

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

Client ID # ██████████  
Request # ██████████

**NOTICE OF DECISION**

**PARTY**

██████████  
██████████  
██████████

**PROCEDURAL BACKGROUND**

On ██████████ 2020, the Department of Social Services (the “Department”) sent ██████████ (“the Appellant”) a notice of action (“NOA”) denying his application for benefits under the Supplemental Nutritional Assistance Program (“SNAP”).

On ██████████, 2021, the Appellant requested an administrative hearing to contest the Department’s decision to deny such benefits.

On ██████████, 2021, 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, 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:

██████████, the Appellant  
Jerrett Wyant , Eligibility Services Worker, Department’s Representative  
Roberta Gould, Hearing Officer

At the Department’s request the hearing record was held open for the submission of additional evidence. On ██████████ 2021, the hearing record closed.

## STATEMENT OF THE ISSUE

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

## FINDINGS OF FACT

1. On [REDACTED], 2020, the Appellant applied for SNAP benefits for himself, and his three children. (Exhibit 1: Case notes and Hearing summary)
2. On [REDACTED], 2020, the Department mailed the Appellant a *W-1348 Proofs We Need* form requesting verification of his current earnings and his last day worked/paid at [REDACTED]. This information was due by [REDACTED] 2020. (Exhibit 4: W-1348 dated [REDACTED] and Hearing summary)
3. On [REDACTED] 2020, the Appellant called the Department to complete the required telephone interview. He reported that he is employed with [REDACTED] as well as [REDACTED]. (Exhibit 1 and Hearing summary)
4. On [REDACTED] 2020, the Department mailed the Appellant two new *W-1348 Proofs We Need* forms requesting documentation of the last date worked and paid from [REDACTED] as well as his current wage information. This information was due by [REDACTED], 2020. (Exhibit 5: W-1348 dated [REDACTED], Exhibit 6: W-1348 dated [REDACTED] and Hearing summary)
5. On [REDACTED], 2020, the Appellant called the Department's regional office to inquire about the status of his SNAP application. The Department informed him that his application was still pending for verification of last day worked at [REDACTED] and current wage information. (Exhibit 1 and Hearing summary)
6. On [REDACTED], 2020, the Department issued the Appellant a notice informing him that his application for SNAP assistance was being denied because he did not return all of the required proofs by the date requested. (Exhibit 7: Notice of action dated [REDACTED] and Hearing summary)
7. On [REDACTED], 2020, the Department received verification that the Appellant's last day worked at [REDACTED] was [REDACTED], 2020, but it did not receive current wage documentation. (Exhibit 1 and Hearing summary)
8. On [REDACTED], 2020, the Department received documentation of the Appellant's current wages. (Exhibit 1 and Hearing summary)
9. On [REDACTED] 2021, the Department re-opened the Appellant SNAP application effective [REDACTED] 2021. (Exhibit 1, Exhibit 2: Eligibility determination results and Hearing summary)

10. On [REDACTED], 2021 the Department granted SNAP benefits effective [REDACTED] 2021, in the amount of \$312.00. (Exhibit 8: Benefit issuance results)
11. On [REDACTED], 2021, the Department issued addition SNAP benefits in the amount of \$470.00 for [REDACTED] 2021. (Exhibit 8 and Department's testimony)
12. On [REDACTED], 2020, the Department issued the Appellant SNAP benefits in the amount of \$680.00 for the full month of December because the requested documentation had been received on [REDACTED], 2020. (Exhibit 8 and Hearing summary)

### **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.
2. Title 7 of the Code of Federal Regulations ("CFR") § 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.
3. "The Department's uniform policy manual is the equivalent of a state regulation and, as such, carries the force of the law." (Bucchere v Rowe, 43 Conn. Supp. 175, 178 (1994) (citing Conn. Gen. Statute § 17b-10; Richard v. Commissioner of Income Maintenance, 214 Conn. 601, 573 A.2d 712 (1990))
4. Uniform Policy Manual ("UPM") § 1010.05(A)(1) provides, in part, that "the assistance unit must supply the Department in an accurate and timely manner as defined by the Department, all pertinent information and verification which the Department requires to determine eligibility and calculate the amount of benefits."  
  
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."
5. UPM § 1015.10(A) provides that "the Department must inform the assistance unit regarding the eligibility requirements of the programs administered by the Department, and regarding the unit's rights and responsibilities."

**The Department correctly informed the Appellant that documentation of his last day worked/paid as well as verification of his current earnings were required to complete his application for SNAP assistance and sent the Appellant three *W-1348 Proofs We Need* forms.**

6. UPM 1505.40(B)(1)(b)(2) provides that if the applicant failed to complete the application without good cause and if assistance cannot be granted: food stamp applications are denied on the thirtieth day following the date of application.

**On [REDACTED] 2020, the Department correctly denied the Appellant's application for SNAP benefits because he failed to provide the required documentations.**

7. UPM 1560.15(A) provides that for assistance units which fully cooperate in providing eligibility information, the beginning date of Food Stamp assistance is the date the Department receives a signed application, or the first day of a subsequent month in which all eligibility factors are met, if eligibility does not exist in the month of application, except for prerelease applicants.

**On [REDACTED] 2021, the Department correctly re-opened the Appellant's SNAP application for assistance, but incorrectly granted assistance effective [REDACTED] 2021.**

8. The Families First Coronavirus Responses Act of 2020 provides that the monthly "benefit amount will be the difference between what the household received (in that month) and what the maximum benefit amount is for their household size." It further states that "emergency benefits will allow the household's current monthly allotment to increase to the maximum allotment for a household of that size as follows:"

Household Size	Maximum Benefit Amount
1	\$204
2	\$374
3	\$535
4	\$680
5	\$807
6	\$969
7	\$1,071
8	\$1,224

**On [REDACTED], 2020, and [REDACTED], 2020, the Department correctly granted the Appellant a SNAP benefit of \$782.00, which is the maximum benefit for a household of four effective [REDACTED], 2021.**

**On [REDACTED], 2020, the Department correctly granted the Appellant the maximum SNAP benefit of \$680.00 for a household of four for December 2020.**

**DECISION**

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

  
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Roberta Gould  
Hearing Officer

PC: Patricia Ostroski, Social Services Operations Manager, DSS New Britain  
Jerrett Wyant, Eligibility Services Worker, DSS New Britain

### **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.