

# 1995-1996

## Digest of Connecticut Administrative Reports to the Governor

### **Department of Social Services**

JOYCE A. THOMAS, Commissioner

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Established - 1993

Statutory Authority - Title 17b, Conn. Gen. Stat.

Central Office - 25 Sigourney Street, Hartford, Conn. 06106

Number of Employees - 2,444

Recurring Operating Expenses - \$152,397,756

(Program Expenses - \$3,081,760,889)

Structure - Commissioner's Office, Regional Administration,  
Administrative Operations, Programs Operations,  
Health Care Financing

### **Agency Mission**

The mission of the Department of Social Services is to serve families and individuals who need assistance in maintaining or achieving their full potential for self-direction, self-reliance and independent living.

### **Statutory Responsibility**

The Department of Social Services [DSS] is designated as the state agency for the administration of (1) the child care development block grant pursuant to the Child Care and Development Block Grant Act of 1990; (2) the Connecticut energy assistance program pursuant to the Low Income Home Energy Assistance Act of 1981; (3) programs for the elderly pursuant to the Older Americans Act; (4) the state plan for vocational rehabilitation services; (5) the refugee assistance program pursuant to the Refugee Act of 1980; (6) the legalization impact assistance program pursuant to the Immigration Reform and Control Act of 1986; (7) the aid to families with dependent children [AFDC] program pursuant to Title IV-A of the Social Security Act; (8) the JOBS program pursuant to Title IV-F of the Social Security Act; (9) the Medicaid program pursuant to Title XIX of the Social Security Act; (10) the food stamp program pursuant to the Food Stamp Act of 1977; (11) the state supplement to the

Supplemental Security Income Program pursuant to the Social Security Act; (12) the state child support enforcement plan pursuant to Title IV-D of the Social Security Act; and (13) the state social services plan for the implementation of the social services block grants and community services block grants pursuant to the Social Security Act. The department is designated a public housing agency for the purpose of administering the Section 8 existing certificate program and the housing voucher program pursuant to the Housing Act of 1937.

### **Public Service**

The Department of Social Services assists many different people, with wide-ranging needs, using a variety of programs— each designed to deliver caring help in a cost-efficient manner. The mission of the Bureau of Rehabilitation Services is to create, through the provision of individualized rehabilitation services, an environment which enables persons with disabilities, especially those with the most severe disabilities, to become productive and independent.

The bureau's vocational rehabilitation program provides services to individuals with physical and/or mental disabilities which significantly affect their ability to find and keep a job, and who require such services in order to prepare for, find and succeed in employment.

In SFY 1995-96, the program provided services to 10,222 individuals. Services included diagnostic evaluation, vocational counseling and guidance, assistive technology, physical and mental restoration, vocational and other training services, supported employment services, and assistance in finding and maintaining employment. A total of 1,324 persons with disabilities were rehabilitated into employment, including 1,272 who entered the competitive work force; of those, 94.9 percent had severe disabilities.

Through its Disability Determination Services unit, the bureau processed 35,000 applications for Social Security Disability Insurance and Supplemental Security Income.

The Neighborhood Facilities Program provides grants from state bond funds for planning, site preparation, construction, renovation, or acquisition of facilities for child care projects, elderly centers, multi-purpose human resource centers, shelter facilities for victims of domestic violence, emergency shelters, related facilities for the homeless, shelters for victims of AIDS, and food distribution facilities. The department obtained state bond commission approval for 37 projects for a total of more than \$18,500,000.

The Emergency Food Assistance Program provides distribution of available USDA commodities to soup kitchens and shelters for on-site meal preparation. When this first priority is exhausted, commodities are made available to food pantries for household distribution to low income individuals and families. Commodities include canned fruits, vegetables, peanut butter, and canned meat and other dry products offered by the USDA.

The distribution system in place allows for the direct shipment of USDA food to the Connecticut Food Bank in New Haven. This direct method of shipment has eliminated state costs of shipping and storage. The Connecticut Food Bank coordinates and distributes the commodities through a network of seven food banks. In cooperation with the Department of Administrative Services, this department oversees the annual distribution of 523,143 pounds of food valued at \$358,419.

Under the Supplemental Nutrition Assistance Program, a total grant of \$389,120 has been allocated to purchase high protein food items to be distributed statewide to food pantries, soup kitchens and homeless shelters through a network of about 440 agencies. Approximately 513,546 pounds of purchased food are distributed annually.

In fiscal year 1995-96, Connecticut received \$4.699 million in federal Community Services Block Grant funds. The federal law requires that 90 percent of the available funding go to community action agencies; five percent is retained by the state for administration, and the balance may be used for additional programs that meet the purposes of the block grant act, at the discretion of the department.

