

DEPARTMENT OF HEALTH AND HUMAN SERVICES
OFFICE OF DIRECTOR

ACTION REFERRAL

TO <i>Liggett</i>	DATE <i>2-20-14</i>
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DIRECTOR'S USE ONLY	ACTION REQUESTED
1. LOG NUMBER <i>000281</i>	<input type="checkbox"/> Prepare reply for the Director's signature DATE DUE _____
2. DATE SIGNED BY DIRECTOR <i>cc: Mr. Keck, Kost</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.			



Catherine B. Templeton, Director

Promoting and protecting the health of the public and the environment

February 3, 2014

Anthony E. Keck, Director
South Carolina Department of Health and Human Services
Post Office Box 8206
Columbia, South Carolina 29202

RECEIVED

FEB 18 2014

Department of Health & Human Services
OFFICE OF THE DIRECTOR

Re: FY 2011-2012 Medicaid Permit Day Fines

Dear Director Keck:

As you are aware, the South Carolina Department of Health and Environmental Control (the Department) issues Medicaid nursing home permits annually pursuant to the *Medicaid Nursing Home Permits Act*, S.C. Code Ann. §§ 44-7-80 *et seq.* (2002). Pursuant to a Joint Resolution applicable to Fiscal Year 2011-2012, "a nursing home that exceeds by more than five percent the number of Medicaid patient days stated in its permit must be fined based on the number of Medicaid patient days exceeding the permit days multiplied by its daily Medicaid per diem multiplied by thirty percent." 2011 Act No. 95 § 1(A)(4).

The Department completed its analysis of the Medicaid utilization for Fiscal Year 2011-2012 and identified the holders of Medicaid nursing home permits that were out of compliance and thus subject to fines pursuant to the Joint Resolution. The notices of noncompliance and fines were sent via certified mail to each noncompliant permit holder along with notice of the procedure for appealing such determinations pursuant to S.C. Code Ann. § 44-1-60.

You were previously notified in a letter dated January 10, 2014 that sixty-seven (67) permit holders submitted timely requests for final review to the Board of Health and Environmental Control (the Board). On December 19, 2013, the Board mailed notices of its decisions to not conduct final review conferences for these requests. These permit holders had the option to file a request with the Administrative Law Court for a contested case hearing within thirty (30) calendar days after notice was mailed that the Board declined to hold a final review conference. See S.C. Code Ann. § 44-1-60(G)(1) (Supp. 2012). Of these permit holders, sixty-one (61) filed timely requests for a hearing with the Administrative Law Court. Therefore, the Department's decision will be automatically stayed for those sixty-one (61) permit holders pursuant to S.C. Code Ann. § 1-23-600(H)(2) (Supp. 2012). Attached is a spreadsheet listing the permit holders that timely filed written requests for final review before the Administrative Law Court.

Six (6) permit holders failed to file timely requests for contested case hearings with the Administrative Law Court. By failing to file requests timely for contested case hearings, the Department's notices of non-compliance and fines became final agency decisions for those six (6) permit holders. Attached is a spreadsheet listing the permit holders that did not timely appeal the Department's noncompliance and fine determinations.

If you have any questions about the Medicaid Permit process, please contact Les Shelton at (803) 898-1442.

Sincerely,

Lauren A. Shuster
Director of Public Health

Encl: Spreadsheets of permit holders who timely filed ALC requests and failed to timely file ALC requests

cc: Melissa Simmons, SCDHHS

MEDICAID NURSING FACILITIES OUT OF COMPLIANCE WITH DHEC PERMIT DAYS
 PERMIT DAY FINES FOR THE PERIOD JULY 1, 2011 THRU JUNE 30, 2012
 FACILITIES THAT APPEALED TO ADMINISTRATIVE LAW COURT OF AS 1-19-14

