

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

██████████
██████████
Request # 172884

ADMINISTRATIVE DISQUALIFICATION HEARING
NOTICE OF DECISION
PARTY

██████████
██████████
██████████

PROCEDURAL BACKGROUND

The Department of Social Services (the "Department") requested an Administrative Disqualification Hearing ("ADH") to seek the disqualification of ██████████ (the "Defendant") from participating in the Supplemental Nutrition Assistance Program ("SNAP") for a period of one (1) year. The Department alleged that the Defendant committed an Intentional Program Violation ("IPV") by not reporting employment. The Department seeks to recover the overpaid SNAP benefits of \$1084.49. This is the Defendant's first IPV offense in the SNAP program.

██████████, 2021, the Office of Legal Counsel, Regulations, and Administrative Hearings ("OLCRAH") notified the Defendant of the initiation of the ADH process via certified mail. The notification outlined the Defendant's rights in these proceedings. The Notice stated that the hearing would be held on ██████████ 2021, and a decision rendered even if the Defendant or her representative failed to appear.

██████████ 2021, the Defendant signed the certified mail.

██████████, 2021, the OLCRAH conducted an Administrative Disqualification Hearing, in accordance with Title 7, section 273.16 of the Code of Federal Regulations ("C.F.R."), and section 17b-88 of the Connecticut General Statutes. The following individuals were present at the hearing:

Karen Agosto, Social Services Investigator, Department's Representative

Veronica King, Hearing Officer
The Defendant was not present.

STATEMENT OF THE ISSUE

The first issue to be decided is whether the Defendant committed an IPV of the SNAP program.

The second issue to be decided is whether the Department's proposal to recoup a SNAP overpayment is correct.

FINDINGS OF FACT

1. [REDACTED], 2018, the Department granted the Defendant's application for the SNAP benefits for herself only. The Defendant reported employment at [REDACTED] since [REDACTED] 2016. The Department granted SNAP benefits to the Defendant and mailed a Notice of Action explaining that she was granted SNAP benefits and her SNAP certification period ended on [REDACTED]/19. The notice also stated the programs reporting rules, how and when to report any changes that would affect the household's eligibility for the program and that she must report to the Department if her total monthly gross income is more than \$1,307.00. (Exhibit 2: Notice of Action [REDACTED]/18, Exhibit 3: Employment Verification and Hearing Record)
2. [REDACTED], 2018, the Defendant started employment at [REDACTED]. (Exhibit 3)
3. [REDACTED], 2018, the Defendant stopped to work at [REDACTED] and received a last paycheck on [REDACTED], 2018. (Exhibit 3)
4. [REDACTED], 2018, the Defendant signed a SNAP Periodic Review Form showing employment at [REDACTED] and biweekly earnings of \$642.01. She reported that she has read the PRF form and had no changes to report. The form states in part: "I understand there are penalties for hiding or giving false information... My answers on this form are complete and correct to the best of my knowledge..." (Exhibit 6: W-1054 Periodic Review Form and Hearing Record)
5. [REDACTED], 2019, the Department's investigations division received a Regional Office Client Fraud Referral stating that the Defendant had unreported earnings from [REDACTED]. (Hearing Record)
6. [REDACTED], 2020, the Department's investigator accessed the Department's eligibility system database and review the Defendant's case and notices. On [REDACTED] 2020, the Department's investigator accessed The Worker Number,

the employment, and wages verification system, and verified the Defendant started employment at [REDACTED] on [REDACTED], 2018 and received her first check on [REDACTED] 2018. (Exhibit 3 and Hearing Record)

7. After conducting an investigation, the Department determined that the Defendant was overpaid SNAP benefits from [REDACTED] 2018 through [REDACTED] 2019. (Hearing Record)
8. In the period of [REDACTED] 2018 through [REDACTED] 2019, the Defendant received \$192.00 per month in SNAP assistance as a maximum SNAP benefits for a household of one. (Exhibit 9: Benefit History Search)
9. In [REDACTED] 2019, \$67.51 was expunged from the Defendant's SNAP benefit account. This amount was omitted from the [REDACTED] 2019 overpayment. (Exhibit 10: Benefit Issuance Search, Exhibit 4: Recipient Transaction History and Hearing Record)
10. In [REDACTED] 2018, the Defendant's gross earnings from [REDACTED] equaled \$3,239.32. (Exhibit 3)
11. In [REDACTED] 2018, the Defendant's gross earnings equaled \$3,974.46 (\$3,797.76 from [REDACTED] + \$176.70 from [REDACTED]). (Exhibit 3)
12. In [REDACTED] 2018, the Defendant's gross earnings from [REDACTED] equaled \$3,269.39. (Exhibit 3)
13. In [REDACTED] 2019, the Defendant's gross earnings from [REDACTED] equaled \$2,021.18. (Exhibit 3)
14. In [REDACTED] 2019, the Defendant's gross earnings from [REDACTED] equaled \$2,316.50. (Exhibit 3)
15. In [REDACTED] 2019, the Defendant's gross earnings from [REDACTED] equaled \$2,660.10. (Exhibit 3)
16. [REDACTED], 2020, the Department's investigator calculated the Defendant's overpayments for the SNAP program as following:

| Month Year | Wages | Prev Benefit | New Benefit | SNAP Overpayment |
|------------------|---------|--------------|-------------|--------------------------------|
| [REDACTED]. 2018 | 3239.32 | 192 | 0 | 192 |
| [REDACTED]. 2018 | 3974.46 | 192 | 0 | 192 |
| [REDACTED]. 2018 | 3269.39 | 192 | 0 | 192 |
| [REDACTED] 2019 | 2021.18 | 192 | 0 | 192 |
| [REDACTED]. 2019 | 2316.50 | 192 | 0 | 192 |
| [REDACTED] 2019 | 2660.10 | 192 | 0 | 192 - \$67.51 (expungement) |

