

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

ACTION REFERRAL

TO <i>Myers</i>	DATE <i>9-15-09</i>
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DIRECTOR'S USE ONLY	ACTION REQUESTED
1. LOC NUMBER <div style="text-align: center; font-size: 1.2em;"><i>100132</i></div>	<input type="checkbox"/> Prepare reply for the Director's signature DATE DUE _____
2. DATE SIGNED BY DIRECTOR <div style="text-align: center;"> <i>cc: Ms. Forkner, Dept</i> </div>	<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 Street, SW, Suite 4T20
Atlanta, Georgia 30303-8909



September 1, 2009

RECEIVED

Ms. Emma Forkner, Director

SEP 15 2009

Department of Health and Human Services
P. O. Box 8206
Columbia, South Carolina 29202-8206

Department of Health & Human Services
OFFICE OF THE DIRECTOR

RE: Partial Year Rate Increase for Select Health of South Carolina

Dear Ms. Forkner:

We have reviewed the proposed MCO contract amendment to the Standard Medicaid MCO contract for Select Health of South Carolina to increase the rate for the period April 1, 2009 through September 30, 2009. We found that the contract amendment, which includes the capitation rates certified by an actuary, meets the requirements contained in 42 CFR 438. Based on our review of the submitted documents and information provided by your staff, we approve the rate increase.

If any future actuarial study or financial review reveals inaccuracies in the submitted capitation rate cost data, we reserve the right to recover the federal share of any unallowable costs resulting from the inaccuracies. In addition, if errors in the rates are later determined, you will be required to adjust your quarterly expenditure report to the Centers for Medicare and Medicaid Services.

We appreciate the effort and cooperation provided by your staff during our review. Should you have any questions, please contact Tandra Hodges of my staff at 404-562-7409.

Sincerely,

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

Department of Health & Human Services
Centers for Medicare & Medicaid Services
61 Forsyth Street, SW, Suite 4T20
Atlanta, Georgia 30303-8909



September 1, 2009

RECEIVED

SEP 15 2009

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

Department of Health & Human Services
OFFICE OF THE DIRECTOR

RE: Partial Year Rate Increase for Total Carolina Care, Inc., of South Carolina

Dear Ms. Forkner:

We have reviewed the proposed MCO contract amendment to the Standard Medicaid MCO contract for Total Carolina Care, Inc., of South Carolina to increase the rate for the period April 1, 2009 through September 30, 2009. We found that the contract amendment, which includes the capitation rates certified by an actuary, meets the requirements contained in 42 CFR 438. Based on our review of the submitted documents and information provided by your staff, we approve the rate increase.

If any future actuarial study or financial review reveals inaccuracies in the submitted capitation rate cost data, we reserve the right to recover the federal share of any unallowable costs resulting from the inaccuracies. In addition, if errors in the rates are later determined, you will be required to adjust your quarterly expenditure report to the Centers for Medicare and Medicaid Services.

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Sincerely,

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

Department of Health & Human Services
Centers for Medicare & Medicaid Services
61 Forsyth Street, SW, Suite 4T120
Atlanta, Georgia 30303-8909



September 1, 2009

RECEIVED

SEP 15 2009

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

Department of Health & Human Services
OFFICE OF THE DIRECTOR

RE: Partial Year Rate Increase for Carolina Crescent Health Plan

Dear Ms. Forkner:

We have reviewed the proposed MCO contract amendment to the Standard Medicaid MCO contract for Carolina Crescent Health Plan of South Carolina to increase the rate for the period April 1, 2009 through September 30, 2009. We found that the contract amendment, which includes the capitation rates certified by an actuary, meets the requirements contained in 42 CFR 438. Based on our review of the submitted documents and information provided by your staff, we approve the rate increase.

If any future actuarial study or financial review reveals inaccuracies in the submitted capitation rate cost data, we reserve the right to recover the federal share of any unallowable costs resulting from the inaccuracies. In addition, if errors in the rates are later determined, you will be required to adjust your quarterly expenditure report to the Centers for Medicare and Medicaid Services.

