

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# ██████████

NOTICE OF DECISION

PARTY

██████████  
██████████  
██████████

PROCEDURAL BACKGROUND

On ██████████ 2020, the Department of Social Services (the “Department”) sent ██████████  
██████████ (the “Appellant”), a Notice of Action (“NOA”) discontinuing her Supplemental  
Nutrition Assistance Program (“SNAP”) benefits effective ██████████ 2021 due to excess  
income.

On ██████████ 2021, the Appellant requested an administrative hearing to contest the  
discontinuance of her SNAP benefits due to excess income.

On ██████████ 2021, the Office of Legal Counsel, Regulations, and Administrative  
Hearings (“OLCRAH”) issued a notice scheduling the administrative hearing for ██████████  
██████████ 2021.

On ██████████ 2021, 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, ██████████  
Department’s Representative, Rebecca Shah  
Hearing Officer, Joshua Couillard

**STATEMENT OF THE ISSUE**

The issue to be decided is whether the Department correctly discontinued the Appellant's SNAP benefits effective [REDACTED] 2021 due to excess income.

**FINDINGS OF FACT**

1. The Appellant's SNAP benefits were due for renewal by [REDACTED] 2020. The renewal was received timely. (Department's Testimony)
2. On [REDACTED], 2020, the Department waived the SNAP interview requirement for the Appellant. (Department's Testimony)
3. The Appellant's households consists of two people – herself [REDACTED] and her daughter [REDACTED]. (Appellant's Testimony, Exhibit 5: Notice of Renewal of Eligibility)
4. No one in the Appellant's home is disabled. (Appellant's Testimony)
5. The Appellant is employed with the [REDACTED]. She is paid bi-weekly. (Appellant's Testimony, Exhibit 3: Wage Stubs, Exhibit 4: Employer Letter, Exhibit 5)
6. The Appellant submitted three bi-weekly paystubs with the renewal. The dates and amounts were as follows:

<b>Pay Date</b>	<b>Gross Amount</b>
[REDACTED], 2020	\$765.00
[REDACTED], 2020	\$1,330.25
[REDACTED] 2020	\$1,147.50

(Exhibit 3)

7. The Appellant does not pay for Child Support for any children living outside the home or for any monthly medical expenses over \$35. (Appellant's Testimony)
8. The Appellant testified that she has a daycare expense of \$65 per week, however, she crossed out the dependent care expense section on the renewal and did not list any new expenses. (Exhibit 5, Department's Testimony, Appellant's Testimony)
9. The Appellant pays rent in the amount of \$930 per month. The Appellant is also responsible for her own utilities. (Appellant's Testimony)
10. On [REDACTED] 2020, the Department issued the Appellant a NOA discontinuing the SNAP benefits effective [REDACTED] 2021 due to excess income. (Exhibit 2: Notice of Action)

11. The issuance of this decision is timely under Connecticut General Statutes 17b-61(a), which requires that a decision be issued within 60 days of the request for an administrative hearing. The hearing request was received on [REDACTED] 2021; therefore, this decision is due no later than [REDACTED] 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 program in accordance with federal law.
2. *“General.* 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. The State agency must establish procedures for notifying households of expiration dates, providing application forms, scheduling interviews, and recertifying eligible households prior to the expiration of certification periods. Households must apply for recertification and comply with interview and verification requirements.” Title 7 of the Code of Federal Regulations (“C.F.R.”) § 273.14(a)

**The Department correctly issued the Appellant a W-1ER Renewal of Eligibility form. The Appellant’s SNAP certification period correctly ended on [REDACTED], 2020.**

3. *“Interview.* As part of the recertification process, the State agency must conduct an interview with a member of the household or its authorized representative at least once every 12 months for households certified for 12 months or less. The provisions of §273.2(e) also apply to interviews for recertification. The State agency may choose not to interview the household at interim recertifications within the 12-month period. The requirement for an interview once every 12 months may be waived in accordance with §273.2(e)(2).” 7 C.F.R. § 273.14(b)(3)
4. “The State agency may use a telephone interview instead of the face-to-face interview required in paragraph (e)(1) of this section for all applicant households, for specified categories of households, or on a case-by-case basis because of household hardship situations as determined by the State agency. The hardship conditions must include, but are not limited to, illness, transportation difficulties, care of a household member, hardships due to residency in a rural area, prolonged severe weather, or work or training hours that prevent the household from participating in an in-office interview. If a State agency has not already provided that a telephone interview will be used for a household, and that household meets the State agency's hardship criteria and requests to not have an in-office interview, the State agency must offer to the household to conduct the interview by telephone. The State agency may provide a home-based interview only if a household meets the hardship criteria and requests one. A State agency that

