

**DEPARTMENT OF HEALTH AND HUMAN SERVICES
OFFICE OF DIRECTOR**

ACTION REFERRAL

TO <i>Myers</i>	DATE <i>10-24-08</i>
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DIRECTOR'S USE ONLY	ACTION REQUESTED
1. LOG NUMBER J00223	<input type="checkbox"/> Prepare reply for the Director's signature DATE DUE _____
2. DATE SIGNED BY DIRECTOR <i>cc: Ms. Forster Clean & 10/30/08, letter attached</i>	<input checked="" type="checkbox"/> Prepare reply for appropriate signature DATE DUE <i>11-4-08</i> DATE DUE _____ <input 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
61 Forsyth Street, SW, Suite 4T20
Atlanta, Georgia 30303-8909



October 22, 2008

RECEIVED

OCT 24 2008

Emma Forkner, Director
South Carolina Department of Health and Human Services
P.O. Box 8206
Columbia, South Carolina 29202-8206

Department of Health & Human Services
OFFICE OF THE DIRECTOR

RE: Informal Request for Additional Information

Dear Ms. Forkner:

This is in response to your request to amend South Carolina's Home and Community Based Waiver for Persons with Mental Retardation and Related Disabilities. This request has been assigned control number SC 0237.RR03.05. This number should be used in all correspondence pertaining to the amendment. We are requesting that you respond to this **informal** request for additional information. Please provide clarification necessary to respond to the following concerns:

C-1/C-3 Service Specification: Adult Attendant Care Services;

A. The state indicated no License or certification required, and no minimum qualifications specified.

C-1/C-3 Service Specification: Career Preparation;

A. If on-site attendance at the licensed facility is not required, please explain how the State will be assured that services are rendered to the waiver recipient. In addition, what mechanisms are in place to prevent duplicative billing.

B. Will transportation service be provided to waiver participants on a one-way or round-trip basis? If transportation is provided one-way, please explain the rationale. Also, who will provide transportation for the other half of the trip?

C-1/C-3 Service Specification: Day Activity;

A. Typically, Day Activity services focus on enabling the participant to attain or maintain his/her maximum functional level and shall be coordinated with any physical, occupational, or speech therapies in the service plan. Is this how you envision this service?

B. If on-site attendance at the licensed facility is not required, please explain how the State will be assured that services are rendered to the waiver recipient. In addition, what mechanisms are in place to prevent duplicative billing.

C. Please distinguish the difference between Day Activity Services and Support Center Services.

D. Will transportation service be provided to waiver participants on a one-way or round-trip basis? If transportation is provided one-way, please explain the rationale. Who will provide transportation for the other half of the trip?

C-1/C-3 Service Specification: Community Services;

A. If on-site attendance at the licensed facility is not required, please explain how the State will be assured that services are rendered to the waiver recipient. In addition, what mechanisms are in place to prevent duplicative billing.

B. Will the transportation component of this service be offered as non-medical transportation? If so, there must be mechanisms in place to prevent duplicative billing.

C. Will transportation service be provided to waiver participants on a one-way or round-trip basis? If transportation is provided one-way, please explain the rationale. Who will provide transportation for the other half of the trip?

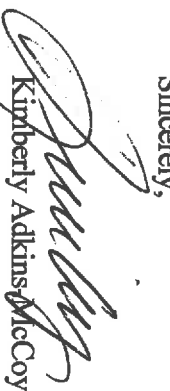
C-1/C-3 Service Specification: Support Center

A. Please distinguish the difference between Support Center Services and Day Activity Services.

B. Will transportation service be provided to waiver participants on a one-way or round-trip basis? If transportation is provided one-way, please explain the rationale. Who will provide transportation for the other half of the trip?

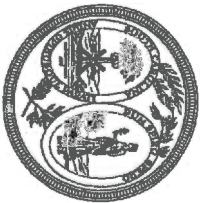
Please respond to this request no later than November 14, 2008, so that a second review can be completed timely. If you need assistance, please do not hesitate to contact me at (404) 562-7159.