Each community action agency has a specified service area, and together they serve the entire

state, providing services to the low-income population. The funds are used primarily by the agencies to support their core administrative expenses, including program development and planning staff, space costs, fiscal staff and audit. These funds enable the agencies to leverage other program grant funds to provide services to assist low-income residents of Connecticut through services such as employment and training, Head Start, child day care, neighborhood services, crisis intervention and recreation.

Also in the fiscal year, the department received \$30 million in federal Social Services Block Grant funds, a reduction of \$5.8 million from the fiscal year 1994-95 award. Federal awards to states are based on the national appropriation and the Department of Commerce Census Data.

The Social Services Block Grant supports programs of DSS and seven other state agencies. In addition, DSS provides grants from these funds to over 115 private non-profit and municipal service providers. Services include employment and training, child and adult day care, substance abuse counseling, home care, information and referral, recreation, case management, family planning, legal services, services for persons with disabilities and residential treatment services for children.

The department identified day care services for children, case management services, home-based services, substance services, special services for persons with disabilities, independent and transitional living services, protective services for adults, employment services, prevention and intervention, protective services for children, and special services for youth involved in, or at risk of involvement with, criminal activity as the high priority services. The agency allocated 74 percent of the funding to these categories.

The department contracted with the 14 community action agencies to accept applications and issue benefits under the Connecticut Energy Assistance Program. The program helps those households which are receiving Aid to Families with Dependent Children, Aid to the Aged, Blind or Disabled, or Refugee Assistance, and those persons with incomes at or below 150 percent of the federal poverty level, who do not have more than \$5,000 in liquid assets.

This program pays for deliverable fuels such as oil, coal, wood, or propane, or pays for utility heating benefits. Payments were made directly to the fuel vendor or utility company, unless the household's heat was included in the rent, in which case they were sent a direct payment.

Nearly 66,100 households received energy assistance, and the program expenditures, including administrative costs, reached \$28 million in combined federal and state funds. An additional \$1.4 million in State Appropriated Fuel Assistance helped 4,410 households with income between 150 and 200 percent of the federal poverty guidelines, who did not have more than \$5,000 in liquid assets, and who have at least one member of their household who was elderly and/or disabled.

In addition, the department administered \$3.4 million in federal and state bond funds for a weatherization assistance program for low income persons. Through contracts with the community action agencies, approximately 1,000 households had energy conservation measures such as heating system repairs or attic and sidewall insulation installation.

The Adult Support and Disability Services Unit administers a variety of public assistance entitlement programs (including food stamps) as well as social work services and community-based services programs for people with disabilities.

The Aid to the Aged, Blind and Disabled Program provides cash assistance to aged, blind or disabled persons whose income is insufficient to meet daily living needs. Recipients include persons with mental retardation or other disabilities who are living in group homes. To qualify, a person must have income from another source such as Supplemental Security Income, Social Security retirement or disability, a pension or wages.

The person must also be 65 years old or more, or must meet federal criteria for blindness or disability. Liquid assets cannot exceed \$1,600 for a single person or \$2,400 for a couple. If a recipient owns their home, a lien is placed. A person's eligibility is determined by comparing net income, after certain deductions, to a budget which includes rent and a personal needs allowance; the difference becomes the monthly payment under this program. An average of 29,440 people received this

payment each month; of these, 4,313 lived in group homes.

The Food Stamp Program helps low income households by providing food coupons that can be used like cash to buy food. To qualify, a household income must be below federal poverty limits for a family of that size. For most households, gross income cannot exceed 130 percent of the federal poverty level. Assets must not exceed \$2,000, and for households with two persons, one of whom is 60 or older, assets cannot exceed \$3,000.

The number of coupons varies according to household income, size and certain expenses, such as shelter or dependent care. An average 100,473 households received food stamps monthly. While benefits are totally federally funded, administrative costs are 50 percent state funded and 50 percent federally funded.

The Community Based Services Program is administered through field social workers who enable people with physical and mental disabilities to remain at home in the community. The staff provides counseling, assessment of medical, social and financial needs, and case planning and coordination. Home care services arranged and funded by the department include adult companion, adult day care, choreperson, homemaker, home-delivered meals and emergency response systems. During fiscal year 1995-96 about 1,500 people were served by this program.

