

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

██████████ 2020
Signature Confirmation

Client Id: ██████████
Request #: 150545

NOTICE OF DECISION

PARTY

██████████
██████████
██████████
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PROCEDURAL BACKGROUND

On ██████████ 2019, the Department of Social Services (the “Department”) issued ██████████ (the “Appellant”) a Notice of Action (“NOA”). The notice stated that the Department reduced the Appellant’s benefits under the Supplemental Nutrition Assistance Program (“SNAP”) beginning ██████████ 2020 from \$34.00 to \$25.00.

On ██████████, 2019, the Appellant requested an administrative hearing because she disagreed with the Department’s calculation of her SNAP benefits.

On ██████████ 2020, the Office of Legal Counsel, Regulations, and Administrative Hearings (“OLCRAH”) issued a notice scheduling the administrative hearing for ██████████ 2020.

On ██████████, 2020, the Appellant requested a continuance which OLCRAH granted.

On ██████████ 2020, the OLCRAH issued a notice scheduling the administrative hearing for ██████████ 2020.

On ██████████ 2020, 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 called in for the hearing:

██████████, Appellant

████████████████████ and Witness for the Appellant

Javier Rivera, Department's Representative

Lisa Nyren, Hearing Officer

The record remained open for the submission of additional evidence. On ██████████ 2020, the record closed.

STATEMENT OF THE ISSUE

The issue to be decided is whether the Department correctly calculated the Appellant's monthly SNAP benefits beginning ██████████ 2020.

FINDINGS OF FACT

1. The Appellant receives SNAP benefits for herself. (Hearing Record)
2. The Appellant's current SNAP certification period began ██████████ 2019. (Exhibit 3: Case Notes)
3. The Appellant is ██████████ years old. (Appellant Testimony)
4. Beginning ██████████ 2020, the Appellant receives Social Security benefits ("SSA") of \$1,257.00 per month from the Social Security Administration. (Stipulated)
5. The Appellant lives alone. (Appellant's Testimony)
6. On ██████████ 2019, the Appellant submitted proof to the Department that she purchased a shower chair and cane for \$55.00 on ██████████ 2019. (Exhibit 3: Case Notes and Exhibit 5: Medical Receipts)
7. On ██████████ 2019, the Appellant submitted proof she purchased 2-10 ride ADA transportation passes from Stop and Shop for \$28.00 each on ██████████ 2019 for door to door shuttle service to and from her home. Each ticket provides a one way ride to or from your destination. Because Medicaid only provides transportation to and from medical appointments in town, the Appellant utilizes ADA transportation services for medical appointments out of town and non-medical appointments. (Appellant's Testimony and Exhibit 5: Medical Receipts)
8. The Appellant takes Align Probiotic daily as recommended by her physician. (Appellant's Testimony)

9. On ██████████ 2019, the Appellant submitted the following receipts from CVS Pharmacy:

Date of Purchase	Item Purchased	Cost of Item
██████████ 2019	Align Probiotic	\$25.09
Unable to determine	Align Probiotic	\$18.49

(Exhibit 3: Case Notes, Exhibit 4: Medical Expenses-Details, Exhibit 5: Medical Receipts, and Appellant's Testimony)

10. The Department determined the Appellant's monthly out of pocket medical expenses as \$53.09. [\$25.09 CVS + \$28.00 Stop & Shop = \$53.09] The Department determined the monthly excess medical deduction under the SNAP as \$18.09. [\$53.09 - \$35.00 = \$18.09] (Hearing Record)
11. The Appellant pays monthly rent of \$309.00. Beginning ██████████ 2020, the rent decreased to \$308.00 per month. Each April, the landlord recalculates the Appellant's rent based on her income and expenses. (Appellant's Testimony, Exhibit 1: Notice of Action, and Exhibit 2: Federal SNAP-Income Test)
12. Heat is included in the rent, but the Appellant pays for electricity and cooling during the summer months. (Appellant's Testimony)
13. The Appellant received the standard utility allowance of \$736.00 under the SNAP. (Exhibit 2: Federal SNAP – Income Test and Department Representative's Testimony)
14. The Department determined the Appellant eligible for \$25.00 per month under the SNAP effective ██████████ 2020. (Exhibit 2: Federal SNAP - Income Test and Exhibit 1: Notice of Action)
15. The issuance of this decision is timely under Connecticut General Statute § 17b-61(a), which requires that a decision be issued within 90 days of the request for an administrative hearing. The Appellant requested an administration hearing on ██████████ 2019. However, the hearing which was originally scheduled for ██████████ 2020, was rescheduled at the request of the Appellant which caused a ██████ day delay. Because this ██████ day delay resulted from the Appellant's request, this decision is not due until ██████████ 2020 and therefore timely.

