

DEPARTMENT OF HEALTH AND HUMAN SERVICES
OFFICE OF DIRECTOR

ACTION REFERRAL



TO	DATE
Stegsland/FOIA	9-18-11
<i>Paul Jones</i>	

DIRECTOR'S USE ONLY		ACTION REQUESTED	
1. LOG NUMBER	101118	<input type="checkbox"/> Prepare reply for the Director's signature	DATE DUE _____
2. DATE SIGNED BY DIRECTOR	<i>cc: Mr. Fock, Deps, Single fax</i>	<input type="checkbox"/> Prepare reply for appropriate signature	DATE DUE _____
		<input checked="" type="checkbox"/> FOIA	DATE DUE <u>9-27-11</u>
		<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.			10-12-11 Bren, PIS closed
2.			(docs attached)
3.			thx - par
4.			

Brenda James - FOI request

From: Sammy Fretwell <sfretwell83@yahoo.com>
To: "stensland@scdhhs.gov" <stensland@scdhhs.gov>
Date: 09/12/2011 12:30 PM
Subject: FOI request
CC: "sfretwell@thestate.com" <sfretwell@thestate.com>, "jeffstens@sc.rr.com" ...

RECEIVED

SEP 12 2011

Department of Health & Human Services
OFFICE OF THE DIRECTOR

Jeff Stensland
Dept. of Health and Human Services
Columbia, S.C.

Sept. 12, 2011

Jeff,

This is a Freedom of Information Act request to review and/or copy all emails or other correspondence between your agency and the governor's office on matters involving the Department of Health and Environmental Control since Jan. 1, 2011.

I also would like to review and/or copy any emails between your agency and members of the Department of Health and Environmental Control board since Jan. 1, 2011.

Please let me know when this information is available. I would ask your agency to waive any charges as this matter is in the public interest.

Sincerely,

Sammy Fretwell
Staff Writer
The State newspaper
771-8537

From: Jan Polatty
To: Brenda James
CC: Deirdra Singleton; Marie Brown
Date: 09/12/2011 4:44 PM
Subject: Fwd: FOI request
Attachments: FOI request

Please log to Deirdra and cc: Director, Deps, Stensland - thanks.....

>>> Jeff Stensland 9/12/2011 12:35 PM >>>
Please log this FOIA request.

Jeff Stensland
SC DHHS
(803) 898-2584



October 12, 2011

Sammy Fretwell
The State Newspaper
P.O. Box 1333
Columbia, SC 29202-1333

Mr. Fretwell,

In accordance with your Freedom of Information request from September 12, 2011, the South Carolina Department of Health and Human Services (SCDHHS) has identified the attached email correspondences. These emails were identified through a search of accounts of the SCDHHS Director and members of the Department's executive staff.

Please feel free to contact me if you have any questions.

Sincerely,

Jeff Stensland
(803) 898-2584

Date: 2011/01/18 3:58:09 PM

From: KostBR@scdhhs.gov

To: ted.pitts jr@gmail.com;jamieshuster@gov.sc.gov;joshbaker@gov.sc.gov;

Cc:

Bcc:

Subject: Fw: Ways and Means subcommittee notes

DHEC report

***** EMBEDDED MESSAGE: *****

Date: 2011/01/18 3:57:07 PM

From: KostBR@scdhhs.gov

To: jacobsc@scdhhs.gov

Subject: Ways and Means subcommittee notes
DHEC, DAODAS, and Voc Rehab had their budget hearings today. Chairman White presided with honor and decorum. But he lost his voice - has a cold, I guess. Ott, Herbersman, and Loftis were present.

DHEC went first. They are requesting \$81 million.

Earl Hunter first talked about the scope of the agency - a history and overview of what they do. He described how they are funded, and how they collect fees for much of what they do. He described the structure of the agency - the Board, etc.

Ott wanted to know how much of their state funding is matchable with federal money. Hunter said it varies by programmatic area. He did say the state has not given enough state funds to fully draw down (maximize) available federal funding. Hunter said Medicaid is the key - if the state fully funds Medicaid, then DHEC will get its maximim federal draw. The recent Medicaid cuts hit DHEC adult services and family planning programs. (We cut family planning?) Ott seemed displeased that the agency may not get all available federal/Medicaid funds. Brian White cut off this line of questioning for now. Ott said he'll have fun with that issue at a later date.

Hunter went on to show the cuts they've sustained - cuts to services and employees. He also highlighted the growing needs coming to their door. In most areas, DHEC is seeing increased demand for services - especially at health centers.

Hunter said their state funding is down 44 percent since 2008 - they are at 1999 funding levels. Lost about 678 employees through state fund cuts. Lost more staff due to loss of other/federal funds.

