

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 # 177859

NOTICE OF DECISION

PARTY

██████████
██████████
██████████

PROCEDURAL BACKGROUND

██████████, 2021, the Department of Social Services (the "Department") issued a notice of action to ██████████ (the "Appellant") discontinuing her Supplemental Nutrition Assistance Program ("SNAP") benefits ██████████, 2021.

██████████ 2021, the Appellant requested an administrative hearing to contest the Department's action.

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

██████████ 2021, in accordance with sections 17b-60, 17b-61, and 4-176e to 4-184, inclusive, of the Connecticut General Statutes, OLCRAH held an administrative hearing.

The following individuals participated in the hearing:

██████████, Appellant
Farris Clare, Department's Representative
Veronica King, Hearing Officer

STATEMENT OF THE ISSUE

The issue to be decided is whether the Department correctly discontinued the Appellant's SNAP benefits.

FINDINGS OF FACT

1. The Appellant was receiving SNAP benefits for a household of one. The SNAP certification period ended on [REDACTED], 2021. (Hearing Record)
2. [REDACTED], 2021, the Appellant submitted a SNAP renewal form to the Department. The Appellant is [REDACTED] ears old, lives by herself and works for [REDACTED] [REDACTED]". She submitted three pay stubs, dated for [REDACTED]/21, [REDACTED] 21, and [REDACTED]/21. (Exhibit 1: Case Notes and Hearing Record)
3. [REDACTED] 2021, the Department sent a W1348 Proof We Need form ("W1348"), requesting pay stub dated [REDACTED] 21, or verification of last day of work, and requested the Appellant to call the Benefit Center to complete a SNAP telephone interview. (Exhibit 2: W1348, [REDACTED]/21)
4. [REDACTED] 2021, the Appellant called the Department and completed the required SNAP redetermination interview. The Appellant reported that she earns \$1,117.35 biweekly. (Exhibit 1 and Hearing Record)
5. The Appellant reported she pays \$667 per month in rent and is responsible for all utilities. She did not report any out-of-pocket medical, daycare, nor child support expenses. (Exhibit 1, Hearing Record and Appellant's Testimony)
6. [REDACTED], 2021, based on the reported information, the Department determined that the Appellant had a total monthly income of \$2,402.30 ($\$1,117.35 * 2.15$) (Exhibit 3: NOA, [REDACTED]/21 and Hearing Record)
7. [REDACTED] 2021, the Department sent a NOA to the Applicant discontinuing her SNAP benefits effective [REDACTED] 21. The notice stated that the total monthly net income of her household is more than the limit for the program. (Exhibit 3)
8. The issuance of this decision is timely under Title 7 of the Code of Federal Regulations § 273.15 (c) (1) which provides that within 60 days of receipt of a request for a fair hearing, the State agency shall assure that the hearing is conducted, a decision is reached, and the household and local agency is notified of the decision. The Appellant requested an administrative hearing on [REDACTED] 2021; therefore, this decision is due no later than [REDACTED] 2021. (Hearing Record)

CONCLUSIONS OF LAW

1. Connecticut General Statutes § 17b-2 provides that the Department of Social Services is designated as the state agency for the administration of (7) the supplemental nutrition assistance program pursuant to the Food and Nutrition Act of 2008.
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.

The Department correctly reevaluated the Appellant’s eligibility for benefits under the SNAP at recertification time.

3. The Department’s Uniform Policy Manual (“UPM”) is the equivalent of 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. 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 units rights and responsibilities.

The Department correctly issued to the Appellant the W-1348 Proofs We Need form, informing the Appellant what she needed to provide to establish eligibility for the SNAP.

5. 7 C.F.R. § 273.9 (a) provides that participation in the Program shall be limited to those households whose income 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)).
6. UPM § 5000.01 provides for definitions and stated in part that, an elderly person, in the context used by the Food Stamp program, means a person who is sixty or more years of age.

The Department correctly determined the Appellant's SNAP household must meet the net income eligibility standard.

