

OHIO DEPT. OF JOB AND FAMILY SERVICES  
BUREAU OF STATE HEARINGS  
P.O. BOX 182825  
COLUMBUS, OHIO 43218-2825

**Ohio Department of Job and Family Services  
Bureau of State Hearings**

**State Hearing Decision**

<u>Appeal</u>	<u>Program</u>	<u>Disposition</u>	<u>Compliance</u>
3869195	FA	SUS	Required

Request Date: 05/08/2024

Hearing Date: 05/28/2024

Hearing Officer: Philip Kaplan

Mail Date: 06/03/2024

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## **Issue**

Appeal Number: 3869195, Food Assistance, Denial

The Appellant requested this State Hearing to express disagreement with the County Department of Job and Family Services' (CDJFS) denial of the January 22, 2024 application for Supplemental Nutrition Assistance Program (SNAP), also known as Food Assistance (FA), benefits for Appellant's Assistance Group (AG), as announced in the May 6, 2024 Notice of Action, due to the CDJFS determining that the Appellant failed to provide income verifications requested and/or needed by the CDJFS. After consideration of the testimony and evidence provided at the State Hearing, and in conjunction with the applicable policy, I find that the CDJFS' May 6, 2024 denial of the January 22, 2024 application for SNAP/FA benefits for the Appellant's AG was incorrect and that this appeal should be sustained with compliance.

## **Procedural Matters**

The Appellant participated in the May 28, 2024 virtual State Hearing via telephone. The CDJFS was represented by Hearing Specialist Ron Davis. All parties were sworn in.

## **Findings of Fact**

1. The Appellant's FA AG is a size of three (3) and consists of the Appellant, the Appellant's twenty-six (26) year old adult child, and the Appellant's twenty-two (22) year old adult child.
2. On January 22, 2024, the Appellant submitted an application for SNAP/FA benefits for the Appellant's AG.
3. On March 8, 2024, the CDJFS mailed the Appellant a JFS 07105 Verification Request Checklist, asking that the Appellant provide various verifications, including verification of income and expenses for the Appellant, to complete the processing of the January 22, 2024 SNAP/FA application. The requested verifications were stated to be due to the CDJFS by April 15, 2024.
4. On April 15, 2024, the CDJFS mailed the Appellant an ODM 07220 Medicaid Eligibility Review Verification Request List, asking that the Appellant provide various verifications, including verification of income and expenses for the Appellant, to complete the processing of the January 22, 2024 SNAP/FA application. The April 15, 2024 ODM 07220 Medicaid Eligibility Review Verification Request List indicated that the Appellant's requested verification were overdue, that this was a second request for the verifications, and that the requested verifications were now due to the CDJFS by April 25, 2024

5. On April 5, 2024, April 17, 2024, and April 22, 2024, the Appellant provided statements and documents, via upload to the portal and via facsimile, which were received by the CDJFS.
6. The CDJFS did not make any follow up contact with the Appellant regarding the sufficiency of the verifications which had been submitted by the Appellant, or the CDJFS' apparent determination that the Appellant had failed to provide the requested verifications.
7. On May 6, 2024, the CDJFS mailed a Notice of Action to the Appellant advising that the January 22, 2024 application for SNAP/FA benefits for the Appellant's AG was being denied due to the Appellant failing to provide requested income and expense verifications.
8. The Appellant's State Hearing Request was received by the Bureau of State Hearings on May 8, 2024, regarding the denial of the January 22, 2024 application for SNAP/FA benefits for the Appellant's AG, as announced in the May 6, 2024 Notice of Action.

## **Conclusion of Policy**

### **Policy**

Under the Ohio Administrative Code, the County Agency representative is the advocate for the County Agency's case. He or she is responsible for explaining the reasons for the County Agency's action, citing the regulations upon which the action was based, providing relevant case information and documents, and answering relevant questions. Ohio Adm. Code 5101:6-6-02, 7 C.F.R. 273.10 and 7 C.F.R. 273.13. It is the responsibility of the County Agency to determine an assistance group's program eligibility and benefit level. Income, utility expenses, child support and the composition of an Assistance Group are all standard verifications which are necessary for normal application processing. Ohio Adm. Code 5101: 4-2-09 and 7 C.F.R. 273.2.

The Hearing Officer's findings of fact shall be based exclusively on the evidence introduced at the hearing. It is the County Agency's burden to show by a preponderance of the evidence that its action or inaction was in accordance with the Ohio Administrative Code. State hearing decisions are binding on the County Agency for the individual case for which the decision was rendered. Ohio Adm. Code 5101:6-7-01.