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Sincerely,

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

Department of Health & Human Services
Centers for Medicare & Medicaid Services
61 Forsyth Street, SW, Suite 41720
Atlanta, Georgia 30303-8909



September 1, 2009

RECEIVED

SEP 15 2009

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

Department of Health & Human Services
OFFICE OF THE DIRECTOR

RE: Partial Year Rate Increase for Blue Choice Health Plan

Dear Ms. Forkner:

We have reviewed the proposed MCO contract amendment to the Standard Medicaid MCO contract for Blue Choice Health Plan of South Carolina to increase the rate for the period April 1, 2009 through September 30, 2009. We found that the contract amendment, which includes the capitation rates certified by an actuary, meets the requirements contained in 42 CFR 438. Based on our review of the submitted documents and information provided by your staff, we approve the rate increase.

If any future actuarial study or financial review reveals inaccuracies in the submitted capitation rate cost data, we reserve the right to recover the federal share of any unallowable costs resulting from the inaccuracies. In addition, if errors in the rates are later determined, you will be required to adjust your quarterly expenditure report to the Centers for Medicare and Medicaid Services.

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Sincerely,

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

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



September 1, 2009

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Ms. Emma Forkner, Director

SEP 15 2009

Department of Health and Human Services
P. O. Box 8206
Columbia, South Carolina 29202-8206

Department of Health & Human Services
OFFICE OF THE DIRECTOR

RE: Partial Year Rate Increase for Amerigroup Community Care

Dear Ms. Forkner:

We have reviewed the proposed MCO contract amendment to the Standard Medicaid MCO contract for Amerigroup Community Care of South Carolina to increase the rate for the period April 1, 2009 through September 30, 2009. We found that the contract amendment, which includes the capitation rates certified by an actuary, meets the requirements contained in 42 CFR 438. Based on our review of the submitted documents and information provided by your staff, we approve the rate increase.

If any future actuarial study or financial review reveals inaccuracies in the submitted capitation rate cost data, we reserve the right to recover the federal share of any unallowable costs resulting from the inaccuracies. In addition, if errors in the rates are later determined, you will be required to adjust your quarterly expenditure report to the Centers for Medicare and Medicaid Services.

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

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



September 1, 2009

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SEP 15 2009

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

Department of Health & Human Services
OFFICE OF THE DIRECTOR

RE: Partial Year Rate Increase for Wellpath of South Carolina Care, Inc. MCO

Dear Ms. Forkner:

We have reviewed the proposed MCO contract amendment to the Standard Medicaid MCO contract for Wellpath of South Carolina Care, Inc. to increase the rate for the period April 1, 2009 through September 30, 2009. We found that the contract amendment, which includes the capitation rates certified by an actuary, meets the requirements contained in 42 CFR 438. Based on our review of the submitted documents and information provided by your staff, we approve the rate increase.

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Sincerely,

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

Department of Health & Human Services
Centers for Medicare & Medicaid Services
61 Forsyth Street, SW, Suite 4170
Atlanta, Georgia 30303-8909



September 1, 2009

RECEIVED

Ms. Emma Forkner, Director

SEP 15 2009

Department of Health and Human Services
P. O. Box 8206
Columbia, South Carolina 29202-8206

Department of Health & Human Services
OFFICE OF THE DIRECTOR

RE: Partial Year Rate Increase for Unison Health Plan of South Carolina

Dear Ms. Forkner:

We have reviewed the proposed MCO contract amendment to the Standard Medicaid MCO contract for Unison Health Plan of South Carolina to increase the rate for the period April 1, 2009 through September 30, 2009. We found that the contract amendment, which includes the capitation rates certified by an actuary, meets the requirements contained in 42 CFR 438. Based on our review of the submitted documents and information provided by your staff, we approve the rate increase.

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