

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

██████████ 2021  
Signature Confirmation

Case # ██████████  
Client # ██████████  
Request # 165246

**NOTICE OF DECISION**

**PARTY**

██████████  
██████████  
██████████

**PROCEDURAL BACKGROUND**

On ██████████ 2020, the Department of Social Services (the “Department”) sent ██████████ (the “Appellant”) a Notification of Overpayment and Recoupment indicating she had been overpaid in Supplemental Nutrition Assistance Program (“SNAP”) benefits in the amount of \$10,037.40 and that she must repay the overpayment.

On ██████████, 2020, the Appellant requested an administrative hearing to contest the Department’s decision to recover such benefits.

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

On ██████████, 2020, the Appellant requested a continuance of the hearing, which was granted.

On ██████████ ██████████ 2020, OLCRAH issued a notice of the re-scheduled administrative hearing for ██████████ 2021.

On ██████████ 2021, the Appellant requested a second continuance which was granted.

On ██████████ ██████████ 2021, OLCRAH issued a notice of the re-scheduled administrative hearing for ██████████ 2021.

On [REDACTED] 2021, 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 were present at the hearing:

[REDACTED], Appellant  
 Ferris Clare, Departments Representative  
 Almelinda McLeod, Hearing Officer

On [REDACTED] 2021, the hearing record was re-opened for additional evidence to be submitted by [REDACTED] 2021. On [REDACTED], 2021, the hearing record closed. Subsequent documents submitted after the [REDACTED] 2021 deadline were not considered in this decision.

### STATEMENT OF THE ISSUE

The issue to be decided is whether the Department correctly determined the Appellant was overpaid \$10,037.40 in SNAP benefits and whether the Appellant must pay back the overpayment.

### FINDINGS OF FACT

1. On [REDACTED] 2020, the Department received the Appellant's SNAP renewal. (Exhibit 1, Case notes, Exhibit 5, Renewal application)
2. The Appellant reported a household of 6 consisting of herself, her 4 children ([REDACTED], [REDACTED], [REDACTED], [REDACTED], [REDACTED] and the paternal grandfather of the 3 [REDACTED] children, [REDACTED]. (Hearing summary and Exhibit 5)
3. [REDACTED] is the father of the Appellant's three youngest children residing with the Appellant. He was reported to be an absent parent ("AP") in the SNAP renewal. (Hearing record)
4. The Appellant reported receiving child support of \$150 for each of the three youngest children from the AP for a total of \$450.00 per month. (Exhibit 1, Case notes)
5. The Appellant is employed with [REDACTED], earning approximately \$1800 bi-weekly. (Hearing record)
6. The Appellant reported **no** other income source. (Exhibit 1)
7. The Appellant reported a change of address to [REDACTED], CT. with a mortgage obligation of \$2700 with taxes and insurance included and responsible for all utilities, separately. (Exhibit 1 and Hearing summary)

8. On [REDACTED] 2020, the Department reviewed the Appellant's SNAP renewal and through the Equifax, Work Number verifier confirmed that the Appellant was employed with [REDACTED] with an annual income of \$44,000. At this time, the Department determined the Appellant was living above her means. (Exhibit 1)
9. On [REDACTED] 2020, a review of the [REDACTED] Assessors data base shows that the previous house owned by the Appellant and the AP was sold on [REDACTED] 2019 and that [REDACTED], CT was purchased on [REDACTED] 2019 by both the Appellant and the AP. (Exhibit 1)
10. On [REDACTED] 2020, a review of the Department of Motor vehicle data base shows that the AP resided at [REDACTED], CT. (Exhibit 1)
11. On [REDACTED] 2020, a review of the Equifax, Work number verifier showed that the AP was employed with [REDACTED] and his address was listed as [REDACTED] CT. (Exhibit 1 and Exhibit 6, Work Number Verifier)
12. On [REDACTED] 2020, the Department determined that based on its findings, the AP resided at [REDACTED], CT. (Hearing record, Exhibit 6)
13. On [REDACTED] 2020, the Department determined that the Appellant's household consisted of seven people which includes the AP. (Hearing summary)
14. On [REDACTED] 2020, the Department determined the AP was part of the SNAP assistance and entered his earnings from [REDACTED] [REDACTED] as of [REDACTED] 2019. (Exhibit 1)
15. The Department determined that the Appellant's household receive the following income from [REDACTED] 2019 to [REDACTED] 2020.

