

STATE OF CONNECTICUT
DEPARTMENT OF SOCIAL SERVICES
OFFICE OF LEGAL COUNSEL, REGULATIONS, AND ADMINISTRATIVE
HEARINGS
55 FARMINGTON AVENUE
HARTFORD, CT 06105-3725

██████████, 2022
SIGNATURE CONFIRMATION

CASE # ██████████
CLIENT ID # ██████████
REQUEST# ██████████

NOTICE OF DECISION

PARTY

██████████
██████████
██████████
████████████████████

PROCEDURAL BACKGROUND

On ██████████ 2021, the Department of Social Services (the “Department”) issued a Notice of Action (“NOA”) to ██████████ (the “Appellant”) informing her that her Supplemental Nutritional Assistance Program (“SNAP”) benefits would be discontinued effective ██████████ 2022.

On ██████████, 2021, the Appellant requested an administrative hearing to appeal the Department’s decision to discontinue her SNAP.

On ██████████ 2022, the Office of Legal Counsel, Regulations, and Administrative Hearings (“OLCRAH”) issued a notice scheduling the administrative hearing for ██████████ 2022.

On ██████████, 2022, the OLCRAH issued a notice rescheduling the administrative hearing (per Appellant request) for ██████████, 2022.

On ██████████, 2022, 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 hearing was held telephonically at the Appellant’s request. The following individuals participated in the hearing:

██████████, Appellant
Jacqueline Taft, Department's representative
Joseph Alexander, Administrative Hearing Officer

STATEMENT OF THE ISSUE

The issue to be decided is whether the Department correctly discontinued the Appellant's SNAP effective ██████████ 2022, for failing to provide information needed to establish ongoing eligibility.

FINDINGS OF FACT

1. The Appellant's household consist of six persons; Appellant herself, Appellant's four minor children and Appellant's grandmother. These individuals reside at ██████████. (Appellant testimony).
3. On ██████████, 2021, the Department received a complaint on its fraud hotline claiming that the Appellant was receiving SNAP from the state of ██████████ and that ██████████ ("LLR"), the father of one of the Appellant's minor children was residing in the home with the Appellant and her children located at ██████████ (Dept. Ex. 3: Case Notes)
4. On ██████████ 2021, a representative of the Department's Investigation's Unit contacted the Appellant in response to the fraud hotline complaint received on ██████████, 2021. The following information was reported by the Appellant to the investigator: (Dept. Ex. 3: Case Notes)
 - The LLR resides at ██████████
 - LLR last lived at ██████████ 2020
 - Appellant is in the process of divorcing spouse ██████████ ("Appellant spouse")
 - Appellant spouse pays the Appellant's rent and expenses for the property the Appellant lives (address not specified) which is owned by "the 2nd baby's father" (unspecified individual)
 - Appellant received SNAP in ██████████ and requested her benefits be discontinued prior to moving to ██████████
5. On ██████████ 2021, the investigator went to both ██████████ and ██████████ claims but no one answered the door at either property. (Dept. Ex. 3: Case Notes)

6. On [REDACTED], 2021, the investigator determined the LLR resides with the Appellant and the minor children thus the LLR would need to be added to the Appellant's SNAP benefit based on the following: (Dept. Ex. 3: Case Notes, Dept. Ex. 4: AT&T Account Summary)
 - Per Vision Appraisal, the LLR owns the property located at [REDACTED]
 - Per CT Department of Motor Vehicle license and registration records, the LLR resides at [REDACTED]
 - Department of Labor search shows LLR receiving wages from the [REDACTED]
 - The Appellant submitted an AT&T Account Summary dated [REDACTED] 2021, displaying her name and address [REDACTED]
 - The Appellant provided bills (unspecified) displaying a [REDACTED] address (the investigator assumed could be the LLR's mother's address)
7. On [REDACTED], 2021, the Department issued a W-1348M Worker Generated Request for Proofs form requesting the Appellant provide a copy of the LLR's birth certificate and social security card by [REDACTED], 2021. (Dept. Ex. 1: Worker Generated Request for Proofs)
8. The Department did not receive the information requested on [REDACTED] 2021. (Department Testimony, Appellant Testimony)
9. On [REDACTED] 2021, the Department issued a Notice of Action notifying the Appellant that her SNAP benefit would be discontinued effective [REDACTED] 2022, for the following reasons: (Dept. Ex. 2: Notice of Action)
 - No household members are eligible for this program
 - Individual did not provide information, report changes, or meet the requirements necessary to determine eligibility
 - Does not meet program requirements
10. The issuance of this decision is timely under Connecticut General Statutes 17b-61(a), which requires that a decision be issued within [REDACTED] days of the request for an Administrative Hearing. The hearing request was received on [REDACTED] 2021. The hearing originally scheduled for [REDACTED], 2022, was rescheduled to February [REDACTED], 2022, adding an additional [REDACTED] days to the due date of this decision. Therefore, this decision is due no later than [REDACTED] 2022.