Then he gave the impact of budget reductions on the various programmatic areas. He described all the staff cuts in the various areas. Health services area is down 40 percent - county health departments. Restaurant inspections, immunizations, newborn/infant services, medical facility inspections, rabies prevention, well and septic services - basically we are all gonna die since there is no more state government health/environmental services or oversight anymore. Brian White wondered if some of the work could be handled by feds (EPA, DNR, etc.) Hunter said not really - if DHEC doesn't do this stuff, it doesn't get done. Ott agreed that these are functions only DHEC can do. Ott asked: Is DHEC meeting the requirements of law in ensuring the quality of the air and water? Hunter carefully answered that SC is better than most states, but the level of protection is suffering, now. No staff to do it the way it used to be done. Will further cuts jeopardize the water quality in SC, Ott asked. Perhaps, answered Hunter. Ott was also concerned that child immunizations may not be happening in SC. White wondered how many of these were mandatory. DHEC lady said most are required by public schools, but not all. Hunter went on to say that fee collections are down 20 percent, too, in addition to reduced state funding. He again said Medicaid cuts will hit DHEC hard.

Finally, Hunter gave them his take on how DHEC would sustain 15 percent cuts. He said Sanford's Office asked agencies to describe how they'd handle 15 percent cuts. White said DHEC didn't put any state-funded FTEs in the 15 percent cut list. Hunter said there would be personnel cuts. White wanted to see admin/personnel cuts in the mix.

The general theme was that DHEC would describe all the cuts, Ott would be upset about the cuts, but Chairman White wondered if the cuts are really the end of the world. That's a generalization, but that's the dynamic we'll see this year - in this subcommittee and beyond. The GOP and Dems will hear these budget presentations - and view the state's fiscal situation - through different lenses. Lottis, for his part, focused on efficiencies and restructuring opportunities for services and eligibility - across agencies.

Of interest, Ott asked about hotel inspections in SC - who monitors that? No one, Hunter said - no one regulates that (victim of previous budget cuts.) Hotels have to self-police. DHEC still monitors the swimming pools there.

FY1, White did dig into the Accountability Report - page 37 - an issue about drinking water. Also, on the same page, Ott noticed that 60 percent of the state's rivers are safe, per the Feds, to swim in - interesting. (Anyway, let's be sure we know our Annual Report - they may ask.). In fact, at the end, Chairman White said DEFINITELY bring the Accountability Report to the hearings - he will have questions.

In closing, Hunter touted some success - infant immunization, and infant mortality rates. He said such progress may be reversed as we cut - penny wise, pound foolish.

*

Date: 2011/01/20 11:00:37 AM
From: KostBR@scdhs.gov
To: ted.pitts.jr@gmail.com;jamieshuster@gov.sc.gov;joshbaker@gov.sc.gov;
Cc:
Bcc:
Subject: Fw: Keck confirmation notes

***** EMBEDDED MESSAGE: *****
Date: 2011/01/20 10:57:18 AM
From: KostBR@scdhs.gov
To: POLATTYJ@scdhs.gov
Subject: Keck confirmation notes
Medical Affairs met.

Peeler asked him why he wants to come here. Keck said he has worked in health care since before age 20. He gave his professional history, and said he has enjoyed the public health field the most - and knows he is making a difference in this work. He is excited about working with the Haley Administration.

Peeler asked about our \$228M deficit. Keck said each state has these issues. Enrollment and economy are part of the problem, but so is planning and budgeting. Louisiana has this problem, but at a lesser level. He said there is no silver bullet to solve that issue before June 30. The feds are part of the problem. He will be working with DHHS staff to better understand the budget. He said this is not an issue to be fixed solely by cuts.

Peeler asked about Obamacare - will get us out of it. Keck said there are multiple strategies. First, what is best for SC? The federal strategy doesn't fit SC's needs. But we have to operate within ACA's framework, though he and Haley do not like that framework. So Congress and states' AGs will do their thing while we advocate to manage all the regs and policy guidance that comes with the current law of the land (Obamacare.) We need to be at the table to mold this as it goes forward, and we have to assume part or all of the ACA will stand, in the end. We can't risk betting against it. But he has a clear assignment from Haley to look at opt-out strategies. So we'll move forward, within (and potentially beyond) ACA ultimately.

Sen. Jackson asked about the future of Medicaid - how does he envision that? Keck said it is more than claims payment - it is the purchasing of health. We need to look at it through the obtainment of health. In Louisiana, with a health umbrella organization, they had a unified health improvement strategy. Not as many walls. Alignment of strategies. I foresee more coordinated care, as this promotes public health - even supports the efforts of DHEC, by combating infant mortality and the like. FFS pays, even for medical failure. Coordinated care empowers the system to address that - provides the incentives to do so. Silos get broken down, and integrated strategies and outcomes can be pursued that benefit everyone. He said Medicaid is a necessity, but it could use reform. And notwithstanding Obamacare's expansion costs, the money is already in the system to do this.

Jackson then asked about the impact of the Medicaid cuts. Keck said healthcare is a huge (the huge in some cases) economic engine to communities. But by making it smarter, leaner, funds could be diverted to other key state needs.

Jackson finally asked hypothetically about next year's budget request. If he thinks growth should be estimated at 10 percent, but Haley says only ask for a 5 percent growth rate, what would you say to legislators. Keck said I work for Haley, and I see my role as part of the whole state gov't budget, not just Medicaid. So during the budget process, I will be sensitive to the entire budget requests' needs and limitations. I will deal with facts so Haley and legislators will have the best data, to set their priorities. You state leaders will make the call after that. Jackson then asked would share with us your true opinions, even if the Governor doesn't agree. He said he will provide data and facts, which won't be manipulated.

