Department of Health and Senior Services

Since 1883

*Protecting health and keeping people safe.*

Overview

January 14, 2020
The Department of Health and Senior Services
Protecting the health and safety of Missourians, every day since 1883.

At our core, we at DHSS execute the following foundational responsibilities:

- Providing public health services and supports to all citizens.
- Ensuring regulation of facilities and service providers that deliver care to Missourians.
- Performing oversight of programs and protections for our elderly and vulnerable residents.

By The Numbers

We are a 1,803 person organization responsible for stewardship of $1.442 billion in taxpayer dollars.

More than 83 percent of state general revenue funds appropriated to DHSS are for one program.

Missouri is ranked 39th in overall health by the United Health Foundation, having been ranked 40th in 2017 and 38th in 2018.

Missouri is ranked 37th in the nation for the health of women and children, up eight spots from 2018. This marked the single largest jump in the nation in 2019.

Missouri is ranked 27th in the national Long-Term Services and Supports Scorecard issued jointly by the AARP Foundation, the Commonwealth Fund, and the Scan Foundation.

DHSS issued 80 press releases in 2019 alerting Missourians to various public health issues.
<table>
<thead>
<tr>
<th>State Fiscal Year 2020 Organizational Finances (All Funds)</th>
<th>Amount</th>
<th>Percent</th>
<th>FTE</th>
</tr>
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<tbody>
<tr>
<td><strong>Director's Office</strong></td>
<td>1,181,513</td>
<td>0.08%</td>
<td>25.20</td>
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<tr>
<td><strong>Division of Administration</strong></td>
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<tr>
<td>Department Operational Services</td>
<td>2,658,355</td>
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<td>Federal Grants and Donated Funds</td>
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<td><strong>Division of Community and Public Health Program Operations</strong></td>
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<td>Aid to Local Public Health Agencies</td>
<td>13,472,692</td>
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<tr>
<td>Community and Public Health Programs and Contracts</td>
<td>107,399,848</td>
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<td>Nutrition Services</td>
<td>194,680,851</td>
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<td>Office on Women’s Health</td>
<td>967,994</td>
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<td>Office of Minority Health</td>
<td>425,305</td>
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<td>Office of Rural Health and Primary Care</td>
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<td>PRIMO and Loans Programs</td>
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<td>Office of Emergency Coordination</td>
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<td>State Public Health Laboratory</td>
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<td>Adult Protective Services and NME Programs</td>
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<td>Medicaid Home and Community Based Services</td>
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<td>Medicaid Home and Community Based Services Reassessments</td>
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<td>Naturally Occurring Retirement Communities</td>
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<td>Naturalization Assistance</td>
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<td>Alzheimer Grants</td>
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<td>Senior Programs - Area Agencies on Aging Contracts</td>
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<td>Childcare Improvement Program</td>
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<td>Bureau of Narcotics and Dangerous Drugs</td>
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<td>Medical Marijuana</td>
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<td>Time Critical Diagnosis</td>
<td>168,201</td>
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<td>DHSS Legal Expense</td>
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<td>0.00%</td>
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<td><strong>Total</strong></td>
<td>1,442,674,702</td>
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<table>
<thead>
<tr>
<th>Source of Revenue</th>
<th>Amount</th>
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<tr>
<td>General Revenue</td>
<td>387,356,890</td>
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<tr>
<td>Federal Funds</td>
<td>1,018,921,163</td>
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<td>Other Funds</td>
<td>36,396,649</td>
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Premiere Initiatives

Providing Better Access and Quality of Care for Missouri’s Most Vulnerable Citizens

DHSS is implementing the first comprehensive overhaul of home and community based services (HCBS) since 1982 to ensure high quality service delivery to Missouri’s most vulnerable citizens. Modernization of the level of care determination system through a new algorithm based on current best practices in medical care, coupled with the establishment of a value based payment model and the implementation of new case management technologies, will ensure the right Missourians get the right care at the right time.

The Department has initiated a comprehensive overhaul of Missouri’s abuse and neglect hotline to dramatically increase the capability for mandated reporters to provide timely reports of possible abuse, neglect, and financial exploitation through a shift both toward the implementation of an online reporting system as well as working to redesign call center management practices. Building on these lessons, DHSS has also implemented substantial changes to the HCBS intake call center to expedite and improve service delivery for Missourians. DHSS had nearly 782,000 touch points with citizens in call centers in 2018, fourth most among state agencies.

Enhancing and Innovating Health Services for Missouri’s Women and Mothers

DHSS is implementing 2019 legislation enhancing Missouri’s Pregnancy Associated Mortality Review (PAMR) Board to inject clinical best practices and data-driven solutions to improve maternal health and mortality rates. Grants have been awarded to Missouri as part of the Alliance for Innovation on Maternal Health (AIM) quality improvement initiative to implement proven outcome based national models that improve maternal safety.

The Department has also been awarded the Enhancing Reviews and Surveillance to Eliminate Maternal Mortality (ERASE MM) grant to identify, review, characterize, and identify prevention opportunities within maternal deaths. DHSS is the first state health department in the nation to launch a Count the Kicks program to enhance education and awareness among expectant mothers of possible safety or health concerns of their unborn child.

Responding to the National Opioid Epidemic

DHSS is aggressively working to arrest the growth of opioid addiction and overdose. Data for the first half of 2019 demonstrate a 10 percent decrease in Missouri opioid deaths, but this follows a year in which these deaths increased by 17 percent.

The Department has launched an emergency operations center in St. Louis City to assist in the delivery of Naloxone to those that have overdosed on opioids as well as to provide connection to wrap-around community services that assist in recovery and overcoming addiction. A mobile
medical unit will soon launch within St. Louis City to expand the effectiveness of these services. The Bureau of Narcotics and Dangerous Drugs (BNDD) continues to investigate and initiate enforcement actions against physicians or others that are inappropriately prescribing opioids. The Missouri Overdose Rescue and Education project continues to provide education and supply the life-saving drug Naloxone to first responders throughout the state.

Implementing Missouri’s Voter-Approved Medical Marijuana Program

Pursuant to Missouri’s Constitution, the Department has established a regulatory framework for the operation and implementation of medical marijuana for Missourians with qualifying conditions. DHSS has announced the awarding of licenses for 86 product manufacturing firms, 10 marijuana testing firms, and 60 marijuana cultivators. Additionally, more than 25,000 qualified patient cards have been issued to Missourians. The issuance of licenses for 192 Missouri dispensaries will occur on January 24th.

Reconnecting Care in Rural Missouri

Beginning with the Governor’s Rural Health Summit in 2018, DHSS has been working to realign resources to address the state’s rural health issues. Missouri’s rural communities have higher rates than their urban counterparts in each of the top ten causes of death. Poverty is more prevalent in rural areas than in Missouri’s urban centers, with 29 percent lower per capita income. Much of rural Missouri is federally designated as primary care Health Professional Shortage Areas (HPSA) in medical, dental, and mental health services.

DHSS is working collaboratively with other public and not-for-profit entities to address Missouri’s rural care provider shortage to attract and retain additional health professionals in underserved areas. The Department is coordinating a robust response to Hepatitis A outbreaks in rural Missouri, while also administering grants to address the opioid crisis in rural communities. As one of seven targeted states in President Trump’s Ending the HIV Epidemic Plan, the Department will oversee statewide implementation of upcoming grants that aim to eliminate new HIV infections in rural communities.

Assessing and Impacting Vaping Among Missouri’s Youth

DHSS has taken the lead among various state departments for establishing the “Clear the Air” campaign to persuade those under 18 from initiating or continuing use of electronic cigarettes or vaping technology devices. This marketing initiative has resulted in 5.1 million social media impressions; 85,142 video views; and 27,271 visits to the Clear the Air landing page. Missouri has received national attention for deaths associated with E-Cigarette or Electronic Vaping Use Associated Lung Injury (EVALI).

The Department continues to partner with the Centers for Disease Control and Prevention and the Food and Drug Administration to determine specific causes with the national EVALI
outbreak, and is examining the legal impacts associated with the ban on tobacco and vaping products from being purchased by those under 21 years of age that was passed by Congress and signed into law by President Trump.

**Improving the Quality of Provider Care for Missouri Children**

DHSS has been working to improve processes associated with providing child care. The Department has implemented legislation to provide a 30-day waiver for homeless and foster children to provide verification of immunizations to childcare providers. More than 32,000 background screenings have been completed for those providing childcare to ensure compliance with new federal law. DHSS processed 508,365 background screenings and 88,485 registrations in state fiscal year 2019 through the Family Care Safety Registry. During the most recent 29 month period, the Registry was able to provide same day service for all but three months.

**Addressing the National Rise in Legionnaire’s Disease**

Legionnaire’s Disease is contracted through the breathing in of water droplets that contains a microorganism called Legionella that has a 10 percent mortality rate. DHSS has received much positive media attention for its proactive and engaging efforts to combat Legionnaire’s Disease, which can become particularly problematic if found within a healthcare or lodging facility. In 2019, the Department conducted epidemiological assessments of 44 healthcare facilities and 30 lodging facilities, with hundreds of environmental samples collected and analyzed for Legionella bacteria.

**Meet Our Senior Leadership Team**

**Dr. Randall Williams, MD, FACOG**

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Missouri’s 40th State Health Director, unanimously confirmed by the Senate on March 19, 2017. Currently serves as Chair of the Association of State and Territorial Health Officials (ASTHO) Public Health Preparedness Policy Committee, 2019. Previously, he served as the North Carolina State Health Director and Deputy Secretary for Health Services.

**Adam Crumbliss**

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**Division of Administration (DA)**

The DA provides administrative and financial support services for the Department. The Division processes all grant applications, initiates federal draws related to grants, and prepares required federal and state financial reports. The Division processes all payments to vendors, operates warehouse, delivery, and mailroom services for the Department, ensures compliance with state personnel law, and provides personnel functions/employee relations. The Division also prepares the departmental budget submission, responds to budget-related inquires, and fiscal note requests from the Office of Administration and the Legislature.

**The State Public Health Laboratory (SPHL)**

The SPHL completes testing for environmental health threats, infectious diseases, and executes Missouri’s Newborn Screening program. It also serves as Missouri’s key facility in the event of possible bioterrorism exposure identification needs.

In 2019, the SPHL conducted 67,336 environmental sampling tests; more than 528 food surveillance tests; 110,245 sexually transmitted infection tests; and 6,427 samples for possible infectious disease. SPHL also completed testing of 89,442 samples within the Newborn Screening program. SPHL referred 513 infants for confirmatory testing in 2019. Approximately 50 percent of these infants will require life-enhancing or life-saving medical treatments based on the testing that occurs at the SPHL.

**Division of Community and Public Health (DCPH)**

The DCPH serves as the linkage between national and state health practitioners in the effort to keep the people of Missouri safe from environmental and communicable diseases and conditions. The Division works with 114 local public health agencies to ensure timely and appropriate responses to public health risks, including more than 100 reportable conditions that range from Influenza to Ebola.

The Division operates the state’s Women, Infants, and Children (WIC) nutritional assistance program on behalf of the United States Department of Agriculture, as well as summer food programs and commodity-based food programs. DCPH also houses programs aimed at addressing population needs associated with cancer, traumatic brain injuries, heart disease, diabetes, sexually transmitted infections, and other chronic or acute trauma diseases across all of its six administrative sections.

In addition to completing its on-going educational and response services, DCPH provides support to local public health agencies through the Center on Local Public Health, the Section for Women’s Health, the Office of Rural Health and Primary Care, and the Emergency Resource Center which provides health expertise and services in emergency response situations like flooding, tornadoes, or disease outbreaks. DCPH also oversees the Bureau of Vital Records to
secure, certify, and amend more than 300,000 records, including issuances of more than 59,000 records to Missourians each year.

**Division of Senior and Disability Services (DSDS)**

The DSDS conducts more than 29,000 investigations into alleged abuse, neglect, and financial exploitation and provides adult protective services for eligible adults. To prosecute these allegations, DSDS collaborates with local law enforcement and prosecuting authorities to hold those guilty of abuse, neglect, or financial exploitation accountable for their actions.

DSDS authorizes, oversees, and provides care planning services for more than 60,000 Missourians that are elderly or disabled. The Division also operates the Ombudsman office and network of volunteers to serve as advocates for residents of Missouri’s long-term care facilities.

