

ConneCT Overview for CLASS



**Helping Clients Navigate the
Connecticut Department of Social
Services Online**

November 2014

Agenda

- Overview of ConneCT and stats
- Business model and centers approach
- Customer Portal options and tips (MyAccount, changes, applications)
- Where medical applications begin
- FastLink cover sheets
- Your questions

ConneCT Project Overview - Project Vision & Objectives

- ConneCT Objectives
 - Improve Client Access
 - Achieve Better Quality Outcomes
 - Enhance Customer Service
 - Reduce Costs
 - Provide a Technological Framework for the Future
- Three Components
 - Web Services
 - Telephony
 - Document Management and Workflow



ConneCT Release Overview (#'s as of 10/31/14)

	Functional Overview	Status
MyAccount (Client Accounts)	Provides secure, anytime access to generic and case-specific information to clients via the Internet.	Currently Live (http://connect.ct.gov) 97,697 Accounts created
Am I Eligible? (Pre-Screening)	Allows clients to independently check for potential eligibility online without having to visit or call DSS.	Currently Live (http://connect.ct.gov) 85,227 program inquiries
Interactive Voice Response (IVR)	Provides secure, anytime access to generic and case-specific information by phone.	Currently Live 855-6ConneCT (855-626-6632) 142,783 phone accts
Document Management and Workflow	Provides centralized access to documents and visibility into document status.	Currently Live – documents scanned, indexed and available via electronic workflow to staff 7,120,216 documents scanned

ConneCT Release Overview (cont.)

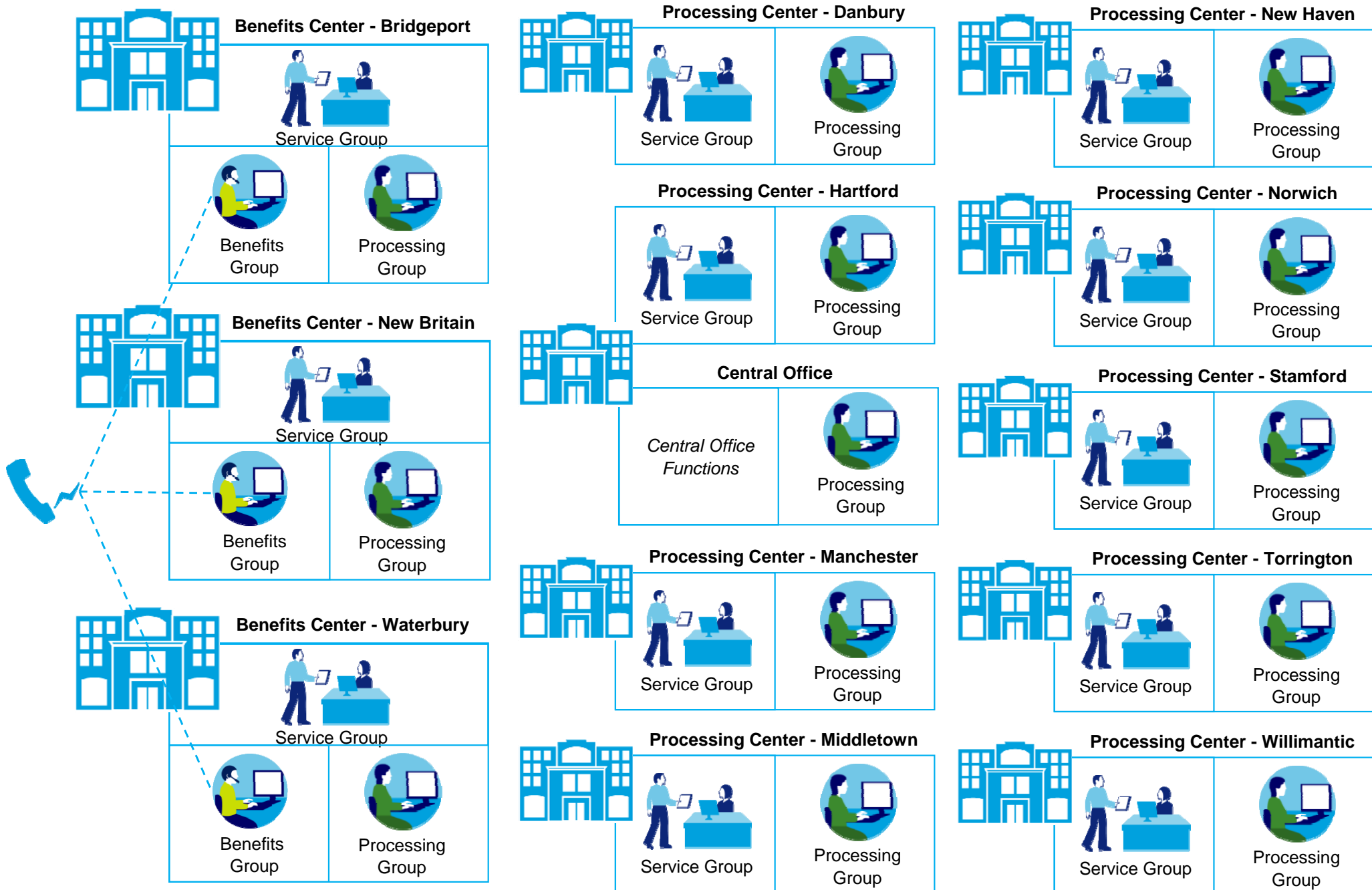
	Functional Overview	Status / Target Date
Benefits Center	Provides a centralized, consistent enterprise system for receiving and servicing incoming calls.	640,532 calls have reached DSS BC workers to date (~ 10,000 average/week)
Online Application	Allows clients to apply online and provides a dynamic verification checklist to clearly explain what verification is required.	43,235 applications have been submitted online since October 2013
Online Change Reporting	Allows clients to report changes online.	Beginning December 2014
Online Redeterminations	Allows clients to conduct redeterminations online.	TBD - 2015