The Personal Care Assistance Program provides a maximum annual grant of up to \$15,000 to eligible individuals with severe physical disabilities who are either employed or within six months of being employed. Grants are paid directly to the client to employ a personal care attendant to assist with feeding, dressing, housekeeping, bathing and other personal needs; comprehensive social work services are also provided. This program served some 32 persons with grants totaling \$302,032

The Personal Services Program serves people who have a severe physical disability, require assistance with daily living activities and are unemployed or work less than 17.5 hours a week. Grants are paid directly to the client to employ a personal services attendant to help with personal needs. During FY 1995-96, this program helped 19 people and cost \$425,000

The Family Support Grant Program provided grants and social work services to 29 families with children who have disabilities other than mental retardation. These grants helped those Connecticut families defray the extraordinary expenses associated with caring for their children; the expenditure was \$71,230.

The Connecticut Organ Transplant Program helps residents of the state who either need or have received an organ transplant to pay medical and non-medical expenses such as hospital and physician services, prescription drugs and medical transportation. The program is funded by donations which are primarily from taxpayers who contribute a part of their Connecticut income tax refund.

Individuals who apply for help must have expenses related to a transplant that will not be covered by any other source. There are two income limits which vary according to family size. The income limit for individuals who need help in paying the initial medical expenses of a transplant is the Connecticut median family income. The income limit for individuals who are transplant recipients and need help paying for ongoing medical expenses is 200 percent of the federal poverty level.

The assets limit is \$2,000 per individual or \$3,000 per family, and this program opened in May 1996. The department is proposing changes to increase the income and asset limit and to allow a spenddown of excess income and assets.

The department's Insurance Assistance Program for AIDS Patients uses state funds to purchase continuation health insurance for persons who were employed—plus their spouses and children—if they have an AIDS-related disease and are eligible for group health insurance through their former employer. Many persons with AIDS lose employment; without the means to take advantage of the federal and state laws that allow for continued health coverage for up to 29 months in some circumstances, it is expected that these persons will become Medicaid-eligible. In FY 1995-96, 81 persons were assisted at the cost of \$130,524.

The Elderly Services Division coordinates the state's aging network which includes elderly nutrition projects, social service providers, municipal agents, transportation programs, homemakers

and home health aide agencies, meals-on-wheels providers, escort and companions services, senior centers, and adult day care centers, as well as many elderly and congregate housing projects, health screening projects, hospices, hospitals, nursing homes, visiting nurses, support groups, self-help organizations, family counseling services, educational projects, volunteer and employment programs, and specialized providers.

The division also sets goals for the operation of the aging network and monitors its performance to assure compliance with state and federal laws and regulations. The Federal Administration on Aging has established a new set of reporting guidelines under the National Aging Program Information System. It is designed to increase uniformity in data collection and improve the monitoring of state programs and analysis of performance data. The division is upgrading the state's reporting systems to meet these new federal requirements.

The Long Term Care Ombudsman Program advocates provide a bridge between nursing home staff, residents and families to foster communication so that problems can be resolved.

The Center for Medicare Advocacy, under contract with the department, responded to calls for information and assistance, and helped clients review Medicare claims and requests for reconsideration, appeals and/or lawsuits on behalf of seniors denied benefits. The department also contracted with the Legal Assistance to Medicare Patients division of Connecticut Legal Services to provide a hot line and other services to Medicare hospital beneficiaries.

The Long Term Care Insurance Partnership is an alliance between the State of Connecticut, the state's private insurance companies and the Robert Wood Johnson Foundation, designed to help consumers plan for the cost of future long-term care with special preapproved long-term care insurance policies that will allow an exemption to Medicaid eligibility requirements. This program recruits volunteer counselors and provides counseling to prospective purchasers and their families.

The partnership has made a number of public presentations discussing the benefits and pitfalls of long-term care insurance. Since its inception, the program has responded to nearly 19,000 individual requests for information, trained 52 volunteer counselors, counseled 770 perspective buyers, and conducted 18 public forums before approximately 2,700 participants.

In June, the Elderly Services Division conducted training for the managers of elderly housing projects and resident services coordinators on the operation of the Adult Protective Services Program and the ways in which the protective services staff could better coordinate their work with the staff of the state's elderly housing projects. Approximately 75 members of state housing project staff attended.

The division also continued its program of conferences and training programs for the caregivers of patients with Alzheimer's disease and related dementia. This effort, which is aimed at both formal and informal caregivers, is designed to increase communication between family caregivers and professionals, and to share information with both groups on the best practice and latest innovations in treatment.

The department awarded \$28,500 in grants to four community action agencies to support a family-focused program, Families in Training, which encourages parents to see themselves as their child's primary teacher and which supports them in that role. Services include home visits, parenting classes, and developmental assessments of the children.

With \$850,000 in funding, the Teenage Pregnancy Prevention initiative addresses the complex social problems and services in seven target areas: New Haven, New Britain, New London, Waterbury, Norwalk, Stamford and rural northeastern Connecticut.

