

STATE OF CONNECTICUT  
DEPARTMENT OF SOCIAL SERVICES  
OFFICE OF LEGAL COUNSEL, REGULATIONS, AND ADMINISTRATIVE HEARINGS  
55 FARMINGTON AVENUE  
HARTFORD, CT06105-3725

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

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

**NOTICE OF DECISION**

**PARTY**

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

**PROCEDURAL BACKGROUND**

On ██████████ 2020, the Department of Social Services (the “Department”) issued a notice of action to ██████████ (the “Appellant”) proposing to grant her Supplemental Nutrition Assistance Program (“SNAP”) benefits in the amount of \$355.00 per month ongoing.

On ██████████ 2020, the Appellant requested an administrative hearing to contest the Department’s decision to issue SNAP benefits in the amount of \$355.00 per month for a household of two people.

On ██████████ 2020, the Office of Legal Counsel, Regulations, and Administrative Hearings (“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 were present at the hearing:

██████████, the Appellant  
Garfield White, Eligibility Services Worker, Department’s representative  
Roberta Gould, Hearing Officer

At the Department’s request, the hearing record was held open for the submission of additional evidence. The hearing record closed on ██████████ 2020.

## STATEMENT OF THE ISSUE

The issue to be decided is whether the Department's issued the correct amount of SNAP benefits to the Appellant.

## FINDINGS OF FACT

1. On [REDACTED], the Appellant applied for SNAP benefits for herself, her son, [REDACTED] and her son, [REDACTED]. (Exhibit 1: Online application form and Hearing summary)
2. The Appellant's son, [REDACTED], is 22 years old and is attending [REDACTED] University full time. (Exhibit 1, Appellant's testimony and Hearing summary)
3. [REDACTED] is expected to return to school in the fall and to graduate in [REDACTED] (Exhibit 7: Education screen details and Hearing)
4. [REDACTED] is in the National Guard Reserve and attends drill once per month. He earns \$180.00 per month from the National Guard. (Exhibit 1 and Appellant's testimony)
5. [REDACTED] is not otherwise employed or currently participating in a work study program at school. (Exhibit 8: Work Number verification for [REDACTED] and Appellant's testimony)
6. The Appellant is currently unemployed and has no income. (Exhibit 4: Case notes)
7. The Appellant has Section 8 and pays \$0.00 per month for rent. (Exhibit 4 and Appellant's testimony)
8. The Appellant's heat is included in her rent, but she pays for telephone and electricity. (Exhibit 1 and Appellant's testimony)
9. On [REDACTED] 2020, the Department issued the Appellant a notice that her SNAP benefits were granted effective [REDACTED], in the amount of \$355.00 per month ongoing. (Exhibit 9: Notice of action dated [REDACTED] and Hearing summary)
10. The issuance of this decision is timely under the Code of Federal Regulations § 273.15, which states that a decision must be reached and the household notified within 60 days of receipt of a request for a hearing. The Appellant requested an administrative hearing on [REDACTED] 2020. Therefore, this decision is due not later than [REDACTED] 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 program in accordance with federal law.
2. Title 7 of the Code of Federal Regulations (“CFR”) § 273.1(a) 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:
  - (1) An individual living alone;
  - (2) An individual living with others, but customarily purchasing food and preparing meals for home consumption separate and apart from others; or
  - (3) A group of individuals who live together and customarily purchase food and prepare meals together for home consumption.
3. Uniform Policy Manual § 3020.05(B) provides that students in higher education who are otherwise eligible qualify if they are any of the following:
  1. under 18 years of age or 50 years old or older;
  2. physically or mentally unfit;
  3. receiving benefits from Temporary Assistance for Needy Families;
  4. responsible for more than 50% of the support or care of a dependent member of the assistance unit who is under age 6, or age 6 or up to age 12 if adequate day care is not available.
    - a. Care or support of a child refer to the major responsibility for physical care.
    - b. When two or more adults in the home share the responsibility for support or care, the adult who provides the physical care for more hours than the other adult is the one who meets the student status eligibility requirement.
  5. enrolled less than half-time;
  6. enrolled half-time or more if:
    - a. participating in a federally financed work study program during the regular

school year. Qualification begins when the school term begins or the work study is approved, whichever is later. Qualification ends on the last day of the month in which the school term ends if there is a break of at least a full month between school terms except when the student participates in work study during the break. Qualification also ends if it becomes known that the student has refused a work study assignment; or

- b. employed a minimum of 20 hours per week and be paid for such employment; or
  - c. self-employed a minimum of 20 hours per week with weekly earnings the equivalent of the Federal minimum wage multiplied by 20 hours.
7. assigned to or placed in the institution of higher education by
- a. the Job Training Partnerships Act (JTPA) program; or
  - b. a program under section 236 of the Trade Act of 1974; or
  - c. a Food Stamp Employment and Training program; or
  - d. an employment and training program for low income households operated by a State or local government where one or more components of the program's level of effort is at least equivalent to a food stamp employment and training program component. The level of effort should be comparable to spending approximately 12 hours a month for two months making job contacts.
8. A single parent enrolled full-time (as determined by the institution) and responsible for the care of a dependent child under age 12 if:
- a. only one natural, adoptive, or stepparent (regardless of marital status) is in the same food stamp household as the dependent child; or
  - b. If no natural, adoptive, or stepparent is present in the same food stamp household as the dependent child, another full-time student in the food stamp household may qualify if the full-time student has parental control over the dependent child and is not living with their spouse.
9. Enrolled as a result of participation in the Job Opportunities and Basic Skills program under Title IV of the Social Security Act or its successor program.

4. UPM § 3020.05(C)(2) provides that normal vacations, holidays or recess do not interrupt student status.

**The Department correctly determined that the SNAP assistance unit is considered a household of two persons because her son, [REDACTED], is attending college full-time, and does not meet any of the criteria for a qualifying student. His income from the National Guard Reserve is not equivalent to employment of 20 hours per week.**

5. Title 7 of the CFR § 273.9(d)(6)(ii) provides for excess shelter deduction.

UPM § 5035.15(F)(1) provides, in part, 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;
- b. taxes, state and local assessments, and insurance on real property;
- c. the entire amount paid for 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.

6. UPM § 5035.15(F)(7) provides that a standard utility allowance is used as a deduction for applicants or recipients who have heat included in their rent payment when one of the following is true:

- a. The assistance unit received a CEAP Direct Cash Benefit (DCB) last heating season at their current residence; or
- b. The assistance unit appears to be eligible for a CEAP DCB at their current residence and the assistance unit intends to apply for the CEAP DCB during the

next CEAP application period provided the CEAP application can be made within the assistance unit's current Food Stamp certification period.

**Effective [REDACTED] 2020, the Department correctly determined the Appellant's shelter expenses were \$736.00 per month (\$0.00 rent + \$736.00 standard utility allowance), assuming that the assistance unit is eligible for CEAP.**

7. Title 7 of the CFR § 271.2 provides for the maximum shelter deduction.

UPM § 5035.15(F)(11) provides that for those units which include elderly or disabled members, or units whose only elderly or disabled member has been disqualified, a shelter hardship deduction is allowed with no maximum limit.

**Effective [REDACTED] 2020, the Department correctly determined that the Appellant's shelter hardship was \$552.00 because there are no elderly or disabled members in the household.**

8. Title 7 of the CFR § 273.10(e)(2)(ii)(A)(1) provides for the monthly SNAP benefit calculation.

UPM § 6005(C) provides that in the SNAP, 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 Food Stamp standard of assistance for the appropriate unit size.

**Effective [REDACTED] 2020, the Department correctly determined that 30% of the Appellant's net adjusted income was \$0.00 per month.**

9. Effective [REDACTED] 2020, the Appellant's SNAP benefits are computed as follows

**SNAP BENEFIT CALCULATION**

<b>INCOME</b>	
Earned Income	\$0.00
Less 20%	\$0.00
<b>Total</b>	<b>\$0.00</b>
Plus Unearned Income	\$0.00
<b>Total</b>	<b>\$0.00</b>
Less standard deduction for 2 persons	-\$0.00
Less dependent care costs	\$0.00

Less medical expenses in excess of \$35 if age 60 and older, or disabled	\$0.00
Other deductions (child support payments)	\$0.00
<b>Adjusted gross income</b>	<b>\$0.00</b>
<u>SHELTER COSTS</u>	
Rent	\$0.00
SUA	<u>\$736.00</u>
<b>Total shelter costs</b>	<b>\$736.00</b>
<u>SHELTER HARDSHIP</u>	
Shelter costs	\$736.00
Less 50% of adjusted gross income	-\$0.00
<b>Total shelter hardship</b>	<b>\$736.00</b> (Cannot exceed \$552 unless elderly or disabled)
<u>ADJUSTED NET INCOME</u>	
Adjusted gross income	\$0.00
Less shelter hardship	<u>-\$552.00</u>
<b>Net Adjusted Income (NAI)</b>	<b>-\$552.00</b>
<u>BENEFIT CALCULATION</u>	
Thrifty Food Plan for 2 Person/s	\$355.00
Less 30% of NAI	<u>-\$0.00</u>
<b>SNAP award</b>	<b>\$355.00</b>

On [REDACTED], the Department correctly calculated the Appellant's SNAP benefits to be \$355.00 per month effective [REDACTED] 2020, because only herself and her son, [REDACTED] are eligible for SNAP.

**DECISION**

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

  
 Roberta Gould  
 Hearing Officer

Cc: Judy Williams, Social Services Operations Manager, DSS Hartford  
 Musa Mohamud, Social Services Operations Manager, DSS Hartford  
 Jessica Carroll, Social Services Operations Manager, DSS Hartford  
 Jay Bartolomei, Social Services Supervisor, DSS Hartford  
 Garfield White, Eligibility Services Worker, DSS Hartford

### **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.