

DEPARTMENT OF HEALTH AND HUMAN SERVICES
OFFICE OF DIRECTOR

ACTION REFERRAL

TO	DATE
Myers/Waldrop	9-10-08

DIRECTOR'S USE ONLY	ACTION REQUESTED
1. LOG NUMBER 100140	<input type="checkbox"/> Prepare reply for the Director's signature DATE DUE _____
2. DATE SIGNED BY DIRECTOR C. H. S. Forke Cleared 10/17/08, letter attached.	<input checked="" type="checkbox"/> Prepare reply for appropriate signature DATE DUE 9-19-08
	<input type="checkbox"/> FOIA DATE DUE _____
	<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.			

**PROTECTION AND
ADVOCACY FOR
PEOPLE WITH
DISABILITIES, INC.**

The Protection & Advocacy System for South Carolina

C: ET

Log: Eligibility/
SAM

September 9, 2008

RECEIVED

SEP 10 2008

Department of Health & Human Services
OFFICE OF THE DIRECTOR

Dr. Stanley Butkus, Director
South Carolina Department of Disabilities and Special Needs
3440 Harden Street Extension
Columbia, South Carolina 29203

Ms. Emma Forkner, Director
South Carolina Department of Health and Human Services
Post Office Box 8206
Columbia, South Carolina 29202

Re: New Community Supports Waiver

Dear Dr. Butkus and Ms. Forkner:

Protection and Advocacy for People with Disabilities, Inc. (P&A) has noted several concerns with the new Community Supports Waiver application for 2008. We request that HHS and DDSN take these issues into consideration before submitting the waiver application.

As a preliminary matter, the public was not given sufficient time or information to provide comprehensive input regarding this waiver. From the date the information was presented to us, we had one week to provide input. We were also forced to provide this input without an opportunity to view the waiver application document. Will there be an opportunity to submit additional input once the waiver application document is completed and available for review?

P&A has a number of concerns about the information provided so far:

- People who currently use Rehabilitation services can access Family Support Funds to cover the cost of dental and vision services. They will no longer be able to use these funds once enrolled on the waiver. Therefore, Dental and Vision services should be covered services on the waiver. Expecting individuals with limited incomes to pay out of pocket for dental and vision services expenses is unrealistic.
- What percentage of the 1900 individuals currently receiving Rehabilitation services are expected to meet Level of Care and Financial Eligibility criteria for the new waiver?

CENTRAL OFFICE
SUITE 208
3710 LANDMARK DRIVE
COLUMBIA, SC 29204
(803) 782-0639
(Voice and TTY)
FAX (803) 790-1946

PIEDMONT OFFICE
SUITE 106
545 N. Pleasantburg Drive
GREENVILLE, SC 29607
(864) 235-0273
1-800-758-5212
(Voice and TTY)
FAX (864) 233-7962

INFORMATION AND REFERRAL
Toll Free:
1-866-275-7273
(Voice)
or
1-866-232-4525
(TTY)
Email:
info@protectionandadvocacy-sc.org

PEE DEE OFFICE
2137 B HOFFMEYER ROAD
FLORENCE, SC 29501
(843) 662-0752
1-800-868-0752
(Voice and TTY)
FAX (843) 662-0786

LOW COUNTRY OFFICE
1569 SAM RITTENBERG BLVD.
CHARLESTON, SC 29407
(843) 763-8571
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Dr. Stanley Butkus, Director
Ms. Emma Forkner, Director
Page Two
September 9, 2008

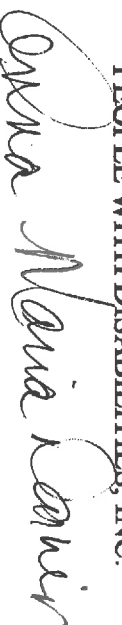
- Will all of the individuals who do not meet the criteria be able to continue receiving services through State funding?
- What questions will be asked of potential waiver applicants to help them determine which waiver is most appropriate for their needs?
- Will current MR/RD waiver participants receive complete disclosure about any negative impact that switching to the new waiver may have on their services?
- If MR/RD waiver participants choose to move to the new waiver, will the number of people served on the MR/RD waiver remain constant and those on the MR/RD waiting list be able to move onto the waiver, or is this new waiver an effort to reduce the number of people served on the MR/RD waiver?
- How many slots will be reserved on the MR/RD waiver for those on the new waiver whose needs may increase to exceed the \$10,950 cap?

We appreciate the opportunity to comment on these issues. We will also be submitting our input to Kara Lewis at HHS via email, as directed.

With best personal regards, we remain

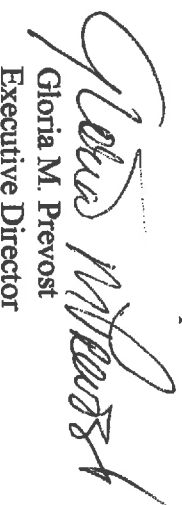
Very truly yours,

PROTECTION AND ADVOCACY FOR
PEOPLE WITH DISABILITIES, INC.



