

Missouri Department of SOCIAL SERVICES

2017 Department Overview





Charge

Missouri charges the Department of Social Services (DSS) with the following broad responsibilities:

- The health and general welfare of the people are matters of primary public concern; and to secure them there shall be established a department of social services...(Missouri Constitution, Article IV, Section 37)
- ...To provide appropriate public welfare services to promote, safeguard and protect the social well-being and general welfare of children...to help maintain and strengthen family life, and to provide such public welfare services to aid needy persons who can be so helped to become self-supporting or capable of self-care; (§207.022.1(12), RSMo.)



Mission & Vision

Our Mission:

To maintain or improve the quality of life for Missouri citizens

Our Vision:

Safe, healthy, prosperous Missourians





Guiding Principles

- Results
 - We will make a positive difference in the lives of Missourians
- Service
 - We will help others with honor, dignity and excellence
- Proficiency
 - We will provide quality services with skill, creativity and innovation
- Integrity
 - We will uphold the public trust
- Inclusiveness
 - We will value our differences and celebrate the contributions of all

• Stewardship

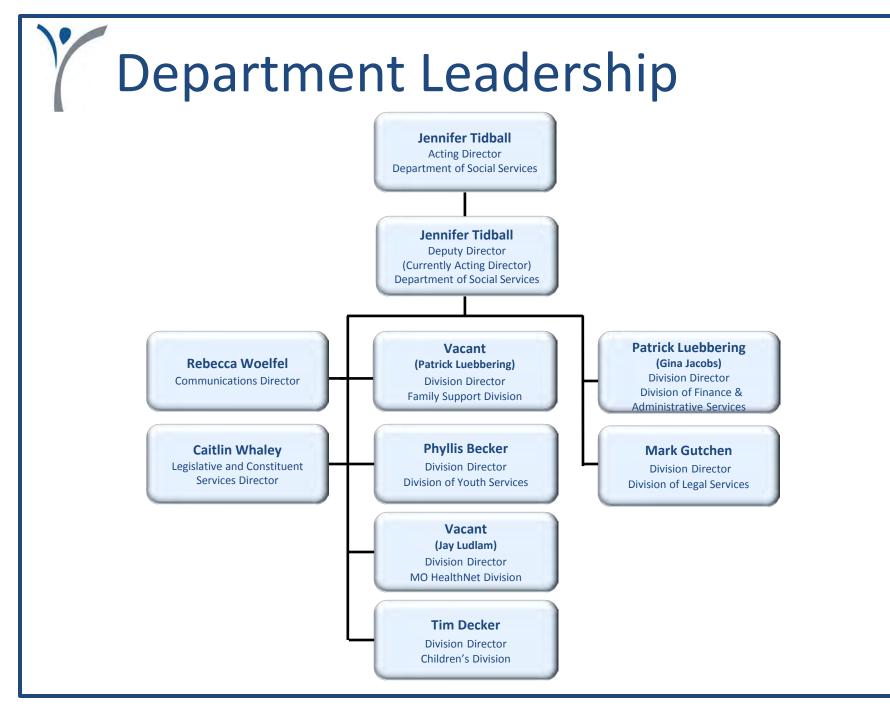
- We will wisely manage all resources entrusted to us
- Accountability
 - We will own our actions and their impact



Core Functions

- Child protection and permanency
- Youth rehabilitation
- Access to quality health care
- Maintaining and strengthening families





Department Leadership

Contact Information

Department Director (Vacant)

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MO HealthNet Division Director (Vacant)

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Division of Finance and Administrative Services Director