A New Business Model – The Centers

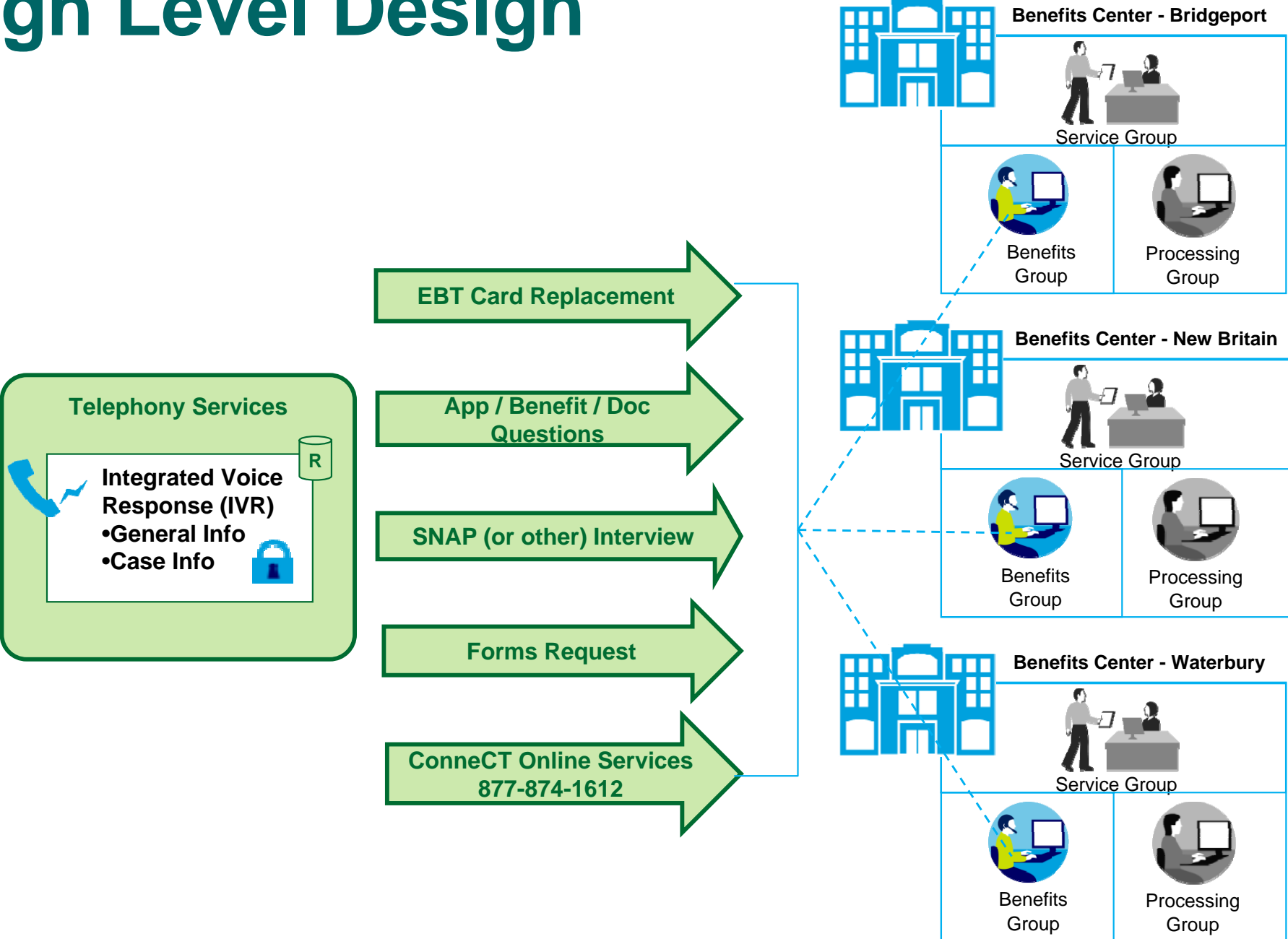
- Service Centers
 - All 12 Regional Offices
- Processing Centers
 - All 12 Regional Offices
- Benefits Centers
 - 3 Regional Offices:
Bridgeport, New Britain
and Waterbury



Office Organization Model with ConneCT



IVR to Benefits Center Call Flow – High Level Design



For TTY Assistance

- DSS has dedicated Eligibility Service Workers in each of our 3 Benefits Centers.
- The toll-free number is 1-800-842-4524

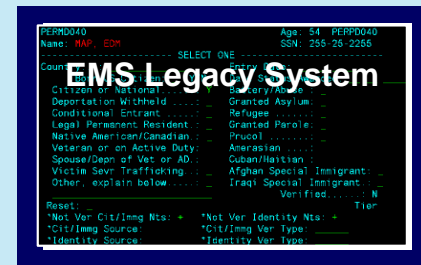
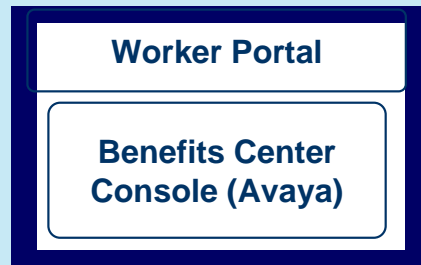
Benefits Center - incoming calls



Benefits Center
Worker
and Supervisors



Benefits Center Phone (VoIP)



ConneCT Screen Pop

ConneCT Client Information

State of CT DSS Client Information

Client ID:

Verified: Yes Language:

Name:

Call Reason:

Calling Number:

Program Info

Medicaid for Children:HoH:Active

Medicare Savings Program:HoH:Active

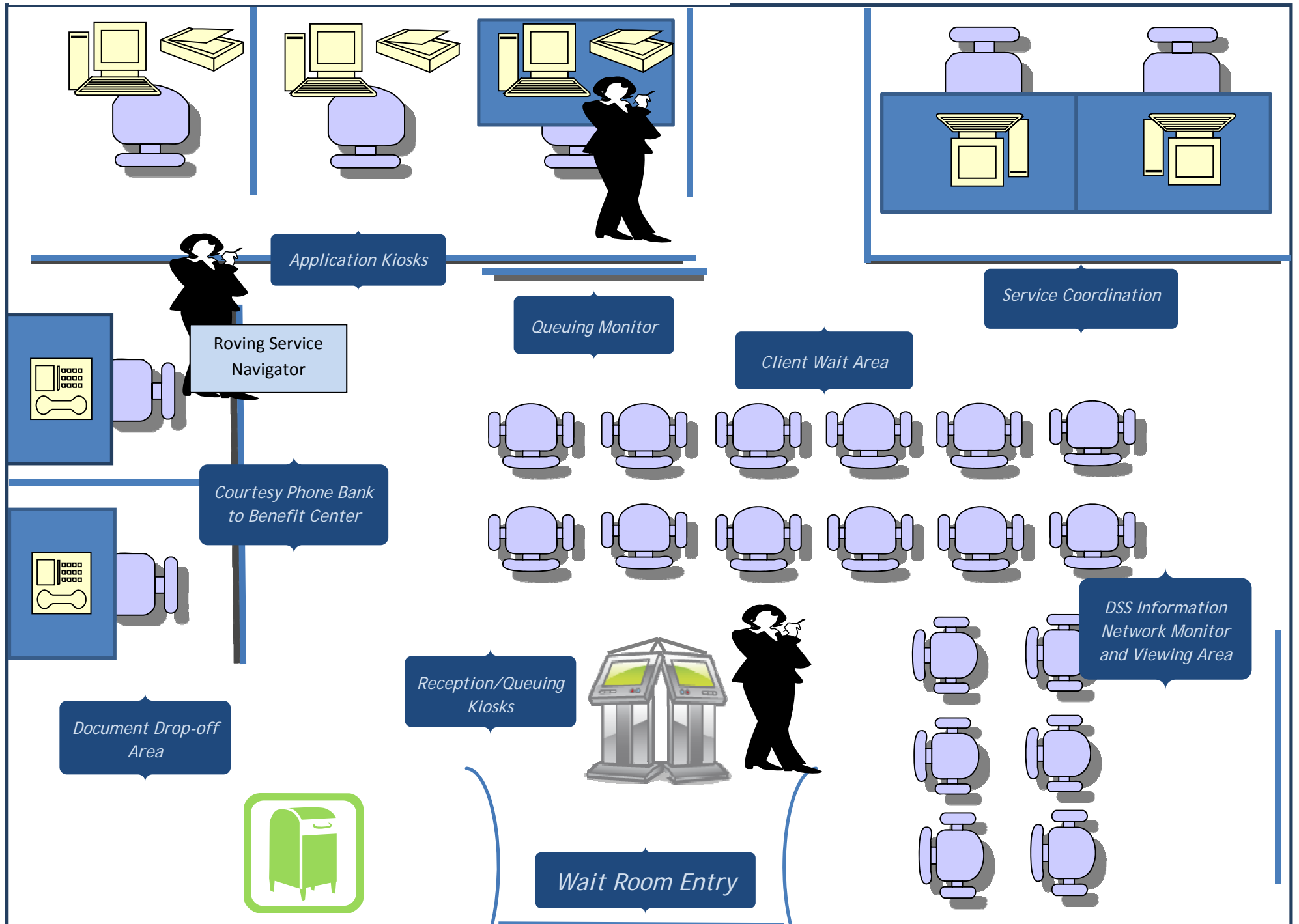
Reminder: This information is also available at connect.ct.gov

Done

Service Center Client Activities

- Apply for benefits, complete re-determinations, report changes
- See a worker for scheduled appointments, and other DSS services
- Access other Community Services/Providers, where applicable
- Access forms
- Access envelopes/cover sheets
- Drop off documents

DSS Service Center - Concept Design (Not to scale)

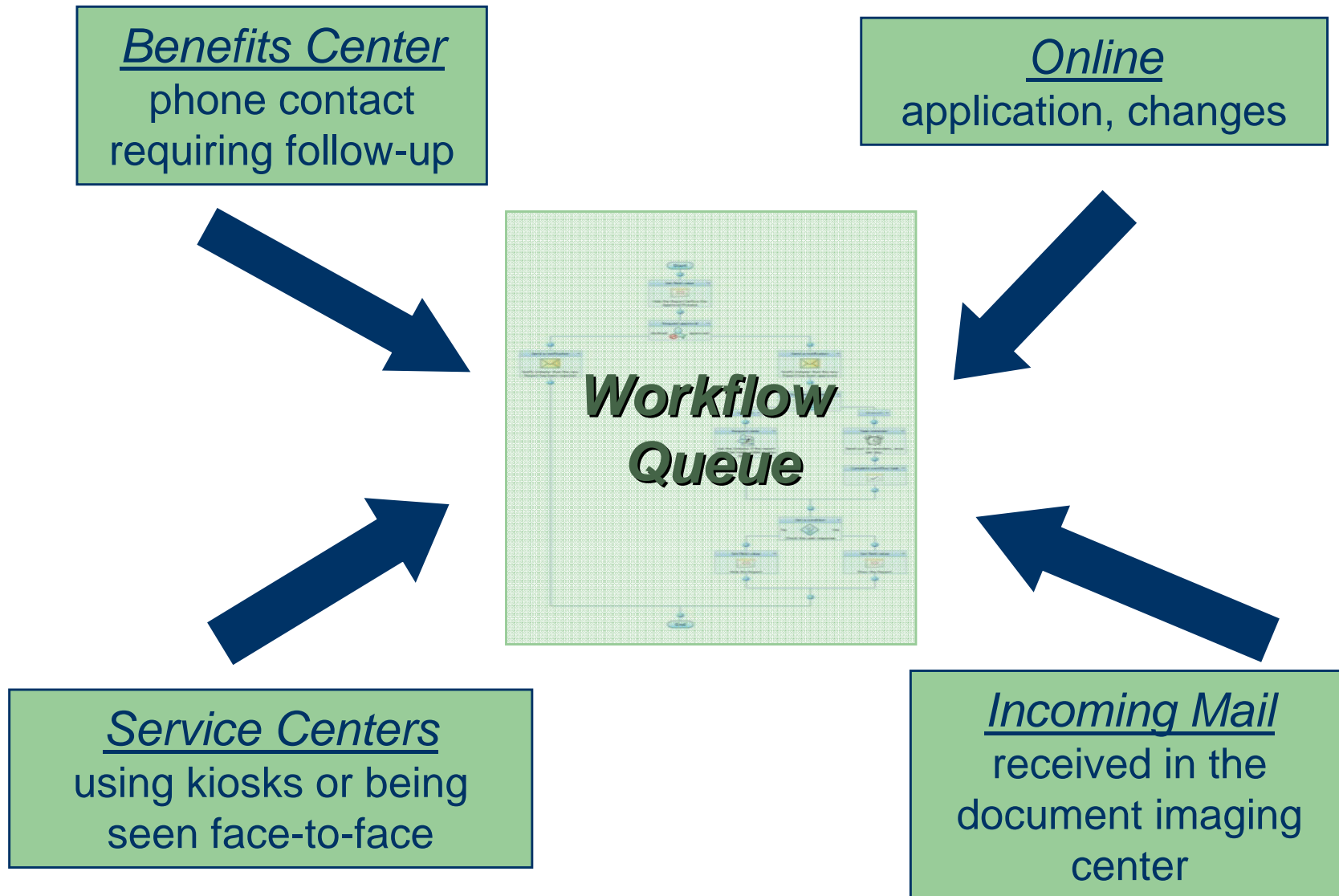


Statewide Caseload and Specialty Units

Types of processors:

- TFA Specialty – local pool 12 offices
- LTSS Specialty - statewide pool for active cases, but applications will be processed at 4 application ‘hubs’ each with a geographical area
- Expedited HUSKY A Specialty – statewide pool for presumptively eligible medical cases.
- General Processing– all other programs/tasks (applications, renewals, changes, pendings)
- Phone Interviewers at Benefits Centers

Source of Work Generation from Client to DSS



ConneCT Worker Portal – A Closer Look...

https://worker-dssconnect.ct.gov - ConneCT - Microsoft Internet Explorer

Close

Work Item Details

Work Pool	General Application
Priority	
Client ID	
DSS Office	
Work Item Status	Unassigned
Created Date	10/13/2014
Redetermination End Date	
Days In Workflow	22
Days In Inbox	22
Comments	No

Add/View Comments

Envelope Details

- Envelope ID:
 - Photo ID
 - Recent Mail
 - Application Part 2: Eligibility Determination Document

Document Details

Document Type	U-PHO
Document Name	Photo ID
Document Category	Demographics and ID
Client ID	
Online Sub. ID	A4000776941

DL Class D *Connecticut* USA
DRIVER LICENSE

9 Class: D Restr: NONE 9a Endors: NONE
4d Lic #: 787878787 15 Sex: F
3 DOB: 05-30-1978 16 Ht: 61 in
4b Expires: 05-30-2015 18 Eyes: BLU
1 SAMPLE
2 SUSAN CATHERINE
3 60 STATE ST. ROOM 145
4 WETHERSFIELD CT 06109
4a Issued: 06-30-2009

ConneCT Customer Portal

The screenshot shows a web browser window displaying the ConneCT Customer Portal. The browser's address bar shows the URL <https://connect.ct.gov/access/>. The page header includes the [CT.gov](#) logo, the text "State of Connecticut", and "Governor Dannel P. Malloy" with a search box. The main heading is "DEPARTMENT OF SOCIAL SERVICES".

The main content area features a large graphic with a group of diverse people and a large blue arrow pointing upwards and to the right, with the word "Connect" written across it. Below this graphic is a link: [Mail Documents to DSS](#).

On the right side, there are three main service boxes:

- Am I Eligible?**
See if you may qualify to receive medical benefits, help buying food, and/or cash assistance.
[CHECK NOW](#)
- Apply For Benefits**
For a fast and easy way to apply for benefits.
[APPLY NOW](#)
- MyAccount**
Securely access your account and view information about your DSS benefits.
[ACCESS NOW](#)

At the bottom left, there are links for [Get Applications and Forms](#), [Get Health Insurance](#), and [Frequently Asked Questions](#). Below these are short text blocks: "DSS forms are available to print [here](#)."; "If you would like to apply for health care coverage beginning after January 1st, 2014, click [here](#)."; and "Find answers to the most commonly asked questions about ConneCT and Access Health CT."

The footer contains the address "25 Sigourney Street Hartford, CT 06106-5033", navigation links for "Home | CT.gov Home | Send Feedback | Login | Register", and legal links for "State of Connecticut [Disclaimer](#), [Privacy Policy](#), and [Web Site Accessibility Policy](#)". The copyright notice is "Copyright © 2002-2014 State of Connecticut." and the [CT.gov](#) logo is on the right.

Step one – assist client with creating the “MyAccount” (also part of application)

- Enter first and last name
- Email address is optional
- Create unique user ID and Password
- Select 4 secret questions and answer them
- Click user acceptance box
- Associate MyAccount to the client ID (if known)
- Password Resets
877-874-1612



Step 2 - accessing MyAccount



MyAccount

Case Information

Client Name: [REDACTED]

Client ID: [REDACTED]

Client Address:

[REDACTED]

Office Address:

New Britain
30 Christian Lane
New Britain, CT 06051

Home Phone: [REDACTED]

Cell Phone:

General Information: 1-866-723-2591

Benefits Summary

Food Benefits	Head of Household	Details
SNAP	[REDACTED]	
Medical Benefits	Head of Household	Details
Family Medicaid	[REDACTED]	

Document Details

Below are the documents we have received from you. Please note: Documents that have been reviewed may not impact your case status right away.

Document Type	Document Category	Document Status	Document Received Date
W-GCS	Miscellaneous	Received	07/17/2013
W-1348	Miscellaneous	Received	07/17/2013
unknown	Miscellaneous	Reviewed	07/17/2013
unknown	Miscellaneous	Received	07/17/2013
U-PST	Income	Received	07/17/2013
unknown	Miscellaneous	Received	07/17/2013
unknown	Miscellaneous	Received	07/17/2013
W-GCS	Miscellaneous	Reviewed	07/17/2013
W-1461	Miscellaneous	Reviewed	07/17/2013
U-BC	Demographics and ID	Reviewed	07/17/2013

[Next 10 Documents >](#)

Step 3 - MyAccount Details

Search by Client ID

Program Details





Program Details  

Food Benefits

This is more information about your Supplemental Nutrition Assistance Program (SNAP) benefits. If you would like to look at information about other benefits, click the **Return to MyAccount** button at the bottom of the page.

SNAP

As of March 11th, 2014, the household's SNAP benefit is \$488.00. The household's ongoing benefits will be put on the EBT Connect Card by the third of each month. To check current balance, please call 1-888-328-2666 or log on to www.ebtaccount.jpmorgan.com.

 is the Head of Household and is included in this benefit.
 is included in this benefit.
 is included in this benefit.
 is included in this benefit.

[Return to MyAccount](#)

Helpful MyAccount materials are under the partner section of the DSS website.

Connecticut Department of Social Services
Making a Difference

DEPARTMENT OF SOCIAL SERVICES

Home About Us Press Room Forms Contact Us

CLIENTS/APPLICANTS PROGRAMS & SERVICES PARTNERS/VENDORS REGIONAL OFFICES PUBLICATIONS

Making a Difference...

