

KATHY HOCHUL Governor BARBARA C. GUINN

**RAJNI CHAWLA** 

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Commissioner

**Executive Deputy Commissioner** 

## **General Information System (GIS) Message**

Section 1	
Transmittal:	25DC070 Upstate and New York City
Date:	October 28, 2025
То:	Subscribers
Suggested Distribution:	Social Services District Commissioners, Temporary Assistance (TA) Directors, Supplemental Nutrition Assistance Program (SNAP) Directors, Home Energy Assistance Program (HEAP) Directors, Child Support Directors, Medicaid (MA) Directors, Finance Directors, Employment Coordinators, Staff Development Coordinators
From:	Valerie Figueroa, Deputy Commissioner, Employment and Income Support Programs
Subject:	Supplemental Security Income Case Correction Procedure: Use of form SSA-3911-U4
Effective Date:	Immediately
Contact Information:	Temporary Assistance Bureau (518) 474-9344 or <a href="mailto:tabureau@otda.ny.gov">tabureau@otda.ny.gov</a> , Supplemental Nutrition Assistance Program (518) 473-1469 or <a href="mailto:SNAPBureau@otda.ny.gov">SNAPBureau@otda.ny.gov</a> , Department of Health Local District Support Unit: Upstate – (518 474-8887; New York City – (212) 417-4500
	17 1 0007; 110W 1 01K OKY (212) 117 1000

## Section 2

The purpose of this message is to provide updated instructions to social services districts (districts) for the standard method of correcting Supplemental Security Income (SSI) data, as directed in 95-ADM-5.

Districts should continue sending the completed Report of Change (SSA-3911-U4) forms to the Social Security Administration (SSA) Field Office that services their county.

However, districts should discontinue sending copies of completed Report of Change forms to the SSA Regional Office.