

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

Case # ██████████  
Client # ██████████  
Request # 161227

NOTICE OF DECISION

PARTY

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

On ██████████ 2020, the Department of Social Services (the “Department”) sent ██████████ (the “Appellant”), a Notice of Action (“NOA”) discontinuing his Supplemental Nutrition Assistance Program (“SNAP”) benefits because his monthly net income is more than the program limit for his family size.

On ██████████ 2020, the Appellant requested an administrative hearing to contest the discontinuance 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, 17b-61, and 4-176e to 4-189 inclusive, of the Connecticut General Statutes, OLCRAH held a telephonic administrative hearing. The following individuals participated in the hearing:

██████████, Appellant  
██████████, Appellant’s daughter  
Kristy Martinez, Department’s Representative  
Marci Ostroski, Hearing Officer

## STATEMENT OF THE ISSUE

The issue to be decided is whether the Department correctly discontinued the Appellant's SNAP benefits.

## FINDINGS OF FACT

1. The Appellant's household consists of four members; the Appellant, his wife, [REDACTED], [REDACTED] his 20 year old daughter [REDACTED], and his 10 year old son [REDACTED]. The Appellant is 70 years old (Appellant's testimony, Hearing Summary)
2. On [REDACTED] 2020, the Appellant submitted to the Department his Renewal of Eligibility for the SNAP program. (Hearing summary, Ex. 7: Case Notes)
3. On [REDACTED] 2020, the Department processed the Appellant's renewal form and conducted a telephone interview with the Appellant. He reported property tax monthly costs of \$81.69 and property insurance of \$27.92 per month. He does not have a mortgage payment but does pay for utilities. The Appellant reported monthly Social Security income for himself of \$640 and \$424 for his son. The Department's check with the Department of Labor reflected that the Appellant's daughter was working for [REDACTED]. The Department requested the daughter's last two biweekly wage stubs. (Ex. 7: Case Notes)
4. On [REDACTED], 2020, the Department reviewed the requested biweekly pay stubs, they reflected that the Appellant's daughter earned \$960.41 on [REDACTED]/20 and \$1182.45 on [REDACTED]/20 in gross wages. The Department calculated the daughter's monthly gross wages to equal \$2303.57 ( $\$960.41 + \$1182.45 = \$2142.86 / 4 * 4.3 = \$2303.57$ ). (Ex. 7: Case Notes; Ex. 6: Federal SNAP Income Test; Ex. 2: Paystubs)
5. The Appellant does not have monthly dependent care or child support expenses, and he did not have reported out of pocket medical expenses. (Appellant's Testimony)
6. On [REDACTED] 2020, the Department processed the Appellant's SNAP renewal. The Department determined that the Appellant exceeded the income limit for a family of four and denied the SNAP benefits. (Ex. 6: Case Notes; Hearing Summary; Ex. 1: Notice of Action, [REDACTED]/20)
7. On [REDACTED] 2020, the Department issued a Notice of Action to the Appellant denying the SNAP benefits for exceeding the net income limit. (Ex. 1: Notice of Action, [REDACTED] 20, Hearing Summary)
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, and is therefore timely.

### **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 provides for the household concept. (a) General household definition. 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. (b) Special household requirement (1) Required household combinations. The following individuals who live with others must be considered as customarily purchasing food and preparing meals with the others, even if they do not do so, and thus must be included in the same household, unless otherwise specified. (i) Spouses; (ii) A person under 22 years of age who is living with his or her natural or adoptive parent(s) or step-parent(s).
3. Title 7 CFR § 271.2 provides for the definition of an *elderly member*; a member of a household who: (1) Is 60 years of age or older;
4. The Appellant is considered an elderly member for purposes of the SNAP program because he is over the age of 60.
5. “The Department’s uniform policy manual is the equivalent of 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)).
6. Uniform Policy Manual (“UPM”) § 2020.10 provides the assistance unit must include certain individuals who are in the home, if they are not specifically excluded or ineligible to participate in the Food Stamp program (A) Those who are related as follows must be included in the assistance unit, except when the child or adult is a foster child or foster adult: 1. a child under age 18 under the parental control of a member of the assistance unit; 2. a spouse of a member of the assistance unit including any who presents himself or herself as a spouse; 3. children ages 18 through 21 living with their parents.
7. The Department correctly determined that the Appellant’s spouse and two children must be included in the SNAP assistance unit.
8. The Department correctly determined that the Appellant’s SNAP assistance unit consists of four people.