Roderick L. Bremby
Commissioner

Welcome to the Connecticut Department of Social Services. We hope you find this website both helpful and informative. Please add us to your bookmarks and check back frequently for up-to-date information on the services we offer.

ConneCT offers quick access to the Department of Social Services

- ✓ Am I Eligible? (DSS benefits screening tool)
- ✓ Apply for benefits
- ✓ MyAccount (check your DSS customer benefits)

ConneCT with DSS Today!

Special for Service Partners

Health Information Technology

I Need Help With...

Food/Nutrition	Health Coverage	Financial/Work
<ul style="list-style-type: none"> - SNAP - Food Banks - Farmers' Markets - EBT Card <p>...More</p>	<ul style="list-style-type: none"> - HUSKY (incl. Medicaid) - Long-Term Care - Medicaid for Employees with Disabilities <p>...More</p>	<ul style="list-style-type: none"> - Special For Veterans - Temporary Family Asst. - State General Asst. - How To Use Your EBT Card - Employment Services <p>...More</p>

follow us on **twitter**

About **ConneCT**

New - How to report changes online

[Connect Home](#) > MyAccount

[¿Habla español?](#) | [Print](#) | [Page Help](#) | [Manage MyAccount](#) | [Access Health CT](#) | [Logout](#)

Hello, renew. You are logged in.

[Apply Report Change](#)

[Mail Documents to DSS](#)



MyAccount

Case Information

Client Name: Jennifer Jones

Client ID: 003946855

Client Address:

Jennifer Jones
6 Marley Place
Waterbury, CT 06705-0000
Home Phone:
Cell Phone:

Office Address:

Waterbury
249 Thomaston Avenue
Waterbury, CT 06702
General Information: 1-866-454-1108

Benefits Summary

For more information about your benefits click the "magnifying glass icon".

Medical Benefits	Head of Household	Details
Medicaid for Low Income Adults	Jennifer Jones	

Recently Received Documents

Below are the documents we have recently received from you. Please note: Documents that have been reviewed may not impact your case status right away.

Document Type	Document Category	Document Status
ONRE	Applications and Renewals	Received
ONAP	Applications and Renewals	Received
U-BC	Demographics and ID	Reviewed
ONAP	Applications and Renewals	Reviewed



[ConneCT Home](#) > [MyAccount](#) > Report Changes

[¿Habla español?](#) | [Print](#) | [Page Help](#)

Hello, **John** . You are logged in.

0% Complete

Start	Assets	Income	Expenses	Finish & Submit
--------------	---------------	---------------	-----------------	----------------------------

People

Additional Information

Report Changes

For most changes, you will need to mail, fax, or bring proof to DSS within 10 days of reporting the change. Without this proof, your changes may not be made and your benefits may end.

Reporting Changes Through ConneCT

Please check the boxes for all of the changes that you want to report.

Based on the benefits you are getting, these are the changes you must report:

- | | |
|--|--|
| <input type="checkbox"/> Your address or phone number has changed. | <input type="checkbox"/> Someone's housing or utility bills changed. |
| <input type="checkbox"/> Someone had a change in job income and/or work hours. | <input type="checkbox"/> Someone had a change in personal information. |
| <input type="checkbox"/> Someone had a change in disability status. | <input type="checkbox"/> Someone moved out of your home. |
| <input type="checkbox"/> Someone moved into your home. | |
| <input type="checkbox"/> Other/Authorized Representative | |

CANCEL & EXIT

NEXT >>

Complete all screens, submit change & verify by mail or upload online

Verification Checklist and Document Submission

Please Note: To report a change for AhCT health care benefits, click 'Next'.

Online Submission ID: R800041481
Submission Date: 04/11/2014 12:27PM
Application Date: 04/11/2014



The table below shows you which proofs you may need to submit to complete the renewal process. The information you provided may require verification. This list includes proofs you may have and/or links to DSS forms. NOTE: Asset verifications varies by program. For complete verification requirements, please review the program brochures.

[Program Brochures](#)

Verification Documents

Category	Sub-Category	Household Members	Proofs
Address	Residence	TIKI BARBER	Post Office record OR Recent Mail OR Utility Bills
Citizenship/Identity	Identity	TIKI BARBER	Photo ID OR Passport OR Birth Certificate OR Vote Registration Card/Record OR Naturalization Certificate/Papers OR Immigration Papers OR Social Security card

Submit Documents by Mail or Fax

To send proofs through U.S mail or fax, print a cover sheet by clicking the **Cover Sheet** button below.

Note: Failure to include a coversheet will impact the receipt and processing time of your renewal.

The cover sheet provides the DSS mailing address and Fax number.

Enclose this cover sheet with all your proofs.

[Cover Sheet](#)

Submit Documents Online

To upload proofs online, please locate the electronic copy on your computer by clicking the **Browse** button below.

Select the document type from the selection box.

You may only upload one document at a time.

Please note: You may only upload documents in the following formats: TIFF or PDF. You may only upload one document at a time.

You may view your uploaded documents in the **Uploaded Documents** section at the bottom of this page.

File Name:

[Browse](#)

Document Type:

[Upload](#)

Using the online application

The screenshot shows a web browser window displaying the Connecticut Department of Social Services website. The browser's address bar shows the URL <https://connect.ct.gov/access/>. The website header includes the state logo, the text "State of Connecticut", and "DEPARTMENT OF SOCIAL SERVICES". A search bar and a "ConneCT" logo are also visible. The main content area features a large graphic with a group of people and a large blue arrow pointing upwards and to the right, with the word "ConneCT" written across it. Below this graphic, there are three main sections: "Am I Eligible?", "Apply For Benefits", and "My Account". The "Apply For Benefits" section is circled in red and contains the text "Apply For Benefits" and "For a fast and easy way to apply for benefits." with an "APPLY NOW" button. Other sections include "Get Applications and Get Health Insurance Forms", "Frequently Asked Questions", and "ACCESS NOW" for the "My Account" section. The footer contains contact information: "25 Sigourney Street Hartford, CT 06106-5033" and various links like "Home", "CT.gov Home", "Send Feedback", "Login", and "Register".

State Department of Social Ser... Connecticut Department of...