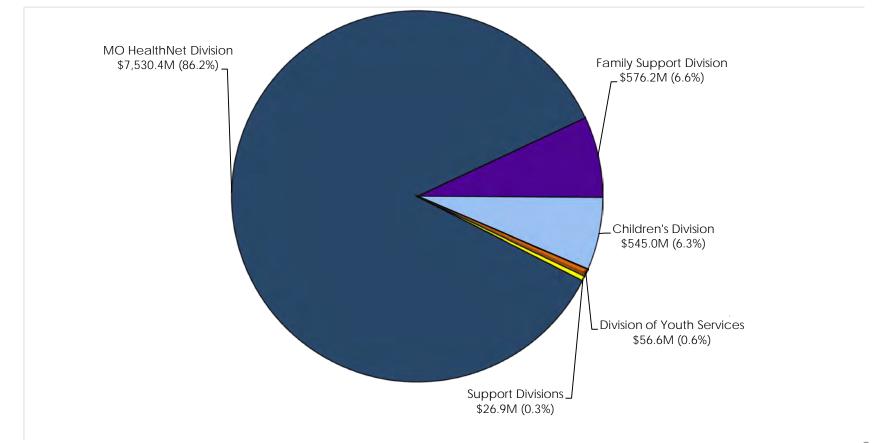
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Division of Legal Services Director

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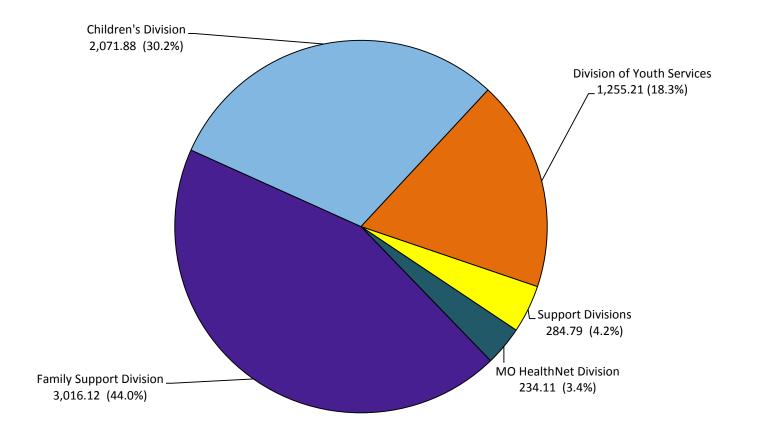


SFY 2016 Expenditures Total Funds by Division (\$8,735.1 M)



Budgeted Full Time Equivalents

SFY 2017 Budgeted Full Time Equivalents (FTE) Total FTE by Division (6,862.11)



Managed Care Geographic Extension

Beginning May 1, 2017, health care benefits for all MO HealthNet eligible children, low-income parents and pregnant women will be delivered through a Managed Care health plan

- Today Managed Care health plans provide health care benefits to these individuals living in the I-70 corridor and contiguous counties
- Others receive services under the MO HealthNet Fee-For-Service program
- Counties included in the switch from Fee-For-Service to Managed Care are:
 - Adair, Andrew, Atchison, Barry, Barton, Bollinger, Buchanan, Butler, Caldwell, Cape Girardeau, Carroll, Carter, Christian, Clark, Clinton, Crawford, Dade, Dallas, Daviess, DeKalb, Dent, Douglas, Dunklin, Gentry, Greene, Grundy, Harrison, Hickory, Holt, Howell, Iron, Jasper, Knox, Lawrence, Lewis, Livingston, McDonald, Mercer, Mississippi, New Madrid, Newton, Nodaway, Oregon, Ozark, Pemiscot, Putnam, Reynolds, Ripley, Schuyler, Scotland, Scott, Shannon, Stoddard, Stone, Sullivan, Taney, Texas, Wayne, Webster, Worth and Wright

Managed Care Geographic Expansion

- Open enrollment is going on now (January 20 April 2)
 - Today, MO HealthNet eligible children, low-income parents and pregnant women may choose their health plan for the May 1 implementation date
 - Those not selecting a health plan by April 2 will be auto assigned to a health plan, based on certain criteria
 - For more information, please visit our website: <u>http://dss.mo.gov/mhd/participants/mc/</u>
- To ensure Managed Care participants have a voice, MO HealthNet encourages participants to join the Consumer Advisory Committee (CAC)
 - The CAC mission is to empower those who get health care services through Managed Care to be actively involved in their health care
 - CAC members are Managed Care participants and other key stakeholders from across Missouri
 - The CAC meets twice a year to talk about and advise the MO HealthNet Division on issues related to the delivery of health care
 - The committee:
 - Empowers and educates participants about Managed Care
 - Recruits diverse and engaged Managed Care participants
 - Gathers feedback from Managed Care participants
 - Establishes equal and meaningful communication between CAC members and the MO HealthNet Division

