

DEPARTMENT OF HEALTH AND HUMAN SERVICES
OFFICE OF DIRECTOR

ACTION REFERRAL

TO <i>Supra</i>	DATE <i>8-15-12</i>
--------------------	------------------------

DIRECTOR'S USE ONLY	ACTION REQUESTED
1. LOG NUMBER <i>000049</i>	<input type="checkbox"/> Prepare reply for the Director's signature DATE DUE _____
2. DATE SIGNED BY DIRECTOR <i>cc: Mr. Kect, Singleton, Johnson, CMS file</i>	<input type="checkbox"/> Prepare reply for appropriate signature DATE DUE _____
	<input type="checkbox"/> FOIA DATE DUE _____
	<input checked="" type="checkbox"/> Necessary Action

APPROVALS (Only when prepared for director's signature)	APPROVE	* DISAPPROVE (Note reason for disapproval and return to preparer.)	COMMENT
1.			
2.		/	
3.			
4.			

DEPARTMENT OF HEALTH & HUMAN SERVICES
Centers for Medicare & Medicaid Services
Atlanta Regional Office
61 Forsyth St., Suite 4T20
Atlanta, Georgia 30303-8909



DIVISION OF MEDICAID & CHILDREN'S HEALTH OPERATIONS

August 8, 2012

RECEIVED

SC-12-003

AUG 14 2012

Mr. Anthony Keck, Director
Department of Health and Human Services
1801 Main Street
Columbia, SC 29201

Department of Health & Human Services
OFFICE OF THE DIRECTOR

LOP: Supra
C: Kiratov
COS
Johnson

Dear Mr. Keck:

The Centers for Medicare & Medicaid Services (CMS) approves the Advanced Planning Document Update for MMIS Operations (APDU) dated June 28, 2012 to allow for the increases in scope from the current contract for SFY2013 through SFY2015 (contract year 3 through year 5) of South Carolina Department of Health and Human Services (SCDHHS), Medicaid Operations Services contract with Blue Cross Blue Shield of South Carolina (BCBSSC) to perform operational services associated with the Medicaid Management Information System (MMIS), in accordance with 42 CFR Part 433.116, 45 CFR Part 92, 45 CFR Part 95, Subpart F, and the State Medicaid Manual (SMM), Part 11. We performed our review of this request in accordance with Federal regulations at Section 1903(a) (3) (A) of the Social Security Act, 42 CFR 433.112 and 42 CFR 433.15(b) (3) and the State Medicaid Manual Part 11.

This approval reflects the intent of South Carolina Department of Health and Human Services (SCDHHS) to ensure that the Medicaid Operations Services contract with Blue Cross Blue Shield of South Carolina (BCBSSC) to perform operational services associated with the Medicaid Management Information System (MMIS) is continued. This approval is effective from July 01, 2012 thru June 30, 2013.

The total funding approved for the Implementation Advanced Planning Document Update (IAPDU) associated with this request, is \$1,786,056 *Total Computable* \$993,075 *Federal Financial Participation at the following (FFP) rates:*

\$400,188 *Total Computable* and \$300,141 *Federal Financial Participation at 75%*

\$1,385,868 *Total Computable* and \$ 692,934 *Federal Financial Participation at 50%*

The State is reminded that onsite reviews will be conducted to determine whether or not the objectives for which FFP was approved are being accomplished and whether or not the automatic data processing equipment or services are being efficiently and effectively utilized in support of approved programs or project as provided for al 45 CFR Part 95. Section 621 and the State Medicaid Manual (SMM). As provided by the SMM, Section 11200 and by 45 CFR 95.61 1, all

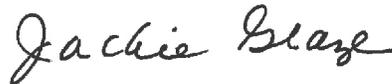
Mr. Anthony Keck, Director
August 8, 2012
Page 2

subsequent revisions and amendments to the IAPDU and contract agreements for this project will require our prior written approval to qualify for FFP.

Only actual costs incurred are reimbursable. The State must provide adequate support for all costs claimed in addition to providing detailed records and proper audit trails.

If there are any questions concerning this approval please contact Clarence Lewis at (404) 562-7432 or via E-mail at Clarence.lewis@cms.hhs.gov.

Sincerely,



Jackie Glaze
Associate Regional Administrator
Division of Medicaid and Children's Health Operations