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. Title 7 of the Code of Federal Regulations (“CFR”) Sec. 273.9(a) provides, in relevant part, as follows:

Participation in the Program shall be limited to those households whose incomes are determined to be a substantial limiting factor in permitting them to obtain a more nutritious diet. Household’s which contain an elderly or disabled member shall meet the net income eligibility standards for the Food Stamp Program. Household’s 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 which are categorically eligible are 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 Federal income poverty levels established as provided in §673(2) of the Community Services Block Grant Act (42 U.S.C. 9902(2))

3. 7 CFR § 273.12(a)(5)(vi) & (c) provides for action on interim changes which are defined as changes that become known outside of application, Periodic Report Form (“PFR”), or renewal.

The date a change becomes known is the date:

- The EDG reports the change by:
 - In-person
 - Mail
 - Online through ConneCT, or
 - Phone
- The information regarding an EDG change is received from other sources

The Department is instructed to review the change within 10 days of the date the change becomes known to determine the appropriate actions to take for:

- Benefit increases
- Benefit decreases/Case closures
- Unclear Information

4. 7 CFR § 273.12(c)(3) instructs the Department on how to handle “unclear information” which is defined as information about an Eligibility Determination Group’s (“EDG”) circumstances which is not clear enough to determine the effect on the EDG’s eligibility or benefit amounts. The information may come from a third party of from the EDG.

5. 7 CFR § 273.2 (f) defines verification as the use of documentation or contact with a third party to confirm the accuracy of statements or information. The State agency must give households at least 10 days to provide the required verification.

The Department failed to verify the unclear information reported by a third party concerning the Appellant's residential address/household composition.

DISCUSSION:

Based on the evidence presented by the Department, it appears the Department came to the determination the LLR was residing with the Appellant and her children without completing a successful home visit to verify the household composition at any of the following residential addresses; [REDACTED]

[REDACTED]

In addition, the Appellant provided an AT&T Account Summary statement to the Department on [REDACTED] 2021 (Finding of Fact #6) displaying the [REDACTED] address she claims to reside at (Finding of Fact #1).

It is clear from the reasons listed in this discussion that the Department failed to verify unclear information from a third-party source. The Department failed to act on the information submitted by the Appellant (AT&T Account Summary / bills displaying [REDACTED] address) before discontinuing her SNAP benefit effective [REDACTED] 2022.

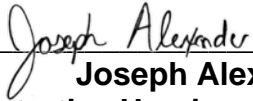
The information requested by the Department on [REDACTED] 2021, was in response to the unverified, unclear information.

DECISION

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

ORDER

1. The Department shall rescreen SNAP effective [REDACTED] 2022.
2. The Department shall attempt to verify the Appellant's household composition at [REDACTED]
3. The Department shall review the Appellant's SNAP eligibility effective [REDACTED], 2022, and take the appropriate action (approval/denial/request additional information) based on the verification of household composition.
4. Compliance with this order due to the undersigned by [REDACTED] 2022.



Joseph Alexander
Administrative Hearing Officer

CC: Rachel Anderson, Operations Manager, DSS, New Haven Regional Office
Mathew Kalarickal, Operations Manager, DSS, New Haven Regional Office
Lisa Wells, Operations Manager, DSS, New Haven Regional Office
Jaqueline Taft, Administrative Hearing Liaison, DSS, New Haven Regional Office

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.