Blind Pension Lawsuit

Blind Pensioners are paid a monthly cash assistance benefit from the Blind Pension Fund, which receives all of the revenues from a three mill tax on real property

Issue

- A class action lawsuit was filed in Cole County Circuit Court in 2006 challenging the way the department calculated rate increases under Section 209.040 RSMo for blind pension recipients dating back to 1992 (Gerken v. Sherman)
- Decisions in this case have been appealed to the Western District Court of Appeals and remanded four times
 - Further appeals are still possible
- The case is currently back in the Cole County Circuit Court (Judge Joyce) to determine the actual amount of damages owed under the rate calculation established by the court and to establish a process for payment of claims
- To determine the amount of the underpaid pension payments, the court will have to decide how much the state should have paid under the statutory formula and then subtract what the state actually paid
 - One issue before the court is whether the minimum rate that must be paid under Section 209.040 RSMo is to be increased in years the General Assembly directed a rate increase above the amount required by the formula in this section

Potential Impact

- On December 1, 2016, a judgment was issued against DSS for \$23.8 million (including the underpayment and 9% prejudgment interest) plus interest of 9% from and after July 26, 2016 until paid
- This judgment is not final and not appealable yet because it does not include a claims process for calculating and paying the amount owed to the class members
 - The judgment directs the parties to prepare and complete a claims process order within 30 days of the date of the judgment
- The timeframe for submission of the claims process has been extended until February 6, 2017
- DSS is currently reviewing options with the Attorney General's Office
- Once the Court approves a claims process and a final, appealable judgment is entered there will be decisions to be made on appeals and where the judgment is paid from (from the blind pension fund which will affect current pension payments or from a General Revenue source which will affect other programs
 - Either way an appropriation by the General Assembly is necessary

Hepatitis C Treatment and Pending Lawsuit

- In 2014, a new class of medications for the treatment of hepatitis C became available
 - The new medications can be more effective and can be easier for patients to tolerate than the medications in use prior to 2014
 - The new hepatitis C medications are also much more expensive, with an initial cost of approximately up to \$90,000 per person to treat, depending on the diagnosis and type of drug involved
- Current spending for the new hepatitis drugs is around \$43 million annually (\$16 million General Revenue)
 - Missouri receives drug rebates (between 20% and 30%) for the new hepatitis medications approximately six months after expenditures occur
 - MHD always works to negotiate better pricing and rebate rates from the respective drug company

Hepatitis C Treatment and Pending Lawsuit

- Under federal and state law, Missouri is required to have procedures in place for the development of policies governing drug utilization
 - This includes policies and procedures for prior authorization of drugs such as the new hepatitis C drugs in question
 - Missouri's policies comply with the requirements of federal and state law
 - MHD has policies in place that limit treatment to people who have more severe cases of cirrhosis and do not have any of a list of clinical contraindications to usage
 - MHD currently approves treatment under its policies when drugs prescribed are medically necessary, clinically appropriate, and not likely to result in adverse medical results, in compliance with state and federal regulations

Hepatitis C Treatment and Pending Lawsuit

Issue

- On October 16, 2016, DSS was sued in the United States District Court, Western District of Missouri, alleging that the state Medicaid program is inappropriately denying access to new hepatitis C medications (*J.E.M. v. Brian Kinkade, DSS*)
- DSS is being defended by the Attorney General's office
- The Plaintiffs requested a Preliminary Injunction
 - The Court held a hearing on the Preliminary Injunction on January 6, 2017
 - The Plaintiffs have asked the Court to order Missouri to pay for these drugs for all Medicaid participants if they are prescribed by their physician
 - The judge has not issued a decision on the request for Preliminary Injunction

Potential Impact

- At stake is the ability of Missouri as a state to retain control over the integrity of the MO HealthNet drug utilization and prior authorization policy development and implementation process to ensure the optimal usage of treatments, using best practices and clinical evidence
- Removing the current cirrhosis requirement to increase access to new hepatitis C medications is estimated to increase current costs by an additional \$40 to \$50 million per year (\$14.8 to \$18.5 million General Revenue)
- Costs may go down in out years as pent-up demand in the caseload is addressed