Month /Year	Appellant	AP	Total Gross received
[REDACTED] 2019	\$1812.07 +1834.44	\$3987.50+ 4047.07	<b>\$11,8681.15</b>
[REDACTED] 2020	\$1614.89+ 2018.75	\$3972.15 + 3972.15	<b>\$11,577.94</b>
[REDACTED] 2020	\$1861.45+1821.22	\$3983.66+ 3978.54	<b>\$11,644.87</b>
[REDACTED] 2020	\$1834.33+ 1909.47	\$11,245.64+3972.15+6456.25	<b>\$25,417.84</b>
[REDACTED] 2020	\$1790.37 +1817.95	\$3972.15+131.98 + 4349.41	<b>\$12061.86</b>
[REDACTED] 2020	\$1798.06+1823.15+1811.06	\$5349.41+4349.41 +4349.41	<b>\$19,480.50</b>
[REDACTED] 2020	\$1756.70 + 1775.00	\$4349.41+ 4362.80	<b>\$12,243.91</b>
[REDACTED] 2020	\$1794.44 +1828.34	\$4349.41 +4349.41	<b>\$12,321.60</b>
[REDACTED] 2020	\$1837.83 + 1759.86	\$6349.41 + 4378.68	<b>\$14,325.78</b>
[REDACTED] 2020	\$1811.27 + 1863.37	\$4356.12 + 4349.41	<b>\$12,380.17</b>

(Exhibit 6)

16. From ██████████ 2019 to ██████████ 2020, the gross income limit at 185% Federal Poverty level ("FPL") for a family of 7 is \$6,015.00. (F.H. Exhibit A, Income limits & Standards, effective ██████████ 19)
17. From ██████████ 2019 to ██████████ 2020, the net income limit at 100% FPL for a family of 7 is \$3,251.00. (F.H. Exhibit A, Income limits & Standards effective 10/1/19)
18. The Department determined that based on the above monthly income, the Appellant had been overpaid in SNAP benefits from ██████████ 2019 to ██████████ 2020. (Hearing record)
19. On ██████████ 2020, the Department issued a (W-0001N) Notice of Action ("NOA") which closed the SNAP effective ██████████ 2020 and ongoing because the household's monthly net income is more than the limit for this program. (Exhibit 2, NOA)
20. The Department determined that the Appellant received the following SNAP benefits but was eligible to receive the following in SNAP benefits:

Dates:	SNAP received:	Eligible Benefit amount:
██████████ / 2019	\$894.00	\$0.00
██████████ 2020	\$894.00	\$0.00
██████████ 2020	\$894.00	\$0.00
██████████ 2020	\$894.00	\$0.00
██████████ 2020	\$948.00	\$0.00
██████████ 2020	\$1650.68	\$0.00
██████████ 2020	\$921.00	\$0.00
██████████ 2020	\$921.00	\$0.00
██████████ 2020	\$921.00	\$0.00
██████████ 2020	\$1099.80	\$0.00
<b>Total:</b>	<b>\$10,037.48</b>	<b>\$0.00</b>

(Exhibit 3, Notice of Overpayment and Recoupment)

21. The issuance of ██████████ 2020 totaling \$1650.68 was comprised of the Appellant's monthly benefit of \$921.00 [\$894.00+ \$27.00] + an additional \$729.60. The additional \$729.60 issued in ██████████ 2020 was possibly a pandemic stimulus benefit (Exhibit 4, Benefit Issuance Search results)
22. The issuance of ██████████ 2020 totaling \$1099.80 consisted of the Appellant's benefit amount of \$921.00 issued on ██████████ 20 plus and additional \$178.80 issued on ██████████ 20. the \$178.80 issuance was for replacement of SNAP benefits due to storm Isaiah. (Department testimony and Exhibit 4)
23. On ██████████ ██████████ 2021, the Department clarified that the system is programmed to recoup 10% from the beginning of the months issuances. The 20% replacements and 15% increases are recoupable. Emergency

allotments that bring the folks up to the maximum benefit amount and all Pandemic EBT benefits issued out to children are not recoupable. (Exhibit 7, E-mail clarification)

