

# 1996-1997

## Digest of Connecticut Administrative Reports to the Governor

### Department of Social Services

**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.

**JOYCE A. THOMAS: Commissioner**

Michael P. Starkowski: Deputy Commissioner, Administration.

Sarah Miller: Deputy Commissioner, Programs, succeeded by Valerie Marino

Established: 1993.

Statutory Authority: Title 17b, Connecticut General Statutes.

Central Office: 25 Sigourney Street, Hartford, CT 06106

Average number of employees: 2,229.

Recurring operating expenses: \$142,001,201.

Program expenses: \$3,135,043,312.

Organizational structure: Commissioner's Office, Regional Administration, Administrative Operations, Programs Operations, Health-Care Financing.

#### Statutory Responsibility

The Department of Social Services (DSS) is designated as the state agency responsible for administering a host of programs that directly or indirectly provide goods and services to poor and vulnerable families, women, men, youth, and children, including seniors and people with disabilities. DSS administers over 90 legislatively authorized programs, and approximately one-third of the state budget's federal funds. By statute, DSS is the state agency responsible for administering a number of federal programs, including those arising under Temporary Family Assistance (TFA, formerly AFDC - Aid for Dependent Children), Food Stamps, and Medicaid, and the Older Americans Act.

The agency is headed by the Joyce A. Thomas, the Commissioner of Social Services, with two Deputy Commissioners, one for Programs and one for Administration. DSS administers most of its programs through offices located throughout the state. Services for most programs are available at 15 offices located in five regions, which are overseen by five Regional Administrators. The department's Bureau of Rehabilitation Services' central office is in Windsor, and it provides services to people with disabilities at 25 offices statewide. In addition, many of DSS's services are provided through a network of community-based agencies, such as Community Action Agencies, homeless shelters, and senior centers. The agency also sends staff

directly into various communities to expedite and facilitate the provision of services. For instance, DSS staff operate an office at Stowe Village (a public-housing complex in Hartford), as well as in various hospitals and Healthy-Start centers.

**For families and children**, DSS operates *Jobs First*, which provides Temporary Family Assistance (formerly AFDC), employment services (formerly JOBS), and safety-net services to low-income families. DSS also provides child-support enforcement, child care, Food Stamps, rental assistance and other housing-related services, preventive services, and medical services.

**For those who are elderly and disabled**, DSS provides State Supplement to SSI, Rehabilitation Services, Nutritional Assistance, Housing Assistance, Home Care, Pharmaceutical Assistance (ConnPACE), Nursing Home Advocacy, Protective Services, AIDS Drug Assistance, independent living, assistive technology, and medical services.

**For communities in general** (without regard to age, family status, or disability), DSS operates the Community Services Block Grant and the Social Services Block Grant. DSS provides Legal Services, Nutritional Assistance, Housing Assistance, Heating & Utilities Assistance, medical services, General Assistance, and a multitude of services that relate to homelessness and housing.

**In collaborative efforts**, DSS works extensively with other state agencies and community groups, including the Connecticut Departments of Economic and Community Development, Insurance, Banking, Transportation, Labor, Mental Retardation, Mental Health and Addictive Services, Children and Families, and Policy and Management.

## Public Service

### I. Medical Services

Through its **Division of Medical Care Administration**, DSS ensures that vulnerable and disadvantaged children, youth, adults, and seniors are able to access needed medical services. In the past year, DSS served more than 330,000 each month, including some children and youth who were receiving services from the Department of Children and Families. The program covers all of the services required under federal and state law, as well as 31 of the 33 optional services in fee-for-services and a managed-care systems. Facilities that were available to clients included nursing facilities, chronic disease hospitals, inpatient and outpatient hospitals, clinics, physicians' offices, pharmacies, facilities for those who are mentally retarded, psychiatric hospitals, and their own homes. Beyond standard medical services, DSS also provided transportation, dental, vision, and community care.

