

## Questions for the Department of Social Services Commissioner Nominee

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### Commissioner of Social Services ([CGS § 17B-3](#))

The commissioner is responsible for administering social services programs, including those funded by the Temporary Assistance for Needy Families (TANF) block grant and Medicaid; promoting economic self-sufficiency; facilitating communication among federal, state, municipal, and private entities; and applying for and receiving federal funds.

### Questions Concerning Agency Organization and Functions

1. What do you see as the Department of Social Services' (DSS') strengths and weaknesses? What leadership and management skills do you bring to this position that will enable you to maximize those strengths and reduce the weaknesses?
2. As commissioner, what will be your three highest priorities? What specific changes would you like to make in how the department operates?
3. Do you think the state's current human services infrastructure helps or hinders the agency in meeting its mission?
4. There has been a long-standing debate about the pros and cons of privatizing DSS services. What do you feel are the pros and cons?

## Questions Regarding Agency Programs and Service Delivery

1. The federal Centers for Medicare & Medicaid Services (CMS) is offering states the choice to apply for demonstration programs that would significantly change funding for part of the Medicaid program. Under this block grant model, states would agree to cap a portion of the funding in exchange for the ability to limit services and benefits. What are the advantages and disadvantages of such a model, and do you think Connecticut should consider it?
2. The governor's recent [Executive Order No. 6](#) directs DSS to improve public transparency of Medicaid costs and quality (accounting for over 20% of state expenditures) and establish interventions for Medicaid recipients that improve outcomes and reduce health disparities. As Connecticut's Medicaid program is often cited for its effective operations, and low-cost trends compared to Medicare and commercial coverage, how can the program be changed to address this new directive?
3. The state has been re-balancing the long-term care system to slowly shift resources from institutional care toward increasing demands for home care. [A 2019 state-commissioned report](#) estimated that 6,000 current nursing home beds in the state would not be needed by 2040. In response to a new law enacted in 2019, DSS notified nursing homes with less than 70% occupancy (9 out of 213 long-term care facilities) that their Medicaid reimbursement rates would be cut (totaling \$5.3 million), retroactive to July 1, 2019 ([PA 19-117](#), § 302). Should this cut be overturned or mitigated to support these nursing homes?
4. A new U.S. Department of Agriculture (USDA) rule would limit states' ability to extend benefits from the Supplemental Nutrition Assistance Program (SNAP) beyond a three-month period for unemployed adults who live in economically-depressed areas by basing waivers on the economic conditions in large labor market area groupings rather than local economic conditions. What impact, if any, would this rule have on Connecticut?
5. Veyo, which has entered its final year of a three-year, multi-million-dollar state contract to provide non-emergency medical transportation for Medicaid recipients, has [received](#) a significant number of complaints over leaving patients stranded or waiting for extensive periods of time. Has performance improved? If not, what steps will be taken to remedy these issues?

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