

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

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

Client ID ██████████
Request #153103

NOTICE OF DECISION

PARTY

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

PROCEDURAL BACKGROUND

On ██████████ 2020, the Department of Social Services (the “Department”) issued a Notice of Action (“NOA”) to ██████████ (the “Appellant”) denying her application for benefits under the Supplemental Nutrition Assistance Program (“SNAP”) because her household’s gross income exceeded the limit.

On ██████████ 2020, the Appellant requested an administrative hearing to appeal the Department’s denial of her application for SNAP benefits.

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

After withdrawing her hearing request, the Appellant asked that it be reinstated, and on ██████████ OLCRAH issued a notice rescheduling the hearing for ██████████ 2020.

The Appellant reported difficulties calling in for the ██████████ 2020 hearing and on ██████████ 2020, OLCRAH issued a notice rescheduling the hearing for ██████████, 2020.

On ██████████ 2020, 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. Due to COVID-19 concerns, the hearing was held telephonically. No party objected to the hearing being held in that manner.

The following individuals were present at the hearing:

██████████, the Appellant, via telephone
██████████ adult member of the Appellant's household, via telephone
Marybeth Mark, Department's representative, via telephone
James Hinckley, Hearing Officer

STATEMENT OF THE ISSUE

1. Whether the Department was correct when it determined the Appellant did not qualify for SNAP because her household's total income exceeded the gross limit.

FINDINGS OF FACT

1. The Appellant applied for SNAP on ██████████ 2020. (Hearing Record)
2. The Appellant's SNAP household included five persons: herself, her adult roommate (her "roommate"), two minor children in common, and her roommate's minor child. (Hearing Record)
3. The Appellant was employed, and provided the Department with copies of four consecutive weekly pay stubs to verify her wages. The gross amounts were \$798.37, \$798.37, \$665.31 and \$661.48. (Ex. 1: Pay Stubs)
4. The Appellant's roommate was employed and his wage records were available to the Department through its employment verification service, *The Work Number*. He had bi-weekly gross pay of \$1,024.12 on ██████████, 2020 and \$951.35 on ██████████, 2020. (Ex. 4: *The Work Number* verification results)
5. The household had a daycare expense of \$125.00 weekly. (Hearing Record)
6. The Appellant had a rent expense of \$1,080.00 monthly and was responsible for heating and cooling costs. (Hearing Record)
7. On ██████████ 2020, the Department issued an NOA to the Appellant denying her application for SNAP because her household's gross income exceeded the limit. (Ex.6: NOA dated ██████████ 2020)

CONCLUSIONS OF LAW

1. Section 17b-2 of the Connecticut General Statutes, authorizes the Commissioner of the Department of Social Services to administer the SNAP in accordance with federal law.
2. 7 CFR § 273.9 (a) provides, in relevant part, as follows:

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 Federal income poverty levels established as provided in section 673(2) of the Community Services Block Grant Act (42 U.S.C. 9902(2)).

3. **The Appellant's household did not contain an elderly or disabled member. It was, therefore, subject to both the net income and gross income eligibility standards for SNAP, unless it met categorical eligibility requirements pursuant to §273.2(j)(2) or 273.2(j)(4).**
4. The provisions in 7 CFR § 273.2(j)(2) and § 273.2(j)(4), with a single exception, confer categorical eligibility only to households that receive cash assistance from PA (Public Assistance), SSI (Supplemental Security Income) or GA (General Assistance). The exception is broad-based categorical eligibility based on the provisions in § 273.2(j)(2)(ii).
5. **No members of the Appellant's household received income from PA, SSI or GA. The household was, therefore, not categorically eligible based on receipt of cash assistance.**
6. Broad-based categorical eligibility pursuant to 273.2(j)(2)(ii). States may, at their option, extend categorical eligibility to households "in which all members receive or are authorized to receive non-cash or in-kind services" from a program that is funded in part with State money counted for MOE purposes under Title IV-A, if the program was designed to further either purposes one and two, or three and four, of the TANF block grant. FNS must be informed of, or must approve, the TANF services that a State determines to confer categorical eligibility. 7 CFR § 273.2(j)(2)(ii)
7. **Households in Connecticut with incomes below 185% of the federal poverty level ("FPL") qualify for the State's "Help for People in Need" program which is funded with money counted for TANF MOE purposes and meets the requirements in 7 CFR § 273.2(j)(2)(ii). As such, the Department extends broad-based categorical eligibility for SNAP to all households that qualify for "Help for People in Need".**
8. The Federal Poverty Standards applicable to the Appellant's eligibility determination are published in the Federal Register, Vol. 84, No. 22 / Friday, February 1, 2019, pp. 1167-1168.

9. "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...." 7 CFR § 273.10(c)(2)
10. **The Appellant's average weekly gross pay was \$730.88 ($\$798.37 + \$798.37 + \$665.31 + \$661.48 = \$2,923.53$, divided by 4 weeks equaled \$730.88.**
11. **The Appellant's gross monthly earnings were \$3,142.78. Her average weekly gross pay of \$730.88, converted to a monthly amount, equaled \$3,142.78 ($\730.88 multiplied by 4.3 equaled \$3,142.78)**
12. **The Appellant's roommate's average bi-weekly gross pay was \$987.74 ($\$1,024.12 + \$951.35 = \$1,975.47$, divided by 2 bi-weekly pays equaled \$987.74)**
13. **The Appellant's roommate's gross monthly earnings were \$2,123.63. His average bi-weekly gross pay of \$987.74, converted to a monthly amount, equaled \$2,123.63 ($\987.74 multiplied by 2.15 equaled \$2,123.63)**
14. **The Appellant's household had total monthly income of \$5,266.41 ($\$3,142.78 + \$2,123.63$).**
15. **185% of the FPL for a household of five persons was \$4,652.00.**
16. **The household's total income of \$5,226.41 (Appellant's earnings of \$3,142.78, plus her roommate's earnings of \$2,123.63) exceeded 185% of the FPL for a household of five persons, or \$4,652.00. The household was, therefore, not eligible for "Help for People in Need", and not categorically eligible pursuant to § 273.2(j)(2)(ii). Because the household did not meet any of the qualifications for categorical eligibility, it was subject to the SNAP gross income eligibility standard.**
17. 7 CFR § 273.9(a)(1) discusses the gross income eligibility standards for the Food Stamp Program and provides that: (i) "The income eligibility standards for the 48 contiguous States and the District of Columbia, Guam and the Virgin Islands shall be 130 percent of the Federal income poverty levels for the 48 contiguous States and the District of Columbia."
18. **130% of the FPL for a household of five persons was \$3,269.00.**
19. **The household's total income of \$5,226.41 exceeded the SNAP gross income limit for a household of five persons, which was \$3,269.00.**
20. **The Department was correct when it denied the Appellant's application for SNAP, because her household's income exceeded the gross income limit.**

DECISION

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


James Hinckley
Hearing Officer

cc: E. Tyler Nardine
Cheryl Stuart
Marybeth Mark

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 06105-3725.

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. 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.