

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

██████████, 2023
SIGNATURE CONFIRMATION

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

NOTICE OF DECISION

PARTY

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

PROCEDURAL BACKGROUND

On ██████████, 2022, the Department of Social Services (the “Department”) sent ██████████ (the “Appellant”) a Notice of Action (“NOA”) discontinuing his Supplemental Nutritional Assistance Program (“SNAP”) benefits effective ██████████, 2022, due to excess income.

On ██████████, 2022, the Appellant requested an administrative hearing to contest the discontinuance of his SNAP benefits.

On ██████████ 2022, the Office of Legal Counsel, Regulations, and Administrative Hearings (“OLCRAH”) issued a notice scheduling an administrative hearing for ██████████, 2022, to be held telephonically at the Appellant’s request.

On ██████████, 2022, at the Appellant’s request, the OLCRAH issued a notice rescheduling the administrative hearing for ██████████, 2022, to be held telephonically.

On ██████████ 2022, at the Appellant’s request, the OLCRAH issued a notice rescheduling the administrative hearing for ██████████, 2023, to be held telephonically.

On [REDACTED], 2023, a hearing was held, and the following individuals participated.

[REDACTED], Appellant
Marybeth Mark, Department's Representative
Joseph Alexander, Administrative Hearing Officer

STATEMENT OF THE ISSUE

The issue for which the hearing was requested was the discontinuance of the Appellant's SNAP benefits due to excess income effective [REDACTED], 2022 (SNAP approved for the period of [REDACTED], 2022, through [REDACTED], 2022). However, the Department resolved said issue following the Appellant's request for a hearing and subsequently discontinued the Appellant's SNAP effective [REDACTED] 2022, for (1) receiving more than half of meals at a facility not approved for SNAP and (2) no members are eligible for this program.

It was established on the hearing record that the Appellant intended to dispute the discontinuance of his SNAP effective [REDACTED], 2022, for receiving more than half of his meals at a facility not approved for SNAP. Therefore, that is the issue addressed in the following decision.

FINDINGS OF FACT

1. On [REDACTED] 2022, the Department received an Online Application ("ONAP") requesting SNAP for a household of one (Appellant only). (Hearing Record)
2. The Appellant is [REDACTED] years old (DOB [REDACTED]) and a recipient of Social Security (SSA) benefits totaling \$1,179.00 per month. (Appellant Testimony, Exhibit 4: Notice of Action dated [REDACTED]/22)
3. The Appellant has been a resident of [REDACTED] since [REDACTED] of 2017. (Appellant Testimony)
4. The Appellant is provided with a total of twenty-one (21) meals per week which equates to three meals per day. (Appellant Testimony)
5. On [REDACTED], 2022, the Department determined [REDACTED] is not a facility approved for the receipt of SNAP benefits/participation in the SNAP. (Hearing Record)
6. On [REDACTED], 2022, the Department updated the ImpaCT system (determines eligibility for Federal and State funded/issued benefit programs) to reflect the Appellant was residing in a facility not approved for SNAP and was receiving more than half of his daily meals from said facility. This update resulted in the Appellant's

SNAP being discontinued effective [REDACTED] 2022. (Exhibit 4: Notice of Action dated [REDACTED]/22)

7. On [REDACTED], 2022, a NOA was mailed to the Appellant informing him of the closure of his SNAP benefits due to (1) receiving more than half of his meals at a facility not approved for SNAP and (2) no household members being eligible for this program. (Exhibit 4: Notice of Action dated [REDACTED]/22)
8. 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 Appellant requested an administrative hearing on [REDACTED] [REDACTED], 2022. Due to the two reschedule requests made by the Appellant, an additional [REDACTED] ([REDACTED]) days have been added to the decision due date making this decision due no later than [REDACTED], 2023. (Hearing Record)

CONCLUSIONS OF LAW

1. Section 17b-2 of the Connecticut General Statutes authorizes the Department of Social Services to administer the SNAP in accordance with Federal law.
2. Title 7 of the Code of Federal Regulations (“C.F.R.”) section 273.1 (e)(1), 7 C.F.R § 271.2, 7 C.F.R. § 273.1(b)(7)(vi)(C), 7 C.F.R. § 273.1(b)(7)(vi)(D), 7 C.F.R. § 273.1(b)(7)(vi)(E), 7 C.F.R. § 273.1(b)(7)(vi)(F), 7 C.F.R. § 273.1(b)(7)(vi)(G)(1), & 7 C.F.R. § 273.1(b)(7)(vi)(H) provide for “Special Situations” in which residents of the following institutions may be eligible to receive SNAP so long as they meet certain criteria
 - Addiction Treatment Centers
 - Homeless Shelters and Meal Providers
 - Shelters for Battered Individuals

“Institution” is defined as “A place providing its residents over 50% of 3 meals daily (college, nursing home, etc).”

With certain exceptions, residents of institutions are not eligible for SNAP. **Exception:** Residents of institutions described in Special Situations

The Department correctly determined that the Appellant is a resident of an institution that provides him with over 50% of three meals per day as part of the institution’s normal services.


The Appellant does not reside in any of the “special situation” institution types listed under 7 C.F.R. § 273.1 (e)(1), 7 C.F.R. § 271.2, or 7 C.F.R. § 273.1(b)(7)(vi)(C) -(H) (see Conclusion of Law # 2)

The Appellant was ineligible to participate in the SNAP pursuant to 7 C.F.R. § 273.1(b)

The Department was correct when it discontinued the Appellant’s SNAP benefits effective [REDACTED] 2022, due to the Appellant (1) receiving more than half of his meals at a facility not approved for SNAP and (2) not meeting program requirements.

DECISION

The Appellant’s appeal is **DENIED**



Joseph Alexander
Administrative Hearing Officer

CC: Jessica Carroll, Operations Manager, DSS, Norwich Regional Office
Marybeth Mark, Hearing Liaison, DSS, Norwich 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 §4-1181a (a) of the Connecticut General Statutes.

Reconsideration requests should include specific grounds for the request: for example, indicate what error of fact or law, 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 06105-3725.

RIGHT TO APPEAL

The appellant has the right to appeal this decision to Superior Court with **45** days of the mailing of this decision, or **45** days after the agency denies 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 06105-3725. 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 her 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.