

Statewide ORC Quarterly Meeting

REVIEWING QUARTERLY ORC DATA

February 2025



AGENDA FOR TODAY

1. ORC Metric Data
2. Coordinated Referral and Intake System (CRIS)
3. DCN Information & Collection
4. Data Quality Check-In
5. Q&A

ORC Metric Data

FY 25 Q2

FY25 Q2 PROJECT HIGHLIGHTS

Project highlights from the FY25 ORC Q2



\$210,479

Total incentive payments
earned in Q2

8.46% decrease from Q1



2,762

Active
families

483

PCG
Enrollments

241

Prenatal
enrollments

195

ORC prenatal
enrollments

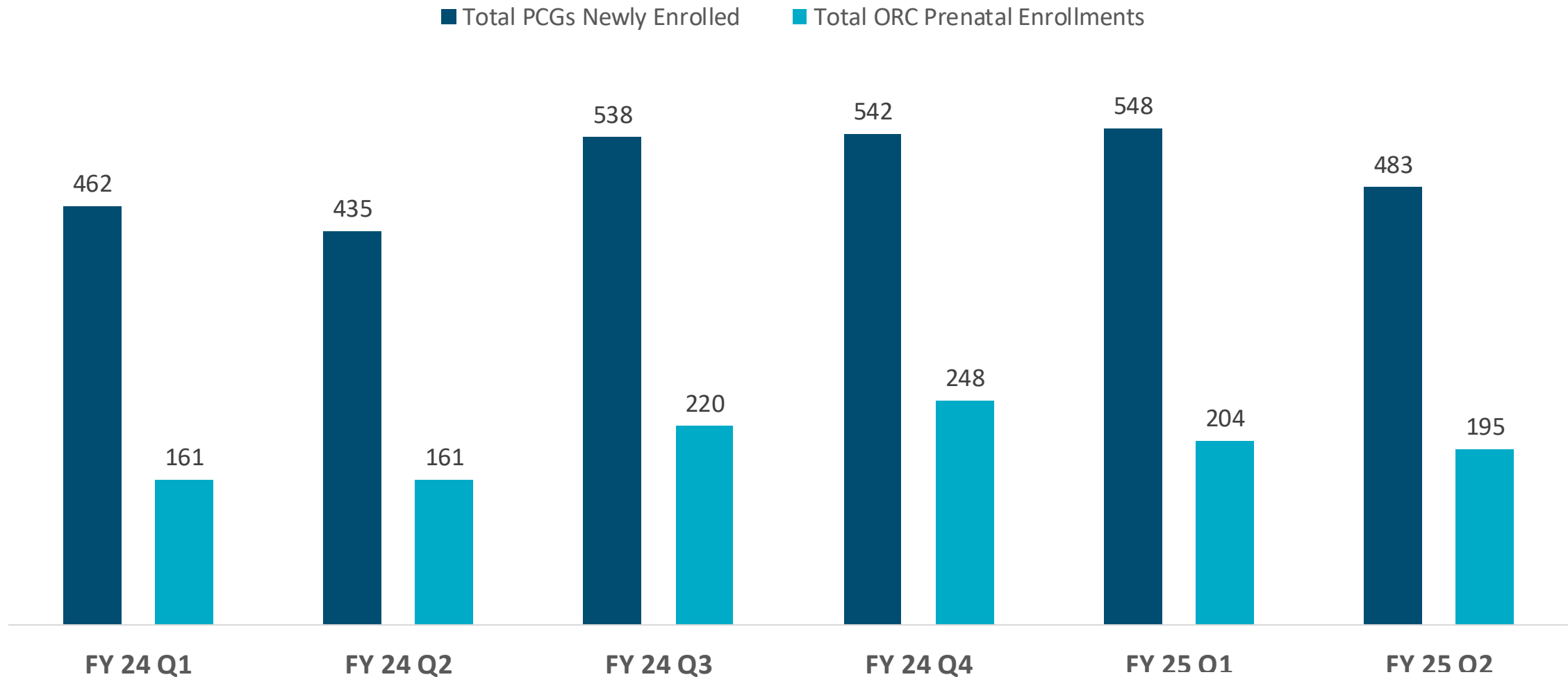


26

Total providers participating
across the state

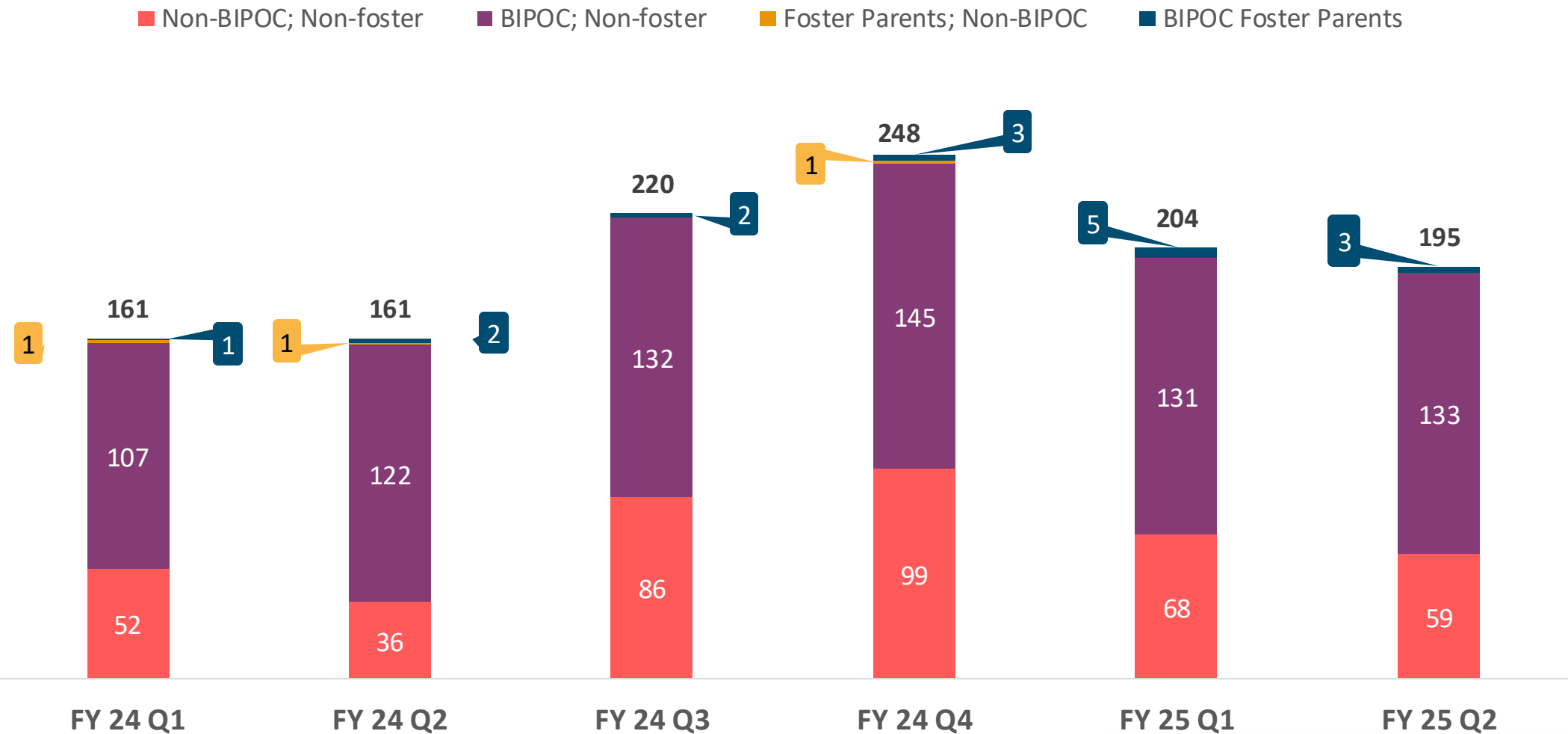
PROVIDER PARTICIPATION & HOME VISITING ENROLLMENTS

This quarter marked a slight decrease in total enrollments and ORC prenatal enrollments