Sen. Thomas asked about managed care - what percentage is in managed care. 72 percent or so, of eligible populations (and CMS recently approved more populations). Louisiana is heading in this direction. He said LA is going to look like SC, if they get their way. MCOs next to MHNs, to encourage competition. That is tough to shift FFS providers to that dynamic. Thomas asked about the health plans business and network models - how that works. For MCOs - State pays pmpm, and plans negotiate. For MHNs - it is FFS with coordination fee and shared risk.

Sen. Nicholson asked about the poor and rural areas. Keck said those are different markets, yes. Got to lure docs, fund CAHs. He said managed care, though, removes many of the restrictions that FFS encounters. MCOs can pay higher rates in rural areas to help deal with these issues. FQHCs are vital to these populations. In LA, he was involved with coordinating FQHCs into the public health continuum. He is committed to supporting the rural health care system, with a focus first on the patients, not necessarily the providers only.

Sen. Lourie said Medicaid is so big, and has such an impact, that we need honesty and facts from the DHHS director.

Hutto said Haley took on federal funds in State of State. What's your philosophy on federal funds? How do you reconcile that with her? Keck: I cannot speak for her. SC can leverage available funds effectively - we should. But agencies can get myopic and lose the vision in pursuit of federal dollars. Question should be: what is best for SC? In LA, they had a structured process to coordinate, prioritize grants (Steckel leads this.) Ut blind pursuit of grants often leads to know usable outcomes. Hutto: you are not philosophically opposed to drawing down funds, though? Keck: no, but we have to work smartly - Obamacare is the law of the land, and we will proceed as such, all the while looking for better SC options.

Hutto wanted to be sure SC enrolls all kids eligible Medicaid.

Then they voted a favorable report - unanimously. He goes before the Senate - today, I guess.

*

Date: 2011/02/03 10:30:43 AM

From: KostBR@scdhs.gov

To: jamieshuster@gov.sc.gov;joshbaker@gov.sc.gov;teddplts@gov.sc.gov;treywalker@gov.sc.gov;

Cc:

Bcc:

Subject: Fw: Notes - Senate Judiciary Restructuring Subcommittee - agency budget deficits
Heads up. We should get together, but it should okay

***** EMBEDDED MESSAGE: *****

Date: 2011/02/03 10:26:21 AM

From: KostBR@scdhs.gov

To: Jacobs@scdhs.gov

Subject: Notes - Senate Judiciary Restructuring Subcommittee - agency budget deficits

We got some homework to do. This subcomm wants to learn more about the procedures agencies must follow (and our compliance therewith) when faced with deficits. My own personal take on this is that it is the process they will ultimately find fault with, not the agencies themselves. Because their beef is with the fact that they say they do not know about agency deficit problems in a timely fashion, and as legislators, they may not have enough of a hand in course correction when agencies head toward link of red. I will explain further in a subsequent e-mail, because they had lots of questions, and want lots of data. I did get called up to the microphone at one point, since no one else from the other deficit agencies was present (Corrections, DSS.) But they just had me up to write down all the requests for info that they desire - for future hearings (note: they want former directors to possibly testify.). Anyway, more on that later.

My notes:

Sen. Knotts chaired this new subcomm, appointed by McConnell to look into issues related to agencies' stray behavior (my words).

Three bills were considered this morning (S.14, 262, and 372). S.372 is the bill that prohibits agencies from running deficits, and deals with bureaucrats involved in red ink. This is the bill McConnell filed after his floor speech against the DHHS budget week one this Session.

Knotts said this subcommittee was appointed following events of the last few months, and the subcommittee is to focus on issues related to the General Assembly's ability to manage agencies' activities, particularly their budget machinations. The subcommittee has subpoena powers, Knotts emphasized. He said they will take no action on these bills today, but rather hear testimony and talk/plan about what to do next. McConnell wants these bills to begin their trek toward the Senate floor, Knotts said.

Members we're Knotts, Davis, Sheheen, Shoopman, and Malloy.

S.14 had to do with agencies charging fines and fees. DHEC talked about the issue, and some concern they had with some of the language - the need to codify fees. At one point, Knotts asked how the agency would deal with any deficit, should that occur at DHEC. Wanda Crotwell said they met about that just this morning, because they are facing deficits in several programmatic areas, but will be doing all it can to end this year in the black. Knotts wanted assurance that the agency would always work with the appropriate funding committees and the Budget and Control Board, even in the legislative off-season, should a deficit occur. They carried this bill over.

Sheheen said they could skip 262, since S.372 is of more importance. Malloy said he would like more info on the budgets of agencies in deficit, so he could understand the expenditure shortfalls.

Next, they called me up, since no one was their from any other deficit agency.

So my notes end here, but we will all pow-wow about what is next.

Sent: 2/22/2011 11:25:50 AM
Subject: Re: MCAC

They really think so, lots of satisfaction knods around the table, but u r final say. MCAC remains advisory only. They just don't realize that. Deirdra is still trying to defend the transportation SPA.

