

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

**ACTION REFERRAL**

TO <i>Waldrep</i>	DATE <i>7-20-12</i>
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DIRECTOR'S USE ONLY	ACTION REQUESTED
1. LOG NUMBER <i>001031</i>	<input type="checkbox"/> Prepare reply for the Director's signature DATE DUE _____
2. DATE SIGNED BY DIRECTOR <i>cc: Mr. Keck</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.			



**RECEIVED**

JUL 20 2012

Department of Health & Human Services  
OFFICE OF THE DIRECTOR

July, 12 2012

SC Department of Health and Human Services  
Attention: Anthony Keck  
P.O. Box 8206  
Columbia, SC 29202-8206

Medicaid Provider Number RTF-003  
NPI Number: 1467485144

Dear Mr. Keck:

A reasonable investigation subject to my control having been conducted in the subject facility, I make the following certification: Based upon my personal knowledge and belief, I attest that the Palmetto Pines Behavioral Health Residential Treatment Facility hereby complies with all of the requirements set forth in the final rules governing the use of restraint and seclusion in psychiatric residential treatment facilities providing inpatient psychiatric services to individuals under the age 21, published on January 22, 2001, (part 483 subpart G governing the use of restraint and seclusion) and amended with the publication of May 22, 2001 (Psych Under 21 rule).

This 60-bed facility currently provides inpatient psychiatric Medicaid services for the eligible individuals under age 21. There are currently 46 patients served within the PRTF at this time. There are currently 40 individuals whose Medicaid Psych under 21 benefits are paid by South Carolina Medicaid. There are currently 5 individuals whose Medicaid Psych under 21 benefits are paid by North Carolina Medicaid. With the listed exceptions the PRTF has not received Medicaid payment for the provision of psych under 21 services from any state other than South Carolina.

I acknowledge the right of DHEC (or its agents) and CMS to conduct an on-site survey at anytime to validate the facility's compliance with the requirements of the rule, to investigate complaints lodged against the facility, or to investigate serious occurrences.

225 Midland Parkway  
Summerville, SC 29485  
phone 843.851.5015  
fax 843.851.5012



I understand that the Centers for Medicare and Medicaid Services (CMS) (formerly HCFA), the State Medicaid Agency, or their representatives may rely on this attestation in determining whether the facility is entitled to payment for its services and, pursuant to Medicaid regulations at 431.610, have the right to validate that Palmetto Pines Behavioral Health Residential Treatment Facility is in compliance with the requirements set forth in the Psych Under 21 rule, and to investigate serious occurrences as defined under this rule.

Based upon my personal knowledge and belief, I hereby attest that the Palmetto Pines Behavioral Health Residential Treatment Facility currently meets the Certification of Need requirements as identified under 42 CFR, Part 441, Subpart D – Inpatient Psychiatric Services for Individuals Under Age 21 in Psychiatric Facilities or Programs.

In addition, I will notify the SC Department of Health and Human Services immediately if I vacate this position so that an attestation can be submitted by my successor. I will also notify the State Medicaid Agency if it is my belief that Palmetto Pines Behavioral Health Residential Treatment Facility is out of compliance with the requirements set forth in the Psych Under 21 rule.

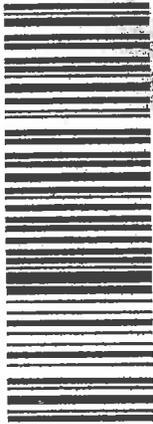
Sincerely,

A handwritten signature in cursive script that reads "Doris Singleton".

Doris Singleton, M.A.  
Executive Director

225 Midland Parkway  
Summerville, SC 29485  
phone 843.851.5015  
fax 843.851.5012

Palmetto Summerville Behavioral Health  
225 Midland Parkway  
Summerville, SC 29485



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JUL 12 2012

MAILED FROM ZIP CODE 29485

SC Department of Health and Human Services  
Anthony Keck  
P.O. Box 8206  
Columbia, SC 29202

DAMAGED IN HANDLING  
CHARLESTON SC P & DF  
29423-9731