ORC PRENATAL ENROLLMENTS

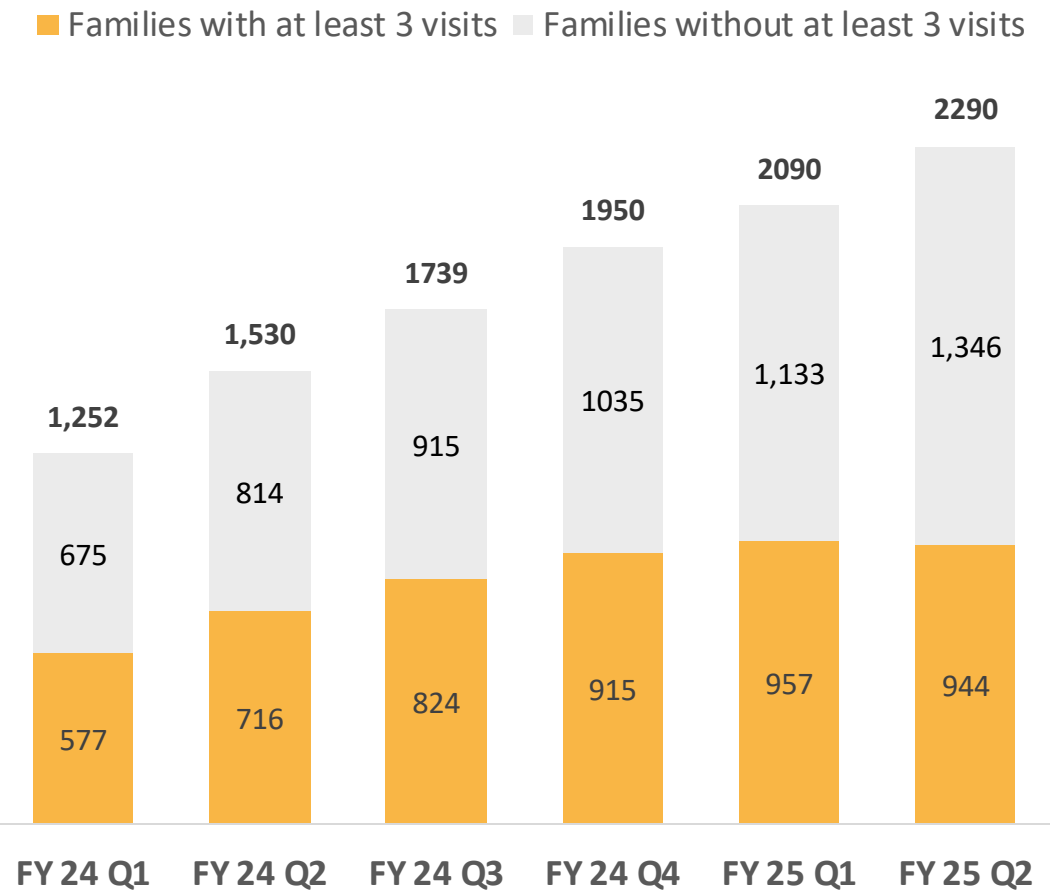
Prenatal enrollments make up 40% of all enrollments during Q2, of which 68% identify as BIPOC



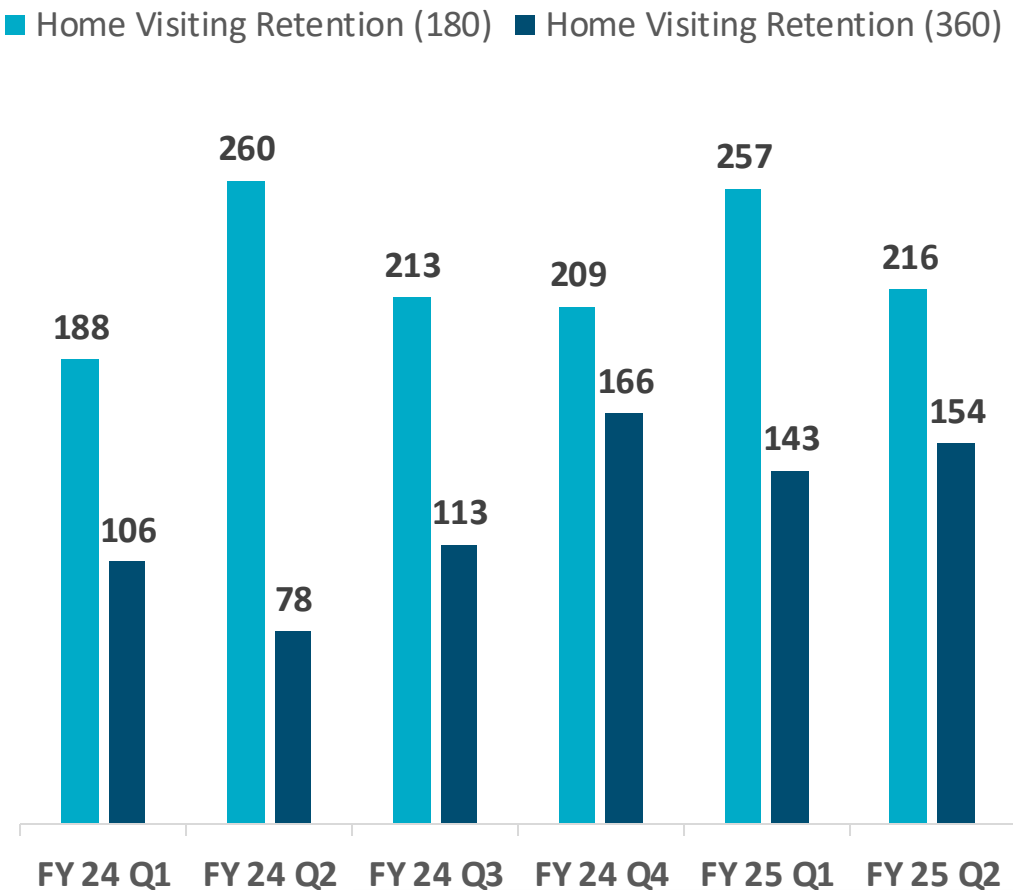
ENGAGEMENT AND RETENTION

During FY25 Q2, ~41%, or 944 families enrolled by the start of each reporting period, received at least 3 home visits. 216 families reached 6 months of enrollment, and 154 families reached one year of enrollment.