CONCLUSIONS OF LAW

1. Section 17b-2(7) of the Connecticut General Statutes ("Conn. Gen. Stats.") 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 273.1(a)(1) of the Title 7 of the Code of Federal Regulations (“CFR”) provides that “a household is composed of one of the following individuals or groups of individuals, unless otherwise specified in paragraph (b) of this section: an individual living alone.”

Uniform Policy Manual (“UPM”) § 2020.05(A) provides that a group of individuals living together, buying food, preparing meals for home consumption and eating together are, as a general rule, a Food Stamp assistance unit.

3. The Department correctly determined an assistance unit of one.
4. “The department’s uniform policy manual is the equivalent of a state regulation and, as such, carries the force of law.” *Bucchere v. Rowe*, 43 Conn. Supp. 175, 178 (1994) (citing Conn. Gen. Stat, § 17b-10; *Richard v. Commissioner of Income Maintenance*, 214 Conn. 601, 573 A.2d 712(1990))
5. Federal regulation provides as follows:

Unearned income shall include but not be limited to annuities; pensions; retirement, veteran’s or disability benefits; worker’s or unemployment compensation including any amounts deducted to repay claims for intentional program violations as provided in § 272.12; old-age, survivors, or social security benefits; strike benefits; foster care payments for children or adults who are considered members of the household; gross income minus the cost of doing business derived from rental property in which a household member is not actively engaged in the management of the property at least 20 hours a week.

7 C.F.R. § 273.9(b)(2)(ii)

“Income from these sources [Social Security and Veterans’ Benefits] is treated as unearned income in all programs.” UPM § 5050.13(A)(1)

“Income received from these sources [Social Security and Veteran’s Benefits] by any member of a Food Stamps unit is counted in the calculation of eligibility and benefits for the entire unit.” UPM § 5050.13(A)(6)

6. The Department correctly included the Appellant’s SSA income when calculating the SNAP benefits for the assistance unit.
7. Federal regulation provides as follows:

Determining Income-Anticipating income. For the purpose of determining the household’s eligibility and level of benefits, the State agency shall take into account the income already received by the household during the certification period and any anticipated income the household and the State agency are reasonably certain will be received during the remainder of the certification period. If the amount of income that will be received, or when it will be received, is uncertain, that portion of the

household's income that is uncertain shall not be counted by the State agency. For example, a household anticipating income from a new source, such as a new job or recently applied for public assistance benefits, may be uncertain as to the timing and amount of the initial payment. These moneys shall not be anticipated by the State agency unless there is reasonable certainty concerning the month in which the payment will be received and in what amount. If the exact amount of the income is not known, that portion of it which can be anticipated with reasonable certainty shall be considered as income. In cases where the receipt of income is reasonably certain but the monthly amount may fluctuate, the household may elect to income average. Households shall be advised to report all changes in gross monthly income as required by §273.12.

7 C.F.R. § 273.10(c)(1)(i)

Federal regulation provides as follows:

Income only in month received. Income anticipated during the certification period shall be counted as income only in the month it is expected to be received, unless the income is averaged. Whenever a full month's income is anticipated but is received on a weekly or biweekly basis, the State agency shall convert the income to a monthly amount by multiplying weekly amounts by 4.3 and biweekly amounts by 2.15, use the State Agency's PA conversion standard, or use the exact monthly figure if it can be anticipated for each month of the certification period. Nonrecurring lump-sum payments shall be counted as a resource starting in the month received and shall not be counted as income.

