

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

**ACTION REFERRAL**

TO <i>Supra</i>	DATE <i>10-14-13</i>
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DIRECTOR'S USE ONLY	ACTION REQUESTED
1. LOG NUMBER <i>000141</i>	<input type="checkbox"/> Prepare reply for the Director's signature DATE DUE _____
2. DATE SIGNED BY DIRECTOR <i>cc: Mr. Jack, Hart, Deps, CMS file</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.			

DEPARTMENT OF HEALTH & HUMAN SERVICES  
Centers for Medicare & Medicaid Services  
7500 Security Boulevard, Mail Stop S2-26-12  
Baltimore, Maryland 21244-1850



OCT 10 2013

**RECEIVED**

OCT 10 2013

Tony Keck  
Director  
State of South Carolina, Department of Health & Human Services  
1801 Main Street PO Box 8206  
Columbia, SC 29201-8206

Department of Health & Human Services  
OFFICE OF THE DIRECTOR

Dear Mr. Keck:

This letter is in response to South Carolina's request, dated September 27, 2013 for a waiver that will assist the state as it implements of the Affordable Care Act. Your request to extend the dates for the state's eligibility renewals scheduled for January 1, 2014 through March 31, 2014 is approved. This strategy will help South Carolina achieve a more streamlined eligibility determination process and provide a smooth path to coverage for individuals eligible for Medicaid in 2014.

This letter authorizes the state, under the authority of section 1902(e)(14)(A) of the Social Security Act (the Act), to extend the dates for the state's eligibility renewals scheduled for January 1, 2014 through March 31, 2014 by three months. As you may know, section 1902(e)(14)(D)(v) of the Act, implemented at 42 CFR 435.603(a)(3), states that a person enrolled in Medicaid as of January 1, 2014 shall not be found ineligible solely because of the application of Modified Adjusted Gross Income (MAGI) and the new household composition rules until the later of March 31, 2014 or the individual's next regular renewal date. Absent this waiver, the state would need to apply both the traditional Medicaid eligibility determination methods and the MAGI-based determination methods to anyone whose renewal date falls between January 1, 2014 and March 31, 2014. The state has flexibility to structure how the extended renewal period will take place. We agree that your indication that you will complete renewals for January through March 2014 by July 1, 2014 is reasonable.

The authority provided in this letter is subject to CMS receiving your written acknowledgement of this approval and acceptance of these new authorities within 30 days of the date of this letter.

Congratulations on this approval. We look forward to our continuing work together to achieve successful implementation of the Affordable Care Act.

Page 2 – Mr. Tony Keck

If you have questions regarding this award, please contact Ms. Jennifer Ryan, Deputy Director for Policy, Children and Adults Health Programs Group, Centers for Medicaid & CHIP Services, at (410) 786-5647.

Sincerely,

A handwritten signature in black ink that reads "Cindy Mann". The signature is written in a cursive style with a long horizontal flourish at the end.

Cindy Mann  
Director

cc: Jackie Glaze, Associate Regional Administrator, Region IV