PAGE 1

#	MMIS	FACILITY	CITY	DHEC PERMIT DAYS	DHEC PERM DAYS X 105%	XIX DAYS PROVIDED	DAYS PAID /PERMIT	XIX DAYS OUT OF COMPLIANCE	11/1/2011 XIX RATE	30% of XIX Rate	FINE AT 30% OF RATE	APPEALED
1	NF1030	ASAPE CONWAY	CONWAY	75	79	2,539	33,853	2,460	\$152.05	\$45.62	\$112,225	YES
2	NF1017	ALPHA HEALTH & REHAB	GREER	24,511	25,737	30,687	1,252	4,950	\$171.32	\$51.40	\$254,430	YES
3	0898NF	BAYVIEW MANOR	BEAUFORT	38,566	40,494	42,719	1,108	2,225	\$143.80	\$43.14	\$95,987	YES
4	0931NF	BROOKVIEW HEALTHCARE CENTER	GAFFNEY	30,683	32,217	33,895	1,105	1,678	\$149.25	\$44.78	\$75,141	YES
5	NF1018	CAPSTONE HEALTH & REHAB OF EASLEY	EASLEY	16,841	17,683	17,697	1,051	14	\$163.25	\$48.98	\$686	YES
6	377597	CHEROKEE COUNTY LTC	GAFFNEY	22,032	23,134	24,453	1,110	1,319	\$159.83	\$47.95	\$63,246	YES
7	0899NF	CONWAY MANOR	CONWAY	47,194	49,554	52,349	1,109	2,795	\$137.15	\$41.15	\$115,014	YES
8	NF1020	DAYSRING HEALTH & REHAB	SIMPSONVILLE	10,887	11,431	12,301	1,130	870	\$158.33	\$47.50	\$41,325	YES
9	NF1019	DIAMOND HEALTH & REHAB	SIMPSONVILLE	27,403	28,773	30,698	1,120	1,925	\$161.59	\$48.48	\$93,324	YES
10	0897NF	DUNDEE MANOR	BENNETTSVILLE	29,375	30,844	32,994	1,123	2,150	\$120.59	\$36.18	\$77,787	YES
11	0927NF	FAITH HEALTHCARE CENTER	FLORENCE	29,082	30,536	31,357	1,078	821	\$136.32	\$40.90	\$33,579	YES
12	NF1025	FELLOWSHIP HEALTH & REHAB ANDERSON	ANDERSON	19,712	20,698	21,376	1,084	678	\$174.00	\$52.20	\$35,392	YES
13	0633NF	GEORGETOWN HEALTHCARE & REHAB	GEORGETOWN	21,205	22,265	23,917	1,128	1,652	\$114.26	\$34.28	\$56,631	YES
14	0857NF	GOLDEN AGE-INMAN	INMAN	10,713	11,249	11,663	1,089	414	\$136.81	\$41.04	\$16,991	YES
15	NF1016	GLORIFIED HEALTH & REHAB GREENVILLE	GREENVILLE	30,882	32,426	34,356	1,112	1,930	\$173.23	\$51.97	\$100,302	YES
16	0835NF	HERITAGE HEALTHCARE AT THE PINES	DILLON	20,453	21,476	22,271	1,089	795	\$149.26	\$44.78	\$35,600	YES
17	0450NH	HERITAGE HOME OF FLORENCE	FLORENCE	24,099	25,304	28,171	1,169	2,867	\$152.64	\$45.79	\$131,280	YES
18	NF1015	HOPE HEALTH AND REHAB	MARIETTA	10,449	10,971	12,274	1,175	1,303	\$173.89	\$52.17	\$67,978	YES
19	NF1013	HOSANNA HEALTH & REHAB OF PIEDMONT	PIEDMONT	15,618	16,399	17,703	1,133	1,304	\$169.43	\$50.83	\$66,282	YES
20	0864NF	INMAN HEALTHCARE	INMAN	10,590	11,120	11,136	1,052	16	\$147.77	\$44.33	\$709	YES
21	0736NF	LAKE MARION NURSING CENTER	SUMMERTON	20,345	21,362	23,354	1,148	1,992	\$140.89	\$42.27	\$84,202	YES
22	0730NF	LEXINGTON MEDICAL CENTER EXT	LEXINGTON	89,422	93,893	96,874	1,083	2,981	\$164.23	\$49.27	\$146,874	YES
23	0868NF	MAGNOLIA MANOR OF COLUMBIA	COLUMBIA	21,932	23,029	24,081	1,098	1,052	\$137.16	\$41.15	\$43,290	YES
24	0866NF	MAGNOLIA MANOR OF GREENWOOD	GREENWOOD	23,302	24,467	24,850	1,066	383	\$149.33	\$44.80	\$17,158	YES
25	0863NF	MAGNOLIA MANOR OF INMAN	INMAN	45,748	48,035	49,191	1,075	1,156	\$138.99	\$41.67	\$48,171	YES
26	0859NF	MAGNOLIA MANOR OF ROCK HILL	ROCK HILL	25,781	27,070	28,036	1,087	966	\$135.84	\$40.75	\$39,365	YES
27	0867NF	MAGNOLIA MANOR OF SPARTANBURG	SPARTANBURG	22,660	23,793	25,700	1,134	1,907	\$143.14	\$42.94	\$81,887	YES
28	0869NF	MAGNOLIA PLACE OF GREENVILLE	GREENVILLE	29,010	30,461	30,881	1,064	420	\$148.52	\$44.56	\$18,715	YES
29	0861NF	MAGNOLIA PLACE OF SPARTANBURG	SPARTANBURG	18,105	19,010	19,143	1,057	133	\$162.23	\$48.67	\$6,473	YES
30	NF1026	MAJESTY HEALTH & REHAB	EASLEY	22,292	23,407	25,755	1,155	2,348	\$168.87	\$50.66	\$118,950	YES
31	NF1028	MANNA HEALTH & REHAB	PICKENS	15,963	16,761	17,939	1,124	1,178	\$169.61	\$50.88	\$59,937	YES
32	0896NF	MOUNT PLEASANT MANOR	MT PLEASANT	33,302	34,967	37,131	1,115	2,164	\$144.96	\$43.49	\$94,112	YES
33	262441	NHC HEALTHCARE ANDERSON	ANDERSON	48,568	50,996	52,490	1,081	1,494	\$169.12	\$50.74	\$75,806	YES
34	NF1008	NHC HEALTHCARE BLUFFTON	BLUFFTON	6,241	6,553	7,136	1,143	583	\$152.08	\$45.62	\$26,596	YES
35	0574NH	NHC GARDEN CITY	GARDEN CITY	15,767	16,555	17,162	1,088	607	\$165.52	\$49.66	\$30,144	YES
36	0570NH	NHC GREENVILLE	GREENVILLE	20,698	21,733	23,567	1,139	1,834	\$157.88	\$47.36	\$86,858	YES