-----Original Message-----
From: Anthony Keck
To: Melanie Giese <GieselM@scdhhs.gov>

Sent: 2/22/2011 11:22:15 AM
Subject: Re: MCAC

Does that mean anything?

-----Original Message-----
From: Melanie Giese
To: Anthony Keck <KECK@scdhhs.gov>

Sent: 2/22/2011 11:21:27 AM
Subject: MCAC

Fyi. They Just voted not to approve our co-pay SPA. Zero yays and 15ish nays

*

Date: 2011/02/22 12:00:18 PM
From: KECK@scdhhs.gov
To: TimPearson@gov.sc.gov;

Cc:

Bcc:
Subject: Fw: MCAC
So the DHEC commissioner voted against our state plan to raise copays as part of our Medical Advisory Committee this morning

Its a meaningless vote - we will submit anyways. But bothersome. Gives an indication about how other decisions are being made over there.

***** EMBEDDED MESSAGE: *****

Date: 2011/02/22 11:54:34 AM

From: Giesem@scdhhs.gov

To: KECK@scdhhs.gov

Subject: Re: MCAC

they weren't buying into that the recip needs to have some ownership in their care, and repeatedly said that this was going to cost us money because recip just wouldn't go to the doctor and end up sick and hospitalized (yes, for an additional max of 40 cents).

I brought up the deal about pharmacists getting 90-95% of the copays at the counter as we have heard, likely due to receiving an item, but Sue et al, which included Commissioner Earl Hunter of DHEC, were concerned that even though they pay for a RX, that \$3.\$3.40 is money they could have spent on groceries or gas, and it went on and on

M. Melanie "Bz" Giese, RN
Bureau Director, Health Services
SC DHHS
PO Box 8206
1801 Main Street, J-1224
Columbia, SC 29202
803-898-2868
803-255-8353 (fax).

>>> Anthony Keck 2/22/2011 11:33 AM >>>

To not even have one dissenting vote on such a mainstream idea? Makes no sense.

-----Original Message-----

From: Melanie Giese

To: Anthony Keck <KECK@scdhhs.gov>

Sent: 2/22/2011 11:28:55 AM

Subject: Re: MCAC

Outstanding idea.

-----Original Message-----

From: Anthony Keck

To: Melanie Giese <Giesem@scdhhs.gov>

Sent: 2/22/2011 11:27:56 AM

Subject: Re: MCAC

I obviously need to figure out how to revamp this group.

-----Original Message-----

From: Melanie Giese

To: Anthony Keck <KECK@scdhhs.gov>

Date: 2011/02/22 12:06:39 PM
From: TimPearson@gov.sc.gov
To: KECK@scdhhs.gov;
Cc:
Bcc:
Subject: RE:Fw: MCAC
Tks for the heads up. We're working on that particular spot.

Message Sent with NotifySync

-----Original Message-----

From: KECK@scdhhs.gov
Sent: Tue, 22 Feb 2011 12:00:51 PM America/New_York
To: TimPearson@gov.sc.gov
Subject: Fw: MCAC

So the DHEC commissioner voted against our state plan to raise copays as part of our Medical Advisory Committee this morning

Its a meaningless vote - we will submit anyways. But bothersome. Gives an indication about how other decisions are being made over there.

*

Date: 2011/02/22 12:10:31 PM
From: KECK@scdhhs.gov
To: TimPearson@gov.sc.gov;
Cc:
Bcc:
Subject: Re: Fw: MCAC
I've got a great woman doctor in new orleans, black, young, hopkins educated who might consider coming over to take it over. She put in serious changes in the office of public health in LA.
-----Original Message-----
From: "Pearson, Tim" <TimPearson@gov.sc.gov>
To: Anthony Keck <KECK@scdhhs.gov>
Sent: 2/22/2011 12:06:39 PM
Subject: RE:Fw: MCAC

Tks for the heads up. We're working on that particular spot.

Message Sent with NotifySync

-----Original Message-----

From: KECK@scdhhs.gov
Sent: Tue, 22 Feb 2011 12:00:51 PM America/New_York
To: TimPearson@gov.sc.gov
Subject: Fw: MCAC

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Its a meaningless vote - we will submit anyways. But bothersome. Gives an indication about how other decisions are being made over there.

*

Date: 2011/05/08 5:08:01 PM
From: KostBR@scdhhs.gov
To: joshbaker@gov.sc.gov;
Cc:
Bcc:
Subject: Fw: Gov's bullet points

***** EMBEDDED MESSAGE: *****

Date: 2011/05/08 4:22:10 PM
From: waldrep@scdhhs.gov
To: KostBR@scdhhs.gov
Subject: Re: Gov's bullet points

DHEC will ultimately be responsible for issuing the licensing regulations once the bill is enacted. There was discussion about the industry having input in that process. Since our Medicaid scope of service has become the standard for those agencies we contract with, I suspect that will become the starting point. Usually, licensing covers "the basics". For this industry it might be things like background checks for aides, aides having a TB test, adequate supervision, system for record keeping and complaints, etc. All these things are in our current personal care scope of service.

Our hope is that we will no longer have to monitor these basic things. Everyone we contract with will have a license. This, in turn, will enable us to refocus our Medicaid quality efforts in other areas like performance standards.