Homelessness continued as a top priority in 1995-96 with grants and technical assistance for local services. Forty-two emergency shelters with a total of 1,600 beds received agency funding and served 17,000 persons from October through September. Three day-shelters and nine programs that provide advocacy, networking, housing and health services were also funded. Emergency shelter funding reached nearly \$8.9 million overall.

Federal funding continues through the Stewart B. McKinney Homeless Assistance Act. The

department provided general operational subsidies to shelters, and the state's community action agencies received continued funding to provide support and follow-up services to individuals while they were in shelters and after they moved out.

The department's Eviction Prevention Program continued to offer mediation and rent bank services statewide, helping more than 1,980 families remain in permanent housing. Expenditures for the Rent Bank Program reached \$703,877 and expenditures for mediation services reached \$392,676.

The department's security deposit expenditures reached \$246,595. State funds in the amount of \$1,317,529 were provided for the Transitional Living Program, which represents a bridge between the shelter and permanent housing.

The Section 8 Rental Assistance Program provided \$17,635,595 in federal funding to assist very low income families obtain decent, safe, sanitary housing by providing rental subsidies directly to property owners. Rental assistance may be used for existing housing, newly constructed units and moderately or substantially rehabilitated units.

Under the Rental Assistance Program, state funds support rental assistance subsidies for low income families living in privately owned rental housing and elderly persons residing in state assisted rental housing for the elderly.

Some 20 nonprofit organizations and the Connecticut AIDS Residence Coalition continued to receive funding to provide housing and support services for children and adults with AIDS through the AIDS Residence Program. Projects are funded in Hartford, greater Bridgeport, New Haven, Stamford, Danbury, New London, Plainville, Georgetown, Bloomfield and Windham.

During the year, the state received \$1,162,000 in federal funds from the U.S. Department of Health and Urban Development under a program called Housing Opportunities for Persons with AIDS. The state's bond funds to purchase and renovate facilities for AIDS residence programs are also administered by DSS.

The department contracts with nonprofit groups to provide shelter services for victims of domestic violence, and to offer community education programs to the general public. Services include emergency shelter, security deposit assistance, counseling, advocacy, 24-hour hot line, and information and referral. Operating funds were provided for a total of 225 beds in 16 shelters; general fund expenditures were \$1,124,365.

Grants totalling \$437,500 were awarded to nonprofit organizations for counseling services to families, adults, and children who have experienced abuse or family-related trauma.

Under the Home Share Program, the agency administered a \$53,437 grant to a private nonprofit agency for a program that finds affordable housing for single-parent families by matching clients with other clients who combine their resources.

The Child Support Enforcement Program is currently providing child support establishment and enforcement services for 72,673 active AFDC cases and 95,792 non-AFDC cases. A hospital-based paternity establishment program was implemented in SFY 1996. VOICES, the program's automated child support telephone information system, was enhanced with bilingual capability.

The program's paternity outreach booklet, "Becoming a Teenage Father is No Joke," was developed and in great demand by schools, social service agencies, hospitals and libraries. To increase the effectiveness of wage withholding, the program's most successful enforcement remedy, the "Connecticut Employers' Guide to Wage Withholding" was updated in a user-friendly question-and-answer format. The program developed a bimonthly newsletter to share information, highlight achievements, and expand the level of communication among child support professionals in Connecticut and other interested states.

The department's child care efforts are directed toward three major areas: the coordination of child care services, the seamless provision of child care subsidies and the efficient administration of child care contracts.

During this past year, the department revised several policies in conjunction with the welfare

reform initiative. The agency was active in coordinating child care activities between community organizations and state agencies, and in providing a link with local and federal agencies in the development of state plans, applications, regulations, policies and procedures.

This department, in conjunction with the Department of Education and the Commission on Children, completed a successful proposal (\$100,000 per year for five years) for federal Head Start funds to establish an early childhood planning collaboration in Connecticut.

The department continued its participatory role in Connecticut Charts a Course, a professional career development system for child care providers. The department designated the Board of Trustees for Community and Technical Colleges to lead this important initiative.

The Commissioner served as a member of both the Child Day Care and Head Start Advisory councils and participated in the school readiness planning consortium with the Department of Education, the Commission on Children and the Graustein Memorial Fund. This consortium was established to develop a structure for integrated child care and education services in Hartford, New Haven and Bridgeport.

DSS administered a variety of child care subsidy programs for families. JOBS Child Care provided child care payments to enable parents receiving public assistance to participate in approved education and training programs. During the past state fiscal year, this program served an average of 1,330 families and 2,200 children per month.

Work Related Child Care provided child care payments to enable parents in unsubsidized employment and receiving public assistance to continue to work. During the year, this program served an average of 3,800 families and 6,100 children per month.