PERMIT DAY FINES FOR THE PERIOD JULY 1, 2011 THRU JUNE 30, 2012
FACILITIES THAT FILED RFRS TO DHEC BOARD OF AS 12-19-13
 PAGE 2

#	MMIS	FACILITY	CITY	DHEC PERMIT DAYS	DHEC PERM DAYS X 105%	XIX DAYS PROVIDED	DAYS PAID /PERMIT	XIX DAYS OUT OF COMPLIANCE	11/1/2011 XIX RATE	30% of XIX Rate	FINE AT 30% OF RATE	APPEALED
37	400227	NHC HEALTHCARE GREENWOOD	GREENWOOD	34,334	36,051	36,126	1.052	75	\$147.84	\$44.35	\$3,326	YES
38	0722NF	NHC PARKLANE	COLUMBIA	16,067	16,870	16,915	1.053	45	\$158.52	\$47.56	\$2,140	YES
39	0923NF	OAKBROOK HEALTHCARE CENTER	SUMMERVILLE	22,406	23,526	24,151	1.078	625	\$174.06	\$52.22	\$32,638	YES
40	0890NF	OAKHAVEN NURSING CENTER	DARLINGTON	22,301	23,416	25,811	1.157	2,395	\$162.49	\$48.75	\$116,756	YES
41	NF1021	OMEGA HEALTH & REHAB OF GREENVILLE	GREENVILLE	20,942	21,989	22,708	1.084	719	\$166.82	\$50.05	\$35,986	YES
42	NF1024	PETRA HEALTH AND REHAB	MCCORMICK	35,025	36,776	37,572	1.073	796	\$164.33	\$49.30	\$39,243	YES
43	0930NF	PRINCE GEORGE HEALTHCARE CENTER	GEORGETOWN	34,984	36,733	37,882	1.083	1,149	\$159.83	\$47.95	\$55,095	YES
44	NF1022	REDEEMER HEALTH & REHAB PICKENS	PICKENS	9,709	10,194	11,495	1.184	1,301	\$164.42	\$49.33	\$64,178	YES
45	0553NH	RIDGELAND NURSING CENTER	RIDGELAND	21,364	22,432	22,794	1.067	362	\$131.11	\$39.33	\$14,237	YES
46	0918NF	RONALD E. MCNAIR MEMORIAL NURSING CTR	WILLIAMSBURG	24,117	25,323	26,296	1.090	973	\$131.11	\$39.33	\$38,268	YES
47	0917NF	SENECA HEALTH & REHAB CENTER	SENECA	26,570	27,899	29,387	1.106	1,488	\$129.03	\$38.71	\$57,600	YES
48	0925NF	SPRINGDALE HEALTHCARE CENTER	CAMDEN	31,536	33,113	34,931	1.108	1,818	\$157.90	\$47.37	\$86,119	YES
49	0924NF	ST. GEORGE HEALTHCARE CENTER	ST GEORGE	21,231	22,293	25,315	1.192	3,022	\$162.53	\$48.76	\$147,353	YES
50	0919NF	SUMTER EAST HEALTH & REHAB CENTER	SUMTER	41,871	43,965	44,531	1.064	566	\$115.30	\$34.59	\$19,578	YES
51	NF1029	SUMTER VALLEY NURSING AND REHAB	SUMTER	26,542	27,869	28,246	1.064	377	\$168.43	\$50.53	\$19,050	YES
52	0865NF	SUNNY ACRES NURSING HOME	FORK	27,211	28,572	30,758	1.130	2,186	\$150.41	\$45.12	\$98,632	YES
53	0941NH	TRINITY MISSION HEALTH & REHAB EDGEFIELD	EDGEFIELD	29,454	30,927	32,887	1.117	1,960	\$127.97	\$38.39	\$75,244	YES
54	0942NF	UNIHEALTH POST ACUTE CARE - AIKEN	AIKEN	39,418	41,389	42,013	1.066	624	\$168.93	\$50.68	\$31,624	YES
55	NF1007	UNIHEALTH POST ACUTE CARE - BAMBERG	BAMBERG	21,281	22,345	22,494	1.057	149	\$185.20	\$55.56	\$8,278	YES
56	0880NF	UNIHEALTH POST-ACUTE CARE - COLUMBIA	COLUMBIA	39,035	40,987	44,132	1.131	3,145	\$149.52	\$44.86	\$141,085	YES
57	0922NF	UNIHEALTH POST ACUTE CARE LOW COUNTRY	ESTILL	25,357	26,625	27,529	1.086	904	\$152.31	\$45.69	\$41,304	YES
58	0943NF	UNIHEALTH POST ACUTE MONCK'S CORNER	MONCK'S CORNER	33,556	35,234	35,828	1.068	594	\$176.29	\$52.89	\$31,417	YES
59	NF1006	UNIHEALTH POST ACUTE CARE ORANGEBURG	ORANGEBURG	22,289	23,403	23,524	1.055	121	\$177.13	\$53.14	\$6,430	YES
60	0710NF	UNIHEALTH POST-ACUTE CARE TANGLEWOOD	RIDGEWAY	37,542	39,419	39,835	1.061	416	\$152.69	\$45.81	\$19,057	YES
61	271877	WESLEY COMMONS / HEALTHCARE CTR OF	GREENWOOD	14,426	15,147	16,836	1.167	1,689	\$142.00	\$42.60	\$71,951	YES
		TOTAL		1,578,074	1,656,978	1,737,842		80,863			\$3,709,036	61