9. Title 7 CFR § 273.9(b)(2)(ii) provides for counting pensions and social security benefits as unearned income.
10. UPM § 5050.13(A)(1)(6) provides SSA income received by members of a Food Stamp assistance unit is treated as unearned income in all programs and is counted in determining eligibility and calculating benefits for the entire unit.
11. The Appellant's \$640.00 SSA income and the Appellant's son's \$424.00 SSA income is counted in determining his SNAP eligibility.
12. Title 7 CFR § 273.9(b)(1) provides that household income shall include all wages and salaries of an employee.
13. UPM § 5005(A) provides that the Department counts the assistance unit's available income, and that income is considered available if it is:
  1. received directly by the assistance unit,
  2. received by someone else on behalf of the assistance unit and the unit fails to prove that it is inaccessible; or
  3. deemed by the Department to benefit the assistance unit.
14. The Department correctly included the daughter's earned income when calculating the household's SNAP benefits.
15. Title 7 CFR § 273.10(c)(1)(ii) & (c)(2)(i) provides for converting income into monthly amounts.
16. UPM § 5025.05(b) provides:
  1. If income is received on a monthly basis, a representative monthly amount is used as the estimate of income.
  2. If income is received on other than a monthly basis, the estimate of income is calculated by multiplying 4.3 by a representative weekly amount that is determined as follows:
    - a. If income is the same each week, the regular weekly income is the representative weekly amount;
    - b. If income varies from week to week, a representative period of at least four consecutive weeks is averaged to determine the representative weekly amount;
    - c. If there has been a recent change or if there is an anticipated future change, the amount expected to represent future income is the representative weekly amount;
    - d. If income is received on other than a weekly or monthly basis, the income is converted to a representative weekly amount by dividing the income by the number of weeks covered
17. The Appellant's daughter's earned income based on four consecutive weeks of gross earnings and averaged by 4.3 is included when calculating the Appellant's SNAP eligibility.
18. The Appellant's household's average gross earnings total \$2303.57.

19. Title 7 CFR § 273.9(d)(1)&(2) provides for standard deductions and earned income deductions.
20. 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 \$167.00 per month; {effective October 1, 2019}
    3. a deduction for unearned income to be used to fulfill a bonafide 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.
21. The Appellant's adjusted gross income equals \$2728.86 (\$2303.57 - \$460.71 (20% deduction) - \$178.00 (standard deduction) + \$640.00 + \$424.00 (SSA unearned income) = \$2728.86
22. Title 7 CFR § 273.9(d)(6)(ii) provides for excess shelter deduction.
23. 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;

24. Title 7 CFR § 273.9(d)(6)(iii) provides for the standard utility allowances.
25. 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.
26. The Standard Utility Allowance is \$736.00 effective October 1, 2019.
27. Title 7 CFR § 271.2 provides for the maximum shelter deduction.
28. 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 is revised annually effective October 1. (Maximum shelter hardship effective October 1, 2019, is \$569.00).
29. The Appellant's shelter hardship is not capped at \$569.00 because the household contains an elderly member.
30. The Appellant's shelter costs totaled \$845.61 (\$109.61 (property tax and insurance) + \$736.00 (Standard Utility Allowance) = \$845.61)
31. Title 7 CFR § 273.10(e)(2)(ii)(A)(1) provides for the monthly SNAP benefit calculation.
32. 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.
33. Effective [REDACTED] 2020, the Appellant's SNAP benefits are computed as follows:

**SNAP BENEFIT CALCULATION**

<b><u>INCOME</u></b>	
Earned Income	\$2303.57
Less 20 percent	-\$460.71
= Adjusted earned income	\$1842.86
+ Unearned income SSA	\$640.00
+ Unearned income SSA	\$424.00
= Total income	<u>\$2906.86</u>
- Standard deduction	-\$178.00
- Medical expenses	\$0.00
-Dependent care expenses	\$0.00
<b>=Adjusted gross income</b>	\$2728.86
<b><u>SHELTER COSTS</u></b>	
Rent/Mortgage	\$0.00
Property tax/insurance	\$109.61
+ SUA	<u>\$736.00</u>
<b>Total shelter costs</b>	\$845.61
<b><u>SHELTER HARDSHIP</u></b>	
Shelter costs	\$845.61
Less 50% of adjusted gross income	<u>-\$1364.43</u>
<b>= Total shelter hardship</b> (max \$552 if not disabled or elderly)	\$0.00
<b><u>ADJUSTED NET INCOME</u></b>	
Adjusted gross income	\$2728.86
Less shelter hardship	<u>-\$0.00</u>
<b>Net Adjusted Income (NAI)</b>	\$2728.86
<b><u>BENEFIT CALCULATION</u></b>	
Thrifty Food Plan for four persons	\$646.00
Less 30% of NAI (rounded up to nearest whole dollar)	<u>\$819.00</u>
<b>SNAP award</b>	<b>\$0.00</b>

34. On [REDACTED], 2020, the Department correctly denied the Appellant's SNAP benefits for exceeding the net income limit.

### **DISCUSSION**

The Department's calculation of SNAP benefits was correct at the time of the renewal. The Appellant reported some changes at the Administrative Hearing that were not part of the renewal. His daughter reported a change in hours and the Appellant reported a condo fee of \$192 per month. The Appellant is encouraged to reapply with any changes to his household circumstances but the denial of SNAP benefits in [REDACTED] 2020 is upheld.

**DECISION**

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

  
Marci Ostroski  
Hearing Officer

Pc: Jamel Hilliard, Operations Manager, Department of Social Services, Waterbury Regional Office  
Kristy Martinez, Hearing Liaison, Department of Social Services, Waterbury 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.