

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# ██████████
REQUEST# ██████████

NOTICE OF DECISION

PARTY

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

PROCEDURAL BACKGROUND

On ██████████, 2023, the Department of Social Services (the “Department”) sent ██████████ (the “Appellant”) a Notice of Action (“NOA”) informing her that she had been approved for Supplemental Nutritional Assistance Program (“SNAP”) benefits in the amount of \$211.00 per month effective ██████████, 2023.

On ██████████, 2023, the Appellant requested an administrative hearing because she disagreed with the amount of her SNAP benefits.

On ██████████, 2023, the Office of Legal Counsel, Regulations, and Administrative Hearings (“OLCRAH”) issued a notice scheduling the administrative hearing for ██████████, 2023.

On ██████████, 2023, the Appellant requested to reschedule the administrative hearing.

On ██████████, 2023, the OLCRAH issued a notice rescheduling the administrative hearing for ██████████, 2023.

On ██████████, 2023, in accordance with sections 17b-60, 17b-61, and 4-176e to 4-184 inclusive, of the Connecticut General Statutes, the OLCRAH held an administrative hearing. The following individuals participated in the hearing:

██████████, Appellant
██████████, American Sign Language Interpreter, CoSignCT
Carolyn Jones, Department’s Representative
Joseph Davey, Administrative Hearing Officer

The hearing record remained open for the submission of additional information by the Appellant and the Department. Information was submitted by the Department on [REDACTED], 2023. The Appellant submitted partial information on [REDACTED], 2023. The record closed on [REDACTED], 2023, without any further submission from the Appellant.

STATEMENT OF THE ISSUE

The issue is whether the Department correctly calculated the Appellant's SNAP benefit amount beginning [REDACTED], 2023.

FINDINGS OF FACT

1. The Appellant is a recipient of SNAP benefits for herself and her two minor children. (Exhibit 2: NOA dated [REDACTED], Department's testimony)
2. The Appellant is [REDACTED] years old (DOB [REDACTED]). The Appellant's daughter [REDACTED] is [REDACTED] years old (DOB [REDACTED]). The Appellant's son [REDACTED] is [REDACTED] years old (DOB [REDACTED]). (Exhibit 2, Appellant's testimony)
3. On [REDACTED], 2023, the Department received a signed Periodic Report Form ("PRF") from the Appellant. (Exhibit 1: Case notes dated [REDACTED] - [REDACTED], Hearing Record)
4. The Appellant is unemployed and has no income. (Exhibit 2, Appellant's testimony)
5. The Appellant is not disabled. (Appellant's testimony)
6. The Appellant's children are both disabled. (Appellant's testimony)
7. The Appellant's daughter receives \$914.00 per month in SSDI benefits. (Exhibit 4: SOLQ-I Results printouts, Department's testimony)
8. On [REDACTED], 2023, the Appellant's son's Social Security Disability Insurance ("SSDI") benefits of \$914.00 per month were reinstated by the Social Security Administration. The reinstatement was confirmed via an Interface match between the Department and the Social Security Administration. (Exhibit 4, Department's testimony)
9. The Appellant receives \$449.00 per month in Temporary Family Assistance ("TFA") benefits. (Department's testimony, Hearing Record)
10. The Appellant rents an apartment and paid \$444.00 per month in rent at the time she submitted her PRF to the Department. (Exhibit 7: Shelter Expense Verification)

11. The Appellant is responsible for heating and cooling costs and is receiving the Standard Utility Allowance (“SUA”) credit. (Exhibit 2, Appellant’s testimony, Department’s testimony)
12. The Appellant regularly receives regular chiropractic therapy and paid \$247.50 per month in medical expenses to ██████████ at the time she submitted her PRF to the Department. (Exhibit 6: Medical Expense verification)
13. The Appellant’s children receive treatment at ██████████ (aka “██████████”) and “██████████.” The Appellant pays for these treatments out of pocket. The Department did not receive verification of these expenses prior to processing the Appellant’s PRF. (Exhibit 8: Document Search, Appellant’s Exhibit B: ██████████ ██████████ receipts dated ██████████, Appellant’s testimony, Department’s testimony)
14. The Appellant does not pay for child support or dependent care expenses. (Appellant’s testimony)
15. On ██████████, 2023, the Department processed the Appellant’s PRF. There were no changes reported on the PRF. (Exhibit 1, Exhibit 2)
16. On ██████████, 2023, the Department issued a NOA to the Appellant reapproving her SNAP benefits. The NOA indicated the Appellant’s household was eligible for \$211.00 per month in SNAP benefits effective ██████████, 2023, through ██████████, 2024. (Exhibit 1, Exhibit 2, Department’s testimony)
17. The issuance of this decision is timely under the Code of Federal Regulations (“C.F.R.”) 273.15 (c)(1) which provides in part that “[w]ithin █ 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...” The Appellant requested an administrative hearing on ██████████, 2023. Therefore, this decision is due not later than ██████████, 2023. However, the hearing, which was originally scheduled for ██████████, 2023, was rescheduled for ██████████, 2023, at the request of the Appellant, which caused a █-day delay. The hearing record was further extended █ days until ██████████, 2023, to allow the submission of additional information by the Appellant and the Department, causing a total delay of █ days. This decision is therefore due not later than ██████████, 2023. (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 administer the SNAP program in Connecticut and determine benefit amounts.

2. 7 C.F.R. § 273.1(b)(1)(ii) provides for Required household combinations. 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. A person under 22 years of age who is living with his or her natural or adoptive parent(s) or step-parent(s).

The Department correctly determined the Appellant's household size of three persons.

3. 7 C.F.R. § 271.2(5) states that an Elderly or Disabled member means a member of a household who: (5) Receives disability retirement benefits from a governmental agency because of a disability considered permanent under section 221(i) of the Social Security Act.

