓ Various Health Insurance programs for individuals, families, children, and sole proprietors
- ✓ WIC - Women, Infants and Children
- ✓ HIV Uninsured Care Program
- ✓ A wide variety of services for older New Yorkers, including:
  - ✓ Health insurance information, counseling and assistance (HIICAP)
  - ✓ NY Connects-Information on long term care services and supports and assistance in linking to these services
  - ✓ Legal assistance
  - ✓ Nutritional services
  - ✓ Help with the purchase of prescription drugs

This website will take you about 10 minutes to use. We'll ask you to tell us about the people in your home, the money you get from a job or other places, your housing costs and a few other bills. What you tell us will stay private and secure. Some advantages of using myBenefits include: the privacy of working at home, the ability to use any internet connected computer anytime or anywhere, the flexibility to work at your own pace and easily accommodate your busy schedule.

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### myBenefits – prescreening summary of entries

**What You Told Us**

Please take a look at what you told us about the people in your home. The rest of the questions will use this information.

- ✓ If the information looks right, click the Next button to keep going.
- ✓ If you need to change one of your answers, click the button labeled with the kind of information you need to change. This will take you back to the page with that question on it. If you do go back and change your answer, you may be asked to re-enter some of your information.
- ✓ If you would like to start over, click the Exit button to clear your answers and go back to the first page.

**Income**

Jim Simon receives a total of **\$866.67** each month.  
 Anthony receives a total of **\$0.00** each month.  
 Lisa receives a total of **\$0.00** each month.

[Change](#)

**Child Expenses**

Your household pays **\$0.00** each month for Jim Simon's child/dependent care.  
 Your household pays **\$50** each month for Anthony's child/dependent care.  
 Your household pays **\$50** each month for Lisa's child/dependent care.

[Change](#)

**Child Expenses**

Jim Simon pays **\$0.00** each month in child support.

[Change](#)

**Resources**

Your household has **\$0.00** in resources.

[Change](#)

**Housing Expenses**

Your household pays **\$300** each month for housing.  
 Heat is **Not** included in this amount.

[Change](#)

[EXIT](#) [Back](#) [Next](#)

### myBenefits – prescreening eligible programs

**Your Results**

We looked at what you told us today to see if you *might* be able to get help with buying food and other services. You'll have to apply for these programs to get a final decision about benefits and we'll let you know how to do that. Keep in mind that you always have the right to apply for these benefits, no matter what this website tells you.

It looks like you may be able to get these programs

**Weatherization Assistance Program**

- ✓ It looks as if your household may be able to receive services through the Weatherization Assistance Program (WAP). Local Weatherization Assistance Service Providers may be able to assist you with lowering your home energy cost and other services, such as home insulation, heating system improvements and other home repairs and/or replacements.
- ✓ Tenants and Owners of rental buildings applying for WAP for their apartments should contact their local Weatherization Assistance Service Provider or DHPB for further instructions at <http://www.nyohs.org/Business/WeatherizationAssistance/>

**Home Energy Assistance Program**

- ✓ It looks as if your household may be able to receive help with paying your energy bills through the Home Energy Assistance Program (HEAP). Your local Social Service District may also be able to help you with an energy-related emergency (such as a gas or electric shut off or have less than a quarter of a tank of fuel) and with services such as fixing or replacing a non-working furnace.
- ✓ HEAP is a seasonal program. Certain HEAP benefits are only available during specific time periods. Please click here [for this season's dates](#).
- ✓ Keep in mind that only U.S. citizens and qualified non-citizen are able to get help from HEAP.

To learn more about HEAP, click the Next button at the bottom of the page.

- ✓ A federal earned income credit of up to \$3400.00
- ✓ A New York State earned income credit of up to \$1020.00
- ✓ A New York City earned income credit of up to \$170.00 if you earned money in NYC.
- ✓ A child tax credit of up to \$1,000 for each child under 17
- ✓ An Empire State Child Credit equal to the greater of: 33% of the federal child credit or: \$100 times the number of children who qualify for the federal child credit.
- ✓ A federal Child and Dependent Care Credit of up to \$2,100 for families with more than one child or dependent in care.
- ✓ The amount of money that may be refunded to you will depend on your exact income, the number of children you claim as dependents, how much tax you owe, your filing status and other factors.

### myBenefits – prescreening – ineligible programs

It looks like you may not be able to get some programs or we may not be able to determine your eligibility

**HIV Uninsured Care Programs**

- ✓ Based on what you told us today, it looks like no one in your home is HIV positive, therefore it appears that no one is eligible for the HIV Uninsured Care Programs.
- ✓ To be eligible, you must be a resident of New York State (U.S. citizenship is not required), be HIV Positive, and meet specific income and asset requirements.
- ✓ If you have questions concerning eligibility for the HIV Uninsured Care Programs, call the following toll-free number: 1-800-542-2437, Monday through Friday 8:00 AM to 5:00 PM.

**Office of Victim Services**

- ✓ Based on what you have told us today, we are unable to determine eligibility for reimbursement of expenses incurred as a result of a crime.

For more information about NYS Office of Victim Services compensation and eligibility requirements, please visit the website at [www.ovs.ny.gov](http://www.ovs.ny.gov).

**Tax Credits**

- ✓ Based on what you told us today, it looks like people in your home may have too much income or do not meet other requirements necessary to qualify for the Non-Custodial Parent Earned Income Credit.

**WIC**

- ✓ Based on what you told us today, it looks like there are no pregnant women, new mothers, or children under age 5 in your home right now. This means that no one in your home will be able to get WIC.
- ✓ Keep in mind that if a mother or child in your home is enrolled in SNAP, Medicaid, Head Start, Temporary Assistance for Needy Families (TANF) or if children receive free or reduced-price school meals, they may be able to get WIC.
- ✓ Please call the Growing Up Healthy Hotline at 1-800-522-5006 to find out more.

