

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

██████████, 2019
Signature Confirmation

CL ID # ██████████
Hearing Request # 145758

NOTICE OF DECISION

PARTY

██████████
██████████
██████████
██████████

PROCEDURAL BACKGROUND

On ██████████, 2019, the Department of Social Services (the “Department”) sent ██████████ (the “Appellant”) a Notice of Action (“NOA”) proposing to recoup an overpayment of his Supplemental Nutrition Assistance Program (“SNAP”) benefits issued from ██████████ 2018 through ██████████ 2019, in the amount of \$3856.00.

On ██████████ 2019, the Appellant requested an administrative hearing to contest the Department’s decision to recoup such benefits.

On ██████████, 2019, the Office of Legal Counsel, Regulations, and Administrative Hearings (“OLCRAH”) issued a Notice scheduling the administrative hearing for ██████████, 2019.

On ██████████, 2019, in accordance with sections 17b-60, 17b-61 and 4-176e to 4-189, inclusive, of the Connecticut General Statutes, OLCRAH held an administrative hearing. The following individuals were present at the hearing:

██████████, Appellant
██████████, Appellant’s spouse
Ahmed Aeoamaiam, Interpreter, ITI
David Dominique, Department’s Representative
Marci Ostroski, Hearing Officer

The record remained open for submission of additional requested information from the Department. Exhibits were received. The record closed on [REDACTED], 2019.

A copy of this decision has been issued in English and in Arabic.

STATEMENT OF THE ISSUE

The issue to be decided is whether the Department correctly determined that the Appellant was overpaid in SNAP benefits and is subject to recoupment.

FINDINGS OF FACT

1. The Appellant, his spouse, and their three children were recipients of SNAP assistance as a household of five. (Ex. 7: Notice of Action, [REDACTED]/18, Appellant's testimony)
2. The Appellant's household does not include any disabled members. (Appellant's testimony)
3. The Appellant has been employed with [REDACTED] since [REDACTED], 2017. (Ex. 2: Letter from [REDACTED], Ex. 3: W-35 Wage Verifications)
4. Effective [REDACTED] 2018, 130% of the FPL for a household of 5 was \$3118.00. (Federal Register, Ex. 7: Notice of Action, [REDACTED]/18)
5. On [REDACTED] 2018, the Appellant submitted a redetermination form to the Department reflecting \$643.20 in gross weekly wages and \$1450.00 in rent. The Appellant is responsible to pay for utilities. (Ex. 7: Notice of Action, [REDACTED]/18)
6. On [REDACTED], 2018, the Department sent a notice to the Appellant with the results of his SNAP redetermination. The Notice stated in part that the Appellant must contact the benefit center to report if his gross monthly income exceeds \$3118.00. (Ex. 7: Notice of Action, [REDACTED]/18)
7. In the month of [REDACTED] 2018, the Appellant received \$3866.16 (1068.56+973.05+990.16+834.38) in gross income. (Ex. 3: W-35, Wage verifications)
8. In the month of [REDACTED] 2018, the Appellant received \$3080.03 (843.04+749.12+699.98+787.89) in gross income. (Ex. 3: W-35, Wage verifications)
9. In the month of [REDACTED] 2018, the Appellant received \$3694.56 (569.21+1047.02+712.00+723.13+643.20) in gross income. (Ex. 3: W-35, Wage verifications)

10. In the month of [REDACTED] 2018, the Appellant received \$3205.44 (890.00+665.04+796.08+854.32) in gross income. (Ex. 3: W-35, Wage verifications)
11. In the month of [REDACTED] 2018, the Appellant received \$3340.85 (890.00+815.16+655.20+980.49) in gross income. (Ex. 3: W-35, Wage verifications)
12. In the month of [REDACTED] 2018, the Appellant received \$5469.59 (890.00+1058.57+1050.25+1483.65+987.12) in gross income. (Ex. 3: W-35, Wage verifications)
13. On [REDACTED] 2018, the Appellant submitted his Periodic Report Form ("PRF"). The Appellant reported a change in his rent to \$1500.00 per month. The Appellant did not report a change to his listed income of \$643.20 per week (\$2765.76 per month). (Ex. 10: PRF)
14. In the month of [REDACTED] 2018, the Appellant received \$4534.08 (1483.65+801.00+1211.35+1038.08) in gross income. (Ex. 3: W-35, Wage verifications)
15. In the month of [REDACTED] 2019, the Appellant received \$5835.63 (292.35+356.48+1174.16+970.64+1481.26+1560.74) in gross income. (Ex. 3: W-35, Wage verifications)
16. In the month of [REDACTED] 2019, the Appellant received \$4051.36 (1088.66+1054.94+1004.56+903.20) in gross income. (Ex. 3: W-35, Wage verifications)
17. In the month of [REDACTED] 2019, the Appellant received \$4272.61 (733.85+500.00+970.64+1009.34+1058.78) in gross income. (Ex. 3: W-35, Wage verifications)
18. In the month of [REDACTED] 2019, the Appellant received \$3920.57 (1144.97+925.20+925.20+925.20) in gross income. (Ex. 3: W-35, Wage verifications)
19. In the month of [REDACTED] 2019, the Appellant received \$4740.45 (994.19+832.68+1063.18+925.20+925.20) in gross income. (Ex. 3: W-35, Wage verifications)
20. In the month of [REDACTED] 2019, the Appellant received \$4133.56 (1408.14+1122.22+1227.03+376.17) in gross income. (Ex. 3: W-35, Wage verifications)

