


DEPARTMENT OF HEALTH AND HUMAN SERVICES  
OFFICE OF DIRECTOR

ACTION REFERRAL

TO <i>Hess</i>	DATE <i>3-16-12</i>
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DIRECTOR'S USE ONLY	ACTION REQUESTED
1. LOG NUMBER  <i>.101372</i>	<input type="checkbox"/> Prepare reply for the Director's signature DATE DUE _____
2. DATE SIGNED BY DIRECTOR  <i>CC: Mr. Beck, Deps CMS file,</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

Center for Medicaid, CHIP and Survey Certification  
Financial Management Group  
7500 Security Boulevard  
Baltimore, MD 21244

**RECEIVED**

Mr. Anthony E. Keck  
Executive Director  
Department of Health and Human Services  
P.O. Box 8206  
Columbia, SC 29202-8206

**MAR 16 2012**

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

**MAR 12 2012**

Dear Sir or Madam:  
**SUPPLEMENTAL**

The grant award listed below has been approved for supplemental federal funding for allowable Medicaid expenditures incurred by your State during the period 07/01/2011 - 09/30/2011 under Appropriation 75X0518 Centers for Medicare & Medicaid Services.

**HIT Incentive Payments**

**\$(69,399,414)**

The above listed grant award provides Federal funds for incentive payments made in accordance to your State plan approved under Title XIX of the Social Security Act (the Act) having adopted or meaningfully used certified electronic health record (EHR) technology. The amount of this grant award is authorized under the provisions of section 1903(a)(3) of the Act, as amended by section 4201 of the American Recovery and Reinvestment Act of 2009 (ARRA, Public Law 111-5, enacted on February 17, 2009), providing for Health Information Technology (HIT) Administration Recovery Act. The amount of this grant award is to issue incentive payments to providers who have qualified for EHR incentive payments.

Computation of this grant award is shown on the enclosed statement.

With the acceptance of this award you agree to be responsible for limiting the drawing of Federal funds so as to minimize Federal cash on hand in accordance with policies established in Treasury Circular 1075 (revised) and procedures established by the Department of Health and Human Services. You also agree to submit timely reports as required. Withdrawals of Federal funds are not to exceed the individual programmatic grant awards show above. You also are required to provide for effective control over the accountability for all Federal funds as stated in Office of Management and Budget Circular No. 1075 (revised). Failure to adhere to the above requirements may cause the unobligated portion of your letter-of-credit to be revoked. Part 92, Title 45, Code of Federal Regulations implements these circulars for this Department.

Any questions you may have in connection with this grant award should be referred to the appropriate Centers for Medicare & Medicaid Services Regional Office financial contact and/or the Regional Office HIT Lead for your State.

Payments under this award will be made by the Department of Health and Human Services, Payment Management System administered by the Division of Payment Management, Program Support Center. These payments will be made available under the subaccount "HIT-INCTPAY11". Inquiries regarding payment should be directed to:

Director, Division of Payment Management

Telephone Number 1-877-614-5533

Post Office Box 6021

Rockville, MD 20852-0605

Please transmit a copy of this grant award document to the State official authorized to request funds from the Division of Payment Management as well as to the staff who oversee the State's Medicaid EHR Incentive Program.

Sincerely yours,

Director,

Division of Financial Operations

Enclosures 5  
CMS-L151(7-90)

DEPARTMENT OF HEALTH AND HUMAN SERVICES  
CENTERS FOR MEDICARE & MEDICAID SERVICES

STATE: <u>South Carolina</u>				
FISCAL YEAR		<u>2012</u>		
QUARTER	<input type="checkbox"/> 1ST	<input checked="" type="checkbox"/> 2ND	<input type="checkbox"/> 3RD	<input type="checkbox"/> 4TH

COMPUTATION OF AMOUNTS FOR MEDICAL ASSISTANCE  
GRANTS UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

ADMINISTRATION  
INCENTIVE PAYMENTS  
HIT - ARRA Sec. 4201

1. ADJUSTMENTS FOR QUARTER  
ENDED SEPTEMBER 30, 2011

\$ 2,684,586

A. ACTUAL FEDERAL SHARE OF  
EXPENDITURES.....

2,684,586

B. ESTIMATED FEDERAL SHARE OF  
EXPENDITURES PREVIOUSLY FUNDED....

72,084,000

C. DIFFERENCE.....

(69,399,414)

D. NET ADJUSTMENTS APPLICABLE TO  
PRIOR PERIODS.....

A. 0

E. COLLECTIONS.....

0

F. OTHER.....

B. (69,399,414)

2. ESTIMATED FEDERAL SHARE OF  
EXPENDITURES FOR QUARTER  
BEGINNING JANUARY 1, 2012

C. \_\_\_\_\_

3. NET AMOUNT TO BE CERTIFIED.....

\$ (69,399,414)

TOTAL AMOUNT TO BE CERTIFIED.....