File Edit View Favorites Tools Help

CT.gov State of Connecticut Governor Dannel P. Malloy Search

DEPARTMENT OF SOCIAL SERVICES

Welcome to ConneCT!

Am I Eligible?
See if you may qualify to receive medical benefits, help buying food, and/or cash assistance.
CHECK NOW

Apply For Benefits
For a fast and easy way to apply for benefits.
APPLY NOW

My Account
Securely access your account and view information about your DSS benefits.
ACCESS NOW
New to ConneCT?
[Create an Account](#)

Mail Documents to DSS

Get Applications and Get Health Insurance Forms
DSS forms are available to print [here](#).

Get Health Insurance
If you would like to apply for health care coverage beginning after January 1st, 2014, click [here](#).

Frequently Asked Questions
[Find answers](#) to the most commonly asked questions about ConneCT and Access Health CT.

access health CT

25 Sigourney Street Hartford, CT 06106-5033
Home | CT.gov Home | Send Feedback | Login | Register
State of Connecticut [Disclaimer](#), [Privacy Policy](#), and [Web Site Accessibility Policy](#). Copyright © 2002-2014 State of Connecticut.

Benefits to applying online

- You have a “receipt” of the date and time it was submitted.
- It is transmitted directly into ConneCT with no need for scanning or any mail lag time.
- An application ID is provided that can be used when calling DSS. This is helpful when there is not yet a client ID.
- You can start the application, save it, and then return to it once you know the answers to all the questions.
- Verifications can be mailed or uploaded where they will electronically attach to the application.

If helping complete the application, you can check the proper radio button

Start

Assets

Income

Expenses

Finish & Submit

Start

People



Completing this Application

Completing this Application

Please tell us if you are completing this application for yourself or on behalf of someone else. Need more help? Click the [Page Help](#) link above.

- Self
- Friend or Helper
- Family Member
- Community Partner
- Authorized Representative
- Legal Guardian/Conservator
- Power of Attorney

Provide name and agency info

Start

People



Filing Representative Details

Contact Information

Please tell us more about the person completing the application.

* Name / Agency:

Mae Sam - Anytown Soc. Services

Filing Representative Address

10 Main St.

(Street Address, P.O. Box Number, Facility Name, c/o)

(Apartment, Suite, Unit, Building, Floor, etc.)

City:

Anytown

State:

Connecticut

Zip Code:

06600

Home/Office Phone Number:

2031112222

Cell Phone Number:

From this point in the application, when we say "you" or "your" we mean the applicant.

CANCEL & EXIT

PREVIOUS

NEXT

Complete application with client

- Answer each applicable question - remaining questions pertain to the client
- Red asterisks are mandatory
- If client wants to authorize you to check on the application status, complete field on signature page
- Client signs electronically
- You should sign as a helper (unless you are an official Authorized Rep or Power of Attorney)

Authorization to Disclose Application Status

I authorize the Department of Social Services to share information regarding the status of this application for assistance with the following individuals, agencies or institutions;

Name : Telephone Number :

Name : Telephone Number :

Signature Declaration

I have read this form or have had it read to me in a language that I understand.

I certify that all of the information given on this form is true and complete to the best of my knowledge. I certify that I have specific knowledge of the identity of all children for whom I am asking for help on this form and that the information I gave about these children is accurate to the best of my knowledge. I also declare and certify that I and everyone for whom I am applying for help is either a United States citizen or a non-citizen for whom I have provided true and accurate(correct) information.

If I have knowingly given incorrect information, I may be subject to penalties for false statement as specified in sections 53a-157b and 17b-97 of the Connecticut General Statutes; to penalties for larceny as specified in sections 53a-122 and 53a-123 of the Connecticut General Statutes; and to other criminal and civil penalties under state and federal law. I may also be subject to penalties for perjury under federal law. I authorize the Department of Social Services to verify any information given on this form.

Electronic Signature

I agree to submit this application by electronic means. By signing this application electronically, I understand that an electronic signature has the same legal effect and can be enforced in the same way as a written signature.

Applicant's or Conservator's Signature

By checking this box and typing my name below, I am electronically signing the application.

First Name :

Middle Initial :

Last Name :

Suffix :

How to apply for medical beginning 1/1/2014

- **HUSKY A, B or D - Apply through Access Health CT (AHCT)**
 - Online at www.accesshealthct.com
 - Call 1-855-805-4325 to apply over the phone
 - Call 1-855-805-4325 to ask for a paper application
 - Can also apply in person at any AHCT storefront, with any community assister or navigator, or at a DSS office – no wrong door
- **HUSKY C** - Continue to use W-1E application sent to DSS Scanning Center or apply online via DSS ConneCT.

Access Health CT

CT Health Exchange/Marketplace

The following **Medicaid** populations will apply via AHCT:

- HUSKY A (Kids under 19)
- HUSKY A (parent/caretaker relatives)
- HUSKY B (Kids under 19 over income for Medicaid)
- HUSKY D – Adults -19-64 (Medicaid Lowest Income Populations)
- ❖ Applications started on the DSS ConneCT site for SNAP/cash, are routed to the AHCT website for medical coverage

HUSKY C

Medicaid Aged, Blind, Disabled

- HUSKY C remains with DSS
- Income rules did not change. MNIL – Medically Needy Income Limit applies.
- Asset Limit remains \$1,600 for an individual.
- Spenddown still in effect
- Disabled clients not yet on Medicare may choose HUSKY D.
- Medicare recipients are not eligible for HUSKY D.
- Medicare recipients who are also parents or caretakers may use HUSKY A group.
- SSI recipients may use AHCT for HUSKY D or apply via DSS for HUSKY C.

access health CT

Connecticut's Official Health Insurance Marketplace

GET HEALTH COVERAGE

LEARN MORE

GET HELP



CHANGE IS HERE.
SEE IF YOU QUALIFY
FOR MORE AFFORDABLE
HEALTH CARE COVERAGE.

Access Health CT is **the only place** you can get these savings.
What kind of coverage are you looking for?



Individuals



Families



Employees




Employers

Additional ways you can help...

- Encourage our customers to use the bar-coded FastLink cover sheet and the envelope DSS provides for return of all documents.
- When you send docs on behalf of a customer and do not have the bar-coded cover sheet, please print one from ConneCT for people with a client ID, or use the application FastLink cover sheet when they are new to DSS. (This is part of the new W1E application form.)
- Note the client ID on each document submitted.
- Submit authorization form (W298) to DSS if necessary, so the Benefits Center reps can discuss any active cases issues beyond payment information with you.

FastLink


General cover sheet



W-1348cs
New 12/12

State of Connecticut
Department of Social Services
FastLink
(Form 1348 Cover Sheet)

Client ID:
012345678

This address must display in window of return envelope. 

DSS ConneCT SCANNING CENTER
PO BOX 1320
MANCHESTER CT 06045-9988

IMPORTANT: YOU MUST FILL OUT AND SEND THIS COVER SHEET WITH ALL DOCUMENTS RETURNED TO DSS. FAILURE TO SEND COVER SHEET MAY RESULT IN SERVICE DELAY.

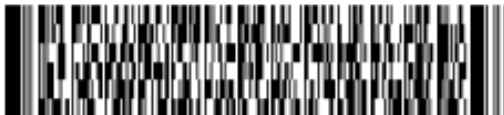
Instructions:

- Please see your "Verification We Need" form and "Guide to Verification of Information for DSS Programs" brochure to know what documents to send with this cover sheet. You can check the status of your documents online after two business days here: <https://connect.ct.gov>
- Fill out the information below:

First Name: _____
Last Name: _____
Date: ____/____/____
Number of Pages I am returning (including this cover sheet) : _____

- Fold this cover sheet so that the return address (above) shows through the return envelope window.
OR:
Fax only this cover sheet and your verification documents to: [ConneCT document fax number]

Note: Please send or fax photocopies of your documents. **DO NOT** send or fax original documents.


4866486x786481c748234x26c757506

Questions? Visit <https://connect.ct.gov/> or call 855-6-CONNECT for help.

PAGE 1 OF 1

5297

FastLink

Application cover sheet – page one of the W-1E



State of Connecticut
Department of Social Services

FastLink

(Application Cover Sheet)

This address must display in window of return envelope. →

DSS ConneCT Scanning Center
PO Box 1320
Manchester CT, 06045-9968

IMPORTANT: YOU MUST FILL OUT AND SEND THIS COVER SHEET WITH YOUR APPLICATION.	
What is the zip code where you live? <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	If you have a client ID, write it here: <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
What is your first name? <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	
What is your last name? <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	
Make a clear, dark mark ● in each circle that applies to you and the people you are applying for.	
Who are you applying for? <input type="radio"/> Only myself <input type="radio"/> Myself and my spouse <input type="radio"/> Myself and my family <input type="radio"/> Only children under 19 in my care	What are you applying for? <input type="radio"/> SNAP (Supplemental Nutritional Assistance Program/Food Stamps) <input type="radio"/> Medical Coverage (Health Insurance) <input type="radio"/> Family Planning Coverage <input type="radio"/> Nursing Home or Home-Based Care <input type="radio"/> Cash
Are you pregnant?	<input type="radio"/> Yes <input type="radio"/> No
Do you live in a licensed residential care facility (boarding home)?	<input type="radio"/> Yes <input type="radio"/> No
Answer the following questions if you are applying for SNAP:	
Is your household's total income less than \$150 a month?	<input type="radio"/> Yes <input type="radio"/> No
Do your household's cash and bank accounts total less than \$100?	<input type="radio"/> Yes <input type="radio"/> No
Is the total of your household's monthly income, cash and bank accounts less than your total housing and utility costs for a month?	<input type="radio"/> Yes <input type="radio"/> No
Is anyone in your household a migrant or seasonal farm worker?	<input type="radio"/> Yes <input type="radio"/> No

FastLink



FastLink HUSKY A PRESUMPTIVE ELIGIBILITY FAX SHEET FOR HHCE/RPU REFERRAL

PE
HUSKY
cover
sheet –
fax to
(860)
812-0006

TO: DSS Scanning Center at fax# 860-812-0006
FROM:
EMAIL ADDRESS:
FAX NUMBER:
PHONE:
DATE: **PAGES:**

TO:
FROM: DSS expedited HUSKY unit
FAX NUMBER:
PHONE:
DATE: **PAGES:**

Only one applicant/family per cover sheet, please !

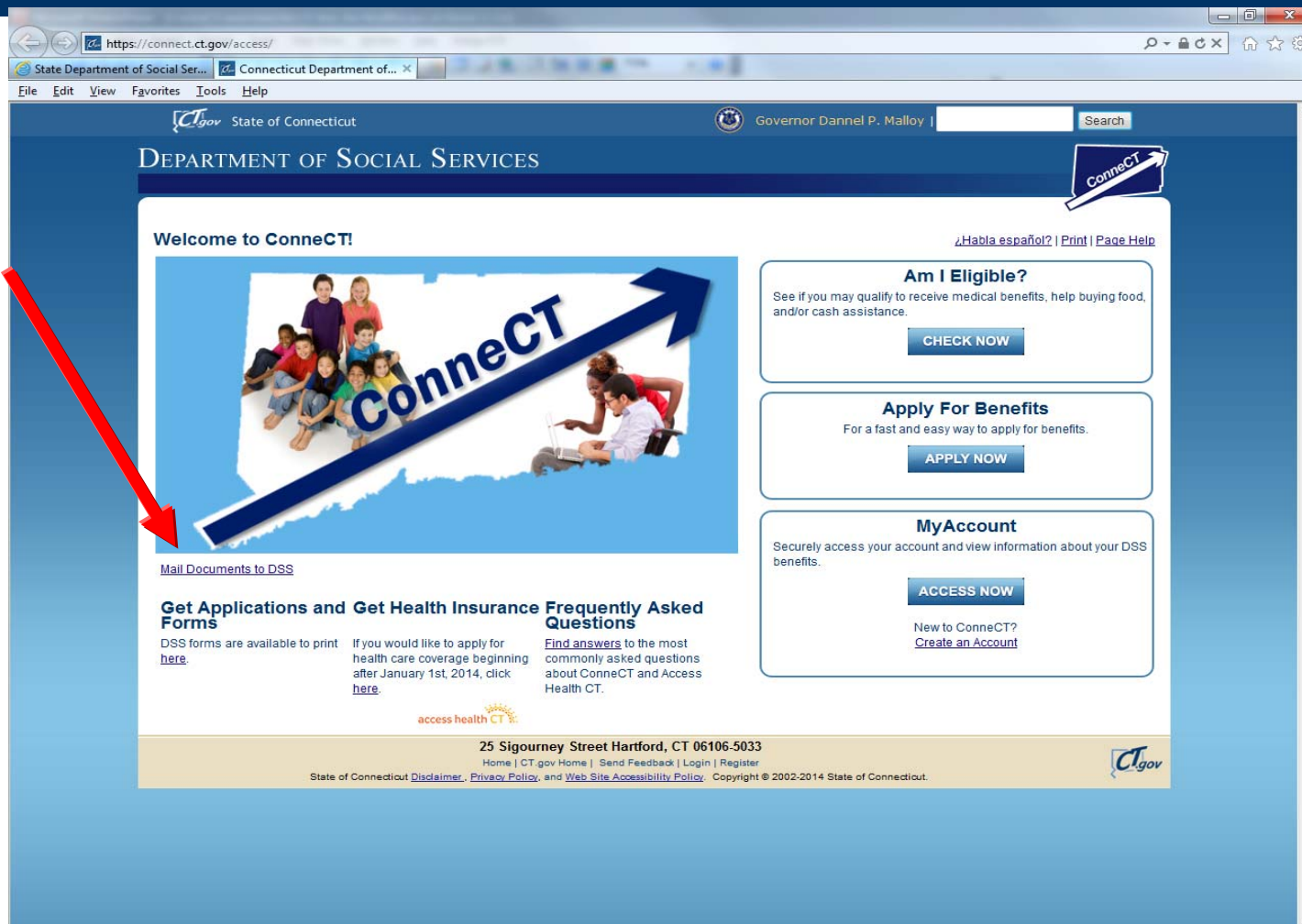
Applicant Name	Client ID/SS #	Rec'd Y/N	HA Grant Effective Date	RPU Contact	Notes

To be completed by certified entity:	To be completed by DSS upon return:	
Please note the name of each individual beside the Head of Household above for whom assistance is requested	DSS Client ID	HA Grant Effective Date
1.		
2.		
3.		
4.		
5.		

CONFIDENTIAL INFORMATION: The information contained in this facsimile contains confidential and protected health information. If the recipient of these documents is not the intended recipient or a person responsible to receive this fax, please do not disseminate, distribute or copy it, please notify the sender immediately by calling the number above so that we will take immediate and appropriate action to see to it that this mistake is corrected.

ConneCT client portal – cover sheet

<https://connect.ct.gov/>



The screenshot shows the ConneCT client portal website. The browser address bar displays <https://connect.ct.gov/access/>. The page header includes the State of Connecticut logo, the text "State of Connecticut", the Governor's name "Governor Dannel P. Malloy", and a search bar. The main navigation bar features the "DEPARTMENT OF SOCIAL SERVICES" and a "ConneCT" logo with an arrow. The main content area is titled "Welcome to ConneCT!" and includes a large banner image with a group of people and a large blue arrow pointing right with the word "Connect" written on it. A red arrow points to this banner image. Below the banner, there are three main service boxes: "Am I Eligible?" with a "CHECK NOW" button, "Apply For Benefits" with an "APPLY NOW" button, and "MyAccount" with an "ACCESS NOW" button. There are also links for "Mail Documents to DSS", "Get Applications and Get Health Insurance Forms", and "Frequently Asked Questions". The footer contains contact information: "25 Sigourney Street Hartford, CT 06106-5033" and links for "Home", "CT.gov Home", "Send Feedback", "Login", and "Register".

State of Connecticut
Governor Dannel P. Malloy | Search

DEPARTMENT OF SOCIAL SERVICES

ConneCT

Welcome to ConneCT!

[¿Habla español?](#) | [Print](#) | [Page Help](#)

Am I Eligible?
See if you may qualify to receive medical benefits, help buying food, and/or cash assistance.
[CHECK NOW](#)

Apply For Benefits
For a fast and easy way to apply for benefits.
[APPLY NOW](#)

MyAccount
Securely access your account and view information about your DSS benefits.
[ACCESS NOW](#)
[New to ConneCT?](#)
[Create an Account](#)

[Mail Documents to DSS](#)

Get Applications and Get Health Insurance Forms
DSS forms are available to print [here](#).

If you would like to apply for health care coverage beginning after January 1st, 2014, click [here](#).


Frequently Asked Questions
[Find answers](#) to the most commonly asked questions about ConneCT and Access Health CT.

access health CT

25 Sigourney Street Hartford, CT 06106-5033
[Home](#) | [CT.gov Home](#) | [Send Feedback](#) | [Login](#) | [Register](#)
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ConneCT client portal cover sheet

CT.gov State of Connecticut Governor Dannel P. Malloy | Search

DEPARTMENT OF SOCIAL SERVICES 

[ConneCT Home](#) > Mail Documents to DSS [Print](#) | [Page Help](#) | [¿Habla español?](#)

Mail Documents to DSS

To send documents to DSS, you will need a document cover sheet. Include one cover sheet for each envelope of documents you send to DSS. Please note: If you are making an application, a cover sheet is not necessary. You can mail or fax in only your application.

My Personal Information

Please complete the below information, and then click Continue.


First Name :

Middle Initial :



Last Name :

Client ID :

[Print Cover Sheet](#)

25 Sigourney Street Hartford, CT 06106-5033
Home | CT.gov Home | Send Feedback | Login | Register
State of Connecticut [Disclaimer](#), [Privacy Policy](#), and [Web Site Accessibility Policy](#). Copyright © 2002-2012 State of Connecticut. 

FastLink cover sheet to print

 WGCS 06-903	State of Connecticut Department of Social Services FastLink <small>General Cover Sheet</small>	Client ID: 001234567
This address must display in window of return envelope. 	DSS Connect SCANNING CENTER PO BOX 1320 Manchester CT, 06045-9968	


IMPORTANT: YOU MUST FILL OUT AND SEND THIS COVER SHEET WITH ALL DOCUMENTS RETURNED TO DSS. FAILURE TO SEND COVER SHEET MAY RESULT IN SERVICE DELAY.

Instructions:

- Fill out the information below.

First Name: John _____
Last Name: Doe _____
Date: ___ / ___ / ___
Number of Pages I am returning (including this cover sheet) : ___
- Fold this cover sheet so that the return address (above) shows through the return envelope window.

Note: Please send photocopies of your documents. DO NOT send original documents.



Questions? Visit <https://connect.ct.gov/> or please call the Benefit Center at 855-6-CONNECT for help.

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Thank you!

Your questions?