

SOUTH CAROLINA COMMISSION ON DISABILITIES AND SPECIAL NEEDS

MINUTES

June 20, 2013

The South Carolina Commission on Disabilities and Special Needs met on Thursday, June 20, 2013, at 2:00 P.M. at the Department of Disabilities and Special Needs Central Office, 3440 Harden Street Extension, Columbia, South Carolina.

The following were in attendance:

COMMISSION

Present:

Fred Lynn, Chairman
Christine Sharp, Secretary
Katherine Davis
Katherine Finley
Eva Ravenel
Harvey Shiver

Absent:

Deborah McPherson, Vice Chairman

DDSN Administrative Staff

Dr. Buscemi, State Director; Dr. Kathi Lacy, Associate State Director, Policy; Mr. David Goodell, Associate State Director, Operations; Mr. Tom Waring, Associate State Director, Administration; Mrs. Susan Beck, Associate State Director, Policy; Mrs. Tana Vanderbilt, General Counsel (For other Administrative Staff see Attachment 1 – Sign In Sheet).

Guests

(See Attachment 1 Sign-In Sheet)

Coastal Regional Center (via videoconference)

(See Attachment 2 Coastal Regional Center Sign-In Sheet)

Pee Dee Regional Center (via videoconference)

(No one in Attendance)

Whitten Regional Center (via videoconference)

(See Attachment 4 Whitten Center Regional Center Sign-In Sheet)

York County DSN Board (via videoconference)

(See Attachment 5 York County Sign-In Sheet)

News Release of Meeting

Chairman Fred Lynn called the meeting to order and Commissioner Christine Sharp read a statement of announcement about the meeting that had been mailed to the appropriate media, interested persons, and posted at the Central Office and on the website in accordance with the Freedom of Information Act.

Invocation

Commissioner Christine Sharp gave the invocation.

Adoption of the Agenda

The Commission adopted the June 20, 2013 Meeting Agenda as changed by unanimous consent. (Attachment A)

Approval of the Minutes of the May 16, 2013 Meeting

The Commission approved the minutes of the May 16, 2013 Commission Meeting by unanimous consent.

Public Input

There was no participation in Public Input.

Commissioners' Update

Commissioners Fred Lynn, Christine Sharp, and Eva Ravenel spoke of events and meetings that they attended and shared news of upcoming events in their district.

Budget Update

Mr. Tom Waring reported that the Legislation finalized the budget and DDSN did very well. Mr. Waring explained in detail DDSN's four priority requests. Of the \$13 million requested, DDSN received right at \$5 million. The General Assembly heard our needs. The funding will help with meeting the needs of the waiting lists. State employees will not receive a pay raise; however, full funding was received for health insurance premiums. Mr. Waring took a moment to highlight the efforts of all in the DDSN system advocating for our budget. The department will soon start the 2015 budget process. (Attachment B)

Community Contracts

Mr. Tom Waring presented information on the community contracts for Commission approval totaling approximately \$400 million to serve some 39,542 individuals (which is a duplicated count). Discussion followed. Commissioner Christine Sharp recused herself from voting on Family Connection of South Carolina. On motion of Commissioner Katherine Davis, second and passed, the Commission gave approval to award the Community Contracts as presented in the amount of \$399,898,390 to serve 39,542 individuals. (Attachment C.)

Election of Commission Officers

Commissioner Eva Ravenel, Chairman of the Nominating Committee, presented the following slate of officers for FY 2013-2014 – Commissioner Fred Lynn as Chairman, Commissioner Christine Sharp as Vice Chairman, and Commissioner Harvey Shiver as Secretary. Chairman Fred Lynn opened the floor for nominations for Commissioner Officers. Commissioner Katherine Davis made the motion to approve the slate as presented. The motion was seconded and passed.

Legislative Update

Mrs. Lois Park Mole thanked the Commission for their help during the two year legislative session. She then reported on the following legislation that pertains to DDSN's mission.

S.127 - Brain Injury Leadership Council - There is created the South Carolina Brain Injury Leadership Council, within the Department of Disabilities and Special Needs, to provide statewide coordination in promoting support services to persons with brain injuries, their families, and caregivers, and to identify emerging issues and innovations, foster education and advocacy, and build consensus to support necessary policies and programs. Currently the council exists and has been very active now. In order to be eligible to receive federal funding, states must establish a council in statute to demonstrate a higher level of commitment.

H.3061 - Concussion Law - to amend the code of laws of South Carolina, 1976, by adding section 59-63-95 so as to require the Department of Health and Environmental Control to post on it's website guidelines and model policies for identifying and managing suspected concussions in student athletes, to require each local school district to develop concussion guidelines and procedures, to require school districts to annually provide information on concussions and brain injuries to student athletes and their parents, to require a student athlete to be removed from play if believed to have sustained a concussion, and to establish procedures for returning an athlete to play, for further evaluation, and for returning to play after further evaluation, and to provide immunity for trainers and physicians who evaluate and return a

student to play during a practice or an athletic competition, whether the trainer or physician was a volunteer or paid. Student athletes include cheerleaders.

H.3033 – Autism License Plates - Amends the code of laws of South Carolina, 1976, by adding article 132 to chapter 3, title 56 so as to provide that the Department of Motor Vehicles may issue "Autism Awareness" special license plates. This article is named after Savannah Lee Monroe, the granddaughter of a gentleman in Spartanburg. Proceeds from the sale of the license plates will go to the SC Autism Society.

S.341 - The Emerson Rose Act – An act to amend the code of laws of South Carolina, 1976 to require each birthing facility licensed by the Department of Health and Environmental Control to perform a pulse oximetry screening, or another approved screening to detect congenital heart defects, on every newborn in its care, when the baby is twenty-four to forty-eight hours of age, or as late as possible if the baby is discharged from the hospital before reaching twenty-four hours of age.