Home Visiting Engagement



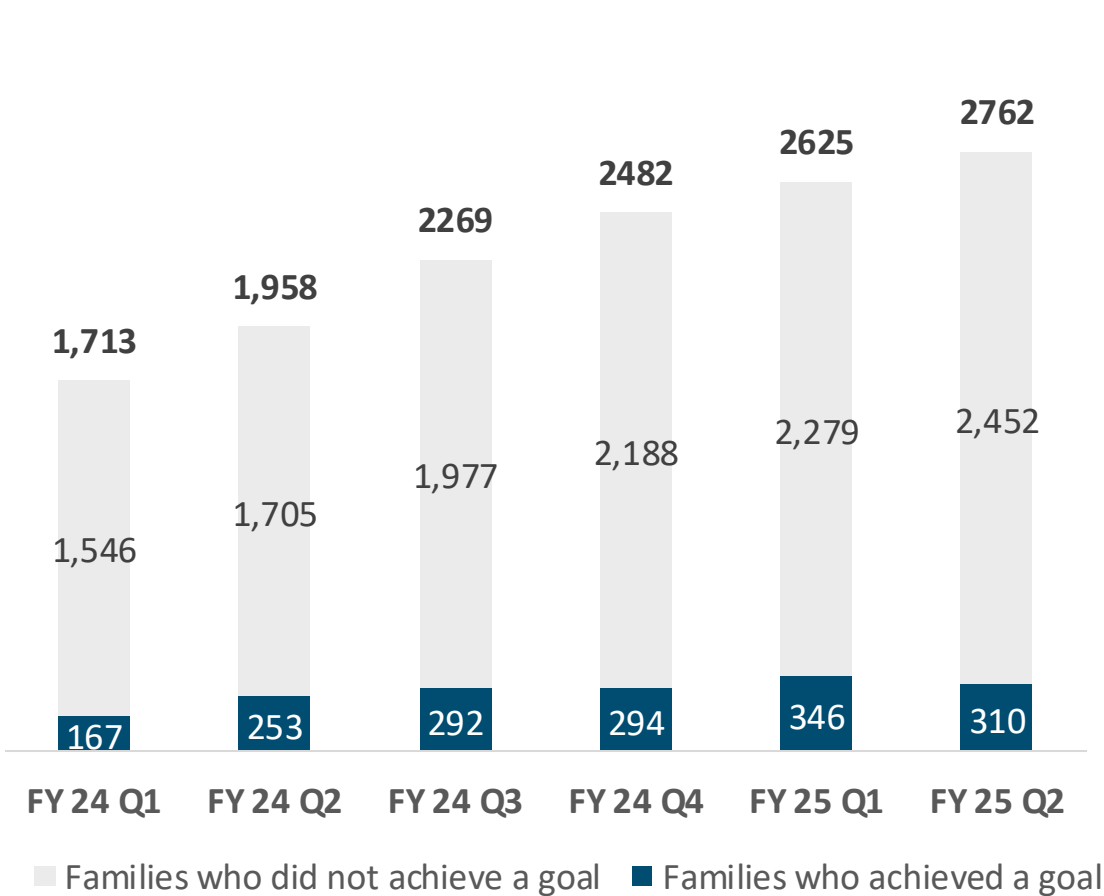
Home Visiting Retention (Days)



