

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

██████████, 2023
Signature Confirmation

Client ID #: ██████████
Case #: ██████████
Request #: 226322

NOTICE OF DECISION

PARTY

██████████
██████████
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██████████

PROCEDURAL BACKGROUND

On ██████████, 2023, the Department of Social Services (the “Department”) sent ██████████ (the “Appellant”) a Notice of Action (“NOA”) discontinuing her Supplemental Nutrition Assistance Program (“SNAP”) benefits, effective ██████████ 2023.

On ██████████ 2023, the Appellant requested an administrative hearing to contest the Department’s decision to discontinue 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, in accordance with sections 17b-60, 17b-61, and 4-176e to 4-184 inclusive, of the Connecticut General Statutes, OLCRAH held a telephonic administrative hearing.

The following individuals participated in the hearing:

██████████, Appellant
Chris Filek, Department’s Representative
Kristin Haggan, Hearing Officer

STATEMENT OF THE ISSUE

The issue is whether the Department correctly discontinued the Appellant's SNAP benefits effective [REDACTED] 2023, for failure to complete a redetermination.

FINDINGS OF FACT

1. The Department determined the Appellant to be eligible for benefits under the SNAP program with the certification period beginning [REDACTED] 2022, through [REDACTED] 2023. (*Department's Testimony; Exhibit 4: Returned Mail - Notice of Renewal of Eligibility*)
2. The Appellant received a monthly SNAP benefit of \$475 for a household of ten members for the period of [REDACTED] 2023, through [REDACTED] 2023. (*Department's Testimony, Exhibit 3: NOA*)
3. The Appellant's household currently consists of two people: herself and her significant other. There are currently no children living in the home. The Appellant's significant other receives a monthly Social Security ("SSI") benefit of \$914.00. There is no other household income. (*Appellant's Testimony*)
4. On [REDACTED] 2023, the Department issued the Appellant a Notice of Renewal of Eligibility ("W-1ERL") with a Renewal of Eligibility Form ("W-1ER") to [REDACTED]. The W-1ERL requested that the Appellant return the enclosed W-1ER form to the Department by [REDACTED] 2023, to prevent a delay in the renewal process. The W-1ERL informed the Appellant that the form and all required proofs must be submitted by [REDACTED], 2023, or the SNAP benefits may be discontinued. (*Department's Testimony, Exhibit 4*)
5. On [REDACTED] 2023, the Department issued the Appellant a Warning Notice to [REDACTED]. The notice informed the Appellant that if she did not return the W1ER, complete the interview, and provide verifications, it would discontinue her SNAP benefits effective [REDACTED], 2023. (*Department's Testimony; Exhibit 2: Warning Notice*)
6. On [REDACTED] 2023, the Department reviewed a task that was received in the Impact system on [REDACTED] 2023, and contained the Appellant's mail that was returned from the United States Postal Service ("USPS") with a forwarding address of [REDACTED]. (*Exhibit 4, Exhibit 1: Case Notes*)
7. On [REDACTED], 2023, [REDACTED], 2023, and [REDACTED] 2023, the Appellant called the Department and requested to reset her password. The Appellant had issues logging in to her MyAccount to complete an online renewal. (*Appellant's Testimony, Exhibit 1: Case Notes*)

8. On [REDACTED] 2023, the Department reviewed a task that was received in the Impact system on [REDACTED], 2023, and contained the Appellant's mail that was returned from the USPS with a forwarding address of [REDACTED]. (*Exhibit 4, Exhibit 1: Case Notes*)
9. The Department did not update the Appellant's mailing address when it received return mail from the post office. (*Department's Testimony*)
10. On [REDACTED], 2023, the Department issued the Appellant an NOA informing her that it was discontinuing her SNAP benefit effective [REDACTED] 2023, for failure to submit the renewal form and failure to complete the renewal process. The NOA was sent to [REDACTED]. (*Exhibit 3: NOA*)
11. On [REDACTED] 2023, the Appellant called the Benefit Center and informed the worker that she was having trouble completing an online renewal and requested to do it by phone. The Department informed the Appellant that a renewal cannot be completed by phone as a signature is needed for the renewal to be considered completed. The Department informed the Appellant that she could come into the office to complete a renewal, or that another form could be mailed to her. The Appellant declined and asked to speak with a supervisor. The Department noted that the Appellant's household size had decreased as her children were no longer in the home. (*Department's Testimony, Exhibit 1*)
12. On [REDACTED] 2023, the Department reviewed the Appellant's case with a supervisor and determined that the SNAP would remain closed because the renewal form was not completed, and the Department would need to review the Appellant's current residency once it received the renewal form from her. (*Department's Testimony, Exhibit 1*)
13. The Appellant did not attempt to visit her local DSS office to complete the renewal in person. (*Appellant's Testimony*)
14. The Appellant has a caseworker who helps her complete forms. The Appellant's caseworker was unable to go to the DSS office to get a renewal form. (*Appellant's Testimony*)
15. The issuance of this decision is timely under Title 7 of Code of Federal Regulations § 273.15, which states that a decision must be reached, and the household notified within 60 days of receipt of a request for a fair hearing. The Appellant requested an administrative hearing on [REDACTED] 2023; therefore, this decision is due no later than [REDACTED] 2024. (*Hearing Record*)