7 C.F.R. § 273.10(c)(2)(i)

"If income is received on a monthly basis, a representative monthly amount is used as an estimate of income." UPM § 5025.05(B)(1)

8. The Department correctly determined the Appellant's gross monthly SSA benefits as \$1,257.00 per month.
9. Federal regulation provides as follows:

Excess shelter deduction. Monthly shelter expenses in excess of 50 percent of the household's income after all other deductions in paragraphs (d)(1) through (d)(5) of this section have been allowed. If the household does not contain an elderly or disabled member, as defined in §271.2 of this chapter, the shelter deduction cannot exceed the maximum shelter deduction limit established for the area. For fiscal year 2001, effective March 1, 2001, the maximum monthly excess shelter expense deduction limits are \$340 for the 48 contiguous States and the District of Columbia, \$543 for Alaska, \$458 for Hawaii, \$399 for Guam, and \$268 for the Virgin Islands. FNS will set the maximum monthly excess shelter expense deduction limits for fiscal year 2002 and future years by adjusting the previous year's limits to reflect changes in the shelter component and the fuels and utilities component of the Consumer

Price Index for All Urban Consumers for the 12 month period ending the previous November 30. FNS will notify State agencies of the amount of the limit. Only the following expenses are allowable shelter expenses:

- A. Continuing charges for the shelter occupied by the household, including rent, mortgage, condo and association fees, or other continuing charges leading to the ownership of the shelter such as loan repayments for the purchase of a mobile home, including interest on such payments
- B. Property taxes, State and local assessments, and insurance on the structure itself, but not separate costs for insuring furniture or personal belongings
- C. The cost of fuel for heating; cooling (i.e., the operation of air conditioning systems or room air conditioners); electricity or fuel used for purposes other than heating or cooling; water; sewerage; well installation and maintenance; septic tank system installation and maintenance; garbage and trash collection; all service fees required to provide service for one telephone, including, but not limited to, basic service fees, wire maintenance fees, subscriber line charges, relay center surcharges, 911 fees, and taxes; and fees charged by the utility provider for initial installation of the utility. One-time deposits cannot be included
- D. The shelter costs for the home if temporarily not occupied by the household because of employment or training away from home, illness, or abandonment caused by a natural disaster or casualty loss. For costs of a home vacated by the household to be included in the household's shelter costs, the household must intend to return to the home; the current occupants of the home, if any, must not be claiming the shelter costs for food stamp purposes; and the home must not be leased or rented during the absence of the household
- E. Charges for the repair of the home which was substantially damaged or destroyed due to a natural disaster such as a fire or flood. Shelter costs shall not include charges for repair of the home that have been or will be reimbursed by private or public relief agencies, insurance companies, or from any other source.

7 C.F.R. § 273.9(d)(6)(ii)

Department policies provides as follows:

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;
- b. taxes, state and local assessments, and insurance on real property;
- c. the entire amount paid as a condominium fee;
- d. utility costs including the following:
 - 1. heat;
 - 2. cooking fuel;

3. electricity;
 4. water;
 5. sewer charges;
 6. garbage collection;
 7. basic monthly charge including taxes for a telephone;
 8. installation charges for a utility.
- e. for eligible residents of group homes who make a single payment for room, meals, and medical expenses, the amount of the payment identified for room and meals which exceeds the thrifty food plan for the number of persons in the household and
 - f. non-reimbursable costs of repairing a home which was damaged due to a natural disaster.

UPM § 5035.15(F)(1)

“Shelter expenses are allowed as deductions for the assistance unit if they are incurred in relation to a home which is occupied by the assistance unit.” UPM § 5035.15(F)(2)(a)(1)

“*Elderly* ... means a member of a household who is 60 years of age or older.” 7 § C.F.R. 271.2

“An elderly person, the context used by the Food Stamp program, means a person who is sixty or more years of age.” UPM § 5000.01

10. Federal regulation provides as follows:

Standard utility allowances. With FNS approval, a State agency may develop the following standard utility allowances (standards) to be used in place of actual costs in determining a household's excess shelter deduction: an individual standard for each type of utility expense; a standard utility allowance for all utilities that includes heating or cooling costs (HCSUA); and, a limited utility allowance (LUA) that includes electricity and fuel for purposes other than heating or cooling, water, sewerage, well and septic tank installation and maintenance, telephone, and garbage or trash collection. The LUA must include expenses for at least two utilities. However, at its option, the State agency may include the excess heating and cooling costs of public housing residents in the LUA if it wishes to offer the lower standard to such households. The State agency may use different types of standards but cannot allow households the use of two standards that include the same expense. In States in which the cooling expense is minimal, the State agency may include the cooling expense in the electricity component. The State agency may vary the allowance by factors such as household size, geographical area, or season. Only utility costs identified in paragraph (d)(6)(ii)(C) of this section must be used in developing standards.

