

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

████████ 2024
Signature Confirmation

████████
████████
Request #: 238317

NOTICE OF DECISION

PARTY

████████
████████
████████

PROCEDURAL BACKGROUND

On █████ 2024, the Department of Social Services (the “Department”) issued █████ (the “Appellant”) a Notice of Action (“NOA”) denying her request for replacement of benefits under the Supplemental Nutritional Assistance Program (“SNAP”) due to loss of benefits from a power outage.

On █████ 2024, the Appellant requested an administrative hearing to contest the Department’s decision to deny her replacement of SNAP benefits.

On █████ 2024, the Office of Legal Counsel, Regulations, and Administrative Hearings (“OLCRAH”) issued a notice scheduling the administrative hearing for █████ 2024.

On █████ 2024, in accordance with sections 17b-60, 17-61 and 4-176e to 4-184 inclusive, of the Connecticut General Statutes, OLCRAH held an in person administrative hearing.

The following individuals participated in the hearing:

████████ Appellant
████████, Case Manager
Kellee Beatie, Department’s Representative, DSS Supervisor
Amy MacDonough, Hearing Officer

The record remained open for the Appellant and the Department to submit additional documentation. On [REDACTED] 2024, the Appellant provided the following documents: phone log, Medical Note Letter to [REDACTED], Letter from [REDACTED], Termination Notice from [REDACTED], and a copy of W-1225. On [REDACTED] 2024, the Department provided the following information: Case Notes, Document Search, W-1226 Proof of Food Loss received on [REDACTED], 2024, and [REDACTED] 2024, W-1225 Request for Replacement of Food Purchased with SNAP Benefits received on [REDACTED] 2024, and [REDACTED] 2024, Change Reporting received on [REDACTED] 2024, and [REDACTED] 2024. On [REDACTED] 2024, the hearing record closed.

STATEMENT OF THE ISSUE

The issue is whether the Department correctly denied the Appellant's request for replacement of food lost due to a household misfortune or disaster under the SNAP.

FINDINGS OF FACT

1. The Appellant receives \$291.00 monthly in SNAP benefits for a household of one. (*Appellant's Testimony*)
2. On [REDACTED] 2024, [REDACTED] mailed a Termination Notice to the Appellant stating her service is scheduled for disconnection on or after [REDACTED] 2024, due to past due status. (*Exhibit D: [REDACTED] Termination Notice*)
3. On [REDACTED] 2024, [REDACTED] disconnected the Appellant's electricity due to non-payment. (*Appellant's Testimony; Exhibit 2: Change Report; Exhibit 4: Request for Replacement of Food Purchased with SNAP Benefits*)
4. The Appellant was out of town from [REDACTED] 2024, through [REDACTED] 2024. (*Appellant's Testimony*)
5. On [REDACTED] 2024, [REDACTED] restored the Appellant's electricity because she provided the utility company with a Medical Note preventing the disconnection of her electricity due to medical issues. (*Appellant's Testimony; Exhibit B: [REDACTED] Information regarding Medical Notes on NPU Accounts*)
6. On [REDACTED] 2024, the Appellant signed the Request for Replacement of Food Purchased with SNAP Benefits ("W-1225") and the Proof of Food Loss – Collateral Contact Form ("W-1226") to report the loss of SNAP benefits due to a power outage. (*Appellant's Testimony*)
7. Between [REDACTED] 2024, and [REDACTED], 2024, the Appellant made multiple calls to the Department. (*Appellant's Testimony; Exhibit 6: Case Notes; Exhibit A: Call Logs*)

8. On [REDACTED] 2024, the Appellant went to the Department's [REDACTED] and received information regarding how to claim replacement food for a power outage. (*Exhibit 6*)
9. On [REDACTED], 2024, the Department received the W-1225 and W-1226 forms from the Appellant. The Appellant reported on the forms the power outage date as of [REDACTED] 2024, and she requested a replacement of \$260.00 in lost food purchased with her SNAP benefits. (*Exhibit 8: Document Search with Client ID*)
10. On [REDACTED] 2024, [REDACTED] provided a promise letter stating they would assist the Appellant with a \$200.00 payment towards her electric bill. (*Appellant's Testimony; Exhibit C: Letter from [REDACTED]*)
11. On [REDACTED] 2024, the Department issued a Denial of Request for Replacement of Food Purchased with SNAP Benefits to the Appellant stating the reason for the denial as we did not receive your signed "Request for Replacement of Food Purchased with SNAP Benefits" form by the deadline date of [REDACTED]/2024. (*Departments Testimony; Exhibit 1: Denial of Request for Replacement of Food Purchased with SNAP Benefits*)
12. The issuance of this decision is timely under Title 7 of the Code of Federal Regulations Section 273.15(c)(1) which requires the agency issue a decision within 60 days of the request for an administrative hearing. The Appellant requested an administrative hearing on [REDACTED] 2024; therefore, this decision is due no later than [REDACTED], 2024.

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 review and determine eligibility for the SNAP.

2. 7 C.F.R. § 274.6(a)(1) provides for providing replacement issuance and states subject to the restrictions in paragraph (a)(3) of this section, State agencies shall provide replacement issuances to a household when the household reports that food purchased with Program benefits was destroyed in a household misfortune.
3. 7 C.F.R. § 274.6(a)(3)(i) provides for replacement restrictions and states replacement issuances shall be provided only if a household timely reports a loss orally or in writing. The report will be considered timely if it is made to the State agency within 10 days of the date food purchased with Program benefits is destroyed in a household misfortune.

7 C.F.R. § 274.6(a)(3)(ii) states no limit on the number of replacements shall be placed on the replacement of food purchased with Program benefits which was destroyed in a household misfortune.

7 C.F.R. § 274.6(a)(3)(iii) provides that except for households certified under 7 CFR part 280, replacement issuances shall be provided in the amount of the loss to the household, up to a maximum of one month's allotment, unless the issuance includes restored benefits which shall be replaced up to their full value.

The Appellant's power outage occurred from [REDACTED] 2024, through [REDACTED] 2024.

4. 7 C.F.R. § 274.6(a)(4)(i) provides for household statement of loss and states prior to issuing a replacement, the State agency shall obtain from a member of the household a signed statement attesting to the household's loss. The required statement may be mailed to the State agency if the household member is unable to come into the office because of age, handicap or distance from the office and is unable to appoint an authorized representative.

7 C.F.R. § 274.6(a)(4)(ii) provides if the signed statement or affidavit is not received by the State agency within 10 days of the date of report, no replacement shall be made. If the 10th day falls on a weekend or holiday, and the statement is received the day after the weekend or holiday, the State agency shall consider the statement timely received.

The Appellant was present at the Department's Regional Office on [REDACTED] 2024, and was advised how to file for replacement of lost food due to a power outage.

The Department received the signed W-1225 and W-1226 forms on [REDACTED] 2024.

5. 7 C.F.R. § 274.6(a)(6)(ii) provides that prior to replacing destroyed food that was purchased with Program benefits, the State agency shall determine that the destruction occurred in a household misfortune or disaster, such as, but not limited to, a fire or flood. This shall be verified through a collateral contact, documentation from a community agency including, but not limited to, the fire department or the Red Cross, or a home visit.

The Appellant's food was destroyed due to a power outage lasting more than 4 hours.

6. 7 C.F.R. § 274.6(a)(5)(i) provides for time limits for making issuance replacements and states replacement issuances shall be provided to households within 10 days after report of loss or within two (2) working days of receiving the signed household statement required in paragraph (a)(4) of this section, whichever date is later.

7 C.F.R. § 274.6(a)(5)(iii) provides the household shall be informed of its right to a fair hearing to contest the denial or delay of a replacement issuance. Replacements shall not be made while the denial or delay is being appealed.

On [REDACTED] 2024, the Department correctly denied the Appellant's request for replacement of food purchased with SNAP benefits because she did not make the request timely.

DISCUSSION

With [REDACTED] 2024, being the date the food was destroyed, the request for replacement, either verbally or in writing, would need to have been received by the Department by [REDACTED] [REDACTED] 2024. The Appellant reported the loss of food on [REDACTED], 2024, and the Department received the completed forms, W-1225 and W-1226, on [REDACTED], 2024, more than 10 days from the date the food was destroyed.

While the Appellant did experience a loss of food purchased by the SNAP benefits due to a household power outage, the Appellant did not request the replacement timely; therefore, the Department correctly denied the Appellant's request for replacement of lost food.

DECISION

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



Amy MacDonough
Fair Hearing Officer

CC: Matthew Kalarickal, Operations Manager, DSS, Norwich Regional Office
Kellee Beattie, Supervisor, Hearing Liaison

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.