>>> Bryan Kost 05/06/11 6:50 PM >>>
Josh Baker wondered about performance standards? Talk Monday. Thanks

*

Date: 2011/04/27 9:28:45 PM

From: waldrep@scdhs.gov

To: KECK@scdhs.gov;KostBR@scdhs.gov;

Cc:

Bcc:

Subject: Fwd: House Bill 3012 -- In Home Care Licensure

If the Governor's Office asks, this has been legislation we have wanted to see passed for over a decade. SC is one of only a few states w/o any licensure of personal care (neither the agencies or the individual aides). I have a fact sheet about this bill if you need it.

Absent licensure, our Medicaid contracts have become the de facto licensing for these agencies. It's almost a \$100m industry, and there is no oversight for the private pay agencies that do not contract with us.

***** EMBEDDED MESSAGE: *****

Date: 2011/04/27 6:50:25 PM

From: cbedsole@sc.rr.com

To: jamieshuster@gov.sc.gov

Subject: House Bill 3012 -- In Home Care Licensure
Jamie,

Thank you for talking with me about House Bill 3012, the in home care licensure bill. Attached is a fact sheet on the legislation. Our client, the SC Association of Personal Care Providers, is very supportive of this legislation. The bill's primary sponsor is Representative Jenny Home.

The bill previously passed the House in 2010. At that time Governor Haley voted for the legislation. If Governor Haley would like, we would very much appreciate the opportunity to have a public bill signing ceremony.

In home care is the only health care provider group not currently licensed under SC law. This legislation will ensure quality of care and create a level playing field for businesses who are adhering to best practices. It is supported by the in home care industry.

In addition to the SC Association of Personal Care Providers, the following groups support the legislation:

- Silver Haired Legislature
- AARP-SC
- Protection and Advocacy for People with Disabilities (P&A)
- SC Home Care Association
- Adult Protection Coordinating Council, which consists of representatives from P&A, the Office of the Attorney-General, SC Sheriff's Association, Family Connections, Lt. Governor's Office on Aging, SC Medical Association, SLED, DSS, DHEC, DHHS, DMH, DDSN, LLR, SC Board of Nursing, SC Police Chief's Association, Criminal Justice Academy, and S. C. Association for Home and Hospice Care.

The following state agencies provided technical assistance with the legislation:

- DHHS
- DHEC
- DDSN

Department of Mental Health

I am available to meet with you if you wish. Please give me a call if you have any questions or need additional information.

Thanks,
Coretta

Coretta D. Bedsole
Palmetto Public Affairs, LLC
177 King Charles Road
Columbia, SC 29209
803.783.2171

*

Date: 2011/05/09 11:09:33 PM

From: JamieShuster@gov.sc.gov

To: KECK@scdhhs.gov;

Cc:

Bcc:

Subject: Re: Yall are signing 3012 right?

Understand hns supports. We see issue w/ dhec regulating and the carve outs that really don't end up protecting all the people this is meant to. Think llr would be better fit. Can talk to u in morning about the specifics of where this stands if you want. Just let me know.

----- Original Message -----

From: Anthony Keck [mailto:KECK@scdhhs.gov]

Sent: Monday, May 09, 2011 10:23 PM

To: Shuster, Jamie

Subject: Yall are signing 3012 right?

Confidentiality Note

This message is intended for the use of the person or entity to which it is addressed and may contain information, including health information, that is privileged, confidential, and the disclosure of which is governed by applicable law. If the reader of this message is not the intended recipient, or the employee or agent responsible to deliver it to the intended recipient, you are hereby notified that any dissemination, distribution or copying of this information is STRICTLY PROHIBITED.

If you have received this in error, please notify us immediately and destroy the related message.

*

Date: 2011/05/10 6:47:54 AM
From: KECK@scdhs.gov
To: JamieShuster@gov.sc.gov;
Cc:
Bcc:
Subject: Re: Yall are signing 3012 right?
Ill call you.
-----Original Message-----
From: "Shuster, Jamie" <JamieShuster@gov.sc.gov>
To: Anthony Keck <KECK@scdhs.gov>
Sent: 5/9/2011 11:09:33 PM
Subject: Re: Yall are signing 3012 right?

Understand hns supports. We see issue w/ dhec regulating and the carve outs that really don't end up protecting all the people this is meant to. Think llr would be better fit. Can talk to u in morning about the specifics of where this stands if you want. Just let me know.

----- Original Message -----
From: Anthony Keck [mailto:KECK@scdhs.gov]
Sent: Monday, May 09, 2011 10:23 PM
To: Shuster, Jamie
Subject: Yall are signing 3012 right?

Confidentiality Note

This message is intended for the use of the person or entity to which it is addressed and may contain information, including health information, that is privileged, confidential, and the disclosure of which is governed by applicable law. If the reader of this message is not the intended recipient, or the employee or agent responsible to deliver it to the intended recipient, you are hereby notified that any dissemination, distribution or copying of this information is STRICTLY PROHIBITED.

If you have received this in error, please notify us immediately and destroy the related message.