Regulation 4259 – Immunization Registry - This regulation addresses the required entry of all immunizations given by health care providers into the South Carolina Immunization Information System (Registry). It is intended to facilitate health care workers giving the right vaccine to each child on time, preventing duplicate administration of the same vaccine, reduce costs of vaccine and immunization delivery, and thereby, reduce vaccine-preventable infections. Specific areas addressed in the regulation include definitions of terms, registration and reporting requirements, the schedule of implementation by providers, permitted uses and disclosures, compliance and enforcement, exceptions to the requirements, and severability.

Medicaid Updates

Dr. Buscemi gave an update on the following Medicaid issues that pertain to DDSN.

The SCDHHS will increase reimbursement for Adult Day Health Care Services (ADHC) on July 1, 2013. This increase will cost DDSN \$100K in state funds annually. Dr. Buscemi recommended DDSN increase provider band payments accordingly out of the \$5 million new funds this year and request new money in next year's budget request to compensate for this increase. There are 230 people in the ID/RD and CS waivers that currently receive this service.

Dr. Buscemi stated CMS requested a formal Request for Additional Information (RAI) with regards to the HASCI Waiver Renewal. DDSN answered the questions in a timely manner but DHHS was not able to review all of them or do their part and requested a delay in the waiver renewal. The delay is an extension of three months. DDSN is going to have to answer more questions

from DHHS; however, there is no risk to the continuation of current waiver services.

Dr. Buscemi also reported on the ongoing issue of incontinence supplies. CMS is requesting DHHS to cover the supplies as a state plan service, and an extension to state plan under a waiver. The new timeframe is September 1, 2013 which is another delay from the original April 1, 2013 timeline. The delay is because the DHHS system is not ready. Service coordinators have notified families as instructed by DHHS. In theory, it should be a seamless change in service delivery; however, DDSN is not in control over this.

Dr. Buscemi spoke about the dual eligible initiative. DDSN has been verbally told that there is a possibility that the ID/RD population may be excluded; however, the HASCI population will be included. There is still not a MOA between SCDHHS and CMS in order to proceed. The ID/RD population is very likely to be included at some point in the future so staff are staying very involved.

Dr. Buscemi gave a recap of the line therapy increase issue. She stated that DDSN was recently informed by DHHS that the line therapy increase is going to be allowed but it will not be required to be passed on to the EIBI line therapists as we requested and what was originally agreed upon by DHHS. As soon as DHHS announces the implementation date, DDSN will send out a memo of the decision to the providers.

Dr. Buscemi spoke of the March 11, 2013 DDSN/DHHS joint letter addressed to Representatives Brian White and Murrell Smith regarding targeted case management. Unfortunately, there has been no progress or additional information. Dr. Buscemi stated she and staff have been requesting meetings.

Waiting Lists

Dr. Kathi Lacy explained in detail the movement of the waiver waiting lists between July 1, 2012 to May 31, 2013. Nine hundred six (906) people have been removed from the waiting list and since July 1, 2011 over 2,250 individuals have been moved off the waiting lists. A full fiscal year report will be made available in future Commission meetings. Dr. Lacy also provided information about the number of people who have been added and removed from the critical wait list. This list is reserved for those people who are in a life-threatening situation. The date this fiscal year, 232 people have been added and 242 have been removed from this constant-moving wait list. Dr. Buscemi suggested that because of staff time and effort and the need to report data trends that the critical waiting list be reported on a monthly basis and the other four waivers be reported on every month on a rotating basis. Dr. Buscemi also stated DDSN received new funding for FY 2013-2014 budget to award 200 slots across the waiver waiting lists. (Attachment D)

Autism Spectrum Disorder: DSM5 Changes

Dr. Kathi Lacy explained in detail the handout she provided regarding the DSM-5 changes to the criteria of pervasive developmental disorders (PDD). The first major change is that three diagnostic categories (Autistic Disorder, Asperger's, and PDD-NOS) were combined into one diagnosis now called Autism Spectrum Disorder. She also explained the changes in the characteristic/symptom domains and the severity levels. Dr. Lacy explained that some language is very similar between the DSM IV and V checklist. Individuals who have previously gone through the DDSN eligibility process and received a diagnosis of PDD-NOS or Asperger's from the Autism Division will go through an expedited eligibility process and would not need to be reassessed. Individuals diagnosed by a source other than DDSN would also have to go through the eligibility process and the Autism Division will determine if further evaluation is required. There will not be too much change in how DDSN will provide services. There will be an increase in the number of people found eligible for DDSN services under this Spectrum Disorder. (Attachment E)

Special Recognition

In recognition of Dr. Kathi Lacy's retirement, Chairman Fred Lynn read a resolution addressed to her on behalf of the Commissioners. Dr. Buscemi stated Dr. Lacy will be sorely missed; however, she is happy that she will be staying on in another capacity.

State Director's Report

Dr. Buscemi reported that the Public Communications Group (PCG) has started their audit/review and has been speaking with some of DDSN's providers this week. The audit/review will be ongoing for a few more months.

Dr. Buscemi spoke of the Affordable Care Act Statewide Conference that is scheduled for July 24 – July 25, 2013. Mark Knuckles and Associates is the consultant agency that will provide the training to our providers. This conference is being held at the request of our providers. The SCDSN Foundation is sponsoring the conference with a small fee to the providers.

Dr. Buscemi stated that she was notified today that LAC will submit their audit objectives next week.

FY 2014 Commission Committee Assignments

Chairman Fred Lynn asked the Commissioners to serve on their current committees. The current committees are as follows: Finance Audit Committee - Commissioners Christine Sharp, Harvey Shiver, and Eva Ravenel with Commissioner Sharp serving as chairman; Policy Committee - Commissioners Deborah McPherson, Katherine Davis, and Katherine Finely with Commissioner McPherson serving as Chairman. Chairman Lynn also stated

there will be a Policy Committee Meeting on the same day as the July Commission Meeting.