### myBenefits – Self Sufficiency Calculator

Close Window
Print

**Self-Sufficiency Calculator**

The Self-Sufficiency Calculator compares your household's current financial situation to one that includes benefits the prescreening said you might be able to receive. The left column in this graph shows the income you reported to us. The right column has your reported income, plus any benefits the prescreening said you might be able to receive. The benefit amounts used in this graph are estimates based on the information you provided to us in the prescreening. Eligibility for these programs and actual benefit amounts cannot be determined until you apply.

[Calculator](#)

[Exit](#)

**Benefit Maximization**

Category	Current Situation	With Supports
Earnings	\$40,000	\$40,000
Tax Credits	\$0	\$10,000
Other Income	\$15,000	\$15,000
Nutrition Programs	\$0	\$2,500
Heating Assistance	\$0	\$0
Health Insurance	\$0	\$10,000
<b>Total</b>	<b>\$55,000</b>	<b>\$67,500</b>

This graph was designed to compare your household's current financial situation to one that includes benefits the prescreening said you might be able to receive. The left column in this graph shows the income you reported to us. The right column has your reported income, plus any benefits the prescreening said you might be able to receive. The benefit amounts used in this graph are estimates based on the information you provided to us in the prescreening. Eligibility for these programs and actual benefit amounts cannot be determined until you apply.

# myBenefits Overview

## • EBT Balance



### Check Your EBT Balance

- SNAP and Cash Account
- Transaction History
- Change Your PIN
- Report Card Lost or Damaged

[CHECK YOUR BALANCE](#)



## myBenefits – EBT Balance



[Services](#) [News](#) [Government](#) [Local](#)

myBenefits

[Instructions](#) [Programs](#) [Resources](#) [Select Language](#) [Sign In](#)

Monday August 05, 2019



Prescreen for Programs you may be eligible for

- SNAP Assistance Programs
- Health Insurance
- Tax Credits

[CHECK ELIGIBILITY](#)



### Check Your EBT Balance

- SNAP and Cash Account
- Transaction History
- Change Your PIN
- Report Card Lost or Damaged

[CHECK YOUR BALANCE](#)



### New Users

- Apply for SNAP
- Recertify
- Report Changes
- View Case Details

[CREATE NEW ACCOUNT](#)



### Returning Users

- Apply for SNAP
- Continue Application
- Track Application
- Recertify Benefits
- Report Changes
- View Case Details
- Submit Verification Documents

[LOG INTO YOUR ACCOUNT](#)

For Training Purposes Only



myBenefits – EBT Balance

### Electronic Benefits Transfer for SNAP, WIC, and Cash Payments

**To log into your account:**

Select Your State Program

Enter User ID

Enter Password

**To create a new User ID and Password:**

Select Your State Program



**Connecting to your account information is easy.**

If you forgot your Password or User ID and  
For more information about your Program:

Select Your State Program

You may experience difficulties with this web page if you are using Internet Explorer version 8 or earlier.

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myBenefits – EBT Balance

**EBT<sup>SM</sup>**  
Electronic Benefit Transfer



Electronic Benefit Transfer



**CREATE NEW ACCOUNT**

ZIP Code (Mailing Address)

Personal Identification Number(PIN)

Card Number

USER ID

Enter New Password

Confirm Password

**New York Electronic Benefit Transfer (EBT)**

You must have a User ID and password to log into your account. After you have created your account, you can change your password at any time.

**CREATE NEW ACCOUNT**

- To create a new account, enter the primary account holder's 5 digit mailing **ZIP Code**, **PIN**, your 19 digit **EBT Card Number**, a **User ID** of your choice and a **Password** of your choice.
- Your User ID must be at least 4 characters but no more than 10 characters long. You can use any combination of letters or numbers in the User ID. The User ID is not case-sensitive.
- Your password must be between 8 and 12 characters long and must have a combination of numeric, uppercase alphabetic, and lowercase alphabetic characters. Your password is case-sensitive and must be changed every 90 days.
- Click on the **SUBMIT** button when done.

[Reset Password](#)

[Forgotten User ID](#)

English / Español

## myBenefits – EBT Balance



Electronic Benefit Transfer

User ID

Password

**LOGIN**

Help?  
[Forgotten User ID](#)  
[Reset Password](#)

[Create User Account](#)  
 Cardholders are required to have a User ID and password to access their account information.

[Program Materials](#)  
[Lost or Stolen Cards](#)  
[Other Links](#)  
[Issuance Schedules](#)

Language English [GO](#)





To learn how to use your Benefit Card to get Supplemental Nutrition Assistance Program (SNAP) and/or Cash Benefits. Select this link:



### New York Electronic Benefit Transfer (EBT)

**Welcome to the New York EBT (Electronic Benefit Transfer) website!**

EBT stands for Electronic Benefits Transfer. If you have been approved to receive benefits from one of the programs listed below, you can use this website to view your benefit balance(s).

- Food Assistance (formerly Food Stamp) - Supplement Nutrition Assistance Program (SNAP) benefits.
- Family Assistance (FA) - Temporary Assistance to Needy Families (TANF) or any other emergency or special cash benefits.

This website can also be used to view your transaction history, learn more about EBT, and go to other websites that may be useful in answering additional questions you may have.

The New York EBT card is a "debit" card that your SNAP and/or cash benefits are put on each month.

**Now, Let's Get Started:**

To use this website to log into your account, you must have the following:

- An EBT card,
- A User ID, and

Electronic Benefit Transfer English / Español

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## myBenefits – New & Returning User



Services News Government Local

myBenefits Instructions Programs Resources Select Language Sign In

**AM I ELIGIBLE?**



Prescreen for Programs you may be eligible for

SNAP  
Assistance Programs  
Health Insurance  
Tax Credits

▶ CHECK ELIGIBILITY

**EBT BALANCE**



Check Your EBT Balance

SNAP and Cash Account  
Transaction History  
Change Your PIN  
Report Card Lost or Damaged

▶ CHECK YOUR BALANCE

**NEW USERS**



New Users

Apply for SNAP  
Recertify  
Report Changes  
View Case Details

▶ CREATE NEW ACCOUNT

**RETURNING USERS**



Returning Users

Apply for SNAP  
Continue Application  
Track Application  
Recertify Benefits  
Report Changes  
View Case Details  
Submit Verification Documents

▶ LOG INTO YOUR ACCOUNT

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# myBenefits Overview

- New User



**NEW USERS**

New Users

- Apply for SNAP
- Recertify
- Report Changes
- View Case Details

[CREATE NEW ACCOUNT](#)

## myBenefits – New User

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### AM I ELIGIBLE?