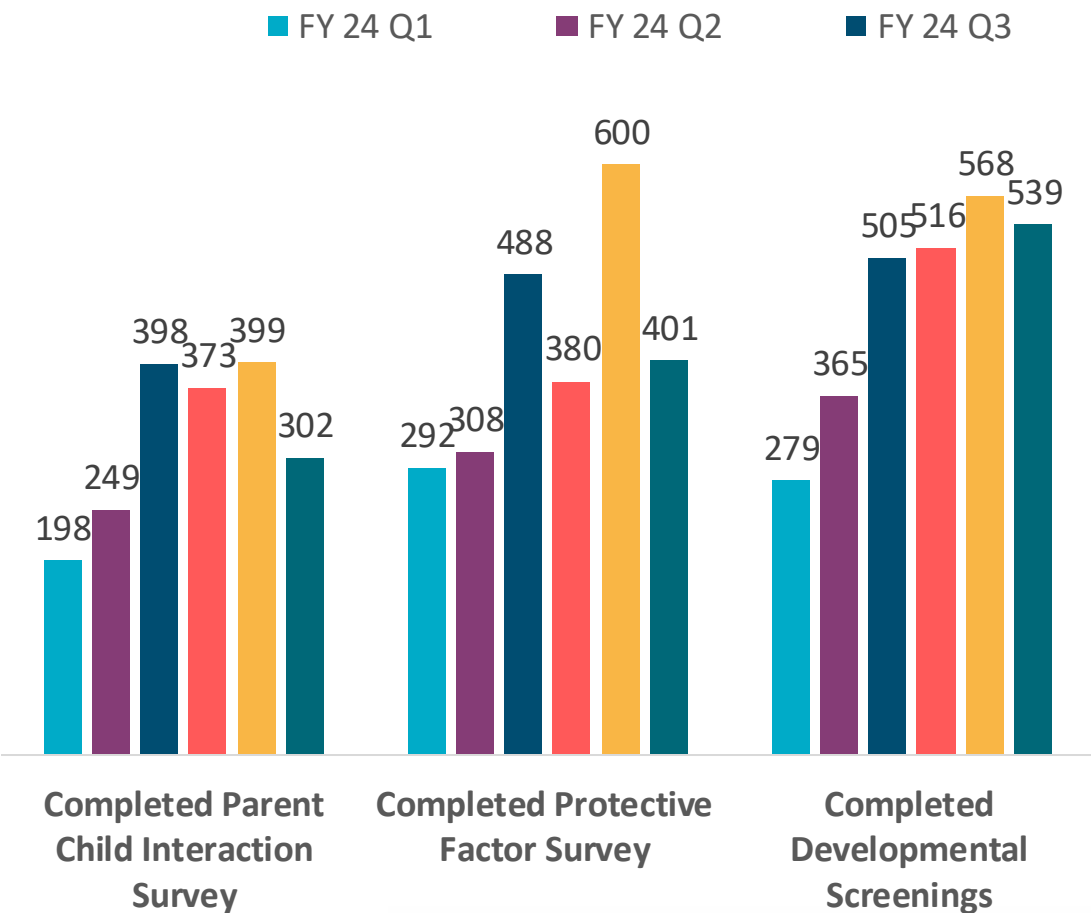
GOALS AND MILESTONES

Goal attainment, surveys, and screening rates slightly decreased from Q1-Q2

Family Goal Attainment

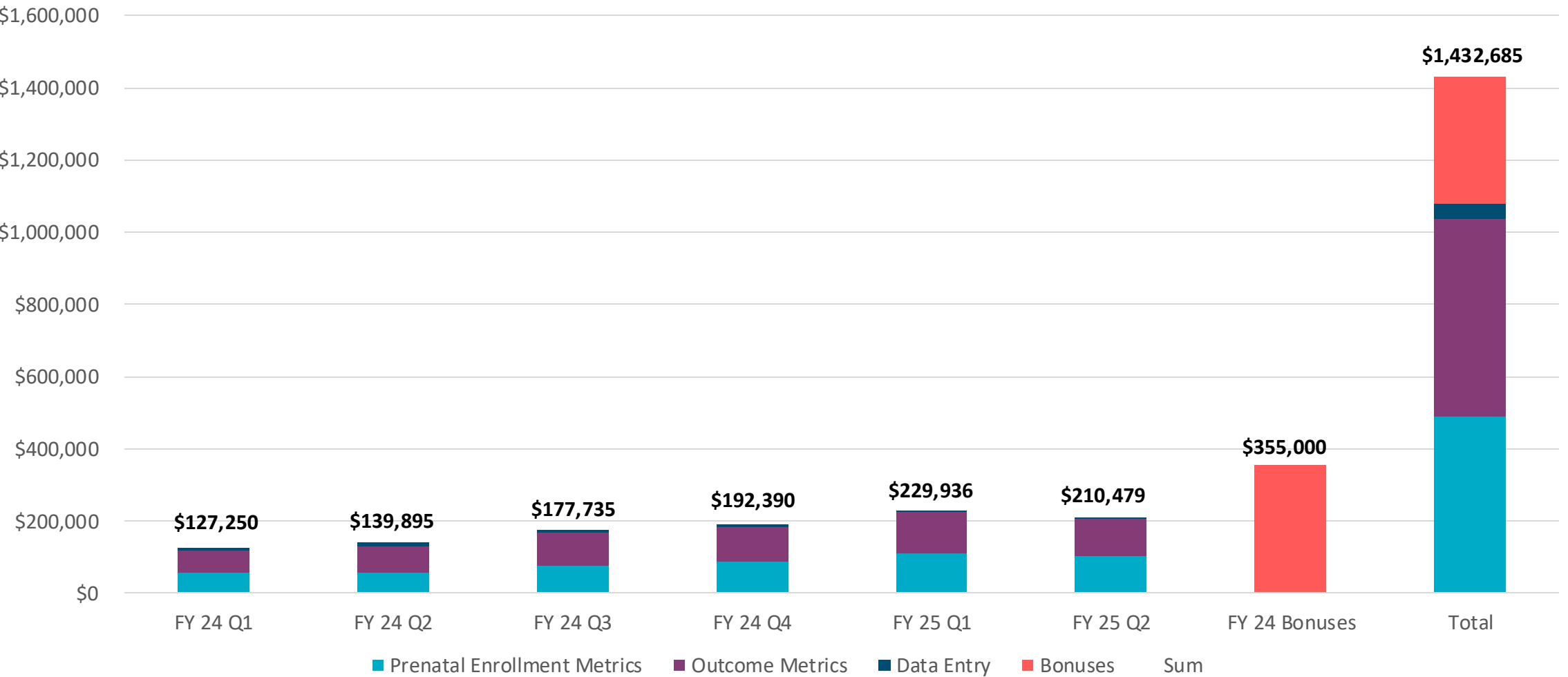


Family Surveys and Screenings



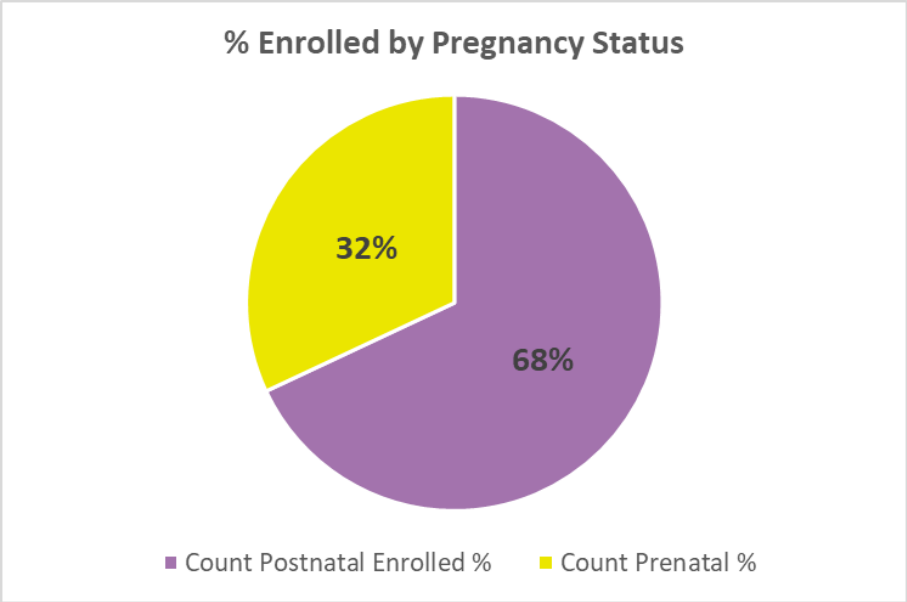
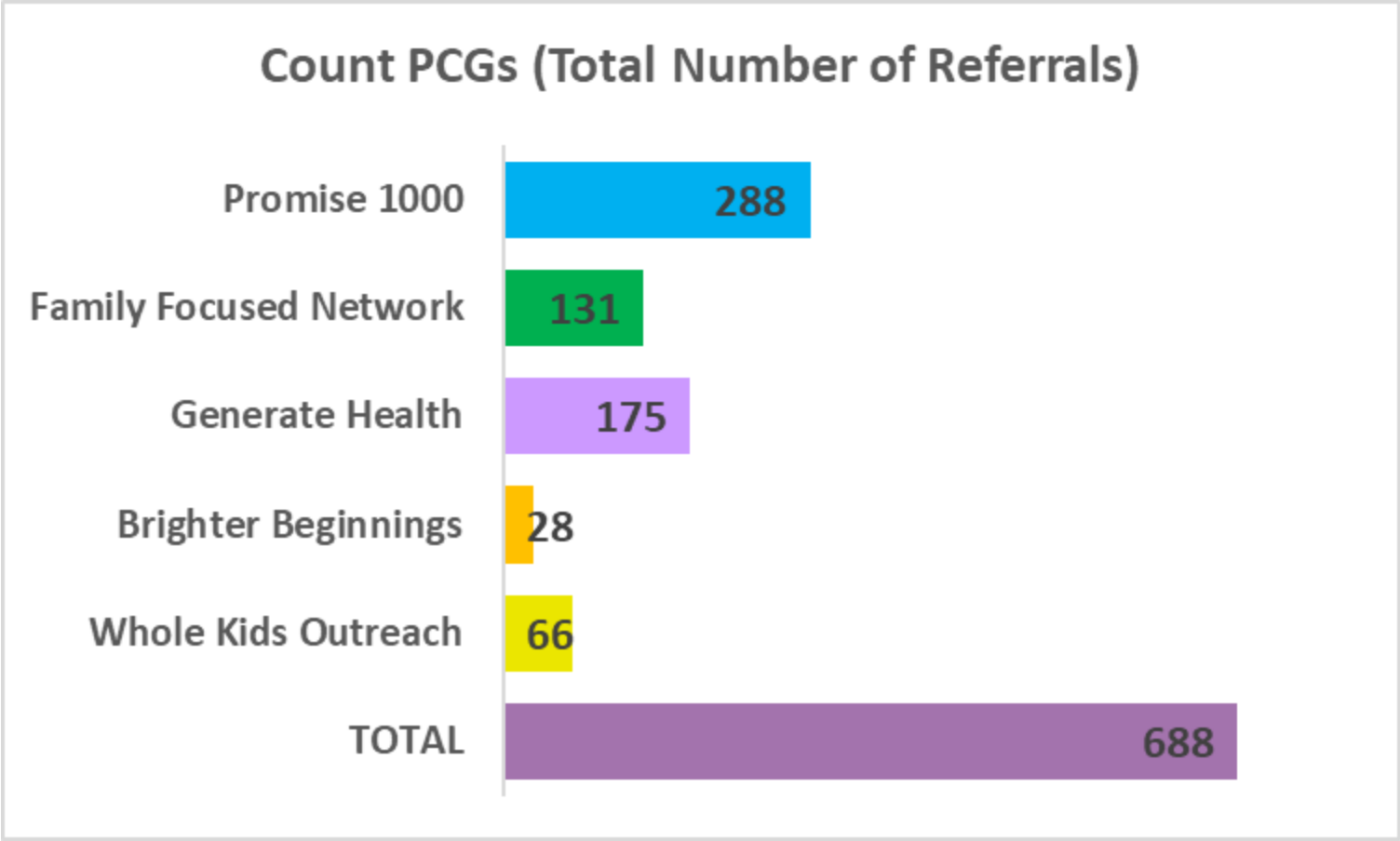
ORC INCENTIVE PAYMENTS