Verifications are used to support and document what was reported on an individual's application for food assistance, during the application process, and to provide clarification on any questionable information. The County Agency shall allow assistance groups at least ten (10) days to provide required verifications. The assistance group has primary responsibility for providing verification to support its statements on the application and resolve any questionable information. An

assistance group may supply verification in person, through the mail, by fax, electronically, or through an authorized representative. The County Agency shall not require the assistance group to present verifications in person. The County Agency must assist the assistance group in obtaining verification, provided the assistance group has not refused to cooperate. If it is difficult or impossible for the assistance group to obtain verification in a timely manner, or the County Agency can obtain the verification faster, the County Agency has an obligation to offer assistance to the assistance group. Ohio Adm. Code 5101:4-2-09; 7 C.F.R. 273.2.

The assistance group is required to provide verification of gross income, shelter payments, utility expenses, medical expenses for disabled or elderly members, dependent care expenses, alien status, Social Security numbers, residency, identity, disability, student income, physical or mental disability: student exemption status, child support payments, hours of employment for able-bodied adults without dependents, months of food assistance receipt in another state for able-bodied adults without dependents, and assistance group composition for normal application processing. Ohio Adm. Code 5101:4-2-09; 7 C.F.R. 273.2.

If the assistance group refuses to cooperate with the County Agency in completing any part of the application process, the application shall be denied at the time of refusal. **For a determination of refusal to be made, the assistance group must be able to cooperate, but clearly demonstrate it will not take the actions required to complete the application process.** For example, to be denied for refusal to cooperate, an assistance group must refuse to be interviewed, not merely fail to appear for the interview. If there is any question as to whether the assistance group has merely failed to cooperate, as opposed to refused to cooperate, the assistance group shall not be denied, and the agency shall provide assistance in obtaining required verification. The assistance group shall also be determined ineligible if it refuses to cooperate in any subsequent review of its eligibility, including reviews generated by reported changes and reapplications. Once denied or terminated for refusal to cooperate, the assistance group may reapply but shall not be determined eligible until it cooperates with the County Agency. The County Agency shall not determine the assistance group ineligible when a person outside the assistance group fails to cooperate with a request for verification. The County Agency shall not consider individuals identified as non-assistance group members under rule 5101:4-2-03 of the Administrative Code as individuals outside the assistance group. Ohio Adm. Code 5101:4-2-01(H); 7 C.F.R. 273.14 (Emphasis added).

## **Analysis**

Appeal Number: 3869195, Food Assistance, Denial

The record in this matter indicates that the Appellant's FA AG is a size of three (3) and consists of the Appellant, the Appellant's twenty-six (26) year old adult child, and the Appellant's twenty-two (22) year old adult child. Records indicate that on January 22, 2024, the Appellant submitted an application for SNAP/FA benefits for the Appellant's AG. Per the evidence provided, on March 8, 2024, the CDJFS mailed the Appellant a JFS 07105 Verification Request Checklist, asking that the Appellant provide various verifications, including verification of income and expenses for the Appellant, to complete the processing of the January 22, 2024 SNAP/FA application. The requested verifications were stated to be due to the CDJFS by April 15, 2024.

Having either not received the requested verifications, or having found the verifications submitted by the Appellant to be insufficient, records demonstrate that on April 15, 2024, the CDJFS mailed the Appellant an ODM 07220 Medicaid Eligibility Review Verification Request List, asking that the Appellant provide various verifications, including verification of income and expenses for the Appellant, to complete the processing of the January 22, 2024 SNAP/FA application. The April 15, 2024 ODM 07220 Medicaid Eligibility Review Verification Request List indicated that the Appellant's requested verification were overdue, that this was a second request for the verifications, and that the requested verifications were now due to the CDJFS by April 25, 2024.

It is undisputed that on April 5, 2024, April 17, 2024, and April 22, 2024, the Appellant provided statements and documents, via upload to the portal and via facsimile, which were received by the CDJFS. As far as the Appellant knew, she had complied, repeatedly, with the requests of the CDJFS for verification documentation. Unknown to the Appellant was that the CDJFS did not find what the Appellant submitted to be thorough and/or sufficient. The reason that fact was apparently unknown to the Appellant was because the CDJFS did not make any follow up contact with the Appellant regarding the sufficiency of the verifications which had been submitted by the Appellant, or the CDJFS' apparent determination that the Appellant had failed to provide the requested verifications.

Instead of seeking clarification and/or contacting the Appellant for additional information, records show that on May 6, 2024, the CDJFS mailed a Notice of Action to the Appellant advising that the January 22, 2024 application for SNAP/FA benefits for the Appellant's AG was being denied due to the Appellant failing to provide requested income and expense verifications.