*

Date: 2011/05/10 10:25:56 AM
From: KECK@scdhhs.gov
To: Jamieshuster@gov.sc.gov;

Cc:
Bcc:
Subject: Fw: Gov. Haley to sign home licensure bill - wants feedback ...Fwd:

***** EMBEDDED MESSAGE: *****

Date: 2011/05/10 10:13:33 AM
From: Waldrep@scdhhs.gov

To: KECK@scdhhs.gov

Subject: Re: Fw: Gov. Haley to sign home licensure bill - wants feedback ...Fwd:
Supporters:

The following groups supported the legislation:
SC Association of Personal Care Providers
Silver Haired Legislature

AARP-SC
Protection and Advocacy for People with Disabilities (P&A)
SC Home Care Association

Adult Protection Coordinating Council, which consists of representatives from P&A, SC Sheriff's Association, SC Medical Association, SC Police Chiefs Association, Criminal Justice Academy, and S. C. Association for Home and Hospice Care; it also includes the following state agencies: the Lt. Governor's Office on Aging, SLED, DSS, DHEC, DHHS, DMH, DDSN, LLR- SC Board of Nursing, and the Office of the Attorney General
The following state agencies worked on the legislation and offered input:

- Department of Health and Human Services
- Department of Health and Environmental Control
- Department of Disabilities and Special Needs
- Department of Mental Health

Opposition:

In the 2010 legislative session a very small group of private providers (2 individual providers who do not contract with Medicaid) opposed to the bill. Their fears were that the licensing fee would be too high. After that session ended and the bill died in the Senate, Coretta Bedsole, lobbyist for the SC Personal Care Association spent the summer building consensus and support. She went back to the opposition and worked through their concerns. DHEC agreed to involve the industry in developing the regs, and they agreed that components of our existing Medicaid scope of service for personal care would be a good starting point for the reg. DHEC provided a range of fees for the license as part of fiscal impact of the bill.

Very early in the 2011. Rep. Home (the bill sponsor) and Sen. Ryberg, who had previously opposed the bill, worked together with the 2 providers to reach a consensus on the bill. Subsequently, Ryberg voted for the bill and the 2 providers did not speak in opposition to it.

DHHS support:

We were not summoned to testify before any of the committees this year. In 2010, we were asked to testify several times and were specifically asked about our support. The answer was that we did support it.

>>> Anthony Keck 5/10/2011 7:03 AM >>>
Please expand on this. Also - Who supported and who opposed and why? Did we testify or tell anyone we support?

*

This document is printed from GMAVA Reveal on 2011/09/23 10:29:34 AM

Date: 2011/05/11 1:03:41 PM

From: JamieShuster@gov.sc.gov

To: KECK@scdhs.gov;

Cc:

Bcc:

Subject: 3012

She's signing it. Moving forward, when HHS is at table or gives input on bills that involve regulations, fines, or fees let us know. And if the suggested regulatory agency is DHEC that is something we need to know.

Thanks!

Jamie Shuster
Director of Budget and Policy | Office of Governor Nikki Haley
O: 803.734.5118 | C: 803.767.7953

*



Date: 2011/05/11 2:58:28 PM
From: KECK@scdhs.gov
To: JamieShuster@gov.sc.gov;
Cc: KostBR@scdhs.gov;
Bcc:
Subject: Re: 3012
Load and clear.

Bryan - need to refine our process to be more formal. Let's discuss.

-----Original Message-----

From: "Shuster, Jamie" <JamieShuster@gov.sc.gov>
To: Anthony Keck <KECK@scdhs.gov>

Sent: 5/11/2011 1:03:41 PM
Subject: 3012

She's signing it. Moving forward, when HHS is at table or gives input on bills that involve regulations, fines, or fees let us know. And if the suggested regulatory agency is DHEC that is something we need to know.

Thanks!

Jamie Shuster
Director of Budget and Policy | Office of Governor Nikki Haley
O: 803.734.5118 | C: 803.767.7953

*

Date: 2011/06/24 11:54:35 AM
From: JamieShuster@gov.sc.gov
To: KECK@scdhhs.gov;
Cc:
Bcc:
Subject: Re: Fwd:
Ok, I'll touch base with Jan to schedule something.

From: Anthony Keck [mailto:KECK@scdhhs.gov]
Sent: Friday, June 24, 2011 10:53 AM
To: Shuster, Jamie
Subject: Fwd:

you and i need to set up meeting in a couple weeks to talk about overall strategy related to DDSN, DMH, DHEC, etc. This letter (sent months ago) is generally not the direction we should be going.

>>> Robert Kerr <kerr@kerrandcompany.us> 6/24/2011 10:40 AM >>>
The Magill letter I mentioned, just in case you hadn't seen it.

Confidentiality Note

This message is intended for the use of the person or entity to which it is addressed and may contain information, including health information, that is privileged, confidential, and the disclosure of which is governed by applicable law. If the reader of this message is not the intended recipient, or the employee or agent responsible to deliver it to the intended recipient, you are hereby notified that any dissemination, distribution or copying of this information is STRICTLY PROHIBITED.

If you have received this in error, please notify us immediately and destroy the related message.