A total of ~\$1.4M has been distributed to ORC home visiting providers from for all quarters shown below, of which just over \$1M was earned for prenatal enrollment and outcome metrics only



Coordinated Referral and Intake System (CRIS)

CRIS STATS ACROSS CI SITES – OCTOBER- DECEMBER 2024



- **We had a 52% placement rate among the referrals that have been fully processed!**
- *The majority of referrals declined were due to being unable to reach the family (65% of declined referrals)*

We had a total of 31 referrals that came from our Managed Care Organization (MCO) partnership!

- *18 from Show Me Healthy Kids (Foster Youth) and 13 from Healthy Blue.*

DCN Information & Collection

DEPARTMENTAL CLIENT NUMBER ("DCN") INFORMATION & COLLECTION

WHAT IS A DCN?

- A **unique 8-digit identifier** assigned to all individuals/newborns **born in MO** (beginning in the late 90's/early 00's) by the MO Department of Health and Senior Services (DHSS) Bureau of Vital Statistics when the birth is registered.
- Also assigned to those receiving any kind of MO state income maintenance or benefits, those having been reported to a MO state department as part of an investigation or individuals receiving services from any MO state department.
- **Only 1 DCN is assigned to an individual involved with any MO state department.** This helps avoid duplication of services/benefits, as well as provides track of individual's involvement with MO state systems over their lifetime.
- Do not assume a DCN has not been assigned to the child simply because it is a newborn.
- Always search for an existing DCN first, prior to any state official assigning a new one.
- *FYI only: If a DCN is not yet assigned, state officials enter the number "99999999" in the state system. This will cause a delay so only use this when the patient has not yet been assigned a DCN.*
- *FYI only: If a DCN is assigned for the child using Baby Boy or Baby Girl as the first name, refer to the Correcting Information in the Common Area of the MEDES Reference Guide to enter the legal first and middle names for the DCN in the system. Do NOT assign a new DCN.*

DCN INFORMATION & COLLECTION

WHERE CAN I FIND IT?

If an individual does not know their DCN, parent/staff can search for it via the following:

- Any documents/forms mailed to client by Medicaid plan provider
 - Medicaid insurance card
 - Initial Enrollment, Acceptance or New Client forms
 - Ongoing benefit or use of service communication or documentation
- Request number from their Medicaid provider/doctor office
- Birth Certificate (?) and Private Insurance documents (?)
- Consider requesting DCN from a state department if you have a state contract: (ex: PAT, MIECHV, MOPPP ask DESE)
- Look up number if granted access and approval to a state database (*limited levels of access*) or if you are involved or connected with one of these and can reach out to your contact person for them to look up (*as your access may not allow you to see all information*)
 - ShowMeVAX (IIS) – Immunization Registry through MO Department of Health & Senior Services (DHSS)
 - FACES – Child Welfare tracking through MO Department of Social Services (DSS)
 - eMOMED - Online Billing Portal for Missouri Medicaid (MO HealthNet) with DSS
 - ECIDS – Early Childhood Integrated Data System through MO DESE (*DCNs can be given but not searched*)

DCN INFORMATION & COLLECTION

HEALTHCARE COVERAGE THROUGH MO MEDICAID (MO HealthNet)

MANAGED CARE ORGANIZATIONS (MCOs) are:

- Home State Health / Show Me Healthy Kids
- Healthy Blue – Blue Cross Blue Shield
- United Healthcare

MO HealthNet assigns ID numbers which IS the DCN. The # on your MO HealthNet card is considered your DCN

IMPORTANT: Use Correct ID Number – DCN

The NOP and Risk Screening process uses the 8-digit Departmental Client Number (DCN). MC Health Plans also assign ID numbers, so it is important providers are using the correct number when entering information into the Portal. Refer to the sample cards below to determine where to locate the patient's DCN.

