


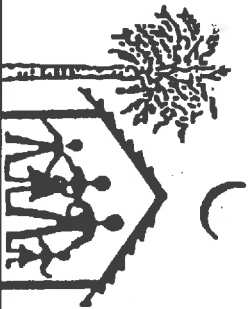
**DEPARTMENT OF HEALTH AND HUMAN SERVICES  
OFFICE OF DIRECTOR**

**ACTION REFERRAL**

|                        |                             |
|------------------------|-----------------------------|
| TO<br><br><b>Myers</b> | DATE<br><br><b>10-15-07</b> |
|------------------------|-----------------------------|

|  |  |                         |  |
|--|--|-------------------------|--|
| <b>DIRECTOR'S USE ONLY</b>   |  | <b>ACTION REQUESTED</b> |  |
| 1. LOG NUMBER<br><br><b>000200</b>   | <input checked="" type="checkbox"/> Prepare reply for the Director's signature<br>DATE DUE <b>10-22-07</b><br><br><input type="checkbox"/> Prepare reply for appropriate signature<br>DATE DUE _____<br><br><input type="checkbox"/> FOIA<br>DATE DUE _____<br><br><input type="checkbox"/> Necessary Action |                         |  |
| 2. DATE SIGNED BY DIRECTOR<br><br><i>Extend until 11/15/07, per attached e-mail.</i><br> |  |                         |  |

| APPROVALS<br><small>(only when prepared for director's signature)</small> | APPROVE | * DISAPPROVE<br><small>(Note reason for disapproval and return to preparer.)</small> | COMMENT |
|---|---------|--|---------|
| 1. <i>Cleared 12/10/07, letter attached.</i>                              |         |  |         |
| 2.  |         |  |         |
| 3.  |         |  |         |
| 4.  |         |  |         |



South Carolina Association  
of Children's Homes and Family Services

Ref Log # 164

Log: Myers

cc: Dep's,  
Ms. Forkner

October 15, 2007

RECEIVED

OCT 15 2007

Emma Forkner, Director  
South Carolina Department of Health and Human Services  
P.O. Box 8206  
Columbia, SC 29202

Department of Health & Human Services  
OFFICE OF THE DIRECTOR

Dear Director Forkner:

I am writing on behalf of the Board of Directors of the South Carolina Association of Children's Homes and Family Services. The Association is a non-profit advocacy organization comprised of organizations that provide a continuum of residential care services for children and adolescents. Association members operate about three-fourths (3/4) of the licensed beds in our State.

The Board is concerned about the distribution of the \$900,000 appropriation to group care providers in the FY 2008 budget. It is our understanding that this money may not qualify for Federal matching funds. In a special session yesterday, the Board voted unanimously to respectfully request that DHHS distribute this money equally across all the levels of care.

Thank you for your consideration of our request.

Sincerely,

Judith S. Nix, Chairman

**From:** Mary Cooper  
**To:** Margarete Keller  
**Date:** 10/22/2007 4:24 PM  
**Subject:** Log 200

**CC:** Gabriele Jefferson; Jean McDaniel

Jean McDaniel states that they are unable to answer this log at this time, due to they are awaiting an answer to this question also. Per Jean, Felicity is aware of this issue and therefore is requesting that the log date be extended to November 5, 2007. thanks.



DEPARTMENT OF HEALTH AND HUMAN SERVICES  
OFFICE OF DIRECTOR

ACTION REFERRAL

|                               |                         |
|-------------------------------|-------------------------|
| TO<br><i>Myers / McDaniel</i> | DATE<br><i>10-15-07</i> |
|-------------------------------|-------------------------|

| DIRECTOR'S USE ONLY                                | ACTION REQUESTED   |
|--|--|
| 1. LOG NUMBER<br><i>000200</i>                     | <input checked="" type="checkbox"/> Prepare reply for the Director's signature<br>DATE DUE <i>10-22-07</i>   |
| 2. DATE SIGNED BY DIRECTOR<br><i>Ref Log #1164</i> | <input type="checkbox"/> Prepare reply for appropriate signature<br>DATE DUE _____<br><input type="checkbox"/> FOIA<br>DATE DUE _____<br><input type="checkbox"/> Necessary Action |

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



Ref Log # 164  
Log Myers  
cc: Dep's  
Ms. Forkner  
**South Carolina Association  
of Children's Homes and Family Services**

October 15, 2007

**RECEIVED**

OCT 15 2007

Emma Forkner, Director  
South Carolina Department of Health and Human Services  
P.O. Box 8206  
Columbia, SC 29202

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Thank you for your consideration of our request.

Sincerely,

Judith S. Nix, Chairman



*State of South Carolina*  
*Department of Health and Human Services*

Mark Sanford  
Governor

Emma Forkner  
Director

December 10, 2007

Ms. Judith S. Nix, Chairman  
South Carolina Association of  
Children's Homes and Family Services  
133 Powell Drive  
Lexington, South Carolina 29072

Dear Ms. Nix:

This letter is in response to your correspondence inquiring about the status of \$900,000 appropriation for State Fiscal Year 2007-2008 from the General Assembly. We recently received clarification from the House Ways and Means and Senate Finance Committees that the \$900,000 is intended for non-treatment services for the high management level of care.

Since the allocation is intended for non-treatment, the rate increase applies only to room and board rates for residential high management group homes and therefore, the money does not qualify for Federal matching funds.

The Department of Health and Human Services will continue to work with state agencies and provider organizations to explore allowable funding options that meet the criteria for Medicaid reimbursement. Thank you for your continued support of the Medicaid program. Should you have further questions, please contact Ms. Jean C. McDaniel, Division Director, Division of Family Services, at (803) 898-2565.

Sincerely,

A handwritten signature in cursive script, reading "Emma Forkner".

Emma Forkner  
Director

EF/mmj

#200  
✓