Sincerely,



Kimberly Adkins-McCoy
Health Insurance Specialist
Medicaid & SCHIP Policy Branch





State of South Carolina
Department of Health and Human Services

Mark Sanford
Governor

Emma Forkner
Director

October 30, 2008

Kimberly Adkins-McCoy
Division of Medicaid and SCHIP Policy Branch
Centers for Medicare and Medicaid Services
61 Forsyth Street, Suite 4T20
Atlanta, GA 30303-8909

RE: State Response to Informal RAI

Dear Ms. Adkins-McCoy:

The State of South Carolina is submitting the enclosed information as a response to the CMS request for additional information regarding the recent technical amendment to our Mental Retardation/Related Disabilities Waiver (CMS Control # 0237.R03.05). Your original correspondence and the State Response is incorporated below.

C-1/C-3 Service Specification: Adult Attendant Care Services;

A. The state indicated no License or certification required, and no minimum qualifications specified.

The State Response: The State added the Adult Attendant Care service in October 2005. The minimum qualifications are referenced in the Appendix B-2 chart and listed specifically on Attachment 7, page 24A of the waiver document.

C-1/C-3 Service Specification: Career Preparation;

A. If on-site attendance at the licensed facility is not required, please explain how the State will be assured that services are rendered to the waiver recipient. In addition, what mechanisms are in place to prevent duplicative billing.

The State Response: The State will assure that services are rendered to the recipient even when the service is not provided within the licensed facility, through documentation of the implementation of the recipient's plan and monitoring of the delivery and effectiveness of the service. Additionally, the state's method for gathering information about services rendered will prohibit duplicative billing.

B. Will transportation service be provided to waiver participants on a one-way or round-trip basis? If transportation is provided one-way, please explain the rationale. Also, who will provide transportation for the other half of the trip?

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The State Response: The state is proposing to add Career Preparation, Day Activity, Community Support, and Support Center to the waiver in order to transition current waiver participants from Day Habilitation and Prevocational services currently available. Day Habilitation and Prevocational services are currently provided through a unit that is equal to a day of service. The added services (Career Preparation, Day Activity, Community Support, and Support Center) will be provided at a unit rate that is equal to a ½ day of service. Currently all participants have been determined to need a full day of service, therefore, the state believes that those participants will continue to need the full day which will equal two units of service. With each of the two units of service the participant will receive one-way transportation; this will provide them with round-trip transportation. Should a participant choose to receive only one unit of service per day, non-Medicaid funded transportation arrangements would have to be made and included in the Service Plan.

C-1/C-3 Service Specification: Day Activity;

A. Typically, Day Activity services focus on enabling the participant to attain or maintain his/her maximum functional level and shall be coordinated with any physical, occupational, or speech therapies in the service plan. Is this how you envision this service?

The State Response: We envision this service will focus on enabling the participant to attain or maintain his/her maximum functional level and as appropriate, recommendations from therapists would be conducted, and/or strengthened and reinforced through the activities provided.

B. If on-site attendance at the licensed facility is not required, please explain how the State will be assured that services are rendered to the waiver recipient. In addition, what mechanisms are in place to prevent duplicative billing.

The State Response: The State will assure that services are rendered to the recipient even when the service is not provided within the licensed facility through documentation of the implementation of the recipient's plan and monitoring of the delivery and effectiveness of the service. Additionally, the state's method for gathering information about services rendered will prohibit duplicative billing.

C. Please distinguish the difference between Day Activity Services and Support Center Services.

The State Response: The intent of Day Activity is to provide interventions that will increase the person's ability to function with greater independence, to provide interventions that will enable the person to maintain skills/functional abilities, or to provide interventions to slow down the person's loss of skills/functional abilities. The intent of Support Center services is to provide supervision to those who are unable to supervise themselves and to offer assistance as needed while supervision is being provided.

D. Will transportation service be provided to waiver participants on a one-way or round-trip basis? If transportation is provided one-way, please explain the rationale. Who will provide transportation for the other half of the trip?