### II. Services to Families and Children

**Jobs First:** Through Connecticut's welfare reform plan known as *Jobs First*, DSS provides a multitude of services that help parents and their children move from welfare dependence to true self-sufficiency:

- Through **Temporary Family Assistance**, an unemployed parent with two children received approximately \$500 per month in cash assistance, and about \$250 per month in **Food Stamps**, at an annual value of about \$9500. In the past year, DSS served approximately 54,000 families and 151,000 people through TFA, (about 1/3 were adults and 2/3 were children). On a monthly basis, DSS provided Food Stamps to serve about 187,000 adults and children on TFA, and 35,000 adults and children who were not on TFA.

- **Employment Services:** Under *Jobs First*, families are no longer entitled to receive benefits without condition and without deadline. Rather, when parents are able to work, they are required to look for and obtain work, and face a 21-month deadline in their cash benefit package. They may continue to receive cash benefits and services beyond this 21-month period only if they have been looking for work in good faith, or if they encountered circumstances beyond their control which prevent them from working. If, after a time, they are unable to find work, they are provided with education and training in personal and professional development, along with further support in their efforts to find work. For instance, if a mother is unable to find work, she is eligible for programs that provide job training, GED, ESL, and other programs that will develop her personal and professional skills. In the past year, approximately 27,000 adults with children who were served under TFA also received employment services. At the end of June, 1997, 57% of these *Jobs First* clients were working.

Beyond the programs listed above, parents with children also are eligible for support from some of the other programs listed below.

**Medical Services:** DSS provides a full range of medical services to parents and children, including dental, vision, and nearly all of the optimal services covered under federal Title XIX (Medicaid), including hospitals, doctors, dentists, vision care, and prescriptions. In the past year, DSS served more than 300,000 adults and children each month through pre-paid health plan.

**Housing Assistance:** Eligible parents with children also were provided with housing assistance under some of the programs listed below, under "Homelessness and Housing."

**Child Care:** The child care programs and services within DSS expanded considerably from one year ago. DSS provided child care payments, subsidies, certificates, and tax credits to provide monthly benefits to about 25,000 low-income families. DSS also provided funds to allow for capital improvements in child care facilities. Through the Child Care InfoLine, more than 30,000 phone calls were received from consumers who were seeking child care. The provision and expansion of child care is a critical component of welfare reform in Connecticut, since these programs allow parents to look for and keep employment.

**Child Support:** When child support is owed, a family is eligible for child-support enforcement services, whatever its financial circumstances. Working closely with the office of the state Attorney General and the Support Enforcement Division of the Connecticut Superior Court, DSS provided location services in more than 55,000 cases, established paternity in more than 8,500 cases, obtained support orders in more than 23,000 cases, and enforced or modified support orders in more than 139,000 cases. Child support collections totaled \$155.93 million, a 10% increase over the previous year. Collections for families on TFA amounted to \$62.2 million, while collections for non-TFA families were \$93.7 million. The expansion of the department's efforts on behalf of children is a critical component of welfare reform, since many families are dependent on welfare because of the lack of child support. In the past year, more than 2,300 TFA families moved off of the welfare rolls because of the child support that was obtained.

**Domestic Violence:** Independent of programs listed above, DSS also supports those programs, listed below, that provide shelter and other support services to families who are victimized by domestic violence and abuse. In the past year, these programs provided shelter to more than 900 adults and 1200 children.

### **III. Services for those who are Elderly & Disabled**

**Supplement to SSI:** The federal Supplemental Security Income program (SSI) serves people who are elderly, disabled, and blind. When the SSI program was initiated by the federal government, Connecticut chose to supplement SSI with state funds. As a consequence, elderly, blind, and disabled people in Connecticut receive

more SSI support than they would in other states. In the past year, DSS served nearly 28,000 elderly, blind, and disabled people through this program.

Through the **Community Based Services Program**, DSS provides social workers to support people with disabilities who live at home. Some of the home-based services include counseling, assessments, funding for adult companions, adult daycare, homemaking, home-delivered meals, and emergency response systems. In the past year, more than 1,800 people were served by this program. Funding also is provided for similar services, and temporary foster care, when a parent is temporarily or permanently incapacitated.

Through the **Personal Care Assistance for Working Persons' Program** and the **Personal Services Program**, DSS provides grants to severely disabled people. Through these grants, clients are able to hire personal-care attendants who help them with such tasks as bathing, dressing, transfer and toileting, as well as cleaning, shopping, and laundry. Social work services also are provided. In the past year, these programs served 65 clients.

After two years' development, DSS initiated the **Personal Care Assistants Program** under a Medicaid waiver to serve people with severe disabilities between the ages of 18 and 64. One of the innovative aspects of the program is that it allows consumers to hire, supervise, and train their own personal care assistants. In the past year, this program enrolled about 60 clients.

Through the **Family Support Grant Program**, DSS provided grants and social services to more than 25 families with children who have severe physical disabilities.

Through five programs that serve **People with Brain Injuries**, DSS supported individuals and various non-profits to provide funding for individual community services, as well as consultation and referrals for people who have suffered severe traumatic brain injuries. Approximately 87 people received direct services, and approximately 2,000 people received information and referral through non-profits.

Through its **Disability Determination Unit**, DSS helped process applications for Social Security Disability Insurance and Supplemental Security Income on behalf of almost 36,000 clients.

Through its **Bureau of Rehabilitation Services**, DSS provided vocational rehabilitation services to almost 10,000 disabled clients, helping them to succeed in employment and independent living. Of this number, more than 1,600 people entered the competitive workforce, and more than 950 entered independent living programs. Through its TechAct Project, DSS entered into a partnership with People's Bank to private low-interest loans to enable disabled clients to buy assistive technological devices and equipment. IN the past year, more than 80 loans were approved, at a combined value of more than \$630,000.

Through the **Insurance Assistance Program for AIDS Patients**, DSS helped about 81 AIDS patients obtain continuing health insurance for themselves and their families. Through some of the other programs listed below, DSS also supported efforts to provide drug assistance and safe and sound housing for people with AIDS. Through **CADAP** (Connecticut AIDS Drug Assistance Program), DSS helped approximately 1,700 AIDS patients purchase drugs that prolong their lives.

In the past year, the **Elderly Services Division** provided a multitude of social services to an estimated 100,000 seniors across the state, and also coordinated the state's aging network. Such services included elderly nutrition projects, transportation, home care, housekeeping, meals-on-wheels, escorts and companions, elderly health screening, self-help groups, family counseling, and support groups. DSS also supported senior centers, adult day-care centers, elderly and congregate housing, hospices, and nursing homes. Finally, DSS helped provide legal services to help seniors with their efforts to obtain Medicare benefits.

Through the **Long-Term Care Ombudsman Program**, DSS provided advocates to nursing-home residents, who help clients solve day-to-day concerns, as well as protect clients from abuse, neglect, and exploitation. In the past year, about 5,000 cases were handled.

As part of its **Elderly Protective Services**, DSS safeguards people from abuse and neglect when they are more than 59 years old, and live in the community. In providing protective services, DSS served more than 2,200 in the past year. Under the authority of the Commissioner, DSS may be appointed to act as a conservator for indigent seniors over the age of 60 who are incapable of managing their own affairs. In the past year, DSS acted as a conservator for about 800 persons, and over 200 estates.

Through its **Long-Term Care Insurance Partnership** (an alliance with the Robert Wood Johnson Foundation and private insurance companies), DSS recruited counselors to advise consumers as to how they might plan for the cost of future long-term care. In the past year, the partnership responded to more than 5,000 requests for information, counseled more than 170 [PG] prospective consumers, and conducted six forums to educate the public at large.

Through **ConnPACE** (Connecticut Pharmaceutical Assistance Contract to the Elderly Program), DSS helped more than 35,000 seniors and 2,500 people who were disabled obtain needed medicines.

Through **ConnTRANS (Connecticut Organ Transplant Program)** that is funded by donations from taxpayers), DSS helped state residents who need or have received an organ transplant when their expenses cannot be covered by another source.

#### **IV. Projects in Communities**

Through the **Neighborhood Facilities Program**, DSS provides grants from state bonds for planning, site preparation, construction, renovation, and acquisition of facilities for childcare, elderly centers, multi-purpose human resource centers, domestic violence programs, emergency shelters, homeless shelters, food distribution facilities, and accommodations for people with HIV. In the past year, DSS obtained approval from the State Bonding Commission for 14 projects, at a combined value of \$5,449,409.

