

DEPARTMENT OF HEALTH AND HUMAN SERVICES  
DIVISION OF SOCIAL SERVICES

County Operations

ROY COOPER  
GOVERNOR

MANDY COHEN, MD, MPH  
SECRETARY

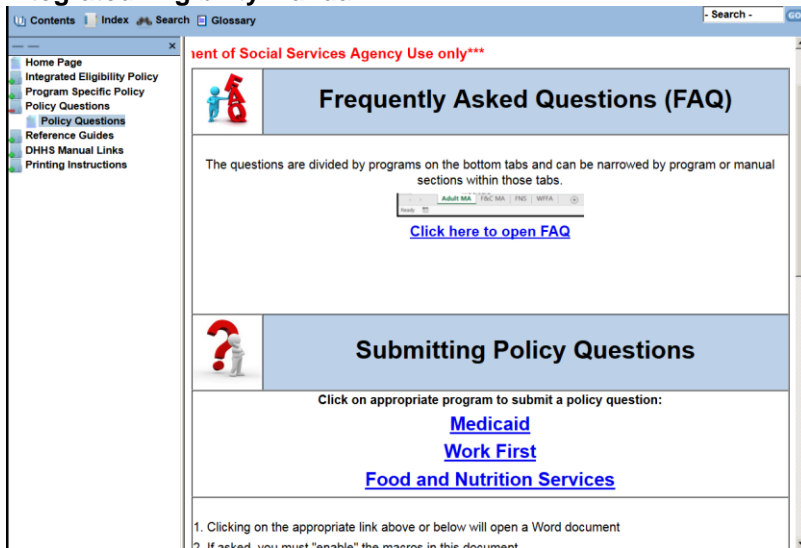
WAYNE E. BLACK  
SR. DIRECTOR OF SOCIAL SERVICES  
AND COUNTY OPERATIONS

**To:** County Directors of Social Services  
**Attention:** Economic Services Administrators, Managers, and Supervisors  
**Subject:** Updates to Operational Support Team Policy Question submission forms  
**Date:** June 9, 2017

This is to notify you of changes being made to the Operational Support Team (OST) question submission form. Security issues require that we discontinue the use of the Google documents web form. To maintain the simplification, standardization, and automation of the submission of policy questions, the Google document will be replaced with a word form. While the basic process of submitting all policy questions through the links in the Integrated Eligibility Manual has not changed, the look of the documents will be different for the user. Instructions are included on the Policy Questions page on the Integrated Eligibility Manual. See below for a description of the new documents.

**Effective upon receipt of this letter please submit all Food and Nutrition Services, Medicaid, and Work First policy questions via the Policy Questions link located in the Integrated Eligibility Manual.**

**Integrated Eligibility Manual:**



www.ncdhhs.gov

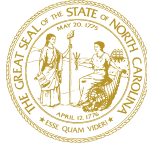
Tel 919-813-5521 • Fax 919-813-5010

Location: 79 T.W Alexander Drive • 4301 Research Commons • Durham, NC 27709

Mailing Address: P.O. Box 110606 • Durham, NC 27709

An Equal Opportunity / Affirmative Action Employer





DEPARTMENT OF HEALTH AND HUMAN SERVICES  
DIVISION OF SOCIAL SERVICES

County Operations

ROY COOPER  
GOVERNOR

MANDY COHEN, MD, MPH  
SECRETARY

WAYNE E. BLACK  
SR. DIRECTOR OF SOCIAL SERVICES  
AND COUNTY OPERATIONS

Sample Word Form:

**Operational Support Team Food and Nutrition Services  
Policy Question Submission Form**  
*For Local Department of Social Services use only*

|   |  |
|---|--|
| <b>Your Contact Information:</b>                    |  |
| Name:   |  |
| Email Address:                                      |  |
| Phone Number:                                       |  |
| Local Agency:                                       |  |
| <b>Program Area and Policy Sections Researched:</b> |  |
| Program Area:                                       |  |
| Policy Sections Researched:                         |  |
| <b>Case Identifier and Question</b>                 |  |
| Type:   | Number:  |
| Question:   | <ul style="list-style-type: none"> <li>• Give as much detail as possible</li> <li>• If there are details you cannot list here, you may request that we call you for more detail</li> <li>• We will contact you by phone or email if we need additional information / Do not use any confidential information in this form</li> <li>• Only submit questions on one case per submission</li> <li>• We <b>cannot</b> respond to NC FAST functionality questions, please contact the NC FAST help desk.</li> </ul> |

Send Question

If you have questions concerning these new procedures or issues submitting policy questions, please contact your assigned OST Representative.

Sincerely,

Regina W. Bell  
OST Manager

OST-13-2017

Barbara M. Daniels  
OST Manager

www.ncdhhs.gov

Tel 919-813-5521 • Fax 919-813-5010

Location: 79 T.W Alexander Drive • 4301 Research Commons • Durham, NC 27709

Mailing Address: P.O. Box 110606 • Durham, NC 27709

An Equal Opportunity / Affirmative Action Employer

