

DEPARTMENT OF HEALTH AND HUMAN SERVICES
OFFICE OF DIRECTOR

ACTION REFERRAL

TO <i>Waldrop / Roy Smith</i>	DATE <i>11-7-12</i>
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DIRECTOR'S USE ONLY		ACTION REQUESTED	
1. LOG NUMBER <i>100144</i>		<input type="checkbox"/> Prepare reply for the Director's signature DATE DUE _____	
2. DATE SIGNED BY DIRECTOR		<input checked="" type="checkbox"/> Prepare reply for appropriate signature DATE DUE <i>11-20-12</i>	
<i>cc: Mr. Heck, Singleton, Depo, CMS files Closed 1/8/13, see attached e-mail response.</i>		<input type="checkbox"/> FOIA DATE DUE _____	
		<input type="checkbox"/> Necessary Action DATE DUE _____	

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
Atlanta Regional Office
61 Forsyth Street, Suite 4T20
Atlanta, Georgia 30303



DIVISION OF MEDICAID & CHILDREN'S HEALTH OPERATIONS

November 2, 2012

Mr. Anthony E. Keck, Director
Department of Health and Human Services
P. O. Box 8206
Columbia, South Carolina 29202-8206

RECEIVED

NOV 07 2012

Department of Health & Human Services
OFFICE OF THE DIRECTOR

Dear Mr. Keck:

This formal Request for Additional Information (RAI) is in response to your request to renew South Carolina's Mechanical Ventilator Dependent Home and Community-Based Waiver, control # 40181.R04. Our review of the application found that it does not conform fully to statutory and regulatory requirements. Please provide the clarifications necessary to respond to the following issues:

Appendix C-1/C-3: Participant Services – Other Services – Incontinence Supplies:

With this renewal, the State is proposing to add incontinence supplies as a waiver service. Since incontinence supplies are required to be provided under the medical supplies, equipment and appliances component of the mandatory home health benefit, please indicate how this service is different from and does not duplicate incontinence supplies that are required to be provided under the State plan.

Appendix C-1/C-3: Participant Services – Home Accessibility Adaptations:

The pest control service should be removed from this service as it does not comport with the core service definition provided by CMS. Pest control services are allowable under the 1915(c) authority, but should be listed as its own distinct service under the "other service" category.

Appendix D-2: Service Plan Implementation and Monitoring:

The explanation provided in the state's response to our informal request for additional information should be added to this section of the actual application.

Appendix G-2: Safeguards Concerning Restraints and Restrictive Interventions:

The explanation provided in the state's response to our informal request for additional information should be added to this section of the actual application.

Mr. Anthony Keck
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Appendix I-2: Rates, Billing and Claims:

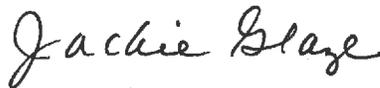
The explanation provided in the state's response to our informal request for additional information should be added to this section of the actual application.

Under section 1915(f) of the Social Security Act, a waiver request must be approved, denied or additional information requested within 90 days of the receipt or the request will be deemed approved. The 90 day review period on this request ends November 29, 2012. This request for additional information will, however, stop the 90 day clock. Once the additional information is submitted to us, the 90 day review clock will restart at day one.

The current waiver expires on November 30, 2012. We have received your request for a temporary extension which we are currently reviewing and processing. A temporary extension will allow the current waiver to continue as approved while we continue our discussions concerning incontinence supplies.

If there are any questions, you may contact Kenni Howard at (404) 562-7413 or Michele MacKenzie at (410) 786-5929.

Sincerely,



Jackie Glaze
Associate Regional Administrator
Division of Medicaid & Children's Health Operations

cc: Michele MacKenzie

Richard Kluender

Log # 144 ✓

From: Roy Smith
Sent: Tuesday, January 08, 2013 1:53 PM
To: Richard Kluender; SUSIE BOYKIN
Subject: RE: Scan from Copier

139 Torbush was a case Susie worked on with Jennifer Lynch. I didn't remember there was a log letter, but I believe the case has been resolved.

144 is the vent waiver - that has now been approved so it can be closed.

The TCM would belong to George or Brenda. The two above were the only two in our area.

-----Original Message-----

From: Richard Kluender
Sent: Tuesday, January 08, 2013 1:26 PM
To: SUSIE BOYKIN; Roy Smith
Subject: FW: Scan from Copier

Brenda James gave me the above listing to follow up on, could you check to see if any of the subject log letters pertain to your area and if so, could you please provide me with the status so that I can complete Brenda's list and take it back upstairs.

Thanks

Rich