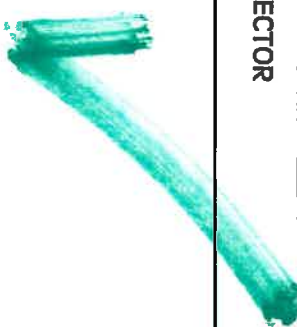


DEPARTMENT OF HEALTH AND HUMAN SERVICES
OFFICE OF DIRECTOR

ACTION REFERRAL

TO <i>Wells</i>	DATE <i>11-5-08</i>
------------------------	----------------------------

DIRECTOR'S USE ONLY	ACTION REQUESTED
1. LOG NUMBER <i>300252</i>	<input type="checkbox"/> Prepare reply for the Director's signature DATE DUE _____
2. DATE SIGNED BY DIRECTOR 	<input type="checkbox"/> Prepare reply for appropriate signature DATE DUE _____ <input type="checkbox"/> FOIA DATE DUE _____ <input checked="" type="checkbox"/> Necessary Action

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

Department of Health & Human Services
Centers for Medicare & Medicaid Services
61 Forsyth St, Suite 4120
Atlanta, Georgia 30303-8909



October 30, 2008

RECEIVED

NOV 05 2008

Ms. Emma Forkner, Director
South Carolina Department of Health and Human Services
Post Office Box 8206
Columbia, South Carolina 29202-8206

Department of Health & Human Services
OFFICE OF THE DIRECTOR

Re: South Carolina Title XIX State Plan Amendment, Transmittal #08-016

Dear Ms. Forkner:

We have reviewed South Carolina's State Plan Amendment (SPA) 08-016, which was submitted to the Atlanta Regional Office on August 1, 2008. This amendment is to disregard the earned income from temporary Census employment. The agency uses less restrictive income under Section 1902 (r)(2) of the Act for the following groups:

- a. Qualified children and pregnant women;
- b. Poverty level pregnant women and infant (133-185 percent FPL);
- c. Poverty level children under age 6 (133 percent FPL);
- d. Poverty level children under age 19 (100 percent FPL); and
- e. Optional categorically needy eligibility groups covered by the State.

Based on the information provided, we are pleased to inform you that South Carolina SPA 08-016 was approved on October 30, 2008. The effective date is July 1, 2008. The signed CMS-179 and the approved plan pages are enclosed. If you have any questions regarding this amendment, please contact Elaine Elmore at (404) 562-7408 or Rita Nimmmons at (404) 562-7415.

Sincerely,

Mary Kaye Justis, RN, MBA
Acting Associate Regional Administrator
Division of Medicaid & Children's Health Operations

Enclosures

**TRANSMITTAL AND NOTICE OF APPROVAL OF
STATE PLAN MATERIAL**

1. TRANSMITTAL NUMBER:
SC 08-016

2. STATE
South Carolina

FOR: HEALTH CARE FINANCING ADMINISTRATION

3. PROGRAM IDENTIFICATION: TITLE XIX OF THE
SOCIAL SECURITY ACT (MEDICAID)

TO: REGIONAL ADMINISTRATOR
HEALTH CARE FINANCING ADMINISTRATION
DEPARTMENT OF HEALTH AND HUMAN SERVICES

4. PROPOSED EFFECTIVE DATE
July 1, 2008

5. TYPE OF PLAN MATERIAL (*Check One*):

☐ NEW STATE PLAN

☐ AMENDMENT TO BE CONSIDERED AS NEW PLAN

☒ AMENDMENT

COMPLETE BLOCKS 6 THRU 10 IF THIS IS AN AMENDMENT (*Separate Transmittal for each amendment*)

6. FEDERAL STATUTE/REGULATION CITATION:

7. FEDERAL BUDGET IMPACT:
a. FFY 2008 -0-
b. FFY 2009 -0-

8. PAGE NUMBER OF THE PLAN SECTION OR ATTACHMENT:

9. PAGE NUMBER OF THE SUPERSEDED PLAN SECTION
OR ATTACHMENT (*If Applicable*):

Supplement 12 to Attachment 2.6-A, ADDENDUM
Supplement 8A to Attachment 2.6-A, ADDENDUM

Supplement 12 to Attachment 2.6-A, ADDENDUM
Supplement 8A to Attachment 2.6-A, ADDENDUM

10. SUBJECT OF AMENDMENT:

Disregard of Earned Income from Temporary Census Employment.

