

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

██████████ 2022
Signature confirmation

Case: ██████████
Client: ██████████
Request: 203979

NOTICE OF DECISION

PARTY

██████████
██████████
██████████

PROCEDURAL BACKGROUND

On ██████████ 2022, the Department of Social Services (the “Department”) issued a *Notice of Action* denying ██████████ (the “Appellant’s”) ██████████ 2022 Supplemental Nutrition Assistance Program (“SNAP”) application.

On ██████████, 2022, the Office of Legal Counsel, Regulations, and Administrative Hearings (“OLCRAH”) received the Appellant’s online request for an administrative hearing.

On ██████████ 2022, the OLCRAH scheduled the administrative hearing for ██████████ 2022.

On ██████████ 2022, in accordance with sections 17b-60, 17b-61 and 4-176e to 4-189, inclusive, of the Connecticut General Statutes, the OLCRAH held an administrative hearing. The following individuals participated:

██████████, Appellant’s spouse
Christine Faucher, Department Representative
Eva Tar, Hearing Officer

The hearing record closed ██████████ 2022.

STATEMENT OF ISSUE

The issue is whether the Department correctly determined that the Appellant’s household was ineligible for SNAP benefits.

FINDINGS OF FACT

1. The Appellant lives with her spouse and their two minor children. (Appellant Testimony)
2. The Appellant grosses \$1,646.10 per month in Social Security Disability Insurance (SSDI) benefits. (Appellant Testimony) (Exhibit 3)
3. The Appellant's spouse grosses \$2,172.10 per month in SSDI benefits. (Appellant Testimony) (Exhibit 3)
4. The minor children each gross \$411.00 per month in Social Security benefits as children of a disabled parent. (Appellant Testimony) (Exhibit 3)
5. Neither the Appellant nor her spouse are employed or self-employed. (Appellant Testimony)
6. The Appellant's rent is \$1,400.00 per month. (Appellant Testimony)
7. The Appellant pays for oil heat. (Appellant Testimony)
8. On ██████████ 2022, the Department received the Appellant's online SNAP application. (Exhibit 1)
9. With respect to the ██████████ 2022 SNAP application, the Appellant did not report out-of-pocket and/or unpaid medical bills to the Department. (Department Representative Testimony)
10. The Appellant reported on her ██████████ 2022 SNAP application that she received Medicare A coverage. (Department Representative Testimony)
11. Medicare B premiums are deducted each month from the Appellant's and her spouse's Social Security disability benefits. (Appellant Testimony)
12. The Medicare B premium for the Appellant and her spouse equaled \$170.10 per month each. (Department Representative Testimony)
13. In ██████████ 2022, the Appellant paid \$37.69 for an uncovered dental X-ray. (Appellant Testimony)
14. On ██████████ 2022, the Department denied the Appellant's ██████████ 2022 SNAP application. (Exhibit 7)
15. In calculating whether the Appellant's household was eligible to participate in the SNAP, the Department incorporated as a medical income deduction the Appellant's and her spouse's monthly Medicare B premiums, minus \$35.00. (Department Representative Testimony)
16. Title 7, Code of Federal Regulations ("C.F.R.") 273.15 (c)(1) provides in part that "[w]ithin 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 are notified of the decision....” On ██████████ 2022, the OLCRAH received the Appellant’s online hearing request. The issuance of this decision would have been due by ██████████, 2022. This decision is timely.

CONCLUSIONS OF LAW

1. Section 17b-2 of the Connecticut General Statutes in part designates the Department of Social Services 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 under State statute to administer the SNAP in Connecticut.

2. Title 7, Code of Federal Regulations (“C.F.R.”) section 273.1 (a)(3) provides that a household is “[a] group of individuals who live together and customarily purchase food and prepare meals together for home consumption.”

“The following individuals who live with others must be considered as customarily purchasing food and preparing meals with the others, even if they do not do so, and thus must be included in the same household, unless otherwise specified. (i) Spouses; (ii) A person under 22 years of age who is living with his or her natural or adoptive parent(s) or step-parent(s);” 7 C.F.R. § 273.1 (b)(1)(i).

For the purposes of the SNAP, the Appellant, her spouse and their two minor children are a household of four.

3. 7 C.F.R. § 271.2 in part provides the definition of “Elderly or disabled member.” Subsection (3) of the definition notes that a disabled member “[r]eceives federally or State-administered supplemental benefits under section 1616(a) of the Social Security Act provided that the eligibility to receive the benefits is based upon the disability or blindness criteria used under title XVI of the Social Security Act.”

The Appellant and her spouse are disabled individuals, as defined at 7 C.F.R. § 271.2.

4. “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. *Households which contain an elderly or disabled member shall meet the net income eligibility standards for SNAP.* ... The net and gross income eligibility standards shall be based on the Federal income poverty levels established as provided in section 673(2) of the Community Services Block Grant Act ([42 U.S.C. 9902\(2\)](#)).” 7 C.F.R. § 273.9 (a). (emphasis added).

As a condition of participation in the SNAP, the Appellant’s household must meet the SNAP’s net income eligibility standards.

5. “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).

“Unearned income shall include, but not be limited to: (i) Assistance payments from Federal or federally aided public assistance programs, such as supplemental security income (SSI) or Temporary Assistance for Needy Families (TANF); general assistance (GA) programs (as defined in § 271.2); or other assistance programs based on need...; (ii) 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;” 7 C.F.R. § 273.9 (b)(2)(i) and (ii).

For the purposes of the SNAP, the Appellant and her spouse’s SSDI benefits are counted unearned income.