\$ D. (69,399,414)

DATE APPROVED MAY 12 2012

COMPUTATION PREPARED BY

Tina J.

INTERNAL TRANSMITTAL NO. HHC-12

COMPUTATION REVIEWED BY

mg



FOOTNOTES

STATE: South Carolina

QUARTER/FISCAL YEAR: SECOND / 2012

A.	<u>HIT INCT ADM</u>	
	-	INCREASING CLAIMS PRIOR TO
	-	INCREASING CLAIMS AFTER 12/31/2010
	<u>\$ -</u>	TOTAL INCREASING CLAIMS.
	-	DECREASING CLAIMS
	<u>\$ -</u>	NET ADJUSTMENT

MAR 12 2012

B. SEE ATTACHMENTS 1A

C. GRANT AWARD BASED ON THE ESTIMATE OF HIT INCENTIVE EXPENDITURES UNDER SECTION 1903(a)(3) OF THE SOCIAL SECURITY ACT AS AMENDED BY SECTION 4201 FOR THE SECOND QUARTER FISCAL YEAR 2012 WAS ISSUED January 1, 2012.

D. THE FUNDING AUTHORIZED BY THIS GRANT AWARD IS PAID SUBJECT TO ANY FUTURE FINANCIAL MANAGEMENT REVIEW OR AUDIT.

In accordance with section 4201 of ARRA, this grant represents the Federal funding provided for certain State expenditures to Medicaid providers to encourage the adoption and use of certified electronic health technology record (EHR) technology and associated Administrative costs. This grant award represents the Federal share portion of funds to be used for this purpose.

## MAR 1 2012

**SECOND / 2012**

CMS-64 Summary		2011	TOTAL
Line 6		\$ 2,684,586	2,684,586
Line 7			0
Line 8			0
Line 9			0
Line 10 A. & B.			0
Net Expenditures		\$ 2,684,586	\$ 2,684,586
Less:			
Waivers			
Net Map Expenditures		\$ 2,684,586	\$ 2,684,586
Adjustments			
Transfers			
Line 10b Adjustments			
Disallowances			
Subtotal		\$ 2,684,586	\$ 2,684,586
Interest on			
Disallowances			
Other			
Adjusted Funding		\$ 2,684,586	\$ 2,684,586
Less: Federal Advances		72,084,000	72,084,000
Total Funding		\$ (69,399,414)	\$ (69,399,414)

**FINALIZATION GRANT AWARD CHECK LIST FOR HIT INCENTIVE PAYMENTS**

Special Health Insurance Technology (HIT) (ARRA, Section 4201)

STATE: South Carolina

QUARTER/FISCAL YEAR SECOND / 2012

**VERIFY THE FOLLOWING ITEMS WHEN APPLICABLE.**

<sup>P</sup> <sup>R</sup>  
☒ RDR approved by RO supervisor. Approval Date: 12/19/11

**HIT Verification Sheet**

- ☒ Expenditure (HIT INCENTIVE) totals.
- ☒ Federal advances for HIT INCENTIVE.
- ☒ State name, fiscal year and the quarter.

**Accounting Sheet**

- ☒ EIN, CANs, DOCs and State code.
- ☒ HIT INCENTIVE totals agree with the amounts on HIT Verification Sheets.
- ☒ State name, quarter/fiscal year.

**Computation Sheet**

- ☒ State name, fiscal year and the quarter.
- ☒ Item #1 and #2 show correct quarters.
- ☒ HIT totals.
- ☒ Sign/Initial.

**Footnote Page**

- ☒ Each lettered item listed on the Computation Sheet is footnoted.
- ☒ State name and quarter/fiscal year.

**Grant Award Letter**

- ☒ State name, funding period and HIT amounts.
- ☒ HIT totals on the letter against the Estimate, Accounting and Computation Sheets.

GRANT AWARD PREPARED BY: Marc JL

DATE: 2.2.11

GRANT AWARD REVIEWED BY: MS

DATE: 2-8-12