It is clear from the evidence that the Appellant provided verification documents to the CDJFS on three (3) separate dates, April 5, April 17, and April 22, 2024, via upload to the portal and/or via facsimile, all of which were apparently received by the CDJFS. As noted above, the CDJFS did not make any follow up contact with the Appellant regarding the verifications which had been submitted by the Appellant, or the CDJFS' apparent determination that the Appellant had failed to provide the requested verification.

Upon a review of the testimony and evidence in this matter, there is nothing in the record to show that the Appellant refused to cooperate with the CDJFS' verification requests, or that the Appellant refused to provide the requested verifications to the CDJFS. Based upon the testimony of the Appellant and the CDJFS representative, as well as the records provided, it would appear that the Appellant did not refuse to provide the requested verifications. In my opinion, it is not even the slightest bit questionable as to whether the Appellant failed to submit verifications reportedly requested by the CDJFS. Instead, the Appellant provided the verifications she believed were being requested by the CDJFS.

I think that it is abundantly clear that the Appellant did not refuse to cooperate with the CDJFS in obtaining or providing any requested verifications needed to complete the processing of the January 22, 2024 application for SNAP/FA benefits for the Appellant's AG. In fact, the preponderance of the evidence in this case does not show that the CDJFS' May 6, 2024 denial of the January 22, 2024 application for SNAP/FA benefits for the Appellant's AG was correct. The Ohio Administrative Code clearly states that SNAP/FA benefits cannot be denied or terminated simply because a SNAP/FA recipient failed to provide requested verifications. The Appellant must refuse to submit the verification in order for benefits to be denied or terminated. As noted above, the preponderance of the evidence does not show that the Appellant refused to submit the requested verifications to the CDJFS. Therefore, Appeal Number 3869195 should be sustained with compliance.

### **Hearing Officer's Recommendation**

Appeal Number: 3869195

Based on the record and Agency policy before me, I recommend that Appeal Number 3869195 (FA) be SUSTAINED with compliance required for the CDJFS. To comply, the CDJFS shall:

1. Rescind the May 6, 2024 denial of the Appellant's January 22, 2024

application for SNAP/FA benefits for the Appellant's AG.

2. Restore the January 22, 2024 application for SNAP/FA benefits for the Appellant's AG to pending status.
3. Send the appropriate verification requests to the Appellant for any necessary verifications still needed by the CDJFS to complete the processing of the Appellant's January 22, 2024 SNAP/FA application and redetermine the SNAP/FA eligibility of the Appellant's AG, back to the January 22, 2024 date of application.
4. Issue any SNAP/FA benefit supplements which are due and owing the Appellant's AG as a result of this decision.
5. Issue proper Notice(s) of Action regarding the SNAP/FA eligibility of the Appellant's AG, back to the application date of January 22, 2024, which will afford Appellant's AG proper appeal rights.

### **Final Administrative Decision and Order**

Regarding Appeal Number 3869195, since I find that the Hearing Officer's recommendations are supported by policy and the evidence, I hereby adopt the recommendations. Therefore, Appeal Number 3869195 (FA) is hereby SUSTAINED with compliance required for the CDJFS.

Compliance is required within ten (10) days, but in no event later than sixty (60) calendar days from the date of the hearing request. Compliance must be promptly reported to the Bureau of State Hearings via the "State Hearing Compliance," JFS 04068. Documentation of the compliance action must be attached to the form. Ohio Adm. Code 5101:6-7-03(B); 7 C.F.R. 273.15.

A Ruben Lopez

06/03/2024

### **Notice to Appellant**

This is the official decision of your state hearing. It informs you of the decision and order in your case. Papers and materials introduced at the hearing, known as "exhibits," make up the hearing record. The hearing record is maintained by the Ohio Department of Job and Family Services. If you would like a copy of the official record, please call the ODJFS hotline at 1-866-635-3748.

Important Notice: If you disagree with this decision, you, or your authorized representative, may request an administrative appeal about this notice. Contact us using one of the following methods:

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Fax - (614) 728-9574

Mail - ODJFS Bureau of State Hearings, P.O. Box 182825, Columbus, Ohio 43218-2825.

Your administrative appeal request should include a copy of this notice and the reason you think it is wrong. Your written request must be received by the Bureau of State Hearings within 15 calendar days from the mailing date of this notice. (If the 15th day falls on a weekend or holiday, this deadline is extended to the next work day.)

Unless you request an administrative appeal, this notice is a final and binding decision about your state hearing request. Any fair hearing benefits you receive will end. This may also mean the local agency can go ahead with the action it was planning to take. Additionally, you may have to pay back the continuing benefits you received as part of the state hearing process.

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## **Appendix**

### **Appellant Exhibits**

1. Request-SH (1 page)
2. No Income. Assistance by Parents as discussed in my Interview (1 page)

### **Agency Exhibits**

- A. Appeal Summary (21 pages)