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





NOTICE OF DECISION PARTY



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, effective 2020.

On 2020, the Appellant requested an administrative hearing to contest the Department's decision to discontinue 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 an administrative hearing via telephone conference.

The following individuals participated at the hearing:

, Appellant Jose Cuervo (#13183), Interpreter, Language Line Jennifer Miller, Department Representative Miklos Mencseli, Hearing Officer

STATEMENT OF THE ISSUE

The issue to be decided is whether the Department's action to discontinue the Appellant's SNAP benefits because he failed to timely submit a completed SNAP renewal form was correct.

FINDINGS OF FACT

- 1. The Appellant was a recipient of SNAP benefits. (Summary, Department's Testimony)
- 2. The Appellant's current certification period is through 2020.
- 3. On **Example 1**, 2020, the Department sent to the Appellant a W-1ERL renewal form. The completed form must be completed and returned to the Department by **Example**, 2020. (Exhibit 2: Department's Correspondence printout)
- 4. On 2020, the Department sent the Appellant a warning notice stating it had not received the renewal form and benefits would be discontinued effective 2020, 2020 if not received. (Exhibit 2)
- 5. The Department did not receive the Appellant's SNAP renewal form. (Exhibit 3: Department's Document Received printout)
- 6. On **Constant**, 2020, the Department sent the Appellant a Notice of Action (NOA) discontinuing his SNAP benefits for Failure to Return his Renewal form. (Summary, Exhibit 1: NOA dated **Constant** 2020)
- The Department discontinued the Appellant's SNAP benefits effective
 2020, because he did not complete and return his Renewal form. (Summary, Exhibit 1)
- 8. All the notices were mailed to the Appellant's address of record with the Department; **Department**; **Department**. (Department's Testimony)
- 9. The Department has no record of returned mail for the Appellant regarding the notices for his SNAP renewal. (Appellant's Testimony)
- 10. The Appellant did not return the renewal form. He did submit documents attached to his hearing request. (Appellant's Testimony)

11. 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 fair hearing. The Appellant requested an administrative hearing on 2020. Therefore, this decision is due no later than 2021.

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.

"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 Maintenance, 214 Conn. 601, 573 A.2d (1990)).

- 2. 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.
- 3. UPM § 1010.05 (C)(6)(a) provides the assistance unit must satisfy certain procedural requirements as described in Section 3500, including cooperating with the Department as necessary. Cooperation includes taking steps as required by the Department to complete the eligibility determination, periodic redetermination of eligibility, interim changes in eligibility or benefit level and Quality Control reviews.
- 4. Title 7 of the Code of Federal Regulations ("CFR") § 273.12(a)(5)(iii)(A) provides that the State agency may require a household to submit a periodic report on its circumstances from once every 4 months up to once every 6 months.
- 5. Title 7 of the Code of Federal Regulations Section 273.12(b)(1) provides that the State agency shall provide the household with a form for reporting the changes required in paragraph (a)(1) of this section to be reported within 10 days and shall pay the postage for return of the form. The change report form shall, at a minimum, include the following: (i) A space for the household to report whether the change shall continue beyond the report month; (ii) The civil and criminal penalties for violations of the Act in understandable terms and in prominent and boldface lettering; (iii) A reminder to the household of its right to claim actual utility costs if its costs exceed the standard; (iv) The number of the food stamp office and a toll-free number or a number where collect calls will be accepted for households outside the local calling area; and (v) A statement describing the changes in household circumstances contained in Sec. 273.12(a)(1) that must be reported and a statement which clearly informs the household that it is required to report these changes. (2) The

quarterly report form, including the form for the quarterly reporting of the child support obligation, must be written in clear, simple language, and must meet the bilingual requirements described in Sec. 272.4(b) of this chapter. In addition, the form must specify the date by which the agency must receive the form and the consequences of submitting a late or incomplete form. The form (or an attachment) must specify the verification the household must submit with the form, inform the household where to call for help in completing the form, and include a statement to be signed by a member of the household indicating his or her understanding that the information provided may result in reduction or termination of benefits. The form should also include a brief description of the Food Stamp Program fraud penalties.

- 6. The Department correctly notified the Appellant on **Constant 1**, 2020 that a completion of a Renewal Form was required for his continued SNAP benefits.
- 7. UPM § 1545.25 (A) provides that assistance units are required to complete a redetermination form at each redetermination.
- 8. UPM § 1545.25 (D) provides that assistance units that do not complete the redetermination form within the time limits specified in this chapter may be subject to discontinuance or an interruption in benefits.
- 7 C.F.R. § 273.14 (a) provides in part that no household may participate beyond the expiration of the certification period assigned in accordance with § 273.10 (f) without a determination of eligibility for a new period.
- 10. UPM § 1545.40 (A)(2) provides that unless otherwise stated, assistance is discontinued on the last day of the redetermination month if eligibility is not reestablished through the redetermination process.
- 11. UPM § 1545.40(B)(2)(b) and (c) provides that discontinuance is automatic, regardless of the reason for the incomplete redetermination. Good cause is not a consideration in the food stamp program.
- 12. The Department correctly discontinued the Appellant's SNAP benefits, effective 2020, because the Appellant did not complete his review by submitting his Renewal form in a timely manner.

DECISION

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

Mikba J. Mencsel

Miklos Mencseli Hearing Officer

C: Jamel Hilliard, Operations Manager, DSS R.O. #60 Waterbury

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 <u>specific</u> grounds for the request: for example, indicate <u>what</u> error of fact or law, <u>what</u> new evidence, or <u>what</u> 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, 165 Capitol Avenue, 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.