

DEPARTMENT OF HEALTH AND HUMAN SERVICES
OFFICE OF DIRECTOR

ACTION REFERRAL

TO <i>Myers</i>	DATE <i>11-19-09</i>
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DIRECTOR'S USE ONLY	ACTION REQUESTED
1. LOG NUMBER <i>101232</i>	<input type="checkbox"/> Prepare reply for the Director's signature DATE DUE _____ <input checked="" type="checkbox"/> Prepare reply for appropriate signature DATE DUE <i>12-2-09</i> <input type="checkbox"/> FOIA DATE DUE _____ <input type="checkbox"/> Necessary Action
2. DATE SIGNED BY DIRECTOR <i>Cleaveland</i>	

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

Walter and Misty Lee
722 Sitton Mill Rd
Seneca, SC 29678
864-882-3620 (residence)

RECEIVED

Emma Forkner, Director
SC Department of Health and Human Services
PO Box 8206
Columbia, SC 29202

NOV 19 2009

Department of Health & Human Services
OFFICE OF THE DIRECTOR

Beverly A.H. Buscemi, Ph.D, Director
SC Disabilities and Special Needs
PO Box 4706
Columbia, SC 29240

November 17, 2009

Dear Ms. Forker and Ms. Buscemi,

Our daughter, Elizabeth became eligible for the PDD Medicaid Waiver in 2007. The waiver allowed her to receive home based Applied Behavior Therapy. As an autistic child, she has benefited greatly from receiving these home based services and made great strides in self-help and language skills. In January of 2009, Ryan's Law went into effect. This law required insurance companies to provide these services to qualifying individuals in SC. Autistic related services are now covered by insurances in SC. As a state employee, the state health plan now covers Elizabeth's therapy. During the transition we were assured that the waiver would continue to cover remaining costs associated with the therapy for example deductibles and co-pays.

Until recently, we were not aware of any problems related to this coverage. Last week, our service provider, Early Autism Project, Inc. informed us of a change in billing policies due to problems associated with the Medicaid coverage. According to EAP, they have not been able to receive any reimbursement from Medicaid after filing our primary insurance. This problem is not limited to the State Health Plan. The billing codes do not cross reference from private insurance to Medicaid. Private insurance companies bill per diem and Medicaid bills by the unit. So, beginning in January 2010, our service provider will no longer bill any secondary insurances including the Medicaid waiver. This is going to severely impact our ability to continue to obtain these services for our daughter, Elizabeth. Please assist us in rectifying this oversight, so that we may continue with services in January. Families all across this state will be facing the same problems that we are and having to make some very difficult decisions. We need

solutions to this problem immediately. You may contact me (Misty) by cell phone anytime at 864-710-9332.

Sincerely,

Walter and Misty Lee

A handwritten signature in black ink, appearing to read "Walter and Misty Lee". The signature is written in a cursive style with a large initial "M" for Misty.

Cc: Senator Thomas Alexander
Early Autism Project, Inc.
Daniel Davis, DSN, Autism Division
Sherri Winger, DSN, Service Coordinator



Log 232

State of South Carolina
Department of Health and Human Services

Mark Sanford
Governor

December 11, 2009

Emma Forkner
Director

Mr. and Mrs. Walter Lee
722 Sitton Mill Road
Seneca, South Carolina 29678

Dear Mr. and Mrs. Lee:

We appreciate your letter of November 17, 2009 concerning your daughter, Elizabeth, and how she has benefited from receiving Early Intensive and Behavioral Intervention (EIBI) services through the Pervasive Developmental Disorder (PDD) waiver. You also indicated concern about the providers of waiver services and their interaction with Ryan's Law and private health insurance, such as the State Health Plan.

During the implementation of Ryan's Law, our agencies have been working with the State Health Plan contractor, APS Healthcare, to try to minimize any disruption of services to PDD waiver participants. This has been an ongoing effort as the EIBI providers adapt to the requirements of Ryan's Law and compliance with Medicaid regulations.

- Upon enrollment with Medicaid, each EIBI provider was issued a letter with directions for billing Medicaid.
- A Medicaid Bulletin was issued March 12, 2009 to EIBI providers with instructions on how to appropriately submit claims for Medicaid reimbursement for PDD waiver participants with third party insurance coverage.
- Medicaid provider payments involving third party insurance coverage provides reimbursement up to the allowable amount, not for co-pays and deductibles.
- At some point during 2009, it appears all Medicaid enrolled EIBI providers have successfully processed claims to Medicaid involving third party payments and received reimbursement.
- We have scheduled an upcoming meeting with the EIBI providers on December 16, 2009 to clarify again how they are required to process Medicaid claims involving waiver participants with third party carrier coverage and receive reimbursement, and will include a review of how to appropriately cross reference billing codes.
- Medicaid waiver participants should never be subject to any request for payment of any amount for Medicaid services.

We fully anticipate the third party payment issue to be resolved following the EIBI provider meeting, and providers complying with Medicaid policy as it relates to services for PDD waiver participants with third party coverage. Thank you for bringing your concerns to our attention.

Sincerely,

Emma Forkner
Director

c: Beverly A.H. Buscemi, Ph.D