Prescreen for Programs you may be eligible for

- SNAP Assistance Programs
- Health Insurance
- Tax Credits

[CHECK ELIGIBILITY](#)

### EBT BALANCE



Check Your EBT Balance

- SNAP and Cash Account
- Transaction History
- Change Your PIN
- Report Card Lost or Damaged

[CHECK YOUR BALANCE](#)

### NEW USERS



New Users

- Apply for SNAP
- Recertify
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[CREATE NEW ACCOUNT](#)

### RETURNING USERS



Returning Users

- Apply for SNAP
- Continue Application
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myBenefits Home
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**\*\* THIS WEBSITE SHOULD ONLY BE USED FOR TESTING AND TRAINING \*\***  
**HEAP Season is currently is OPEN**  
 Please do not use your browsers back button.

**Where You Live**

County

Let's get started! First, please tell us which county you live in. This will assist us in providing you with the correct contact information for your Local Department of Social Services.

What county do you live in?

Cancel
Next

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myBenefits – New User

**NEW USERS**



**New Users**

- [Apply for SNAP](#)
- [Recertify](#)
- [Report Changes](#)
- [View Case Details](#)

[CREATE NEW ACCOUNT](#)

**Step 1: Your Name and Email Address**

Please fill in your name below. You may also enter your email address that can be used if you ever need to recover your user id.

**First Name:**

**Middle Initial:**

**Last Name:**

**Email Address:**

**Step 2: User ID and Password**

To log in to your account, you will need to create a user ID and password. For both of these, you should choose something that's easy for you to remember but hard for other people to guess.

This should be something you can easily remember. You will need this to return if you choose to complete it at a later time, and check the status of the application once you submit it. Choose an alias to protect your identity. Do not choose any information that identifies you personally (e.g., a Social Security number).

**User ID**

Passwords must be between 8 and 20 characters and contain at least three letters, one number, and no more than three repeating characters.

**Password**

**Please re-type your Password**

I'm not a robot 

## myBenefits – New User

NEW USERS



Services News Government Local

About NY.gov ID Help Desk Information Privacy Policy Terms of Service

Please login after reading the Acceptable Use Policy below

**NY.gov ID**

Username:

Password:

**Sign In**

Forgot your [Username](#) or [Password](#)

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## myBenefits – Returning User



Services News Government Local

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### AM I ELIGIBLE?



Prescreen for Programs you may be eligible for

- SNAP
- Assistance Programs
- Health Insurance
- Tax Credits

[CHECK ELIGIBILITY](#)

### EBT BALANCE



Check Your EBT Balance

- SNAP and Cash Account
- Transaction History
- Change Your PIN
- Report Card Lost or Damaged

[CHECK YOUR BALANCE](#)

### NEW USERS



New Users

- Apply for SNAP
- Recertify
- Report Changes
- View Case Details

[CREATE NEW ACCOUNT](#)

### RETURNING USERS

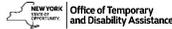


Returning Users

- Apply for SNAP
- Continue Application
- Track Application
- Recertify Benefits
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# myBenefits Overview

## •Returning User

**RETURNING USERS**



**Returning Users**

- Apply for SNAP
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**AM I ELIGIBLE?**



Prescreen for Programs you may be eligible for

- SNAP Assistance Programs
- Health Insurance
- Tax Credits

[CHECK ELIGIBILITY](#)

**EBT BALANCE**



Check Your EBT Balance

- SNAP and Cash Account
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- Report Card Lost or Damaged

[CHECK YOUR BALANCE](#)

**NEW USERS**



New Users

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**RETURNING USERS**



**Returning Users**

- Apply for SNAP
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 Office of Temporary and Disability Assistance

## myBenefits – Logging into account

**RETURNING USERS**



**Returning Users**

- Apply for SNAP
- Continue Application
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Please login after reading the Acceptable Use Policy below



Username:

Password:

Sign In

Forgot your [Username](#) or [Password](#)

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[Agency Assistance & Contact Information](#)

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Office of Temporary and Disability Assistance

## myBenefits – Dashboard

Welcome to the myBenefits Dashboard

What would you like to do?

**Start New Benefits Application**

Start New Recertification Application

View Case Details or Report a Change

Update myBenefits Account

**myBenefits Applications in Progress**

Click the corresponding Action Button to proceed with your Application. Note: Unsubmitted Applications will expire after 60 days.

Application Number	Benefit Programs	Type	Date Created	Date Saved	Available Actions
No Applications found for your account					

[Show All](#)

**myBenefits Submitted Applications**

If you wish to view a previously submitted application or submit required documentation for it, click the corresponding Action Button below.

Application Number	Benefit Programs	Type	Date Submitted	Application Status	Available Actions
No Applications found for your account					

[Show All](#)

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Office of Temporary and Disability Assistance

### myBenefits – Ensuring the Correct District

**Where You Live**

If you would like to start a new application for Supplemental Nutrition Assistance Program or HEAP benefits, there are several ways in which you can select your county.

**County Selection**

It looks like the zip code you provided is located in more than one county. Please select your county from the list below and click **Next** to continue.

What county do you live in?:

< click here to choose >

Saratoga

Washington

[click here if you do not know which county you live in](#)

**EXIT** **NEXT**

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NEW YORK STATE

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**Office of Temporary and Disability Assistance**

### myBenefits – Selecting which programs to apply

Eddy Smith(eddysmith) Thursday August 01, 2019

myBenefits Home   Dashboard   Help   Sign Out

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**HEAP Season is currently is OPEN**

**Please do not use your browsers back button.**

**Which Benefits Would You Like To Apply For?**

As a resident of Albany county, you are eligible to apply online for the benefit program(s) listed below. Please select the benefit(s) you would like to apply for and then click **Next**.