21. On [REDACTED], 2019, the Appellant grossed \$1023.71. On [REDACTED] 2019 the Appellant grossed \$1546.11. On [REDACTED] 2019, the Appellant grossed \$1477.12 for a total of 4046.94 gross earnings in the three week period of [REDACTED]. There is insufficient evidence in the record to determine the amount of income the Appellant grossed during the week of [REDACTED] 2019. (Ex. 3: W-35, Wage verifications, Hearing record)

22. The Appellant received the following SNAP benefits:

[REDACTED] 2018	\$316.00
[REDACTED] 2018	\$316.00
[REDACTED] 2018	\$325.00
[REDACTED] 2018	\$325.00
[REDACTED] 2018	\$325.00
[REDACTED] 2019	\$325.00
[REDACTED] 2019	\$325.00
[REDACTED] 2019	\$325.00
[REDACTED] 2019	\$325.00
[REDACTED] 2019	\$325.00
[REDACTED] 2019	\$325.00
[REDACTED] 2019	\$325.00

(Ex. 6: Client Benefit Management; EPPIC, Ex. 8: Notification of Overpayment and Recoupment [REDACTED]/19)

23. On [REDACTED], 2019, the Department received a completed W35 form from the Appellant's employer listing his gross wages from [REDACTED] 2018 through [REDACTED] 2019. (Ex. 3: W-35, Wage Verifications)

24. On [REDACTED], 2019, the Department's claims unit completed a review of the Appellant's SNAP benefit. They determined that the Appellant's income exceeded 130% of the Federal Poverty Level ("FPL") in [REDACTED] 2018 and the Appellant failed to report the increase. (Ex. 1: Case Notes)

25. On [REDACTED], 2019, the Department reviewed the Appellant's eligibility. The Department recalculated his benefits back to [REDACTED] 2018 based on verification of his actual earnings and shelter expenses for the months of [REDACTED] 2018 through [REDACTED] 2019. (Ex. 1: Case Notes)

26. On [REDACTED], 2019, the Department determined that the Appellant was eligible to receive the following SNAP benefits:

[REDACTED] 2018	\$0.00
[REDACTED] 2018	\$26.00
[REDACTED] 2018	\$0.00
[REDACTED] 2018	\$0.00

██████████ 2018	\$0.00
██████████ 2019	\$0.00
██████████ 2019	\$0.00
██████████ 2019	\$0.00
██████████ 2019	\$0.00
██████████ 2019	\$0.00
██████████ 2019	\$0.00
██████████ 2019	\$0.00

(Ex. 1: Case Notes, Ex. 8: Notice of Action ██████████/19)

27. On ██████████ 2019, the Department processed the change in Appellant's SNAP eligibility and issued a notice to the Applicant advising that he had been overpaid by \$3856.00 in SNAP benefits for the months of ██████████ 2018 through ██████████ 2019 due to client error and he must repay the overpayment. (Ex. 8: Notice of Overpayment, ██████████/19)

CONCLUSIONS OF LAW

1. Section § 17b-2 of the Connecticut General Statutes provides that the Department of Social Services is designated as the state agency for the administration of the supplemental nutrition assistance program pursuant to the Food and Nutrition Act of 2008.
2. Section 17b-88 of the Connecticut General Statutes, authorizes the Commissioner of the Department of Social Services to recover any public assistance overpayments and take such other action as conforms to federal regulations, including, but not limited, conducting administrative disqualification hearings.
3. Title 7 of the Code of Federal Regulations ("CFR") § 273.2 (j) (2) (E) (ii) provides the State agency, at its option, may extend categorical eligibility to the following households only if doing so will further the purposes of the Food Stamp Act of 2008: (A) Any household (except those listed in paragraph (j)(2)(vii) of this section) in which all members receive or are authorized to receive non-cash or in-kind services from a program that is less than 50 percent funded with State money counted for MOE purposes under Title IV-A or Federal money under Title IV-A and that is designed to further purposes one and two of the TANF block grant, as set forth in Section 401 of P.L. 104-193. States must inform FNS of the TANF services under this paragraph that they are determining to confer categorical eligibility.
4. Title 7 of the CFR § 273.9 (a) provides that participation in the Program shall be limited to those households whose incomes are determined to be a substantial limiting factor in permitting them to obtain a more nutritious diet. Households, which contain an elderly or disabled member, shall meet the net income eligibility standards for the Food Stamp Program. Households, which do not contain an elderly

or disabled member, shall meet both the net income eligibility standards and the gross income eligibility standards for the Food Stamp Program. Households which are categorically eligible as defined in §273.2 (j) (2) or 273.2 (j) (4) do not have to meet either the gross or net income eligibility standards. The net and gross income eligibility standards shall be based on the levels established in Section 673 (2) of the Community Services Block Grant Act (42 U.S.C. 9902 (2)).