chooses to routinely interview households by telephone in lieu of the face-to-face interview must specify this choice in its State plan of operation and describe the types of households that will be routinely offered a telephone interview in lieu of a face-to-face interview. The State agency must grant a face-to-face interview to any household that requests one.” 7 C.F.R. 273.2 (e)(2)

5. Field Operations Communication dated [REDACTED], 2020 issued general guidance pertaining to a SNAP interview waiver. “As a result of the Continuing Resolution passed into law this week, and in response to the continued COVID-19 outbreak, FNS has re-authorized alternative procedures to conducting SNAP interviews effective [REDACTED] or later. The Department will **not** be required to interview SNAP households at initial application or recertification for the duration of the COVID-19 emergency, provided that **all** of the following conditions are met: (1) Identity has been verified; (2) The SNAP application or recertification is complete, not questionable and all information to establish eligibility is provided; (3) Mandatory verifications are provided, complete, and not questionable; (4) The household will be approved for continuing eligibility; (5)The household does not request an interview.”

**The Department incorrectly waived the SNAP interview. Per the Field Operations Communication dated [REDACTED] 2020, the interview should only be waived if the household will be approved for continuing eligibility. In this case, the household was discontinued, so an interview should have been completed.**

6. “Deductions shall be allowed only for the following household expenses: (4) Dependent care. Payments for dependent care when necessary for a household member to search for, accept or continue employment, comply with the employment and training requirements as specified under §273.7(e), or attend training or pursue education that is preparatory to employment, except as provided in §273.10(d)(1)(i). 7 C.F.R. § 273.9 (d)(4)

**By not completing an interview, the Department incorrectly determined that the Appellant has no dependent care expenses.**

7. Field Operations Communication dated [REDACTED], 2020 issued general guidance pertaining to the changes to the Shelter Hardship limit, effective [REDACTED], 2020: “Changes to SNAP that will be in effect as of [REDACTED] 2020 are: The maximum shelter hardship deduction will increase to \$586.00.”
8. “*Calculating net income and benefit levels—(1) Net monthly income.* (i) To determine a household's net monthly income, the State agency shall:

(A) Add the gross monthly income earned by all household members and the total monthly unearned income of all household members, minus income exclusions, to determine the household's total gross income. Net losses from the self-

employment income of a farmer shall be offset in accordance with §273.11(a)(2)(iii).

(B) Multiply the total gross monthly earned income by 20 percent and subtract that amount from the total gross income; or multiply the total gross monthly earned income by 80 percent and add that to the total monthly unearned income, minus income exclusions. If the State agency has chosen to treat legally obligated child support payments as an income exclusion in accordance with §273.9(c)(17), multiply the excluded earnings used to pay child support by 20 percent and subtract that amount from the total gross monthly income.

(C) Subtract the standard deduction.

(D) If the household is entitled to an excess medical deduction as provided in §273.9(d)(3), determine if total medical expenses exceed \$35. If so, subtract that portion which exceeds \$35.

(E) Subtract allowable monthly dependent care expenses, if any, as specified under §273.9(d)(4) for each dependent.

(F) If the State agency has chosen to treat legally obligated child support payments as a deduction rather than an exclusion in accordance with §273.9(d)(5), subtract allowable monthly child support payments in accordance with §273.9(d)(5).

(G) Subtract the homeless shelter deduction, if any, up to the maximum of \$143.

(H) Total the allowable shelter expenses to determine shelter costs, unless a deduction has been subtracted in accordance with paragraph (e)(1)(i)(G) of this section. Subtract from total shelter costs 50 percent of the household's monthly income after all the above deductions have been subtracted. The remaining amount, if any, is the excess shelter cost. If there is no excess shelter cost, the net monthly income has been determined. If there is excess shelter cost, compute the shelter deduction according to paragraph (e)(1)(i)(I) of this section.