24. The Department determined that because the Appellant was not eligible for any of the SNAP benefits that were issued from [REDACTED] 2019 to [REDACTED] 2020, the SNAP benefits issued in that time-period was subject to recoupment. (Hearing record)
25. On [REDACTED] 2020, the Department issued a (W-0058N) Notice of Overpayment and Recoupment to the Appellant informing her of the SNAP overpayment in the amount of \$10,037.40 and its intent to recoup the SNAP overpayment from [REDACTED] 2019 to [REDACTED] 2020. The notice included language regarding repayment options which included a W-3007 Repayment Form with a due date of [REDACTED], 2020. (Hearing summary & Exhibit 3, Notice of Overpayment and Recoupment)
26. The Appellant disputes that [REDACTED] resides with her and does not agree that she owes a SNAP overpayment from [REDACTED] 2019 to [REDACTED] 2020. The Appellant testifies that the AP's name is on the property so that she could be approved on the mortgage. The Appellant has a Massachusetts driver's license while the AP has a CT driver's license which was needed to register the children for school. The Appellant testified the AP has resided in [REDACTED] and works at [REDACTED] in [REDACTED] since 2015. (Appellant testimony)
27. The Department received from the Appellant a [REDACTED] "MY Profile- My HR" for the AP dated [REDACTED], 2020 and a paystub dated [REDACTED] 2021 as verification that the AP does not live with her. The Appellant presented a statement from a [REDACTED] attesting that the AP resides with her since 2015. All three verifications provided by the Appellant indicated his address as [REDACTED] [REDACTED] [REDACTED] (Hearing record, Exhibit B, Appellant's verification of address,)
28. The [REDACTED] 2020 "My profile- My HR" indicated changes made to his profile with notations stating that "changes made to the profile may take 24 hours and up to two weeks for the reported changes to be reflected"; and that "updating your address could have tax implications" and lastly "your profile changes have been saved". The "My profile- My HR" and the paystub provided as verification were after the dates in question which is between [REDACTED] 2019 and [REDACTED] 2020. (Exhibit B- My profile- My HR)
29. On [REDACTED], 2021, the Appellant signed a waiver to a timely decision. (F.H. Exhibit A)

## 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. Section 17b-88 of the Connecticut General Statutes authorizes the Commissioner of the Department of Social Services to recover any public assistance overpayments and take such other action as conforms to federal regulations, including, but not limited, conducting administrative disqualification hearings.
3. The Department's uniform policy manual ("UPM") 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)).
4. Title 7 of the Code of Federal Regulations ("CFR") § 273.1 (a) (1)(2)(3) provides for the general household definition and states that a household is composed of one of the following individuals or group of individuals; an individual living alone; an individual living with others but customarily purchasing food and preparing meals for home consumption separate and apart from others; or a group of individuals who live together and customarily purchase food and prepare meals together for home consumption.
5. UPM § 2020.10 (A) (2) provides that 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 spouse of a member of the assistance unit including any who presents himself or herself as a spouse
6. **The Department correctly determined that the AP was part of the Appellant's household.**
7. **The Department correctly determined that the Appellant has an assistance unit of seven.**
8. UPM § 1540.05 (A) pertains to the standard of proof and provides a statement made by an applicant or a recipient is considered by the Department to be verified when the available evidence indicates that it is more likely to be true than not.
9. UPM § 1540.05 ( C) (1) (a) (b) provides that the Department requires verification of information when specifically required by federal and state law or regulations and when the Department considers it necessary to

corroborate an assistance unit's statement pertaining to an essential factor of eligibility.

