

DEPARTMENT OF HEALTH AND HUMAN SERVICES  
OFFICE OF DIRECTOR

**ACTION REFERRAL**

TO <i>Waldrop</i>	DATE <i>1-2-13</i>
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DIRECTOR'S USE ONLY	ACTION REQUESTED
1. LOG NUMBER <i>100202</i>	<input type="checkbox"/> I Prepare reply for the Director's signature DATE DUE _____
2. DATE SIGNED BY DIRECTOR <i>Cc: Mr. Heck, COS, Dept, CMS file</i>	<input type="checkbox"/> I Prepare reply for appropriate signature DATE DUE _____ <input type="checkbox"/> I FOIA DATE DUE _____
	<input checked="" type="checkbox"/> Necessary Action

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.			

DEPARTMENT OF HEALTH & HUMAN SERVICES  
Centers for Medicare & Medicaid Services  
Atlanta Regional Office  
61 Forsyth St, Suite 4T20  
Atlanta, Georgia 30303-8909



**Division of Medicaid & Children's Health Operations**

December 26, 2012

**RECEIVED**

Mr. Anthony E. Keck, Director  
SC Health and Human Services  
PO Box 8206  
Columbia, South Carolina 29205

JAN 02 2013

Department of Health & Human Services  
OFFICE OF THE DIRECTOR

Dear Mr. Keck:

Your request to renew South Carolina's Community Supports Home and Community-Based Waiver Service for individuals with intellectual disabilities and related conditions, as authorized under section 1915(c) of the Social Security Act has been approved. This renewal application has been assigned control number SC 0676.R01, which should be used in future correspondence. The waiver renewal request is effective July 1, 2012 through June 30, 2017. The temporary extensions for this waiver will be subsumed into waiver year one.

Specifically, you submitted a renewal request to provide services to participants who meet ICF/MR level of care to delay and/or avoid institutionalization. Services include adult day health care services; personal care services; respite care services; incontinence supplies; adult day health care – nursing; adult day health care- transportation; assistive technology and appliances; behavior support services; career preparation services; community services; day activity; employment services; environmental modifications; in-home support services; personal emergency response services; private vehicle modifications; and support center services.

The following estimates of utilization and cost of waiver services have been approved:

	Unduplicated Recipients	Community Costs	Institutional Costs	Total Waiver Costs
Year 1 (07/01/12 – 06/30/13)	3300	\$ 8,153	\$ 111,700	\$ 26,094,900
Year 2 (07/01/13 – 06/30/14)	3630	\$ 8,847	\$ 115,051	\$ 32,114,610
Year 3 (07/01/14 – 06/30/15)	4000	\$ 9,831	\$ 118,503	\$ 39,324,000
Year 4 (07/01/15 – 06/30/16)	4400	\$ 10,628	\$ 122,058	\$ 46,763,200
Year 5 (07/01/16 – 06/30/17)	4840	\$ 10,724	\$ 125,720	\$ 51,904,160

We appreciate the effort and cooperation provided by your staff during our review of this renewal request. If you have any questions, please feel free to contact Kenni Howard at (404) 562-7413.

Sincerely,

A handwritten signature in black ink, appearing to read "Jackie Glaze".

Jackie Glaze  
Associate Regional Administrator  
Division of Medicaid & Children's Health Operations

**cc: Michele MacKenzie, Central Office**

DEPARTMENT OF HEALTH & HUMAN SERVICES  
Centers for Medicare & Medicaid Services  
Atlanta Regional Office  
61 Forsyth St., Suite 4120  
Atlanta, Georgia 30303-8909



**Division of Medicaid & Children's Health Operations**

December 28, 2012

Mr. Anthony E. Keck, Director  
SC Health and Human Services  
PO Box 8206  
Columbia, South Carolina 29205

**RECEIVED**

JAN 04 2013

Department of Health & Human Services  
**OFFICE OF THE DIRECTOR**

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Sincerely,

Jackie Glaze

Associate Regional Administrator  
Division of Medicaid & Children's Health Operations

cc: Michele Mackenzie, Central Office

DEPARTMENT OF HEALTH & HUMAN SERVICES  
Centers for Medicare & Medicaid Services  
Atlanta Regional Office  
61 Forsyth St., Suite 4T20  
Atlanta, Georgia 30303-8909



**Division of Medicaid & Children's Health Operations**

January 4, 2013

Mr. Anthony E. Keck, Director  
SC Health and Human Services  
PO Box 8206  
Columbia, South Carolina 29205

*Ref Log # 202*  
*\* Please see correction below*

Dear Mr. Keck:

*cc: Mr. Keck, COS, Depts, CMS file*

Please accept this revised approval letter for South Carolina's Community Supports Home and Community-Based Waiver for individuals with intellectual disabilities and related conditions, as authorized under section 1915(c) of the Social Security Act. This renewal application has been assigned control number SC 0676.R01, which should be used in future correspondence. The waiver renewal was approved on December 28, 2012 with effective dates of July 1, 2012 through June 30, 2017. The temporary extensions for this waiver will be subsumed into waiver year one. **The correction is in bold text and underlined below.**

Specifically, you submitted a renewal request to provide services to participants who meet ICF/MR level of care to delay and/or avoid institutionalization. Services include adult day health care services; personal care services; respite care services; incontinence supplies; adult day health care – nursing; adult day health care- transportation; assistive technology and appliances; behavior support services; adult preparation services; community services; day activity; employment services; environmental modifications; in-home support services; personal emergency response services; private vehicle modifications; and support center services.

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Sincerely,

*Jackie Glaze*

Jackie Glaze

Associate Regional Administrator

Division of Medicaid & Children's Health Operations

cc: Michele MacKenzie, Central Office