5. Title 7 of the CFR § 273.9(b) provides that household income shall mean all income from whatever source excluding only items specified in paragraph (c) of this section.
6. Title 7 of the CFR § 273.9 (b)(1) provides earned income shall include: (i) All wages and salaries of an employee
7. “The Department’s Uniform Policy Manual (“UPM”) is the equivalent of a state regulation and, as such, carries the force of law.” *Bucchere v Rowe*; 43 Conn Supp. 175 178 (194) (citing Conn. Gen. Stat. § 17b-10; *Richard V. Commissioner of Income Maintenance*, 214 Conn. 601, 573 A.2d712 (1990)).
8. Uniform Policy Manual (“UPM”) § 5005 (A)(1) provides that the Department counts the assistance unit’s available income, and that income is considered available if it is received directly by the assistance unit.
9. The Department correctly determined that the Appellant was receiving earned income from employment in the months of ██████████ 2018 through ██████████ 2019.
10. Title 7 of the CFR § 273.10 (c)(1)(ii) & (c)(2)(i) provides for converting into monthly amounts.
11. UPM § 5025.05 provides for Income Received Monthly or More Frequently and states for past months the Department uses the exact amount of the unit’s available income received or deemed in the month.
12. The Department correctly used the exact amount of earnings in each month from ██████████ 2018 through ██████████ 2019 in the calculation of eligibility
13. UPM Section 5520.40 provides that income eligibility for the SNAP program is determined either through the use of the SNAP gross and applied income tests or through meeting the eligibility requirements for TFA (including diversion assistance), AFDC, AABD, GA, SAGA, refugee assistance of SSI.
14. UPM § 5520.40 provides that income eligibility for the SNAP program is determined either through the use of SNAP gross and applied income tests or through meeting the eligibility requirements for Temporary Family Assistance (“TFA”) (including diversion assistance), Aid to Families with Dependent Children (“AFDC”), Aid to the Aged, Blind and Disabled (“AABD”), General Assistance (“GA”), State Administered

General Assistance ("SAGA"), refugee assistance or Supplemental Security Income ("SSI").

A. Gross Income Eligibility Test

1. The Gross Income Eligibility test is used for all units except those which:
 - a. include one or more persons who are elderly or disabled; or
 - b. are categorically eligible for FS benefits.
2. When the Gross Income Test is used, the assistance unit's gross monthly income is compared to a limit which is equal to 130% of the Food Stamp Applied Income Limit (FSAIL) for the number of persons in the needs group:
 - a. If the unit's total gross income exceeds the standard, the unit is not eligible for Food Stamps benefits.
 - b. If the unit's gross income equals or is less than the limit, the unit's applied income is then subjected to the Applied Income Test.

B. Applied Income Eligibility Test

1. Income eligibility is determined on the basis of the assistance unit's total monthly applied income:
 - a. including those units which are not subjected to the Gross Income Eligibility Test; and
 - b. excluding those units which are considered categorically eligible for FS benefits.
2. The unit's total monthly applied income is compared to an amount equivalent to the Food Stamp Applied Income Limit for the respective unit size:
 - a. If the total applied income exceeds the FSAIL, the unit is not eligible for Food Stamps benefits;
 - b. If the total applied income equals or is less than the FSAIL, the unit is eligible.

C. Categorical Eligibility Test

Those assistance unit's which qualify as categorically eligible are not subjected to gross or applied income eligibility tests.

15. The Department correctly determined that the assistance unit does not include a disabled individual and the household is therefore subject to the gross income test.

16. Title 7 of the CFR § 273.12(a)(1) provides in part that monthly reporting households are required to report as provided in § 273.21. Quarterly reporting households are

subject to the procedures as provided in paragraph (a)(4) of this section. Simplified reporting households are subject to the procedures as provided in paragraph (a)(5) of this section.

17. Title 7 of the CFR § 273.12(a)(5) provides the State agency may establish a simplified reporting system in lieu of the change reporting requirements specified under paragraph (a)(1) of this section. The following requirements are applicable to simplified reporting systems: (i) *Included households*. The State agency may include any household certified for at least 4 months within a simplified reporting system. (ii) *Notification of simplified reporting requirement*. At the initial certification, recertification and when the State agency transfers the households to simplified reporting, the State agency shall provide the household with the following: (A) A written and oral explanation of how simplified reporting works; (B) For households required to submit a periodic report, a written and oral explanation of the reporting requirements including: (1) The additional changes that must be addressed in the periodic report and verified. (iii) *Periodic report*. (A) *Exempt households*. The State agency must not require the submission of periodic reports by households certified for 12 months or less in which all adult members are elderly or have a disability with no earned income.
18. Title 7 of the CFR § 273.12(a)(5)(iii)(G) provides that the periodic report shall be the sole reporting requirement for any information that is required to be reported on the form, except that a household required to report less frequently than quarterly shall report when its monthly gross income exceeds the monthly gross income limit for its household size in accordance with paragraph (a)(5)(v) of this section, and able-bodied adults subject to the time limit of 7 CFR § 273.24 shall report whenever their work hours fall below 20 hours per week, averaged monthly.
19. Title 7 of the CFR § 273.12(a)(5)(v) provides for *Reporting when gross income exceeds 130 percent of poverty*. A household subject to simplified reporting in accordance with paragraph (a)(5)(i) of this section, whether or not it is required to submit a periodic report, must report when its monthly gross income exceeds the monthly gross income limit for its household size, as defined at §273.9(a)(1). The household shall use the monthly gross income limit for the household size that existed at the time of its most recent certification or recertification, regardless of any subsequent changes in its household size.
20. The Appellant failed to notify the Department of his change in earned income in a timely manner and on the ██████████ 2018 PRF when his income exceeded 130% of the Federal Poverty Level of \$3118.00 for a household of five.
21. Title 7 CFR § 273.9(d)(1)&(2) provides for standard deductions and earned income deductions.
22. UPM § 5045.15 provides that the amount of applied income upon which the level of SNAP benefits is based is calculated in the following way:

- A. The monthly net earned income amount is calculated by reducing monthly earnings by:
 - 1. the actual amount of self-employment expenses, if applicable; and
 - 2. any earned income deductions approved by the Social Security Administration in regards to individual self-support plans (Cross reference: 5035.15); and
 - 3. a deduction of 20% of the gross earnings for personal employment expenses.
- B. The monthly net earned income is added to the monthly gross unearned income amount and the total of the income deemed to the unit.
- C. The amount of applied income is calculated by reducing the combined total of net earnings, gross unearned income and deemed income by the following in the order presented:
 - 1. a deduction for farming losses, if any;
 - 2. a disregard of \$164.00 per month; {effective October 2018}
 - 3. a deduction for unearned income to be used to fulfill a bona-fide plan to achieve self-support (PASS); Cross reference: 5035.15
 - 4. the appropriate deduction for work related dependent care expenses;
 - 5. deduction for allowable medical expenses for those assistance unit members who qualify;
 - 6. a deduction for legally obligated child support when it is paid for a child who is not a member of the assistance unit;
 - 7. a deduction for shelter hardship, if applicable.

(Cross References: 5030 - "Income Disregards" and 5035 "Income Deductions")

- D. The remaining amount after the disregards and deductions are subtracted is the amount of the unit's applied income.

23. UPM 5035.15(B) provides The total amount of monthly income earned by the assistance unit members, including that derived from self-employment, is adjusted by subtracting 20% for personal employment expenses. There are no other deductions applied exclusively to earned income.

In overpayment computations, earned income which the assistance unit fails to report in a timely manner, is not adjusted by the 20% deduction described above. (Emphasis added) (Cross Reference: 7045.15)

24. The Department correctly applied the standard deduction for a household of five and correctly did not allow the 20% deduction of earned income.

25. Title 7 CFR § 273.9(d)(6)(ii) provides for excess shelter deduction.
26. UPM § 5035.15(F)(1) provides for the calculation of the shelter hardship for the SNAP and states in part that the amount of shelter expenses which exceeds 50% of that portion of the assistance unit's income which remains after all other deductions have been subtracted is allowed as an additional deduction. Shelter expenses are limited to the following:
 - a. rent, mortgage payments, and any continuing charges leading to ownership of the property occupied by the assistance unit excluding any portions allowed as self-employment deductions in multiple-family dwellings;
27. Title 7 CFR § 273.9(d)(6)(iii) provides for the standard utility allowances.
28. UPM § 5035.15(F)(6) provides that a standard utility allowance determined annually by the agency to reflect changes in utility costs is used to represent the total monthly utility expenses of the assistance unit if:
 - a. the assistance unit incurs heating fuel or cooling costs separately from rent or mortgage payments; and
 - b. the bill is established on the basis of individualized metering of service to the unit; or
 - c. the costs are paid:
 - (1) totally or partially by the unit; or
 - (2) partially from a federal means-tested energy program directly to the service provider or to the recipient when these payments are less than the unit's total monthly heating or cooling costs; or
 - (3) totally by CEAP regardless of whether the payment is made to the unit or directly to the service provider
29. The Department correctly determined the Appellant had a monthly rent of \$1450.00 from [REDACTED] 2018 through [REDACTED] 2018 and \$1500.00 from [REDACTED] 2018 through [REDACTED] 2019 and correctly allowed the \$728.00 standard utility allowance from [REDACTED] 2018 through [REDACTED] 2018 and \$736 standard utility allowance from [REDACTED] 2018 through [REDACTED] 2019.
30. Title 7 CFR § 271.2 provides for the maximum shelter deduction.
31. UPM § 5035.15 (F)(10) provides that for those units, which do not have any members who are elderly or disabled, a maximum shelter hardship deduction, which is established by the USDA, is allowed. The maximum shelter hardship is revised annually effective October 1. The shelter hardship cannot exceed \$535 (\$552 effective October 1, 2018) unless AU has a member 60 or older or disabled.
32. Title 7 CFR § 273.10 (e)(2)(ii)(A)(1) provides for the SNAP benefit calculation.

33. UPM § 6005 (C) provides that in the SNAP, the amount of benefits calculated by: (1) multiplying the assistance unit's applied income by 30%, and (2) rounding the product up to the next whole dollar if it ends in 1-99 cents; and (3) subtracting the rounded product from the Food Stamp standard of assistance for the appropriate unit size.

