

DEPARTMENT OF HEALTH AND HUMAN SERVICES
OFFICE OF DIRECTOR

ACTION REFERRAL

TO <i>Roberts/Liggett/FOIA</i>	DATE <i>12-2-14</i>
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DIRECTOR'S USE ONLY	ACTION REQUESTED
1. LOG NUMBER <i>000129</i>	<input type="checkbox"/> Prepare reply for the Director's signature DATE DUE _____
2. DATE SIGNED BY DIRECTOR <i>CC: Brooks, Mullis cleared 1/22/15, letter attached.</i>	<input type="checkbox"/> Prepare reply for appropriate signature DATE DUE _____
	<input checked="" type="checkbox"/> FOIA DATE DUE <i>12-17-14</i>
	<input 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.			
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Palmetto Association
for Children & Families
Helping Children. Serving Families.

RECEIVED

DEC 02 2014

Department of Health & Human Services
OFFICE OF THE DIRECTOR

Ref Log #28

December 1, 2014

Mr. Christian Soura, Director
Department of Health and Human Services
PO Box 8206
Columbia, SC 29202-8206

Re: FOIA Request

Dear Mr. Soura:

This is a follow-up to my communication to you dated July 14, 2014. Pursuant to the Freedom of Information Act, we are requesting a copy of documents pertaining to mandates in the IMD Operations Proviso in the SFY 13-14 Appropriations bill.

117.78. (GP: IMD Operations) All funds received by the Department of Education, the Department of Juvenile Justice, the Department of Disabilities and Special Needs, the Department of Mental Health, the Department of Social Services, and the Governor's Office of Executive Policy and Programs-Continuum of Care as State child placing agencies for the Institution for Mental Diseases Transition Plan (IMD) of the discontinued behavioral health services in group homes and child caring institutions, as described in the Children's Behavioral Health Services Manual Section 2, dated 7/01/06, shall be applied only for out of home placement in providers which operate Department of Social Services or Department of Health and Environmental Control licensed institutional, residential, or treatment programs. An annual report by each state child placing agency shall be made on the expenditures of all IMD transition funds and shall be provided to the Chairman of the Senate Finance Committee, Chairman of the House Ways and Means Committee, and the Governor no later than November first each year. The Department of Health and Human Services shall review the numbers of out of home placements by type and by agency each year and make recommendations to the General Assembly.

Specifically, we desire:

1. Copies of any and all SFY 13-14 documents, spreadsheets, methodologies, or algorithms created by DHHS in its review of out of home placements used in making recommendations to the General Assembly.
2. Copies and any and all SFY 13-14 documents reviewed to obtain the numbers of out-of-home placements by type and by agency.

3. Copies of the SFY 13-14 recommendations provided to the General Assembly including transmittal letters conveying the recommendations. If recommendations were forwarded by electronic submission, we request copies of those transmissions and all attachments to all transmissions.

Kindest Personal Regards,

Paula M. Fendley
Paula M. Fendley, M. Ed., LMSW
Chief Executive Officer

Called / Left Message

12/2

*Bren, Per Constance
Log to Roberto (Lingett)
FOIA
Refer to Log 28*



TO:

FROM:

SUBJECT: Cost of Processing FOIA Request #

The South Carolina Department of Health and Human Services has received and processed your FOIA request. The cost for processing this information is as follows:

Staff processing time at \$10.00 per hour	_____ Hours	\$ _____
Pages copied at \$.10 per page	_____ Pages	\$ _____
Pages faxed at \$.20 per page	_____ Pages	\$ _____
Shipping and Handling Costs		\$ _____
Other costs associated with the FOIA request:	_____	\$ _____
Total Amount Due SCDHHS:		\$ _____

Please remit the above amount to the following address:

Bureau of Fiscal Affairs
South Carolina Department of Health and Human Services
Post Office Box 8297
Columbia, South Carolina 29202-8297

Please contact _____ should you have any questions.

Signature

Date:

Log #129 ✓



Nikki Haley GOVERNOR
Christian L. Saura HEALTH CARE DIRECTOR
P.O. Box 8206 Columbia, SC 29202
www.scdhhs.gov

January 22, 2015

Paula M. Fendley
Palmetto Association for Children & Families
133 Powell Drive
Lexington, SC 29072

Dear Ms. Fendley:

Your Freedom of Information Act was referred to me for handling. You requested a copy of the documents pertaining to mandates in the IMD Operations Proviso in the SFY 13-14 Appropriations bill. Please find enclosed the information that you have requested.

Thank you for your request. If you have any questions, please feel free to contact me at (803)-898-0062.

Sincerely,

A handwritten signature in cursive that reads "Constance Holloway".

Constance Holloway

A handwritten signature in cursive that reads "Holloway".