The fastest and easiest way to apply for benefits is by using this website to submit an electronic application.

For information on other ways to apply for benefits, and other benefit programs available through the state of New York, click the **Help** button.

SNAP Benefits

Home Energy Assistance Program (HEAP) Benefits

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NEW YORK STATE

### myBenefits – HEAP Specific Questions

**Filing a Home Energy Assistance Program (HEAP) Application**

Please submit only ONE application for HEAP. If you need to make changes to a previously e-filed HEAP application, you should provide the changes to your local department of social services. If you submit more than one application, only the first application will be returned and processed. You will not receive any further notices and no action will be taken on duplicate applications.

If you are already receiving Temporary Assistance or SNAP, your HEAP benefit may be issued through your Temporary Assistance or SNAP case. If you file an application and have already been approved for a HEAP benefit through your Temporary Assistance or SNAP case, no action will be taken on this application. If you received a \$21.00 or \$35.00 HEAP benefit through your Temporary Assistance or SNAP case and now pay for heat, we will review your application and issue you a supplemental HEAP benefit if eligible.

Did you receive a HEAP application in the mail?

Yes

No

NOTE: HEAP applications are mailed out to some, but not all, households that received a HEAP benefit the previous year.

Have you applied for and received a **full** HEAP benefit since last August?

---

### Energy Emergency

This application is for a regular HEAP benefit only. HEAP business rules allow 30 days to make a determination on this application. If your utilities are scheduled to be shut off or have been shut off, if you have less than a quarter (1/4) tank of fuel, less than a 10 day supply of fuel, have no heating fuel or if you own your home and your primary heating equipment is inoperable or unsafe and is in need of repair or replacement, you must call your [Local Department of Social Services](#) for further assistance.

Does the head of household or primary applicant have a Social Security Number?:

Yes

No

Social Security Number:

\*\*\* - \*\* - \*\*\*\*

Energy Emergency

This application is for a regular HEAP benefit only. HEAP business rules allow 30 days to make a determination on this application. If your utilities are scheduled to be shut off or have been shut off, if you have less than a quarter (1/4) tank of fuel, less than a 10 day supply of fuel, have no heating fuel or if you own your home and your primary heating equipment is inoperable or unsafe and is in need of repair or replacement, you must call your [Local Department of Social Services](#) for further assistance.



Exit
[Back](#)
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### myBenefits – Entering Applicant Information

Application Number: MB00000536425

1 Start
2 People
3 Job Income
4 Other Income
5 Housing Bills
6 Submit

**Getting Started**

Let's get started on the application! First, please give us some basic information about you.

**Information About You**

Please tell us more about yourself! We will ask you more about the other people in your household later in the application.

First Name:  
Eddy

MI:  
[ ]

Last Name:  
Smith

Suffix:  
[ ]

Gender:  
 Male  
 Female

Date of Birth:  
01/01/1972 Ex: mm/dd/yyyy

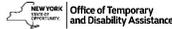
After you apply for benefits, you will get letters from your worker. Please click the button to let us know whether we should write your letters in English only or English and Spanish.

English Only  
 English and Spanish

If you are blind or seriously visually impaired, would you like to receive written notices in an alternative format?

Yes  
 No

Your county of residence:  
Albany



### myBenefits – Entering Specific Information

Cell Phone:

Message Phone:

Ext:

What is the best way to get in touch with you during the week (Monday-Friday)?  
< click here to choose > ▾

Email Address:

What is the best time to call you during the week (Monday-Friday) to set up an interview?  
< click here to choose > ▾

Local districts may utilize the TTY/TDD relay systems to gain access to services for hearing or speech impaired applicants/recipients. If you have any special needs you can request special accommodations from you local districts. What Method do you use?:  
< click here to choose > ▾

[Back](#) [Next](#)

### myBenefits – Entering Applicant Information

Application Number: MD0000536425

Personal Information

First Name:

MI:

Last Name:

Suffix:

Gender:  
 Male  
 Female

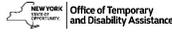
Date of Birth:  
 Ex: mm/dd/yyyy

What is this person's marital status?:

Has this person been known by any other name (e.g. maiden name)?:  
 Yes  
 No

What language do you prefer to read?

Will you require free interpreter service for your interview?



### myBenefits – Entering Applicant Information

**Residence Information**

Is this person a resident of New York State?

Yes

No

What is this person's living arrangements?:

Rent a private apartment/ house/mobile home

**People In Your Home**

How many people are in your home? (Don't forget to count yourself as well as all others in your household even if they are not applying for benefits.):

3

If you're not sure, click [Help](#) to read more about what we're asking for.

Save And Exit Back Next

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### myBenefits – Entering Other Household Members

Application Number: MB0000534425

1 Start 2 People 3 Job Income 4 Other Income 5 Housing Bills 6 Submit

**People In Your Home**

You have already told us about the following person:

Eddy Smith 01/01/1972

Please tell us about the next person in your home:

**Personal Information**

First Name:

MI:

Last Name:

Suffix:

Gender:

Male

Female

Date of Birth:  Ex. mm/dd/yyyy

What is this person's marital status?:

+ click here to choose +

Has this person been known by any other name (e.g. maiden name)?

Yes

No

Is this person a Veteran?

Yes

No

### myBenefits – Entering Types of Income

Application Number: MB0000536425

**\* Current Job** Required

Please check the box for anyone who has a job right now or a job that will end in the next 30 days. Do not select this job income if the person has had a job end in the last 30 days, if they are on strike from the job right now, or if they are self-employed. We'll ask about them next.

No one

Select	Name	Gender	Age	Date of Birth
<input type="checkbox"/>	Smith	Male	47	01/01/1972
<input type="checkbox"/>	Mary Smith	Female	41	02/02/1978

**\* Supplemental Security Income (SSI)** Required

Please check the box for anyone who will get Supplemental Security Income (SSI) this month. Keep in mind that SSI is a monthly payment for people who are blind, disabled, or age 65 with low income. SSI is not a retirement benefit.

No one

Select	Name	Gender	Age	Date of Birth
<input type="checkbox"/>	Eddy Smith	Male	47	01/01/1972
<input type="checkbox"/>	Mary Smith	Female	41	02/02/1978
<input type="checkbox"/>	Henry Smith	Male	7	03/03/2012

### myBenefits – Help with myBenefits – Specific Area

Prescreening - Google Chrome

https://mybenefits.ny.gov/screening/ScreeningHelp\_input.nysmybw?screenId=OtherIncome

Thursday August 01, 2019

Sign Out

**More About Other Types of Income**

We're asking this question to find out how much money the people in your home receive from places other than a job. If you don't know the exact answer to these money questions give the best answer you can. Keep in mind that by giving us more accurate information, we can give you a more accurate answer. To answer the question, please type in the amounts each person in your home receives from any of these sources:

The most important thing to keep in mind is that we need to know the amount each person receives before any taxes or other deductions are taken out. This amount is called "gross amount".

**Supplemental Security Income (SSI)** - SSI is a monthly payment for people with very low incomes who are at least 65 or blind or disabled. SSI is not a retirement benefit and it is not the same as Social Security.

**Social Security** - By Social Security, we mean retirement payments and some disability payments. Don't include SSI income in this box.

**Child Support** - Child support is the money that you or your children receive from a parent who is not living in your home.

**Unemployment payments** - Unemployment payments are payments you may receive from the state if you have recently lost your job.

**Other sources** -

- Countable: Some examples are workers' compensation, veterans' benefits, pensions, any regular money given to any member of your household, interest or dividends.
- Non-Countable: Some sources of money don't count at all. If someone receives income from one of these sources, you don't have to tell us about it:
  - Income from a loan
  - One-time payments such as an income tax refund, a one-time insurance settlement, a security deposit refund, or an emergency assistance payment
  - Heating assistance payments

Keep in mind that there are many other kinds of income that may not count. If you receive a type of income that isn't listed here, it's a good idea to ask your caseworker about it when you apply for benefits.

Required

If you're not sure about a

Close Window

MB0000536425

New York State Office of Temporary and Disability Assistance

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### myBenefits – Earned Income Employer Information

Application Number: MB00000536425

1 Start 2 People 3 Job Income 4 Other Income 5 Housing Bills 6 Submit

**More About Eddy's Current Job**  
You've told us that Eddy has a job right now or a job that will end in the next 30 days. Please answer the questions below to tell us more about this job.

**Employer**  
Name of Employer: Robert's Paper Products

Employer Address  
Address: 22 Paper Drive  
City: Albany  
Country: United States  
State: New York  
Zip Code: 12243  
Employer Phone: 518 555 4444



Office of Temporary and Disability Assistance

### myBenefits – Earned Income Pay Information Entry

\* Pay Period Required  
How often does Mary get paid? This is Mary's pay period. By pay period we mean the time between each pay check.  
Weekly

How many hours does Mary work each pay period? If Mary's hours are not regular, try to estimate the number of hours per pay period.  
15.00  
 I Don't Know

**Hourly Pay**  
If Mary gets paid by the hour, please give us Mary's regular rate of hourly pay. We'll ask about overtime and other kinds of pay later.  
14.00  
 I Don't Know

**Salary Pay**  
If Mary earns a salary instead of being paid by the hour, please give the total gross amount that Mary gets paid each pay period. By gross amount, we mean the amount Mary earns before taxes or anything else is taken out of the paycheck.  
  
 I Don't Know



Office of Temporary and Disability Assistance

### myBenefits – Start of Housing Bills section

Application Number: MB0000536425

1 Start 2 People 3 Job Income 4 Other Income 5 Housing Bills 6 Submit

**Housing, Heating and Utility Bills**

Next, please tell us if you, or anyone else in your house, pays for housing, heating or utility bills. On the next pages, you will be able to select the types of bills your household has and indicate who pays those bills.

\* **Housing Bills** Required

Are you or anyone else, responsible for paying housing bills? By housing bills, we mean rent or lot rent, mortgage, property taxes and assessments, home insurance and mobile home payments, or temporary housing?

Yes  
 No

\* **Heating and Utility Bills** Required

Are you or anyone else, in or out of your household, responsible for paying heating and utility bills separately from your rent or mortgage? By heating and utility bills we mean things like fuel oil, coal, gas, electricity, water, sewer and telephone.

Yes  
 No

\* **Roomer/Boarder** Required

Please check the box for anyone who is a roomer or boarder. A roomer is someone who pays for a room in someone else's house. A boarder is someone who pays for a room and meals.

No one

Select	Name	Gender	Age	Date of Birth
<input type="checkbox"/>	Eddy Smith	Male	47	01/01/1972
<input type="checkbox"/>	Mary Smith	Female	41	02/02/1978

 Office of Temporary and Disability Assistance

### myBenefits – Entering Housing Information

Application Number: MB0000536425

1 Start 2 People 3 Job Income 4 Other Income 5 Housing Bills 6 Submit

**Housing Bills**

Please check the box(es) for the housing bills that you or someone in your household is responsible for paying.

Rent or Lot Rent  
 Insurance on Home  
 Tax on Home  
 Mortgage  
 Mobile Home Loan  
 Special Assessments

Other(Specify)

Save And Exit Back Next

### myBenefits – Selecting the Main Source of Heat

Application Number: MB00000536425

1 Start 2 People 3 Job Income 4 Other Income 5 **Housing Bills** 6 Submit

#### Home Heating

Next, please tell us your main source of heat by answering the questions below. If you have other utility bills, we will ask you about them next.

#### Main Source of Heat

What is your main source of heat? By main source of heat, we mean what you use primarily to heat your home or apartment. Example: If you use fuel oil to run your furnace but you supplement heating your home with wood, your main source of heat would be fuel oil.