7 C.F.R. § 273.9(d)(6)(iii)(A)

Federal regulation provides as follows:

A standard with a heating or cooling component must be made available to households that incur heating or cooling expenses separately from their rent or mortgage and to households that receive direct or indirect assistance under the Low Income Home Energy Assistance Act of 1981 (LIHEAA). A heating or cooling standard is available to households in private rental housing who are billed by their landlords on the basis of individual usage or who are charged a flat rate separately from their rent. However, households in public housing units which have central utility meters and which charge households only for excess heating or cooling costs are not entitled to a standard that includes heating or cooling costs based only on the charge for excess usage unless the State agency mandates the use of standard utility allowances in accordance with paragraph (d)(6)(iii)(E) of this section. Households that receive direct or indirect energy assistance that is excluded from income consideration (other than that provided under the LIHEAA) are entitled to a standard that includes heating or cooling only if the amount of the expense exceeds the amount of the assistance. Households that receive direct or indirect energy assistance that is counted as income and incur a heating or cooling expense are entitled to use a standard that includes heating or cooling costs. A household that has both an occupied home and an unoccupied home is only entitled to one standard.

7 C.F.R. § 273.9(d)(6)(iii)(C)

“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: the assistance unit incurs heating fuel or cooling costs separately from rent or mortgage payments.” UPM § 5035.15(F)(6)(a)

11. The Department correctly determined the Appellant eligible for the SUA of \$736.00 because she incurs cooling costs.
12. The Department correctly determined the Appellant's shelter costs as \$1,045.00. (\$309.00 rent + \$736.00 SUA = \$1,045.00 shelter costs)
13. The Department correctly determined the shelter hardship as \$509.04. Refer to Conclusion of Law (“COL”) # 24.
14. Federal regulation provides as follows:

Averaging expenses. Households may elect to have fluctuating expenses averaged. Households may also elect to have expenses which are billed less often than monthly averaged forward over the interval between scheduled billings, or, if there is no scheduled interval, averaged forward over the period the expense is intended to cover. For example, if a household receives a single bill in February which covers a

3-month supply of fuel oil, the bill may be averaged over February, March, and April. The household may elect to have one-time only expenses averaged over the entire certification period in which they are billed. Households reporting one-time only medical expenses during their certification period may elect to have a one-time deduction or to have the expense averaged over the remaining months of their certification period. Averaging would begin the month the change would become effective. For households certified for 24 months that have one-time medical expenses, the State agency must use the following procedure. In averaging any one-time medical expense incurred by a household during the first 12 months, the State agency must give the household the option of deducting the expense for one month, averaging the expense over the remainder of the first 12 months of the certification period, or averaging the expense over the remaining months in the certification period. One-time expenses reported after the 12th month of the certification period will be deducted in one month or averaged over the remaining months in the certification period, at the household's option.

7 C.F.R. § 273.10(d)(3)

15. The Department correctly excluded the one time cost of the purchase of a shower chair and cane on ██████ 2019 for \$55.00 as a qualifying medical deduction because the Appellant submitted the one-time expense on ██████ 2019, after her certification period expired on ██████ 2019. The Appellant incurred the one-time expense in a prior certification period.

16. Federal regulation provides as follows:

Excess medical deduction. That portion of medical expenses in excess of \$35 per month, excluding special diets, incurred by any household member who is elderly or disabled as defined in § 271.2. Spouses or other persons receiving benefits as a dependent of the SSI or disability and blindness recipient are not eligible to receive this deduction by persons receiving emergency SSI benefits based on presumptive eligibility are eligible for this deduction. Allowable medical costs are:

- I. Medical and dental care including psychotherapy and rehabilitation services provided by a licensed practitioner authorized by State law or other qualified health professional.
- II. Hospitalization or outpatient treatment, nursing care, and nursing home care including payments by the household for an individual who was a household member immediately prior to entering a hospital or nursing home provided by a facility recognized by the State.
- III. Prescription drugs, when prescribed by a licensed practitioner authorized under State law, and other over-the-counter medication (including insulin), when approved by a licensed practitioner or other qualified health professional.
 - A. Costs of medical supplies, sick-room equipment (including rental) or other prescribed equipment are deductible;