10. UPM § 1540.15 (A) (1) (2) provides that the information provided by the assistance unit is verified through a cooperative effort between the Department and the members of the unit. The Department determines the adequacy and appropriateness of the method selected. The method of verification which is chosen depends upon the nature of the information being verified and the feasibility of other available methods.
11. UPM § 1540.15 (B) provides documents are the primary sources of verification whenever such evidence can be acquired. The Department accepts any document which it feels clearly establishes the veracity of the unit's declarations without restricting the evidence to any one document.
12. UPM § 1540.15 (C) (1) (2) pertains to Collateral contact and it provides that in the absence of documentary evidence the Department verifies information through contacts with persons that are not in the assistance unit. Verification through collateral contacts consists of obtaining oral or written affirmations of the unit's statements from persons who are capable of providing first-hand testimony.
13. Title 7 CFR § 272.8 (a) (1) provides in *general* part, that State agencies shall maintain and use an income and eligibility verification system (IEVS), as specified in this section. By means of the IEVS, State agencies may request wage and benefit information from the agencies identified in this paragraph (a)(1) and use that information in verifying eligibility for and the amount of SNAP benefits due to eligible households. Such information may be requested and used with respect to all household members, including any considered excluded household members as specified in §273.11(c) of this chapter whenever the SSNs of such excluded household members are available to the State agency.
14. UPM § 1540.15 (E) (4) provides IEVS obtains and utilizes information from the Social Security Administration; Department of Labor; Internal Revenue Service and State Wage Information Collection Agencies (SWICA).
15. UPM §1540.15 (E) (1) (2) provides that the Department also uses the Federally mandated Income Eligibility Verification System (IEVS) to obtain and utilize information on income. IEVS is used in regard to the income of applicants for and recipients of assistance under all programs; former members of FS units who received benefits for at least one month within the quarter; other persons who are not applying for or receiving assistance; and have income or assets that are counted in determining the unit's eligibility or in calculating the unit's benefits; and have their Social Security number on file with the Department or voluntarily furnish it at the

request of the Department. All information obtained through IEVS is verified whenever the information is not being obtained from its primary source.

16. UPM § 1540.15 (E) (3) provides all verified IEVS information is used to determine eligibility; to calculate benefits; to detect overpayment and to calculate the amount; to investigate violations of program regulations and to support resulting prosecutions.
17. Title 7 CFR § 272.12 (b) provides for Alternate data sources. A State agency may continue to use income information from an alternate source or sources to meet any requirement under paragraph (a) of this section.
18. Title 7 CFR § 272.12 (a) (a) *General purpose*. The Computer Matching and Privacy Protection Act (CMA) of 1988, as amended, addresses the use of information from computer matching programs that involve a Federal System of Records. Each State agency participating in a computer matching program shall adhere to the provisions of the CMA if it uses an FNS system of records for the following purposes: (1) Establishing or verifying initial or continuing eligibility for Federal Benefit Programs; (2) Verifying compliance with either statutory or regulatory requirements of the Federal Benefit Programs; or (3) Recouping payments or delinquent debts under such Federal Benefit Programs.
19. UPM §1540.05 (D) (1) (a) provides that the penalty for failing to provide required verification depends upon the nature of the factor or circumstance for which verification is required: If the eligibility of the assistance unit depends directly upon a factor or circumstance for which verification is required, failure to provide verification results in ineligibility for the assistance unit. Factors on which unit eligibility depends directly include but are not limited to: income amounts.
20. **The SNAP program is a federally means testing program; therefore, the Department correctly determined it was necessary to corroborate an assistance unit's statement pertaining to an essential factor of eligibility.**
21. **The Department correctly used IVES and other computer matching programs such as the Town's Assessors office, the DMV and the Equifax, Work number verifier as an alternate source of verifying information pertaining to income and residence.**
22. **The hearing record shows that the Town Assessor data base match conducted on [REDACTED] 2020 confirmed that a house located at [REDACTED] [REDACTED] CT was purchased by both the Appellant and the AP on [REDACTED] 2019; and that based on this evidence, it was**