Total SNAP overpayment \$1,084.49

(Exhibit 7: W1216 SNAP computation sheet, Exhibit 12: W-262CF Report of Suspected Intentional Program Violation Overpayment)

17. On [REDACTED] 2021, the Department's investigator sent the Defendant a notice informing the Defendant that she broke the rules of the SNAP and received \$1084.49 more than she should have under the SNAP because she failed to report income from [REDACTED]. A prehearing interview letter ("W-1448") was enclosed instructing the Defendant to contact the investigator by telephone for a prehearing interview on [REDACTED] 2021 at 1:05pm to discuss the charges. Included in the mailing was a SNAP waiver of disqualification hearing ("W-1449"). (Exhibit 1: W-1449 Waiver of Disqualification Hearing and W-1448 Notice of Prehearing Interview)
18. The Defendant did not sign and return the W-1449 by the deadline. (Hearing Record)
19. The Defendant has no previous intentional program violations. (Hearing Record)
20. The Department is seeking to disqualify the Defendant from participating in the SNAP for a period of one year and recover \$1084.49 in overpaid SNAP benefits due to an Intentional Program Violation offense in the SNAP program. (Hearing Record)

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. Section 17b-88 of the Connecticut General Statutes authorizes the Commissioner of the Department of Social Services to recover any public assistance overpayment and take such other action as conforms to federal regulations, including, but not limited to, conducting administrative disqualification hearings.
3. Title 7 of the Code of Federal Regulations ("CFR") 273.16(e) provides that the State agency shall conduct administrative disqualification hearings for individuals accused of Intentional Program Violation.
4. Uniform Policy Manual ("UPM") § 7050 provides that in the Food Stamp program the Department conducts Administrative Disqualification Hearings in certain instances of alleged intentional recipient error as an alternative to referrals to the court system for prosecution. Individuals, who are determined

to have committed an intentional recipient error are subjected to recoupment requirements and, in some cases, are disqualified.

5. Uniform Policy Manual (“UPM”) Section 7050 outlines the Administrative Disqualification Hearing process.
6. UPM § 7050.25(D)(3) provides that if the assistance unit member or his or her representative cannot be located or fails to appear at a hearing without good cause, the hearing is conducted without the assistance unit member being represented.

The Defendant was not present at the hearing and did not provide good cause.

7. Title 7 CFR § 273.16(c) defines intentional Program violation as follows: For purposes of determining through administrative disqualification hearings whether or not a person has committed an intentional Program violation, intentional Program violations shall consist of having intentionally: (1) made a false or misleading statement, or misrepresented, concealed or withheld facts, or (2) committed any act that constitutes a violation of the Food Stamp Act, the Food Stamp Program Regulations, or any State statute relating to the use, presentation, transfer, acquisition, receipt, or possession of Food Stamp coupons, authorization cards or reusable documents used as part of an automated benefit delivery system (access device).
8. UPM § 7050.30 sets forth disqualification penalties and procedures as a result of an Intentional Program Violation.
9. Title 7 CFR § 273.16(e)(6) defines the criteria for determining intentional program as follows: The hearing authority shall base the determination of Intentional Program Violation on clear and convincing evidence which demonstrates that the household member(s) committed and intended to commit, an Intentional Program Violation.

The Department provided clear and convincing evidence that the Defendant committed and intended to commit an Intentional Program Violation when she withheld information regarding her employment and earned income gross income.

10. Title 7 CFR § 273.16 (a) (3)(b)(1)(i) states that an individual found to have committed an Intentional Program Violation shall be ineligible to participate in the Program for a period of twelve months for the first Intentional Program violation
11. UPM § 7050.30B 2 b (1) (a) provides that if an intentional recipient error occurred after August 1, 1984 and the court order does not specify a period of

disqualification, the Department determines that for the first offense, the length of the disqualification is one year.

The Department is correct to seek the disqualification of the Defendant from the SNAP program for a period of one year.

12. UPM § 1570.05 (A)(H)(1) set forth the fair hearing request process and states in part that the request for a Fair Hearing must be made within a specified period of time from the date that the Department mails a notice of action.
 - a. For all programs except Food Stamps, this period is 60 days.
 - b. For the Food Stamp program, this period is 90 days.

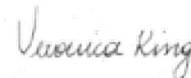
13. Title 7 CFR § 273.16 (b) (12) provides that even though the individual is disqualified, the household, as defined in § 273.1, is responsible for making restitution for the amount of any overpayment. All intentional Program violation claims must be established and collected in accordance with the procedures set forth in § 273.18.

The Department is correct to seek recoupment from the Defendant of \$1084.49 the overpaid SNAP benefits from the Defendant.

DECISION

The Defendant is guilty of committing a first offense intentional program violation of the SNAP. She is disqualified from the program for a period of one year and must make restitution of the amount of the overpayment.

The Department is authorized to seek recovery of the \$1084.49 in SNAP benefits that the Defendant received as the result of an IPV.



Veronica King
Hearing Officer

Pc: OLCRAH.QA.DSS@ct.gov
Karen Agosto, DSS Investigator

RIGHT TO APPEAL

The defendant has the right to appeal this decision to Superior Court within 45 days of the mailing of this decision. 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. 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 his 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 defendant resides.