Executive Session

On motion of Commissioner Eva Ravenel, seconded and passed, the Commission entered into Executive Session to discuss to discuss an employment and contractual matter.

Enter into Public Session

The Commission entered into Public Session. It was noted that no action was taken in the Executive Session.

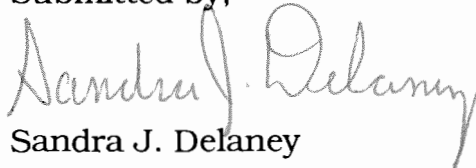
Next Regular Meeting Date

Chairman Fred Lynn announced the next regular Commission Meeting is scheduled for Thursday, July 18, 2013 with the starting time to be determined.

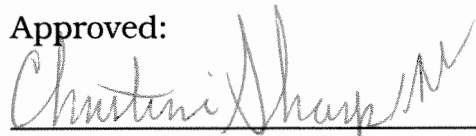
Adjournment

With no further business, Chairman Fred Lynn adjourned the meeting.

Submitted by,


Sandra J. Delaney

Approved:



Commissioner Christine Sharp
Secretary

SC COMMISSION ON DISABILITIES AND
Commission Meeting

Attachment 1

June 20, 2013

Guest Registration Sheet

(PLEASE PRINT)

Name and Organization

- | | | |
|-----|--------------------|------------------------|
| 1. | Stephanie Williams | Calhoun DSNB |
| 2. | Velarri Bishop | DD Council |
| 3. | Marcia Lindsay | LAC |
| 4. | David Rotholz | USC/CDR |
| 5. | LINDA VERDHEER | DDSN |
| 6. | Belle Mead Cooper | DDSN |
| 7. | Lisa Weeks | DDSN |
| 8. | Richard Wnek | DDSN |
| 9. | Anita Atwood | DHHS |
| 10. | R.C. Hoecke | Family Connection S.C. |
| 11. | Joyce Davis | BIASC |
| 12. | Ann Dalton | DDSN |
| 13. | Richard Johnson | Coastal Centerparents |
| 14. | Suzanne Johnson | " " " |
| 15. | Linda Bodiford | " " " |
| 16. | Nancy Mc Cormick | P+A |
| 17. | Courtney Phillips | LAC |
| 18. | Mike Kent | Marion-Dillon DSN |
| 19. | | |
| 20. | | |

SC COMMISSION ON DISABILITIES ANI
Commission Meetin
June 20, 2013

Attachment 2

Guest Registration Sheet

(PLEASE PRINT) Name and Organization

1. Ronda Ritchie - DDSN Dist. II Office
2. Sue Dixon - Dorchester County Bd. of DSN
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SC COMMISSION ON DISABILITIES AND
Commission Meeting

Attachment 4

June 20, 2013

Guest Registration Sheet

(PLEASE PRINT) Name and Organization

1. Pat Fagan SEDSON DIST. I OFFICE
2. Jennie Brooks NCDJWB
3. Jim Part B.C.
4. Bob Andre Barton Ct
5. Jason Tavernier LCDSNB
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SC COMMISSION ON DISABILITIES AND
Commission Meeting
June 20, 2013

Attachment 5

Guest Registration Sheet

(PLEASE PRINT) Name and Organization

1 x Mary Poole

2 x JANICE FAWLER

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SOUTH CAROLINA COMMISSION ON DISABILITIES A

A G E N D A

**South Carolina Department of Disabilities and Special Needs
3440 Harden Street Extension
Conference Room 251
Columbia, South Carolina**

June 20, 2013

2:00 P.M.

1. Call to Order *Chairman Fred Lynn*
2. Welcome - Notice of Meeting Statement *Commissioner Christine Sharp*
3. Invocation *Commissioner Christine Sharp*
4. Introduction of Guests
5. Adoption of Agenda
6. Approval of the Minutes of the May 16, 2013 Meeting
7. Public Input
8. Commissioners' Update *Commissioners*
9. Business:
 - A. Budget Update *Mr. Tom Waring*
 - B. Community Contracts *Mr. Tom Waring*
 - C. Election of Commission Officers *Chairman Fred Lynn*
 - D. Legislative Update *Mrs. Lois Park Mole*
 - E. Medicaid Updates *Dr. Beverly Buscemi*
 - F. Waiting Lists *Dr. Kathi Lacy*
 - G. Autism Spectrum Disorder: DSM5 Changes *Dr. Kathi Lacy*
 - H. Special Recognition *Dr. Beverly Buscemi*
10. State Director's Report *Dr. Beverly Buscemi*
11. Executive Session
12. Next Regular Meeting Date (July 18, 2013)
13. Adjournment

PLEASE SILENCE CELL PHONES DURING THE MEETING. THANK YOU.

Beverly A. H. Buscemi, Ph.D.
State Director
David A. Goodell
Associate State Director
Operations
Kathi K. Lacy, Ph.D.
Associate State Director
Policy
Thomas P. Waring
Associate State Director
Administration



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 P.O. Box 4706, Columbia, South Carolina 29240
 803/898-9600
 Toll Free: 888/DSN-INFO
 Website: www.dds.sc.gov

COMMISSION
Fred Lynn
Chairman
Deborah C. McPherson
Vice Chairman
Christine Sharp
Secretary
Katherine W. Davis
Harvey E. Shiver
Katherine Hannas Foley
Exa R. Ravenel

MEMORANDUM

TO: Advocates, Providers and DDSN Staff

FROM: Beverly A. H. Buscemi, Ph.D.
 State Director

RE: DDSN Budget Update

DATE: June 3, 2013

Last week the Senate completed their work on its budget for fiscal year 2013-2014. The Senate budget is very good for people with disabilities and includes new appropriations to DDSN in several important areas. The Senate budget appropriates almost \$5 million in new recurring state funds to DDSN. This clearly reaffirms their dedication to people with disabilities and the essential services they receive.