For the purposes of the SNAP, the two minor children’s Social Security benefits are counted unearned income.

6. Title 7, Section § 273.9 (d)(1)(i) of the Code of Federal Regulations provides for a standard deduction for the 48 States, District of Columbia, Alaska, Hawaii, and the Virgin Islands.

Effective [REDACTED] 2022, the standard deduction for a household of four equaled \$193.00.¹

The Department correctly used the \$193.00 standard deduction for a household of four when determining the net applied income of the Appellant’s household.

7. *“Determining deductions.* Deductible expenses include only certain dependent care, shelter, medical and, at State agency option, child support costs as described in § 273.9.” 7 C.F.R. § 273.10 (d).

“At certification and recertification, the household shall report and verify all medical expenses. *The household's monthly medical deduction for the certification period shall be based on the information reported and verified by the household, and any anticipated changes in the household's medical expenses that can be reasonably expected to occur during the certification period based on available information about the recipient's medical condition, public or private insurance coverage, and current verified medical expenses....*” 7 C.F.R. § 273.10 (d)(4). (emphasis added)

Although the Appellant did not report and verify her household’s Medicare B premiums as a medical expense on the [REDACTED] 2022 SNAP application, the Department’s use of the Appellant’s and her spouse’s Medicare B premiums as a medical deduction was permissible, based on the Department’s institutional knowledge of the Medicare B premium amounts.

¹ <POGA Communication 9.6.2022 to all DSS Eligibility Staff> updated Department staff on the SNAP Cost-of-Living Adjustments (COLAs) effective October 1, 2022 for Connecticut. The email noted in part increases in the standard deduction based on household size, the Standard Utility Allowance, and the Program’s income limits under Expanded Categorical Eligibility as well as changes in the maximum and minimum SNAP Allotment per household size.

POGA = Program Oversight & Grant Administration

8. Title 7, Section 273.10 (e) of the Code of Federal Regulations provides for calculating net income and benefit levels. Subsection (e)(1)(i) provides:
- 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...
 - (B) ...
 - (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) ...
 - (F) ...
 - (G)...
 - (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)(1)(i).

The Appellant's monthly rental obligation is an allowable deduction with respect to the SNAP net income eligibility calculation.

The Appellant's and her spouse's total Medicare B premiums, minus \$35.00, is an allowable deduction with respect to the SNAP net income eligibility calculation.

The adjusted monthly gross income of the Appellant's household equaled \$4,142.00. [\$4,640.20 (total gross unearned income for four members) minus \$193.00 (standard deduction) minus \$305.20 (\$170.10 plus \$170.10 minus \$35.00)]

9. "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); ..." 7 C.F.R. § 273.9 (d)(6)(iii)(A).

Effective [REDACTED] 2022, the Standard Utility Allowance equaled \$921.00.

For the purposes of the SNAP, the Appellant's monthly shelter costs equaled \$2,321.00 in ██████████ 2022. [\$1,400.00 (rent) plus \$921.00 (SUA)]

For the purposes of the SNAP, the Appellant's shelter hardship in ██████████ 2022 equaled \$250.00. [\$2,321.00 (monthly shelter costs) minus \$2,071.00 (50% of adjusted gross income)]

10. Title 7, Section 273.10 (e)(4) of the Code of Federal Regulations addresses the Thrifty Food Plan and maximum SNAP allotments.

The Thrifty Food Plan or maximum SNAP allotment for a qualified assistance unit of four in Connecticut with no applied income equaled \$939.00 effective October 1, 2022.

Title 7, Section 273.10 (e)(2)(ii)(A) of the Code of Federal Regulations provides:

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; or
- (2) The State agency shall not round the 30 percent of net income at all. Instead, after subtracting the 30 percent of net income from the appropriate Thrifty Food Plan, the State agency shall round the allotment down to the nearest lower dollar.

7 C.F.R. § 273.10 (e)(2)(ii)(A).

11. The eligibility of the Appellant's household to participate in the SNAP is calculated as follows:

<u>SNAP BENEFIT CALCULATION</u>	
██████████ 2022	
<u>INCOME</u>	
Unearned Income/all sources	\$4,640.20
Less standard deduction	- 193.00
Less medical expenses in excess of \$35.00	- <u>305.20</u>
Adjusted gross income -	\$4,142.00
<u>SHELTER COSTS</u>	
Rent	\$1,400.00
SUA	<u>+ 921.00</u>
Total shelter costs -	\$2,321.00
<u>SHELTER HARDSHIP</u>	
Shelter costs	\$2,321.00

Less 50% of adjusted gross income	- 2,071.00
Total shelter hardship -	\$250.00
<u>ADJUSTED NET INCOME</u>	
Adjusted gross income	\$4,142.00
Less shelter hardship	- 250.00
Net Adjusted Income (NAI) -	\$3,892.00
<u>BENEFIT CALCULATION</u>	
Thrifty Food Plan for four	\$939.00
Less 30% of NAI (<i>rounded up to nearest dollar</i>)	- 1,168.00
<u>SNAP AMOUNT:</u>	= (<i>negative number</i>)

The Department correctly determined that the Appellant's household was ineligible for SNAP benefits, as 30 percent of the household's net applied income (NAI) exceeded the Thrifty Food Plan for a household of four.

DECISION

The Appellant's appeal is DENIED.

Eva Tar - electronic signature
Eva Tar
Hearing Officer

Cc: Christine Faucher, DSS-Manchester
Angelica Branfalt, DSS-Manchester

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.