Transitional Child Care provided child care payments to families transitioning off public assistance due to employment. During the past state fiscal year, this program served an average of 2,400 families and 3,800 children per month.

The Child Care Certificate Program provided child care payments for non-public assistance, low income working families. During the past state fiscal year, this program served an average of 3,400 families and 5,440 children per month.

The department approved child day care subsidy and facility tax credits for Connecticut businesses. During the tax year 1995, 43 businesses were granted credits totalling \$983,781 in support of 838 employees and their 1,167 children.

The department also purchased a variety of child care and child care support services through contracts with community action, private nonprofit, private for-profit agencies, municipalities and other state agencies.

This agency provided funds and technical assistance to municipalities, community action agencies and other nonprofit organizations for child care centers that provided safe, age-appropriate environments and a full range of social, educational, recreation and nutritional services to children, plus support services to their families. During SFY 1995-96, the department supported 39 contractors for 4,200 full-day, full-year child care slots at more than 90 locations throughout the state. Approximately 12,000 children were served.

The department provided contracts to support the needs of working parents with school-age children. These funds supported 33 contractors and served approximately 3,300 children.

The department also contracted with the United Cerebral Palsy Association of Greater Hartford for the provision of respite services to individuals terminally or chronically ill and children with disabilities, and their families. The project operated in Hartford and Tolland counties.

Another contract with United Way of Connecticut was granted to answer phone calls from consumers seeking child care assistance and maintain a computerized database of the state's licensed child care facilities through a project called Child Care InfoLine. During 1995-96, this service averaged 3,100 phone consultations per month.

DSS also contracted with the United Way/Infoline project to coordinate an intensive recruitment campaign to increase the number of child care providers and facilities in Connecticut. This effort was

targeted to communities with high numbers of AFDC families, as a result of a projected child care demand for AFDC families going to work.

In partnership with the Department of Higher Education, private non-profit groups and the education community, the department provided a variety of child care training and provider enrichment activities. These activities helped child care providers: obtain training through tuition reimbursement for early childhood and child care related courses at institutions of higher education and other training venues; maintain required health and safety staffing requirements; and remain current on child care issues through a statewide child care newsletter, "All Children Considered." During the past year, nearly 7500 child care providers received these services.

DSS provided federal funds to the Department of Public Health to support personnel responsible for licensing Child Day Care Centers, Group Day Care Homes and Family Day Care Homes.

### **Improvements/Achievements 1995-96**

Connecticut's welfare reform effort, initiated by the administration with the support of the legislature, emphasizes work, personal responsibility and self-sufficiency. The principles include: it is better to work than be on welfare; welfare should be temporary, not a way of life; parents who are able to work should work; individuals are responsible for the support of their families; children are better off seeing their parents work than collect welfare; and families leaving welfare should be supported with child care and medical assistance.

Since implementation of the revolutionary Reach for Jobs First welfare reform initiative, there has been a significant increase in the number of families working and a significant decrease in the caseload. The number of families with a working adult almost doubled from 7,718 to 14,203, while during the same period the welfare caseload dropped from 59,194 to 56,017.

Guiding principles of the Jobs First Initiative include: involving the greatest number of people possible; promoting labor market attachment; limiting long-term development services; increasing participant responsibility for securing employment; and procuring low-cost, performance-based community services. To support this comprehensive effort, the department held a series of five statewide Jobs First Opportunity Fairs during June 1996. The initiative was a resounding success: 2,347 clients came to locations in Waterbury, Taftville, Bridgeport, New Haven, and Hartford to register for jobs; 1,425 were referred to jobs at 192 Connecticut companies; overall, 237 companies had listed over 975 availabilities with the Jobs First hot line (1-800-392-2122).

Connecticut's Medicaid managed care initiative has adopted an approach that incorporates the same general features of cost containment as are practiced in the private sector. Basic concepts of Connecticut Access are: the fee for service system failed to either promote access or contain costs; managed care enhances both client choice and access to the mainstream health care system, while limiting increases in per capita costs; and managed care brings about better cost and access accountability.

Connecticut Access has developed an impressive track record since its implementation. Ending June 1996, some 186,090 clients had been enrolled in the 11 plans: Aetna, Blue Cross, Bridgeport Hospital, Community Health Network, Healthchoice Family Plan, Health Right, Kaiser, MD Health Plan, Oxford, Physician Health, and Yale Preferred. Only 1,955 clients were defaulted into Blue Care and Oxford for failing to make a managed care plan choice.