- Fuel Oil
- Coal or Corn
- Electricity
- Natural Gas
- Kerosene
- Liquid Propane Gas
- Wood / Wood Pellets
- Other (Specify)

#### Heating Bill

Do you pay a Vendor directly for your heating cost?

- Yes
- No

 Office of Temporary and Disability Assistance

### myBenefits – Entering Specific Information for Main Source of Heat

Application Number: MB00000536425

#### Fuel Oil Bill Details

Does your household receive a bill for Fuel Oil ?

- Yes
- No

Whose name is the bill in?

Fuel Oil Company Name

Account Number:

Address:

City:

State:

Zip Code:

### myBenefits – Preparing to Submit the Application

Application Number: MB00000536425

1 2 3 4 5 6

#### Eat Smart New York (ESNY)

You may be eligible for free Nutrition Education called Eat Smart New York (ESNY) which teaches about food budgeting, meal planning...

#### Home Energy Assistance Program (HEAP) Rights and Responsibilities

[View Rights and Responsibilities](#)

#### HEAP Rights and Responsibilities Affirmation

You must click the View Rights and Responsibilities button and check the box indicating that you have read the Home Energy Assistance Program (HEAP) rights and responsibilities.

#### Your Benefits Interview

In most cases, people who are applying for the HEAP program will not need an interview. In some cases, people who are applying for HEAP will need to have an interview either over the phone or in-person with a worker.

How would you like to schedule your interview if one is necessary?

By Phone

In person

[Back](#) [Next](#)

### myBenefits – Preparing to Sign the Application

#### Signing Your Application

Please read the following statements. Once you have completed reading these statements you will sign and submit your application.

#### HEAP Energy Emergency

I understand that this application is for a regular HEAP benefit only. I understand that if I am in an energy related emergency I need to contact my local Department of Social Services. I certify that I have read the above and fully understand that it is my responsibility to contact my [local Department of Social Services](#) for further assistance.

#### Electronic Signature

I swear and/or affirm under penalties of perjury that the information I have given or will give to the local Social Services district in connection with this application is correct. I understand that an electronic signature has the same legal effect and can be enforced in the same way as a written signature.

[Submit](#)

If you do not check any box, you will be considered to have decided not to register to vote at this time.

HEAP Energy Emergency

I understand that this application is for a regular HEAP benefit only. I understand that if I am in an energy related emergency I need to contact my local Department of Social Services. I certify that I have read the above and fully understand that it is my responsibility to contact my [local Department of Social Services](#) for further assistance.

Electronic Signature

I swear and/or affirm under penalties of perjury that the information I have given or will give to the local Social Services district in connection with this application is correct. I understand that an electronic signature has the same legal effect and can be enforced in the same way as a written signature.

[Submit](#)

[Back](#)

### myBenefits – Application Submitted

**Thank You!**

Eddy Smith, your online application has been sent to the following local agency for processing on 08/01/2019 at 16:05:07

**Address:**  
 Albany County DSS  
 162 WASHINGTON AVE.  
 ALBANY, NY 12210  
 (518) 447-7403

You may also need to talk with a worker by phone or in person.  
 By law, you will get an answer about your benefits within 30 days.  
 For information about other programs and services, go to the [Helpline Hands Beshare](#).

---

**Keep track of your application**

Your myBenefits number for this application: **MB00000536425**

This application ~~was submitted outside of normal business hours for this agency so your official Filing Date for benefits has been set to the next business day~~ **Your official Filing Date for benefits is 08/02/2019.**

It's a good idea to write this number down or print this page for your records. If you have questions about your application, having this number will help you get answers faster.  
 Keep in mind that you can use your account to check the status of your application and your benefits on the myBenefits website.

---

**Print Your Application**

If you would like to print or save a copy of your application for your files, please click the Print My Application button. If you decide to print or save, please keep in mind that your application has your private, personal information in it.

**Print My Application**

Keep in mind that you'll need to have a program called Adobe Acrobat Reader to see and print this information. If you don't have this program on your computer, you may install it for free by clicking the image:



---

**Submit Required Documents**

As a next step, you may need to talk with a worker by phone or in person. You may also need to give a worker proof of some things you told us in your Application.

You can submit electronic copies of these documents through myBenefits by clicking on the [Submit Documents](#) option below or you can send them or bring them to your Social Services District. If you can't find something, your worker may be able to help you get the proof you need. The documentation checklist, which has been provided, will help you gather these items.

Keep in mind that this list is based only on what you told us today. There may be other items that your worker will ask you to provide.

**Submit Documents**

For Training Purposes Only

 **Office of Temporary and Disability Assistance**

### myBenefits Application

**Thank you for using myBenefits!**

Eddy Smith , your application was sent to the following district office on 08-01-2019 at 4:05:07 PM

**County Address/Phone Number**  
 Albany County DSS  
 162 WASHINGTON AVE.  
 ALBANY, NY 12210  
 (518) 447-7403

**Submitted by:** eddysmith  
**County:** Albany  
**Your application tracking number is:** MB00000536425  
**Your application filing date is:** 08-02-2019

**In your application, you have asked for these benefits:**  
 • HEAP

By law, you will get an answer about your HEAP benefits within 30 business days.

If you are filing this application as part of our early outreach process, please note that the processing time for your application will not begin until opening day.

**Types of Proof**

Eligibility Factor	To prove an eligibility factor, provide one item from Column A or two items from Column B. If there is nothing listed in Column B, you must provide one item from Column A.	
	Column A	Column B
<b>Earned Income From Employer</b> Eddy Smith Mary Smith	Current wage stubs Pay envelopes On letterhead, rate of pay per hour, hours worked per week, date of first pay if new, and employer's phone number Contact with employer	
<b>Electricity</b>	Fuel/utility bills	
<b>Fuel Oil</b>	Fuel/utility bills	

MB00000536425 Page 1 of 8 MB00000536425 Page 8 of 8

- I swear and/or affirm that the information given on this application and subsequent phone interviews is true and correct.
- I understand that this application is for a regular HEAP benefit only. I understand that if I am in an emergency related emergency I need to contact my local Department of Social Services. I certify that I have read the above and fully understand that it is my responsibility to contact my local Department of Social Services for further assistance.
- I realize that any false statements or other misrepresentation knowingly made by me in connection with this application and subsequent requests for HEAP assistance may result in my being found ineligible for the assistance paid to me or on my behalf. Additionally, any false statement or misrepresentation knowingly made by me for purposes of obtaining assistance under this program may result in an action against me which may subject me to civil and/or criminal penalties. I understand that by signing this Application/Certification, I consent to any investigation to verify or confirm the information I have given and any other investigation by any authorized government agency in connection with this and subsequent requests for Home energy Assistance Program benefits for the current HEAP season. I also consent to allow the information provided on this application to be used in referrals to the Weatherization Assistance Program and to my utility company's low income programs.
- I swear and/or affirm that the information given on this application and subsequent phone interviews is true and correct.

I understand that an electronic signature has the same legal effect and can be enforced in the same way as a written signature.

I have electronically signed this application by providing my name, a user ID and password.

Signature Name	User Id	Date
Eddy Smith	eddysmith	08-01-2019 at 16:05:07

### myBenefits – Submitting a Document

**Verification Documents**

If you would like to submit verification documents online, please select the **Add Document** button next to each of the eligibility factors listed below to begin. To view a list of acceptable forms of proof for each item listed below simply click on the individual eligibility factor. Once you upload a document, it will be listed in the **Documents** column next to the eligibility factor you submitted it for. When you upload a document that is considered an acceptable form of proof for another eligibility factor, it will also be shown in the **Documents** column next to that item. Once you have finished uploading all of your documents, click on the **Submit** button at the bottom of this page. If you do not have all of your documents with you at this time, you may return to myBenefits at a later date to upload your documents.

Only the following file formats will be accepted: gif, single page tiff, jpeg, png, pdf. File size cannot exceed 7 MB

Eligibility Factor	Add Document	Documents	File Information	Document Status	Submitted On
<a href="#">Eddy Smith's Identity</a>	<b>Add Document</b>	No documents on file			
<a href="#">Eddy Smith's SSN</a>	<b>Add Document</b>	No documents on file			
<a href="#">Mary Smith's Identity</a>	<b>Add Document</b>	No documents on file			
<a href="#">Mary Smith's SSN</a>	<b>Add Document</b>	No documents on file			
<a href="#">Henry Smith's Identity</a>	<b>Add Document</b>	No documents on file			
<a href="#">Henry Smith's SSN</a>	<b>Add Document</b>	No documents on file			
<a href="#">Eddy Smith's Earned Income From Employer</a>	<b>Add Document</b>	No documents on file			
<a href="#">Mary Smith's Earned Income From Employer</a>	<b>Add Document</b>	No documents on file			
<a href="#">Rent or Lot Rent</a>	<b>Add Document</b>	No documents on file			
<a href="#">Electricity</a>	<b>Add Document</b>	No documents on file			
<a href="#">Fuel Oil</a>	<b>Add Document</b>	No documents on file			
<a href="#">Residence Address</a>	<b>Add Document</b>	No documents on file			

**Delete Selected Document(s)**

**Date**  
2019

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Office of Temporary and Disability Assistance

### myBenefits – Submitting a Document

**Select a Document**

To upload a document as proof of Identity, select a document type from the dropdown then click the Browse button to choose a file.

**Document Type**

**Browse...**

**OK** **Cancel**

The New York State Office of Temporary and Disability Assistance (OTDA) is strongly committed to protecting your personal and confidential information (such as your name, address, social security number, and date of birth) against unauthorized access, use and or disclosure. OTDA's website myBenefits.my.gov has security measures in place to protect against the loss, misuse, alteration or destruction of personal, private, sensitive information in the agency's custody. OTDA cannot insure the extent to which your personal information may be protected from unauthorized use, access, or disclosure where such information resides upon your own personal computer, a publicly-accessed computer, or one owned by a third party organization that is assisting you in filing your application. Please note that you can always complete and submit your application in person at a social services district office, or by mail. Should you choose to apply online using either your own personal computer, a publicly-accessed computer, or one owned by a third party organization assisting you with the filing of your application, OTDA strongly encourages you to make sure the computer being used has an up-to-date internet browser and anti-virus/security software available. OTDA is not responsible for any unauthorized access, use or disclosure of personal information not under its control resulting from a breach of security with respect to your personal computer, a publicly-accessed computer, or that of a third party assisting you in completing your application.

For Training Purposes Only

 **Office of Temporary and Disability Assistance**

### myBenefits – Submitting a Document

Services News Government Local

Eddy Smith(eddysmith)
Friday August 23, 2019

myBenefits Home
Dashboard
Sign Out

Select a Document

To upload a document as proof of Identity, select a document type from the dropdown then click the Browse button to choose a file.

Document Type

Driver's License v

C:\Users\lad7181\Desktop Browse...

OK
Cancel

The New York State Office of Temporary and Disability Assistance (OTDA) is strongly committed to protecting your personal and confidential information (such as your name, address, social security number, and date of birth) against unauthorized access, use and or disclosure. OTDA's website myBenefits.ny.gov has security measures in place to protect against the loss, misuse, alteration or destruction of personal, private, sensitive information in the agency's custody. OTDA cannot insure the extent to which your personal information may be protected from unauthorized use, access, or disclosure where such information resides upon your own personal computer, a publicly-accessed computer, or one owned by a third party organization that is assisting you in filing your application. Please note that you can always complete and submit your application in person at a social services district office, or by mail. Should you choose to apply online using either your own personal computer, a publicly-accessed computer, or one owned by a third party organization assisting you with the filing of your application, OTDA strongly encourages you to make sure the computer being used has an up-to-date internet browser and anti-virus/security software available. OTDA is not responsible for any unauthorized access, use or disclosure of personal information not under its control resulting from a breach of security with respect to your personal computer, a publicly-accessed computer, or that of a third party assisting you in completing your application.