A long, sweeping handwritten flourish or signature line extending from the previous signature.

South Carolina Department of Health and Human Services
FY 14-15 – Proviso 117.78 Report – IMD Operations

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Bren -
Jenny may have given you this already. I don't need this copy.
This report closes FOIA 109.
-Thanks Annie

The Department of Health and Human Services (DHHS) Behavioral Health is responsible for monitoring all out-of-home placements for beneficiaries.

Tracking results and trends

DHHS tracking has found that despite a recent uptick, South Carolina has generally followed the national downward trend for Psychiatric Residential Treatment Facility (PRTF) admissions. The monthly average of approved admissions to PRTFs in SC was 170 in FY 2013, 93 in FY 2014 (45% decrease), and 111 in July 2014 (15% increase from July 2013).

Tracking data

Please refer to the following tables for data related to out-of-home placements by each SC state agency for FY 2014.

Continuum of Care

Provider ID and Name	Patients	Bed Days	Net Payment
RTF001 SPRINGBROOK BHS	10	971	\$282,201.38
RTF003 PALMETTO PINES BEHAVIORAL	3	135	\$41,080.10
RTF004 THREE RIVERS RESIDENTIAL	15	1,283	\$349,136.26
RTF005 YORK PLACE	3	504	\$147,466.47
RTF023 THREE RIVERS BEHAVIORAL CA	3	175	\$53,320.47
RTF024 PALMETTO PEE DEE BH LLC	1	84	\$26,557.04
RTF029 LIGHTHOUSE CARE CENTER OF	2	297	\$81,137.15
RTF032 NEW HOPE CAROLINAS INC	1	154	\$46,225.35
RTF033 VENICE	1	83	\$25,360.65
RTF034 WILLOWGLEN ACADEMY SC INC	1	157	\$46,298.10
RTF037 PINELANDS RESIDENTIAL TREA	1	8	\$2,328.00
RTF038 GENERATIONS RESIDENTIAL PR	4	920	\$272,594.25

Department of Disabilities and Special Needs

Provider ID and Name	Patients	Bed Days	Net Payment
A00729 PALMETTO LOWCOUNTRY BHS LL	1	6	\$3515.91
RTF001 SPRINGBROOK BHS	9	1,331	\$392,734.60
RTF003 PALMETTO PINES BEHAVIORAL	21	3,168	\$987,079.02
RTF004 THREE RIVERS RESIDENTIAL	4	484	\$142,527.36
RTF024 PALMETTO PEE DEE BH LLC	42	10,361	\$3,019,033.22
RTF031 HAMPTON PSYCHIATRIC RESIDE	2	84	\$24,444.00
RTF034 WILLOWGLEN ACADEMY SC INC	32	5,829	\$1,750,786.95

Department of Mental Health

Provider ID and Name	Patients	Bed Days	Net Payment
A00503 PATRICK B HARRIS PSYCH HOS	13	323	\$162,703.82
A00514 WILLIAM S HALL PSYCH INST	373	10,098	\$9,277,433.19
A00515 G WERBER BRYAN PSYCH HOSP	15	315	\$125,890.29
A00729 PALMETTO LOWCOUNTRY BHS LL	44	422	\$166,410.68
A00806 THE CAROLINA CENTER FOR BE	7	59	\$28,468.89
A00808 THREE RIVERS BEHAVIORAL C	45	478	\$161,641.12
A00898 LIGHTHOUSE CARE CENTER OF	2	17	\$11,351.45
RTF001 SPRINGBROOK BHS	12	1,318	\$375,556.08
RTF003 PALMETTO PINES BEHAVIORAL	8	369	\$113,971.05
RTF004 THREE RIVERS RESIDENTIAL	35	5,892	\$1,610,126.64
RTF005 YORK PLACE	1	256	\$70,765.89
RTF011 DIRECTIONS	31	2,616	\$1,653,694.36
RTF021 PALMETTO LOWCOUNTRY BHSLLC	1	23	\$6,320.17
RTF023 THREE RIVERS BEHAVIORAL CA	6	924	\$273,728.96
RTF024 PALMETTO PEE DEE BH LLC	22	3,409	\$996,916.64
RTF029 LIGHTHOUSE CARE CENTER OF	8	1,111	\$315,197.03
RTF033 VENICE	7	748	\$223,895.40
RTF034 WILLOWGLEN ACADEMY SC INC	6	981	\$309,638.55
RTF035 CAROLINA CHILDRENS HOME	2	178	\$54,693.45
RTF036 WINDWOOD FARM HOME FOR CHI	4	509	\$153,182.40
RTF037 PINELANDS RESIDENTIAL TREA	2	123	\$35,793.00
RTF038 GENERATIONS RESIDENTIAL PR	8	2,035	\$605,119.95

