

DEPARTMENT OF HEALTH AND HUMAN SERVICES
OFFICE OF DIRECTOR

ACTION REFERRAL

TO <i>Liggett</i>	DATE <i>1-7-15</i>
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DIRECTOR'S USE ONLY	ACTION REQUESTED
1. LOG NUMBER <i>000158</i>	<input type="checkbox"/> Prepare reply for the Director's signature DATE DUE _____
2. DATE SIGNED BY DIRECTOR <i>cc: host, Depo, CMS file, Chario</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

December 22, 2014

Mr. Christian Soura
Director
South Carolina Department of Health and Human Services
1801 Main Street
Columbia, SC 29202

RECEIVED

JAN 07 2015

Department of Health & Human Services
OFFICE OF THE DIRECTOR

Dear Mr. Soura:

In response to the November 26, 2014 request from the South Carolina Department of Health and Human Services, the Centers for Medicare & Medicaid Services (CMS) is granting a 90 day temporary extension of South Carolina's Home and Community-Based Services waiver program for children with pervasive developmental disabilities, which is currently scheduled to expire December 31, 2014. The extension allows the Pervasive Developmental Disorder waiver, CMS control number 0456.R01, to continue operating through, March 31, 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 submit to CMS a waiver renewal application that comports with the public notice requirement at 42 CFR 441.304(f).

CMS will research all options with regard to Autism services being offered to children in this waiver as opposed to the state plan and provide guidance to the state.

If you need any assistance, feel free to contact Kenni Howard, Kenni.Howard@cms.hhs.gov or via telephone at (404) 562-7413; or Michele MacKenzie, Michele.MacKenzie@cms.hhs.gov or via telephone at (410) 786-5929.

Sincerely,

A handwritten signature in black ink, appearing to read "Barbara Coulter Edwards". The signature is fluid and cursive.

Barbara Coulter Edwards
Director

cc: Jackie Glaze