Missouri Department of Social Services FAMILY SUPPORT DIVISION



Programs and Services

FSD administers the following needs-based programs:

- **Food Stamp Program** provide for use in purchasing foodstuffs from grocers through an Electronic Benefit Transfer (EBT)
- Temporary Assistance for Needy Families (TANF) provides an EBT for cash assistance
- Medicaid (MO HealthNet) eligibility determination
- Child Care eligibility determination
- Low-Income Home Energy Assistance Program (LIHEAP) provides heating and cooling assistance
- Blind Pension provides cash assistance to the legally blind
- **Community Services Block Grant (CSBG)** provides services to low-income individuals

Child Support provides assistance in paternity and support order establishment and enforcement of child support obligations

Rehabilitation Services for the Blind (RSB) provides services to blind and visually impaired persons

Initiatives

Business Process Improvements

• Missouri Eligibility Determination and Enrollment System (MEDES)

- MEDES, the new FSD case management system, manages 760,000 out of 995,000 Medicaid cases
- FSD is completing the family Medicaid component of the system
- After this, work will begin on the Food Stamp Program (SNAP) and other income support programs and conclude with Medicaid for the aged, blind and persons with disabilities
- The Office of Administration (OA) & DSS awarded an RFP to prequalify vendors to bid on SNAP development
- These vendors will submit bids to complete future development projects related to SNAP

Electronic Content Management

- In the fall 2016, implemented Phase I of electronic document management system
- Phase II implementation will include:
 - Forms recognition or Optical Character Recognition (OCR)
 - The system will connect/interface with other systems
 - New business processes and improved work flows will be implemented

• Third-Party Eligibility Verification System

- OA awarded a contract to Infocrossing to aggregate public data sources to help FSD to validate that individuals are eligible for services
- Implementation is pending a decision by OA on the merits of a protest from another bidder

Initiatives

Enhanced Customer Communication

Written Communication

- Rewriting applications and correspondence in plain language
- Using a robo-calling feature to notify customers they will be receiving time-sensitive mail from FSD
- Using colored papers to increase attentiveness to FSD correspondence

• FSD Info Center (State-Operated Call Center)

- The call center accepts calls on the Food Stamp Program (SNAP), TANF, Medicaid, Child Care and other income support programs
- Responding to customer inquiries with state staff has helped ensure that customers' questions
 are answered with one call
- FSD uses a triaged call center to help manage call volume and flow
- New reporting and call management software helps FSD better understand call patterns, customer needs and staff efficiency

Initiatives

Access to Services

FSD continues to align resources and develop new strategies to increase customer access to services and enhance customer communication

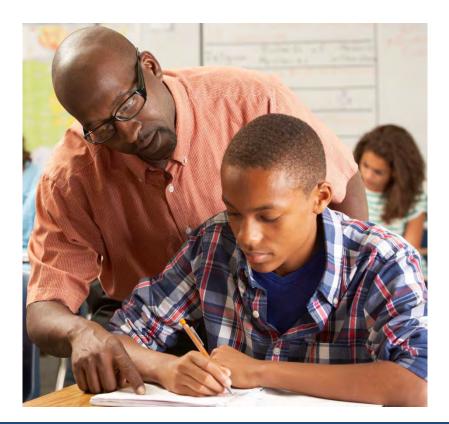
• Optimizing Resource Center Locations

- FSD continues to review client "traffic" and look for opportunities to align staff resources with client need
- Sometimes this is in the form of a standalone resource center and at other times staff present in libraries, health care provider offices, and other locations clients frequent

Increasing Access to Services through Online Tools

- FSD recently implemented the Missouri Benefits Center where Missourians may answer a few questions to determine the likelihood they are eligible for income support programs or they may choose to complete an application
- The online application helps to expedite the eligibility determination process and is especially useful for stakeholders and advocates assisting individuals with the application process

Missouri Department of Social Services DIVISION OF YOUTH SERVICES



Division of Youth Services (DYS)

Programs and Services

DYS works with the courts to rehabilitate juvenile offenders through the following need-based services and programs:

• Treatment Programs

 Range from non-residential day treatment/resource centers, community based, moderate and secure residential institutions

