

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

██████████  
Request # 160686

NOTICE OF DECISION

PARTY

██████████  
██████████  
██████████

PROCEDURAL BACKGROUND

On some date prior to ██████████ 2020, the Department of Social Services (the "Department") denied ██████████ (the "Appellant"), application for Supplemental Nutrition Assistance Program ("SNAP") benefits.

On ██████████ 2020, the Appellant requested an administrative hearing to contest the denial of the 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, 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. The following individuals participated in the hearing:

██████████, the Appellant  
Ferris Clare, Department's Representative  
Carla Hardy, Hearing Officer

Due to the COVID-19 Pandemic, the hearing was held as a telephonic hearing.

The hearing record remained open for the Department to submit a copy of the NOA. The Department did not send any additional information. The hearing record closed on [REDACTED], 2020.

On [REDACTED] 2020, the Hearing Officer reopened the hearing record in order to request a copy of the NOA from the Department. The Department did not send any additional information. On [REDACTED] 2020, the hearing record closed.

The hearing issue regarding the denial of the Aid to the Aged, Blind, and Disabled ("AABD) program will be addressed in a separate decision.

### **STATEMENT OF THE ISSUE**

The issue to be decided is whether the Department's decision to deny the SNAP benefits was correct.

### **FINDINGS OF FACT**

1. On [REDACTED] 2020, the Appellant's SNAP benefits were discontinued due to an outstanding warrant. He had violated his probation. (Exhibit 1: Case Notes)
2. On [REDACTED] 2020, the Department received the Appellant's application for SNAP assistance. (Exhibit 1: Case Notes; Hearing Summary)
3. The Appellant's rent is \$500.00 monthly. He pays for hot and cold water separately. He receives \$866.50 monthly in Social Security Disability ("SSDI"). (Exhibit 1: Case Notes)
4. On [REDACTED] 2020, the Department reviewed the Appellant's application. They tried to contact the Appellant by telephone to conduct the interview but they were unsuccessful. The Department issued to the Appellant an Interview Notice notifying the Appellant that a telephone interview was required by [REDACTED] 2020 for the SNAP program. They also sent a request for proof of the Appellant's [REDACTED] checking account balance and proof that he is no longer a fleeing felon. The requested information was due by [REDACTED] 2020. (Exhibit 1: Case Notes; Appellant's Exhibit B: Interview Notice, [REDACTED]/20; Appellant's Exhibit D: Proofs We Need, [REDACTED]/20)
5. On [REDACTED], 2020, the Department issued to the Appellant a notice of missed interview. The Appellant was notified that he did not complete his interview and to call the Benefit Center if he still wants benefits. The Appellant was notified that his request for SNAP benefits would be denied on [REDACTED] 2020 if he did not complete the interview and send the required proofs. (Appellant's Exhibit C: Notice of Missed Interview, [REDACTED]/20)

6. The Appellant did not complete the interview or submit proof that he is no longer a fleeing felon. (Department's Testimony; Appellant's Testimony)
7. On [REDACTED], 2020, the Department denied the SNAP because they did not receive the requested verifications. (Exhibit 1: Case Notes)
8. 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 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. Title 7 of the Code of Federal Regulations ("CFR") Section 273.2(c)(5) provides that the State agency shall provide each household at the time of application for certification and recertification with a notice that informs the household of the verification requirements the household must meet as part of the application process. The notice shall also inform the household of the State agency's responsibility to assist the household in obtaining required verification provided the household is cooperating with the State agency as specified in (d) (1) of this section. The notice shall be written in clear and simple language and shall meet the bilingual requirements designated in § 272.4 (b) of this chapter. At a minimum, the notice shall contain examples of the types of documents the household should provide and explain the period to time the documents should cover.

"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)).

Uniform Policy Manual ("UPM") § 1545.15(A)(1) provides in part that the Department is required to provide assistance units with timely notification of the required redetermination.