34. Effective [REDACTED] 2018, The Appellant's SNAP benefits are computed as follows:

<u>SNAP BENEFIT CALCULATION</u>	
<u>INCOME</u>	
Earned Income	\$3694.56
Less 20%	<u>Disallowed</u>
Total	\$ 3694.56
Plus Unearned Income	<u>\$0.00</u>
Total	\$3694.56
Less standard deduction	<u>\$199.00</u>
Less Dependent care	<u>\$0.00</u>
Adjusted gross income	\$3495.56
<u>SHELTER COSTS</u>	
Rent	\$1450.00
SUA	<u>\$728.00</u>
Total shelter costs	\$2178.00
<u>SHELTER HARDSHIP</u>	
Shelter costs	\$2178.00
Less 50% of adjusted gross income	<u>\$1747.78</u>
Total shelter hardship	\$430.22 <small>(Can not exceed \$535 (unless elderly or disabled))</small>
<u>ADJUSTED NET INCOME</u>	
Adjusted gross income	\$3495.56
Less shelter hardship	<u>-\$430.22</u>
Net Adjusted Income (NAI)	\$3065.34
<u>BENEFIT CALCULATION</u>	
Thrifty Food Plan for 5 Members	\$760.00
Less 30% of NAI	<u>-\$920.00</u>
SNAP AWARD	\$0.00

35. Effective [REDACTED] 2018, The Appellant's SNAP benefits are computed as follows:

<u>SNAP BENEFIT CALCULATION</u>	
<u>INCOME</u>	

Earned Income	\$3205.44
Less 20%	<u>disallowed</u>
Total	\$ 3205.44
Plus Unearned Income	<u>\$0.00</u>
Total	\$3205.44
Less standard deduction	<u>\$199.00</u>
Less Dependent care	<u>\$0.00</u>
Adjusted gross income	\$3006.44
<u>SHELTER COSTS</u>	
Rent	\$1450.00
SUA	<u>\$728.00</u>
Total shelter costs	\$2178.00
<u>SHELTER HARDSHIP</u>	
Shelter costs	\$2178.00
Less 50% of adjusted gross income	<u>\$1503.22</u>
	<u>\$674.78</u>
Total shelter hardship	\$535.00
	(Can not exceed \$535 (unless elderly or disabled))
<u>ADJUSTED NET INCOME</u>	
Adjusted gross income	\$3006.44
Less shelter hardship	<u>-\$535.00</u>
Net Adjusted Income (NAI)	\$2471.44
<u>BENEFIT CALCULATION</u>	
Thrifty Food Plan for 5 Members	\$760.00
Less 30% of NAI rounded	<u>-\$742.00</u>
SNAP AWARD	\$18.00

36. The Department incorrectly allowed a shelter hardship of \$552.00 for [REDACTED] 2018; the correct shelter hardship is \$535.00.

37. Effective [REDACTED] 2018, The Appellant's SNAP benefits are computed as follows:

SNAP BENEFIT CALCULATION

<u>INCOME</u>	
Earned Income	\$3340.85
Less 20%	<u>Disallowed</u>
Total	\$ 3340.85
Plus Unearned Income	<u>\$0.00</u>
Total	\$3340.85
Less standard deduction	<u>\$204.00</u>
Less Dependent care	<u>\$0.00</u>
Adjusted gross income	\$3136.85

<u>SHELTER COSTS</u>	
Rent	\$1450.00
SUA	\$736.00
Total shelter costs	\$2186.00
<u>SHELTER HARDSHIP</u>	
Shelter costs	\$2186.00
Less 50% of adjusted gross income	\$1568.42
	\$617.58
Total shelter hardship	\$552.00
	(Can not exceed \$552 (unless elderly or disabled))
<u>ADJUSTED NET INCOME</u>	
Adjusted gross income	\$3136.85
Less shelter hardship	-\$552.00
Net Adjusted Income (NAI)	\$2584.85
<u>BENEFIT CALCULATION</u>	
Thrifty Food Plan for 5 Members	\$762.00
Less 30% of NAI rounded	-\$775.00
SNAP AWARD	\$0.00

38. Effective [REDACTED] 2018, The Appellant's SNAP benefits are computed as follows:

SNAP BENEFIT CALCULATION

<u>INCOME</u>	
Earned Income	\$5469.59
Less 20%	<u>disallowed</u>
Total	\$ 5469.59
Plus Unearned Income	\$0.00
Total	\$5469.59
Less standard deduction	\$204.00
Less Dependent care	\$0.00
Adjusted gross income	\$5265.59
<u>SHELTER COSTS</u>	
Rent	\$1450.00
SUA	\$736.00
Total shelter costs	\$2186.00
<u>SHELTER HARDSHIP</u>	
Shelter costs	\$2186.00
Less 50% of adjusted gross income	\$2734.80
	\$0.00
Total shelter hardship	\$552.00
	(Can not exceed \$552 (unless elderly or disabled))

ADJUSTED NET INCOME	
Adjusted gross income	\$5265.59
Less shelter hardship	-\$0.00
Net Adjusted Income (NAI)	\$5265.59
BENEFIT CALCULATION	
Thrifty Food Plan for 5 Members	\$762.00
Less 30% of NAI rounded	-\$1580.00
SNAP AWARD	\$0.00