7. UPM § 5005(A)(1) provides in relevant part the Department counts the assistance units available income, and that income is considered available if it is received directly by the assistance unit.
8. 7 C.F.R. § 273.10 (c) (2) (i) provides for converting income into monthly amounts. Income anticipated during the certification period shall be counted as income only in the month it is expected to be received unless the income is averaged. Whenever a full month's income is anticipated but is received on a weekly or biweekly basis, the State agency shall convert the income to a monthly amount by multiplying weekly amounts by 4.3 and biweekly amounts by 2.15, use the State Agency's PA conversion standard, or use the exact monthly figure if it can be anticipated for each month of the certification period. Nonrecurring lump sum payments shall be counted as a resource starting in the month received and shall not be counted as income.

■ ■ ■ 2021, the Department correctly determined the Appellant's monthly earned income was \$2,402.30 (\$1,117.35 * 2.15).

9. 7 C.F.R. § 273.9(d) provides for income deductions. (2) Earned income deduction. Twenty percent of gross earned income as defined in paragraph (b)(1) of this section. Earnings excluded in paragraph (c) of this section shall not be included in gross earned income for purposes of computing the earned income deduction, except that the State agency must count any earnings used to pay child support that were excluded from the household's income in accordance with the child support exclusion in paragraph (c)(17) of this section.
10. UPM § 5045.15 (A) (3) provides the monthly net earned income is calculated by reducing monthly earnings by a deduction of 20% of the gross earnings for personal employment expenses.
11. UPM § 5045.15 (C) provides that the amount of applied income is calculated by reducing the combined total of net earnings, gross unearned income and deemed income by the following in the order presented:
 1. a deduction for farming losses, if any;
 2. a disregard of \$167.00 per month for a household of one. {effective ■ 21}
 3. a deduction for unearned income to be used to fulfill a bona-fide plan to achieve self-support (PASS); Cross reference: 5035.15
 4. the appropriate deduction for work-related dependent care expenses;
 5. deduction for allowable medical expenses for those assistance unit members who qualify;
 6. a deduction for legally obligated child support when it is paid for a child who is not a member of the assistance unit;

7. a deduction for shelter hardship, if applicable.

(Cross References: 5030 - "Income Disregards" and 5035 "Income Deductions")

12. UPM § 5045.15 (D) provides the remaining amount after the disregards and deductions are subtracted is the amount of the unit's applied income.

The Department correctly deducted 20% (\$480.46) of the household's gross monthly-earned income of \$2,402.30 to arrive at \$1,921.84 Adjusted Earned Income (\$2,402.30 - \$480.46).

The Department correctly applied the \$167.00 standard deduction to the Applicant's SNAP household adjusted monthly income of \$1,921.84 to arrive at \$1,754.84 (\$1,921.84 - \$167).

- 13.7 C.F.R. § CFR § 273.9(a)(1) provides that the net income eligibility standard for the Food Stamp Program for the 48 contiguous states shall be the Federal income poverty level for those states.

The Food Stamp Applied Income Limit ("FSAIL") is equal to the 100% of the FPL.

100% of the FPL for a household of one person is currently \$1,064.00.

The Appellant was ineligible for SNAP because on [REDACTED] 2021, her applied income of \$1,754.84, exceeds the FSAIL for a household of one person of \$1,064.00.

[REDACTED], 2021, based on the information provided by the Appellant, the Department correctly discontinued the Appellant's SNAP benefits because her net applied income exceeds the limit for the program.

DISCUSSION

The Department determined the Applicant's eligibility for the SNAP benefits based on the information given by the Appellant at redetermination time. At the [REDACTED], 2021 hearing, the Appellant provided new information regarding her earnings and that she works at the school system and she is not eligible to collect unemployment when the schools are closed. Although the Department did not request more information regarding the Appellant's earnings it is clear, based on the information given by the Appellant, that on [REDACTED] 2021, the Department correctly determined that the SNAP household was over the net income limit for the SNAP.

The Appellant was encouraged to reapply for the SNAP and provide all necessary information and verification regarding her income.

DECISION

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

Veronica King

Veronica King
Hearing Officer

Pc: Rachel Anderson, Mathew Kalarickal, Lisa Wells, DSS Operations Manager, RO# 20 New Haven.
Ferris Clare, DSS Fair Hearing Liaison, RO# 20 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.