- B. The cost of any Schedule I controlled substance under The Controlled Substances Act, 21 U.S.C. 801 et seq., and any expenses associated with its use, are not deductible.
- IV. Health and hospitalization insurance policy premiums. The costs of health and accident policies such as those payable in lump sum settlements for death or dismemberment or income maintenance policies such as those that continue mortgage or loan payments while the beneficiary is disabled are not deductible;
- V. Medicare premiums related to coverage under Title XVIII of the Social Security Act; any cost-sharing or spenddown expenses incurred by Medicaid recipients;
- VI. Dentures, hearing aids, and prosthetics;
- VII. Securing and maintaining a seeing eye or hearing dog including the cost of dog food and veterinarian bills;
- VIII. Eye glasses prescribed by a physician skilled in eye disease or by an optometrist;
- IX. Reasonable cost of transportation and lodging to obtain medical treatment or services;
- X. Maintaining an attendant, homemaker, home health aide, or child care services, housekeeper, necessary due to age, infirmity, or illness. In addition, an amount equal to the one person benefit allotment shall be deducted if the household furnishes the majority of the attendant's meals. The allotment for this meal related deduction shall be that in effect at the time of initial certification. The State agency is only required to update the allotment amount at the next scheduled recertification; however, at their option, the State agency may do so earlier. If a household incurs attendant care costs that could qualify under both the medical deduction of §273.9(d)(3)(x) and the dependent care deduction of §273.9(d)(4), the costs may be deducted as a medical expense or a dependent care expense, but not both.

7 C.F.R. § 273.9(d)(3)

“Members of the assistance unit who are elderly or disabled are allowed medical expenses as deductions.” UPM § 5035.15(E)(1)

Department policy provides as follows:

The incurred or anticipated medical expenses which may be deducted are limited to the following:

- a. Medical and dental care including psychotherapy and rehabilitation services provided by a licensed practitioner authorized by State law or other qualified health professional;
- b. Hospitalization or outpatient treatment, nursing care, and care in a long term care facility recognized by the State. These expenses include payments made by the assistance unit to a facility on behalf of someone who was an assistance unit member at the time of admission to facility;
- c. Prescription and nonprescription medications when prescribed or recommended as treatment for a condition by a licensed practitioner authorized

- under State law; and the cost of postage for purchasing prescription medications by mail;
- d. Purchase or rental of prescribed medical supplies and sick room equipment;
 - e. Premiums for health and hospitalization insurance except for those which are written to provide lump-sum settlements in the event of death or dismemberment or to protect and maintain income;
 - f. Premiums for Medicare under Title XVIII of the Social Security Act;
 - g. Medical expenses paid by the applicant or recipient under Medicaid spenddown or cost-sharing requirements;
 - h. Dentures, hearing aids, and prosthetics;
 - i. Security and maintaining a seeing eye or hearing dog including the cost of dog food and veterinarian bills;
 - j. Eye glasses prescribed by physician skilled in eye disease or by an optometrist;
 - k. Reasonable cost for transportation and lodging necessary to obtaining medical treatment or services;
 - l. Services of an attendant, homemaker, home health aide, child care provider, or housekeeper necessitated by age, infirmity, or illness of a unit member. The amount of this expense includes an amount equal to the one-person coupon allotment if the assistance unit provides the majority of the person's meals.

UPM § 5035.15(E)(4)

“Each assistance unit which qualifies to have medical expenses treated as deductions is responsible for meeting the initial \$35 of expenses each month.” UPM § 5035.15(E)(6)

Federal regulation provides as follows:

Anticipating expenses. The State agency shall calculate a household's expenses based on the expenses the household expects to be billed for during the certification period. Anticipation of the expense shall be based on the most recent month's bills, unless the household is reasonably certain a change will occur. When the household is not claiming the utility standard, the State agency may anticipate changes during the certification period based on last year's bills from the same period updated by overall price increases; or, if only the most recent bill is available, utility cost increases or decreases over the months of the certification period may be based on utility company estimates for the type of dwelling and utilities used by the household. The State agency shall not average past expenses, such as utility bills for the last several months, as a method of anticipating utility costs for the certification period. At certification and recertification, the household shall report and verify all medical expenses. The household's monthly medical deduction for the certification period shall be based on the information reported and verified by the household, and any anticipated changes in the household's medical expenses that can be reasonably expected to occur during the certification period based on available information about the recipient's medical condition, public or private

insurance coverage, and current verified medical expenses. The household shall not be required to file reports about its medical expenses during the certification period. If the household voluntarily reports a change in its medical expenses, the State agency shall verify the change in accordance with §273.2(f)(8)(ii) if the change would increase the household's allotment. The State agency has the option of either requiring verification prior to acting on the change, or requiring the verification prior to the second normal monthly allotment after the change is reported. In the case of a reported change that would decrease the household's allotment, or make the household ineligible, the State agency shall act on the change without requiring verification, though verification which is required by §273.2(f)(8) shall be obtained prior to the household's recertification. If a child in the household reaches his or her second birthday during the certification period, the \$200 maximum dependent care deduction defined in §273.9(d)(4) shall be adjusted in accordance with this section not later than the household's next regularly scheduled recertification.