• Education

 A Department of Elementary and Secondary Education (DESE) accredited program that allows youth to earn high school credits toward a diploma or earn a high school equivalency (HiSet)

• Juvenile Court Diversion

 Provides community-based services to prevent juveniles from coming into DYS custody

Division of Youth Services (DYS)

Initiatives

Improved Educational Technology in Classrooms

- DYS operates an educational program approved by the Department of Elementary and Secondary Education (DESE)
- As the use of technology increases in the classroom, DYS has found that youth leaving their programs have not been exposed to the same level of technology as their peers in other classrooms and are at a disadvantage
- DYS is partnering with the Local Investment Commission (LINC), the Kansas City community partnership, and the Center for Education Excellence in Alternative Settings to increase the use of technology and enhanced learning in DYS classrooms and facilities
- The Office of Administration (OA)/Information Technology Services Division (ITSD) are assisting DYS with policies and protocols and the infrastructure for Wi-Fi use in DYS facilities
- DYS staff and teachers have attended national training on using technology in the classroom and a small delegation of DYS Educational Administrators visited Oregon, a state recognized for their use of technology in alternative settings, to learn best practices
- DYS staff and teachers with partner support are implementing enhanced learning techniques and technology in the classrooms
 - Initial implementation is improving student motivation, engagement and enthusiasm

Missouri Department of Social Services CHILDREN'S DIVISION



Programs and Services

CD provides the following programs and services:

- Child Abuse and Neglect Hotline
 - Hotline is answered 24 hours a day, 7 days a week
- Investigations
- Family Assessments
- Family-Centered Services
- Children's Treatment Services
- Foster Care
- Adoption/Guardianship
- Child Care Programs

Initiatives

Best Practices and Improving Outcomes

- Child and Family-Centered Practice Model
 - The Children's Division initiated leadership and organizational culture change initiatives, leading to the development of a new practice model
 - These changes were informed by visiting with front-line staff and hosting seven community conversations and numerous youth summits and advisory meetings around the state
 - Four key policy priorities evolved from the work with communities and partners including:
 - 1. Seeing families more accurately in order to move beyond compliance to sustainable change
 - 2. Engaging and partnering with children, families, and communities
 - 3. Making more informed decisions
 - 4. Supporting front-line practice and programs that work

Initiatives

Best Practices and Improving Outcomes

- The new practice model includes the following elements:
 - Five Domains of Wellbeing
 - Universal needs critical to the wellbeing of individuals, families, and communities including social connectedness, stability, safety, mastery, and meaningful access to relevant resources

Trauma-Informed Practice

 Embedding trauma awareness and focus into its policies and practices based on the Missouri Model: A Development Framework for Trauma-Informed Care (<u>https://dmh.mo.gov/trauma/</u>)

- Signs of Safety

• A child protection framework developed in Western Australia and based solution-focused therapy which stresses the importance of clear language and concrete action steps, safety networks and effective working relationships, child/youth voice, critical thinking, and child welfare workers as change agents

- Team Decision Making (TDM)

• Statewide expansion of evidence-informed decision-making process previously implemented in St. Louis and Kansas City/Jackson County to ensure informed and inclusive decisions in all cases where child removal from home or a placement change is being considered

Initiatives

Best Practices and Improving Outcomes

• Youth Empowerment Task Force

- Prompted by common themes that have emerged from child, youth, and family experiences and federal legislation, *H.R. 4980 Subtitle B: Improving Opportunities for Children in Foster Care and Supporting Permanency*, CD has formed a Youth Empowerment Task Force facilitates culture and practice changes in areas such as:
 - Increasing youth voice and choice
 - Normalcy
 - Financial capacity
 - Wellbeing
 - Healthy transitions
- State Legislation (HB 1877) was subsequently enacted in 2016

Initiatives

Best Practices and Improving Outcomes

- Promoting and Researching Opportunities for Making Permanency Timely (PROMPT)
 - The PROMPT Team is a data-driven, decision-making process designed to research and promote strategies for ensuring that children reach permanency in a timely manner and have the opportunity to grow up in loving family settings without unnecessary delays in progressing through the child welfare system
 - Data dashboards are being developed for each local court circuit to identify trends and track progress over time
 - Judicial Engagement Teams (JET) are working with a small number of circuits through support of the Missouri Supreme Court and private foundation Casey Family Programs
 - Other opportunities are being followed up by the Children's Division Executive Leadership Team and Quality Assurance Specialists