The Division monitors and oversees Older Americans Act programs through the 10 Area Agencies on Aging (AAAs), and serves as a key information source for seniors and adults with disabilities. DSDS also oversees the Money Follows the Person program, which assist seniors and adults with disabilities to return to the community from a long-term stay in a skilled nursing facility.

**Division of Regulation and Licensure (DRL)**

The DRL is responsible for the licensing of 1,186 long-term care facilities; 162 hospitals; 100 ambulatory surgical centers; 171 renal dialysis facilities; 5,725 clinical laboratories; 4,870 locations utilizing medical radiation devices; 158 home health agencies; and 112 hospice providers. Through this licensing, facilities are inspected to ensure compliance with applicable state and federal regulations to ensure that proper and dignified care may be provided to citizens visiting or staying within regulated facilities.

The Division also licenses 32,688 prescribers and dispensers of controlled substances; 3,303 childcare facilities; 18,774 emergency medical technicians; 216 ambulance services; and 137 adult day care providers to ensure the quality of care provided to patients and those within the care of various facilities are safe. The recently enacted Section for Medical Marijuana Regulation is also housed within the Division.

The Time Critical Diagnosis (TCD) system continues to designate hospitals in the state as Trauma Centers, Stroke Centers and STEMI Centers. A stakeholders group continues to search for alternate funding sources and a mechanism so all hospitals participate at some level in the program. The potential to merge TCD processes with those related to emergency preparedness is also being researched.
We will protect health and keep people of Missouri safe

**ASPIRATION**

**THEMES**

**INITIATIVES**

### Reduce opioid misuse
- Implement Fentanyl Analog Biosurveillance in four hospitals by 6/30/2020.
- Analyze Adult Protective Services case data to determine what services/referrals are offered when opioids are involved to inform staff response and policy/procedure by 6/30/2020.
- Implement an online narcotics loss reporting system by 6/30/2020.

### Improve the health and safety of Missourians most in need
- Improve physical activity opportunities for students with disabilities through implementation of the I Can Do It Program in 26 schools in SY 2019-2020.
- Create a work plan with timelines and specific objectives for the Safe Sleep Coalition Strategic Plan by 6/30/20.
- Conduct three State Health Partner Group meetings to collaborate on the creation of the State Health Assessment by 6/30/2020.

### Enhance access to care
- Complete business case for an enhanced “Missouri Adult Abuse and Neglect Hotline Online Reporting System” as part of the Building State Technology Capacity and Elder Abuse Hotlines federal grant award by 01/31/2020.
- Implement Teledentistry services with a target of reaching a minimum of 175 school children and 175 nursing home residents by 3/31/20.
- Create a standard operating procedure for person centered care planning services through process mapping by 6/30/2020.

### Foster a sustainable, high-performing department
- DHSS Placemat Team will hold four trainings by 6/30/2020, one of which held in a location outside of Jefferson City.
- Launch DHSS NETwork team and hold six events by 6/30/2020.
- The Lean Six Sigma Team will complete two quality improvement projects by 6/30/2020.
- Reduce time-to-hire to 68 days by 6/30/2020.
Maternal deaths caused by drugs and suicide are major contributors to mortality in the postpartum period.

Maternal suicide is vastly underreported.

Approximately 75% of women make at least one ED or hospital visit between their delivery and death.

Maternal suicide is vastly underreported.

90% of self-harm deaths (overdoses and suicides) occur in the postpartum period.

Of the 2017 maternal deaths reviewed by PAMR board to-date:

- Pregnancy-Related: 32%
- Pregnancy-Associated: 63%
- Unable to Determine: 5%

Partnerships to Reduce Pregnancy-Related Deaths

Missouri’s Pregnancy-Associated Mortality Review (PAMR) Board: Consists of 18 geographically diverse members that represent various specialties that interact and impact maternal health.

Missouri Hospital Association and the Alliance for Innovation on Maternal Health (AIM): AIM Bundles
- Phase I - Severe Hypertension
- Phase II - Obstetric Care for Women with Opioid Use Disorder

Perinatal Quality Collaborative (PQC): State teams working to improve the quality of care for mothers and babies

Sources: American Journal of Obstetrics & Gynecology, 2019