**The Department correctly notified the Appellant that her SNAP Renewal must be completed by [REDACTED] 2020, in order to receive uninterrupted benefits.**

3. Title 7 CFR § 273.2(e)(1) provides that except for households certified for longer than 12 months, and except as provided in paragraph (e)(2) of this section, households must have a face-to-face interview with an eligibility worker at initial certification and at least once every 12 months thereafter.

Title 7 CFR § 273.2(e)(2) CFR provides in part that the State agency may opt to waive the face-to-face interview in favor of a telephone interview for all households which have no earned income and all members of the household are elderly or disabled. The State agency has the option of conducting a telephone interview or a home visit that is scheduled in advance with the household if the office interview is waived.

UPM § 1505.30(A)(2)(b) provides that the office interview is conducted as a condition of eligibility in the SNAP program.

**The Department tried to contact the Appellant to conduct a telephone interview.**

4. Title 7 of the CFR § 273.2(h)(i)(C) provides for cases where verification is incomplete, the State agency must have provided the household with a statement of required verification and offered to assist the household in obtaining required verification and allowed the household sufficient time to provide the missing verification. Sufficient time shall be at least 10 days from the date of the State agency's initial request for the particular verification that was missing.

UPM § 1015.05(C) provides that the Department must tell the assistance unit what the unit has to do to establish eligibility when the Department does not have sufficient information to make an eligibility determination.

**The Department correctly sent the Appellant a Proofs We Need notice, advising that additional proofs were needed to establish eligibility.**

5. Title 7 CFR § 273.2(f)(5)(i) provides that the household has primary responsibility for providing documentary evidence to support statements of the application and to resolve any questionable information.

UPM § 1505.40(C)(1) provides that the applicant is considered responsible for incomplete applications if the Department has taken the following actions:

- a. Offered assistance in completing application materials or procuring difficult to obtain verification;
- b. Scheduled a second interview for applicants who failed to appear for the first scheduled interview but who contacted the Department to reschedule; or

- c. With the exception of (3) below has allowed at least 10 days from the date it notifies the applicant of a required action for the applicant to complete the action, including requests to provide verification.

UPM § 1505.40 (C) (3) provides that the Department is considered responsible for delays in processing applications if it has agreed to accept responsibility for obtaining verification on behalf of the assistance unit, and the delay is due to a delay in getting that verification, provided that the assistance unit continues to cooperate in the verification process.

6. Title 7 CFR 273.2 (g)(3) provides for denying the application and states households that are found to be ineligible shall be sent a notice of denial as soon as possible but not later than 30 days following the date the application was filed. If the household has failed to appear for a scheduled interview and has made no subsequent contact with the State agency to express interest in pursuing the application, the State agency shall send the household a notice of denial on the 30th day following the date of application.

UPM § 1505.35(C)(1)(a) provides that the maximum time period for processing SNAP applications is thirty calendar days for eligible SNAP applications that do not qualify for expedited service

UPM § 1015.10(C) provides that the Department must send the assistance unit a notice regarding the Department's determination of the unit's initial eligibility, and, subject to conditions described in Section 1570, adequate notice before taking action to change the unit's eligibility status or the amount of benefits.

**The Department failed to provide a copy of the denial notice that was sent to the Appellant.**

**The date and reason that the Department denied the Appellant's SNAP application is not known.**

**It cannot be determined if the Department correctly denied the Appellant's SNAP application.**

### **DECISION**

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

**ORDER**

1. The Department shall rescreen the AABD application effective [REDACTED] 2020, the date of application.
2. The Department shall request additional information if needed and give the Appellant ten (10) days to submit the required information.
3. Compliance with this order is due no later than [REDACTED], 2020.

  
Carla Hardy  
Hearing Officer

Pc: Rachel Anderson, Cheryl Stuart, Lisa Wells, Ferris Clare, Department of Social Services, New Haven 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 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, 25 Sigourney Street, Hartford, CT 06106. 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.