

DEPARTMENT OF HEALTH AND HUMAN SERVICES  
OFFICE OF DIRECTOR

ACTION REFERRAL

TO	DATE
<i>Waterberg</i>	<i>4-10-12</i>

DIRECTOR'S USE ONLY	ACTION REQUESTED
1. LOG NUMBER  <i>1011396</i>	<input type="checkbox"/> Prepare reply for the Director's signature DATE DUE _____
2. DATE SIGNED BY DIRECTOR  <i>cc: M. Kyck, Depo, CMS file</i> <i>See attached e-mail.</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 52-14-26  
Baltimore, Maryland 21244-1850

Center for Medicaid and CHIP Services  
Disabled and Elderly Health Programs Group

*SKM*  
*N/A*  
**CMS**  
CENTERS for MEDICARE & MEDICAID SERVICES

March 27, 2012

**RECEIVED**

APR 10 2012

Mr. Anthony Keck  
Director  
South Carolina Department of Health and Human Services  
1801 Main Street  
Columbia, SC 29205

Department of Health & Human Services  
OFFICE OF THE DIRECTOR

Dear Mr. Keck:

In response to the March 19, 2012 request from the State of South Carolina, the Centers for Medicare & Medicaid Services (CMS) is granting a second temporary extension of South Carolina's Home and Community-Based Services (HCBS) Waiver program for medically complex children, which was scheduled to expire on December 31, 2011. This extension for a 60 day period allows the "Medically Complex Children Waiver," CMS control number SC.0675.00, to continue operating through May 30, 2012 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 provide additional time for State officials to work with CMS staff to resolve issues that have arisen during the waiver renewal review process, including clarification on the provision of incontinence supplies.

Thank you for your ongoing work with CMS staff during the process of revising and clarifying the waiver renewal application. If you need any assistance, feel free to contact Connie Martin in the CMS Atlanta Regional Office at (404) 562-7412 or Marge Sciuilli in my office at (410) 786-0691.

Sincerely,

*Barbara Coulter Edwards*  
Barbara Coulter Edwards  
Director

cc: Marge Sciuilli, CMS CO  
Connie Martin, CMS Atlanta RO

**Brenda James - Ref Log 396**

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**From:** Teeshla Curtis <CURTIST@scdhhs.gov>  
**To:** GEORGE MAKY <Maky@scdhhs.gov>, Jocelin T Dawson <DAWSONJ@scdhhs.gov>  
**Date:** 4/12/2012 4:45 PM  
**Subject:** Ref Log 396  
**CC:** SAM WALDREP <Waldrep@scdhhs.gov>, Brenda James <JAMESBR@scdhhs.gov>

Attached is Log 396 -- an approval for second temporary extension of MCC Waiver renewal (May 30, 2012).

*Teeshla Curtis*

Administrative Coordinator  
Office of Information Management  
South Carolina Department of Health and Human Services  
1801 Main Street  
Columbia, South Carolina 29202  
(803) 898-2502

DEPARTMENT OF HEALTH AND HUMAN SERVICES  
OFFICE OF DIRECTOR

ACTION REFERRAL

TO	DATE
Walsh	4-10-12

DIRECTOR'S USE ONLY		ACTION REQUESTED	
1. LOG NUMBER	101396	<input type="checkbox"/> Prepare reply for the Director's signature	DATE DUE _____
2. DATE SIGNED BY DIRECTOR	cc: Miktyek, Depa, CMS file	<input type="checkbox"/> Prepare reply for appropriate signature	DATE DUE _____
		<input type="checkbox"/> FOIA	DATE DUE _____
		<input checked="" type="checkbox"/> Necessary Action	

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Barbara Coulter Edwards  
Director

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Connie Martin, CMS Atlanta RO