The image displays four sample health insurance cards, each with a red box highlighting the DCN (Departmental Client Number) field. The cards are from MO HealthNet, Healthy Blue, UnitedHealthcare, and Show Me Healthy Kids. The DCN is typically an 8-digit number.

- MO HealthNet:** The DCN is located in the bottom right corner, labeled "MO HealthNet ID Number".
- Healthy Blue:** The DCN is located in the top left corner, labeled "DCN#".
- UnitedHealthcare:** The DCN is located in the top left corner, labeled "DCN #".
- Show Me Healthy Kids:** The DCN is located in the top left corner, labeled "MO HealthNet ID #".

DCN INFORMATION & COLLECTION

ADDITIONALLY:

- When entering DCNs in REDCap for the CTF Home Visiting Outcomes Rate Card, do **NOT** enter leading zeroes (i.e., zeroes at the beginning of the number)
- Don't forget you can go in and mark if family is refusing to give the DCN and in that case we would **NOT** pull it.
- If the insurance form isn't completed yet, then we also would **NOT** be pulling in the DCN. However, getting the insurance form completed is important for the rate card and to ensure we know who is refusing.
- Keep in mind that all databases have different levels of user access of what can be seen or not seen

DCN ACCESS POLL to guide us as we think about system solutions in the future:

- Help identify which ORC programs have access to or connection with a state database to check for DCN's (i.e. ShowMeVax, through DESE contracts, FACES, etc.)
- And which database is it?
- How/why do you have connection to it?
- Is it helping or not?
- Are there any restrictions as to who can access it or not?

<https://forms.gle/SNmgh7PvrPhHUyMD9>



Data Quality Check-In

DATA QUALITY CHECK-IN

Common Data Entry Errors & Fixes

- **ONLY use CASE MANAGEMENT for data entry and for adding people!** Do not use add/edit records or the record status dashboard.
 - CASE MANAGEMENT is located in red at the top of the project home page and is also listed under external modules.
- **DAG Assignment** – keep all families in the same DAG (*should be a non-issue now as long as everyone is using the new DAG feature in case management to change DAGs for the family*).
- **Closed Cases** – If a primary caregivers closes, make sure all people in the family have a closure form. Each person has their own closure form. If a child age's out but the primary caregiver is still active with another child, do the closure form just for the child that is aging out (keep that child in the same DAG until everyone in the family closes).
- **If mom is pregnant, remember to do a "prenatal placeholder" record in the system.** You just have to do the person ID form and funding source form while in utero then you will use that same record for the child once they are born.
 - Each person has their own record - mom will have her own and the prenatal record is for the unborn baby.
 - Once the baby is born, you will go in and fill in all their initial forms and update the person ID form on the baby's record to say the baby's actual name and their actual DOB
 - Please write "prenatal" as the name of the baby until they are born. Please don't put their planned name or "baby" and their last name, etc. You will put their due date as their DOB until born.
- Each primary caregiver should have at least one child added to the system, but you can add more that qualify (under 5 years).
- **The index child** is the youngest child at HV enrollment. If mom is pregnant at enrollment then it is the unborn baby (prenatal record) that is the index child. If she is not pregnant at enrollment it is the youngest born child. If they have twins one is the index child and one is the subsequent twin. The status of the child remains the same throughout the life of the case (i.e. always the index child, subsequent child, etc.).
- **Family Goals** – Reminder to go in and marked "achieved" with the date! You can have more than one goal and they can be shorter-term goals.

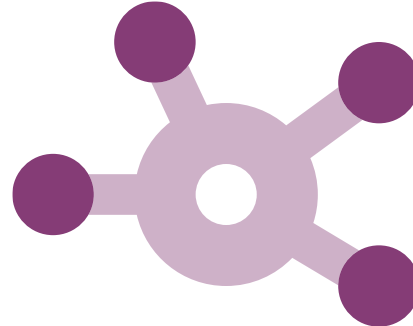
Q&A and Provider Feedback

PROVIDER FEEDBACK: ORC PARTICIPATION

We want to hear from you!



Prenatal Enrollment &
ORC Metrics



CRIS Referrals



Provider Capacity



Reporting and Data Entry



Use of Incentive Payment Funds