

DEPARTMENT OF HEALTH AND HUMAN SERVICES
OFFICE OF DIRECTOR

ACTION REFERRAL

TO <i>Liggett</i>	DATE <i>10-23-15</i>
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DIRECTOR'S USE ONLY	ACTION REQUESTED
1. LOG NUMBER <i>000283</i>	<input type="checkbox"/> Prepare reply for the Director's signature DATE DUE _____
2. DATE SIGNED BY DIRECTOR <i>cc: Kost, Deps, CMS files, Chavis</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
7500 Security Boulevard, Mail Stop S2-26-12
Baltimore, Maryland 21244-1850



Disabled and Elderly Health Programs Group

June 15, 2015

Mr. Pete Liggett, PhD.
Deputy Director
South Carolina Department of Health and Human Services
1801 Main Street
Columbia, SC 29202

RECEIVED

JUN 22 2015

Department of Health & Human Services
OFFICE OF THE DIRECTOR

Dear Mr. Liggett:

In response to the June 3, 2015 request from the South Carolina Department of Health and Human Services, the Centers for Medicare & Medicaid Services (CMS) is granting a third 90 day temporary extension of South Carolina's Home and Community-Based Services (HCBS) waiver program for children with pervasive developmental disabilities. The current temporary extension is scheduled to expire June 29, 2015. The extension allows the Pervasive Developmental Disorder (PDD) waiver, CMS control number 0456.01, to continue operating through September 27, 2015, at cost and utilization levels approved for the fifth year of the waiver program with Federal financial participation.

CMS is granting this temporary extension in order to give the state additional time to develop a Medicaid State Plan Amendment, that includes services for children with Autism Spectrum Disorder that are currently offered in this waiver. South Carolina has indicated that this waiver will not be renewed because the services will be offered under the state plan. This temporary extension period will also be used to notify waiver participants and to work on the transition of waiver participants.

If you need any assistance, feel free to contact Kenni Howard, Kenni.Howard@cms.hhs.gov or via telephone at (404) 562-7413; or Amanda Hill, Amanda.Hill@cms.hhs.gov or via telephone at (410) 786-2457.

Sincerely,

A handwritten signature in black ink that reads "Alissa Mooney DeBoy". The signature is written in a cursive, flowing style.

Alissa Mooney DeBoy
Acting Director

cc: Jackie Glaze