

STATE OF CONNECTICUT  
DEPARTMENT OF SOCIAL SERVICES  
OFFICE OF LEGAL COUNSEL, REGULATIONS, AND ADMINISTRATIVE HEARINGS  
55 FARMINGTON AVENUE  
HARTFORD, CT 06105-3730

██████████ 2022  
Signature Confirmation

Case ID # ██████████  
Client ID # ██████████  
Request # 193400

**NOTICE OF DECISION**

**PARTY**

██████████  
██████████  
██████████

**PROCEDURAL BACKGROUND**

On ██████████ 2022, the Department of Social Services (“the Department”) sent ██████████ (the “Appellant”) a Notice of Client Initiated Electronic Benefit Transfer (“EBT”) Supplemental Nutrition Assistance Program (“SNAP”) Account Adjustment Request denying her call to replace EBT purchases made on ██████████ 2022, and ██████████ 2022, that the Appellant states she did not make.

On ██████████ 2022, the Appellant requested an administrative hearing to contest the denial of the replacement of SNAP benefits withdrawn from her EBT account.

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

On ██████████ 2022, in accordance with sections 17b-60, 17b-61, and 4-176e to 4-184 of the Connecticut General Statutes, inclusive, the Department held an administrative hearing by telephonic conferencing due to the Covid-19 Pandemic.

The following individuals participated in the hearing:

██████████ Appellant  
Kristen Krawetsky, Department’s Representative  
Christopher Turner, Hearing Officer

The hearing record was left open for the submission and Appellant's review of additional information. [REDACTED] the record closed after receipt of the Appellant's comments.

### **STATEMENT OF THE ISSUE**

The issue is whether the Department correctly denied the Appellant's request for the replacement of SNAP EBT benefits withdrawn from her EBT account with card number ending in [REDACTED] on [REDACTED] 2022, and [REDACTED] 2022.

### **FINDINGS OF FACT**

1. On [REDACTED] 2021, the Department issued the Appellant an EBT card ending in [REDACTED]. All transactions in dispute were used with this card. (Exhibit 1A: EBT transaction history; Record)
2. On [REDACTED] 2022, the Appellant's \$598.00 SNAP benefit became available for her use. (Record)
3. On [REDACTED] 2022, the Appellant's EBT card ending in [REDACTED] was used at [REDACTED] pm to make a \$53.18 SNAP purchase from [REDACTED] CT. The Appellant stated she made this purchase. (Exhibit 1B: EBT Account transaction history with store detail; Appellant's testimony)
4. On [REDACTED] 2022, the Appellant's EBT card ending in [REDACTED] was used at [REDACTED] pm to make a \$[REDACTED] online SNAP purchase from [REDACTED]. The address for the [REDACTED] transaction is that of [REDACTED] corporate headquarters in [REDACTED]. In order to complete an online purchase, the buyer's full card number and pin are needed. (Exhibit 1A; Exhibit 3: Notice of Client Initiated EBT Account Adjustment; Department's testimony; Appellant's testimony)
5. On [REDACTED] 2022, the Appellant's EBT account was credited \$[REDACTED] at [REDACTED] pm for a food stamp return from [REDACTED]. (Exhibit 1B)
6. On [REDACTED] 2022, the Appellant's EBT account was credited \$[REDACTED] at [REDACTED] am for a food stamp return from [REDACTED]. (Exhibit 1B)
7. On [REDACTED] 2022, the Appellant's EBT card was used at [REDACTED] am to make a [REDACTED] online SNAP purchase from [REDACTED]. (Exhibit 1A; 1B; Exhibit 3)
8. On [REDACTED] 2022, the Appellant called EBT customer service at [REDACTED] pm and [REDACTED] pm for a balance inquiry. (Exhibit 1A)
9. On [REDACTED] 2022, the Appellant's EBT card was canceled as "damaged" at [REDACTED] pm by EBT customer service. (Exhibit 1A)

10. On [REDACTED] 2022, the Appellant's EBT account was credited \$ [REDACTED] at [REDACTED] pm for a food stamp return from [REDACTED]. (Exhibit 1B)
11. There were eight additional purchases made after the [REDACTED] 2022, [REDACTED] online purchase, and before the second online [REDACTED] purchase made on [REDACTED] 2022. The Appellant did not indicate these purchases were fraudulent. (Exhibit 1B; Exhibit 1C: Appellant's response)
12. The Appellant does not have an authorized shopper for her EBT account. The Appellant did not give her children or anyone else permission to use her EBT card. (Record; Appellant's testimony)
13. The Appellant did not file a police report concerning her purported stolen SNAP benefits. (Appellant's testimony)
14. 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 the local agency is notified of the decision. The Appellant requested an administrative hearing on [REDACTED] 2022, with this decision due no later than [REDACTED] 2022. However, the Appellant received a seven-day extension to review and comment on additional information thereby extending the due date of this decision to no later than [REDACTED] 2022. (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.

