

#### State of West Virginia DEPARTMENT OF HEALTH AND HUMAN RESOURCES Office of Inspector General Board of Review 4190 Washington Street, West Charleston, WV 25313

Earl Ray Tomblin Governor

July 24, 2012

Rocco S. Fucillo Cabinet Secretary

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Dear -----:

Attached is a copy of the Findings of Fact and Conclusions of Law on your hearing held July 24, 2012. Your hearing request was based on the Department of Health and Human Resources' decision to reduce your eligibility for Supplemental Nutrition Assistance Program [SNAP] benefits.

In arriving at a decision, the State Hearing Officer is governed by the Public Welfare Laws of West Virginia and the rules and regulations established by the Department of Health and Human Resources. These same laws and regulations are used in all cases to assure that all persons are treated alike.

Eligibility and benefit levels for SNAP benefits are based on current policy and regulations. Some of these regulations state that all mandatory individuals must register for employment with WORKFORCE WV/BEP within 30 days of the date of the original approval, unless exempt, and every twelve (12) months thereafter. Individuals who fail to register by the due date required are subject to a SNAP penalty which will cause a reduction in SNAP for a period of time. (West Virginia Income Maintenance Manual §13.5, A, and 13.6, A, 2)

The information submitted at your hearing supports that the Claimant's sister failed to register with WORKFORCE WV/BEP within the required timeframe.

It is the decision of the State Hearing Officer to **uphold** the action of the Department in reducing your SNAP benefits.

Sincerely,

Cheryl Henson State Hearing Officer Member, State Board of Review

cc: Erika H. Young, Chairman, Board of Review / Sam Swisher, Kanawha DHHR

#### WEST VIRGINIA DEPARTMENT OF HEALTH AND HUMAN RESOURCES BOARD OF REVIEW

IN RE: -----,

#### Claimant,

v.

#### **ACTION NO.: 12-BOR-1536**

#### WEST VIRGINIA DEPARTMENT OF HEALTH AND HUMAN RESOURCES,

**Respondent.** 

#### **DECISION OF STATE HEARING OFFICER**

#### I. INTRODUCTION:

This is a report of the State Hearing Officer resulting from a Fair Hearing for -----. This hearing was held in accordance with the provisions found in Chapter 700 of the West Virginia Department of Health and Human Resources' Common Chapters Manual. This hearing was convened on July 24, 2012.

### II. PROGRAM PURPOSE:

The purpose of the Supplemental Nutrition Assistance Program (SNAP) is to provide an effective means of utilizing the nation's abundance of food "to safeguard the health and wellbeing of the nation's population and raise levels of nutrition among low-income households." This is accomplished through the issuance of benefits to households who meet the eligibility criteria established by the Food and Nutrition Service of the U.S. Department of Agriculture.

#### **III. PARTICIPANTS:**

-----, Claimant

Sam Swisher, Department representative

Presiding at the hearing was Cheryl Henson, State Hearing Officer and a member of the State Board of Review.

### IV. QUESTION TO BE DECIDED:

The question to be decided is whether the Department was correct in its decision to reduce the Claimant's SNAP benefits.

### V. APPLICABLE POLICY:

West Virginia Income Maintenance Manual§ 13.5, A, 1

## VI. LISTING OF DOCUMENTARY EVIDENCE ADMITTED:

#### **Department's Exhibits:**

D-1 Notice of Decision dated June 14, 2012

#### **Claimant's Exhibits:**

None

### VII. FINDINGS OF FACT:

- 1) The Claimant was receiving SNAP benefits during April 2012 when she reported during a review that her sister, -----, was living in her household. She was informed at that time that her sister must register with the Bureau of Employment Programs (BEP) within a specified period of time or she would be sanctioned.
- 2) The Claimant's sister did not register timely and subsequently the Claimant's SNAP benefits were reduced due to the imposition of a three (3) month penalty period.
- 3) The Claimant agrees that her sister did not register within the timeframe allowed by the Department. She explained that she was working long hours at this time and that her sister was functioning as her babysitter and did not have time during normal business hours to register with BEP. She stated that she did not notify the Department of her sister's difficulty in registering and ask for assistance or guidance prior to the Department's action. She added that she later learned from the Department that her sister could register online via the internet, and contends she should not be sanctioned because the Department did not instruct her that individuals may opt to register with BEP in this manner.
- 4) The Department contends that it acted correctly in applying a first-offense sanction against the Claimant's SNAP benefits.
- 5) The West Virginia DHHR's Income Maintenance Manual §13.5, A, 1, provides that all mandatory individuals must register for employment with WORKFORCE WV/BEP within 30 days of the date of the original approval, unless exempt according to Section 13.2. Recipients

must also register every twelve (12) months thereafter, regardless of the length of time that BEP considers the registration valid. A recipient who fails to register by the due date established on the Department's notification letter is subject to a SNAP penalty.

### VIII. CONCLUSIONS OF LAW:

- 1) Policy specifies that non-exempt individuals must register with BEP within 30 days of the date of the original approval, and that an individual who fails to register by the due date established is subject to a SNAP penalty.
- 2) The totality of the evidence supports that the Claimant's sister was required to register with BEP after she was added to the Claimant's SNAP benefits. She failed to do so within the specified timeframe.
- 3) Based on the information provided during this hearing, the Department was correct in its decision to apply a penalty against the Claimant due to her sister's failure to register with BEP within the required timeframe.

## IX. DECISION:

It is the decision of the State Hearing Officer to **uphold** the action of the Department in terminating the Claimant's SNAP benefits.

## X. RIGHT OF APPEAL:

See Attachment

## XI. ATTACHMENTS:

The Claimant's Recourse to Hearing Decision

Form IG-BR-29

# ENTERED this 24<sup>th</sup> Day of July 2012.

Cheryl Henson State Hearing Officer