

STATE OF CONNECTICUT
DEPARTMENT OF SOCIAL SERVICES
OFFICE OF LEGAL COUNSEL, REGULATIONS, AND ADMINISTRATIVE HEARINGS
55 FARMINGTON AVE
HARTFORD, CT 06105-3725

██████████ 2022
Signature Confirmation

Client ID # ██████████
Case ID # ██████████
Request # 192803

NOTICE OF DECISION

PARTY

██████████
██████████
██████████

PROCEDURAL BACKGROUND

On ██████████ 2022, the Department of Social Services (the "Department") sent ██████████ (the "Appellant") a Notice of Action ("NOA") denying her application for benefits under the State Administered General Assistance ("SAGA") cash assistance program.

On ██████████ 2022, the Appellant requested an administrative hearing to contest the Department's decision to deny such benefits.

On ██████████ 2022, the Office of Legal Counsel, Regulations, and Administrative Hearings ("OLCRAH") issued a notice scheduling the administrative hearing for ██████████ 2022.

On ██████████ 2022, in accordance with sections 17b-60, 17-61 and 4-176e to 4-189 inclusive, of the Connecticut General Statutes, OLCRAH held an administrative hearing telephonically.

The following individuals were present at the hearing:

██████████ Appellant
Matt Bartolotta, Department's Representative
Shawn P. Hardy, Hearing Officer

STATEMENT OF THE ISSUE

The issue is whether the Department's decision to deny the Appellant's SAGA cash application was correct.

FINDINGS OF FACT

1. On [REDACTED] 2022, the Appellant submitted an online application for SAGA cash benefits for a household of one person. (Exhibit 7: Online Application; Hearing Summary)
2. The Appellant is [REDACTED] years old and is unable to work. Colonial Cooperative Care ("CCC") deemed the Appellant as disabled. (Appellant's Testimony, Department's Testimony)
3. On [REDACTED] 2022, the Department sent the Appellant a Proofs We Need letter ("W1348") requesting the following: proof she cannot work due to a medical condition, proof of checking account balance, and proof of motor vehicle ownership for 2012 Chevy Impala, 2006 Chevy Trailblazer, and 1998 GMC Sierra K1500. The Department gave a due date of [REDACTED], 2022. (Exhibit 1: Proofs We Need [REDACTED] 22)
4. On [REDACTED] 2022, the Appellant completed her required interview. SAGA remained pending asset verification and medical packet. (Hearing Summary, Exhibit 6: Case Notes Details)
5. The Appellant did not submit the requested documents by the due date. (Hearing Summary, Exhibit 6: Case Notes Details)
6. The Appellant did not notify the Department that she required assistance obtaining the requested documents. The Appellant did not request an extension of time to obtain the documents. (Appellant's Testimony)
7. On [REDACTED], 2022, CCC closed the pending determination case because it did not receive the medical packet within thirty days. (Hearing Summary, Exhibit 6: Case Notes Details)
8. On [REDACTED] 2022, the Department processed documents received on [REDACTED] [REDACTED] 2022: Bank of America statement from [REDACTED] 2022, copies of Department of Motor Vehicle ("DMV") printouts showing the DMV cancelled all three registrations for the vehicles in question, along with handwritten notes stating the Appellant "junked" all three vehicles. (Exhibit 3: DMV registration and handwritten notes, Department's Testimony)

9. On ██████████ 2022, the Department sent the Appellant a NOA denying the Appellant's application for SAGA cash benefits. The NOA stated, "You did not return all of the required proofs by the date we asked." (Exhibit 2: NOA ██████████ 2022)
10. On ██████████ 2022, the Appellant filed a Fair Hearing Request stating "I have returned all documents for cash assistance. It took a little longer to get the paperwork in than expected". (Hearing Summary)
11. On ██████████ 2022, the Fair Hearing Point of Contact reviewed case. The Department did not receive documents verifying vehicles that are no longer in the Appellant's possession. SAGA requires verification of 3 months of bank statements and the Appellant only submitted one month. The Department made phone calls to the Appellant with no answer. Voicemails left. (Hearing Summary, Exhibit 6: Case Notes Details)
12. On ██████████ 2022, the Department contacted the client to discuss the case. The Department advised the Appellant to submit a new application along with the needed verifications since it denied the original application more than sixty days ago. The Applicant withdrew the hearing request. (Hearing Summary, Exhibit 6: Case Notes Details)
13. On ██████████ 2022, the Appellant contacted the Fair Hearing Department and asked to reinstate the hearing. (Hearing Summary)
14. The issuance of this decision is timely under Section 17b-61(a) of the Connecticut General Statutes, which requires that the Department issue a decision within 90 days of the request for an administrative hearing. The Appellant requested an administrative hearing on ██████████ 2022; therefore, this decision is due no later than ██████████ 2022, and is timely.

CONCLUSIONS OF LAW

1. Section 17b-191 of the Connecticut General Statutes authorizes the Commissioner of the Department of Social Services to implement a state administered general assistance program.
2. Section 17b-198-1 of the Regulations of Connecticut State Agencies sets forth the standards and eligibility guidelines for the state administered general assistance program.
3. Section 17b-198-3(d)(1) of the Regulations of Connecticut State Agencies provides that the date of application shall be the date on which a signed application requesting cash assistance is received by the department.

The Department correctly determined the Appellant's SAGA application date was [REDACTED] 2022.