The Department correctly determined that the Appellant's children are disabled household members.

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)(i)(ii) provides that 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. Such assistance is considered to be unearned income even if provided in the form of a vendor payment (provided to a third party on behalf of the household), unless the vendor payment is specifically exempt from consideration as countable income under the provisions of paragraph (c)(1) of this section. Assistance payments from programs which require, as a condition of eligibility, the actual performance of work without compensation other than the assistance payments themselves, shall be considered unearned income. (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; 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 TFA benefits of \$449.00 as unearned income in the calculation of SNAP benefits.

The Department correctly determined the Appellant's children's combined SSDI of \$1828.00 (██████████ SSDI of \$914.00 + ██████████ SSDI of \$914.00 = \$1828.00) 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. However, the State agency shall not use past income as an indicator of income anticipated for the certification period if changes in income have occurred or can be anticipated. If income fluctuates to the extent that a 30-day period alone cannot provide an accurate indication of anticipated income, the State agency and the household may use a longer period of past time if it will provide a more accurate indication of anticipated fluctuations in future income. Similarly, if the household's income fluctuates seasonally, it may be appropriate to use the most recent season comparable to the certification period, rather than the last 30 days, as one indicator of anticipated income.

The Department correctly determined the Appellant's total monthly income effective ██████████, 2023, equals \$2277.00 (SSDI \$914.00 + SSDI \$914.00 + TFA \$449.00 = \$2277.00).

7 C.F.R. § 273.9(a) provides for income eligibility standards. 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 Department correctly determined the Appellant's household must meet the net income eligibility standard.

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 \$193.00 standard deduction.

8. 7 C.F.R § 273.9(d)(6)(iii)(A) provides for 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); and, a limited utility allowance (LUA) that includes electricity and fuel for purposes other than heating or cooling, water, sewerage, well and septic tank installation and maintenance, telephone, and garbage or trash collection. The LUA must include expenses for at least two utilities. However, at its option, the State agency may include the excess heating and cooling costs of public housing residents in the LUA if it wishes to offer the lower standard to such households. The State agency may use different types of standards but cannot allow households the use of two standards that include the same expense. In States in which the cooling expense is minimal, the State agency may include the cooling expense in the electricity component. The State agency may vary the allowance by factors such as household size, geographical area, or season. Only utility costs identified in paragraph (d)(6)(ii)(C) of this section must be used in developing standards.

The Department correctly determined the Appellant is entitled to the SUA, which is \$921.00, effective [REDACTED], 2022.

9. 7 C.F.R. § 273.9(d)(6)(ii)(A) 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.

The Department correctly determined the Appellant's household contains a disabled household member and correctly determined the Appellant's shelter cost equals \$1365.00 (\$444.00 rent + \$921.00 Standard Utility Allowance = \$1365.00) per month.

10. 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 have medical costs, but they are not allowable SNAP deductions as the Appellant is not disabled.

11.7 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.

The Appellant’s SNAP benefits effective [REDACTED], 2023, are calculated as follows:

SNAP BENEFIT CALCULATION

<u>INCOME</u>	
Earned Income	\$0.00
Less 20%	-\$0.00
= Adjusted earned income	\$0.00
+ Unearned income	\$2277.00
= Total income	<u>\$2277.00</u>
- Standard deduction	-\$193.00
- Medical expenses	\$0.00
-Dependent care expenses	\$0.00
=Adjusted gross income	\$2084.00
<u>SHELTER COSTS</u>	
Rent	\$444.00
Property Taxes	\$0.00
Homeowner’s Insurance	\$0.00
+ SUA	\$921.00
Total shelter costs	\$1365.00
<u>SHELTER HARDSHIP</u>	
Shelter costs	\$1365.00
Less 50% of adjusted gross income	-\$1042.00

= Total shelter hardship (max \$569.00 if not disabled or elderly)	\$323.00
ADJUSTED NET INCOME	
Adjusted gross income	\$2084.00
Less shelter hardship	-\$323.00
Net Adjusted Income (NAI)	\$1761.00
BENEFIT CALCULATION	
Thrifty Food Plan for three persons	\$740.00
Less 30% of NAI (rounded up to nearest whole dollar)	\$529.00
SNAP award	\$211.00

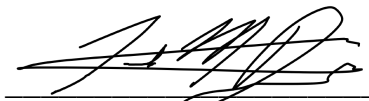
The Department correctly determined the Appellant's SNAP award is \$211.00 per month effective [REDACTED], 2023.

DISCUSSION

The Appellant testified during the hearing that she pays out of pocket for medical treatments her children receive at [REDACTED] (aka "[REDACTED]") and [REDACTED]. The Appellant provided receipts from [REDACTED] (Appellant's Exhibit B) after the hearing. These receipts were dated [REDACTED], 2023, and therefore could not have been used in the Appellant's SNAP calculation made by the Department on [REDACTED], 2023. As a result, they have not been considered as part of this hearing decision. However, the Department is encouraged to review the receipts submitted and determine if they could be used as medical expenses toward the Appellant's current SNAP benefit calculation.

DECISION

The Appellant's appeal is **DENIED**.



Joseph Davey
Administrative Hearing Officer

CC: Carolyn Jones, Department's Representative, Hartford Regional Office
Josephine Savastra, SSOM, DSS, Hartford Regional Office
Lindsey Collins, SSOM, DSS, Hartford Regional Office
Mathew Kalarickal, SSOM, DSS, Hartford Regional Office
David Mazzone, SSOM, DSS, Hartford Regional Office
Wilfredo Medina, Eligibility Services Supervisor, DSS, Hartford 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.