*

Date: 2011/06/27 9:41:50 AM

From: KostBR@scdhhs.gov

To: joshbaker@gov.sc.gov;

Cc: KECK@scdhhs.gov;

Bcc:

Subject: First Steps proviso

Josh, you asked for background on 89.122 - transfer of BabyNet from DHEC to First Steps. I don't think we at DHHS have heartache about which agency is administering BabyNet, but the potential transfer requires administrative changes, and as you'll see in the bottom bullet, the agency's goal is ensure a smooth transition, if the transfer has to happen.

BabyNet transfer from DHEC to First Steps

DHHS currently has a Medicaid contract with DHEC/Baby Net for targeted case management. This is the service that DHEC uses to assess and monitor children under the age of 3 who have a developmental delay.

Under the proposed proviso, the DHEC portion of BabyNet would be transferred to First Steps.

DHHS has been in discussion with First Steps over the last 6 weeks about this possible transition. As we understand it, the funds and DHEC staff will transfer from DHEC to First Steps.

DHHS will need to enroll First Steps as a provider and will have a contract with this entity for case management services. The State Department of Education, who does accounting for First Steps, will also assist them in Medicaid billing and reporting.

Since this will be First Step's first step (pardon the play on words) into Medicaid, we will need to assure that key staff are appropriately trained in policies, billing, and other major functions necessary to execute the contract.

DHHS's interest in this to be able to execute the contract and to move forward with the final transition actions in a timely manner that will not disrupt services and provide continuity of care.

Bryan Kost
SCDHHS Senior Consultant
803.898.2865
803.429.3201
kostbr@scdhhs.gov

*

Date: 2011/08/22 4:35:36 PM
From: HalPeters@gov.sc.gov
To: KostBR@scdhhs.gov;

Cc:

Bcc:
Subject: RE: Correspondence
Can you forward me your response so I can log it with her correspondence—whenever you get the chance!
Thanks so much Bryan!

Hal

From: Bryan Kost [mailto:KostBR@scdhhs.gov]
Sent: Monday, August 22, 2011 3:09 PM
To: Peters, Hal
Subject: Re: Correspondence

Hey Hal,

I have sent her some information. Bottom line: We made a small rate changes for vaccinations in the Spring, and DHEC has a program that has been reduced that had been providing vaccinations for uninsured kids. (It's this second issue that she's probably been made aware of.) She has my contact info, if she needs to follow up with me.

Bryan Kost
SCDHHS Senior Consultant
803.898.2865
803.429.3201
kostbr@scdhhs.gov<mailto:kostbr@scdhhs.gov>

>>> "Peters, Hal" <HalPeters@gov.sc.gov> 8/22/2011 9:47 AM >>>
Bryan,

Here's the correspondence concerning immunizations. Thanks so much for handling this—I appreciate it!
Sincerely,

Hal Peters
Policy Analyst| Office of Governor Nikki Haley
O: 803.734.4062 | halpeters@gov.sc.gov<mailto:halpeters@gov.sc.gov>

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If you have received this in error, please notify us immediately and destroy the related message.

Date: 2011/08/22 4:53:06 PM
From: KostBR@scdhhs.gov
To: HalPeters@gov.sc.gov;
Cc:
Bcc:
Subject: Fw: more on vaccines

***** EMBEDDED MESSAGE: *****
Date: 2011/08/22 2:58:53 PM
From: KostBR@scdhhs.gov
To: bincknight51@aol.com
Subject: more on vaccines

Hi again:
I just realized that another agency, DHEC (Dept. of Health and Environmental Control) may have made some changes.

Their Vaccines for Children (VFC) program has been changed. It will not affect Medicaid recipients, but it will affect the uninsured since vaccines won't be available to them under the new guidelines which I believe is based on budget cuts.

You may want to contact DHEC 898-3432.

Hope this helps,

Bryan Kost
SCDHHS Senior Consultant
803.898.2865
803.429.3201
kostbr@scdhhs.gov

*

Date: 2011/09/08 3:07:20 PM
From: KECK@scdhhs.gov
To: madisonwalker@gov.sc.gov;
Cc:
Bcc:
Subject: Fw: FITS News says DHEC funds will go to DHHS

***** EMBEDDED MESSAGE: *****

Date: 2011/09/08 12:54:17 PM
From: KostBR@scdhhs.gov
To: Singled@scdhhs.gov
Subject: FITS News says DHEC funds will go to DHHS
<http://www.fitsnews.com/2011/09/08/inside-nikki-haleys-dhec-takeover/>

"Haley wants to seize control of health care funds that are currently routed through DHEC -- and place those funds exclusively under the purview of her cabinet health czar, Tony Keck"

Bryan Kost
SCDHHS Senior Consultant
803.898.2865
803.429.3201
kostbr@scdhhs.gov

*

Date: 2011/09/09 1:05:51 PM
From: JamieShuster@gov.sc.gov
To: KECK@scdhhs.gov;
Cc:
Bcc:
Subject: Re: here are pros and cons sam and deirdra came up with Thanks.