Initiatives

Child Care

- Child Care Subsidy Time and Attendance System
 - Child care providers receiving payment from CD for families eligible for child care subsidy currently maintain mostly paper attendance records
 - DSS monitoring and compliance initiatives have found many providers without any documentation or without adequate documentation to support the subsidy payments made to them
 - In some cases providers have been removed from the Child Care Subsidy Program or referred for criminal investigation
 - Lack of documentation to support child care subsidy payments to providers has been a repeat Single State Audit finding
 - Office of Administration (OA) in coordination with CD will be releasing an RFP to procure an electronic time and attendance system to ensure child care subsidies are only paid when children are receiving care or according to absence and holiday policies in the contract

Initiatives

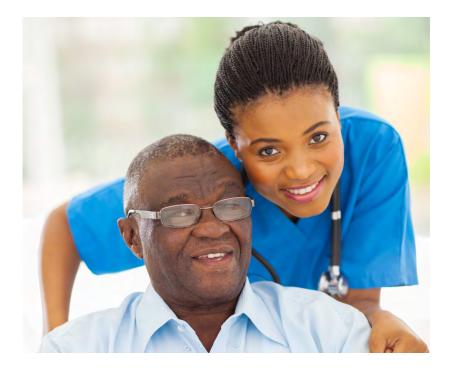
Child Care

- Early Childhood and Prevention Services
 - The Child Care and Development Block Grant (CCDBG) Act of 2014 (federal law governing federal funds used to pay child care subsidy) includes provisions requiring CD to strengthen the Child Care Subsidy Program by:
 - Applying additional health and safety requirements for non-licensed child care providers
 - Assuring provider accountability for compliance with health and safety requirements through on-site inspections
 - Improving the quality of child care by requiring the completion of specified training for providers
 - Allowing for greater parental choice when selecting a child care provider
 - Allowing for continued enhancements in the area of program integrity

- SB 1831 (2014) provided state authority to implement federal act changes

• CD is filing administrative rules and working with the Department of Health and Senior Services (responsible for licensing) child care providers and stakeholders and ensuring current statute aligns with federal requirements

Missouri Department of Social Services MOHEALTHNET DIVISION



Programs and Services

MHD administers health care benefits for low-income Missourians, including:

- Coverage for children, parents, pregnant women, seniors and persons with disabilities
- Full range of health care benefits
- Managed Care for children and parents today along the I-70 corridor
 - Effective May 1, Managed Care will be operated statewide for children and parents
- Fee-For-Service for those who live elsewhere
- Care Management, Health Homes and other programs to meet the special needs of the elderly, disabled and chronically ill

Initiatives

Transition to Population Health Management

MHD has implemented population health management initiatives for patient groups with specific care gaps, addressing those gaps with a goal to avoid more costly episodes of care. New initiatives or initiative expansions include:

• Health Home Enhancements

- Disease State Expansion
 - Adding obesity and childhood asthma as qualifying conditions to participate in a health home
- Community Health Worker Pilot
 - MHD is piloting a community health worker model in some primary care health homes operated by Federally Qualified Health Centers (FQHCs)
 - The community health worker is responsible for making sure Medicaid health home participants are:
 - Keeping health care appointments
 - Connected to resources to help meet other social services needs
 - Missouri Foundation for Health and the Greater Kansas City Foundation for Health is providing funding for this pilot

Initiatives

Transition to Population Health Management

• Perinatal Health Management Pilot

- In an effort to avoid the long-term health consequences of premature birth and reduce the costs associated with newborns who need care through the neonatal intensive care unit (NICU), MHD has contracted with Pemiscot Memorial Hospital to lead a perinatal care management pilot in Southeast Missouri in eight counties:
 - Pemiscot, Dunklin, New Madrid, Cape Girardeau, Mississippi, Scott, Stoddard and Butler
- Pemiscot Memorial contracted with Alpha Maxx, a company specializing in perinatal health management
- Alpha Maxx will be working with local health care providers to help ensure pregnant women on Medicaid deliver healthy, term babies and that those infants have preventative care and any health care needs met the first year of life
- In addition to the health care component, Alpha Maxx focuses on the social supports and economic needs of pregnant moms and families, recognizing that healthy pregnancies require all of a mom's needs to be met