(I) Subtract the excess shelter cost up to the maximum amount allowed for the area (unless the household is entitled to the full amount of its excess shelter expenses) from the household's monthly income after all other applicable deductions. Households not subject to a capped shelter expense shall have the full amount exceeding 50 percent of their net income subtracted. The household's net monthly income has been determined. ...

(2) *Eligibility and benefits.* (i)(A) Households which contain an elderly or disabled member as defined in §271.2, shall have their net income, as calculated in paragraph (e)(1) of this section (except for households considered destitute in accordance with paragraph (e)(3) of this section), compared to the monthly income eligibility standards defined in §273.9(a)(2) for the appropriate household size to determine eligibility for the month. ...

(ii)(A) Except as provided in paragraphs (a)(1), (e)(2)(iii) and (e)(2)(vi) of this section, the household's monthly allotment shall be equal to the maximum SNAP allotment for the household's size reduced by 30 percent of the household's net monthly income as calculated in paragraph (e)(1) of this section. If 30 percent of the household's net income ends in cents, the State agency shall round in one of the following ways:

(1) The State agency shall round the 30 percent of net income up to the nearest higher dollar; or

(2) The State agency shall not round the 30 percent of net income at all. Instead, after subtracting the 30 percent of net income from the appropriate Thrifty Food Plan, the State agency shall round the allotment down to the nearest lower dollar.

(B) If the calculation of benefits in accordance with paragraph (e)(2)(ii)(A) of this section for an initial month would yield an allotment of less than \$10 for the household, no benefits shall be issued to the household for the initial month. ...

(iii) For an eligible household with three or more members which is entitled to no benefits (except because of the proration requirements of paragraph (a)(1) and the provision precluding issuances of less than \$10 in an initial month of paragraph (e)(2)(ii)(B)) of this section:

(A) The State agency shall deny the household's application on the grounds that its net income exceeds the level at which benefits are issued. ...

(4) Thrifty Food Plan (TFP) and Maximum SNAP Allotments.

(i) Maximum SNAP allotment level. Maximum SNAP allotments shall be based on the TFP as defined in §271.2, and they shall be uniform by household size throughout the 48 contiguous States and the District of Columbia. ...

(ii) *Adjustment.* Effective October 1, 1996, the maximum SNAP allotments must be based on 100% of the cost of the TFP as defined in §271.2 of this chapter for the preceding June, rounded to the nearest lower dollar increment, except that on October 1, 1996, the allotments may not fall below those in effect on September 30, 1996." 7 C.F.R. § 273.10 (e)

**The Appellant's net income and benefit level cannot be determined because the Department must first determine if the Appellant has allowable dependent care expenses.**

**However, without an interview, the Department may have missed key deductions that the Appellant is eligible for.**

## DISCUSSION

The Department incorrectly waived the SNAP interview. Per the Field Operations Communications dated [REDACTED] 2020, a SNAP interview can only be waived if the household will be approved for continuing eligibility. The SNAP was discontinued effective [REDACTED], 2021 without an interview being completed.

During the hearing, the Appellant testified that she has a dependent care expense of \$65 per week. Without an interview, the Appellant was denied an opportunity to provide the Department with information regarding this expense.

If SNAP benefits were to be calculated using a dependent care expense, the Appellant may be eligible for a partial SNAP benefit.

## DECISION

The Appellant's appeal is **REMANDED** back to the Department.

## ORDER

The Department must take the following action. **Compliance is due by [REDACTED] 2021.**

1. Schedule a SNAP interview with the Appellant.
2. Determine the Appellant's monthly deductible expenses.
3. Recalculate SNAP benefits effective [REDACTED] 2021.

  
\_\_\_\_\_  
**Joshua Couillard**  
Fair Hearing Officer

**Pc. Rachel Anderson, New Haven Regional Office Operational Manager  
Cheryl Stuart, New Haven Regional Office Operational Manager  
Lisa Wells, New Haven Regional Office Operational Manager  
Rebecca Shah, New Haven Fair Hearing Liaison**

## **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 §4-1181a (a) of the Connecticut General Statutes.

Reconsideration requests should include specific grounds for the request: for example, indicate what error of fact or law, 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 with 45 days of the mailing of this decision, or 45 days after the agency denies 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, 53 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.