From: Anthony Keck [mailto:KECK@scdhhs.gov]
Sent: Friday, September 09, 2011 01:02 PM
To: Shuster, Jamie
Subject: here are pros and cons sam and deirdra came up with

overall - its very doable. you should look at the proviso though to understand if it constrains us

Pros:

- The non-Medicaid federal BabyNet dollars could be better aligned with Medicaid.
- Provider contracting could be aligned.
- Medicaid already funds targeted case management (TCM) and early intervention services through BabyNet.
- First Steps is new to the Medicaid TCM portion, only assuming the DHEC portion July 1, 2011.
- First Steps' status as a state entity is posing challenges for SCDHHS to be able to accept funds. If the BabyNet Program was transferred to SCDHHS there would be no issue with the acceptance of state matching funds.

• In some states the BabyNet Program is a part of the Medicaid agency. So this would be in line with how other states operate the program.

Cons:

- Would need to address the issue with Proviso 89.122 which moved the program to First Steps
- Would require new investments in oversight to correct issues identified in LAC report.
- Funding for a significant portion of the Medicaid TCM component is still allocated directly to DDSN. They were successful in being carved out of the transfer of the DHEC component.
- The accounting for these federal funds could pose complexities since most all of our systems are Medicaid oriented.
- This consolidation would come at a time when there are other major, competing initiatives underway internal at DHHS.
- The program is highly visible and has the attention of a number of advocates, parents and educators. Expectations are high.

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803.898.2865
803.429.3201
kostbr@scdhhs.gov

*

DEPARTMENT OF HEALTH AND HUMAN SERVICES
OFFICE OF DIRECTOR

File ✓

ACTION REFERRAL

Change log for July to respond

TO	DATE
<i>Steps and FOIA</i>	<i>9-18-11</i>
<i>Publ. Justice</i>	

DIRECTOR'S USE ONLY	ACTION REQUESTED
1. LOG NUMBER 101118	<input type="checkbox"/> Prepare reply for the Director's signature DATE DUE _____
2. DATE SIGNED BY DIRECTOR <i>cc: Mr. Keck, Depp, Singleberry</i>	<input checked="" type="checkbox"/> Prepare reply for appropriate signature DATE DUE _____ <input checked="" type="checkbox"/> FOIA DATE DUE 9-27-11 <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.			
3.			
4.			

DEPARTMENT OF HEALTH AND HUMAN SERVICES
OFFICE OF DIRECTOR

ACTION REFERRAL

TO	DATE
<i>Singletary/FOIA</i>	<i>9-18-11</i>

DIRECTOR'S USE ONLY		ACTION REQUESTED	
1. LOG NUMBER	<i>100118</i>	<input type="checkbox"/> I Prepare reply for the Director's signature	DATE DUE _____
2. DATE SIGNED BY DIRECTOR	<i>cc: Mr. Beck, Deps, Stensland</i>	<input type="checkbox"/> I Prepare reply for appropriate signature	DATE DUE _____
		<input checked="" type="checkbox"/> FOIA	DATE DUE <i>9-27-11</i>
		<input type="checkbox"/> Necessary Action	

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1.			
2.			
3.			
4.			

Brenda James - FOI request

From: Sammy Fretwell <sfretwell83@yahoo.com>
To: "stensland@scdhhs.gov" <stensland@scdhhs.gov>
Date: 09/12/2011 12:30 PM
Subject: FOI request
CC: "sfretwell@thestate.com" <sfretwell@thestate.com>, "jeffstens@sc.rr.com" ...

RECEIVED

SEP 12 2011

Department of Health & Human Services
OFFICE OF THE DIRECTOR

Jeff Stensland
Dept. of Health and Human Services
Columbia, S.C.

Sept. 12, 2011

Jeff,

This is a Freedom of Information Act request to review and/or copy all emails or other correspondence between your agency and the governor's office on matters involving the Department of Health and Environmental Control since Jan. 1, 2011.

I also would like to review and/or copy any emails between your agency and members of the Department of Health and Environmental Control board since Jan. 1, 2011.

Please let me know when this information is available. I would ask your agency to waive any charges as this matter is in the public interest.

Sincerely,

Sammy Fretwell
Staff Writer
The State newspaper
771-8537

From: Jan Polatty
To: Brenda James
CC: Deirdra Singleton; Marie Brown
Date: 09/12/2011 4:44 PM
Subject: Fwd: FOI request
Attachments: FOI request

Please log to Deirdra and cc: Director, Deps, Stensland - thanks.....

>>> Jeff Stensland 9/12/2011 12:35 PM >>>
Please log this FOIA request.

Jeff Stensland
SC DHHS
(803) 898-2584



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: _____

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Date: 09/12/2011 12:30 PM
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CC: "sfretwell@thestate.com" <sfretwell@thestate.com>, "jeffstens@sc.r.com" ...

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Signature _____ Date: _____



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FROM:

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Staff processing time at \$10.00 per hour	_____ Hours	\$ _____
Pages copied at \$.10 per page	<u>24</u> Pages	\$ _____
Pages faxed at \$.20 per page	_____ Pages	\$ _____
Shipping and Handling Costs		\$ _____
Other costs associated with the FOIA request:	_____	\$ _____
Total Amount Due SCDHHS:		\$ _____

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South Carolina Department of Health and Human Services
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Columbia, South Carolina 29202-8297

Please contact Jeff Skrusrud should you have any questions.

Signature

Date:

10/12/11