

I would like to talk to the Steering Committee members about the \$10 million that is in your budget for Health Insurance Technology (HIT). It is my understanding that the Department of Social Services (DSS) is going to be responsible for this money.

In the last few years DSS has spent millions on new computer systems that were going to correct problems that DSS chronically had with performing redeterminations and answering the phone. We were told that a new "Call Center" would solve the phone problem. We were told that there would be no more boxes of redeterminations and applications left unattended and unprocessed on the floors of DSS offices.

I am here to tell you that after opening the Call Center in 2014, DSS still can't answer the phone. The average wait time is still over 47 minutes. People with limited minutes on their cell phones hang up in frustration. I am here to tell you that people, including me personally, continue to receive cancellation notices after we have sent in all the appropriate paperwork.

What protections do you, as members of the Steering Committee, have to make sure that you don't let DSS spend another \$10 million only to find out that it was all a waste of money? What are the specific benefits and outcomes that we consumers of health care in Connecticut will get as a result of the \$10 million?