Client satisfaction with Connecticut Access is excellent. A survey of 1,500 Medicaid managed care recipients showed that: over 90 percent said their children received the services they needed; 71 percent reported no problems with managed care; over 89 percent felt doctors and medical services were convenient to get to; of the 64 percent receiving care from the same provider as previously, 84 percent reported being as satisfied or more so; of the 36 percent with new medical providers, 73 percent were as satisfied, or more so; and 75 percent thought DSS materials were useful, while 82 percent felt health plan materials were useful.

The department is firmly committed to improved health care access and reduced health care

cost under Medicaid managed care. At the direction of the Legislature, this department implemented a statewide biometric electronic personal identification system that: conveniently and accurately enrolls qualified General Assistance and Aid to Families with Dependent Children clients into a state-wide database; issues tamper-resistant identification cards that incorporate finger-imaging "identifiers" stored in two-dimensional bar codes; and uses finger-imaging identification to verify that enrolled clients are eligible to receive benefits.

Connecticut's objective was to create a system that would eliminate "dual enrollments," the major component of welfare fraud. The objectives include biometric identification and verification based on finger-imaging technology; central issue of identification; centralized image storage and retrieval; and over-the-counter identification card production. Digital imaging is being done to prevent people from receiving welfare benefits under more than one name, or from receiving benefits improperly from more than one town or state program.

Digital images are created for every new and existing welfare recipient. These images are stored in a computer database along with a digitally captured facial portrait and signature. As each new applicant is imaged, the digital record is matched against the established database in real time. Connecticut has selected a combination of proved technologies that places this system at the cutting edge of all human services systems in the United States. Since January 1996, the system has enrolled 75,000 welfare recipients.

In December 1995 the department began to offer Direct Deposit as a benefit delivery method to recipients with savings and/or checking accounts. An aggressive marketing effort to sign-up recipients for direct deposit began in June 1996 and by June 30 over 1,400 recipients had elected to receive their benefits by direct deposit. For each recipient receiving benefits by direct deposit, the department saves one dollar per month in benefit delivery costs.

In February 1996 the department selected Citibank to provide Electronic Benefit Transfer services to the Department and its benefit recipients. Once implemented, this will permit the department's cash and food stamp benefit recipients to access their benefits at bank ATM's and food store point-of-sale terminals located throughout the state. A pilot program will begin in the Waterbury area in February 1997 and will be statewide by the end of 1997.

The Bureau of Rehabilitation Services increased the number of persons rehabilitated into employment 8.4 percent over the previous year, and continued two innovative grants to encourage the hiring of persons with disabilities: one for \$48,000 was given to the Department of Administrative Services to modify hiring practices in state service and place more individuals with disabilities into jobs with state agencies; the Connecticut Community Providers Association was given \$56,000 to foster employment of disabled persons in private, non-profit agencies. The bureau also increased funding for in-service training to \$80,000, an increase of nine percent over the previous year. The agency's new decentralized training structure has resulted in training programs which respond to the regional and individual needs of staff. The bureau also initiated a project to foster employment for AFDC recipients with disabilities—this project led to jobs for 38 recipients.

The General Assistance Program (GA) provides financial and medical assistance to indigent individuals and families who are pending or are not eligible for other state and federal programs. General Assistance is administered directly by the state's 169 cities and towns, with administrative oversight from this department, which funds 90 percent of the town program costs. Benefit levels and other eligibility requirements are established by state statute.

The GA caseload has declined steadily since February 1993, from 36,000 average monthly cases to approximately 21,000 cases in March 1996. This decrease is attributable both to improving economic conditions and the welfare reforms that have been enacted starting in 1992 and continuing through the 1996 session of the General Assembly.

Programmatic changes include: durational limits on receipt of assistance for employable persons (a 24-month eligibility period during which the person can receive up to ten months' assistance during the first twelve months, and up to six months' aid during the second twelve months), mandatory

substance abuse treatment, a requirement that applicants submit to digital imaging identification, and a 1996 change to prohibit job-ready employable persons from receiving financial assistance.

The Department of Labor will establish a grant program under which job-ready persons may receive a stipend of \$100 monthly for a maximum of six months, in lieu of General Assistance, to defray the expenses of seeking employment.

This department is developing a Title XIX (Medicaid) Waiver to fund personal care assistance services. The waiver will serve up to 409 Medicaid recipients, age 18-64 inclusive, who have severe disabilities and would be unable to live outside of an institutional setting without these services. Under the program, the participant will be the employer of the personal assistant and will hire, supervise and train the personal assistant.

This program is unique in its ability to provide flexible, self-directed services to people with severe disabilities who need these services to remain independent. In the development stage for over a year, the department expects to implement the program in late 1996.

During the past year, the aging network provided social services of various types, including transportation, senior centers, and home care to 29,300 separate individuals. During the same period, 1.1 million congregate meals were served to 16,000 older individuals, and 1.6 million home-delivered meals went to 9,800 recipients.

Aging network service participants included 18,300 frail or functionally impaired individuals, 16,200 low-income individuals and 7,300 minority group members. These services were provided through approximately \$11 million in federal Older Americans Act funding, \$1.4 million in U.S. Department of Agriculture commodities and cash reimbursement and approximately \$2 million from Connecticut's General Fund.

In addition, smaller programs overseen directly by the Elderly Services Division provided health screening to 12,000 older persons, adult day care to 1,100 Alzheimer's patients, support for training 650 RSVP volunteers, and placement to approximately 200 low-skill older person through programs funded under the federal Job Partnership Training Act and Title V of the Older Americans Act. Municipal Agents on Aging, funded by the towns but trained and supported by the division, answered over 101,000 information requests on behalf of older persons.

The division was also responsible for several other projects funded by federal grants. The Housing Ombudsman Program, operated in conjunction with the North Central Connecticut Area Agency on Aging, provided training in-conflict resolution and advocacy to volunteer resident advocates in two elderly housing projects operated by the Hartford Housing Authority. The program concluded in December and was successful in substantiating the utility of resident advocacy in elderly housing.

The Congregate Housing Services Program, operated in conjunction with the Eastern and Western Connecticut Area Agencies on Aging and funded by the Farmers Home Administration, provides "circuit riding" service coordinators to six small elderly housing projects in rural sections of the state.

Now entering its third year, this program demonstrates the feasibility of providing service coordinators to groups of projects in areas where no one project is large enough to support a full-time coordinator. Findings from the program also support the value of service coordination in helping residents to "age in place" and reduce reliance on institutionalization to meet the needs of residents whose health is failing.

The Long Term Care Ombudsman Program advocates for nursing home residents by providing a communication bridge with staff to work out problems in day-to-day life at the home. The program doubled its volunteer corps and now provides volunteer advocacy on a weekly basis to 25 percent of the state's nursing homes. The program also provided leadership in the development of a new residents' rights law that encourages better communication between nursing home staff, residents and families. Through "Breaking the Bonds," state agencies, health care providers and consumers, held two statewide educational conferences that led to improvements in nursing home practice.

Protective Services for the Elderly has created a new intake process which stresses maintain-

ing an older person's independence through partnership with community service providers. The program has developed a new manual and new procedures for staff and has facilitated regional meetings with service providers to establish better working relationships.

CHOICES (Connecticut's program for Health insurance assistance, Outreach, Information, Counseling, and Eligibility Screening) provided highly visible "one-stop" directions to benefit and support programs for aging issues. This model program represents how the public and private sectors together can best support the services of community volunteers.

Using a \$144,000 federal grant, over 200 volunteers from Area Agencies on Aging provided health insurance assistance to 6,900 persons for 12,800 issues of concern, an increase of 30 percent more clients and 45 percent more concerns over the previous year's figures.

An additional 6,200 health insurance calls, an increase of 36 percent, were handled through the Elderly Services toll-free line. In response to consumer inquiries concerning new Medicare managed care plans, CHOICES compiled and published comparative data on state plans, and began conducting highly acclaimed consumer seminars throughout the state on "How to Become an Informed Medicare Consumer."

The Child Support Enforcement Program collections totaled \$141.7 million: \$58.7 million for those on the Aid to Families With Dependent Children program and \$82.9 million for families not in that program. Other achievements included 8,161 paternity establishments, 25,458 new orders established, and 1,902 AFDC cases closed. Percentages of collections by wage withholding were 49.3 percent, AFDC, and 55.2 percent, non-AFDC.

The Healthy Start program provided case management, outreach and Medicaid liaison services to improve pregnancy outcomes and improve child health. Services were provided by 23 contractors throughout the state to pregnant women and children. During the year, program contractors provided case management services to about 9,000 children under age 12, and 8,000 pregnant women.

### **Reducing Waste**

The Bureau of Rehabilitation Services continued to improve operations in the vocational rehabilitation program, including: simplifying the requirements to be eligible for vocational rehabilitation services; streamlining the case status system; simplifying purchasing procedures; and increasing the use of electronic communications between offices, speeding the exchange of information and reducing paper usage.

The department has implemented an Automated Finger Imaging System that utilizes digital technology to unduplicate the AFDC and General Assistance caseloads statewide. This system will detect any attempt to defraud the welfare system by using false identity. In addition, the department has established a statewide GA database to track receipt from town to town. For the first time, the General Assistance caseload will be unduplicated on a statewide basis.

