

STATE OF CONNECTICUT
DEPARTMENT OF SOCIAL SERVICES
OFFICE OF LEGAL COUNSEL, REGULATIONS, AND ADMINISTRATIVE HEARINGS
25 SIGOURNEY STREET
HARTFORD, CT 06106-5033

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

Case # ██████████
Client # ██████████
Request # 183693

NOTICE OF DECISION

PARTY

██████████
██████████
██████████

PROCEDURAL BACKGROUND

On ██████████, 2021, the Department of Social Services (the “Department”) sent ██████████ (the “Appellant”) a Notice of Action (“NOA”) discontinuing the Supplemental Nutrition Assistance program (“SNAP”) benefits effective ██████████ 2021.

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

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, 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:

██████████, Appellant
██████████ Appellant’s son
Mary Sblendorio, Department Representative
Almelinda McLeod, Hearing Officer

On ██████████ 2021 the hearing record was closed.

STATEMENT OF THE ISSUE

The issue to be decided is whether the Department's decision to discontinue the Appellant's SNAP benefits for failure to complete a redetermination is correct.

FINDINGS OF FACT

1. The Appellant's SNAP certification period was to expire [REDACTED], 2021. (Hearing record)
2. On [REDACTED] 2021, the Department issued a renewal application to the Appellant for the SNAP program. (Exhibit 3A, Search results)
3. On [REDACTED] 2021, the Department received and processed the Appellant's online renewal for the SNAP program. The renewal showed rent at \$221.00 per month, Appellant's son as a student and Child support (arrears) as income. The Department averaged the 3 months child support income as \$836.02 per month. Internal interface checks conducted which found employment. (Exhibit 3B, Case Notes)
4. On [REDACTED] 2021, the Department issued a W-1348 Proofs We Need form requesting verifications of gross earnings or verification of last day worked with [REDACTED], [REDACTED], [REDACTED], [REDACTED], [REDACTED] school verification and verification of residence. The due date for the requested verifications was due by [REDACTED] 2021. (Exhibit 1- W-1348)
5. On [REDACTED] [REDACTED], 2021, the Department received a screen shot referencing a last working date as [REDACTED], 2021 and listed checks dated [REDACTED] [REDACTED], [REDACTED] and last check issued was [REDACTED]. The source of this information was not noted. Neither did the Appellant's name nor her son's name appear anywhere on this screen shot. (Exhibit2, Employer letter)
6. On [REDACTED] 2021, the Department determined that the information submitted was unclear and therefore not accepted. No other requested verifications were received prior to the due date. (Department testimony)
7. On [REDACTED] 2021, the Department issued a NOA notifying the Appellant the SNAP benefit closed effective [REDACTED] [REDACTED] 2021 because the renewal was not completed, there are no household members eligible for this program and does not meet program requirements. (Exhibit 4, NOA)

8. The Appellant admittedly did not send in all the requested verifications by the due date stating that with COVID, everything takes longer. She spoke with a gentleman at the Department who advised what was needed to be sent in. (Appellant testimony)
9. The issuance of this decision is timely under the Code of Federal Regulations § 273.15 which states that a decision must be reached, and the household notified within 60 days of receipt of a request for a fair hearing. The Appellant requested an administrative hearing on [REDACTED] [REDACTED] 2021 therefore, this decision is due no later than [REDACTED] 2021 and is timely.

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. "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)).
3. Title 7 of the Code of Federal Regulations ("CFR") § 273.14(a) provides that 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.
4. UPM § 1545.15 (A) (1) provides the Department is required to provide assistance units with timely notification of the required redetermination.
5. **The Department correctly notified the Appellant that the renewal process and all required proofs must be completed and recertified prior to the expiration of SNAP certification period which was to expire [REDACTED] 2021.**
6. **The Department correctly determined that SNAP determination of eligibility for a new period was not established beyond the expiration of the certification period.**

7. UPM § 1545.35 (A) (2) provides that the following must be timely completed to receive uninterrupted benefits. a. The redetermination form must be filed and completed, and b. The office interview must be completed, unless exempt from the requirement; and c. Required verification of factors that are conditions of eligibility must be provided.
8. UPM § 1545.40 (B) (2) (a) provides eligibility for the FS program is discontinued at the end of the redetermination period in all situations where the redetermination is incomplete and assistance unit has not been recertified.
9. UPM § 1545.40 (B) (2) (b) provides that discontinuance is automatic regardless of the reason for the incomplete redetermination.
10. UPM § 1545.40 (B) (2) (c) provides that good cause is not a consideration in the FS program.
11. UPM § 1545.40 (A) (2) provides that unless otherwise stated, assistance is discontinued on the last day of the redetermination month if eligibility is not reestablished through the redetermination process.
- 12. The Department correctly discontinued the Appellant's SNAP benefits effective [REDACTED] 2021 because the Department did not receive the required verifications needed to establish eligibility prior to the end of the Appellant's certification period. The Department is affirmed.**

DISCUSSION

A document search conducted by the Department on [REDACTED], 2021; the date of this hearing found that the Appellant submitted some of the missing documents on [REDACTED] 2021. The Appellant is encouraged to re-apply for SNAP assistance.

DECISION

The Appellant's appeal is DENIED.

Almelinda McLeod

Almelinda McLeod
Hearing Officer

CC: Rachel Anderson, SSOM, New Haven
Mathew Kalarickal, SSOM New Haven
Lisa Wells, SSOM New Haven
Debra James, 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 § 4-181a (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.