CONCLUSIONS OF LAW

1. Section 17b-2(7) of the Connecticut General Statutes authorizes the Commissioner of the Department of Social Services to administer the SNAP program in accordance with federal law.

The Department has the authority to administer the SNAP.

2. Title 7 of the Code of Federal Regulations (“C.F.R”) § 273.10(f) provides the following: Certification periods. The State agency must certify each eligible household for a definite period of time. State agencies must assign the longest certification period possible based on the predictability of the household's circumstances. The first month of the certification period will be the first month for which the household is eligible to participate. The certification period cannot exceed 12 months except to accommodate a household's transitional benefit period and as specified in paragraphs (f)(1) and (f)(2) of this section.

The Department correctly determined the household eligible for a twelve (12) month SNAP certification period beginning [REDACTED] 2022, and ending [REDACTED] 2023.

3. 7 C.F.R. § 273.14(a) provides the following: General. No household may participate beyond the expiration of the certification period assigned in accordance with § 273.10(f) without a determination of eligibility for a new period. The State agency must establish procedures for notifying households of expiration dates, providing application forms, scheduling interviews, and recertifying eligibility households prior to the expiration of certification periods. Household must apply for recertification and comply with interview and verification requirements.

7 C.F.R. § 273.14(b)(2) provides that the State agency must develop an application to be used by households when applying for recertification. It may be the same as the initial application, a simplified version, a monthly reporting form, or other method such as annotating changes on the initial application form. A new household signature and date is required at the time of application for recertification. The provisions of §273.2(c)(7) regarding acceptable signatures on applications also apply to applications used at recertification. The recertification process can only be used for those households which apply for recertification prior to the end of their current certification period, except for delayed applications as specified in paragraph (e)(3) of this section. The process, at a minimum, must elicit from the household sufficient information that, when added to information already contained in the casefile, will ensure an accurate determination of eligibility and benefits. The State agency must notify the applicant of information which is specified in §273.2(b)(2) and provide the household with a notice of required verification as specified in §273.2(c)(5).

The Department correctly sent the Appellant an application for recertification of SNAP benefits on [REDACTED], 2023.

4. 7 C.F.R. § 273.12 (a)(1) provides for reporting requirements and the household's responsibility to report changes. Monthly reporting households are required to report as provided in § 273.21. Quarterly reporting households are subject to the procedures as provided in paragraph (a)(4) of this section. Simplified reporting households are subject to the procedures as provided in paragraph (a)(5) of this section. Certified change-reporting households are required to report the following changes in circumstances:
- (ii) All changes in household composition, such as the addition or loss of a household member.
 - (iii) Changes in residence and the resulting change in shelter costs.

The Appellant did not report her change of address to the Department until after the application for recertification of SNAP benefits had been mailed to her previous address.

DISCUSSION

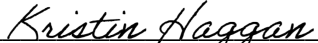
The Appellant did not notify the Department of her address change prior to [REDACTED] 2023, when the renewal form was mailed to her. Additionally, the Department received no return mail from the USPS before the renewal form was mailed to the Appellant. On [REDACTED] 2023, the Department mailed the renewal form to the only address that it had for the Appellant at that time.

It is the household's responsibility to report changes in address and household composition to the Department timely to avoid disruption of benefits. The Appellant did not report her change of address to the Department until [REDACTED], 2023, on the date that the SNAP benefit closed.

Although the Appellant had issues submitting her renewal form online, the Department informed her of other options for submitting the renewal form, such as coming to the office or having another form mailed to her. As of the date of the hearing the Appellant had not submitted a completed renewal form to the Department.

DECISION

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



Kristin Haggan
Fair Hearing Officer

CC: Brian Sexton, SSOM, DSS Middletown Regional Office
Chris Filek, FH Liaison, DSS Middletown 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.