**The Department has the authority to review the Appellant's SNAP benefit replacement request and determine whether her household meets the eligibility requirements of such.**

2. "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)).
3. UPM § 6515 provides in relevant part that cash and food stamp benefits deposited in an EBT account in a financial institution must be accessed through the use of Department issued debit cards.

**The Department correctly determined that the Appellant's SNAP benefits are paid through EBT and accessed by Department issued debit cards either in person or online.**

4. UPM § 6515.15(A)(2) provides that EBT SNAP benefits may be accessed by: a. the head of the assistance unit; b. an authorized representative of the assistance unit; c. an individual acting as an emergency authorized representative.

**The Department correctly determined that there was no authorized representative on file to access the Appellant's account on her behalf.**

5. 7 C.F.R. § 273.17 (a) (1) provides the State agency shall restore to households benefits that were lost whenever the loss was caused by an error by the State agency or by an administrative disqualification for intentional Program violation which was subsequently reversed as specified in paragraph (e) of this section, or if there is a statement elsewhere in the regulations specifically stating that the household is entitled to restoration of lost benefits. Furthermore, unless there is a statement elsewhere in the regulations that a household is entitled to lost benefits for a longer period, benefits shall be restored for not more than twelve months before whichever of the following occurred first:
  - (i) The date the State agency receives a request for restoration from a household; or
  - (ii) The date the State agency is notified or otherwise discovers that a loss to a household has occurred.

7 C.F.R. § 274.2 (g) (2) provides a State agency shall adjust an account to correct an auditable, out-of-balance settlement condition that occurs during the redemption process because of a system error. A system error is defined as an error resulting from a malfunction at any point in the redemption process: from the system host computer to the switch, to the third-party processors, to a store's host computer or POS device. These adjustments may occur after the availability date and may result in either a debit or credit to the household.

UPM § 6530.05(A)(2) provides that the Department authorizes the replacement of EBT issued benefits that are considered lost or stolen.

UPM § 6530.15(C) provides EBT issued cash and food stamp benefits are treated as lost benefits if they are not accepted into an EBT account of an eligible client due to Department error or a malfunction of the electronic benefits transfer system.

**The Department correctly determined that the SNAP benefits in question were accepted into the Appellant's EBT account and are not considered lost due to a system error or malfunction.**

6. UPM § 6530.20(A)(3) provides EBT issued cash and food stamp benefits are treated as stolen benefits if the cash and food stamp benefits are taken by someone other than the client or the client's authorized representative between the time the Department's designee receives notice from a household regarding the need for card replacement and the time that the Department's designee deactivates the client's stolen or lost debit card.

UPM § 6530.20(B)(3) provides that the Department will not replace any recipient cash or food stamp benefits that have been correctly deposited into an EBT account in a financial institution. Such benefits are considered to have been properly received and are not subject to replacement except as provided in section A above or sections 6530.15, 6530.35, and 6530.40.

UPM § 6530.20(C)(2) provides that the individual requesting the replacement of stolen EBT issued cash and food stamp benefits is required to file a police report regarding the theft.

UPM § 6530.20(C)(3) provides stolen cash benefits and Food Stamp benefits are not replaced if a police report has not been filed.

UPM § 6530.50(C)(2) provides EBT issued Food Stamp benefits are treated as stolen benefits if the benefits are taken by someone other than the client or the client's authorized representative between the time the Department's designee receives notice from a household regarding the need for card replacement and the time that the Department's designee deactivates the client's stolen or lost debit card.


**The Department correctly determined that the Appellant is not entitled to the replacement of her SNAP benefits because the benefits were correctly deposited and received by the Appellant.**

**The Department correctly determined that the Appellant did not file a police report regarding the claimed theft of her SNAP benefits.**

**The Department correctly determined the Appellant's EBT issued SNAP benefits could not be treated as stolen because the Appellant's benefits were used on [REDACTED] 2022, and [REDACTED] 2022, before the Appellant reported the need for a replacement card and the deactivation of her previous EBT card on [REDACTED] 2022, at [REDACTED] pm.**

**DECISION**

The Appellant's appeal is denied.

  
Christopher Turner  
Hearing Officer

Cc: Musa Mohamud, Operations Manager Hartford  
Josie Savastra, Operations Manager Hartford  
Jessica Carroll, Operations Manager Hartford  
Jay Bartolomei, DSS Supervisor Hartford  
Kristen Krawetsky, DSS Central Office, Hartford

### **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, law, and 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 the Department of Social Services, Director, Office of Administrative Hearings and Appeals, 55 Farmington Avenue, Hartford, CT 06105-3725.

### **RIGHT TO APPEAL**

The appellant has the right to appeal this decision to the 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 if 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 06105-3725. A copy of the petition must also be served to 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 following §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.