



Missouri
Department
of Social Services

2017
Annual
Report

An Equal Opportunity Employer, services provided on a nondiscriminatory basis



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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 an established department of social services...(Missouri Constitution, Article IV, Section 37)

and,

...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

To maintain or improve the quality of life for Missouri citizens

VISION

Safe, healthy, prosperous Missourians

GUIDING PRINCIPLES

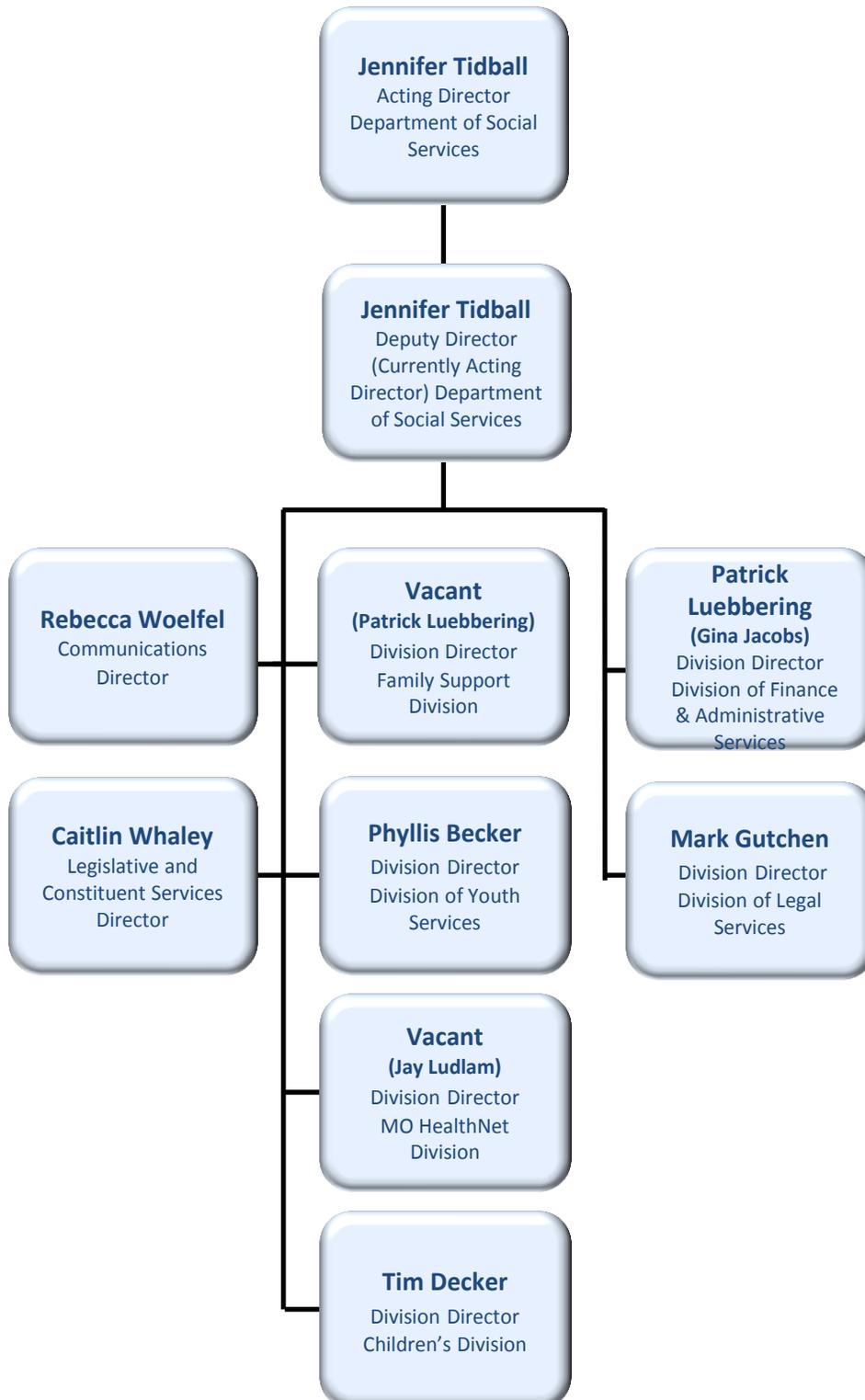
- **RESULTS** – We will make a positive difference in the lives of Missourians.
- **SERVICE** – We will help others with honor, dignity and excellence.
- **PROFICIENCY** – We will provide quality services with skill, creativity and innovation.
- **INTEGRITY** – We will uphold the public trust.
- **INCLUSIVENESS** – 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





Department Leadership

Contact Information

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Division of Finance and Administrative Services Director

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Division of Legal Services Director

Mark Gutchen
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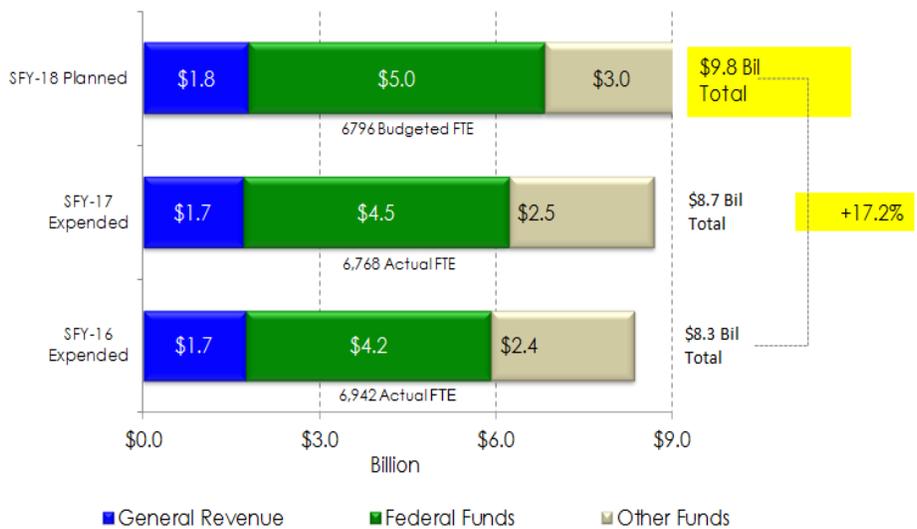
Jennifer Tidball
Acting Director



- Total spending has increased 17.2% (\$8,351.4) between SFY-16 and SFY-18 planned.
- General Revenue spending (GR) has increased by 3.0% (\$1,733.4). Federal fund spending has increased 20.1% (\$4,191.0) and Other fund spending has increased 22.3% (\$2,427.0).
- Most department expenditures continue to be from Federal and Other fund sources in SFY-17. GR spending will account for only 17.2% of planned spending.

Department Expenditure SFY-16 to SFY-18 Planned

With Fund Source Comparison (in billions)





2017 QUICK FACTS ABOUT DSS IN MISSOURI



MO HealthNet¹

Number of people enrolled for MO HealthNet services	883,672
MO HealthNet dollars spent in state fiscal year 2013 ²	\$7,791.4 mil
Estimated federal portion of MO HealthNet dollars spent	\$4,752.3 mil
MO HealthNet dollars for inpatient hospital services	\$641.1 mil
MO HealthNet dollars for physician services	\$557.0 mil
MO HealthNet dollars for nursing home services	\$1,065.7 mil
MO HealthNet dollars for pharmacy services	\$1,254.9 mil
MO HealthNet dollars for managed care payments	\$1,052.3 mil

Family Support

Child support collections (IV-D and non-IV-D)	\$882.9 mil
Average monthly temporary assistance families ³	31,053
Total temporary assistance payments ³	\$80.9 mil
Average monthly food stamp benefit recipients	840,642
Total food stamp benefits distributed	\$1,245.3 mil

Child Protection and Permanency

Children involved in completed hotline reports ⁴	96,794
Children with substantiated abuse or neglect	6,232
Children with family assessments ⁵	55,018
Average monthly children in foster care ⁶	13,436
Children adopted	1,312
Total Children's Services expenditures ⁷	\$222.1 mil
Average monthly children receiving subsidized child care ⁸	33,612
Child care expenditures	\$124.9 mil

Youth Services

Youths Committed ⁹	713
Average monthly youths in DYS custody	1,286

Notes

- Does not include Women's Health Services
- Medicare Buy-In premiums are reported at the statewide level, but not at the county level
- Includes Transitional Employment Benefit (TEB) cases
- Children's Division Annual Report, Table 2, total children less unable to locate, inappropriate report and located out of state
- Children based on completed investigations/assessments
- Children's Division Management Report, Table 25, legal status 1 only point-in-time end of month average for July 2016-June 2017
- Excludes all Child Care payments; Performance Based Contractor payments included only at the statewide level
- Any child receiving a payment during the month in a county, July 2016-June 2017. If a child received a payment in multiple counties the child is counted for each one.
- Includes dual jurisdiction cases

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PROGRAM DIVISIONS

FAMILY SUPPORT DIVISION

2017

615 Howerton Court • PO Box 2320 • Jefferson City, MO 65102-2320 • Phone: 573-751-3221

Programs & Services

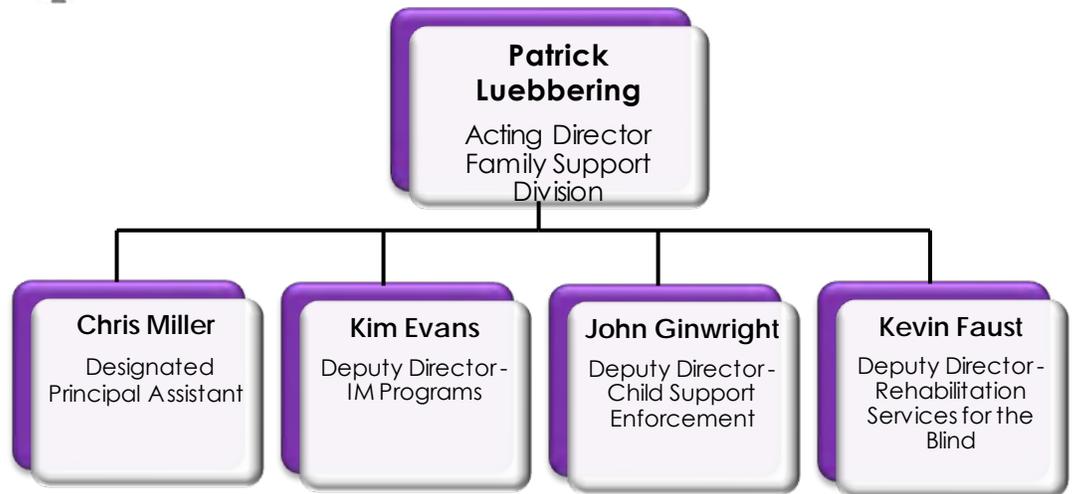
NEEDS BASED PROGRAMS

- TEMPORARY ASSISTANCE
- FOOD STAMPS
- LOW INCOME HOME ENERGY ASSISTANCE PROGRAM
- MO HEALTHNET ELIGIBILITY
- SUBSIDIZED CHILD CARE ELIGIBILITY

CHILD SUPPORT

REHABILITATION SERVICES FOR THE BLIND

Family Support Division (FSD) maintains and strengthens Missouri families, helping people achieve an appropriate level of self-support and self-care through needs based services.