Initiatives

Better Health Care Outcomes through Managed Care Contracts

- As Missouri moves to statewide Managed Care for family Medicaid (parents, kids and pregnant women), MHD has taken the opportunity to use the new Managed Care contract as a vehicle to strengthen care management requirements and improve performance outcomes
 - Contracted Managed Care Organizations (MCOs) are required to implement patient health responsibility incentive programs such as pay-for-performance payment methodologies with providers and Local Community Care Coordination (LCCC)
 - The LCCC is a form of accountable care organization where local community providers are paid and accountable for face-to-face care management and coordination that was previously done by the MCO anonymously using mail and telephone communication
 - Other contract changes provide financial incentives to lower ER utilization, submit timely data, improve access to care and realize administrative efficiencies

Initiatives

Missouri Medicaid Management Information System (MMIS) replacement

- The MMIS encompasses computer systems and contracted clinical support personnel responsible for ensuring MHD providers are paid on-time and consistent with MHD clinical and program policies
 - Some of these systems date back to 1978 and are past due for being replaced with more modern systems
 - MHD intends to procure modern systems which will permit the use of new, potential cost-savings healthcare payment models and reduce the programming time necessary to implement payment and program reforms
 - The first component currently in the process of being procured is an enterprise data warehouse with advanced analytic tools – known as Business Intelligence System/Electronic Data Warehouse - BIS/EDW
 - The BIS/EDW RFP closed December 12 and bids are in evaluation
 - Over the next 3 to 5 years MHD, in coordination with the Office of Administration (OA) Purchasing and OA Information Technology Services Division (ITSD) will develop and procure additional components of the system
 - The Centers for Medicare and Medicaid (CMS) have emphasized a desire for modularity and vendor competition

Support Services

Other DSS Offices & Divisions

The following offices support DSS program divisions and DSS core functions:

- Director's Office
 - Leadership and direction
- Division of Finance and Administrative Services (DFAS)
 - Financial and administrative support
- Division of Legal Services (DLS)
 - Comprehensive legal support and fraud investigations
- Human Resource Center (HRC)
 - Human resource management
- Missouri Medicaid Audit and Compliance (MMAC)
 - MO HealthNet provider monitoring and compliance
- State Technical Assistance Team (STAT)
 - Investigates child abuse, child neglect, child exploitation/pornography and child fatality cases

Support Services

Initiatives

Program Integrity

Division of Legal Services (DLS), the Division of Finance and Administrative Services (DFAS) and the Missouri Medicaid Audit and Compliance Unit (MMAC)

- Under the leadership of DLS, MMAC and DFAS, the Department of Social Services is undertaking a comprehensive review of its policies, procedures and resources to better address any fraud, waste and abuse in the programs administered by the Department
 - Developing standardized policies and resources so that workers clearly understand their responsibilities and pathways to communicate concerns regarding recipient fraud, provider fraud and DSS employee fraud
 - Procuring new technologies to identify suspect patterns of benefit use, expenditures or provider payments
 - Reviewing fraud and abuse cases to identify and implement opportunities to increase internal controls and program oversight



Initiatives

Review and Streamline Administrative Regulations

Division of Legal Services (DLS)

- Under the leadership of DLS, the Department of Social Services is implementing Governor Greiten's Executive Order 17-03 and §536.175 RSMo to review all of the administrative regulations governing its programs
 - The Department will be engaging its stakeholders and the public as part of its process to ensure that its administrative regulations comply with the executive order goals
 - Over the next year and beyond the Department of Social Services will take appropriate action to repeal unnecessary regulations, update outdated regulations and ensure that its regulations are transparent and accessible to the public



Frequently Requested Contact Information

Report Child Abuse and Neglect 1-800-392-3738

Report Fraud

1-877-770-8055

DLS.ReportFraud@dss.mo.gov