In the **Emergency Food Assistance Program**, DSS distributes available food from the USDA to soup kitchens and shelters that serve people in need. When this priority is met, the remaining food is distributed to food pantries, who in turn distribute the food to low-income people and families. With the support of the Department of Administrative Services, DSS oversees the distribution of 525,000 pounds of food at a value of \$358,000.

Through the **Supplemental Nutrition Assistance Program**, DSS purchases high-protein foods for distribution to food pantries, soup kitchens, and shelters through a statewide network of 440 agencies. About 798,816 pounds of food were distributed last year.

In administering the federal **Community Services Block Grant (CSBG)**, DSS is required to funnel 90% of the federal funds received to local Community Action Agencies (CAAs). These funds allows the CAA's to leverage other public and private grants, and in turn help low-income people through such services as employment and training, Head Start, child care, neighborhood services, and crisis intervention.

DSS pays for half the administrative cost of operating the **Food Stamp Program**, with the other half being paid for by the federal government. Through Food Stamps, DSS supported on a monthly basis about 211,000 adults and children whose income did not exceed 130% of the poverty level.

DSS administers a significant portion of the federal **Social Services Block Grant** (SSBG), with other portions going to other state agencies. The SSBG serves three critical functions. First, it allows DSS to meet critical social-service needs that otherwise might not be met. Second, it allows the state to revise and set social-service priorities as needs and issues change over time. Third, it forms the backbone of the social-service network, by augmenting social programs and helping non-profits leverage other private and public funds. Thus, through the SSBG, DSS, other state agencies, and non-profits are able to provide critically necessary services to low-income, disabled, and at-risk families, seniors, children, youth, and adults.

The SSBG supports programs within DSS, as well as programs operated by 115 non-profit entities, by providing 24 of the 29 allowable services. In the past year, the SSBG was very important to the efforts at welfare reform, particularly by supporting services such as employment, job training, and child care for clients and the working poor. The SSBG also provided other services such as family support and preservation, protective services for adults, protective services for children, in-home support for seniors and people who are disabled, adult day care, substance-abuse counseling, and special services for youth at risk. In some instances, the SSBG directly supported programs that support those in need. For instance, the SSBG helped provide home care to about 2500 elderly and disabled people in Connecticut. At the same time, the SSBG helped 115 non-profits to leverage the private and public funding that they need to provide critical services to people in need. In all, DSS served more than 318,000 adults and 34,000 children through the SSBG. At the same time, other state agencies such as the Departments of Social Services, Children and Families, and Mental Health were able to “package” the SSBG with other programs to provide needed services.

In its **Teenage Pregnancy Prevention** initiative, DSS continued to target six urban areas: New Haven, New Britain, New London, Waterbury, Norwalk, and Stamford, as well as rural northeastern Connecticut.

**General (Cash) Assistance** was available to clients directly from DSS, and, in some cases, through cities and towns. On a monthly basis, general assistance served an average of 788 families, and 11,679 single adults.

## **V. Homelessness and Housing**

Through **various homeless programs**, DSS supported 42 emergency shelters with a total of 1,600 beds to serve more than 16,000 adults and children. DSS also supported three day-shelters and nine programs that provided advocacy, housing, and health services. Through its **Transitional Living Program**, DSS helped families and adults move from shelters into independent living. Through the Community Action Agencies, DSS provided other support services to help people escape from the bonds of homelessness. In a related area of homelessness, DSS helped provide shelter and support services to more than 900 families who were the victims of **domestic violence**. Services included emergency shelter, security deposit assistance, counseling, information and referral, and a 24-hour helpline.

Under its **Home Share Program**, DSS helped single-parent families find housing by matching them with other clients who were willing to share in the cost of maintaining a home.

Through the **Eviction Prevention Program** and the related **Security Deposit Program**, DSS offered mediation, rent support, and security deposits so that more than 2300 families could obtain and remain in permanent housing.

Under its **Rental Assistance Program**, DSS provided rental subsidies to 2083 families and adults living in privately-owned housing, and seniors living in publicly-funded housing. In administering the federal **Section 8 Program**, DSS provided rental assistance so that 2492 families and adults could move into and remain in safe and sanitary housing.

Through the **AIDS Residence Program**, DSS continued to provide housing and support services to adults and children with AIDS. Under the federal **Housing Assistance for People with AIDS Program**, DSS also helped purchase and renovate units of housing for people with AIDS.

Through the **Connecticut Energy Assistance Program** and the **State Appropriated Fuel Assistance Program**, DSS works with the Community Action Agencies to ensure that AFDC families, seniors, those who are disabled, refugees, and people living at or below 200% of the poverty level are able to obtain deliverable heating fuel, including oil, coal, wood, and propane. In the past year, DSS was able to help more than 64,000 households through these programs. In addition, DSS administered federal funds for a weatherization-assistance program that served about 900 households.

## **VI. Affirmative Action**

Submitted on March 31, 1997, DSS's Affirmative Action Plan was approved and granted continued filing status by the Connecticut Commission on Human Rights and Opportunities. DSS continues in its strong commitment to the principles, policies, and practices that promote equal opportunity in programs, services, and contracts, including affirmative action. In the past year, DSS continued to monitor and improve its practices in employment and contracting, with special consideration paid to its Affirmative Action Plan. At the close of the most recent Affirmative Action reporting period (October 30, 1996), 30 % of DSS employees were minorities, 68 % were women, and 1% were self-proclaimed as being disabled. In the past year, DSS hired 37 employees, 14 of whom were minorities, and 21 of whom were women. Of the 789 contracts awarded by DSS, 2.4% went directly or indirectly to minority or woman business enterprises, and 3.9% went to small business enterprises.

## **VII. Collaboration with Other Agencies**

In the area of welfare reform, DSS has continued to build strong and effective partnerships with other state agencies.

- Working with the Connecticut Department of Transportation and the Department of Economic and Community Development, DSS has begun to investigate and support programs that will expand transportation services so that *Jobs First* clients can more easily get to and from work.
- DSS also has worked with the Departments of Banking and Insurance to establish mentoring programs for *Jobs First* clients.
- In another area, DSS has partnered with the Department of Economic and Community Development in efforts to build better linkages between economic development and *Jobs First* clients.
- In partnership with the Connecticut Department of Higher Education, DSS provided a variety of services designed to train and enrich child-care providers.
- DSS worked with the Department of Public Health to support the responsible licensing of Child Care Centers, Group Day Care Homes, and Family Day Care Homes.
- DSS also worked with the Governor's office and the Headstart Directors Association to coordinate the Collaboration for Children, designed to enhance services for children and families throughout Connecticut.

## **Improvements and Achievements (1996-1997)**

- **Management Information Systems:** Through its Eligibility Management System (EMS), DSS is able to

consider and act upon changing eligibility standards and notice requirements that affect the adults and children served by DSS. As eligibility standards and requirements evolve, the information system that is critical to the success of welfare reform must likewise be modified and improved. In the past year, DSS implemented extensive systems changes to its Eligibility Management System to keep abreast of the evolving policies that are part of the process of welfare reform. At the same time, DSS implemented further changes to allow the agency to assume responsibility for statewide General Assistance. DSS also has made significant progress in building a Local Area Network/Wide Area Network infrastructure that encompasses its regional offices. Through wiring and further development of this information-systems infrastructure, staff in the DSS regional offices will be able to make better use of personal computers, access a central database, share information, and plug into existing mainframes.

- **Quality Assurance:** In the past year, DSS took significant steps in the area of quality assurance and fraud prevention. By expanding its pre-eligibility Fraud Early Protection system to include the entire state, DSS prevented approximately \$8 million in Medicaid, Food Stamp, and TFA fraud. By implementing a computer-matching system that tied DSS to the federal Veterans Administration, the welfare systems of various states, various savings banks, various criminal-justice systems, and the Department of Public Health death files, DSS prevented further welfare fraud and double-dipping. To further cut-down on fraud and double-dipping, DSS implemented finger-print imaging to identify clients.
- **Electronic Benefits Transfer (EBT):** In instituting an EBT system for its clients, DSS has emerged as one of the leading social service agencies in the nation. Functioning like a cash-card and a debit-card, the EBT card that is used by clients serves three purposes: it is convenient for the clients; it practically eliminates fraud and theft; and it saves administrative costs. Rather than receive cash benefits and foodstamps, clients now receive their EBT card. Through the EBT card, cash benefits are available from local cash machines, and also can be transferred to legal vendors and providers, such as landlords. Food Stamps benefits also are available through the EBT card. Making a black market for Food Stamps virtually impossible, the EBT card allows clients to purchase only authorized goods and services from authorized vendors. The initial EBT pilot was launched in February, 1997, in Waterbury. In May of 1997 it was launched in Bridgeport. The entire state should be operating under the EBT system by October, 1997.
- **Medical Services:** Among many accomplishments, three in particular should be mentioned. First, DSS controlled the cost of providing home-health and hospital outpatient services by moving from a cost-based system to fixed fee-for-service system. Second, DSS successfully contained its expenditures for health care in nursing homes, so that there was no growth in overall spending. Third, beginning in August of 1995, DSS began enrolling the entire TFA population (adults and children) and children of the working poor (living at or below 185% of the poverty level) into managed care. As a result, Connecticut now operates one of the largest pre-paid health plan networks in the nation (proportionate to the entire population). This network has successfully mainstreamed clients, allowing them to obtain the services available to the entire population, such as preventive care and immunizations. During the past year, as a result of extensive client education and outreach, 91% of the clients chose their own health-care plan, a rate that is one of the highest in the nation. Client surveys show that more than 90% of the clients are satisfied with the services offered and received.
- **Jobs First:** The combination of a generous package of benefits and a 21-month deadline proved to be a strong incentive for clients moving from welfare into employment. At the end of June, 1997, 57% of the *Jobs First* clients subject to the 21-month time period were working, and the number of families receiving assistance had dropped to under 53,000.
- **Child Care:** Child care assistance for working families and families transitioning off state assistance increased by 100% in the past year. The child care program within DSS has been expanded considerably

from one year ago. In support of welfare reform, \$87 million was spend on child care in the past year, an increase from \$51 million in the previous year. As the result of the efficient use of child care payments, subsidies, certificates, and tax credits, DSS served an additional 500 families from one year before. Enhancements were made to improve the payments and quality components for new and existing child care providers.

- **Child Support:** Through a heightening of efforts, child-support collections totaled \$155.93 million, a 10% increase over the previous year. Collections for families on TFA amounted to \$62.2 million, while collections for non-TFA families were \$93.7 million. More than 2,300 TFA families moved off of the welfare rolls because of the child support that was obtained. At the same time, Connecticut's child-support enforcement system was certified by the federal government as one of the few that meets all of the federal requirements.
- **Protective Services for Seniors:** DSS established multi-disciplinary teams in each region to work with older people. These teams included people from various walks of life, including police officers, adult daycare directors, social workers, senior center workers, the Area Agencies on Aging, and DSS staff. By promoting a more collaborative sharing of resources, experience, and information, all of the agencies involved, particularly DSS, were able to become more effective in serving seniors across the state.
- **Rehabilitation Services:** As has been the case for at least four years, DSS again ranked as one of the top disability determination units in the nation based on productivity and effectiveness.
- Under a recently granted Medicaid waiver, DSS initiated the **Personal Care Assistants Program** to serve people with severe disabilities between the ages of 18 and 64. In one year, about 60 clients were enrolled, with a long-term goal of 400.
- In the past year, DSS opened and began operating a satellite office at **Stowe Village**, a public-housing complex in Hartford. After about one year of operation, the DSS-Stowe Village project has been remarkably successful. DSS staff at Stowe serve from 500 to 600 clients per month, and after one year of operation, about 200 of the 500 work-eligible clients are employed. By building a series of community partnerships, DSS helped augment a multitude of services to the Stowe Village residents, including workforce development, apprenticeship for construction & rehab, Vocational ESL, headstart, parenting, community policing, family-violence prevention, and substance abuse treatment counseling. In building the project, DSS worked with the Hartford Housing Authority, HUD, YMCA, Headstart, Hartford police, CCSU, AFSCME, Worktalk, Mayor Peters of Hartford, various unions, and various employers, including DAS, Textron, Host Marriot, Hartford Housing Authority, Filene's, Norrell Staffing, and the Goodwin Hotel.

### Reducing Waste

**Staff Reduction:** The Department has been able to accomplish its ambitious goals while sustaining sizable reductions in staff. From January, 1995 to July, 1997, DSS has experienced a reduction of 125 full-time General Fund positions, with the position count dropping from 2,354 to 2,229, a decrease in staff of 5.3%. This decrease in staff was accomplished while DSS added 74 staff to help administer the new statewide General Assistance program. Absent these additional 74 staff, the department's decrease was 199 positions, or 8.5%. With the completion of the current Early Retirement Incentive Program, it is anticipated that the Department will continue this pattern of achieving intended results with less resources.

**Quality Assurance:** Through tracking, monitoring, and investigating possible overbilling, DSS recovered

nearly \$11 million from vendors and providers who had overbilled DSS for services rendered to clients. DSS recovered and saved more than \$65 million from third-parties (including insurance companies and third-party tortfeasors) who were liable for injuries and illnesses that affected clients. By investigating approximately 10,000 cases of fraud and overpayment, DSS recovered and saved almost \$4 million. DSS also recovered more than \$10 million through liens and mortgages on real estate, estate claims, assigned assets, and title XIX reimbursements. Finally, working with the Bureau of Collection Services, DSS recovered additional funds through estates and lawsuits.

**Medical Services:** To cut down on waste and fraud, DSS has continued expanding its efforts to audit providers of health-care services and health-care goods, particularly durable medical equipment and nursing homes. DSS continues to pursue criminal and civil relief in instances of fraud and abuse.

**Elderly Services:** By establishing the Choices Program, which includes caseworkers with laptops, DSS expanded eligibility screening for seniors on a statewide basis. By offering “one-stop shopping,” DSS allows seniors to learn about and access various programs that can serve them. In this way, seniors are not required to go from agency to agency, and office to office in order to receive advice, information, and service.

**General Assistance:** DSS further cut down on waste and duplication by combining municipal General Assistance programs with the General Assistance program operated by DSS.

**“New Directions”:** During the past year, DSS undertook a work simplification and paperwork reduction initiative to identify how DSS staff could more efficiently serve Jobs First clients. DSS worked with front line staff, supervisors, managers, clients, and providers from across the state to form focus groups, design groups, and a redesign team, along with a great deal of support from the people at GTE and the Office of Policy and Management. The result of this inclusive and in-depth process was a comprehensive series of recommendations, which DSS will continue to pursue in its “new directions.”

### **Strategic/Business Planning**

**Medical Services:** At least four projects that are in the works are worth mentioning. First, DSS already is providing health-care benefits to children of the working poor, up to the age of 15. Within the next two years, DSS will enroll all children of the working poor (up to the age of 18). DSS anticipates that an additional 10,000 children will be so enrolled. Second, DSS will institute a series of cost-saving measures in the area of pharmaceutical goods. By implementing an on-line, Prospective Drug Utilization Review (which will screen and reject pharmacies’ duplicative orders for medicine), and by expanding the coverage of over-the-counter drugs, DSS anticipates significant savings. Third, DSS will be working to streamline and simplify the eligibility process that governs families seeking medical services. Finally, DSS is working to design and implement a federally sanctioned system that will streamline Medicare and Medicaid eligible seniors into a comprehensive system of managed care.

**Jobs First:** DSS will be planning and developing a multi-million dollar “safety net” infrastructure that will offer preventive and intervention services to parents who are at risk of losing their benefits for their failure to comply with the requirements of *Jobs First*. Particular emphasis will be laid on serving and protecting children.

**Transportation for Clients:** Recognizing that the lack of transportation can present an obstacle to clients who are working or looking for work, especially for city residents who are working or looking for work in the surrounding suburban regions, DSS will be working with various community and public agencies, including the Connecticut Departments of Transportation, Economic and Community Development, and Labor to improve, expand, and develop transportation systems in New Haven, Hartford, and Bridgeport, targeted to DSS clients.

**Brain Injury:** The federal government has approved DSS plans to implement an acquired-brain injury home and community-based services waiver, which will allow DSS to support the provision of community services for up to 500 people with brain injuries. The targeted implementation date is January, 1998.

**Teen Pregnancy Prevention:** Services will be expanded into Hartford and Bridgeport.

**Child Care:** Future plans include the design and implementation of a statewide child care management information system, implementation of a school-readiness initiative for pre-school children, and a uniform child care subsidy program.