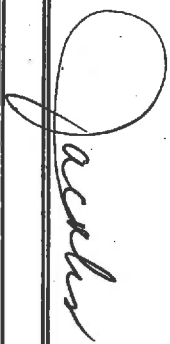
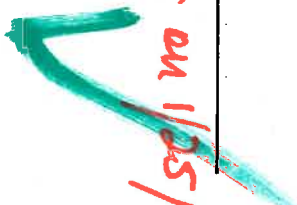


**DEPARTMENT OF HEALTH AND HUMAN SERVICES
OFFICE OF DIRECTOR**

ACTION REFERRAL

TO 	DATE 1-24-08
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DIRECTOR'S USE ONLY	ACTION REQUESTED
1. LOC NUMBER 000388	<input type="checkbox"/> Prepare reply for the Director's signature DATE DUE _____
2. DATE SIGNED BY DIRECTOR	<input checked="" type="checkbox"/> Prepare reply for appropriate signature DATE DUE 2/4/08
<p><i>Close per A. Jacobs on 1/25/08</i></p> <p><i>See attached note.</i></p> <p></p> <p><input type="checkbox"/> FOIA DATE DUE _____</p> <p><input type="checkbox"/> Necessary Action</p>	

APPROVALS (Only when prepared for director's signature)	APPROVE	* DISAPPROVE (Note reason for disapproval and return to preparer.)	COMMENT
1.			
2.			
3.			
4.			

Log: Jacobs.

From: "Melanie Bella" <mbella@chcs.org>
To: "Melanie Bella" <mbella@chcs.org>
Date: 1/22/2008 11:24:24 AM
Subject: CHCS State SNP Survey 2008

Dear Medicaid Director:

In December 2006, the Center for Health Care Strategies (CHCS) surveyed state Medicaid agencies in order to better understand the extent to which states were working with Medicare Advantage Special Needs Plans (SNPs) to integrate care for dual eligibles, or had an interest in doing so in the future. The information gathered through that survey helped to educate both CHCS and the Centers for Medicare and Medicaid Services (CMS) by providing valuable information regarding state interest that led to the development of tools and other resources designed to assist states integrate care for dual eligibles.

Given the growing emphasis placed on relationships between states and SNPs, CHCS is again reaching out to the states to explore the types of relationships you currently have with SNPs, or may be willing to pursue in the future. This information will be instrumental as CHCS develops future technical assistance tools and strategies in this area. We would appreciate it if you would fill out the attached eight (8) question survey by February 8th.

Thank you for your time and assistance.

Sincerely,

Melanie Bella

State Interest in Medicare Advantage Special Needs Plans (SNPs)

In December 2006, the Center for Health Care Strategies (CHCS) surveyed state Medicaid agencies in order to better understand the extent to which states were working with Medicare Advantage Special Needs Plans (SNPs), or had an interest in doing so in the future. The information gathered through that survey helped to educate both CHCS and the Centers for Medicare and Medicaid Services (CMS) by providing valuable information regarding state interest that led to the development of tools and other resources designed to assist states integrate care for dual eligibles.¹ Over the last year, there has been a tremendous growth in the interest in the potential of state/SNP relationships to integrate and improve care for those dually eligible for Medicare and Medicaid. This interest was first evident in the request for information regarding state relationships in the 2008 SNP application,² and most recently in MedPAC's draft recommendation to Congress that would require SNPs to contract with states within three years to coordinate Medicaid services for dual eligibles.³ The recent emphasis on state/SNP relationships has prompted CHCS to develop the following eight (8) question survey, designed to explore the types of relationships states currently have with SNPs, or may be willing to pursue in the future. Please return the completed survey to [Lindsay Palmer at lpalmer@chcs.org](mailto:lpalmer@chcs.org) by **February 8th**.

1. What is your State?
2. Does your State CURRENTLY contract with or otherwise interact with SNPs?

If yes, please describe the following: (1) the relationship your state has with SNPs (e.g. contractual, letter of agreement/MOU, data sharing agreement, etc); (2) what benefits are included in the relationship (Medicaid acute, Medicaid long-term care, Medicare cost-sharing only); and (3) the financial arrangement (capitation, fee-for-service).

¹ For more information, please see: http://www.chcs.org/publications3960/publications_show.htm?doc_id=606732 and <http://www.cms.hhs.gov/IntegratedCareInt/>

² The 2008 MA-SNP application asked applicants to “identify any contracts between the applicant and the State to provide Medicaid services to the dual eligible population.” For those with contracts, the application further asked the applicant to “describe how the applicant will coordinate Medicare and Medicaid services for the targeted dual eligible population.” For those without State contracts, applicants were asked “whether the applicant intends to work with the State Medicaid agency to assist dual eligible beneficiaries with accessing Medicaid benefits and with coordination of Medicare and Medicaid covered services” and if so, how.

In its fourth draft recommendation pertaining to SNPs, MedPAC suggests that Congress “require dual-eligible special needs plans within three years to contract, either directly or indirectly, with states in their service areas to coordinate Medicaid benefits.” See http://www.chcs.org/usr_doc/Future_Integrated_Care_Podulka.pdf for more information.

3. If your State does not currently contract or otherwise interact with SNPs, does it have plans to do so in the future?

_____ Yes, beginning later in 2008

_____ Yes, beginning in 2009

_____ The State is considering it, but has not made a decision.

_____ The State might consider it, but needs additional information.

_____ No

4. If your State does have plans to contract or otherwise interact with SNPs in 2008 or 2009, please describe the following: (1) the relationship your state has with SNPs (e.g. contractual, letter of agreement/MOU, data sharing agreement, etc); (2) what Medicaid benefits are included in the relationship (acute, long-term care, wraparound); and (3) the financial arrangement (capitation, fee-for-service, Medicare cost-sharing only).

5. If your State currently contracts or interacts with SNPs in 2008 or plans to do so in 2009, are all duals included in the relationship or does your State contract for only a subset of duals? (For example, a state might contract with a SNP to provide services for beneficiaries age 18-64 who meet the disability eligibility category only or for beneficiaries who are nursing home certifiable only.)

_____ All duals

_____ Subset of Duals (Please describe below)

6. To enter into a contract or other relationship with a SNP, does your State require approval from the state legislature?

_____ Yes, approval from the state legislature is required for our State to enter into a contract or other relationship with a SNP.

_____ No, approval from the state legislature is not necessary to enter into a contract or other relationship with a SNP.

_____ Other approval is required. (Please explain below.)

7. If your State does not have any plans to contract or interact with SNPs in 2008 or 2009, or is undecided, what is (are) the reason(s)? PLEASE SELECT ALL THAT APPLY

_____ Dual eligibles are excluded from Medicaid managed care under State law.

_____ There is too much political resistance to managed care.

_____ There are not many SNPs in the State.

_____ There are not many dual eligibles enrolled in SNPs.

_____ It's not clear what the benefits would be to the State.

_____ I don't know if there are any SNPs in the State.

_____ Other. Please specify

8. Would you be interested in participating on a brief call with CHCS to discuss opportunities for technical assistance in this area?

_____ Yes, the contact person for our state is: (Indicate name, email, and phone number)

_____ Not at this time.

DEPARTMENT OF HEALTH AND HUMAN SERVICES
OFFICE OF DIRECTOR

Close

ACTION REFERRAL

TO <i>Jacobs</i>	DATE <i>1-24-08</i>
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DIRECTOR'S USE ONLY	ACTION REQUESTED
1. LOG NUMBER <i>000388</i>	<input type="checkbox"/> Prepare reply for the Director's signature DATE DUE _____
2. DATE SIGNED BY DIRECTOR _____	<input checked="" type="checkbox"/> Prepare reply for appropriate signature DATE DUE <i>2/4/08</i>
	<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
<i>[Signature]</i>			
<i>[Signature]</i>			
<i>[Signature]</i>			

From: "Melanie Bella" <mbella@chcs.org>
To: "Melanie Bella" <mbella@chcs.org>
Date: 1/22/2008 11:24:24 AM
Subject: CHCS State SNP Survey 2008

Dear Medicaid Director:

Log: Jacobs.

?

In December 2006, the Center for Health Care Strategies (CHCS) surveyed state Medicaid agencies in order to better understand the extent to which states were working with Medicare Advantage Special Needs Plans (SNPs) to integrate care for dual eligibles, or had an interest in doing so in the future. The information gathered through that survey helped to educate both CHCS and the Centers for Medicare and Medicaid Services (CMS) by providing valuable information regarding state interest that led to the development of tools and other resources designed to assist states integrate care for dual eligibles.

Given the growing emphasis placed on relationships between states and SNPs, CHCS is again reaching out to the states to explore the types of relationships you currently have with SNPs, or may be willing to pursue in the future. This information will be instrumental as CHCS develops future technical assistance tools and strategies in this area. We would appreciate it if you would fill out the attached eight (8) question survey by February 8th.

Thank you for your time and assistance.

Sincerely,

Melanie Bella

CHCS Center for Health Care Strategies, Inc.

State Interest in Medicare Advantage Special Needs Plans (SNPs)

In December 2006, the Center for Health Care Strategies (CHCS) surveyed state Medicaid agencies in order to better understand the extent to which states were working with Medicare Advantage Special Needs Plans (SNPs), or had an interest in doing so in the future. The information gathered through that survey helped to educate both CHCS and the Centers for Medicare and Medicaid Services (CMS) by providing valuable information regarding state interest that led to the development of tools and other resources designed to assist states integrate care for dual eligibles.¹ Over the last year, there has been a tremendous growth in the interest in the potential of state/SNP relationships to integrate care for those dually eligible for Medicare and Medicaid. The Centers for Medicare and Medicaid Services drafted recommendation to Congress that would require states to coordinate Medicare services for dual eligibles.² The recommendation prompted CHCS to develop the following eight (8) questions to explore state/SNP relationships states currently have with SNPs, or may have in the future. The survey was completed survey to Lindsay Palmer at lpalmer@chcs.org.

1. What is your State?

2. Does your State CURRENTLY contract with or
- ☒ Yes
- ☐ No

If yes, please describe the following: (1) the relationship your state has with SNPs (e.g. contractual, letter of agreement/MOU, data sharing agreement, etc); (2) what benefits are included in the relationship (Medicaid acute, Medicaid long-term care, Medicare cost-sharing only); and (3) the financial arrangement (capitation, fee-for-service).

¹ For more information, please see: http://www.chcs.org/publications3960/publications_show.htm?doc_id=606732 and <http://www.cms.hhs.gov/IntegratedCareInt/>

² The 2008 MA-SNP application asked applicants to "identify any contracts between the applicant and the State to provide Medicaid services to the dual eligible population." For those with contracts, the application further asked the applicant to "describe how the applicant will coordinate Medicare and Medicaid services for the targeted dual eligible population." For those without State contracts, applicants were asked "whether the applicant intends to work with the State Medicaid agency to assist dual eligible beneficiaries with accessing Medicaid benefits and with coordination of Medicare and Medicaid covered services" and if so, how.

³ In its fourth draft recommendation pertaining to SNPs, MedPAC suggests that Congress "require dual-eligible special needs plans within three years to contract, either directly or indirectly, with states in their service areas to coordinate Medicaid benefits." See http://www.chcs.org/ust_doc/Future_Integrated_Care_Podulka.pdf for more information.

1 - South Carolina
2 - ND

3. If your State does not currently contract or otherwise interact with SNPs, does it have plans to do so in the future?

_____ Yes, beginning later in 2008

_____ Yes, beginning in 2009

_____ The State is considering it, but has not made a decision

_____ The State might consider it, but needs additional information

_____ No

4. If your State does have plans to contract or otherwise interact with SNPs, please describe the following: (1) the relationship your state has with SNPs (e.g., capitated agreement/MOU, data sharing agreement, etc); (2) what Medicare services are covered in the relationship (acute, long-term care, wraparound); and (3) the financing arrangement (fee-for-service, Medicare cost-sharing only).

5. If your State currently contracts or interacts with SNPs in 2008 or plans to do so in 2009, are all SNPs included in the relationship or does your State contract for only a subset of SNPs? (For example, a state might contract with a SNP to provide services for beneficiaries age 18-64 who meet the disability eligibility category only or for beneficiaries who are nursing home certifiable only.)

_____ All SNPs

_____ Subset of SNPs (Please describe below)

6. To enter into a contract or other relationship with a SNP, does your State require approval from the state legislature?

_____ Yes, approval from the state legislature is required for our State to enter into a contract or other relationship with a SNP.

_____ No, approval from the state legislature is not necessary to enter into a contract or other relationship with a SNP.

_____ Other approval is required. (Please explain below.)

3. NO
10. NO

7. If your State does not have any plans to contract or interact with SNPs in 2008 or 2009, or is undecided, what is (are) the reason(s)? PLEASE SELECT ALL THAT APPLY

_____ Dual eligibles are excluded from Medicaid managed care under State law.

_____ There is too much political resistance to managed care.

_____ There are not many SNPs in the State.

_____ There are not many dual eligibles enrolled in SNPs.

_____ It's not clear what the benefits would be to the State.

_____ I don't know if there are any SNPs in the State.

_____ Other. Please specify

8. Would you be interested in participating on a brief call with CHCS to discuss opportunities for technical assistance in this area?