- reasonable for the Department to determine that the AP resided with the Appellant and his family.
23. The hearing record shows that based on the DMV match conducted on [REDACTED] 2020, which confirmed the address of the AP as [REDACTED] CT; it was reasonable for the Department to determine the AP resided with the Appellant and his family.
24. The hearing record shows that based on the Equifax, Work number verifier, conducted on [REDACTED] 2020 and again on [REDACTED], 2021 which confirmed the AP's address as [REDACTED], CT; it was reasonable for the Department to determine that the AP resided with the Appellant, his children and his family.
25. The Department correctly determined that the statement from [REDACTED] [REDACTED] contradicted the information obtained from the Department through its review.
26. There was no documentary evidence presented that shows that the AP resided elsewhere other than [REDACTED], during the specified period between [REDACTED] 2019 to [REDACTED] 2020.
27. Title 7 of the Code of Federal Regulations ("CFR") § 273.2 (j) (2) (E) (ii) provides the State agency, at its option, may extend categorical eligibility to the following households only if doing so will further the purposes of the Food Stamp Act of 2008: (A) Any household (except those listed in paragraph (j)(2)(vii) of this section) in which all members receive or are authorized to receive non-cash or in-kind services from a program that is less than 50 percent funded with State money counted for MOE purposes under Title IV-A or Federal money under Title IV-A and that is designed to further purposes one and two of the TANF block grant, as set forth in Section 401 of P.L. 104-193. States must inform FNS of the TANF services under this paragraph that they are determining to confer categorical eligibility.
28. Title 7 of the CFR § 273.9 (a) provides that 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 that 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 levels established in Section 673 (2) of the Community Services Block Grant Act (42 U.S.C. 9902 (2)).

- 29. Title 7 of the CFR § 273.9(b) provides that household income shall mean all income from whatever source excluding only items specified in paragraph (c) of this section.
- 30. Title 7 of the CFR § 273.9 (b)(1) provides earned income shall include: (i) All wages and salaries of an employee
- 31. UPM § 5005 (A)(1) provides that the Department counts the assistance unit's available income, and that income is considered available if it is received directly by the assistance unit.
- 32. UPM § 5025.05 (A) provides for the retrospective budgeting system. (1) Provides for past months the Department use the exact amount of the unit's available income received or deemed in the month.
- 33. The Department correctly determined that the Appellant was subject to the gross and net income limits.**
- 34. From ██████████ 2019 to ██████████ 2020, the Department correctly determined that the income received from both the Appellant and the AP is counted towards the SNAP eligibility.**
- 35. From ██████████ 2019 to ██████████ 2020, the Department correctly determined that the combined income received of the Appellant and the AP was as follows:**

Month /Year	Appellant	AP	Total Gross received
██████ 2019	\$1812.07 +1834.44	\$3987.50+ 4047.07	<b>\$11,8681.15</b>
█/ 2020	\$1614.89+ 2018.75	\$3972.15 + 3972.15	<b>\$11,577.94</b>
█ 2020	\$1861.45+1821.22	\$3983.66+ 3978.54	<b>\$11,644.87</b>
█ 2020	\$1834.33+ 1909.47	\$11,245.64+3972.15+6456.25	<b>\$25,417.84</b>
█/ 2020	\$1790.37 +1817.95	\$3972.15+131.98 + 4349.41	<b>\$12061.86</b>
█ 2020	\$1798.06+1823.15+1811.06	\$5349.41+4349.41 +4349.41	<b>\$19,480.50</b>
█ 2020	\$1756.70 + 1775.00	\$4349.41+ 4362.80	<b>\$12,243.91</b>
█ 2020	\$1794.44 +1828.34	\$4349.41 +4349.41	<b>\$12,321.60</b>
█ 2020	\$1837.83 + 1759.86	\$6349.41 + 4378.68	<b>\$14,325.78</b>
█ 2020	\$1811.27 + 1863.37	\$4356.12 + 4349.41	<b>\$12,380.17</b>

- 36. Title 7 of the CFR §273.9 (a) (3) the income eligibility limits, as described in this paragraph, are revised each October 1 to reflect the annual adjustment to the Federal income poverty guidelines for the 48 States and the District of Columbia, for Alaska, and for Hawaii.
- 37. As of ██████████ 2019, the gross income limit (185% FPL) for a family of 7 is \$6015.00 and the net income limit (100% FPL) \$3251.00.**