MEDICAID NURSING FACILITIES OUT OF COMPLIANCE WITH DHEC PERMIT DAYS
 PERMIT DAY FINES FOR THE PERIOD JULY 1, 2011 THRU JUNE 30, 2012
FACILITIES THAT DID NOT APPEAL TO ADMINISTRATIVE LAW COURT OF AS 1-19-14

#	MMIS	FACILITY	CITY	DHEC PERMIT DAYS	DHEC PERM DAYS X 105%	XIX DAYS PROVIDED	DAYS PAID /PERMIT	OVER OR UNDER	XIX DAYS OUT OF COMPLIANCE	11/1/2011 XIX RATE	30% of XIX Rate	FINE AT 30% OF RATE	APEALED TO ALC
1	0626NH	FOUNTAIN INN CONVALESCENT HOME	FOUNTAIN INN	10,160	10,668	10,731	1.056	OVER	63	\$169.99	\$51.00	\$3,213	NO
2	245060	LILA DOYLE NURSING CARE CENTER	SENECA	20,377	21,396	23,552	1.156	OVER	2,156	\$157.25	\$47.18	\$101,720	NO
3	0539NH	MCCOY MEMORIAL NURSING CENTER	BISHOPVILLE	33,185	34,844	34,940	1.053	OVER	96	\$143.81	\$43.14	\$4,141	NO
4	0891NF	MEDFORD NURSING CENTER	DARLINGTON	23,470	24,644	24,750	1.055	OVER	106	\$166.59	\$49.98	\$5,298	NO
5	NF1010	MULLINS NURSING CENTER	MULLINS	24,977	26,226	27,280	1.092	OVER	1,054	\$158.67	\$47.60	\$50,170	NO
6	0823NF	WOODRUFF MANOR	WOODRUFF	25,294	26,559	26,583	1.051	OVER	24	\$137.83	\$41.35	\$992	NO
		TOTAL		137,463	144,336	147,836			3,499			\$165,534	6



2600 Bull Street
Columbia, SC 29201

Return Service Requested

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FEB 18 2014

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

Anthony E. Keck, Director
S.C. Department of Health
And Human Services
Post Office Box 8206
Columbia, SC 29202