Anna Maria Darwin

Protection and Independence Team Leader/Attorney

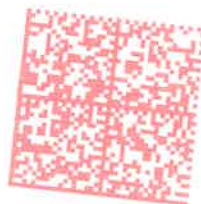


Gloria M. Prevost
Executive Director

AMD/JDS/sg

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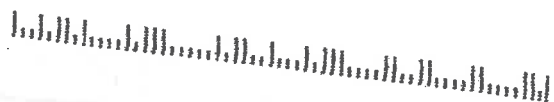
09/11/2008

Mailed From 29204

US POSTAGE

Ms. Emma Forkner, Director
South Carolina Department of Health and
Human Services
Post Office Box 8206
Columbia, South Carolina 29202

29202*8206



Dr. Stanley Butkus, Director
Ms. Emma Forkner, Director

Page Two

September 9, 2008

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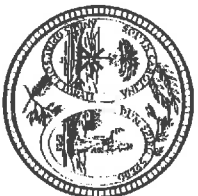
Very truly yours,

PROTECTION AND ADVOCACY FOR
PEOPLE WITH DISABILITIES, INC.

Anna Maria Darwin
Protection and Independence Team Leader/Attorney

Gloria Provost
Executive Director

AMD/JDS/sg



State of South Carolina
Department of Health and Human Services

Mark Sanford
Governor

October 7, 2008

Emma Forkner
Director

Anna Maria Darwin
Protection and Independence Team Leader/Attorney
545 N. Pleasantburg Drive, Suite 106
Greenville, SC 29607

Gloria M. Prevost
Executive Director
3710 Landmark Drive, Suite 208
Columbia, South Carolina 29204

Dear Ms. Darwin and Ms. Prevost:

On October 1, 2008, the South Carolina Department of Health and Human Services submitted the Community Supports Waiver to the Centers for Medicare and Medicaid Services (CMS). We appreciate your attendance at the public meeting for this waiver and your follow-up questions. Responses to your questions follow:

1. As a preliminary matter, the public was not given sufficient time or information to provide comprehensive input regarding this waiver. From the date the information was presented to us, we had one week to provide input. We were also forced to provide this input without an opportunity to view the waiver application document. Will there be an opportunity to submit additional input once the waiver application document is completed and available for review?

Response: Yes, there will be opportunity for you to provide input after the document is presented. The waiver document was posted on DHHS websites October 2, the day following its submission. There was an accelerated timeframe for the development of this waiver, based upon guidance we received from CMS relative to our pending Medicaid State Plan Amendment for Rehabilitative Behavioral Health Services. The driving force behind this waiver being done is the necessity to transition those persons receiving a rehabilitative service, but their needs are habilitative in nature.

Our intent for the public meeting and request for input was on the design of the program. We believe through the information presented concerning the eligibility criteria, numbers of persons to be served, target group, service package, and application process, that sufficient information was given for meaningful comments.

log #140

Ms. Anna Maria Darwin
Ms. Gloria M. Prevost
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2. People who currently use Rehabilitation services can access Family Support Funds to cover the cost of dental and vision services. They will no longer be able to use these funds once enrolled on the waiver. Therefore, Dental and Vision services should be covered services on the waiver. Expecting individuals with limited incomes to pay out of pocket for dental and vision services expenses is unrealistic.

Response: Expanded State Plan dental and vision services are currently only available through the MR/RD and HASCI waivers. All other waiver recipients and Medicaid beneficiaries do not have coverage for such expanded services. In our most recent data vision services account for only .01% of the service expenditures in the MR/RD waiver, and dental accounts for .2%.

Serious consideration was given to the inclusion of the services. There was much discussion with the family members in our waiver development advisory work group about this. Based on funds available, it was decided that these services would not be included. The option still exists for persons to apply for the MR/RD waiver if their needs are extensive.

Lastly, emergency dental services are covered for all Medicaid recipients.

3. What percentage of the 1900 individuals currently receiving Rehabilitation services are expected to meet Level of Care and Financial Eligibility criteria for the new waiver? Will all of the individuals who do not meet the criteria be able to continue receiving services through State funding?

Response: Until individuals are assessed and determined to meet level of care it is unknown how many will meet the criteria. However, it is projected a large percentage will likely meet the criteria. Currently the 1900 individuals receiving rehabilitation services meet Medicaid financial eligibility requirements. As stated at the public meeting, all individuals who may not meet LOC requirements would be eligible to continue receiving their support services through all state funding.

4. What questions will be asked of potential waiver applicants to help them determine which waiver is most appropriate for their needs?

Response: It is expected that the service packages and consumer direction option will be key factors in determining which waiver a person may choose. Additionally, the waiting list of the waiver may be a consideration. Information will be provided to persons to allow them to make this choice.

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5. Will current MR/RD waiver participants receive complete disclosure about any negative impact that switching to the new waiver may have on their services?

Response: Waiver participants, applicants and appropriate RP's will be provided waiver package information and they will be provided the opportunity to make a choice.

6. If MR/RD waiver participants choose to move to the new waiver, will the number of people served on the MR/RD waiver remain constant and those on the MR/RD waiting list be able to move onto the waiver, or is this new waiver an effort to reduce the number of people served on the MR/RD waiver?

Response: As stated previously, the major reason for this waiver is to provide services to the 1900 persons who need to convert from the Medicaid State Plan service. If a person chooses to move from the MR/RD waiver to the Community Supports Waiver, his/her funding will flow to the CS waiver and that slot will not be refilled. It is unknown how many individuals will actually choose to transfer, but DDSN has allotted 400 slots to allow those that want to the opportunity to do so. There is no intent to reduce the capacity in the MR/RD waiver.

7. How many slots will be reserved on the MR/RD waiver for those on the new waiver whose needs may increase to exceed the \$10,950 cap?

Response: There are no slots "reserved" in the MR/RD waiver. It will be a waiting list policy change to allow for individuals in the Community Supports waiver to transition to the MR/RD waiver if their needs require a higher level of service.

If there are any questions, please contact Sam Waldrep at (803) 898-2725.

Sincerely,



Emma Forkner
Director

EF/wsmnd