The agency will implement a State-Administered General Assistance Program in April 1997 for most cities and large towns serving a majority of the statewide caseload. By eliminating unnecessary, duplicative town administrative costs, this change will reduce the cost of General Assistance to Connecticut taxpayers, centralizing cases in the department's Regional Offices. Administration of GA cases in most of the remaining towns will be assumed by the state in July 1998.

Total cost avoidance and recoveries realized by the Fraud and Recoveries Unit for the year was \$71,515,779, up from \$66,919,742 in the previous year. The cost avoidance and recovery components are: \$37,405,303 insurance cost avoidance; \$23,090,256 insurance recovery; \$9,607,359 property recovery; \$1,412,861 overpayment recovery.

The Fraud and Recoveries Unit, which developed and piloted the Fraud Early Detection Program (FRED), is responsible for monitoring the program, whose objective it is to identify, investigate and determine if a case is fraudulent prior to granting assistance. During 1995-96, FRED Regional Office staff in Hartford, New Haven and Bridgeport realized cost avoidance of \$3,353,247 due to FRED. The department received authorization to expand the program statewide.

The Fraud and Recoveries Unit was also responsible for initiating and administering a monthly match of DSS eligibility files with those of the Department of Corrections. The first match was conducted in November of 1995. Results reported to date indicate that over 650 cases have been reviewed. Some 130 overpayments have been identified due to an individual being incarcerated and continuing to receive public assistance; 16 cases were referred for prosecution, while 114 were referred for administrative sanctions.

The Northwest Region connected 1,851 AFDC clients to employment during the fiscal year. The region has developed new and improved community relationships with New Opportunities for Waterbury, WorkForce Connection, the Hispanic Center of Danbury, Waterbury Youth Services, the Easter Seal Rehabilitation Center and Multi-skilled Educational Training Center.

The region has also worked collaboratively with the Department of Children and Families and the Connecticut Labor Department, experienced a seamless implementation of biometric identification and managed care for clients, and implemented the Front End Detection Program to determine if there is any evidence of fraud on newly granted cases.

The region administered over 75 contracts totaling nearly \$13 million for child care programs, homeless shelters, employment help for clients, social services for low income families and individuals, maternal and child health programs, and teenage pregnancy prevention.

The region also established a dedicated convalescent unit to improve customer service and reduce fraud and abuse. The unit specializes in convalescent care activity, knows policy exceedingly well, and is able to deal with transfer-of-assets cases and spousal assessments. This has reduced processing time with improved outcomes.

### **Strategic Planning/Business Planning**

The Department of Social Services serves a broad constituency, including families, elderly and people with disabilities, and the commitment to serve them remains strong as the department pursues its priorities. The department is a caring and responsive organization that effectively and efficiently delivers the highest quality of benefits and services to help its customers improve the quality of their lives and achieve and maintain maximum self-sufficiency.

The department has determined the following priorities will be the focus for 1996-97 and shall guide resource allocations:

- Implement Welfare Reform — Implement the administration's welfare reform initiatives as enacted in legislation. This includes working with other agencies, community groups and the business community to maximize the number of employment opportunities for AFDC recipients, as well as ensuring the delivery of child care necessary to support welfare reform.
- Implement Child Support Changes — Implement the administration's child support initiatives as enacted in legislation. This places an emphasis on obtaining child support for AFDC families subject to time-limited penalties.
- Implement Managed Care — Implement managed care in the Medicaid program for AFDC, AFDC-related and other recipients.
- Prevent and Reduce Welfare Fraud — Develop and implement fraud prevention initiatives, strengthen fraud detection, aggressively pursue effective penalties for and efficient recovery of overpayments due to welfare fraud, and strengthen eligibility determination to assure payment accuracy and timely recovery of overpayments.
- Provide Excellent Customer Service — Improve the courtesy with which the department treats internal and external customers and focus on process improvement measures to improve the effectiveness and efficiency of the services that are delivered. Simplify, Simplify, Simplify; keep the process simple, keep it easy and maximize process improvements.

Additionally, the department is committed to complying with all federal and state requirements

governing its programs.

### **Information Reported as Required by State Statute**

The department Affirmative Action Plan, submitted on March 31, 1996, was approved and granted annual filing status by the Connecticut Commission on Human Rights and Opportunities.

The department is strongly committed to the principles, policies and practices of affirmative action, equal employment opportunity and contract compliance, as required by state and federal laws. This firm commitment to equal opportunity through affirmative action underscores all aspects of the employment process, all programs and all services. Coordination of the Americans With Disabilities Act compliance activities is the responsibility of the Affirmative Action Division.

During 1995-96, the department hired 30 full-time employees. Female and minority hires accounted for 66 percent and 30 percent respectively. Of the total full-time administrators, 50 percent are females and 13 percent are minority group members.