### myBenefits – Submitted Documents

Verification Documents

If you would like to submit verification documents online, please select the **Add Document** button next to each of the eligibility factors listed below to begin. To view a list of acceptable forms of proof for each item listed below simply click on the individual eligibility factor. Once you upload a document, it will be listed in the **Documents** column next to the eligibility factor you submitted it for. When you upload a document that is considered an acceptable form of proof for another eligibility factor, it will also be shown in the **Documents** column next to that item. Once you have finished uploading all of your documents, click on the **Submit** button at the bottom of this page. If you do not have all of your documents with you at this time, you may return to myBenefits at a later date to upload your documents.

Only the following file formats will be accepted: gif, single page tiff, jpeg, png, pdf. File size cannot exceed 7 MB.

Eligibility Factor	Add Document	Documents	File Information	Document Status	Submitted On
<a href="#">Eddy Smith's Identity</a>	<a href="#">Add Document</a>	Driver's License	eddyDL.png	Uploaded <input type="checkbox"/>	
<a href="#">Eddy Smith's SSN</a>	<a href="#">Add Document</a>	No documents on file			
<a href="#">Mary Smith's Identity</a>	<a href="#">Add Document</a>	Driver's License	mary001.png	Uploaded <input type="checkbox"/>	
<a href="#">Mary Smith's SSN</a>	<a href="#">Add Document</a>	Social Security Card	marySSN.png	Uploaded <input type="checkbox"/>	
<a href="#">Henry Smith's Identity</a>	<a href="#">Add Document</a>	No documents on file			
<a href="#">Henry Smith's SSN</a>	<a href="#">Add Document</a>	No documents on file			
<a href="#">Eddy Smith's Earned Income From Employer</a>	<a href="#">Add Document</a>	No documents on file			
<a href="#">Mary Smith's Earned Income From Employer</a>	<a href="#">Add Document</a>	No documents on file			
<a href="#">Rent or Lot Rent</a>	<a href="#">Add Document</a>	No documents on file			
<a href="#">Electricity</a>	<a href="#">Add Document</a>	Fuel/utility bills	A fuel company.png	Uploaded	
<a href="#">Fuel Oil</a>	<a href="#">Add Document</a>	Fuel/utility bills	A fuel company.png	Uploaded <input type="checkbox"/>	
<a href="#">Residence Address</a>	<a href="#">Add Document</a>	Fuel/utility bills	A fuel company.png	Uploaded	

Delete Selected Document(s)

[Back](#)
[Submit](#)

Office of Temporary and Disability Assistance

Summary of myBenefits system

Services News Government Local

myBenefits Instructions Programs Resources <https://mybenefits.ny.gov>

**AM I ELIGIBLE?**  
Prescreen for Programs you may be eligible for  
SNAP  
Assistance Programs  
Health Insurance  
Tax Credits  
[CHECK ELIGIBILITY](#)

**EBT BALANCE**  
Check Your EBT Balance  
SNAP and Cash Account  
Transaction History  
Change Your PIN  
Report Card Lost or Damaged  
[CHECK YOUR BALANCE](#)

**NEW USERS**  
New Users  
Apply for SNAP  
Recertify  
Report Changes  
View Case Details  
[CREATE NEW ACCOUNT](#)

**RETURNING USERS**  
Returning Users  
Apply for SNAP  
Continue Application  
Track Application  
Recertify Benefits  
Report Changes  
View Case Details  
Submit Verification Documents  
[LOG INTO YOUR ACCOUNT](#)

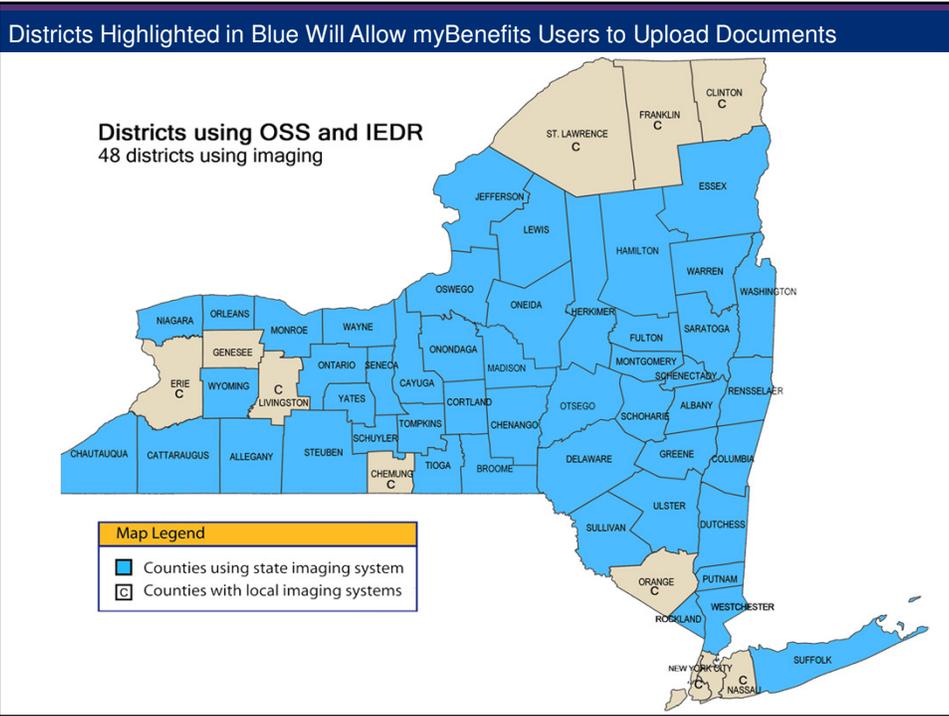
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**Addendum**

Office of Temporary and Disability Assistance



### **NYDocSubmit Mobile App**

NYDocSubmit is an app created by NYS that is available from the Apple and Google store. Users take pictures of their documents and users can submit documents via their mobile device.

The app is available in the following districts:

- Livingston
- Chemung
- Broome
- St. Lawrence
- Clinton

Please Note: It is anticipated that more districts will be added in the near future.