39. Effective [REDACTED] 2018, The Appellant's SNAP benefits are computed as follows:

SNAP BENEFIT CALCULATION

INCOME	
Earned Income	\$4534.08
Less 20%	<u>Disallowed</u>
Total	<u>\$ 4534.08</u>
Plus Unearned Income	<u>\$0.00</u>
Total	\$4534.08
Less standard deduction	<u>\$204.00</u>
Less Dependent care	<u>\$0.00</u>
Adjusted gross income	\$4330.08
SHELTER COSTS	
Rent	\$1500.00
SUA	<u>\$736.00</u>
Total shelter costs	\$2236.00
SHELTER HARDSHIP	
Shelter costs	\$2236.00
Less 50% of adjusted gross income	<u>\$2165.04</u>
	<u>\$70.96</u>
Total shelter hardship	\$552.00
	(Can not exceed \$552 (unless elderly or disabled))
ADJUSTED NET INCOME	
Adjusted gross income	\$4330.08
Less shelter hardship	<u>-70.96</u>
Net Adjusted Income (NAI)	\$4259.12
BENEFIT CALCULATION	
Thrifty Food Plan for 5 Members	\$762.00
Less 30% of NAI rounded	<u>-\$1278.00</u>
SNAP AWARD	\$0.00

40. Effective [REDACTED] 2019, The Appellant's SNAP benefits are computed as follows:

SNAP BENEFIT CALCULATION	
INCOME	
Earned Income	\$5835.63
Less 20%	<u>Disallowed</u>
Total	<u>\$ 5835.63</u>
Plus Unearned Income	<u>\$0.00</u>
Total	\$5835.63
Less standard deduction	<u>\$204</u>
Less Dependent care	<u>\$0.00</u>
Adjusted gross income	\$5631.63
SHELTER COSTS	
Rent	\$1500.00
SUA	<u>\$736.00</u>
Total shelter costs	\$2236.00
SHELTER HARDSHIP	
Shelter costs	\$2236.00
Less 50% of adjusted gross income	<u>\$2815.82</u>
	<u>\$0.00</u>
Total shelter hardship	\$0.00
	(Can not exceed \$552 (unless elderly or disabled))
ADJUSTED NET INCOME	
Adjusted gross income	\$5631.63
Less shelter hardship	<u>-\$0.00</u>
Net Adjusted Income (NAI)	\$5631.63
BENEFIT CALCULATION	
Thrifty Food Plan for 5 Members	\$762.00
Less 30% of NAI rounded	<u>-\$1690.00</u>
SNAP AWARD	\$0.00

41. Effective [REDACTED] 2018, The Appellant's SNAP benefits are computed as follows:

SNAP BENEFIT CALCULATION	
INCOME	
Earned Income	\$4051.36
Less 20%	<u>Disallowed</u>
Total	<u>\$ 4051.36</u>
Plus Unearned Income	<u>\$0.00</u>
Total	\$4051.36
Less standard deduction	<u>\$204.00</u>
Less Dependent care	<u>\$0.00</u>

Adjusted gross income	\$3847.36
SHELTER COSTS	
Rent	\$1500.00
SUA	<u>\$736.00</u>
Total shelter costs	\$2236.00
SHELTER HARDSHIP	
Shelter costs	\$2236.00
Less 50% of adjusted gross income	<u>\$1923.68</u>
	<u>\$312.32</u>
Total shelter hardship	\$312.32 (Can not exceed \$535 (unless elderly or disabled))
ADJUSTED NET INCOME	
Adjusted gross income	\$3847.36
Less shelter hardship	<u>-\$312.32</u>
Net Adjusted Income (NAI)	\$3535.04
BENEFIT CALCULATION	
Thrifty Food Plan for 5 Members	\$762.00
Less 30% of NAI rounded	<u>-\$1061.00</u>
SNAP AWARD	\$0.00

42. Effective [REDACTED] 2019, The Appellant's SNAP benefits are computed as follows:

SNAP BENEFIT CALCULATION

<u>INCOME</u>	
Earned Income	\$4272.61
Less 20%	<u>Disallowed</u>
Total	<u>\$ 4272.61</u>
Plus Unearned Income	<u>\$0.00</u>
Total	\$4272.61
Less standard deduction	<u>\$204.00</u>
Less Dependent care	<u>\$0.00</u>
Adjusted gross income	\$4068.61
<u>SHELTER COSTS</u>	
Rent	\$1500.00
SUA	<u>\$736.00</u>
Total shelter costs	\$2236.00
<u>SHELTER HARDSHIP</u>	
Shelter costs	\$2236.00
Less 50% of adjusted gross income	<u>\$2034.30</u>
	<u>\$201.70</u>
Total shelter hardship	\$201.70 (Can not exceed

	\$552 (unless elderly or disabled)
ADJUSTED NET INCOME	
Adjusted gross income	\$4068.61
Less shelter hardship	<u>-\$201.70</u>
Net Adjusted Income (NAI)	\$3866.91
BENEFIT CALCULATION	
Thrifty Food Plan for 5 Members	\$762.00
Less 30% of NAI rounded	<u>-\$1160.00</u>
SNAP AWARD	\$0.00

43. Effective [REDACTED] 2019, The Appellant's SNAP benefits are computed as follows:

SNAP BENEFIT CALCULATION

INCOME	
Earned Income	\$3920.57
Less 20%	<u>Disallowed</u>
Total	<u>\$ 3920.57</u>
Plus Unearned Income	<u>\$0.00</u>
Total	\$3920.57
Less standard deduction	<u>\$204.00</u>
Less Dependent care	<u>\$0.00</u>
Adjusted gross income	\$3716.57
SHELTER COSTS	
Rent	\$1500.00
SUA	<u>\$736.00</u>
Total shelter costs	\$2236.00
SHELTER HARDSHIP	
Shelter costs	\$2236.00
Less 50% of adjusted gross income	<u>\$1858.28</u>
	<u>\$377.72</u>
Total shelter hardship	\$377.72
	(Can not exceed \$552 (unless elderly or disabled))
ADJUSTED NET INCOME	
Adjusted gross income	\$3716.57
Less shelter hardship	<u>-\$377.72</u>
Net Adjusted Income (NAI)	\$3338.85
BENEFIT CALCULATION	
Thrifty Food Plan for 5 Members	\$762.00
Less 30% of NAI rounded	<u>-\$1002.00</u>

SNAP AWARD	\$0.00
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44. Effective [REDACTED] 2019, The Appellant's SNAP benefits are computed as follows:

SNAP BENEFIT CALCULATION

<u>INCOME</u>	
Earned Income	\$4740.45
Less 20%	<u>Disallowed</u>
Total	<u>\$ 4740.45</u>
Plus Unearned Income	<u>\$0.00</u>
Total	\$4740.45
Less standard deduction	<u>\$204.00</u>
Less Dependent care	<u>\$0.00</u>
Adjusted gross income	\$4536.45
<u>SHELTER COSTS</u>	
Rent	\$1500.00
SUA	<u>\$736.00</u>
Total shelter costs	\$2236.00
<u>SHELTER HARDSHIP</u>	
Shelter costs	\$2236.00
Less 50% of adjusted gross income	<u>\$2268.22</u>
	<u>\$0.00</u>
Total shelter hardship	\$0.00
	(Can not exceed \$552 (unless elderly or disabled))
<u>ADJUSTED NET INCOME</u>	
Adjusted gross income	\$4536.45
Less shelter hardship	<u>-\$0.00</u>
Net Adjusted Income (NAI)	\$4536.45
<u>BENEFIT CALCULATION</u>	
Thrifty Food Plan for 5 Members	\$762.00
Less 30% of NAI rounded	<u>-\$1361.00</u>
SNAP AWARD	\$0.00

45. Effective [REDACTED] 2019, The Appellant's SNAP benefits are computed as follows:

SNAP BENEFIT CALCULATION

<u>INCOME</u>	
Earned Income	\$4133.56
Less 20%	<u>Disallowed</u>
Total	<u>\$ 4133.56</u>
Plus Unearned Income	<u>\$0.00</u>
Total	\$4133.56

Less standard deduction	<u>\$204.00</u>
Less Dependent care	<u>\$0.00</u>
Adjusted gross income	\$3929.56
<u>SHELTER COSTS</u>	
Rent	\$1500.00
SUA	<u>\$736.00</u>
Total shelter costs	\$2236.00
<u>SHELTER HARDSHIP</u>	
Shelter costs	\$2236.00
Less 50% of adjusted gross income	<u>\$1964.78</u>
	<u>\$271.22</u>
Total shelter hardship	\$271.22 <small>(Can not exceed \$552 (unless elderly or disabled))</small>
<u>ADJUSTED NET INCOME</u>	
Adjusted gross income	\$3929.56
Less shelter hardship	<u>-\$271.22</u>
Net Adjusted Income (NAI)	\$3658.34
<u>BENEFIT CALCULATION</u>	
Thrifty Food Plan for 5 Members	\$762.00
Less 30% of NAI rounded	<u>-\$1098.00</u>
SNAP AWARD	\$0.00

46. Effective [REDACTED] 2019, The Appellant's SNAP benefits are computed as follows:

SNAP BENEFIT CALCULATION

<u>INCOME</u>	
Earned Income	\$4046.94
Less 20%	<u>Disallowed</u>
Total	<u>\$ 4046.94</u>
Plus Unearned Income	<u>\$0.00</u>
Total	\$4046.94
Less standard deduction	<u>\$204.00</u>
Less Dependent care	<u>\$0.00</u>
Adjusted gross income	\$3842.94
<u>SHELTER COSTS</u>	
Rent	\$1500.00
SUA	<u>\$736.00</u>
Total shelter costs	\$2236.00
<u>SHELTER HARDSHIP</u>	
Shelter costs	\$2236.00
Less 50% of adjusted	<u>\$1921.47</u>

gross income	<u>\$314.53</u>
Total shelter hardship	\$314.53 (Can not exceed \$552 (unless elderly or disabled))
ADJUSTED NET INCOME	
Adjusted gross income	\$3842.94
Less shelter hardship	<u>-\$314.53</u>
Net Adjusted Income (NAI)	\$3528.41
BENEFIT CALCULATION	
Thrifty Food Plan for 5 Members	\$762.00
Less 30% of NAI rounded	<u>-\$1059.00</u>
SNAP AWARD	\$0.00

47. Title 7 of the CFR § 273.18 (c) (1) (A) and (C) provide that the actual steps for calculating a claim of overpayment are to determine the correct amount of benefits for each month that a household received an overpayment and subtract the correct amount from the amount actually received.
48. UPM 7045.15(D)(4) provides for income related factors causing the overpayment: In the computation of the overpayment, earned income that the assistance unit fails to report in a timely manner is not subject to the 20% earned income deduction (Cross Reference: 5035.15).
49. UPM § 7000.01 (A) provides the definition of an overpayment and states that an overpayment is the amount of financial or medical assistance paid to or on behalf of the assistance unit, or the amount of the Food Stamp allotment issued to an assistance unit, in excess of the amount to which the unit is properly entitled.
50. UPM § 7045.05 (A) provides the Department recoups from the assistance unit which received the overpayment.
51. UPM § 7045.10(A)(3) provides for limitations and time restrictions of the recoupment process. The Department recoups an overpayment caused by intentional recipient error if the overpayment occurred no earlier than 72 months prior to the month the Department discovers it.
52. UPM § 7045.15(E)(1) provides for computation of the overpayment: an overpayment caused by intentional recipient error begins the first date covered by an erroneously issued benefit when the overpayment is caused by the assistance unit's misstatement
53. The Department correctly determined that a SNAP intentional recipient error overpayment occurred during the period of [REDACTED] 2018, through [REDACTED] 2019.

54. UPM § 7045.15 (A) provides for the computation of Food Stamp Overpayments and speaks to the general description of the process. The Department computes the amount of the overpayment by comparing the amount of the benefit, which the assistance unit received and cashed during a month, or series of months to the amount the assistance unit should have received during that period.

55. The following chart reflects the calculation of overpayments:

Month	SNAP Issuance	Correct Issuance	SNAP OP's
██████████ 2018	\$316.00	\$0.00	\$316.00
██████████ 2018	\$316.00	\$18.00	\$298.00
██████████ 2018	\$325.00	\$0.00	\$325.00
██████████ 2018	\$325.00	\$0.00	\$325.00
██████████ 2018	\$325.00	\$0.00	\$325.00
██████████ 2019	\$325.00	\$0.00	\$325.00
██████████ 2019	\$325.00	\$0.00	\$325.00
██████████ 2019	\$325.00	\$0.00	\$325.00
██████████ 2019	\$325.00	\$0.00	\$325.00
██████████ 2019	\$325.00	\$0.00	\$325.00
██████████ 2019	\$325.00	\$0.00	\$325.00
██████████ 2019	\$325.00	\$0.00	\$325.00

56. The Appellant's total overpayments for the period from ██████████ 2018 through ██████████ 2019 equal \$3864.00.

57. Title 7 of the CFR § 273.18(a) provides in part a recipient claim is an amount owed because of benefits that are overpaid. The State agency must establish and collect any claim by following these regulations. The State Agency must develop a plan for establishing and collecting claims.

58. Title 7 of the CFR § 273.18 (c)(1) (A) and (C) provide that the actual steps for calculating a claim of overpayment are to determine the correct amount of benefits for each month that a household received an overpayment and subtract the correct amount from the amount actually received.

59. Title 7 of the CFR § 273.18 (a)(2) states that this claim is a federal debt subject to this and other regulations governing federal debts. The State Agency must establish and collect any claims following these regulations.

60. Title 7 of the CFR § 273.18 (a) (1) (i) provides for claims against households and states that a recipient claim is an amount owed because of benefits that are overpaid.

61. The Department correctly determined that the Appellant was overpaid SNAP benefits and that he has an obligation to repay them.

DISCUSSION

The evidence in the hearing record reflects that the Appellant was overpaid SNAP benefits due to his failure to report his increase in income. The Appellant exceeded 130% of the FPL in █████ 2018 and was required to report that change. The Appellant received benefits which he was not entitled to and he is responsible for repayment. The Appellant's argument that he was unaware that he had to report the change is not credible as he received a letter on █████ 2018 instructing him to report when his income exceeded \$3118.00 (130% of the FPL for his household size). Furthermore, in █████ of 2018 he completed a periodic report form in which he reported his change in rent but again failed to report his change in income.


There is a slight discrepancy in the Department's calculation of the amount of the recoupment. The calculation for the month of █████ 2018 reflects that the Appellant was only eligible to receive \$18.00 in SNAP benefits not the \$26.00 the Department calculated. The Department gave the Appellant the \$552.00 shelter hardship when in █████ 2018 the max shelter hardship was only \$535.00. While there is insufficient evidence in the hearing record to calculate the Appellant's total gross income for the month of █████ 2019, the partial verified income alone would still calculate a \$0.00 benefit.

The Hearing record does support that the Appellant was overpaid \$3864.00 for the period of █████ 2018 through █████ 2019 and he is liable for the repayment.

DECISION

The Appellant's appeal is **DENIED** with respect to the issue that he was overpaid and must repay SNAP benefits that he received in error.

The Appellant's appeal is **REMANDED** back to the Department to correct the amount of the overpayment from \$3856.00 to \$3864.00.


Marci Ostroski
Hearing Officer

CC: Carol Sue Shannon, Operations Manager, Danbury Regional Office
David Dominique, Fair Hearing Liaison, Danbury 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.