11. GOVERNOR'S REVIEW (*Check One*):

☐ GOVERNOR'S OFFICE REPORTED NO COMMENT

☐ COMMENTS OF GOVERNOR'S OFFICE ENCLOSED

☐ NO REPLY RECEIVED WITHIN 45 DAYS OF SUBMITTAL

☒ OTHER, AS SPECIFIED:

Ms. Forkner was designated by the Governor
to review and approve all State Plans

12. SIGNATURE OF STATE AGENCY OFFICIAL:

Emma Forkner

13. TYPED NAME:

Emma Forkner

14. TITLE:

Director

15. DATE SUBMITTED:

16. RETURN TO:

SC Department of Health and Human Services
Post Office Box 8206
Columbia, South Carolina 29202-8206

FOR REGIONAL OFFICE USE ONLY

17. DATE RECEIVED:

08/01/08

18. DATE APPROVED:

7/01/08

19. EFFECTIVE DATE OF APPROVED MATERIAL:

10/29/08

PLAN APPROVED - ONE COPY ATTACHED

20. SIGNATURE OF REGIONAL OFFICIAL:

21. TYPED NAME:

Mary Kaye Justis, RN, MBA

22. TITLE: Acting Associate Regional Administrator
Division of Medicaid & Children's Health Ops

23. REMARKS:

Approved with following changes as authorized by State Agency on email dated 10-16-08:

Block # 8 Supplement 8a to Attachment 2.6-A, ADDENDUM; change to read Block #8 Supplement 8a to Attachment 2.6-A, page 2 and Block #8 Supplement 12 to Attachment 2.6-A, ADDENDUM; change to read Block# 8 Supplement 12 to Attachment 2.6-A page 2; Block # 9 Supplement 12 to Attachment 2.6-A, ADDENDUM ; change to read Supplement 12 to Attachment 2.6-A page 2 and Supplement 8a to Attachment 2.6-A ADDENDUM; change to read Supplement 8a to Attachment 2.6-A page 2

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State: South Carolina

☒ The agency uses less restrictive income and/or resource methodologies than those in effect as of July 16, 1996, as follows:

1. Primary residence and the land on which it is located, as well as other buildings on this property is excluded;
2. Qualified retirement plans are excluded;
3. Cash value of Life Insurance policies with face value of \$10,000 or less and for which the cash value does not exceed the face value is excluded;
4. The exclusion of \$1500 of equity value for bona fide funeral arrangements for AFDC-related groups also includes revocable burial contracts, revocable trusts, installment sales contracts for burial spaces, cash, financial accounts such as checking, savings, or CD's, stocks or bonds, life insurance cash value;
5. The equity value of \$20,000 or less for one vehicle, not used for producing income, for each licensed driver is excluded;
6. Disregards income from interest or dividends up to \$400 annually.
7. Disregards earned income of dependent children.
8. Disregards lump sum payments from income. If lump sum payments are retained for more than a month, the amount retained is counted as a resource.
9. Disregards 50% of earned income for the first 4 months after employment begins and a standard disregard of \$100 for each month thereafter that earned income is received.
10. Disregards all earned income up to 185% of the Federal poverty level of recipients for 12 months after employment causes ineligibility.
11. Disregards difference between the 1931 income standard and 50% of the Federal poverty level by family size as revised annually in the Federal Register plus \$1.
12. Disregards of earned income paid by the Census Bureau for temporary employment related to census activities.

The income and/or resource methodologies that the less restrictive methods replace are as follows:

TN No: SC 08-016
Supersedes
TN No: SC 06-007

Approval Date: 10/29/08

Effective Date: 07/01/08
HCFA ID: 7985E

State Plan Under Title XIX of the Social Security Act

State: South Carolina

LESS RESTRICTIVE METHODS OF TREATING INCOME
UNDER SECTION 1902(r)(2) OF THE ACT

Wages paid by the Census Bureau for temporary employment related to census activities are excluded for the following eligibility groups:

Qualified children and pregnant women under 1902(a)(10)(A)(i)(III).

Poverty level pregnant women and infants (133 -185% FPL) under 1902(a)(10)(A)(i)(IV).

Poverty level children under age 6 (133% FPL) under 1902(a)(10)(A)(i)(VI).

Poverty level children under age 19 (100% FPL) under 1902(a)(10)(A)(i)(VII).

Optional categorically needy groups under 1902(a)(10)(A)(ii) as included in our State Plan.

1902(a)(10)(A)(ii)(IV) Eligible for cash assistance if not in medical institution

1902(a)(10)(A)(ii)(I) Reasonable categories of AFDC-1905(a)(i)related children

1902(a)(10)(A)(ii)(VIII) State subsidized adoption children

1902(a)(10)(A)(ii)(XI) State supplemental payments only

1902(a)(10)(A)(ii)(IX) Optional poverty level pregnant and women & infants

1902(a)(10)(A)(ii)(X) Aged/disabled with income no more than 100% FPL

1902(a)(10)(A)(ii)(XIII) Working disabled who buy into Medicaid

1902(a)(10)(A)(ii)(XVII) Independent foster care adolescents

NOTE: The Special Income Level Group under 1902(a)(10)(A)(ii)(V), the Individuals Who Would be Eligible if in an Institution Group under 1902(a)(10)(A)(ii)(VI) and the Hospice Group under 1902(a)(10)(A)(ii)(VII) cannot be included in this disregard.

* Less restrictive methods may not result in exceeding gross income limitations under section 1903(f).

TN No: SC 08-016

Supersedes

TN No: New Page

Approval Date: 10/29/08

Effective Date: 07/01/08