7 C.F.R. § 273.10(d)(4)

“An elderly or disabled assistance unit member who provides an estimate of the medical expenses he or she expects to incur over a certification period that does not exceed twelve months can choose to have medical expenses averaged over the certification period.” UPM § 5035.15(E)(2)

17. The Department correctly determined the Appellant incurred the following out of pocket medical expenses allowing one of two ADA transportation book costs solely for medical transportation:

Date	Medical Expense	Qualifying	Amount
█-19	Align Probiotic	Nonprescription medication	\$25.09
█-19	Shuttle service	Cost of medical transportation	\$28.00

18. The Department correctly calculated the Appellant's medical expense deduction as \$18.09 at time of recertification. (\$53.09 monthly medical expense - \$35.00 Appellant's portion = \$18.09)

19. Federal regulation provides as follows:

Calculating net income and benefit levels-Net monthly income. To determine a household's net monthly income, the State agency shall:

- A. Add gross monthly income earned by all household members and the total monthly unearned income of all household members, minus income exclusions, to determine the household's total gross income. Net losses from the self-employment income of a farmer shall be offset in accordance with § 273.11(a)(2)(iii).
- B. Multiply the total gross monthly earned income by 20 percent and subtract that amount from the total gross income; or multiply the total gross monthly earned income by 80 percent, and add that to the total monthly unearned income, minus

income exclusions. If the State agency has chosen to treat legally obligated child support payments as an income exclusion in accordance with § 273.9(c)(17), multiply the excluded earnings used to pay child support by 20 percent and subtract that amount from the total gross monthly income.

- C. Subtract the standard deduction.
- D. If the household is entitled to an excess medical deduction as provided in § 273.9(d)(3), determine if total medical expenses exceed \$35. If so, subtract that portion which exceeds \$35.
- E. Subtract allowable monthly dependent care expenses, if any, as specified in § 273.9(d)(4) for each dependent.
- F. If the State agency has chosen to treat legally obligated child support payments in accordance with § 273.9(d)(5)
- G. Subtract the homeless shelter deduction, if any, up to the maximum of \$143.
- H. Total the allowable shelter expenses to determine shelter costs, unless a deduction has been subtracted in accordance with paragraph (e)(1)(i)(G) of this section. Subtract from total shelter costs 50 percent of the household's monthly income after all the above deductions have been subtracted. The remaining amount, if any, is the excess shelter costs. If there is no excess shelter cost, the net monthly income has been determined. If there is excess shelter cost, compute the shelter deduction according to paragraph (e)(1)(i)(I) of this section.
- I. Subtract the excess shelter costs up to the maximum amount allowed for the area (unless the household is entitled to the full amount of its excess shelter expenses) from the household's monthly income after all other applicable deductions. Households not subject to a capped shelter expense shall have the full amount exceeding 50 percent of their net income subtracted. The household's net monthly income has been determined.

7 C.F.R. § 273.10(e)(1)(i)

Federal regulation provides as follows:

Standard deduction-48 States, District of Columbia, Alaska, Hawaii, and the virgin Islands. Effective October 1, 2002, in the 48 States and the District of Columbia, Alaska, Hawaii, and the Virgin Islands, the standard deduction for household sizes one through six shall be equal to 8.31 percent of the monthly net income eligibility standard for each household size established under paragraph (a)(2) of this section rounded up to the nearest whole dollar. For household sizes greater than six, the standard deduction shall be equal to the standard deduction for a six-person household.

7 C.F.R. § 273.9(d)(1)(i)

Department policy provides as follows:

The amount of applied income upon which the level of Food Stamps 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 \$160.00 per month {effective 10/1/17}
 - 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. A 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 application. (Cross Reference 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.

UPM § 5045.15

20. The Department correctly determined the household’s net applied income as \$562.87. Refer to COL # 24.

21. Federal regulation provides as follows:

Except as provided in paragraphs (a)(1), (e)(2)(iii) and (e)(2)(vi) of this section, the household's monthly allotment shall be equal to the maximum SNAP allotment for the household's size reduced by 30 percent of the household's net monthly income as calculated in paragraph (e)(1) of this section. If 30 percent of the household's net income ends in cents, the State agency shall round in one of the following ways: The State agency shall round the 30 percent of net income up to the nearest higher dollar.