- Compliance and Quality Review
- Critical Planning and Analysis
- Call Center

- Income Maintenance (IM) Program and Policy
- Community Services Block Grant
- Low Income Home Energy Assistance Program
- Refugee Assistance
- Grants
- EBT/Food Distribution
- Field Operations

- Child Support Program and Policy
- Training
- Automated System
- Financial Resolutions Section
- Field Operations
- Outreach
- Customer Relations
- Call Center

- Rehabilitation Services for the Blind

Find the Family Support Division on the web at www.dss.mo.gov/fsd/



Family Support Division

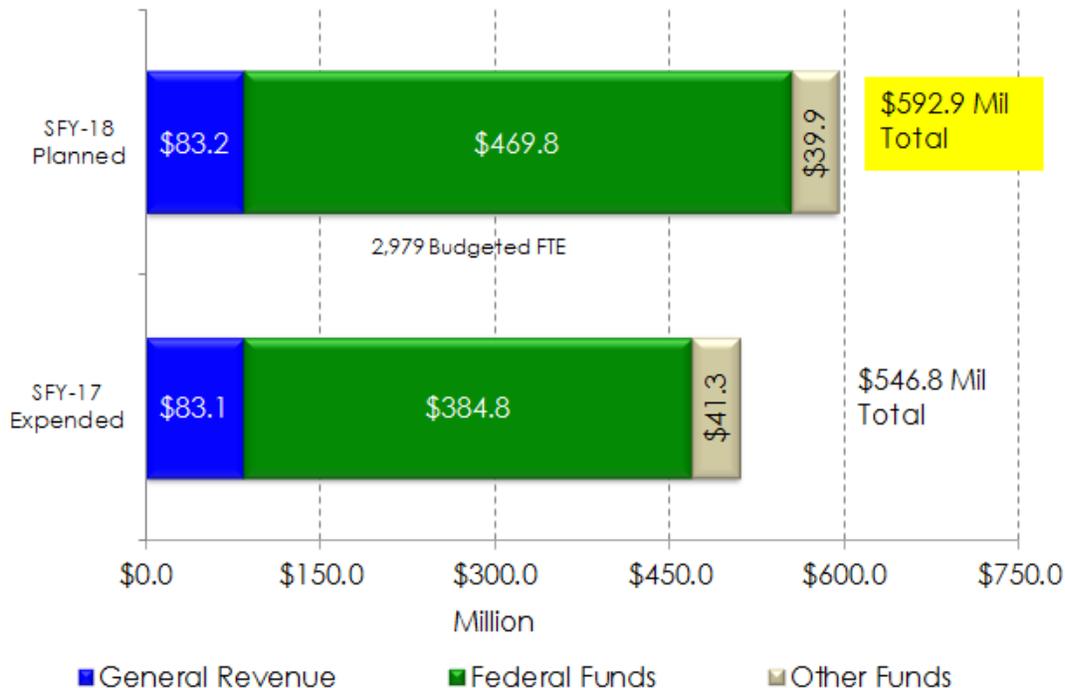
FSD

FSD Programs and Services

FSD administers the following needs based programs:

- **Food Stamps** provide for use in purchasing food 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.
- **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.
- **Blind Pension** provides cash assistance to the legally blind.
- **Community Services Block Grant (CSBG)** provides services to low income individuals.

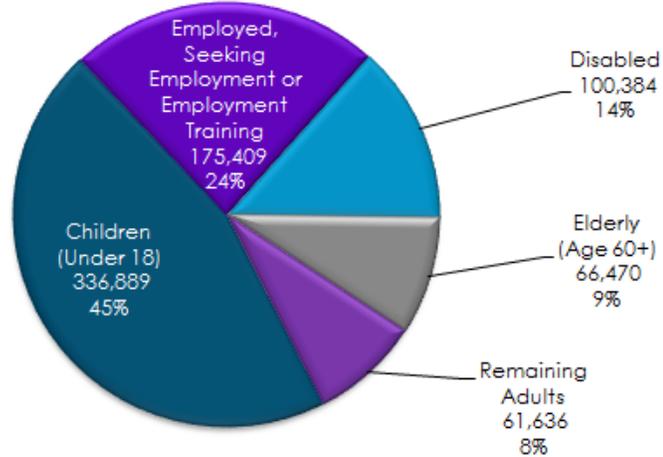
FSD Expenditures SFY-17 to SFY-18 Planned (in millions)



Food Stamp Participants

Food Stamp Participants

As Of November 30, 2016

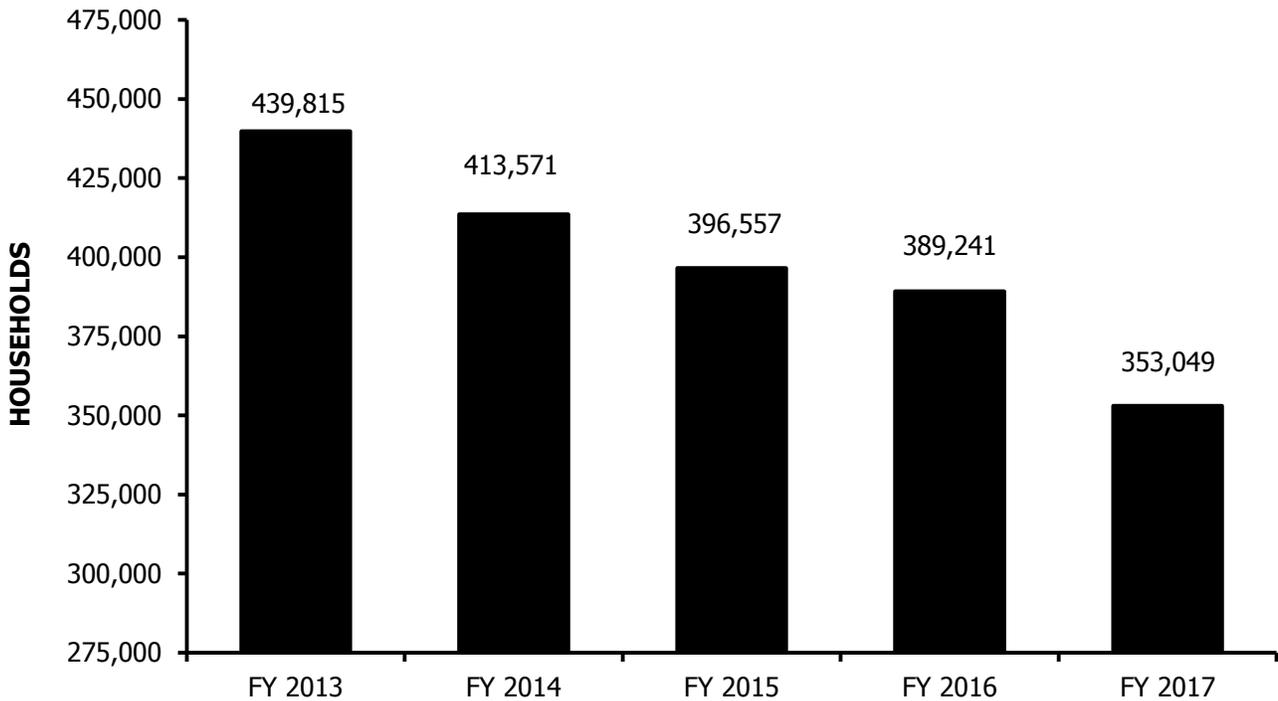


FOOD STAMP ELIGIBILITY REQUIREMENTS:

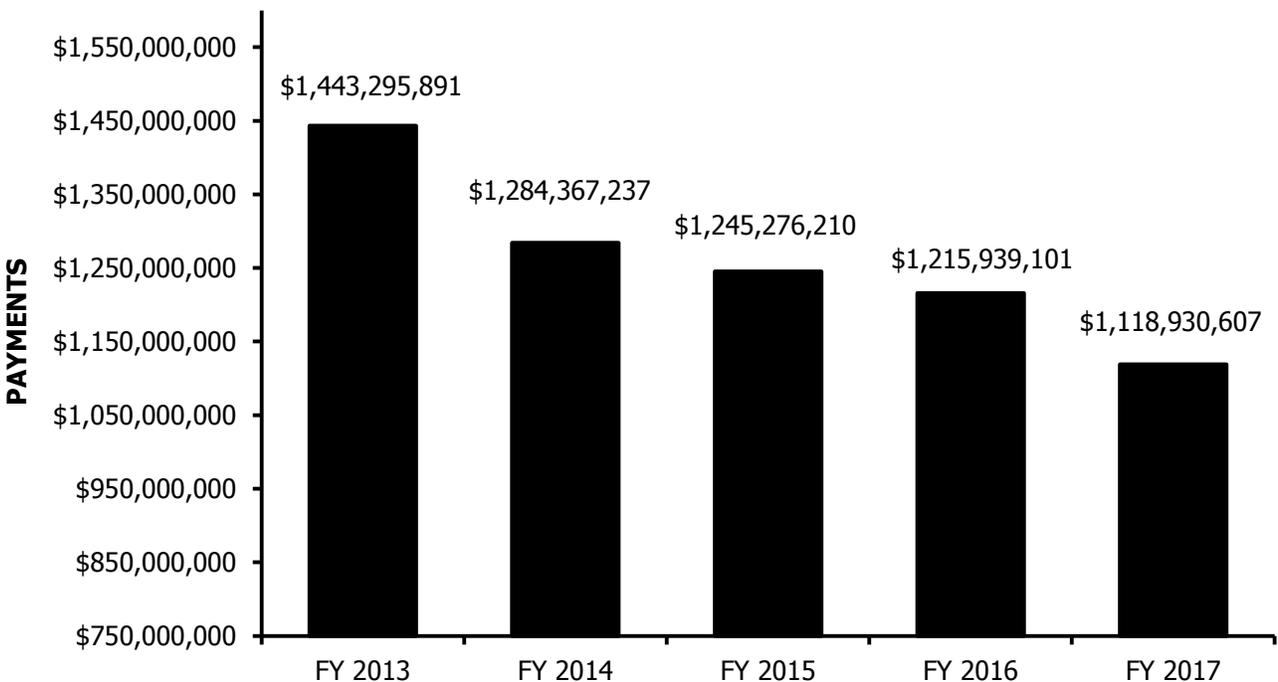
- \$3,250 resource limit for elderly (age 60) or disabled;
- \$2,250 resource limit for others;
- Citizen or eligible immigrant;
- Resident of Missouri;
- Verified identity; and
- Income under the allowable limit.

Food Stamp Monthly Income Limits	
Number of Persons	Net Maximum Income
1	\$981
2	\$1,328
3	\$1,675
4	\$2,021

**Figure 5. Food Stamps
Average Monthly Caseload Fiscal Years 2012 - 2017**

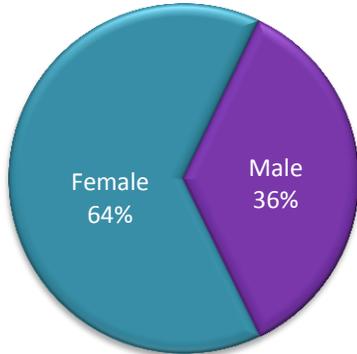


**Figure 6. Food Stamps
Annual Benefits Issued Fiscal Years 2012 - 2017**

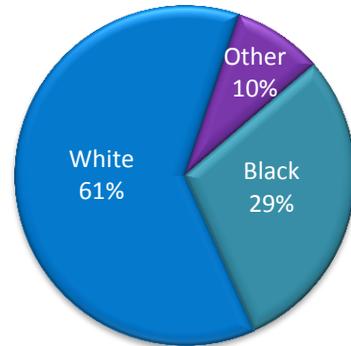


**Figure 7. Representative Missouri Food Stamp Characteristics
June 2017**

Gender of Adults Receiving Benefits

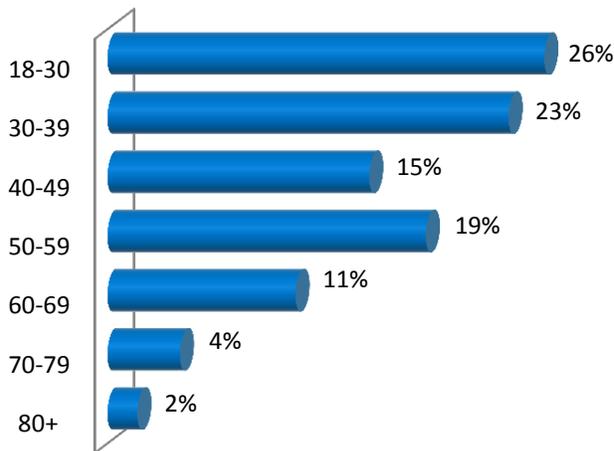


Race of Individuals Receiving Benefits



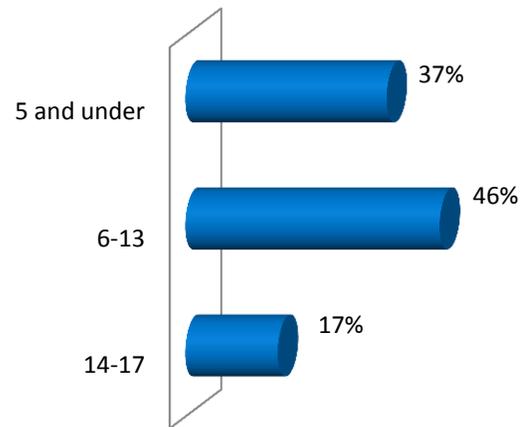
Age of Adults Receiving Benefits

Average Age: 42.8



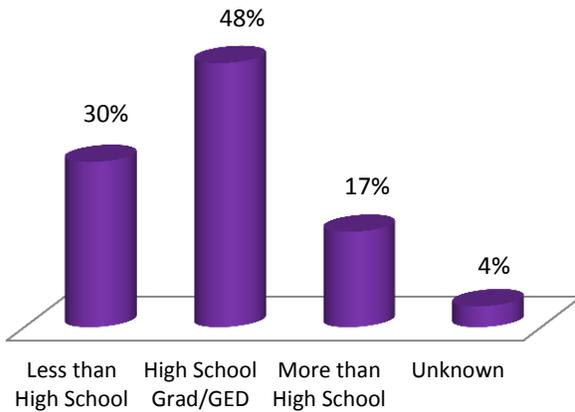
Age of Children Receiving Benefits

Average Age: 7.9



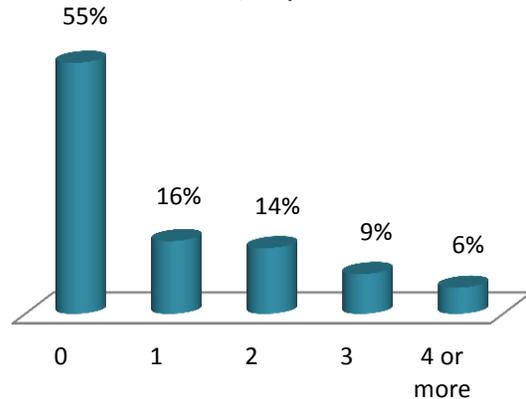
Education of Adults Receiving Benefits

Average Education: 11.6 years



Children Receiving Benefits Per Case

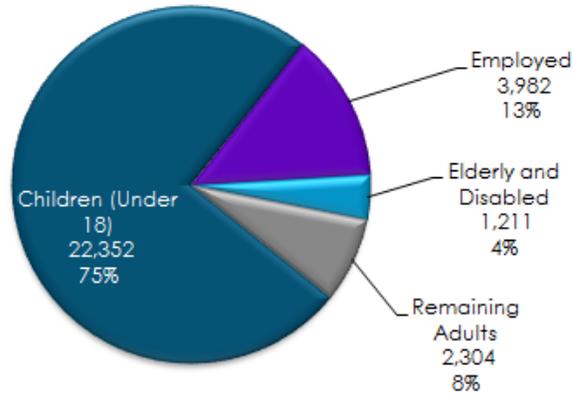
Average individuals per case: 1.0 children, 1.2 adults, 2.2 persons



Temporary Assistance Participants

Temporary Assistance Participants

As Of November 30, 2016

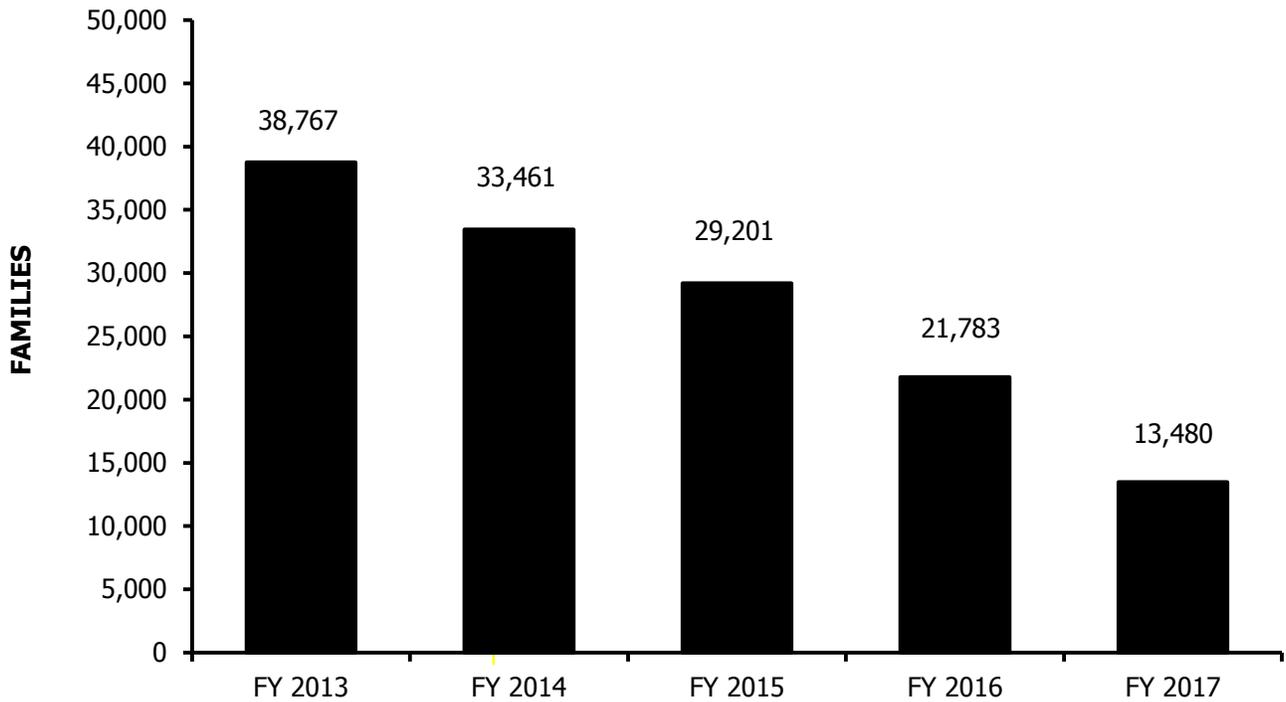


TEMPORARY ASSISTANCE ELIGIBILITY REQUIREMENTS:

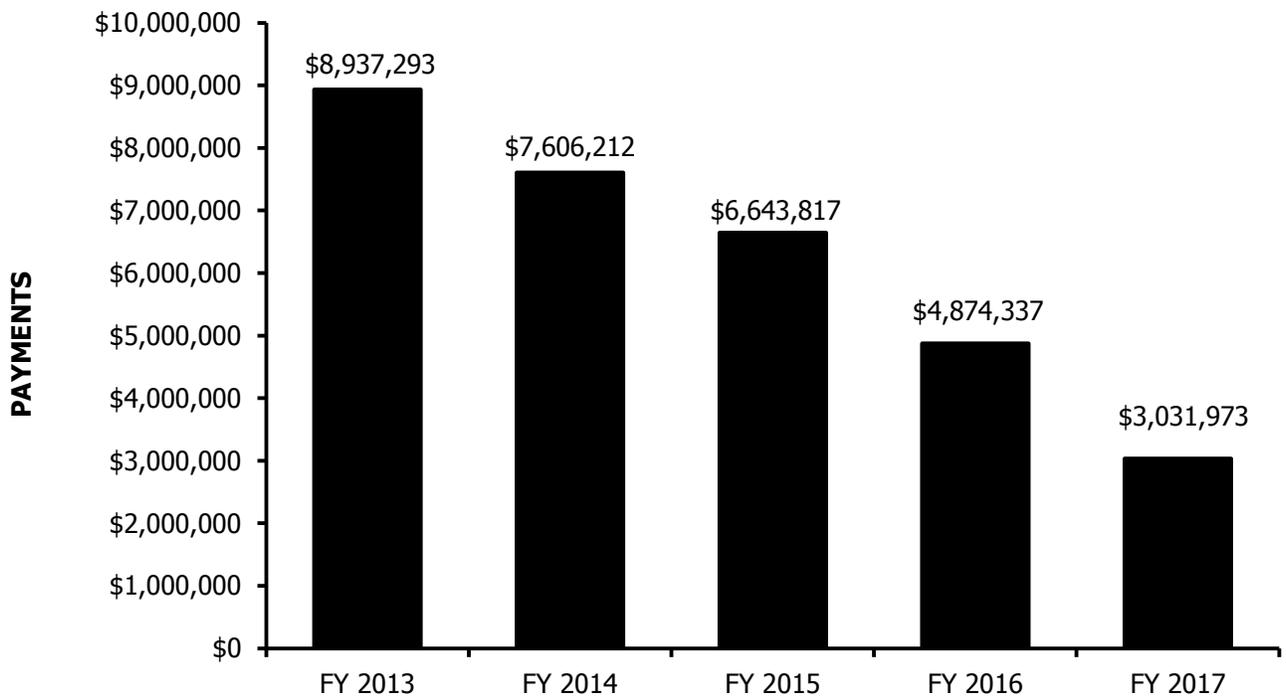
- Child under 18;
- \$1,000 resource limit;
- Verified relationship of payee to child(ren);
- Cannot have felony drug conviction after 08/22/96;
- Citizen or eligible immigrant;
- Resident of Missouri with intent to remain;
- Income under the allowable limit;
- Complete an Orientation and Personal Responsibility Plan;
- and,
- Register with jobs.mo.gov.

Temporary Assistance Monthly Income Limits	
Number of Persons	Net Maximum Income
1	\$136
2	\$234
3	\$292
4	\$342

**Figure 2. Temporary Assistance
Average Monthly Caseload Fiscal Years 2012 - 2017**

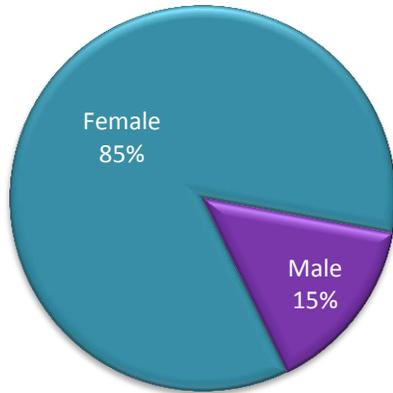


**Figure 3. Temporary Assistance
Average Monthly Payments Fiscal Years 2012 - 2017**

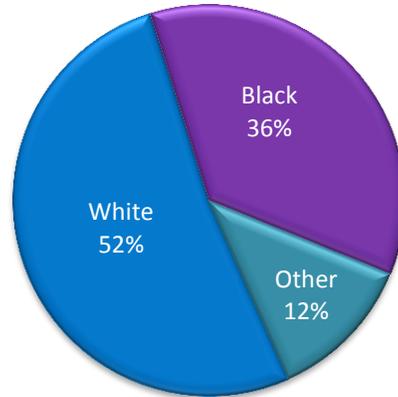


**Figure 4. Representative Missouri Temporary Assistance Characteristics
June 2017**

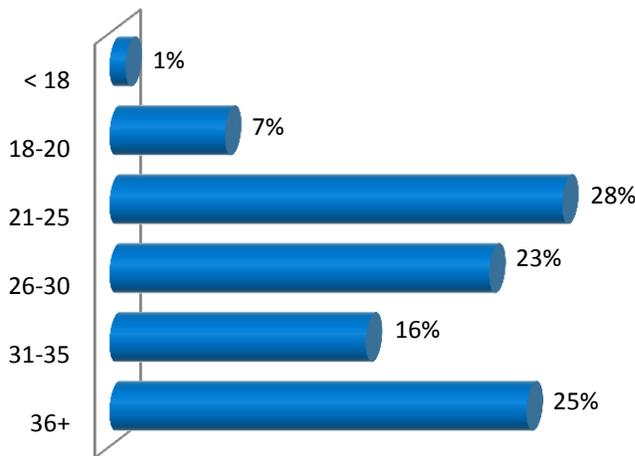
Gender of TANF Parent(s)/Caretaker(s)



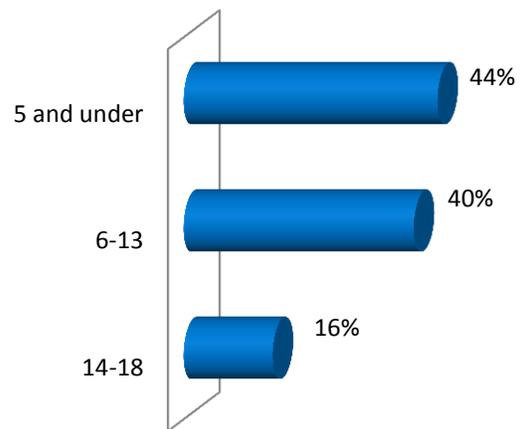
Race of TANF Participants



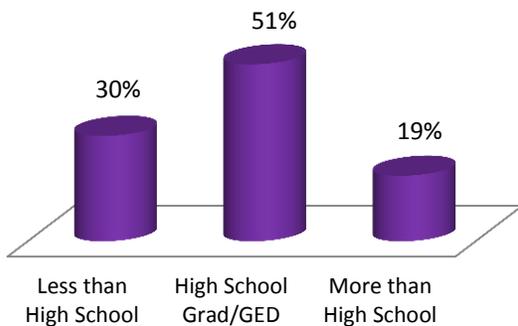
Age of TANF Parent(s)/Caretaker(s)
Average Age: 30.5



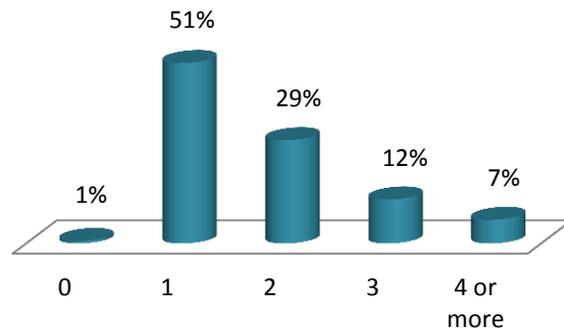
Age of TANF Children
Average Age: 7.2



Education of TANF Parent(s)/Caretaker(s)
Average Education: 11.5 years



Children per TANF Family
Average individuals per case: 1.8 children/ 0.6 parent/caretakers



Child Support Caseload and Collections

Child Support Enforcement	SFY-2015	SFY-2016	SFY-2017
Child Support Distributed Collections (IV-D cases)	\$697M	\$702.7M	\$683.7M
Child Support Orders Established	90.1%	91.2%	91.4%
Active Cases with Support Orders	310,499	303,143	297,921
Percentage of Active Cases with Payments Received	71.6%	72.2%	70.9%
Percentage of Cases with Paternity Established	93.11%	90.21%	90.44%
Percentage of Cases with Orders Established	90.19%	91.08%	90.89%
Percentage of Cases Current on Collection	59.51%	60.28%	60.24%
Percentage of Cases with Collection in Arrears	60.88%	61.12%	60.48%
Cost Effectiveness of CSE Operations to Collections	\$8.34	\$8.76	\$8.59

FSD 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

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 SNAP (food stamp), 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.

Access to Services

- **Optimizing Resource Center Locations**
 - FSD continues to review client "traffic" and look for opportunities to align staff resources with client need.
- **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



Patrick Luebbering Director

FSD Director

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PROGRAM DIVISIONS

CHILDREN'S DIVISION

2017

205 Jefferson Street • PO Box 88 • Jefferson City, MO 65103-0088 • Phone: 573-522-8024

Programs & Services

CHILD SAFETY AND PERMANENCY

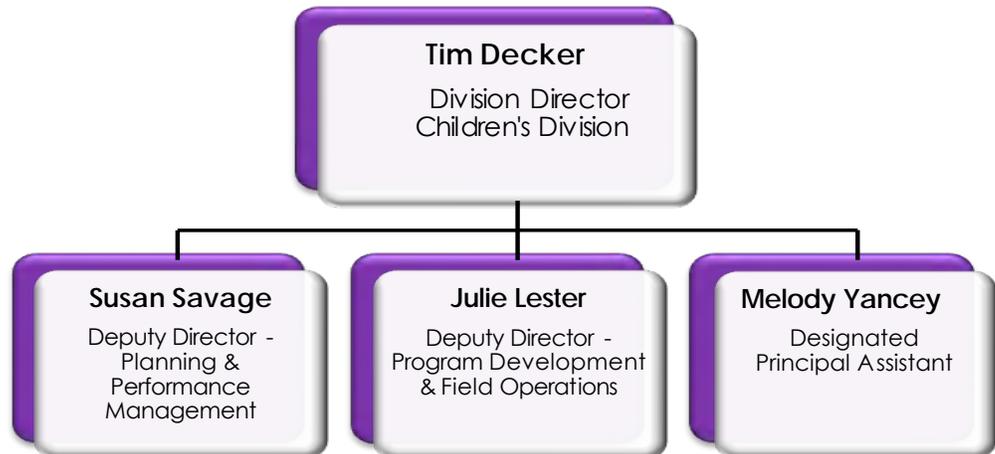
- CHILD ABUSE AND NEGLECT INVESTIGATIONS
- FOSTER CARE TREATMENT SERVICES
- ADOPTION/ GUARDIANSHIP
- INDEPENDENT/ TRANSITIONAL LIVING

SUBSIDIZED CHILD CARE

EARLY CHILDHOOD

CHILD ABUSE PREVENTION

Children's Division (CD) focuses on child safety, permanency and wellbeing.

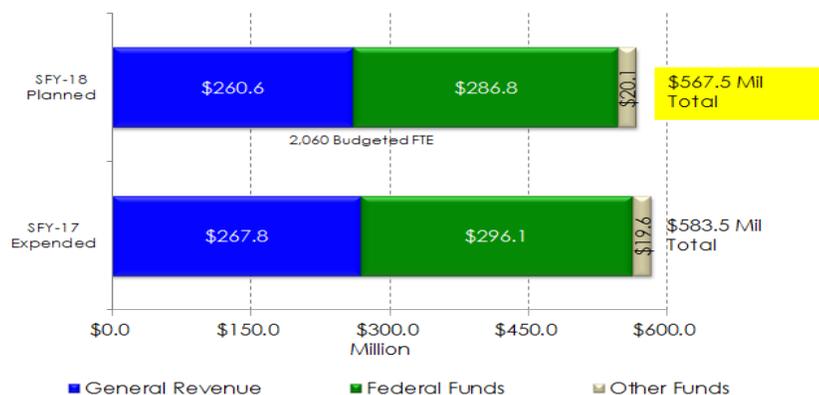


- Accreditation
- Quality Improvement
- Systems Development
- Residential Licensing
- Quality Assurance
- Foster Care Case Management Contract
- Other Inter-Departmental Initiatives
- Professional Development and Training
- Interstate Compact

- Child Abuse and Neglect Hotline
- Child Abuse and Neglect Investigations and Assessments
- Foster Care Treatment Services
- Independent/ Transitional Living
- Adoption/ Guardianship

- Critical Incident Coordination
- Communication and Constituent Services
- Legislative Operations
- Emergency Management
- Early Childhood and Prevention Services
- Fiscal Liaison
- Human Resources

CD Expenditures SFY-17 to SFY-18 Planned



Find the Children's Division on the web at www.dss.mo.gov/cd/



Children's Division

CD

CD Programs and Services

CD provides the following programs and services:

- **24-Hour Hotline** provides a mechanism for the public to report alleged incidents of child abuse and neglect.
- **Investigates** hotline calls in which criminal child abuse or neglect is alleged.
- **Family Assessments** on hotline calls in which a child's safety or well-being may be at risk but the incident reported does not constitute a criminal child abuse or neglect allegation.
- **Family-Centered Services** to allow children to remain safely in their homes with their parents.
- **Foster Care** for abused or neglected children who cannot remain safely in their homes with their parents.
- **Adoption/Guardianship** for children who cannot safely return to their homes with their parents.
- **Child Care** programs for low income parents.

CD Initiatives

Best Practices and Improving Outcomes

- **Family Centered Services Practice Model**

The Children's Division initiated a leadership and organizational culture change 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: seeing families more accurately in order to move beyond compliance to sustainable change; engaging and partnering with children, families, and communities; making more informed decisions; and supporting front-line practice and programs that work.

The new practice model will include 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
 - **Signs of Safety** – a child protection framework developed in Western Australia and based solution-focused therapy which stresses the importance of relationships, 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.
- **Youth Empowerment Task Force**
 Prompted by common themes that have emerged throughout these experiences and federal legislation, *H.R. 4980 Subtitle B: Improving Opportunities for Children in Foster Care and Supporting Permanency*, the Children’s Division has formed a Youth Empowerment Task Force to envision and facilitate culture and practice changes in areas such as increasing youth voice and choice, normalcy, financial capacity, wellbeing, and healthy transitions. State Legislation (HB 1877) was subsequently enacted in 2016.
- **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, and other opportunities are being followed-up by the Children's Division Executive Leadership Team and Quality Assurance Specialists.

Child Care Initiatives

- **Child Care Subsidy Time and Attendance System**
 - Today child care providers receiving payment from the Children’s Division (CD) for families eligible for child care subsidy maintain 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 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.
 - To address this issue, 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.
- **Early Childhood and Prevention Services**
 - The Child Care and Development Block Grant (CCDBG) Act of 2014 (the federal law governing federal funds used to pay child care subsidy) includes provisions that require the Children’s Division (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; and 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; 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.

Children's Division at a Glance	SFY-2014	SFY-2015	SFY-2016	SFY-2017
Children with CA/N Hotline Reports Completed	98,725	96,794	99,735	91,713
Children with completed Investigations	44,225	41,776	42,785	32,834
Children with completed Family Assessments	54,500	55,018	56,950	58,879
Children with completed investigations	44,225	41,776	42,785	32,834
Concluded substantiated CAN children	6,439	6,232	6,302	5,141
Children in Foster Care	12,105	13,033	13,276	13,473
Children Adopted	1,250	1,312	1,524	1,588
Children Receiving Subsidized Child Care	36,038	33,612	36,354	36,498



Tim Decker
CD Director

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DIVISION OF YOUTH SERVICES

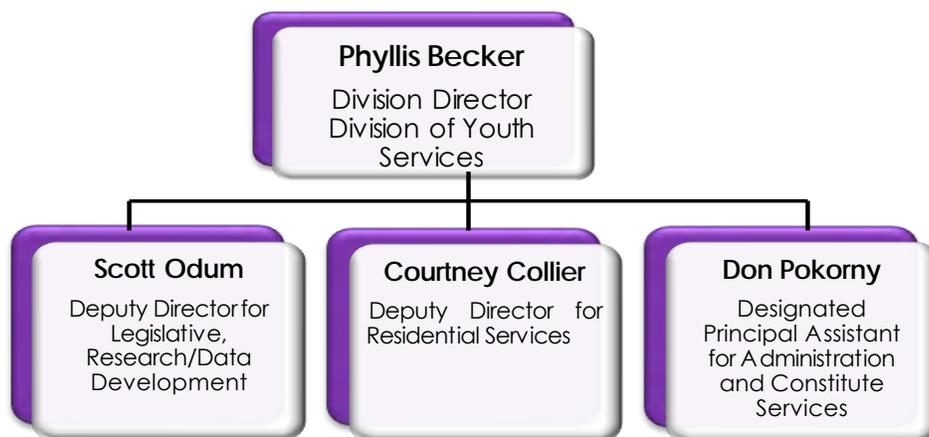
2017

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Programs & Services

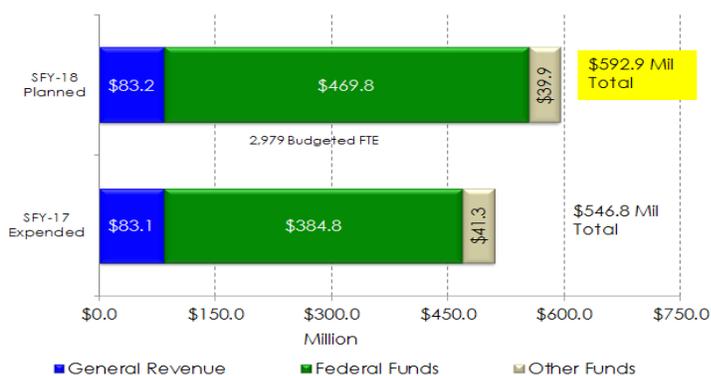
- CASE MANAGEMENT
- RESIDENTIAL TREATMENT
- DAY TREATMENT
- JUVENILE COURT DIVERSION

Division of Youth Services (DYS) treats youth that have encountered the juvenile justice system.



- | | | |
|---|---|--|
| <ul style="list-style-type: none"> • Oversees Interstate Compact, Dual Jurisdiction • Fiscal and Legislative matters • Research, technology and data development | <ul style="list-style-type: none"> • Regional Supervision • Quality, Safety Residential Programs • DYS buildings and maintenance • Specialized services for youth including older youth/ gang involved youth/families | <ul style="list-style-type: none"> • Administrative and Constituent Services • Partnership development • Juvenile Court Diversion • Human Resources and Educational services • Regional Supervision |
|---|---|--|

DYS Expenditures SFY-17 to SFY-18 Planned



Find the Division of Youth Services on the web at www.dss.mo.gov/dys/



Division of Youth Services

DYS

DYS Programs and Services

DYS administers the following needs based programs:

- DYS works to rehabilitate juvenile offenders through the following services and programs with the courts.
- **Treatment** programs that range from non-residential day treatment/resource centers, community based, moderate and secure residential institutions.
- **Education** in an accredited program that allows youth to earn high school credits toward a diploma or HiSet.
- **Juvenile Court Diversion** provides community-based services to prevent juveniles from coming into DYS custody.

DYS Initiative

Improved Educational Technology in Classrooms

- The Division of Youth Services (DYS) operates an educational program approved by 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 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 Executive Summary

- 621 youth were committed to the Division of Youth Services (DYS) during Fiscal Year 2017.
- 83% of youth committed to DYS were male; 17% were female.
- The average age of all committed youth was 15.2 years.
- The average DYS youth had attained 9 years of schooling at the time of commitment.
- Of all youth receiving DYS educational services in FY 2017, 410 (26%) were identified as having an educational disability.
- 242 youth (39%) had a history of prior mental health services.
- 284 youth (46%) had a history of prior substance abuse involvement.
- 106 youth (17%) were committed for the most serious felonies (A/B felonies); 282 youth (46%) were committed for less serious felonies; 172 youth (28%) were committed for misdemeanors and other non-felonies; and 59 youth (14%) were committed for juvenile offenses.
- 50% of all commitments were from single-parent homes.
- 68% of youth were committed from metropolitan areas.
- By the time of discharge, 42% of DYS 17 year-olds had earned a high school diploma or a High School Equivalency (HSE).

DYS at a Glance			
Each Day	SFY-2015	SFY-2016	SFY-2017
Youths committed to custody	2	2	2
Youths diverted from DYS custody	18	21	24
Youths in DYS group homes, etc	1,286	855	1,137
Annual Report			
Youth committed to DYS	713	679	621
DYS Recommitment Rate	5.6%	5.0%	6.0%
DYS Educational Completion	48.3%	41.8%	41.7%
DYS 3-Year Law Abiding Rate	68.6%	70.0%	72.8%
Productive DYS Youth Involvement	89.0%	89.0%	88.0%
Key Projects			
Percent of Youth Committed with Prior Mental Health Services	37%	35.2%	39.0%
Percent of Youth Committed with an Educational Disability	24%	25.0%	25.8%



Phyllis Becker
DYS Director

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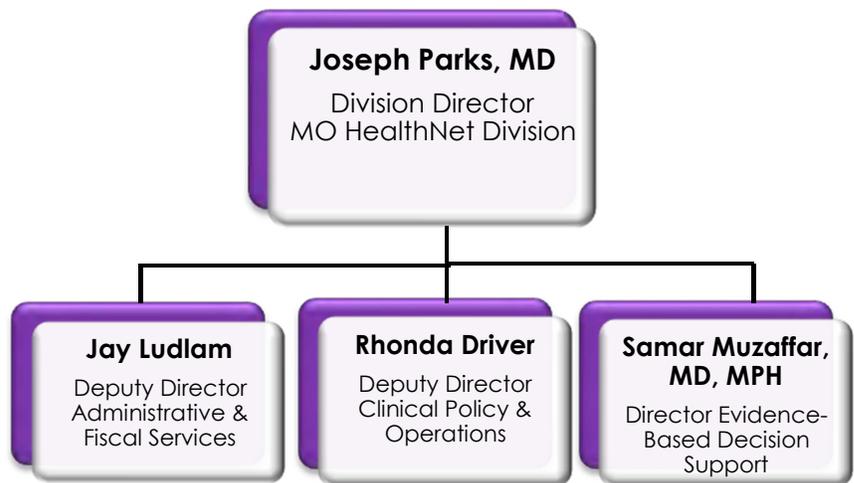
MO HEALTHNET DIVISION

615 Howerton Court • PO Box 6500 • Jefferson City, MO 65102-6500 • Phone: 573-751-3425

Programs & Services

- MO HEALTHNET
- MISSOURI RX (MoRx) PLAN

MO HealthNet Division (MHD) administers publicly financed health care programs for lower income Missourians.



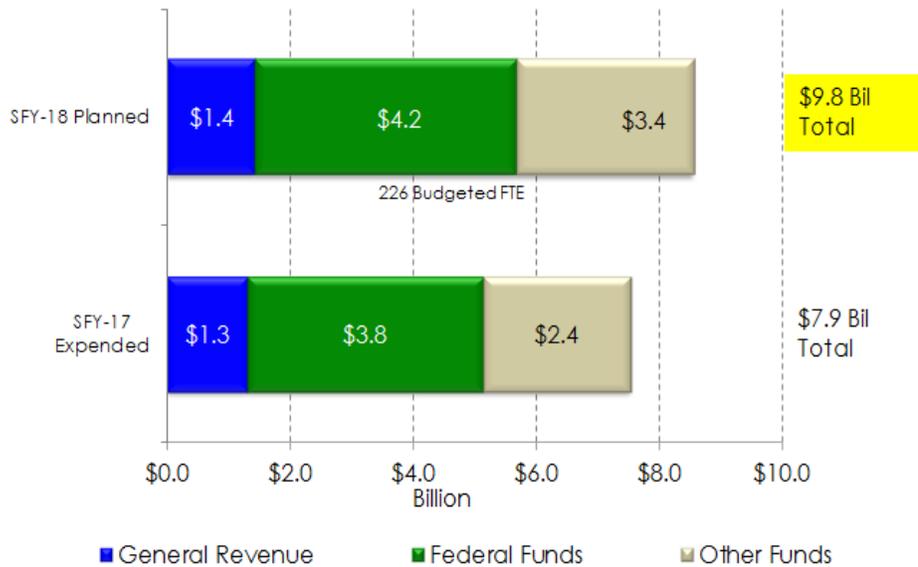
- | | | |
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| <ul style="list-style-type: none"> □ MMIS/Fiscal Agent Operations and Reprocurement □ Budget & Financial Services □ Post-payment Recovery and Cost Avoidance □ Outpatient, Hospital, Nursing Home Policy & Reimbursement □ Premium Collections □ Human Resources □ Provider Education □ Participant Services | <ul style="list-style-type: none"> □ Pharmacy Services Management □ Clinical Services Management and Operations □ Managed Care Administration □ Non-Emergency Medical Transportation □ Waivers □ Money Follows the Person | <ul style="list-style-type: none"> □ Evidence-Based Medical Policy Development □ Health Home Program □ Fee For Service (FFS) Case Management Pilot Program □ Managed Care and FFS Clinical and Quality Review □ Physician Consultation, Utilization Review and Prior Authorization □ Quality Program □ Behavioral Health Program |
|--|---|---|

Find the MO HealthNet Division on the web at www.dss.mo.gov/mhd/



FINANCING

MHD Expenditures SFY-17 to SFY-18 Planned



MO HealthNet Claims Expenditures Per Member Per Month: \$742.61

- Projected: \$827.07
- Persons With Disabilities: \$2,188.07
- Seniors: \$1,679.11
- Pregnant Women and Custodial Parents: \$591.93
- Children: \$295.63

Each Day

in Missouri

991,362

people have access to medical treatment through MO HealthNet

273,973

MO HealthNet claims are processed

\$300,127

are recovered and reinvested in MO HealthNet through third party liability and pharmacy rebate collection

\$3,399,189

in provider taxes are collected from hospitals, nursing facilities ambulances and pharmacies



MO HealthNet Division

MHD

MHD Programs and Services

MHD pays for 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 including Pharmacy, Mental Health, In-Home Personal Care, Long-Term Care, transportation, hospital care, physician services, etc.
- Managed Care for children and parents along the I-70 corridor and fee-for-service elsewhere.
- Care Management, Health Homes and other programs to meet the special needs of the elderly, disabled and chronically ill.

MO HealthNet Initiatives

Transition to Population Health Management

MO HealthNet (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 FQHCs.
 - The community health worker is responsible for making sure the Medicaid health home participant is keeping health care appointments; is connected to resources to help meet other social services needs and can stay safe and healthy in their homes.
 - To Missouri Foundation for Health and the Greater Kansas City Foundation for Health is providing funding for this pilot

- **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.

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

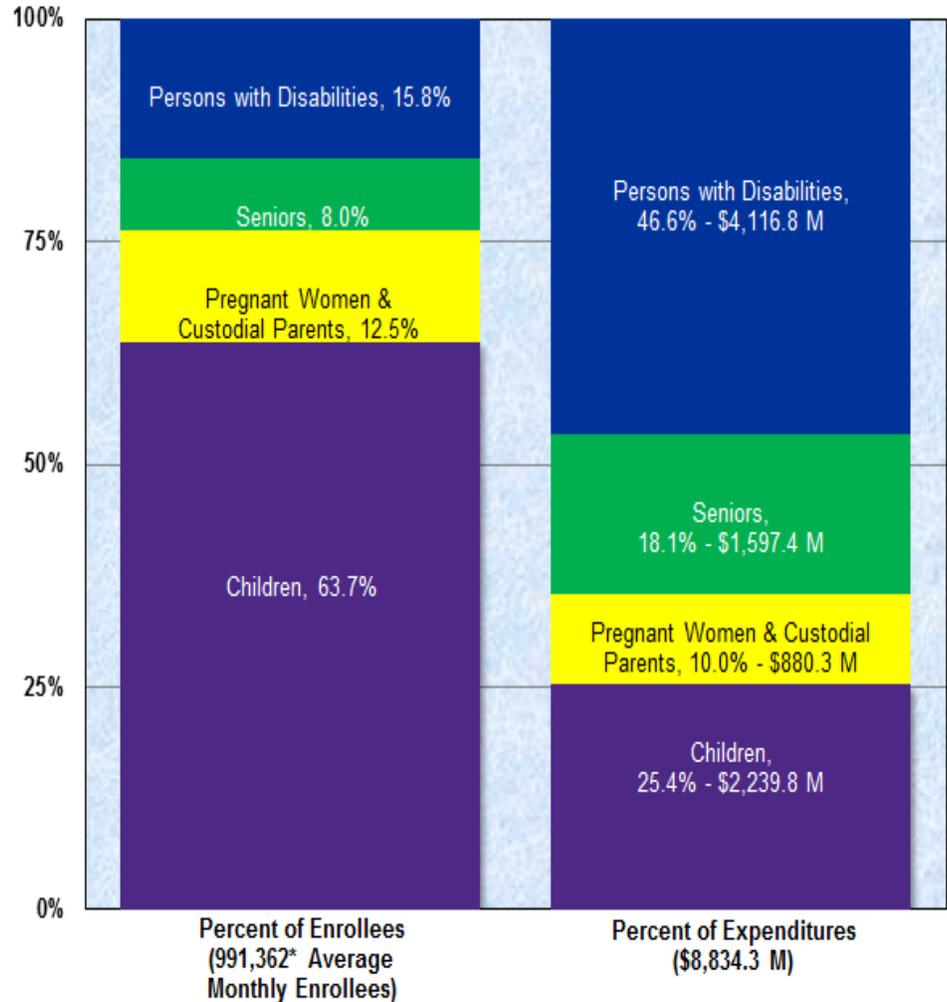
Missouri Medicaid Management Information System (MMIS) replacement

- 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 be develop and procure additional components of the system.
- The Centers for Medicare and Medicaid (CMS) have emphasized a desire for modularity and vendor competition.

MO HealthNet Enrollees and Expenditures

In SFY-2017, seniors and persons with disabilities comprised nearly 24% of enrollees, however, they accounted for nearly 65% of MO HealthNet expenditures.

MO HealthNet SFY - 2017



Persons With Disabilities	156,789
Seniors	79,279
Pregnant Women & Custodial Parents	123,937
Children	631,357
Total	991,362

*Data reflects Department of Social Services, Table 23, Medical Statistics excluding Women's Health Services

Persons with Disabilities include Permanently and Totally Disabled; Aid to the Blind; Blind Pension; Specified Low-Income Medicare Beneficiary; and, Ticket to Work Health Assurance Program

Seniors include Old Age Assistance; Qualified Medicare Beneficiary; and, Specified Low-Income Medicare Beneficiaries

Pregnant Women & Custodial Parents include MO HealthNet for Families-Adult; Refugee; Women with Breast or Cervical Cancer; Independent Foster Care Children Ages 18-26; MO HealthNet for Pregnant Women (Poverty and Income); and, Presumptive Eligibility (Pregnant Women)

Children include MO HealthNet for Children; SCHIP (including no cost and premium enrollees); MO HealthNet for Families-Child; Foster Care; Child Welfare Services; Title XIX-Homeless, Dependent, Neglected; DYS-General Revenue; Children in a Vendor Institution; Missouri Children with Developmental Disabilities; Presumptive Eligibility for Children; and, Voluntary Placements



Joe Parks, MD
MHD Director

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Missouri Office of Health Information Technology (MO-HITECH) is promoting the development and application of an effective health information technology (HIT) and health information exchange (HIE) infrastructure for the state of Missouri.

- The federal Health Information Technology for Economic and Clinical Health Act provides an opportunity for states to access federal funds to plan, design and implement health information exchange (HIE) and to encourage the adoption and use of electronic health records.
- The Missouri Office of Health Information Technology (MO-HITECH) was created to promote the development and application of an effective health information technology (IT) and health information exchange (HIE) infrastructure for the state of Missouri that will:
 - Improve the quality of medical decision-making and the coordination of care;
 - Provide accountability in safeguarding the privacy and security of medical information;
 - Reduce preventable medical errors and avoid duplication of treatment;
 - Improve the public health;
 - Enhance the affordability and value of health care; and,
 - Empower Missourians to take a more active role in their own health care.

Planning and Development

- The MO-HITECH Advisory Board appointed by Governor Nixon recommended the creation of a new, public-private not-for-profit, 501(c)(3) organization called the Missouri Health Connection (MHC) to govern a statewide HIE.
- Created in July 2010, MHC is overseen by a 17-member Board of Directors that reflects diverse stakeholder representation, including both providers and consumer advocates. The board began meeting in August 2010 and convenes routinely to oversee and actively participate in the development of Missouri's HIE Operational Plan and overall strategies relative to HIE governance, technology and operations, privacy and security and consumer engagement.
- In 2009, the state of Missouri and the MHC received grant approval from both CMS and the Office of the National Coordinator for Health Information Technology (ONC) for strategic and operational plans to implement a technology solution for exchange of health information across providers throughout the state. MHC utilized the grant funding to build its technical HIE platform that allows health care providers across the entire State of Missouri to exchange clinical information bi-directionally. The grant funding expired in 2014 and MHC sustains its operations with subscription fees paid by its members. As of 2016, MHC has more than 75 hospitals and hundreds of clinics connected to the HIE platform and more than 100,000 query transactions occur daily.

Find MO HI-TECH on the web at <http://assistancecenter.missouri.edu/>

- MHC provides direct, secure messaging services as part of a standard suite of services in order to promote the exchange of clinical results and patient care summaries among unaffiliated health care providers across the State of Missouri. Secure messaging remains a priority for MHC as it is part of the Meaningful Use program. The MHCs current or planned activities include the following:

Continue to offer and implement secure messaging to health care providers across the State,

and

- Continue to utilize a Consumer Advisory Council to provide consult on key work products, services, and patient engagement activities.
- Missouri has also made significant progress on its phase 2 implementation plans. Phase 2 includes the implementation of the patient query function allowing unaffiliated health care service providers to exchange continuity of care documents containing all health information for a patient for consumption into the provider electronic health records. The MHCs current or planned activities include:
- Continue to increase the bi-directional HIE activities across the State by onboarding health care providers to MHC query-based exchange platform, and
 - Develop utilization and adoption strategies for MHC's participants to increase the care coordination activities for the benefit of Missouri patients.

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SUPPORT DIVISIONS

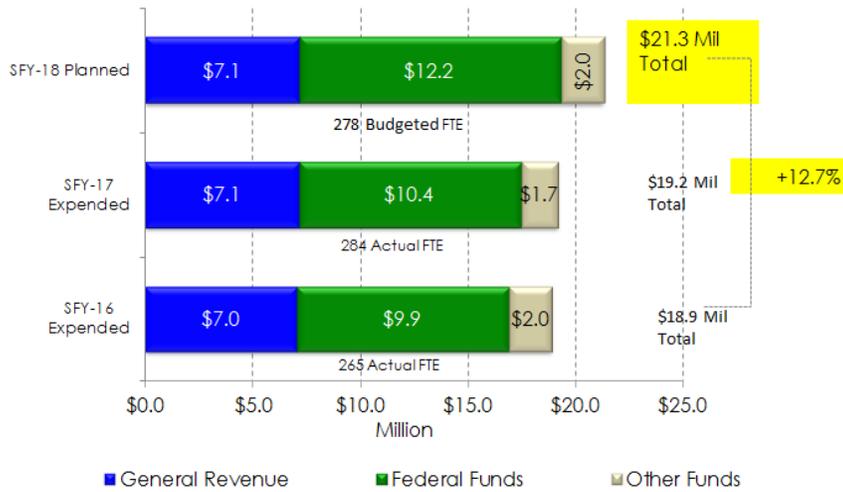
Supports

- OFFICE OF THE DIRECTOR
- HUMAN RESOURCE CENTER
- MISSOURI MEDICAID AUDIT AND COMPLIANCE
- DIVISION OF FINANCE AND ADMINISTRATIVE SERVICES
- DIVISION OF LEGAL SERVICES

Support divisions provide enterprise-wide financial, human resources, legal and statistical support services.



Support Division Expenditures SFY-17 to SFY-18 Planned (in millions)



DIVISION OF FINANCE & ADMINISTRATIVE SERVICES

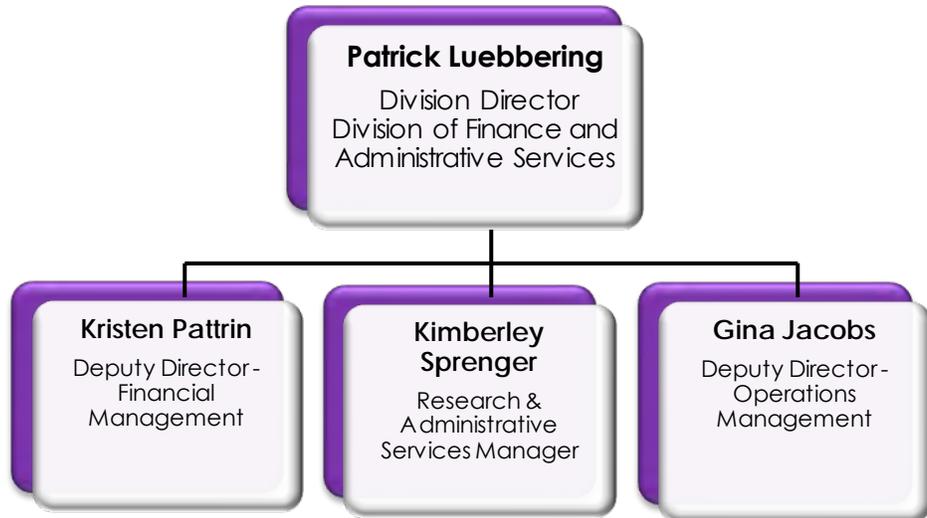
2017

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Services

- ACCOUNTS PAYABLE
- AUDIT SERVICES
- BUDGET
- RESEARCH AND DATA ANALYSIS
- EMERGENCY MANAGEMENT
- FLEET VEHICLE MANAGEMENT
- FACILITIES MANAGEMENT/OFFICE SERVICES
- OFFICE HEALTH AND SAFETY
- PAYROLL
- PURCHASING
- RECEIPTS AND GRANTS MANAGEMENT
- SUPPLIES/WAREHOUSING/INVENTORY CONTROL
- TAX CREDITS (ADMINISTERED BY THE DEPARTMENT OF SOCIAL SERVICES)
- VOICE TELE-COMMUNICATIONS

Division of Finance and Administrative Services manages financial resources, coordinates emergency management and provides enterprise support services.



- Budget
- Grants
- Cash Management
- Receipts
- Tax Credits
- Revenue Maximization
- Child Welfare Eligibility

- Emergency Management
- Fleet Vehicle Management
- Facilities Management/Office Services
- Research and Data Analysis
- Supplies/Warehouse/Inventory Control
- Voice Tele-Communications

- Accounts Payable
- Accounts Receivable
- Payroll
- Procurement
- Contract Management
- Child Care Subsidy Payments
- DFAS Regional Offices

Find the Division of Finance and Administrative Services on the web at <http://www.dss.mo.gov/dfas/>



Support Divisions

Services

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

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

Supports 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 the 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.

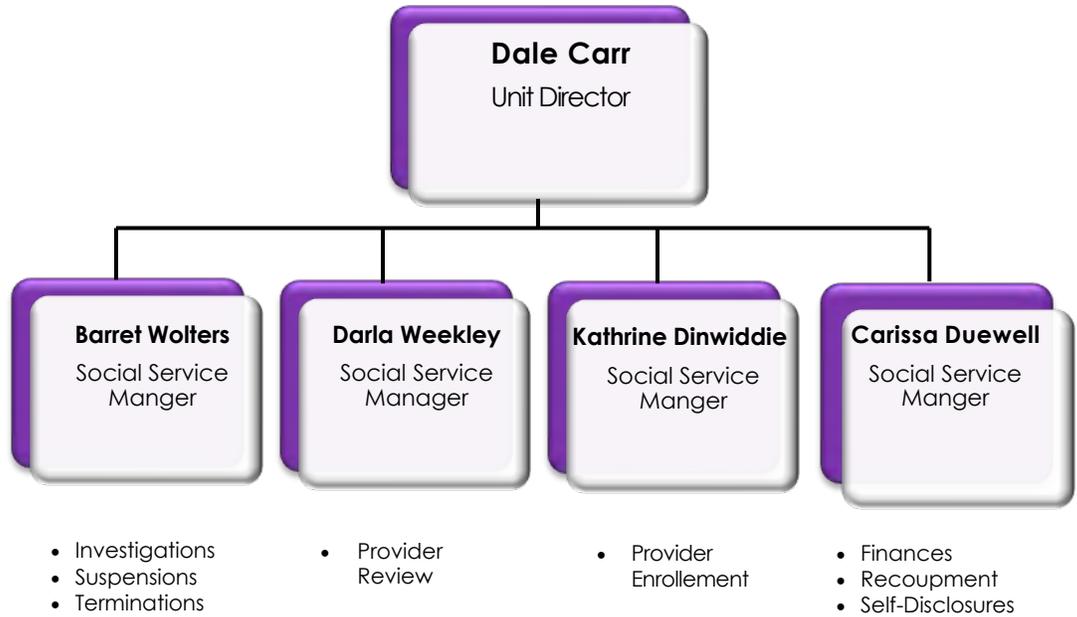
- Developing standardized policies and resources so that workers clearly understand their responsibilities and pathways to communicate concerns regarding recipient fraud, provider fraud and DSS employee fraud.
- Procuring new technologies to identify suspect patterns of benefit use, expenditures or provider payments.
- Reviewing fraud and abuse cases to identify and implement opportunities to increase internal controls and program oversight.

Missouri Medicaid Audit and Compliance Unit

MMAC's mission is to enhance the integrity of the Missouri State Medicaid program by preventing and detecting fraudulent, abusive and wasteful practices within the Medicaid program and recovering improperly expended Medicaid funds while promoting high quality patient care.

Services

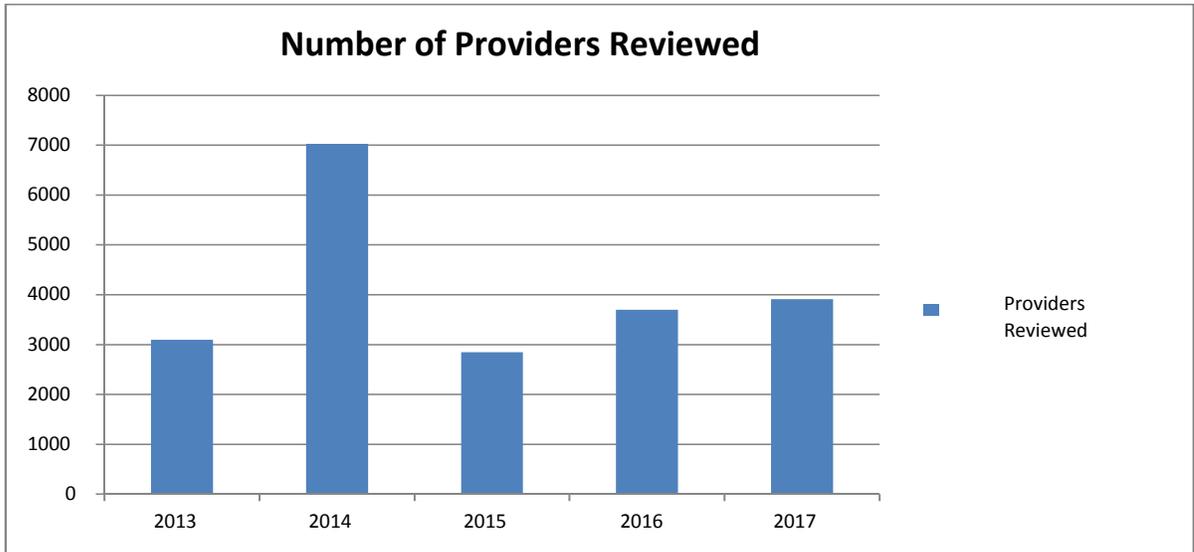
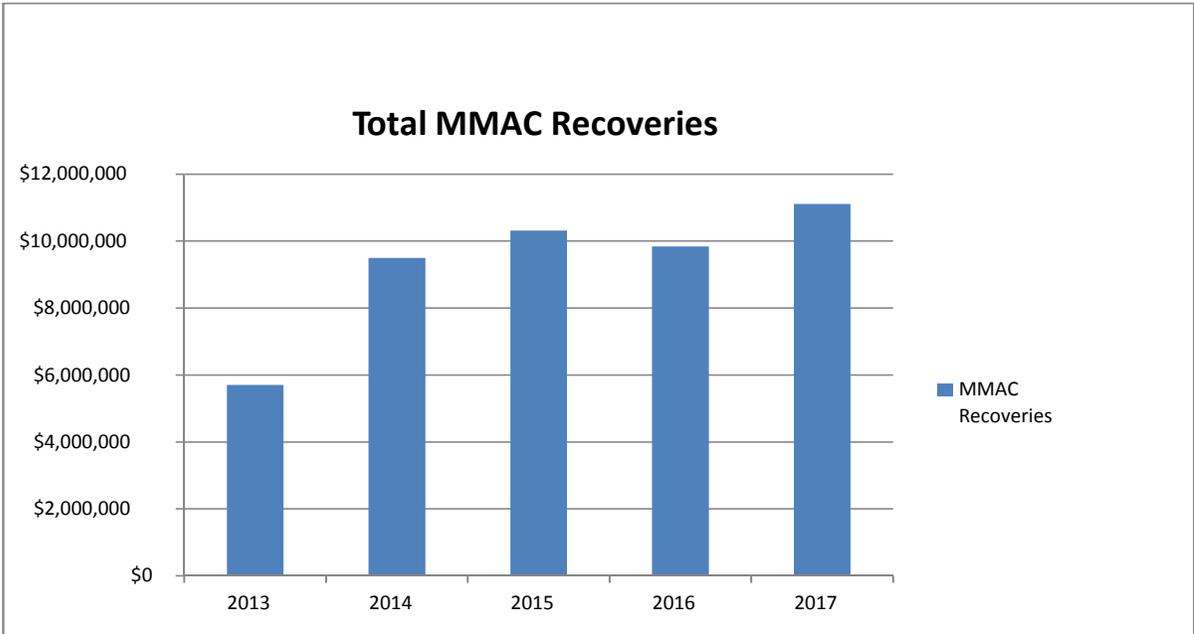
- Administrative Sanctions
- Investigations
- Managed Care Contract Compliance
- Participant Lock-In
- Provider Enrollment
- Provider Reviews (Audits)
- Provider Self-Disclosure Monitoring
- Provider Suspensions & Terminations

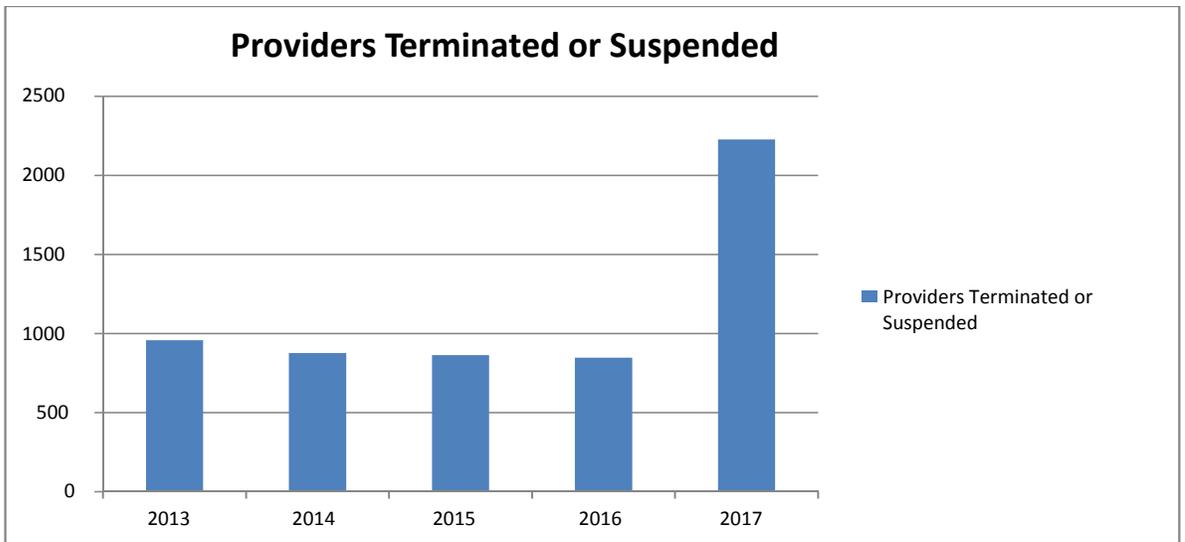
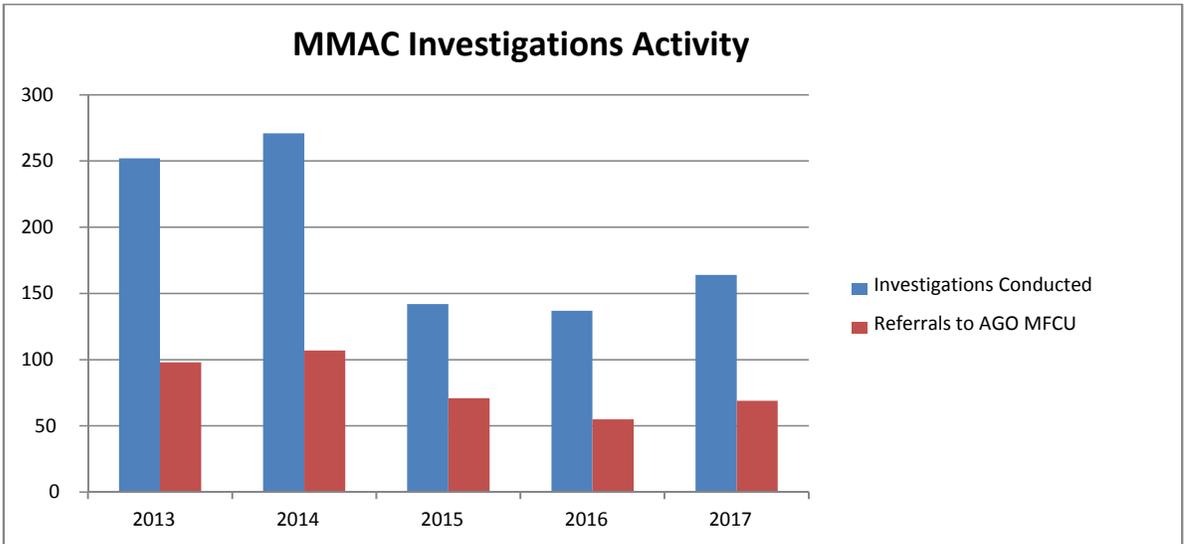
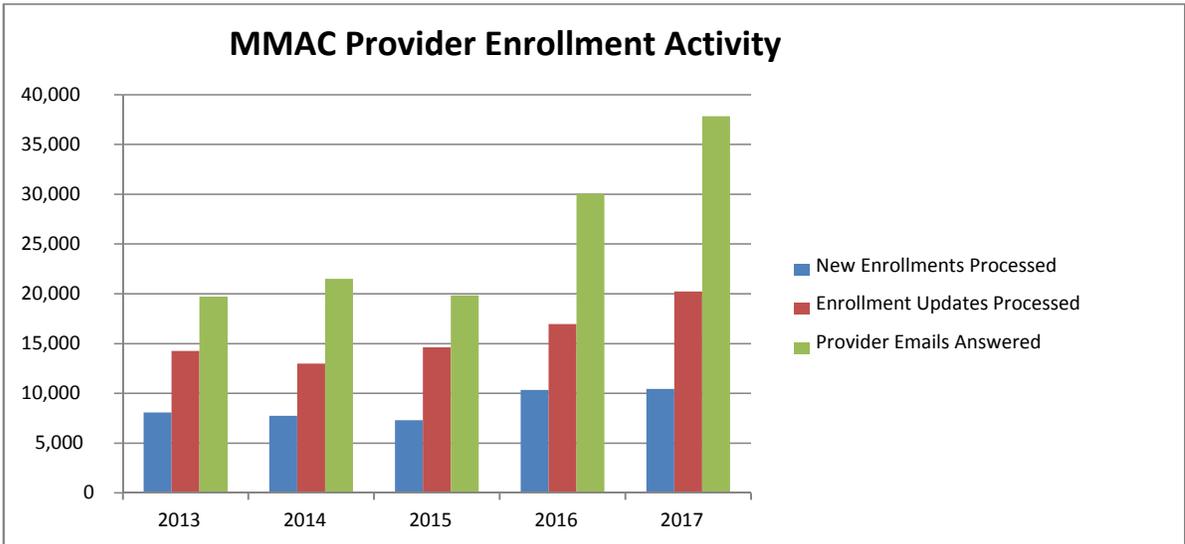


Missouri Medicaid Audit and Compliance Unit (MMAC)

2017 Performance Indicators:

- MMAC recovered \$11.1 million in improperly paid or fraudulent Medicaid claims
- Conducted claim reviews on 3,913 Medicaid providers through audits and special projects
- Conducted 1,844 claim reviews of Medicaid participants suspected of misutilizing their Missouri Medicaid health care benefits
- Processed 10,435 new Medicaid provider enrollment applications, updated 20,240 provider enrollment records, and handled 37,836 phone calls or emails from providers
- Terminated the participation agreements of 2,227 Medicaid providers which was a 262 percent increase over 2016
- Conducted 164 investigations of alleged fraud, waste, or abuse by Medicaid providers
- Referred 69 investigations to the Medicaid Fraud Control Unit at the Missouri Attorney General’s Office





MMAC Programs and Services

- MMAC continued its efforts to revalidate the enrollments of MO HealthNet’s approximately 60,000 health care providers. The revalidation process includes updating all contact information, verifying any professional licenses and/or credentials, collecting application fees from institutional providers, conducting site visits for moderate and high risk providers, and reviewing fingerprint-based criminal history checks of high risk providers.
- MMAC implemented systems work to ensure the National Provider Identifier (NPI) of all Ordering, Prescribing, and Referring (OPR) providers is listed on all claims for service submitted by Durable Medical Equipment (DME), Independent Laboratory, Home Health Agencies, Radiology (Imaging), and Pharmacy providers. The implementation also included edits to verify the OPR provider is enrolled with MO HealthNet before the claim is approved for payment. During 2018, systems work will be completed to implement the edits on all remaining provider and claims types.
- MMAC contracted with the state’s fiscal agent to provide subcontracted automated monthly provider screening and monitoring. The contractor checks all the enrolled providers, officers, directors, and managing employees against numerous federal and state databases. Any records located which warrant further attention are flagged by the contractor and reviewed by MMAC staff. During 2018, additional systems work will increase the quantity and quality of sanctions and professional license information being provided to MMAC by the contractor.
- MMAC continued a tax intercept program with the Missouri Department of Revenue to recoup overpayments due to the Missouri Medicaid program from terminated or non-billing MO HealthNet providers who had previously been referred to “bad debt”. MMAC is also working with the Centers for Medicare and Medicaid Services (CMS) to recoup overpayments from providers’ Medicare reimbursements if Missouri is owed money and is unable to collect through the Missouri Medicaid program.

On The MMAC Horizon

Revalidating Provider Enrollments

- To comply with federal requirements of the Affordable Care Act to renew the Medicaid enrollments of providers at least every five years, the MMAC Provider Enrollment Unit will revalidate the enrollments of approximately 10,000 MO HealthNet providers per year. MMAC will repurpose staff and seek other areas of efficiency to revalidate providers in a timely manner. During 2018, MMAC will pursue implementing an electronic web portal solution which will allow MO HealthNet providers to complete the revalidation process easier and more quickly.

Improved Fraud, Waste and Abuse Detection

- MMAC's existing Fraud Abuse Detection System (FADS) contract has reached the end of its contracted operational period. The FADS application is MMAC's "bread and butter" system for running ad hoc claims reports and algorithms to support audits and investigations. During 2017, MMAC worked with the Missouri Office of Administration to issue a Request for Proposal (RFP) for a Fraud Abuse Detection System (FADS) vendor. The RFP will contract for a new FADS solution that maintains robust claims analysis capabilities, but includes case management functions to track open and closed audits, investigations, and recoveries of identified overpayments. MMAC expects the new FADS contract to be awarded and begin implementation during 2018.

Expanded Audits of Contracted Managed Care Organizations

- The Missouri Department of Social Services (DSS) contracts with three Managed Care Organizations (MCOs) to provide health services in return for a capitated payment. MMAC completed audits of Missouri's three MCOs which focused on the plans' compliance with the Fraud, Waste, and Abuse sections of their contracts. During 2018, MMAC's audits of the MCOs will include a focus on the medical loss ratio to determine if the state was appropriately reimbursed if required, and whether or not expenses were properly classified as medical or administrative. The 2018 audits will also address whether or not the plans properly identify and address potential fraud and abuse incidents.

Improving Technology

- MMAC's current provider enrollment process is a "hybrid system" that uses an electronic enrollment portal for approximately thirty-five (35) provider types. The remaining provider types are currently required to email, fax, or mail paper enrollment applications to the Provider Enrollment Unit. MMAC has prepared a Request for Proposal and will seek funding authority in the state fiscal year 2020 budget for a completely 100% electronic provider enrollment portal that will support providers uploading supporting documents and submitting/managing changes to their Medicaid enrollment record as needed.

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DIVISION OF LEGAL SERVICES

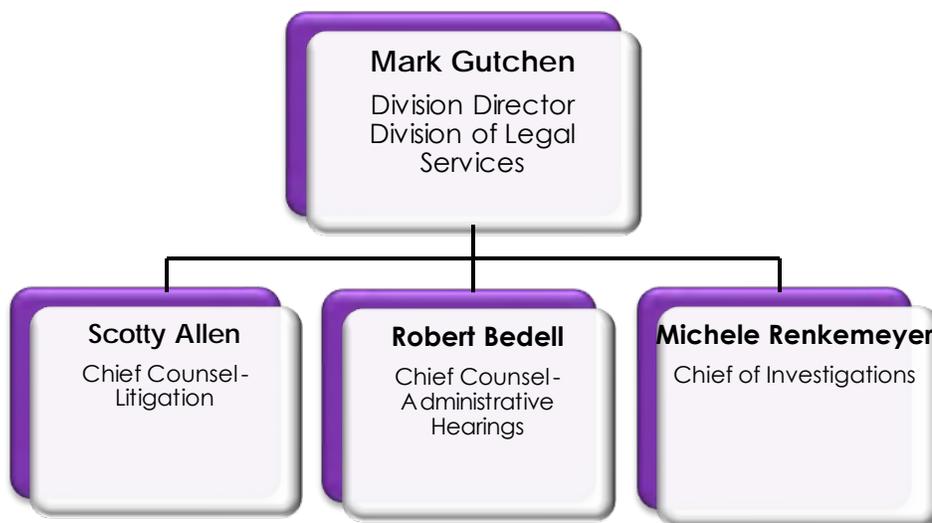
2017

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Services

- CASE LITIGATION
- ADMINISTRATIVE HEARINGS
- INVESTIGATIONS
- STATE TECHNICAL ASSISTANCE TEAM

Division of Legal Services (DLS) is the counsel of the department and its divisions.



- Litigation
Risk Management

- Administrative
Hearings

- Investigations

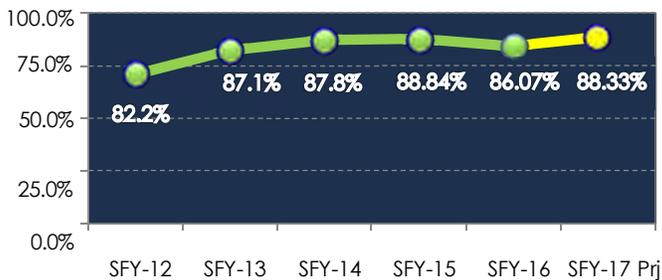
Find the Division of Legal Services on the web at <http://dss.mo.gov/dls/>



Protective Services Cases Resolved

- DLS attorneys closed 82.95% permanency planning cases involving abused and neglected children and 309 termination of parental rights cases.

Protective Services Cases Resolved Within 18 Months



Time to Schedule Child Support Hearings

- The Child Support Hearings Unit strives to schedule hearings no more than 21 days from receipt of a hearing request from the Agency.
- SFY 2017 actual .5 months

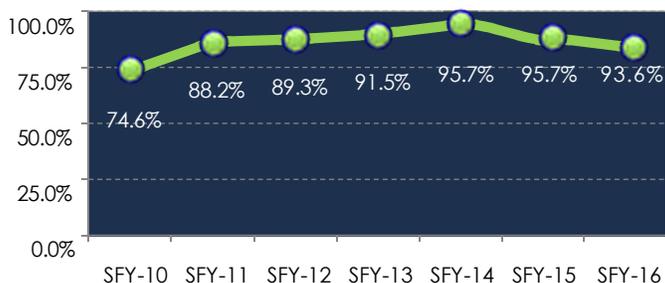
Time To Schedule Child Support Hearings (in months)



Child Support Hearing Decision Timeliness

- The Child Support Hearings Unit strives to issue hearing decisions within 60 days from the closing of the hearing record.
- SFY 2017 actual 89.5%

Child Support Hearing Decision Timeliness





HIGHLIGHTS

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.



Mark Gutchen
DLS Director

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State Technical Assistance Team

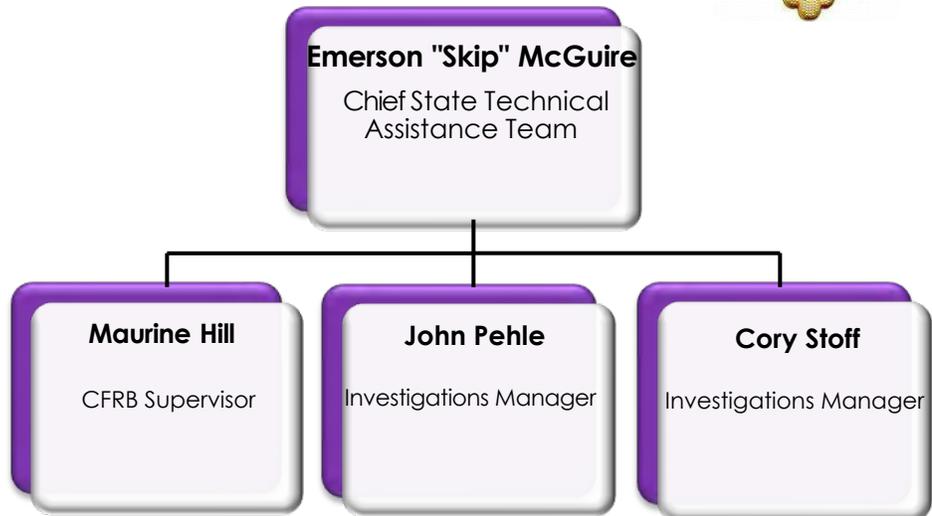
2017

PO Box 208, Jefferson City, MO 65102-0208, (573-751-5980, 1-800-487-1626 (For law enforcement and child protection professionals - dls.stat.dss.mo.gov

Services

- CHILD FATALITY REVIEWS
- CHILD ABUSE/NEGLECT CRIMINAL INVESTIGATIONS
- CYBER CRIMES AGAINST CHILDREN
- MULTIDISCIPLINARY TEAM SUPPORT

Missouri Department of Social Services State Technical Assistance Team (STAT) has commissioned law enforcement officers, available 24/7, who can provide "hands on" assistance and support in conducting criminal child abuse/neglect investigations. STAT forms meaningful partnerships with other state and local community agencies to help identify predictable trends, patterns and spikes of preventative risks to children.



- Child Fatality Review Board

- Child Abuse/Neglect Investigations

- Cyber Crimes Against Children

Find the Division of Legal Services on the web at <http://dss.mo.gov/dls/>



State Technical Assistance Team (STAT)

Services

The importance of multidisciplinary intervention in dealing with dysfunctional families, child maltreatment, and child fatality issues cannot be over-emphasized. To encourage agencies to work together, the State Technical Assistance Team (STAT) facilitates cooperation and coordination among professional organizations with shared responsibilities and mandates. These agencies include the Department of Social Services, law enforcement, prosecutors, health offices, juvenile offices, coroners/medical examiners, medical facilities, and private organizations. Because some of these agencies have multiple and dissimilar roles and responsibilities (investigative/enforcement, protection, services, etc.), STAT acts as an intermediary to coordinate activities by bringing these groups together. By introducing these principles, STAT encourages communities to identify and address problems often avoided by those who lack the confidence to become involved.

Investigation of crimes against children generally requires special skills and techniques unique to the child's age, maturation and relationship to the suspected perpetrator. To address these needs, on request from local, state and federal agencies, STAT has commissioned law enforcement officers, available 24/7, who can provide "hands on" assistance and support in conducting criminal investigations involving sexual abuse, physical abuse, computer exploitation/child pornography, suspicious death or homicide, crime scene collection/ reconstruction, administering truth verification exams and conducting computer/digital/cellular forensic examinations. STAT also promotes aggressive prosecution as a deterrent to child maltreatment, child exploitation and child homicide. To build and maintain confidence, STAT trains and supports the field-level intervention/investigative community to help realistically convert policy into practice.

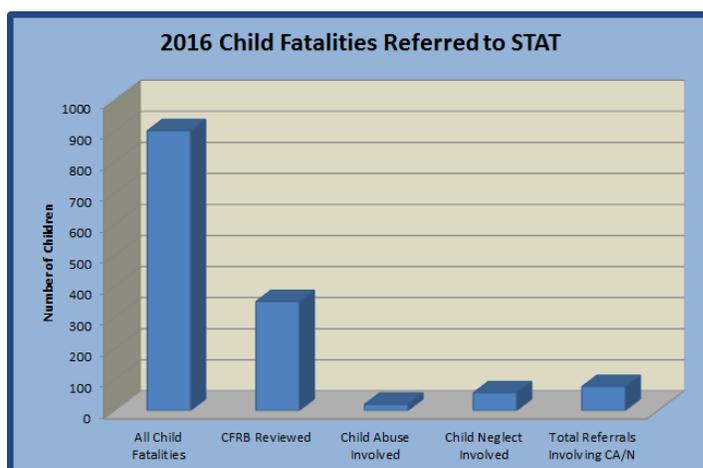
As an integral part of the process, STAT forms meaningful partnerships with other state and local community agencies to help identify predictable trends, patterns and spikes of preventative risks to children. In an effort to prevent child injury, abuse, neglect and/or death, STAT has created both presentations and informational sheets to be used to educate parents, professionals, and other community members as to how they can prevent child injuries.



HIGHLIGHTS

In 2016, STAT received, reviewed and/or concluded the following:

- 901 Child Fatality Referrals;
- 351 Child Fatality Review Board Reviews;
- 20 Cases involved Child Abuse;
- 57 Cases had Child Neglect as a Contributing Factor; and overall,
- 77 Cases involved some form of Child Abuse/Neglect.



KEY DLS PROJECTS

Cases Assigned

- STAT was assigned 193 cases total in 2016.

Arrests Made

- In 2016 STAT Investigators made or assisted in 20 arrests.
- STAT supported 28 other arrests by providing technical assistance to other law enforcement agencies.

ON THE STAT HORIZON . . .

In 2016 – 2017 STAT posted field investigators in rural Missouri. Because of chronic lack of resources STAT law enforcement units instituted “solvability factors” in accepting cases. The Law Enforcement units have seen a marked increase in successful investigations and prosecutions by turning down investigations less likely to result in a successful prosecution.

STAT is an affiliate of the Missouri *Internet Crimes Against Children* task force. This task force is part of a network of approximately 61 coordinated task forces representing over 3,500 federal, state, and local law enforcement and prosecutorial agencies. STAT Investigators continue to assist local, County, State and Federal law enforcement investigate and apprehend offenders who use technology to facilitate crimes against the children of Missouri.



Emerson "Skip" McGuire
Chief of STAT

Toll-Free Informational Phone Numbers

Child Abuse/Neglect Hotline (MO only)	1-800-392-3738
Child Support Customer Service Call Center (enforcement calls only)	1-866-313-9960
Child Support Employer Information	1-800-585-9234
Child Support General Information	1-800-859-7999
Child Support Payment Information (IVR)	1-800-225-0530
Elderly Abuse/Neglect Hotline	1-800-225-0530
Food Stamp Case Information	1-800-392-1261
Foster Adoptline	1-800-554-2222
Family Support Division Information Center	1-855-373-4636
Missouri Rx Plan (MoRx)	1-800-375-1406
Missouri School Violence Hotline	1-866-748-7047
Missouri's Long-Term Care Ombudsman (DHSS)	1-800-309-3282
MO HealthNet Case Information	1-800-392-1261
MO HealthNet Exception Process	1-800-392-8030
MO HealthNet Participant Services	1-800-392-2161
MO HealthNet Service Center	1-888-275-5908
Office of Child Advocate	1-866-457-2302
ParentLink WarmLine	1-800-552-8522
	En Español 1-888-460-0008
Rehabilitation Services for the Blind	1-800-592-6004
State Technical Assistance Team (STAT)	1-800-487-1626
Temporary Assistance/SAB/BP Case Information	1-800-392-1261
Text Telephone	1-800-735-2966
TTD Voice Access	1-800-735-2466



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Relay Missouri for hearing and speech impaired

1.800.735.2466 voice / 1-800-735-2966 text phone

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Department of Social Services Frequently Requested Contacts

Report Child Abuse and Neglect

1-800-392-3738

Report Fraud

1-877-770-8055

DLS.ReportFraud@dss.mo.gov