4. "No person shall be eligible for assistance pursuant to SAGA unless such person is unemployable, as described in subsections (b) and (c) of this section, or transitional, as described in subsections (d) and (e) of this section." Conn. Agency Regs. Section 17b-198-7 (a)

State regulation provides as follows:

Medical unemployability. A person shall be considered unemployable due to medical impairment when such person provides the department with current medical and vocational information, including information concerning such person's employment history, verifying that such person:

- (1) Has been diagnosed with one or more physical or mental illnesses or conditions and:
 - (A) One or more of such illnesses or conditions are expected to last not less than six months;
 - (B) One or more of such illnesses or conditions, individually or collectively, prevent such person from working or participating in education or training; and
 - (C) One or more of such illnesses or conditions are severe, as determined by the department or the department's designee after consulting schedule of medical-disability standards maintained and made available to the public by the department;
- (2) Meets the disability requirements established by the Social Security Administration; or
- (3) Has received an award letter from the Social Security Administration granting SSI or SSDI benefits, but has not yet received such benefits.

Conn. Agency Regs. Section 17b-198-7(b)

The Department correctly required the Appellant to provide a medical packet to determine medical unemployability status.

5. State regulation provides that if, after reviewing an application, information necessary to make a determination regarding the applicant's eligibility remains outstanding or unverified, the department shall notify the applicant in writing of the need to provide such information. Conn. Agency Regs. Section 17b-198-13(a)(5)

The Department properly notified the Appellant of the required verifications.

6. State regulation states, in pertinent part:

- (1) Except as provided in subdivision (3) of this subsection, an assistance unit member shall, as a condition of eligibility for assistance, cooperate during the application and eligibility process. The cooperation required pursuant to this subsection during the application process includes fully completing the application form, providing the signature of any person who is required to sign such form, responding to any appointment for an interview scheduled by the department and verifying information when requested by the department.
- (2) Except as provided in subdivision (3) of this subsection, whenever cooperation required by this subsection is not provided during the application process, the department shall deny the application. Whenever cooperation required by this subsection is not provided during any portion of the eligibility process following the application process, the assistance unit member shall be ineligible for assistance until such member provides such cooperation. If an assistance unit member fails to cooperate with a quality control review conducted by the department and does not cooperate sooner than ninety-five days after the end of the annual quality control review period during which such cooperation was withheld, such member shall be required to file a new application for assistance pursuant to SAGA prior to the renewal of such assistance. The department shall not consider an assistance unit member's prior failure to cooperate while reviewing any such new application for assistance. For purposes of this subsection, "quality control review period" means the period beginning October 1 each year and ending September 30 the following year.

Conn. Agency Regs. Section 17b-198-6(b)

The Appellant failed to provide the required verifications and did not cooperate with the Department pursuant to the SAGA cash application process.

7. State regulation provides, in pertinent part, that no assistance unit shall be ineligible for assistance for failing to provide the cooperation required by this subsection if there is good cause for the assistance unit's failure to cooperate. For purposes of this subdivision, good cause exists whenever the lack of cooperation resulted from (A) circumstances beyond the assistance unit's control. Conn. Agency Regs. Section 17b-198-6(b)(3)(A)

The Appellant did not have good cause for failing to cooperate with the application process. It was within the Appellant's control to contact the Department if she needed assistance obtaining the required documents. The Appellant provided some of the required documents on [REDACTED] 2022; she did not inform the Department of any difficulty obtaining all the required verifications.

8. State regulation addresses processing standards and states: The department may deny an application on or after the thirtieth day following the date such application was filed if the applicant fails to provide information requested by the department that is necessary to verify his or her eligibility for assistance and the provisions of subdivision (3) of subsection (b) of this section do not apply. Conn. Agency Regs. 17b-198-13(a)(4)

The Department correctly denied the Appellant's SAGA application on [REDACTED] 2002. The Appellant failed to provide all the required documentation needed to verify her eligibility for assistance.

DECISION

The Appellant's appeal is **DENIED**.

Shawn P Hardy

Shawn P. Hardy
Hearing Officer

CC: Brian Sexton, Operations Manager Middletown, CT Regional Office
Matt Bartolotta, Department Representative Middletown, CT Regional Office

RIGHT TO REQUEST RECONSIDERATION

The appellant has the right to file a written reconsideration request within **15** days of the mailing date of the decision on the grounds there was an error of fact or law, new evidence has been discovered or other good cause exists. If the request for reconsideration is granted, the appellant will be notified within 25 days of the request date. No response within 25 days means that the request for reconsideration has been denied. The right to request a reconsideration is based on §4-181a (a) of the Connecticut General Statutes.

Reconsideration requests should include specific grounds for the request: for example, indicate what error of fact or law, what new evidence, or what other good cause exists.

Reconsideration requests should be sent to: Department of Social Services, Director, Office of Administrative Hearings and Appeals, 55 Farmington Avenue, Hartford, CT 060105-3725.

RIGHT TO APPEAL

The appellant has the right to appeal this decision to Superior Court within 45 days of the mailing of this decision, or 45 days after the agency denies a petition for reconsideration of this decision, provided that the petition for reconsideration was filed timely with the Department. The right to appeal is based on §4-183 of the Connecticut General Statutes. To appeal, a petition must be filed at Superior Court. A copy of the petition must be served upon the Office of the Attorney General, 55 Elm Street, Hartford, CT 06106 or the Commissioner of the Department of Social Services, 55 Farmington Avenue, Hartford, CT 06105-3725. A copy of the petition must also be served on all parties to the hearing.

The 45 day appeal period may be extended in certain instances if there is good cause. The extension request must be filed with the Commissioner of the Department of Social Services in writing no later than 90 days from the mailing of the decision. Good cause circumstances are evaluated by the Commissioner or the Commissioner's designee in accordance with §17b-61 of the Connecticut General Statutes. The Agency's decision to grant an extension is final and is not subject to review or appeal.

The appeal should be filed with the clerk of the Superior Court in the Judicial District of New Britain or the Judicial District in which the appellant resides.