38. From ██████████ 2019 to ██████████ 2020, the Department correctly determined the Appellant's household income exceeded both the gross and net income limits.
39. Title 7 CFR § 273.18(c)(ii)(A) provides for calculating the claim amount and states that the actual steps for calculating a claim are determine the correct amount of benefits for each month that a household received an overpayment and (C) subtract the correct amount of benefits from the benefits actually received. The answer is the amount of the overpayment.
40. UPM § 7000.01 (A) provides the definition of an overpayment and states that an overpayment is the amount of financial or medical assistance paid to or on behalf of the assistance unit, or the amount of the Food Stamp allotment issued to an assistance unit, in excess of the amount the unit is properly entitled.
41. UPM § 7045.15 (A) pertains to overpayments in the SNAP program and states in part and provides a General Description of the Process. The Department computes the amount of the overpayment by comparing the amount of the benefit which the assistance unit received and cashed during a month or series of months to the amount the assistance unit should have received during that period.
42. UPM § 7045.15 (B) pertains to Benefits Due the Assistance Unit and provides the Department follows the policy outlined in Sections 5500 and 6000 to compute the amount of benefits the assistance unit should have received. 1. The Department first evaluates the assistance unit's prospective eligibility for the month. 2. The Department next evaluates the correctness of the Food Stamp allotment received in that month by using the budgeting method in effect at the time the overpayment occurred.
43. UPM § 6010.10(B)(1) provides that the retrospective method is used to calculate benefits in all months after the initial month of eligibility.
44. From ██████████ 2019 to ██████████ 2020, the Department correctly determined the Appellant received SNAP assistance for a family of 6 rather than a family of 7.
45. From ██████████ 2019 to ██████████ 2020, the Department correctly determined the Appellant's household income exceeded both the gross and net income limits.
46. From ██████████ 2019 to ██████████ 2020, the Department correctly determined the Appellant received SNAP benefits in the amount of \$10,037.48 that she was not entitled to receive.

47. From [REDACTED] 2019 to [REDACTED] 2020, the Department correctly determined the Appellant was overpaid in SNAP benefits in the amount of \$10,037.48.
48. Title 7 of the CFR § 273.18 (a) (2) states that this claim is a federal debt subject to this and other regulations governing federal debts. The State Agency must establish and collect any claims following these regulations.
49. Title 7 of the CFR § 273.18 (a) (1) (i) provides for claims against households and states that a recipient claim is an amount owed because of benefits that are overpaid.
50. UPM § 7045.05 (C) provides for the participation of the assistance unit in the recoupment process. The Department allows the assistance unit to participate in the recoupment process by: a. discussing the cause and amount of the overpayment with the Department; and b. negotiating with the Department in establishing a recoupment plan.
51. UPM § 7045.05 (A) provides the Department recoups from the assistance unit which received the overpayment.
52. The Department properly allowed the Appellant an opportunity to participate in the recoupment process.
53. From [REDACTED] 2019 to [REDACTED] 2020, the Department correctly determined that the Appellant is subject to repay the \$10,037.48 in overpaid SNAP benefits.

### DISCUSSION

The Appellant disagreed that she is responsible to repay the overpaid SNAP benefits discussed at this hearing and insisted that the AP had been living in [REDACTED] since 2015. However, the Appellant failed to provide evidence that the AP did not reside with her at [REDACTED] CT between [REDACTED] 2019 to [REDACTED] 2020.

The Appellant provided a paystub dated [REDACTED] 2021 and a "My profile/My HR" print out from [REDACTED] dated [REDACTED] 2020 that states he resides in [REDACTED]. It should be noted, that the "My Profile/ My HR" dated [REDACTED] 2020 indicated that changes were made to his profile with the following notes: "changes made to the address may have a tax implications" and that "changes will take up to 24 hours for the system to be updated" and lastly that the "your profile changes have been saved." This information presented is verification after the fact and does not verify he did not live with her during the [REDACTED] 2019 to [REDACTED] 2020 time-


period. The Appellant also submitted a statement from the AP's friend who stated the AP have been residing with her in [REDACTED] since 2015.

The Department's review indicated 3 search engines (Town Assessor's office, DMV and Equifax, Work Number verifier) that were used to verify that the AP's address was the same as the Appellants between [REDACTED] 2019 to [REDACTED] 2020. Thus, the statement from [REDACTED] appears to be contradictory in the time-period in question.

Based on the preponderance of evidence presented by the Department, I find it was more likely than not that the AP resided with the Appellant from [REDACTED] 2019 to [REDACTED] 2020. The Department is upheld.

### **DECISION**

The Appellant's appeal is DENIED.

  
Aimeleinda McLeod  
Hearing Officer

CC: Rachel Anderson, SSOM, New Haven  
Cheryl Stuart, SSOM, New Haven  
Lisa Wells, SSOM, New Haven  
Ferris Clare, Fair Hearing Liaison, New Haven

### **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.

### **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.