_____ Yes, the contact person for our state is: (Indicate name, email, and phone number)

_____ Not at this time.

8. DOT

9. Other
Dual eligibles
are excluded
from Medicaid
managed care
under state
Medicaid policy

State Interest in Medicare Advantage Special Needs Plans (SNPs)

In December 2006, the Center for Health Care Strategies (CHCS) surveyed state Medicaid agencies in order to better understand the extent to which states were working with Medicare Advantage Special Needs Plans (SNPs), or had an interest in doing so in the future. The information gathered through that survey helped to educate both CHCS and the Centers for Medicare and Medicaid Services (CMS) by providing valuable information regarding state interest that led to the development of tools and other resources designed to assist states integrate care for dual eligibles.¹ Over the last year, there has been a tremendous growth in the interest in the potential of state/SNP relationships to integrate and improve care for those dually eligible for Medicare and Medicaid. This interest was first evident in the request for information regarding state relationships in the 2008 SNP application,² and most recently in MedPAC's draft recommendation to Congress that would require SNPs to contract with states within three years to coordinate Medicaid services for dual eligibles.³ The recent emphasis on state/SNP relationships has prompted CHCS to develop the following eight (8) question survey, designed to explore the types of relationships states currently have with SNPs, or may be willing to pursue in the future. Please return the completed survey to Lindsay Palmer at lpalmer@chcs.org by **February 8th**.

1. What is your State? South Carolina
2. Does your State CURRENTLY contract with or otherwise interact with SNPs?
_____ Yes
_____X_____ No

If yes, please describe the following: (1) the relationship your state has with SNPs (e.g. contractual, letter of agreement/MOU, data sharing agreement, etc); (2) what benefits are included in the relationship (Medicaid acute, Medicaid long-term care, Medicare cost-sharing only); and (3) the financial arrangement (capitation, fee-for-service).

¹ For more information, please see: http://www.chcs.org/publications3960/publications_show.htm?doc_id=606732 and <http://www.cms.hhs.gov/IntegratedCareInt/>

² The 2008 MA-SNP application asked applicants to "identify any contracts between the applicant and the State to provide Medicaid services to the dual eligible population." For those with contracts, the application further asked the applicant to "describe how the applicant will coordinate Medicare and Medicaid services for the targeted dual eligible population." For those without State contracts, applicants were asked "whether the applicant intends to work with the State Medicaid agency to assist dual eligible beneficiaries with accessing Medicaid benefits and with coordination of Medicare and Medicaid covered services" and if so, how.

³ In it fourth draft recommendation pertaining to SNPs, MedPAC suggests that Congress "require dual-eligible special needs plans within three years to contract, either directly or indirectly, with states in their service areas to coordinate Medicaid benefits." See http://www.chcs.org/usr_doc/Future_Integrated_Care_Podulka.pdf for more information.

3. If your State does not currently contract or otherwise interact with SNPs, does it have plans to do so in the future?

_____ Yes, beginning later in 2008

_____ Yes, beginning in 2009

_____ The State is considering it, but has not made a decision.

_____ The State might consider it, but needs additional information.

___X___ No

4. If your State does have plans to contract or otherwise interact with SNPs in 2008 or 2009, please describe the following: (1) the relationship your state has with SNPs (e.g. contractual, letter of agreement/MOU, data sharing agreement, etc); (2) what Medicaid benefits are included in the relationship (acute, long-term care, wraparound); and (3) the financial arrangement (capitation, fee-for-service, Medicare cost-sharing only).

5. If your State currently contracts or interacts with SNPs in 2008 or plans to do so in 2009, are all duals included in the relationship or does your State contract for only a subset of duals? (For example, a state might contract with a SNP to provide services for beneficiaries age 18-64 who meet the disability eligibility category only or for beneficiaries who are nursing home certifiable only.)

_____ All duals

_____ Subset of Duals (Please describe below)

6. To enter into a contract or other relationship with a SNP, does your State require approval from the state legislature?

_____ Yes, approval from the state legislature is required for our State to enter into a contract or other relationship with a SNP.

_____ No, approval from the state legislature is not necessary to enter into a contract or other relationship with a SNP.

_____ Other approval is required. (Please explain below.)

7. If your State does not have any plans to contract or interact with SNPs in 2008 or 2009, or is undecided, what is (are) the reason(s)? PLEASE SELECT ALL THAT APPLY

☐ Dual eligibles are excluded from Medicaid managed care under State law.

☐ There is too much political resistance to managed care.

☐ There are not many SNPs in the State.

☐ There are not many dual eligibles enrolled in SNPs.

☐ It's not clear what the benefits would be to the State.

☐ I don't know if there are any SNPs in the State.

☒ Other. Please specify. Dual eligibles are excluded from Medicaid managed care under our Medicaid policy and Procedure

8. Would you be interested in participating on a brief call with CHCS to discuss opportunities for technical assistance in this area?

☐ Yes, the contact person for our state is: (Indicate name, email, and phone number)

☒ Not at this time.

Alicia Jacobs, Deputy Director
Eligibility and Beneficiary Services
South Carolina Department of Health and Human Services
Columbia, South Carolina
803-898-2538