The State Response: The state is proposing to add Career Preparation, Day Activity, Community Support, and Support Center to the waiver in order to transition current waiver participants from Day Habilitation and Prevocational services currently available. Day Habilitation and Prevocational services are currently provided through a unit that is equal to

a day of service. The added services (Career Preparation, Day Activity, Community Support, and Support Center) will be provided at a unit rate that is equal to a ½ day of service. Currently all participants have been determined to need a full day of service, therefore, the state believes that those participants will continue to need the full day which will equal two units of service. With each of the two units of service the participant will receive one-way transportation; this will provide them with round-trip transportation. Should a participant choose to receive only one unit of service per day, non-Medicaid funded transportation arrangements would have to be made and included in the Service Plan.

C-1/C-3 Service Specification: Community Services;

A. If on-site attendance at the licensed facility is not required, please explain how the State will be assured that services are rendered to the waiver recipient. In addition, what mechanisms are in place to prevent duplicative billing.

The State Response: The State will assure that services are rendered to the recipient even when the service is not provided within the licensed facility through documentation of the implementation of the recipient's plan and monitoring of the delivery and effectiveness of the service. Additionally, the state's method for gathering information about services rendered will prohibit duplicative billing.

B. Will the transportation component of this service be offered as non-medical transportation? If so, there must be mechanisms in place to prevent duplicative billing.

The State Response: Non-medical transportation is not a component of this service.

C. Will transportation service be provided to waiver participants on a one-way or round-trip basis? If transportation is provided one-way, please explain the rationale. Who will provide transportation for the other half of the trip?

The State Response: The state is proposing to add Career Preparation, Day Activity, Community Support, and Support Center to the waiver in order to transition current waiver participants from Day Habilitation and Prevocational services currently available. Day Habilitation and Prevocational services are currently provided through a unit that is equal to a day of service. The added services (Career Preparation, Day Activity, Community Support, and Support Center) will be provided at a unit rate that is equal to a ½ day of service. Currently all participants have been determined to need a full day of service, therefore, the state believes that those participants will continue to need the full day which will equal two units of service. With each of the two units of service the participant will receive one-way transportation; this will provide them with round-trip transportation. Should a participant choose to receive only one unit of service per day, non-Medicaid funded transportation arrangements would have to be made and included in the Service Plan.

C-1/C-3 Service Specification: Support Center

A. Please distinguish the difference between Support Center Services and Day Activity Services.

The State Response: The intent of Day Activity is to provide interventions that will increase the person's ability to function with greater independence, to provide interventions that will enable the person to maintain skills/functional abilities, or to provide interventions to slow down the person's loss of skills/functional abilities. The intent of Support Center services is to provide supervision to those who are unable to supervise themselves and to offer

assistance as needed while supervision is being provided.

B. Will transportation service be provided to waiver participants on a one-way or round-trip basis? If transportation is provided one-way, please explain the rationale. Who will provide transportation for the other half of the trip?

The State Response: *The state is proposing to add Career Preparation, Day Activity, Community Support, and Support Center to the waiver in order to transition current waiver participants from Day Habilitation and Prevocational services currently available. Day Habilitation and Prevocational services are currently provided through a unit that is equal to a day of service. The added services (Career Preparation, Day Activity, Community Support, and Support Center) will be provided at a unit rate that is equal to a ½ day of service. Currently all participants have been determined to need a full day of service, therefore, the state believes that those participants will continue to need the full day which will equal two units of service. With each of the two units of service the participant will receive one-way transportation; this will provide them with round-trip transportation. Should a participant choose to receive only one unit of service per day, non-Medicaid funded transportation arrangements would have to be made and included in the Service Plan.*

We believe this information provides the CMS requested clarification. The State continues to seek an amendment effective date of January 1, 2009. If you have any questions, please contact Kara Lewis in the Division of Community Long Term Care at (803) 898-2590. We look forward to hearing from you.

Sincerely,

Kara Wagoner Lewis
Community Long Term Care