7 C.F.R. § 273.10(e)(2)(ii)(A)(1)

Department policy provides as follows:

In the FS program, the amount of benefits is 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 FS standard of assistance for the appropriate unit size. (Cross Reference 5000 – Treatment of Income, 4500 – Standards of Assistance)

UPM § 6005

22. The Department correctly determined 30% of the net adjusted income as \$169.00. (\$562.86.00 x 30% = \$168.858) Refer to COL # 24.

23. Federal regulation provides as follows:

Thrifty Food Plan (TFP) and Maximum SNAP Allotments. Maximum SNAP allotment level. Maximum SNAP allotments shall be based on the Thrifty Food Plan (TFP) as defined in §271.2, and they shall be uniform by household size throughout the 48 contiguous States and the District of Columbia. The TFP for Hawaii shall be the TFP for the 48 States and DC adjusted for the price of food in Honolulu. The TFPs for urban, rural I, and rural II parts of Alaska shall be the TFP for the 48 States and DC adjusted by the price of food in Anchorage and further adjusted for urban, rural I, and rural II Alaska as defined in §272.7(c). The TFPs for Guam and the Virgin Islands shall be adjusted for changes in the cost of food in the 48 States and DC, provided that the cost of these TFPs may not exceed the cost of the highest TFP for the 50 States. The TFP amounts and maximum allotments in each area are adjusted annually and will be prescribed in a table posted on the FNS web site, at www.fns.usda.gov/fsp.

7 C.F.R. § 273.10(e)(4)(i)

“The Thrifty Food Plan represents the minimum food expenditure that is required to meet an assistance unit's basic monthly nutritional requirements and the maximum amount of benefits available to a qualified assistance unit with no applied income.” UPM § 4535.10(A)(1)

“The Thrifty Food Plan standards vary according to the size of the assistance units and are uniform statewide for assistance unit of equal size.” UPM § 4535.10(A)(2)

“The Thrifty Food Plan for a qualified assistance unit with no applied income for a household of one is \$194.00.” UPM § P-4535.10

24. The Department correctly determined the SNAP benefit as \$25.00 effective [REDACTED] 2020. Refer to SNAP benefit calculation below.

SNAP BENEFIT CALCULATION

INCOME	
Earned Income	\$00.00
Less 20%	<u>-\$00.00</u>
Total	

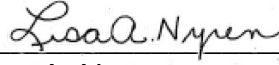
Plus Unearned Income	<u>+\$1,257.00</u>
Gross Income	\$1,257.00
Less standard deduction	-\$167.00
Less medical deduction	-\$18.09
Adjusted gross income	\$1,071.91
SHELTER COSTS	
Rent	\$309.00
SUA	+\$736.00
Total shelter costs	\$1,045.00
SHELTER HARDSHIP	
Shelter costs	\$1,045.00
Less 50% of adjusted gross income	<u>-\$535.96</u>
Total shelter hardship	\$509.04 (Can not exceed \$535 unless elderly or disabled)
ADJUSTED NET INCOME	
Adjusted gross income	\$1,071.91
Less shelter hardship	<u>-\$509.04</u>
Net Adjusted Income (NAI)	\$562.87
BENEFIT CALCULATION	
Thrifty Food Plan for # Person/s	\$194.00
Less 30% of NAI	<u>-\$169.00</u>
SNAP award	\$25.00

DISCUSSION

Based on the Appellant's monthly income of \$1,257.00, rent of \$309.00, the standard utility allowance and out of pocket monthly medical expenses of \$53.09 at the time of certification, the Department correctly calculated the Appellant's monthly SNAP benefits effective [REDACTED] 2020. The Appellant reported an increase in the cost of transportation to and from medical appointments at the administrative hearing. Any changes to medical expenses during the certification period may be reviewed by the Department and applied to her benefits under the SNAP beginning [REDACTED] 2020 and for the remainder of the certification period.

DECISION

The Appellant's appeal is denied.

Handwritten signature of Lisa A. Nyren in cursive script.

Lisa A. Nyren
Fair Hearing Officer

CC: Tricia Morelli, DSS RO11
Javier Rivera, DSS RO11

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 06105.

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. 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.