First, the Senate budget will continue current service levels. Second, it also responds to new federal compliance changes that required new state funds. This is very important to our system because without these new dollars to address the new requirements DDSN must meet, money would have to be taken from existing services. The Senate budget also addresses the need to provide quality care at today's costs and assures the safety and wellbeing of consumers. It also enhances in-home support services and will move more people off waiting lists. All of this funding will support individuals, help families and caregivers, and prevent unnecessary and expensive out-of-home placements. The Senate budget also provides for a one percent (1%) pay increase for state and provider employees. Please see the attached chart.

Once again, services for individuals with disabilities and their families were given highest priority in the Senate. We gladly acknowledge the strong support given by Senators and offer our gratitude. Special appreciation and recognition are well deserved by Senate Finance Committee Chairman Hugh Leatherman, and Health Subcommittee members, Senator Thomas Alexander (Chairman), Senator Billy O'Dell, and Senator Clementa Pinckney. Please take time to express your thanks to these important leaders. Also, make an opportunity to personally thank your Senators for their outstanding support and dedication to DDSN and the services provided across the state.

CC: DDSN Commission
DISTRICT I

P.O. Box 239
 Clinton, SC 29335-5428
 Phone: (864) 938-3497

Midlands Center - Phone: 803/945-7500
 Whitten Center - Phone: 864/844-7933

9995 Miles Jamison Road
 Summerville, SC 29485
 Phone: 843/832-5576

DISTRICT II

Coastal Center - Phone: 843/833-5750
 Pee Dee Center - Phone: 843/766-2600
 Santee Center - Phone: 843/432-4104

**South Carolina Department of Disabilities and Special Needs
Budget Request Considerations for FY 2013 - 2014**

	Program Need	Description of Need	Agency Request	House of Representatives	Senate
1.	Meet Federal Requirements/Initiatives	This request is necessary to comply with Federal requirements and new initiatives while maintaining current service levels for consumers receiving services this year. Federal compliance changes require new state funds to manage reduced reimbursement rates for administrative costs in waiver services and consumer room and board costs. New dual eligible initiative (both Medicaid and Medicare) requires new state funds to serve consumers age 65 years old or older who do not live in institutional settings. The Affordable Care Act (ACA) is facilitating movement away from paper records for all service providers resulting in new state funds needed to transition to electronic health records related to consumer care.	\$2,200,000	\$2,200,000	\$2,200,000
2.	Assure Safety and Quality of Care and Address Needs of Individuals Living with Aging Caregivers	This request is to assure safety and quality of care and address the growing residential service needs of individuals living with elderly caregivers. Service funding rates must be sufficient to cover the actual cost of care as a maintenance of effort to the providers of services. If the increased costs of gasoline, oil, electricity, food, medical professionals and other goods and services are not covered, eventually local providers will have to reduce the scope and quality of care below acceptable standards, eliminate the services for which there is insufficient funding, or stop providing services. This request will also provide necessary residential supports and services for 75 individuals living with caregivers aged 70 years old or older. As of June 30, 2012, there were over 1,100 individuals with severe disabilities being cared for by parents age 72 and over. Over 400 of these caregivers are 80 years old or older themselves and their sons and daughters with a disability are in their 50's or 60's. As the parent's age increases, the likelihood of their becoming disabled or dying increases significantly. When these fragile family arrangements fall apart, DDSN must respond to the health and safety risks of the individual with the disability who cannot care for him/herself.	\$3,850,000	\$569,762	\$569,762
3.	Boost the Continued Transition of Individuals and Maintain Provision of Quality Care to Consumers	This request is to maintain the provision of quality care as required. It represents the state's need to boost the continued transition of individuals with very complex needs from institutional (ICF/ID) settings to less restrictive community settings while maintaining quality care. DDSN has managed this movement to community settings within its own resources for the past 18 years. With increasing cost of care for those individuals leaving the regional centers, the department no longer has the funding capacity to maintain the quality of care at the regional centers as well as to insure the quality of care for those individuals moving into the community. New state funds are required to continue to meet the federal mandate of allowing those individuals desiring to live in the community to move out of the regional centers. This request will allow 50 individuals with the most complex medical and behaviorally challenging needs to move without jeopardizing their health and safety. This request will also allow the agency to expand the utilization of the Supports Intensity Scale (SIS) to better assess individuals' needs. This SIS is a validated and reliable tool which can enable the agency	\$3,600,000	\$1,100,000	\$1,100,000

**South Carolina Department of Disabilities and Special Needs
Budget Request Considerations for FY 2013 - 2014**

	Program Need	Description of Need	Agency Request	House of Representatives	Senate
		to ensure individual consumers are getting the right amount of supports and services and ensures equity across consumers by matching support levels to individual needs. This request also provides for the increased cost of providing care and addressing nursing and supervision needs of consumers. Quality cannot be reduced and staffing ratios must be maintained and meet compliance standards. Workforce issues must be addressed to recruit and retain quality staff who provide essential 24/7 nursing care and direct supervision and care of consumers.			
4.	Increase and Improve Access to In-Home Individual and Family Supports	This request is to prevent unnecessary and expensive out-of-home placements by providing individuals and their family caregivers with the supports necessary to maintain them in their homes. It represents the need to increase and improve access to respite services critical to helping parents and other family caregivers cope with the stress of providing daily care and supervision to their loved one. Supply and demand requires an increase in the hourly rate paid to respite providers to attract and retain more caregivers and providers on a statewide basis. This request will also provide approximately 700 individuals with severe disabilities on waiting lists with in-home supports and services necessary to keep them at home with family and prevent unnecessary and expensive out-of-home placements. As of June 30, 2012, there are about 3,300 consumers on the waiting list for Intellectual Disability/Related Disabilities Community Services and 390 awaiting Head and Spinal Cord Injury Community Services. There were also 1,300 individuals awaiting a day support service. This request also responds to South Carolina's need to fully fund over time the remaining cost of post-acute rehabilitation that enables people with traumatic brain or spinal cord injuries to obtain an appropriate level of specialized rehabilitation after the injury and acute hospital stay. Currently in the state, there is a serious gap in access to post-acute rehabilitation that is specialized for traumatic brain or spinal cord injuries. The estimated total cost of care would be \$68 million; however, \$56.5 million of this expense could be covered by private insurance, Medicare and other government reimbursements. This fiscal year, DDSN will have \$2,084,000 in recurring funding for this program. The State funding needed for the balance to cover the uninsured/underinsured and Medicaid State matching funds would be \$9,420,000. Due to the amount of funding needed, DDSN is only requesting \$500,000 in additional funding at this time. This amount would serve 10 additional individuals.	\$3,375,000	\$1,100,000	\$1,100,000
		Total	\$13,025,000	\$4,969,762	\$4,969,762

**SOUTH CAROLINA DEPARTMENT OF DISABILITIES AND SPECIAL NEEDS
AGENCY BUDGET FOR COMMUNITY CONTRACTS AND GRANTS
COMPARISON FY 2012-2013 TO FY 2013-2014**

<u>SERVICE</u>	<u>FY 2012-2013 AMOUNT</u>	<u>FY 2013-2014 AMOUNT</u>	<u>INCREASE (DECREASE)</u>	<u>% INCREASE (DECREASE)</u>
RESIDENTIAL SERVICES	\$ 227,314,067	\$ 236,471,844	\$ 9,157,777	4%
DAY SUPPORTS	54,467,099	56,263,862	1,796,763	3%
SERVICE COORDINATION	16,433,623	15,492,778	(940,845)	-6%
EARLY INTERVENTION	18,716,606	18,820,280	103,674	1%
PREVENTION	9,071,176	9,049,176	(22,000)	
INDIVIDUAL FAMILY SUPPORT SERVICES	62,268,683	62,229,010	(39,673)	0%
SPECIAL SERVICE CONTRACTS	235,000	235,000	-	0%
INTERAGENCY CONTRACTS	1,367,189	1,336,440	(30,749)	-2%
GRAND TOTAL	389,873,443	399,898,390	10,024,947	3%

**SOUTH CAROLINA DEPARTMENT OF DISABILITIES AND SPECIAL NEEDS
 AGENCY BUDGET FOR COMMUNITY CONTRACTS
 FISCAL YEAR 2013-2014**

<u>SERVICE</u>	<u>NUMBER INDIVIDUALS</u>	<u>AMOUNT</u>
RESIDENTIAL SERVICES	4,346	\$ 236,471,844
DAY SUPPORTS	8,013	56,263,862
SERVICE COORDINATION	11,717	15,492,778
EARLY INTERVENTION	5,256	18,820,280
PREVENTION	1,520	9,049,176
INDIVIDUAL/FAMILY SUPPORT SERVICES	8,690	62,229,010
SPECIAL SERVICE CONTRACTS	-	235,000
INTERAGENCY SERVICE CONTRACTS	-	1,336,440
GRAND TOTAL	<u><u>39,542</u></u>	<u><u>\$ 399,898,390</u></u>

**SOUTH CAROLINA DEPARTMENT OF DISABILITIES AND SPECIAL NEEDS
COMMUNITY CONTRACTS - RESIDENTIAL SERVICES
FISCAL YEAR 2013-2014**

	<u>Amount</u>	<u>Total Number Served</u>
<u>Residential Services</u>		
ICF (Intermediate Care Facilities)	40,858,108	550
CRCF (Community Residential Care Facilities)	24,080,512	370
CTH II (Community Training Home II)	150,974,222	2,453
CTH I (Community Training Home I)	4,661,611	161
SLP I (Supervised Living Program I)	2,957,410	216
SLP II (Supervised Living Program II)	10,079,721	472
Alternative Placements	2,860,260	124
	<u>\$ 236,471,844</u>	<u>4,346</u>
<u>Residential Services by Service Provider</u>		
Aiken	9,418,575	178
Aldersgate	192,552	4
Allendale-Barnwell	4,458,679	76
Anderson	4,442,793	104
Babcock Center	18,579,828	317
Bamberg	1,456,041	28
Beaufort	2,326,819	44
Berkeley Citizens	5,872,350	99
Burton Center	10,095,898	176
Calhoun	3,881,647	56
Care Focus	2,442,354	34
Charles Lea	14,704,199	282
Charleston	11,433,721	221
Carolina Children's Home	63,879	1
Cherokee	2,255,730	36
CHESCO	12,937,751	237
Chester/Lancaster	3,445,319	61
Clarendon	3,483,385	73
Colleton	2,770,147	54
Community Options	3,335,931	57
Darlington	2,632,360	45
Dorchester	6,257,873	123
Excalibur Youth Services	160,965	2
Fairfield	2,898,345	47
Florence	7,708,460	146
GEO Care	1,606,402	14
Georgetown	2,066,906	34
Greenville	12,521,541	244
Growing Homes	260,510	6
Hampton	743,158	12
Horry	3,553,818	77
Jasper	1,278,628	20
Kershaw	1,103,670	21
Laurens	6,743,022	125
Lee	3,045,316	61
LifeShare Management	179,461	3
Lutheran Family Services	1,563,530	22
Marion-Dillon	3,504,560	56
Marlboro	466,738	12
Mentor	15,582,920	189
MJRCI	781,947	10
Newberry	3,156,458	63
Oconee	3,565,492	90
Orangeburg	7,281,446	128
PADD	91,980	2
Pickens	4,479,327	84
Pine Grove	1,407,174	19
Richland-Lexington	904,008	32
SAFY	245,292	6
SC Department of Social Services	431,529	94
Sumter	5,514,496	99

**SOUTH CAROLINA DEPARTMENT OF DISABILITIES AND SPECIAL NEEDS
 COMMUNITY CONTRACTS - RESIDENTIAL SERVICES
 FISCAL YEAR 2013-2014**

	<u>Amount</u>	<u>Total Number Served</u>
UCP of SC	4,518,453	81
Union	2,348,213	44
Williamsburg	1,219,684	23
Willowglen Academy	811,813	13
YAP	523,413	13
York	7,715,340	148
Total	<u><u>\$ 236,471,844</u></u>	<u><u>4,346</u></u>

<u>Residential Services by Provider Type</u>	<u>Amount</u>	<u>%</u>	<u>Number Served</u>	<u>%</u>
Private Providers	33,768,576	14%	476	11%
Public Providers	202,703,268	86%	3,870	89%
	<u><u>\$ 236,471,844</u></u>		<u><u>4,346</u></u>	

**SOUTH CAROLINA DEPARTMENT OF DISABILITIES AND SPECIAL NEEDS
COMMUNITY CONTRACTS - DAY SERVICES
FISCAL YEAR 2013-2014**

<u>Day Supports</u>	<u>Amount</u>	<u>Total Number Served</u>
Adult Day Supports	51,129,050	7,286
Adult Day Supports - Regional Center Consumers	86,188	10
Child Daycare Centers	317,594	33
HASCI Community Opportunities	554,191	200
Individual Rehabilitation Supports - HASCI	1,125,000	100
Supported Employment	3,051,839	384
	<u>\$ 56,263,862</u>	<u>8,013</u>

Day Supports by Service Provider

Aiken	2,690,718	311
Allendale-Barnwell	842,016	98
Anderson	1,945,355	200
Babcock Center	5,182,622	643
Bamberg	429,600	50
Beaufort	824,832	134
Berkeley Citizens	1,460,640	170
Burton Center	2,448,720	285
Calhoun	558,480	65
Charles Lea	3,946,386	459
Charleston	4,327,848	532
Cherokee	584,256	68
CHESCO	2,285,888	256
Chester/Lancaster	988,080	115
Clarendon	1,082,592	125
Community Options	71,928	39
Colleton	730,320	85
Darlington	730,320	85
Dorchester	1,279,216	149
Fairfield	412,416	48
Florence	1,969,997	227
Georgetown	781,872	91
Goodwill Industries Day Supports	91,520	11
Greenville	3,584,324	445
Hampton	438,192	51
Helping Hands Adult Day Care, Inc	25,776	3
Horry	1,667,480	223
Jasper	569,112	65
Kershaw	584,256	68
Laurens	1,271,616	148
Lee	629,874	73
Marion-Dillon	1,151,328	134
Marlboro	343,680	40
Newberry	884,976	103
Oconee	1,142,736	133
Orangeburg	1,666,848	194
Pickens	1,185,696	138
Program for Exceptional People	326,496	38
Richland-Lexington	347,392	26
SC Special Olympics	250,000	1,345
Sumter	1,194,288	139
UCP of SC	292,128	34
Union	524,112	61
USC - School of Medicine	15,000	
Williamsburg	738,912	86
York	1,635,138	205
York Adult Enrichment Centers	128,880	15
Total	<u>\$ 56,263,862</u>	<u>8,013</u>

Day Supports by Provider Type

	<u>Amount</u>	<u>%</u>	<u>Number Served</u>	<u>%</u>
Private Providers	1,186,728	2%	1,485	19%
Public Providers	55,077,134	98%	6,528	81%
	<u>\$ 56,263,862</u>		<u>8,013</u>	

**SOUTH CAROLINA DEPARTMENT OF DISABILITIES AND SPECIAL NEEDS
COMMUNITY CONTRACTS - SERVICE COORDINATION
FISCAL YEAR 2013-2014**

<u>Service Coordination</u>	<u>Amount</u>	<u>Total Number Served</u>
Aiken	627,288	476
Allendale-Barnwell	138,071	105
Anderson	403,569	306
Bamberg	119,661	91
Beaufort	239,323	182
Berkeley	378,708	288
Bright Start	423,417	322
Burton	436,478	331
Calhoun	122,291	93
Channel the Beacon	30,244	23
Charles Lea	800,932	608
Charleston	986,744	748
Cherokee	156,480	119
CHESCO	299,811	228
Chester/Lancaster	331,281	251
Clarendon	213,024	162
Clear Vision Community Services	21,039	16
Colleton	156,480	119
Darlington	311,468	235
Dorchester	357,669	272
DSN Advocates	114,402	87
Fairfield	107,827	82
Florence	538,116	408
Georgetown	147,276	112
Greenville	902,815	685
Hampton	80,213	61
Hermione Flowers	24,984	19
Horry	429,114	325
Jasper	146,591	111
Kershaw	230,118	175
Laurens	301,126	229
Lee	122,291	93
Marion-Dillon	249,842	190
Marlboro	123,606	94
Newberry	189,354	144
Oconee	215,653	164
Orangeburg	427,308	324
Pattison's Dream Academy	14,465	11
Pickens	258,468	196
Richland-Lexington	2,346,683	1,736
SC Autism Society	656,165	499
Sumter	314,275	239
The Arc of SC	176,205	134
Union	140,701	107
Upstate Support Services	44,709	34
Williamsburg	143,331	109
York	493,162	374
	<u>\$ 15,492,778</u>	<u>11,717</u>

<u>Service Coordination by Provider Type</u>	<u>Amount</u>	<u>%</u>	<u>Number Served</u>	<u>%</u>
Private Providers	1,505,630	10%	1,145	10%
Public Providers	13,987,148	90%	10,572	90%
	<u>\$ 15,492,778</u>		<u>11,717</u>	

**SOUTH CAROLINA DEPARTMENT OF DISABILITIES AND SPECIAL NEEDS
COMMUNITY CONTRACTS - EARLY INTERVENTION
FISCAL YEAR 2013-2014**

<u>Early Intervention</u>	<u>Amount</u>	<u>Total Number Served</u>
Ahead Start	909,400	226
Aging With Flair, LLC	992,788	337
Aiken	369,769	98
Allendale-Barnwell	214,465	37
Anderson	315,376	109
Bamberg	51,768	12
Beaufort	369,769	106
Berkeley	211,840	74
Bright Start	2,577,190	670
Brilliant Beginnings	434,187	86
Burton	178,293	58
Calhoun	29,716	5
Carolina Behavior & Beyond	381,601	98
Charles Lea	178,293	58
Charleston	263,608	76
Cherokee	118,862	30
CHESCO	59,431	9
Chester/Lancaster	118,862	37
Clarendon	59,431	15
Colleton	118,862	26
Creative Development	114,861	32
Darlington	208,009	60
Dorchester	292,117	81
Easter Seals	2,781,485	739
Epworth	103,536	39
Fairfield	89,147	16
Florence	263,608	96
Georgetown	118,862	38
Greenville	633,377	169
Hampton	118,862	21
Hands on Development Services	197,575	55
Horry	421,537	123
I Shine, LLC	390,087	96
Jasper	59,431	11
Kershaw	29,716	10
Kids in Development Services	373,684	193
Kids 1st	126,220	44
Laurens	184,885	48
Lee	59,431	19
Marion-Dillon	211,840	68
Marlboro	89,147	20
Newberry	118,862	33
Oconee	237,724	70
Orangeburg	263,608	60
Palmetto Early Intervention, LLC	81,268	35
Pattison's Dream Academy	224,477	85
Pediatric Therapy - A+ Kids	394,630	105
Pickens	59,431	14
Playworks	528,535	123
Powerful Kid Builders, LLC	19,618	3
Promising Futures	81,338	14
Richland-Lexington	633,377	166
Sumter	118,862	37
Therapy Solutions	289,090	89
Tina Greene & Associates	113,451	27
Unassigned Caseload	168,800	44

**SOUTH CAROLINA DEPARTMENT OF DISABILITIES AND SPECIAL NEEDS
 COMMUNITY CONTRACTS - EARLY INTERVENTION
 FISCAL YEAR 2013-2014**

	<u>Amount</u>	<u>Total Number Served</u>
Union	89,147	28
Upstate Support Services	145,898	34
Vision Institute of SC	56,429	36
Williamsburg	59,431	20
York	315,376	88
	<u>\$ 18,820,280</u>	<u>5,256</u>

<u>Early Intervention by Provider Type</u>	<u>Amount</u>	<u>%</u>	<u>Number Served</u>	<u>%</u>
Private Providers	11,486,148	61%	3,210	61%
Public Providers	7,334,132	39%	2,046	39%
	<u>\$ 18,820,280</u>		<u>5,256</u>	

**SOUTH CAROLINA DEPARTMENT OF DISABILITIES AND SPECIAL NEEDS
COMMUNITY CONTRACTS
FISCAL YEAR 2013-2014**

<u>Prevention</u>	<u>Amount</u>	<u>Total Number Served</u>
Greenwood Genetics	9,034,176	520
Injury Prevention Initiatives	15,000	1,000
	<u>\$ 9,049,176</u>	<u>1,520</u>

<u>Individual/Family Support Services</u>	<u>Amount</u>	<u>Total Number Served</u>
Caregiver Relief Program - Support Services	487,933	293
Community Supports Waiver - Support Services	3,718,620	2,312
Head & Spinal Cord Injury Waiver - Support Services	17,606,713	615
Intellectual & Developmental Disabilities Waiver - Support Services	14,554,644	2,228
Individual/Family Support and Respite	1,236,100	2,257
Pervasive Developmental Disorder Program	22,325,000	950
Preventive Health	200,000	
TBI/SCI Post-Acute Rehabilitation	2,100,000	35
	<u>\$ 62,229,010</u>	<u>8,690</u>

<u>Special Service Contracts</u>	<u>Amount</u>	<u>Total Number Served</u>
ARC of South Carolina - Support Activities For Families	25,000	
Brain Injury Association of SC - Support Activities For Consumers and Families	62,500	
Family Connection of SC - Support Network For Families	65,000	
SC Autism Society - Support Activities For Families	20,000	
SC Spinal Cord Injury Assoc. - Support Network For Peers	62,500	
	<u>\$ 235,000</u>	<u>-</u>

<u>Interagency Service Contracts</u>	<u>Amount</u>	<u>Total Number Served</u>
Children's Trust Fund - Safe Kids Calendar	5,000	
Greenville Hospital System - Evaluation & Assessment Program	58,372	
LLR - State Fire Marshall	115,000	
Pro-Parent, Inc - Educational Training Workshops	20,650	
SC Arts Commission - Arts Training for Individuals with Disabilities	6,700	
USC - Center for Disability Research - Attendant Care Training	187,431	
USC - Center for Disability Research - Toll Free Access/Eligibility Screening/Professional Development Training	849,161	
USC - Department of Pediatrics - Medical Policy Advisor	86,626	
USC - Department of Pediatrics - On Call Physician Services	7,500	
	<u>\$ 1,336,440</u>	<u>-</u>

GRAND TOTAL ALL COMMUNITY CONTRACTS	<u><u>\$ 399,898,390</u></u>	<u><u>39,542</u></u>
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MOVEMENT OF
WAIVER WAITING LISTS
JULY 1, 2012 TO MAY 31, 2013

WAIVER WAITING LIST REDUCTION	SLOTS AWARDED	NEXT PERSON TO BE AWARDED A SLOT ON THE WAITING LIST WAS THIS NUMBER ON JULY 1, 2012
COMMUNITY SUPPORT	393	432
PERVASIVE DEVELOPMENT DISORDER	378	387
HEAD AND SPINAL CORD INJURY	29	41
INTELLECTUAL DISABILITY/RELATED DISABILITY	59	46
TOTAL	859 new people	906 total movement
Between July 1, 2011 to June 30, 2012	1,050 new people	1,350 total movement

South Carolina Department Of Disabilities Special Needs
 Critical List Activity For 7/1/2012 Through 5/31/2013

	As Of 7/1/2012 -----	Added During The Period -----	Removed During The Period -----	As Of 5/31/2013 -----
Coastal	6	57	61	2
Midland	24	63	74	13
Pee Dee	5	40	39	6
Piedmont	15	72	68	19
	-----	-----	-----	-----
Total:	50	232	242	40
	=====	=====	=====	=====

New Autism Spectrum Disorder Criteria

DSM-IV	DSM-5
Disorders	
Autistic Disorder Asperger's Disorder Childhood Disintegrative Disorder Pervasive Developmental Disorder Not Otherwise Specified	Autism Spectrum Disorder
Characteristics/Symptom Domains	
<ul style="list-style-type: none"> • Qualitative impairment in social interaction • Qualitative impairments in social communication • Restricted repetitive and stereotyped patterns of behavior, interest, and activities 	<ul style="list-style-type: none"> • Qualitative impairments in social communication social interaction • Restricted, repetitive patterns of behavior, interests, or activities
Severity Levels	
N/A	<ul style="list-style-type: none"> • Level 1: Requiring Support • Level 2: Requiring Substantial Support • Level 3: Requiring Very Substantial Support

**South Carolina Department of Disabilities and Special Needs
Autism Division**

DSM 5 Changes and the Impact on Autism Services Provided by DDSN

Changes to the Diagnostic and Statistical Manual of Mental Disorders

The American Psychiatric Association (APA) revised the fifth edition of its Diagnostic and Statistical Manual of Mental Disorders (DSM – 5). The manual is used by clinicians nationwide to diagnose mental health conditions. One of the most important changes in the DSM – 5 is to Autism Spectrum Disorder (ASD). Per the APA, the revised diagnosis represents a new, more accurate, and medically and scientifically useful way of diagnosing individuals with autism related disorders.

Using DSM – IV, individuals could be diagnosed with four separate disorders: Autistic Disorder, Asperger’s Disorder, Childhood Disintegrative Disorder, or Pervasive Developmental Disorder Not Otherwise Specified. Researchers found that these separate diagnoses were not consistently applied across different clinics and treatment centers. Based on these findings, the APA’s Neurodevelopmental Work Group recommended the DSM – 5 criteria for ASD to be a better reflection of the state of knowledge about autism. The Work Group believes a single umbrella disorder will improve the diagnosis of ASD without limiting the sensitivity of the criteria, or substantially changing the number of individuals being diagnosed.

The DSM-5 criteria were tested in real-life clinical settings as part of DSM-5 field trials, and analysis from that testing indicated that there will be no significant changes in the prevalence of the disorder. More recently, the largest and most up-to-date study, published by Huerta, et al, in the October 2012 issue of American Journal of Psychiatry, provided the most comprehensive assessment of the DSM-5 criteria for ASD based on symptom extraction from previously collected data. The study found that DSM-5 criteria identified 91 percent of children with clinical DSM-IV PDD diagnoses, suggesting that most children with DSM-IV PDD diagnoses will retain their diagnosis of ASD using the new criteria. (*APA DSM-5 Autism Spectrum Disorder Fact Sheet*)

The revision in the DSM - 5 introduces two fundamental changes in the diagnosis of autism spectrum disorder.

1. It collapses previously distinct autism subtypes, including autistic disorder, Pervasive Developmental Disorder Not Otherwise Specified, and Asperger’s syndrome, into one unifying diagnosis of Autism Spectrum Disorder (ASD).
2. The three symptom domains of social impairment, communication deficits, and repetitive/restricted behaviors will become two: social communication impairment and repetitive/restricted behaviors.

Impact on Autism Services Provided by DDSN

Prior to the revised DSM, individuals who were diagnosed with PDD-NOS or Asperger's were unable to receive services from DDSN. DDSN will now serve all individuals with an ASD diagnosis if the individual meets the DDSN eligibility criteria. The changes posed by the DSM – 5 will not alter the DDSN eligibility process or how the Autism Division evaluates individuals suspected of having an ASD. The Autism Division will continue to use age appropriate screening tools and evaluation instruments that represent current best practices.

Previously Diagnosed Individuals

- If the Autism Division evaluated an individual using the DSM – IV criteria and the individual received the diagnosis of an ASD other than autism (i.e. PDD-NOS, Asperger's), the individual will not be required by DDSN to undergo another evaluation to determine the presence of an ASD. However, the individual will be required to go through the eligibility process if they desire services from DDSN.
- If an individual or the parents of an individual are interested in DDSN services and the individual received a diagnosis of PDD-NOS or Asperger's from an entity other than the Autism Division, the individual must go through the DDSN eligibility process. Per the current eligibility process, the Autism Division will review all relevant documentation to verify the diagnosis of an ASD. If the documentation does not support an ASD diagnosis, the individual must be evaluated prior to eligibility being determined.

Eligibility Process

- Individuals interested in receiving services from DDSN who were previously diagnosed with an ASD other than autism, should call the Information and Referral toll-free number (1-800-289-7012). The screener should be informed that the individual was previously diagnosed with PDD-NOS or Asperger's and is now seeking DDSN eligibility. The screener will gather the supporting documentation and offer a choice of Service Coordination providers. The selected Service Coordination provider will assist the individual with the eligibility process.

Individuals Receiving PDD Services

- Changes in the DSM – 5 will not affect the manner in which PDD services are provided by DDSN. However, individuals participating in the PDD Program who are interested in DDSN services beyond those provided in the PDD Program will be required to go through the DDSN eligibility process if they have not yet been determined eligible. The individual's Case Manager will be responsible for initiating eligibility determination if requested by the individual's parent(s).