Department of Education

Provider ID and Name	Patients	Bed Days	Net Payment
RTF001 SPRINGBROOK BHS	9	1,279	\$381,086.82
RTF003 PALMETTO PINES BEHAVIORAL	2	541	\$166,801.35
RTF004 THREE RIVERS RESIDENTIAL	3	426	\$122,389.42
RTF005 YORK PLACE	5	585	\$176,227.11
RTF024 PALMETTO PEE DEE BH LLC	1	365	\$107,018.26
RTF029 LIGHTHOUSE CARE CENTER OF	2	424	\$124,478.31
RTF031 HAMPTON PSYCHIATRIC RESIDE	1	95	\$28,459.8
RTF033 VENICE	1	28	\$8,555.4
RTF034 WILLOWGLEN ACADEMY SC INC	9	1,286	\$382,810.5
RTF036 WINDWOOD FARM HOME FOR CHI	3	634	\$188,771.7
RTF038 GENERATIONS RESIDENTIAL PR	1	41	\$12,527.55

Department of Social Services EDC

Provider ID and Name	Patients	Bed Days	Net Payment
RTF001 SPRINGBROOK BHS	27	4,118	\$1,220,814.06
RTF003 PALMETTO PINES BEHAVIORAL	22	3,432	\$1,057,108.71
RTF004 THREE RIVERS RESIDENTIAL	39	6,738	\$1,922,426.4
RTF005 YORK PLACE	7	635	\$192,964.41
RTF007 MIPH CHILDRENS PROGRAM	3	2,137	\$51,919.98
RTF011 DIRECTIONS	4	294	\$196,212.92
RTF021 PALMETTO LOWCOUNTRY BHSLLC	4	39	\$10,442.02
RTF023 THREE RIVERS BEHAVIORAL CA	14	2,753	\$816,798.48
RTF024 PALMETTO PEE DEE BH LLC	9	2,166	\$634,052.04
RTF029 LIGHTHOUSE CARE CENTER OF	12	2,206	\$649,681.60
RTF031 HAMPTON PSYCHIATRIC RESIDE	7	1,444	\$433,735.50
RTF032 NEW HOPE CAROLINAS INC	2	468	\$140,160.15
RTF033 VENICE	10	1,430	\$424,016.10
RTF034 WILLOWGLEN ACADEMY SC INC	14	3,049	\$900,455.85
RTF035 CAROLINA CHILDRENS HOME	9	1,726	\$507,634.95
RTF036 WINDWOOD FARM HOME FOR CHI	14	2,536	\$753,471.75
RTF037 PINELANDS RESIDENTIAL TREA	12	1,326	\$387,786.60
RTF038 GENERATIONS RESIDENTIAL PR	12	2,264	\$670,333.05

Department of Social Services

Provider ID and Name	Patients	Bed Days	Net Payment
RTF001 SPRINGBROOK BHS	1	237	\$70,279.74
RTF003 PALMETTO PINES BEHAVIORAL	3	452	\$138,673.90
RTF004 THREE RIVERS RESIDENTIAL	2	183	\$41,823.16
RTF021 PALMETTO LOWCOUNTRY BHSLLC	1	4	\$1,099.16
RTF024 PALMETTO PEE DEE BH LLC	1	30	\$8,617.80
RTF031 HAMPTON PSYCHIATRIC RESIDE	1	157	\$48,276.90
RTF032 NEW HOPE CAROLINAS INC	1	351	\$104,279.85
RTF034 WILLOWGLEN ACADEMY SC INC	1	298	\$88,012.95
RTF036 WINDWOOD FARM HOME FOR CHI	1	322	\$95,287.95
RTF037 PINELANDS RESIDENTIAL TREA	1	21	\$6,111.00

SC PRTF Waiver Demonstration Project¹

The PRTF Waiver Demonstration Project provides access to intensive home and community based services for children, adolescents and their families who would otherwise be placed in a PRTF or who are transitioning out of placement in a psychiatric residential treatment facility. As part of the PRTF Waiver Demonstration Project’s program evaluation activities, the South Carolina DHHS staff who manage the project requested an assessment of the costs of PRTF Waiver services compared to the costs of PRTF placements.

Using the Cost Neutrality Formula of CMS, annual average costs for PRTF Waiver Services and Other Medicaid services used by the PRTF Waiver participants were calculated for a five-year period beginning January 1, 2009 and ending December 31, 2013. Annual average costs for PRTF Placements and Other Medicaid services used by the population of children and adolescents who were placed in psychiatric treatment facilities were also calculated. The cost savings associated with PRTF Waiver services and Other Medicaid services compared to PRTF Placement and Other Medicaid costs ranged from the lowest savings in Year 5 (\$30,742 less per participant) to the most cost savings in Year 2 (\$48,670 less per participant). See Table below: Cost Neutrality Formula.

