

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

[REDACTED]  
**SIGNATURE CONFIRMATION**

**CASE #** [REDACTED]  
**CLIENT#** [REDACTED]  
**REQUEST# 192192**

**NOTICE OF DECISION**

**PARTY**

[REDACTED]  
[REDACTED]  
[REDACTED]

**PROCEDURAL BACKGROUND**

On [REDACTED], the Department of Social Services (the "Department") issued [REDACTED] [REDACTED] (the "Appellant"), a Notice of Action advising the Appellant of her eligibility for benefits under the Supplemental Nutrition Assistance Program ("SNAP") in the amount of \$20.00 per month.

On [REDACTED], the Appellant requested an administrative hearing because she disagrees with the amount of her SNAP benefits.

On [REDACTED], the Office of Legal Counsel, Regulations, and Administrative Hearings ("OLCRAH") issued a notice scheduling the administrative hearing for [REDACTED]  
[REDACTED]

On [REDACTED], in accordance with sections 17b-60, 17b-61 and 4-176e to 4-189 inclusive, of the Connecticut General Statutes, OLCRAH held a telephonic administrative hearing. The following individuals participated in the hearing:

[REDACTED], Appellant  
Javier Rivera, Department's Representative  
Sara Hart, Hearing Officer

**STATEMENT OF THE ISSUE**

The issue is whether the Department correctly calculated the Appellant's SNAP benefit amount.

### **FINDINGS OF FACT**

1. The Appellant is a recipient of SNAP benefits for herself as a household of one. The Department certified her SNAP benefits for the period of [REDACTED], through [REDACTED]. *(Department's Testimony, Exhibit 7: NOA 03/14/2022)*
2. The Appellant is 79 years old (DOB [REDACTED]). She has not been determined disabled by the Social Security Administration. *(Appellant's Testimony)*
3. The Appellant receives a gross Social Security benefit of \$1641.00 per month. *(Exhibit 2: SOLQ-I Results, Appellant's Testimony)*
4. The Appellant owns her home and does not pay a mortgage. She pays property taxes of \$4032.88 per year and homeowner's insurance of \$141.00 per month. She pays separate heating and cooling costs. *(Appellant's Testimony, Exhibit 5: Online SNAP Application)*
5. The Appellant does not have recurring medical expenses totaling more than \$35.00 per month. She is a recipient of the Medicare Savings Program. *(Exhibit 2, Appellant's Testimony)*
6. On [REDACTED], the Department issued a NOA to the Appellant approving her SNAP benefits in the amount of \$20.00 per month for [REDACTED] and ongoing. *(Exhibit 7)*
7. The issuance of this decision is timely under Title 7 of the Code of Federal Regulations ("C.F.R.") § 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]; therefore, this decision is due no later than [REDACTED]. *(Hearing Record)*

### **CONCLUSIONS OF LAW**

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

**The Department has the authority to review the Appellant's SNAP eligibility and determine benefit amounts.**

2. Title 7 C.F.R. § 273.1(a) provides for household concept and states that a household is composed of one of the following individuals or groups of individuals, unless otherwise specified in paragraph (b) of this section:

(1) An individual living alone;

**The Department correctly determined Appellant's household size of one member.**

3. 7 C.F.R. § 271.2 states that *Elderly or disabled member* means a member of a household who: (1) Is 60 years of age or older;

**The Department correctly determined that the Appellant meets the definition of elderly for purposes of SNAP eligibility.**

4. 7 C.F.R. § 273.9(b) states that household income shall mean all income from whatever source excluding only items specified in paragraph (c) of this section.

7 C.F.R. § 273.9(b)(2)(ii) provides as follows: Unearned income shall include but not be limited to Annuities; pensions; retirement, veteran's, or disability benefits; worker's or unemployment compensation including any amounts deducted to repay claims for intentional program violations as provided in §272.12; old-age, survivors, or social security benefits; strike benefits; foster care payments for children or adults who are considered members of the household; gross income minus the cost of doing business derived from rental property in which a household member is not actively engaged in the management of the property at least 20 hours a week.

**The Department correctly determined the Appellant's Social Security as unearned income in the calculation of SNAP benefits.**

5. 7 C.F.R. § 273.10(c)(1)(ii) provides in part that income received during the past 30 days shall be used as an indicator of the income that is and will be available to the household during the certification period.

**The Department correctly determined the Appellant's total monthly income equals \$1641.00.**

6. 7 C.F.R. § 273.9(d)(1)(i) provides for the standard deduction. *48 States, District of Columbia, Alaska, Hawaii, and the Virgin Islands*. Effective October 1, 2002, in the 48 States and the District of Columbia, Alaska, Hawaii, and the Virgin Islands, the standard deduction for household sizes one through six shall be equal to 8.31 percent of the monthly net income eligibility standard for each household size established under paragraph (a)(2) of this section rounded up to the nearest whole dollar. For household sizes greater than six, the standard deduction shall be equal to the standard deduction for a six-person household.

**The Department correctly determined the Appellant eligible for the \$177.00 standard deduction.**

7. 7 C.F.R. § 273.9(d)(6)(ii) provides the following: *Excess shelter deduction*. Monthly shelter expenses in excess of 50 percent of the household's income after all other deductions in paragraphs (d)(1) through (d)(5) of this section have been allowed. If the household does not contain an elderly or disabled member, as defined in § 271.2 of this chapter, the shelter deduction cannot exceed the maximum shelter deduction limit established for the area. For fiscal year 2001, effective March 1, 2001, the maximum monthly excess shelter expense deduction limits are \$340 for the 48 contiguous States and the District of Columbia, \$543 for Alaska, \$458 for Hawaii, \$399 for Guam, and \$268 for the Virgin Islands. FNS will set the maximum monthly excess shelter expense deduction limits for fiscal year 2002 and future years by adjusting the previous year's limits to reflect changes in the shelter component and the fuels and utilities component of the Consumer Price Index for All Urban Consumers for the 12 month period ending the previous November 30. FNS will notify State agencies of the amount of the limit. Only the following expenses are allowable shelter expenses:

- (A) Continuing charges for the shelter occupied by the household, including rent, mortgage, condo and association fees, or other continuing charges leading to the ownership of the shelter such as loan repayments for the purchase of a mobile home, including interest on such payments.
- (B) Property taxes, State and local assessments, and insurance on the structure itself, but not separate costs for insuring furniture or personal belongings.
- (C) The cost of fuel for heating; cooling (i.e., the operation of air conditioning systems or room air conditioners); electricity or fuel used for purposes other than heating or cooling; water; sewerage; well installation and maintenance; septic tank system installation and maintenance; garbage and trash collection; all service fees required to provide service for one telephone, including, but not limited to, basic service fees, wire maintenance fees, subscriber line charges, relay center surcharges, 911 fees, and taxes; and fees charged by the utility provider for initial installation of the utility. One-time deposits cannot be included.
- (D) The shelter costs for the home if temporarily not occupied by the household because of employment or training away from home, illness, or abandonment caused by a natural disaster or casualty loss. For costs of a home vacated by the household to be included in the household's shelter costs, the household must intend to return to the home; the current occupants of the home, if any, must not be claiming

the shelter costs for SNAP purposes; and the home must not be leased or rented during the absence of the household.

- (E) Charges for the repair of the home which was substantially damaged or destroyed due to a natural disaster such as a fire or flood. Shelter costs shall not include charges for repair of the home that have been or will be reimbursed by private or public relief agencies, insurance companies, or from any other source.

**The Appellant does not pay a mortgage and does not incur a continuing charge for ownership of her home. The Department correctly considered the Appellant's property taxes and correctly determined a monthly amount of \$336.07 (\$4032.88/12 months); however, it failed to consider the Appellant's homeowner's insurance in the determination of her excess shelter deductions.**

- 8. 7 C.F.R § 273.9(d)(6)(iii) provides in relevant part for the following: *Standard utility allowances*. (A) With FNS approval, a State agency may develop the following standard utility allowances (standards) to be used in place of actual costs in determining a household's excess shelter deduction: an individual standard for each type of utility expense; a standard utility allowance for all utilities that includes heating or cooling costs (HCSUA);

**The Department correctly determined the Appellant is entitled to the SUA, which is \$783.00, effective [REDACTED].**

- 9. 7 C.F.R. § 273.9(d)(3) provides the following: *Excess medical deduction*. That portion of medical expenses in excess of \$35 per month, excluding special diets, incurred by any household member who is elderly or disabled as defined in §271.2. Spouses or other persons receiving benefits as a dependent of the SSI or disability and blindness recipient are not eligible to receive this deduction but persons receiving emergency SSI benefits based on presumptive eligibility are eligible for this deduction.

**The Department correctly determined the Appellant does not have any allowable excess medical deductions.**

- 10. 7 C.F.R. § 273.10(e)(1)(i) provides the following: *Calculating net income and benefit levels-(1) Net monthly income*. To determine a household's net monthly income, the State agency shall:

- A. Add the gross monthly income earned by all household members and the total monthly unearned income of all household members, minus income exclusions, to determine the household's total gross income. Net losses from the self-employment income of a farmer shall be offset in accordance with §273.11(a)(2)(iii).

- B. Multiply the total gross monthly earned income by 20 percent and subtract that amount from the total gross income; or multiply the total gross monthly earned income by 80 percent and add that to the total monthly unearned income, minus income exclusions. If the State agency has chosen to treat legally obligated child support payments as an income exclusion in accordance with §273.9(c)(17), multiply the excluded earnings used to pay child support by 20 percent and subtract that amount from the total gross monthly income.
- C. Subtract the standard deduction.
- D. If the household is entitled to an excess medical deduction as provided in §273.9(d)(3), determine if total medical expenses exceed \$35. If so, subtract that portion which exceeds \$35.
- E. Subtract allowable monthly dependent care expenses if, any, as specified under § 273.9(d)(4) for each dependent.
- F. If the State agency has chosen to treat legally obligated child support payments as a deduction rather than an exclusion in accordance with § 273.9(d)(5), subtract allowable monthly child support payments in accordance with § 273.9(d)(5).
- G. Subtract the homeless shelter deduction, if any, up to the maximum of \$143.
- H. Total the allowable shelter expenses to determine shelter costs, unless a deduction has been subtracted in accordance with paragraph (e)(1)(i)(G) of this section. Subtract from total shelter costs 50 percent of the household's monthly income after all the above deductions have been subtracted. The remaining amount, if any, is the excess shelter cost. If there is no excess shelter cost, the net monthly income has been determined. If there is excess shelter cost, compute the shelter deduction according to paragraph (e)(1)(i)(I) of this section.
- I. Subtract the excess shelter cost up to the maximum amount allowed for the area (unless the household is entitled to the full amount of its excess shelter expenses) from the household's monthly income after all other applicable deductions. Households not subject to a capped shelter expense shall have the full amount exceeding 50 percent of their net income subtracted. The household's net monthly income has been determined.

7 C.F.R. § 273.10(e)(2)(ii)(A) provides the following: Except as provided in paragraphs (a)(1), (e)(2)(iii) and (e)(2)(vi) of this section, the household's monthly allotment shall be equal to the maximum SNAP allotment for the household's size reduced by 30 percent of the household's net monthly income as calculated in paragraph (e)(1) of this section. If 30 percent of the household's net income ends in cents, the State agency shall round in one of the following ways: (1) "The State agency shall round the 30 percent of net income up to the nearest higher dollar".

7 C.F.R. § 273.10(e)(4) provides the following: Thrifty Food Plan (TFP) and Maximum SNAP Allotments. (i) Maximum SNAP allotment level. Maximum SNAP allotments shall be based on the TFP as defined in §271.2, and they shall be uniform by household size throughout the 48 contiguous States and the District of Columbia. The TFP for Hawaii shall be the TFP for the 48 States and DC adjusted

for the price of food in Honolulu. The TFPs for urban, rural I, and rural II parts of Alaska shall be the TFP for the 48 States and DC adjusted by the price of food in Anchorage and further adjusted for urban, rural I, and rural II Alaska as defined in §272.7(c). The TFPs for Guam and the Virgin Islands shall be adjusted for changes in the cost of food in the 48 States and DC, provided that the cost of these TFPs may not exceed the cost of the highest TFP for the 50 States. The TFP amounts and maximum allotments in each area are adjusted annually and will be prescribed in a table posted on the FNS web site, at [www.fns.usda.gov/fsp](http://www.fns.usda.gov/fsp).

**The Appellant’s SNAP benefits are calculated as follows:**

**SNAP BENEFIT CALCULATION**

<b>INCOME</b>	
Earned Income	\$0.00
Less 20%	-\$0.00
= Adjusted earned income	\$0.00
+ Unearned income	\$1641.00
= Total income	<u>\$1641.00</u>
- Standard deduction	-\$177.00
- Medical expenses	\$0.00
-Dependent care expenses	\$0.00
<b>=Adjusted gross income</b>	<b>\$1464.00</b>
<b><u>SHELTER COSTS</u></b>	
Rent	0.00
Property Taxes	\$336.07
Homeowner’s Insurance	144.00
+ SUA	\$783.00
<b>Total shelter costs</b>	<b>\$1263.07</b>
<b><u>SHELTER HARDSHIP</u></b>	
Shelter costs	\$1263.07
Less 50% of adjusted gross income	-\$732.00
<b>= Total shelter hardship (max \$569.00 if not disabled or elderly)</b>	<b>\$531.07</b>
<b><u>ADJUSTED NET INCOME</u></b>	
Adjusted gross income	\$1464.00
Less shelter hardship	-\$531.07
<b>Net Adjusted Income (NAI)</b>	<b>\$932.93</b>
<b><u>BENEFIT CALCULATION</u></b>	
Thrifty Food Plan for one person	\$250.00

Less 30% of NAI (rounded up to nearest whole dollar)	\$279.88
<b>SNAP award</b>	<b>\$0.00</b>

11.7 C.F.R. § 273.10(e)(2)(ii)(C) provides for minimum benefit issuance and states that except during an initial month, all eligible one-person and two-person households shall receive minimum monthly allotments equal to the minimum benefit. The minimum benefit is 8 percent of the maximum allotment for a household of one, rounded to the nearest whole dollar.

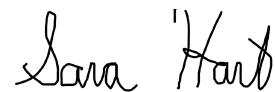
**The Thrifty Food Plan allotment for a household of one is \$250.00. Eight percent of \$250.00 is \$20.00 ( $\$250.00 \times .08$ ). The Department correctly determined the Appellant’s SNAP benefit for a household of one is \$20.00.**

**DISCUSSION**

The Appellant reported a monthly homeowner’s insurance expense of \$141.00 on her SNAP application; however, the Department’s exclusion of this expense does not impact the Appellant’s current monthly SNAP award. The Department is encouraged to update its eligibility system to reflect the Appellant’s reported expense.

**DECISION**

The Appellant’s appeal is **DENIED**.




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Sara Hart  
Fair Hearing Officer

CC: Javier Rivera, Department’s Representative, Manchester Regional Office  
Angelica Branfalt, Operations Manager, Manchester 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.