¹ The following data was provided by the University of South Carolina Center for Healthy Services and Policy Research

Cost Neutrality Formula									
Timeframe	PRTF Waiver Participants Average Medicaid Paid Claims				Psychiatric Residential Treatment Facility Participant's Average Medicaid Paid Claims				Annual Difference (Placement-Waiver)
	N	Waiver Services ¹	Other Medicaid ²	Total Average	N	PRTF Placement ³	Other Medicaid ⁴	Total Average	
Year 1: January 1, 2009-December 31, 2009	26	\$11,447	\$8,260	\$18,192	768	\$54,459	\$12,059	\$66,518	\$48,326
Year 2: January 1, 2010-December 31, 2010	65	\$14,427	\$7,090	\$21,295	783	\$57,053	\$12,911	\$69,964	\$48,670
Year 3: January 1, 2011-December 31, 2011	63	\$22,585	\$6,119	\$27,435	718	\$53,174	\$12,110	\$65,285	\$37,850
Year 4: January 1, 2012-December 31, 2012	93	\$19,242	\$4,392	\$22,664	644	\$53,250	\$10,663	\$63,914	\$41,249
Year 5: January 1, 2013-December 31, 2013	69	\$27,240	\$6,301	\$33,358	575	\$54,196	\$9,904	\$64,100	\$30,742

¹ Waiver Services is the average per participant annual cost of paid claims for home and community based services specific to the PRTF Waiver program.

² Other Medicaid is the average per PRTF Waiver participant annual cost of paid claims for outpatient, inpatient hospital, pharmacy, vision, and dental.

³ PRTF Placement is the average per participant annual cost of paid claims for placement in a psychiatric residential treatment facility. Data was provided by the Office of Research and Statistics in June of 2014

⁴ Other Medicaid is the average per psychiatric residential placed participant annual cost of paid claims for outpatient, inpatient hospital, pharmacy, vision, and dental. Data was provided by the Office of Research and Statistics in June of 2014

Background information on PRTF trends

Over the last twenty-five years, state Behavioral Health services have nationally shifted from a primary focus on inpatient, psychiatric residential treatment to a community-based approach addressing comprehensive behavioral health concerns. This trend follows the “recovery movement” model with specific attention to an individual’s right to effective treatment and support systems, the importance of the individual fully participating in the community, and an increased emphasis on coping strategies that will allow for successful navigation of challenges, facilitation of recovery, and resiliency training. This is in juxtaposition to a model focusing primarily on symptom management. The shift is also a result of judicial decisions (e.g., *Olmstead vs. L.C.*), significant improvement in medication and its side-effects, and the successful implementation of community evidenced-based practices.

In response to *Olmstead vs. L.C.*, for example, several Federal Agencies (HHS, SAMSHA) increased financial assistance to states for Home and Community Based Services (HCBS). In 2007, Indiana used a grant to study a pilot program for Community Alternative – Psychiatric Residential Treatment Facilities (CA-PRTF). Their findings included a 44% overall functioning improvement rate for beneficiaries in the grant vs. 32.64% for those in regular public services, while they found that improvement in any one domain of functioning was 71.2% for beneficiaries in the grant vs. 55.5% for those in regular public services. By 2007, half of states reported decreasing their PRTF length-of-stay to 30 days or less, while Arkansas, Georgia and Tennessee reported that over 90% of discharged patients received 30 or fewer days of PRTF treatment and were transitioned into community-based services (Eckhart, 2010).

Conclusion and Recommendations

HCBS promote successful treatment outcomes for children and are significantly cost effective to the state of South Carolina. As our state implements the Palmetto Coordinated System of Care (PCSC), more HCBS will be available through the State Plan Option to ensure that SC children receive comprehensive and outcomes-based services that are also optimally cost effective. To aid in this ongoing effort, South Carolina DHHS is partnering with the Building Bridges Initiative, which supports Psychiatric Treatment Facilities in transforming their treatment and business models into brief intervention facilities as well as providing models for longer term treatment of the child in his or her community.

DEPARTMENT OF HEALTH AND HUMAN SERVICES
OFFICE OF DIRECTOR

Jerry
sent response
to Christian
returned to
ADW/as

ACTION REFERRAL

TO	DATE
<i>Roberts/Liggett/FOIA</i>	<i>12-2-14</i>

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Paula M. Fendley
Paula M. Fendley, M. Ed., LMSW
Chief Executive Officer

Called / Left Message

12/2

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FOIA
Refer to Log 28*



TO:

FROM:

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Columbia, South Carolina 29202-8297

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Signature

Date: