

# **SOUTH CAROLINA COMMISSION ON DISABILITIES AND SPECIAL NEEDS**

## **MINUTES**

February 18, 2016

The South Carolina Commission on Disabilities and Special Needs met on Thursday, February 18, 2016, at 10:00 A.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:

Bill Danielson, Chairperson

Fred Lynn, Vice Chairman

Eva Ravenel, Secretary

Mary Ellen Barnwell

Katherine Davis

Gary Lemel

Vicki Thompson (Via Teleconference)

### DDSN Administrative Staff

Dr. Buscemi, State Director; Mr. David Goodell, Associate State Director, Operations; Mr. Tom Waring, Associate State Director, Administration; 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 Sign-In Sheet)

### Pee Dee Regional Center (via videoconference)

(See Attachment 3 Sign-In Sheet)

### Pickens County DSN Board (via videoconference)

(See Attachment 4 Sign-In Sheet)

### Whitten Regional Center (via videoconference)

(Unable to participate due to a power outage)

### York County DSN Board (via videoconference)

(See Attachment 6 Sign-In Sheet)

### News Release of Meeting

Chairperson Danielson called the meeting to order and Commissioner Ravenel read a statement of announcement about the meeting that was 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 Lemel gave the invocation.

### Adoption of the Agenda

The Commission adopted the February 18, 2016 Meeting Agenda by unanimous consent. (Attachment A)

### Approval of the Minutes of the January 21, 2016 Commission Meetings

The Commission approved the January 21, 2016 Commission Meeting minutes with a change by unanimous consent.

### Public Input

Ms. Deborah McPherson of Columbia spoke. Ms. Valarie Bishop, Executive Director, DD Council, spoke on behalf of the DD Council.

### Commissioners' Update

There were no updates.

### Policy Committee Report

Commissioner Davis gave an update of the Policy Committee meeting that was held prior to the Commission meeting. Upon recommendation of the Policy Committee, Commissioner Davis made the motion to amend the Commission Policy, 800-04-CP Staff Linkage Delegation, to include an additional item number 6. The motion was seconded and passed. (Attachment B)

### Employment Showcase

Mr. Ralph Courtney, Executive Director, Aiken County Board of Disabilities, introduced Justin Davis. Mr. Davis shared his experiences with various job positions he holds through the employment programs/supported work groups that are offered through the Board. (Attachment C)

### Introduction of Pending Commission Members

Dr. Buscemi introduced DDSN's two new pending Commission Members, Ms. Catherine Fayssoux of Greenville, SC and Dr. Samuel Broughton of Florence, SC.

### Consumer Incidents

Dr. Buscemi spoke of the increase in the number of consumer incidents related to aggression and the different patterns that may be causing the increase. She shared examples of DDSN recommendations for follow-up with providers which included increased staffing to support consumers in day or residential locations or on community outings, development of new/revised policies, additional/refresher MANDT or crisis intervention training for staff, sensitivity training, rights/due process, and revision of supervision plans/behavior support. (Attachment D)

Commissioner Ravenel requested to comment on today's public input comments regarding Mentor. Discussion followed regarding concerns of Mentor. Dr. Buscemi stated that Mentor has made many changes in the last few months so the incidents are less likely to happen again.

### ASD Services Update

#### ASD Services Update

Dr. Buscemi shared DHHS' budget presentation to the House Ways and Means Healthcare Subcommittee and spoke of the ASD services that were included. She stated a draft state plan language had been submitted to CMS several months ago for review and comment. She spoke of the steps to get the program rolling to add ASD services to the state plan. Dr. Buscemi shared the DHHS Bulletin that states DDSN would be the administrative entity for this service plan. (Attachment E and F)

### Waiting List Reduction Efforts

Dr. Buscemi shared waiting list data through February 1, 2016 as of February 8, 2016. She also spoke of the critical needs waiting list report. Dr. Buscemi shared bar charts regarding the waiting lists that were presented to the House Ways and Means Healthcare Subcommittee. She stated that as many individuals are taken off the waiting lists, that many are being added. Dr. Buscemi stated we are gaining momentum and the waiting lists have been cut in half. (Attachment G)

Commissioner Ravenel spoke of the breakdown of the eligibility process. Commissioner Ravenel made the motion to have the providers conduct the intake process. The motion was seconded. Discussion followed. Dr. Buscemi stated that the agency would have to find funding to pay providers as the intake process is not Medicaid billable due to changes made by DHHS several

years ago. She spoke of the process and stated intake does not happen at the same time as waiver enrollments in the majority of cases. Eligibility is determined prior to slot allotment in the majority of cases. Dr. Buscemi strongly recommended to the Commission not to follow up on the motion without further discussion. Commissioner Thompson called for question. Discussion followed. Commissioner Thompson withdrew the call for the question for further discussion. Commissioner Thompson moved to amend the motion to allow for provider choice. Commissioner Lemel moved to table the motion. Discussion followed. Commissioner Lemel motioned to table the motion and have the Chairperson appoint a committee to report back to the Commission. Upon voting, the ayes have it, and the motion to table the motion was carried.

### Financial Report

Mr. Waring gave an analysis of the agency's financial activity through January of 2016 and the agency's current financial position. The agency's operating funds balance as of January 31, 2016 is \$92,124,818. He also provided a SCEIS report categorized by program which reflects budget verses actual expenditures through January. From a request made at January's Commission Meeting, Mr. Waring provided a narrative for BabyNet and PDD expenditures to date and a recap of 2015 expenditures to 2015 spending plan. Discussion followed. (Attachment H)

### Administrative Contract

The administrative contract between DHHS and DDSN was discussed. Dr. Buscemi stated some of the language is still being reviewed. The contract language applies to fiscal year 2015. Discussion followed regarding the funding. Dr. Buscemi stated that administrative costs related to the four waivers are operated by DDSN. Other administrative cost for non-waiver services would not be reflected in this contract. DDSN cannot implement nor plan until CMS approves.

### Proviso 36.13

Dr. Buscemi gave a recap of the proviso since it passed. Mr. Soura, DHHS Director, has stated that DHHS IT staff had not previously been brought into the direct billing discussion. The rate structure has to be completed before direct billing can be implemented and DHHS IT staff will be key to this implementation. Commissioner Thompson requested information on what providers have been compliant with Medicaid over the last three years. Dr. Buscemi stated it would be a high volume of documents. She will have staff to look at what we have and what can be compiled in order to be helpful. (Attachment I)

### State Director's Report

Dr. Buscemi reported on the following:

The ABLE legislation was referred to the Senate from the House. It will be housed in the Treasurer's Office.

The Anderson County DSN Board hired Mr. Tyler Rex as the new Executive Director. Mr. Rex previously worked for Oconee County DSN Board. He should be on board by March 1, 2016.

With the two pending commissioners that will possibly be on board by March, Katherine Davis and Fred Lynn will be acknowledged for their service at the March Commission Meeting.

The tentative date for the Senate Healthcare Subcommittee budget presentation is Wednesday, March 23, 2016 at 9:30 a.m.

The providers are to complete the room and board calculations by end of February. The new room and board policy has not been finalized. DDSN met with both provider organizations over the past few weeks to talk about concerns. DDSN plans to hold individual or small group meetings with providers to explain how this is best implemented. There are misunderstandings about how to include expenditures. Mr. Waring stated an invite to all providers will go out inviting participants in a training session.

The strategic planning survey for families and consumers has now been closed. Analysis of the surveys is being conducted. The plan is for the Commission to meet on the afternoon of Wednesday, March 16, 2016, in advance of the March 17, 2016 Commission Meeting to review strategic planning efforts.

Dr. Buscemi will be proposing a Finance and Audit Committee meeting the morning prior to the March Commission Meeting.

A public announcement will be released March 14, 2016 announcing Southern Wesleyan University and DDSN collaborating on a housing/work program.

### Executive Session

On motion of Commissioner Ravenel, seconded and passed, the Commission entered into Executive Session to discuss the State Director's performance evaluation.

### Enter into Public Session

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

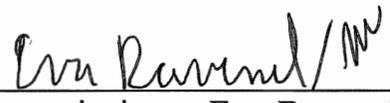
Adjournment

With no further business, Commissioner Danielson adjourned the meeting.

Submitted by,

  
Sandra J. Delaney

Approved:

  
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Commissioner Eva Ravenel  
Secretary

**Commission Meeting**

February 18, 2016

**Guest Registration Sheet**

**(PLEASE PRINT) Name and Organization**

1. Lisa Weeks - DDSN
2. Marty Rawls - DDSN
3. Aike Moss Calhoun DSNB
4. Deborah + Heather Mepheson Richland county
5. Judy Johnson Beblow
6. Stephanie Williams Calhoun DMB
7. David Rotholz USC/CDR
8. BRIAN COPE ENLITEN
9. Valarie Bishop SCDDA
10. Angela Jaxildone SCSCIA
11. ~~Velosh Coombes~~ Tri-Development
12. Justin dakes Tri development
13. Mike Bell Arc Midlands
14. Jennifer VanCleave LGOA
15. KENNEDY YACOBI DDJN
16. Mike Keith Marion-Dillon DSN
17. Nancy McCormick Protection & Advocacy
18. Joe White Cherokee County DSNB
19. Keairne Johnston SC HSP
20. Dorothy Good Community Options

# SC COMMISSION ON DISABILITIES AND SPECIAL NEEDS

## Commission Meeting

February 18, 2016

### Guest Registration Sheet

**(PLEASE PRINT)**

Name and Organization

- |     |                     |                         |
|-----|---------------------|-------------------------|
| 21. | Becky Perkins       | Bright Start            |
| 22. | Bob Jones           | Newberry DSNB           |
| 23. | Rick Richardson     | " "                     |
| 24. | Ben Orner           | DDSN                    |
| 25. | Suzanne Hymar       | Project HOPE Foundation |
| 27. | Mary Pate           | VCBDSN                  |
| 28. | Ann Dalton          | SCDDSN                  |
| 29. | Daniel Dard         | Antim                   |
| 30. | Douglas Finkelstein | Arc Midlands            |
| 31. | Shondala Hall       | DDSN                    |
| 32. | Kathleen Roberts    | Willitten Center        |
| 33. | Chuck Armer         | DDSN                    |
| 34. | Margie Williams     | Arc of SC.              |
| 35. | Amanda Pollack      | " "                     |
| 36. | Joyce Davis         | BIASC                   |
| 37. | Cassidy Evans       | DHHS                    |
| 38. | George Marky        | DHHS                    |
| 39. | Theresa Wynn        | SC DSNB                 |
| 40. | Debra Pao           | CCBOSN                  |

- 41 - Zenobia McCorley
- 42 - Katie Fayssouly
- 43 - Sam Broughton

KCBDSN

SC COMMISSION ON DISABILITIES AND  
Commission Meeting  
February 18, 2016

Attachment 2

Guest Registration Sheet

**(PLEASE PRINT)** Name and Organization

1. Sloan Todd Path Finders
2. Suzanne Johnson Parents + Guardians SC PADD
3. Ronda Ritchie DDSN Dist. II
4. Felita Martino DDSN Dist. II
5. Hester S. Wannamaker DDSN Dist. II
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SC COMMISSION ON DISABILITIES AND  
Commission Meeting  
February 18, 2016

Attachment 3

Guest Registration Sheet

**(PLEASE PRINT)**

Name and Organization

1. Deborah K. Smith DDSN - DISTRICT II
2. Ruth Blocker Darlington County DSN Bd.
3. Ryan Way Clarendon County DSN Bd.
4. Susan John Horry Co. DSN.
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SC COMMISSION ON DISABILITIES AND  
Commission Meeting  
February 18, 2016

Attachment 4

**Guest Registration Sheet**

**(PLEASE PRINT)** Name and Organization

- 1. Elaine M. Thena PCBDSN
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**SC COMMISSION ON DISABILITIES AND  
Commission Meeting  
February 18, 2016**

***Guest Registration Sheet***

**(PLEASE PRINT)** Name and Organization

- 1. Janice Fowler - YCBDSN
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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**

**February 18, 2016**

**10:00 A.M.**

1. Call to Order *Chairperson Bill Danielson*
2. Welcome - Notice of Meeting Statement *Commissioner Eva Ravenel*
3. Invocation *Commissioner Gary Lemel*
4. Introduction of Guests
5. Adoption of Agenda
6. Approval of the Minutes of the January 21, 2016 Commission Meeting
7. Public Input
8. Commissioners' Update *Commissioners*
9. Policy Committee Report *Commissioner Katherine Davis*
10. Business:
  - A. Employment Showcase *Mr. Ralph Courtney  
Executive Director  
Aiken County Board of Disabilities*
  - B. Consumer Incidents *Mrs. Susan Beck*
  - C. ASD Services Update *Ms. Susan Beck*
  - D. Waiting List Reduction Efforts *Ms. Susan Beck*
  - E. Financial Report *Mr. Tom Waring*
  - F. Administrative Contract *Dr. Beverly Buscemi*
  - G. Proviso 36.13 *Dr. Beverly Buscemi*
11. State Director's Report *Dr. Beverly Buscemi*
12. Executive Session
13. Next Regular Meeting (March 17, 2016)
14. Adjournment

Reference: Number:	800-04-CP
Title of Document:	South Carolina Department of Disabilities and Special Needs Commission Staff Linkage Delegation
Date of Issue:	January 18, 2007
Effective Date:	January 18, 2007
Last Review Date:	February 18, 2016
Date of Last Revision:	February 18, 2016 <b>(REVISED)</b>

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The South Carolina Department of Disabilities and Special Needs (DDSN) Commission authority delegated to staff is delegated through the State Director so that all authority and accountability of staff - so far as the Commission is concerned - is considered to be the authority and accountability of the State Director.

Accordingly:

1. The Commission requires the State Director to achieve certain results for certain recipients at a certain cost through the establishment of "Ends Policy," and limits the latitude the State Director may exercise in all "means" through the establishment of "Executive Limitations Policy."
2. As long as the State Director uses any reasonable interpretation of the Commission's "Ends and Executive Limitations" policies, the State Director is authorized to establish all directives, make all decisions, take all actions, establish all practices, and develop all activities.
3. As long as a particular delegation is in place, it will be respected by the Commission. Any unresolved concerns with interpretation of policies will be addressed through clarifying amendment of those policies.

4. Only decisions of the Commission acting as a body are binding upon the State Director. Decisions, instructions or requests of individuals are not binding on the State Director, except as specifically authorized by the Commission.
5. The Commission, in delegating its authority to promulgate directives that accurately express and apply federal and state laws and regulations, and Commission policies, retains its responsibility to govern the Department. Of particular concern to the Commission are directives regarding:
  - a. Department responsiveness in person-centered services as expressed in a money-follows-the-individual concept/practice and consumer choice of provider;
  - b. Establishment of family/consumer advisory councils by county DSN boards and private service providers, and regional and local human rights advisory groups;
  - c. Quality management of administration, finances, program and service delivery functions such as standards, licensing/certification and reviews, independent quality review, consumer/family surveys, annual independent financial audits, periodic compliance audits, special audits, critical incident reporting/tracking, abuse/neglect/exploitation reporting/follow-up;
  - d. Inclusion in appropriate directives those statements listed in rescinded Commission policies 106-03-CP: Commission Policies Relative to County DSN Boards/Private Agencies; 107-01-CP: Organization and General Duties of the S.C. Commission on Disabilities and Special Needs; 108-01-CP: General Duties of the Office of the State Director; 509-01-CP: Commission Policies Relative to Disabilities and Special Needs Services and Programs; and 400-13-CP: Private Practice or Employment by Employees of the Department, but not listed specifically in commission policies adopted to establish Policy Governance on January 18, 2007, but determined by the Commission to be appropriate “means” to be addressed by department directive.
6. Directives promulgated pursuant to this policy govern:
  - a. Contract Providers;
  - b. DSN Boards;
  - c. SC DDSN staff.

No directive is to be interpreted to limit Commission members’ rights as citizens or hinder their fiduciary duties.

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Fred Lynn  
Vice Chairman  
(Originator)

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William Danielson  
Chairman  
(Approved)

**Places Where People Served by Tri-Development Center Are  
Using Their Abilities in Supported Work Groups**

Janitorial Services:

Area Churches  
Army Reserve Training Center  
City of Aiken Offices  
Northside Redevelopment Development Initiative's Vacant Properties for Sale  
United Way of Aiken County  
Savannah River Nuclear Solutions  
Savannah River Federal Credit Union  
Private Home  
Public Transportation Office  
Aiken Fairground Facilities

Housekeeping

Baymont Inn and Suites (100%)  
Inn at Hounds Lake (100%)  
Best Western (50%)  
Sleep Inn (50%)

Grounds Maintenance Services:

Aiken County Government  
Aiken County Libraries  
Army Reserve Training Center  
Aiken Housing Authority  
Area Churches  
Numerous businesses  
Private Homes  
Head Start Facilities

Vehicle and Other Cleaning Services:

Tri-Development Center's 100+ vehicles  
Buses of Best Friend Express (public transportation)  
AllStar Tents and Events

Trash Pickup Services

## Competitive Employment

The following is a list of locations where we have individuals working competitively today:

Aiken County Public Schools

Amick Farms

Aramark at USCA

Bi-Lo

Food Lion

Great Creations

McDonald's

Screen Print Factory

WalMart

Tri-Development Center

(In addition, a large number of individuals we serve who are on our mobile crews and enclaves are receiving competitive wages for their work.)

A couple of interesting facts:

We have one individual who has been working at Bi-Lo as a bagger for 31 years. He now serves as the lead bagger.

Another individual has been working fulltime at WalMart for 19 years and has full benefits including WalMart stock.

### Increase in Critical Incident Reports with Aggression

There was a nearly 22% increase in the number of Critical Incident Reports related to Aggression from FY14 to FY15. This was a difference of 32 reports, representing a .4% increase in reports from among the total number of day and residential service recipients (unduplicated). The trend appears to continue into FY16. The top 5 providers reporting Critical Incident Reports with aggression accounted for 33 additional reports in FY15, over what they had reported in FY14.

Upon review of the provider data, there was 1 consumer that had 10 Critical Incident Reports related to aggression. One consumer had 5 reports, Five had 3 reports, and three had 2 reports. The other Critical Incidents related to aggression were single incidents with no repeat pattern of behavior. For the consumer that had 10 incidents, 8 were within a four month period and there was significant collaboration with the local Mental Health provider. This person was later admitted to a Regional Center.

DDSN has staff dedicated to the review of statewide incident management data. All reports are reviewed for completeness and consistency. Staff ensure reporting procedures are consistent with DDSN policy. Reports are reviewed to ensure appropriate disciplinary actions, recommendations for training and additional quality management actions to prevent recurrence. Reports are also tracked for various details, including the number of reports, by type, for each provider and the average age of consumers involved in incidents. Critical Incident numbers do not represent unduplicated consumers. There are usually two people, sometimes more, for each incident of aggression reported.

In addition, for Critical Incidents involving aggression, DDSN staff specifically review whether any injury occurred as a result of the aggression, the cause/suspected cause of the aggression/assault, whether law enforcement was contacted, the outcome of the law enforcement notification, whether any modifications were required to a behavior support plan or if there were any medication changes.

Examples of DDSN recommendations for follow-up with providers include the following:

- Increased staffing to support consumers in day or residential locations or on community outings.
- Development of new/ revised policies
- Additional/ refresher MANDT or crisis intervention training for staff
- Sensitivity training
- Rights/ due process
- Revision of supervision plans/ behavior support

# Autism

- The interim billing process was established in April 2015 (15-006):
  - Required the submission of paper-based claims, while new MMIS codes were established and the web tool was developed/tested.
  - Many claims have been incomplete or have lacked adequate documentation to support the payment request.
- The “Phase II” process was announced last week (16-003):
  - Claims for autism services may now be submitted electronically.
  - Paper-based claims will be accepted until March 1<sup>st</sup>.
- Draft state plan language has been with CMS for review and comment for several months.



Slide Source: House Ways and Means Healthcare Subcommittee FY 2016-17 Executive Budget as presented by: Christian L. Soura, SCDHHS Director on February 2, 2016 **3**

# Attachment E



## House Ways and Means Healthcare Subcommittee FY 2016-17 Executive Budget

Christian L. Soura  
Director

February 2, 2016

### State Plan Autism Services

**Executive Owner:** Pete Liggett

**Business Owner:** Ann-Marie Dwyer

**Project Manager:** Lara Sheehi

**Project Team:** Scott Tanner, George Maky, Jeanne Carlton, Nancy Benitez, Mariann Gable, Gwendolyn Gamon, Rebecca Esslinger, Milton German, Anita Risher, Anita Atwood

**Project Description:**

Add Autism Spectrum Disorder (ASD) services to the State Plan

**Issues/Risks:**

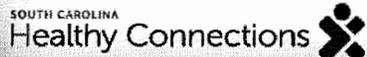
- Managing progression of project phases:
  - Phase I: Interim ASD process (manual)
  - Phase II: Interim ASD process (automated)
  - Phase III: ASD in State Plan
- Provider capacity
- Overlap with other authorities (e.g., Dept. of Ed)
- CMS responsiveness

**Accomplishments:**

- Implemented Phase 2 on February 1, 2016
- Defined service array
- Informally submitted draft State Plan language and program questions to CMS
- Processed 731 Interim Process services requests
  - 490 approved
  - 221 incomplete
  - 20 in process
- Hosted two update webinars

**Next Steps:**

- Continue MMIS and Phoenix development
- Host third webinar for stakeholders
- Develop DDSN ASD Admin Contract
- Establish service rates
- Formally submit SPA
- Complete policy development



February 11, 2016

# Autism

- In July 2014, CMS directed states to offer Autism Spectrum Disorder (ASD) services through EPSDT authority or the State Plan.
- SCDHHS has been handling service requests through EPSDT while working on policy development, rate-setting, and IT system changes:
  - Multiple events, webinars, etc. to receive and react to public comments.
  - Working with DDSN to provide administrative / authorization services.
  - EPSDT requests are typically resolved within two weeks of receiving a complete document set.

	FY 2014-15	FY 2015-16
<b>Requests Received</b>	<b>148</b>	<b>731</b>
Approved	148	490
Pending – Awaiting SCDHHS Decision	0	20
Pending – Incomplete Document Set	0	221



Slide Source: House Ways and Means Healthcare Subcommittee FY 2016-17 Executive Budget as presented by: Christian L. Soura, SCDHHS Director on February 2, 2016 **2**

## Attachment F



Nikki R. Haley GOVERNOR  
Christian L. Saura DIRECTOR  
P.O. Box 8206 > Columbia, SC 29202  
[www.scdhhs.gov](http://www.scdhhs.gov)

Jan. 28, 2016  
MB# 16-003

# MEDICAID BULLETIN

**TO: Early Intensive Behavioral Intervention Providers and Autism Spectrum Disorder Interim Process Providers**

**SUBJECT: Autism Spectrum Disorder Services Interim Process – Phase Two**

Effective Feb. 1, 2016, the South Carolina Department of Health and Human Services (SCDHHS) will initiate an improved interim process by which its members are evaluated for and receive Autism Spectrum Disorder (ASD) services that are identified as medically necessary based on an Early and Periodic Screening Diagnosis and Treatment (EPSDT) encounter.

Healthy Connections Medicaid members 0 to 21 years of age are eligible to submit requests and be evaluated for ASD services, including members currently on the Pervasive Developmental Disorder (PDD) Waiver waiting list and those whose PDD Waiver services have expired.

### Evaluation for Autism Services

Members must submit evaluation requests to the attention of Dr. Pete Liggett at SCDHHS, P.O. Box 8206, Columbia, SC 29202-4500 or [autism@scdhhs.gov](mailto:autism@scdhhs.gov). Requests must include the following items and documents:

- Healthy Connections Medicaid member identification (ID) number
- Indication of when PDD waiver services will expire (applicable only if member is currently receiving PDD waiver services)
- Results of an EPSDT visit that demonstrates the medical necessity for ASD services
- Attestation by a doctor, developmental pediatrician or current ASD services provider with treatment recommendations (e.g., specific problem behaviors to be addressed), including recommended hours
- Comprehensive assessment report that confirms the presence of ASD
  - The report must include developmental history, a detailed description of observed behavior and results from standardized ASD diagnostic tools, as applicable. The diagnostic assessment must have been performed by a qualified examiner with training in the assessment of children and youth with ASD.
- Diagnostic and Statistical Manual of Mental Disorders (DSM-IV) or (DSM-5) diagnostic profile, to establish proof of met criteria
- Checklist for Autism in Toddlers (CHAT) or Modified-CHAT assessment form, if applicable



- Medical profile (e.g., summary of last medical visit, description of medical complications, etc.)
- Speech and language therapy notes, if applicable (e.g., summary of last visit/progress review)
- Family history, including, but not limited to, family history of ASD (e.g., maternal and paternal history and maternal and paternal grandparent history)
- Past therapies profile sheet (e.g., therapy modalities, frequency, duration, outcome, etc.)
- Genetic testing, if applicable
- Prior Authorization or Denial Letter from member's primary insurance carrier

**Autism Service Provision**

Those providing services as part of this interim ASD process must meet the existing PDD Waiver provider qualifications.

Claims may now be submitted via the SC Medicaid web-based claim submission tool:

<https://portal.scm Medicaid.com/login>

Any issues with claims submitted through the webtool should be addressed with the Provider Service Center (888) 289-0709.

Until March 1, 2016, claims may also be mailed to:

SC Medicaid Claims Receipt  
PO Box 1412  
Columbia, SC 29202-1412

Claims must not exceed the approved hours documented in the member's Medicaid Service Authorization. Only the following PDD Waiver procedure codes may be used for the interim ASD process, as CPT codes will not be accepted at this time:

Assessment: H2000 (annually)  
Consultant: H0032 (hourly)  
Lead: G0177 (hourly)  
Line Therapy I: H0046 (hourly)  
Line Therapy II: H0046U2 (hourly)

Providers will be paid PDD waiver rates for these services. Please remember that all Medicaid providers must follow Medicaid Third Party Liability (TPL) policy. TPL information can be found on the Healthy Connections Medicaid website, [scdhhs.gov](http://scdhhs.gov), on the "Training Opportunities" page under the "For Providers" tab.

As of March 1, 2016, claims will not be accepted via the interim manual billing process.

The South Carolina Department of Disabilities and Special Needs (DDSN) has developed an interim process interpreter services program that will be available through June 30, 2016, or until SCDHHS institutes the permanent State Plan autism service array, whichever comes first. This particular program is not affiliated

with or a part of the PDD Program. The explicit purpose of this program is to enable children receiving ABA services through the interim process to have access to interpreter services. If interpretation services are needed, please contact Shamaiah Talley ([stalley@ddsn.sc.gov](mailto:stalley@ddsn.sc.gov)) at DDSN.

For questions regarding the interim process, please contact Lara Sheehi, Psy.D., at [Lara.Sheehi@scdhhs.gov](mailto:Lara.Sheehi@scdhhs.gov).

Thank you for your continued support of South Carolina Healthy Connections Medicaid.

/s/

Christian L. Soura

Director

**SC Department of Disabilities and Special I  
Waiting List Reduction Efforts**

Through February 1, 2016 as of February 8, 2016

Waiting List	Number of Individuals Removed from Waiting Lists	Consumer/Family Determination		Number of Individuals Services are Pending
		Number of Individuals Enrolled in a Waiver	Number of Individuals Opted for Other Services/ Determined Ineligible	
Intellectual Disability/Related Disabilities (As of July 1, 2014)	1,438 (FY15) <u>1,759 (FY16)</u> 3,197	712 (FY15) <u>640 (FY16)</u> 1,352	506 (FY15) <u>476 (FY16)</u> 982	103 (FY15) <u>760 (FY16)</u> 873
Community Supports (As of July 1, 2014)	2,430 (FY15) <u>1,046 (FY16)</u> 3,476	701 (FY15) <u>348 (FY16)</u> 1,042	1,428 (FY15) <u>317 (FY16)</u> 1,741	130 (FY15) <u>553 (FY16)</u> 693
Head and Spinal Cord Injury (As of Oct 1, 2013)	654	295	182	177
		2,689	2,905	
<b>Total</b>	<b>7,327</b>	<b>5,594</b>		<b>1,743</b>

Waiting List *	Number of Individuals Added Between July 1, 2014 and February 1, 2016	Number of Individuals Waiting as of February 1, 2016
Intellectual Disability/Related Disabilities	2,806 (1,032 since 7/1/15)	4,934
Community Supports	2,805 (974 since 7/1/15)	3,501
Head and Spinal Cord Injury	481 (128 since 7/1/15)	0
<b>Total</b>	<b>6,092</b>	<b>8,435**</b>

\* There is currently no Head and Spinal Cord Injury (HASCI) Waiver waiting list.

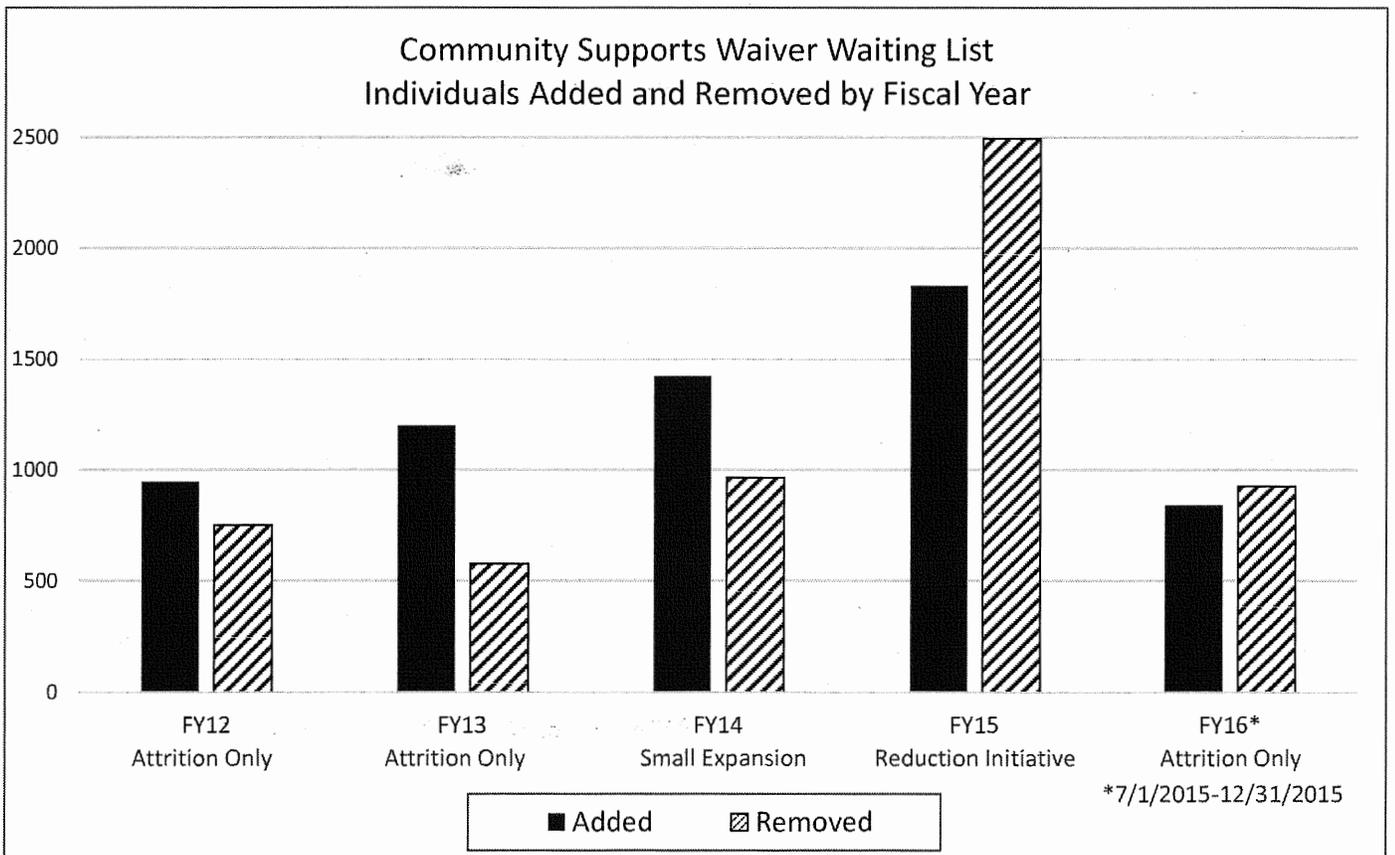
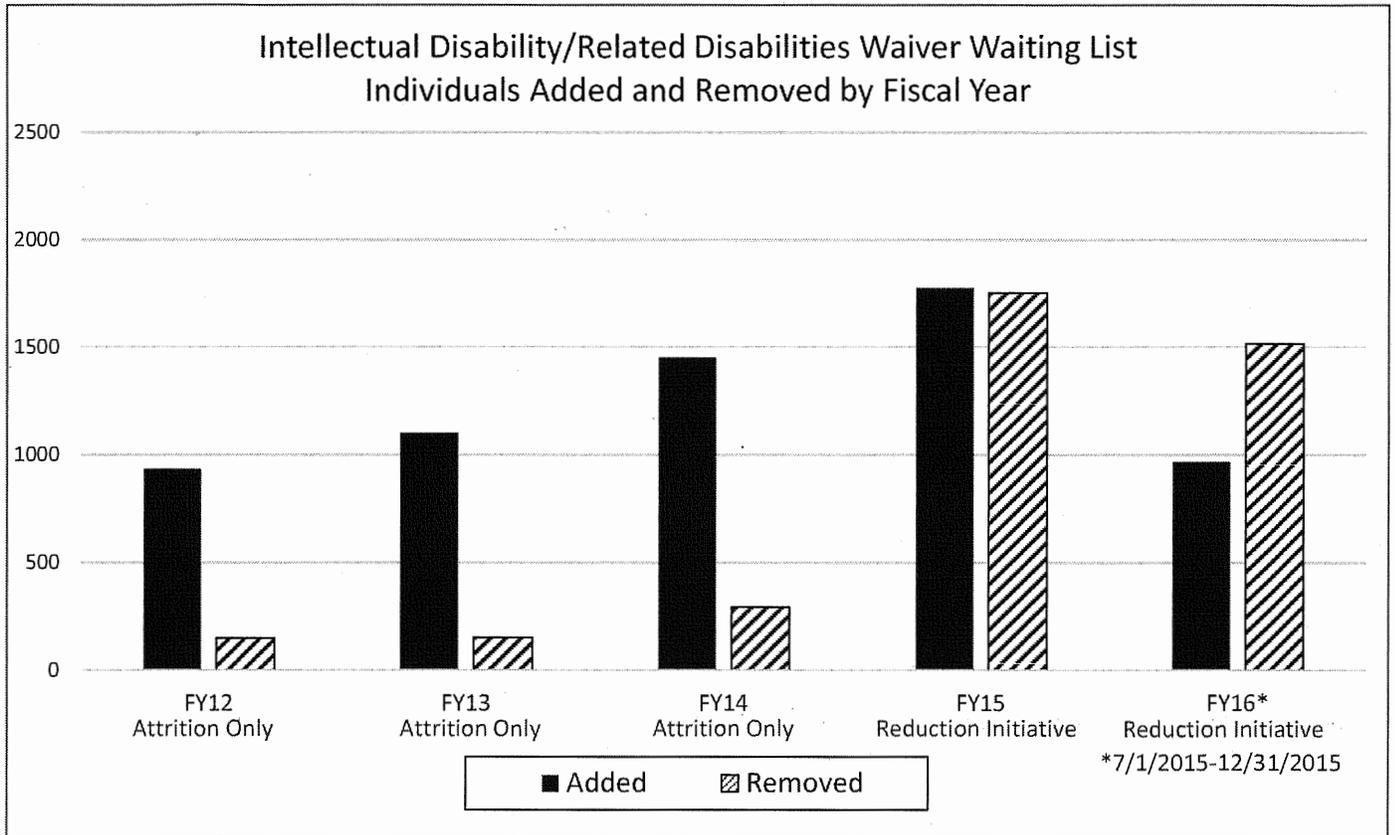
\*\* Approximately 34 percent of 8,435 are duplicated names; therefore approximately 5,580 people are on waiting lists.

**South Carolina Department Of Disabilities & Special Needs  
As Of January 31, 2016**

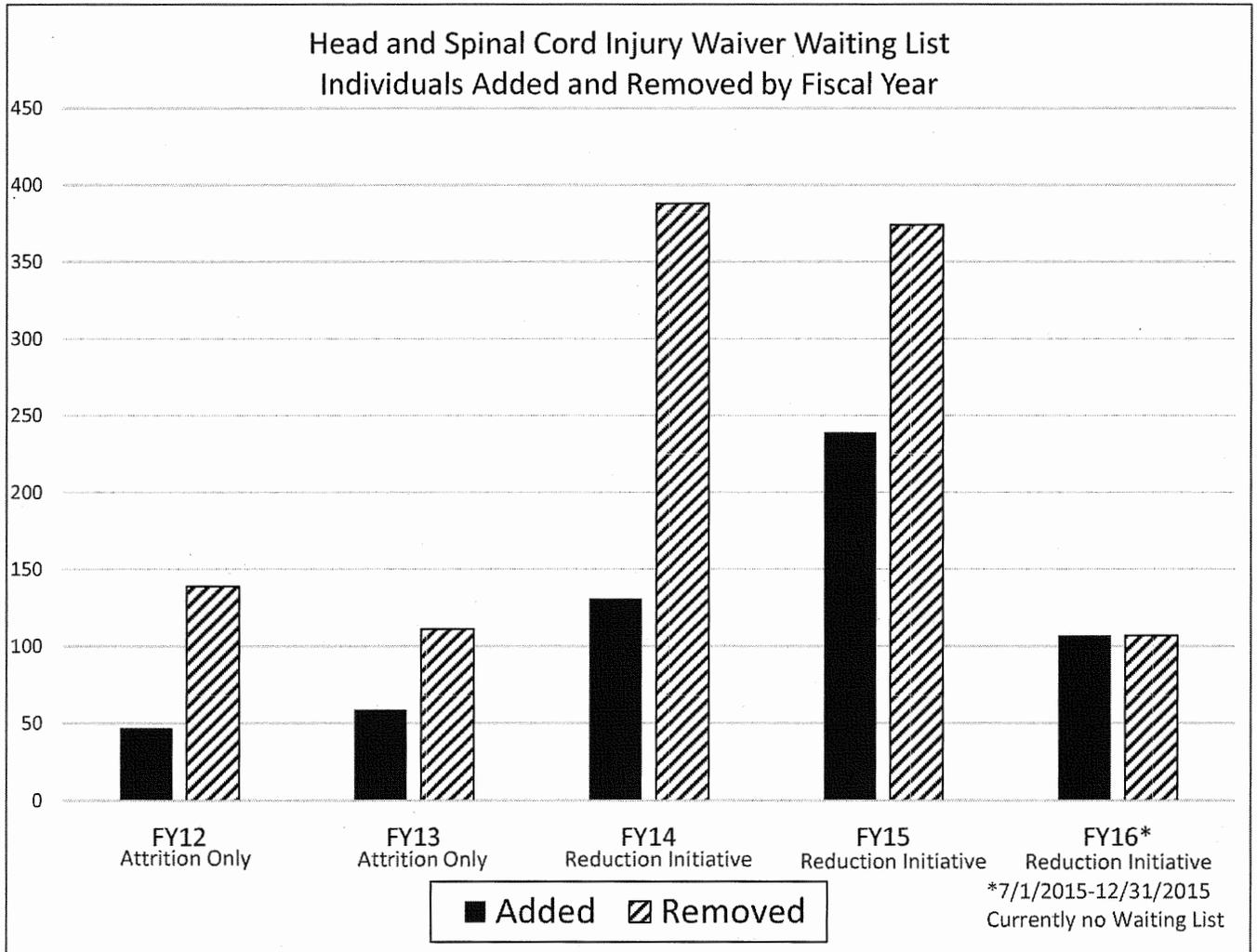
<b>Service List</b>	<b>12/31/15</b>	<b>Added</b>	<b>Removed</b>	<b>01/31/16</b>
Critical Needs	122	53	53	122
Pervasive Developmental Disorder Program	1633	51	46	1638
Intellectual Disability and Related Disabilities Waiver	4925	137	127	4935
Community Supports Waiver	3530	133	162	3501
Head and Spinal Cord Injury Waiver	0	15	15	0

Report Date: 2/11/16

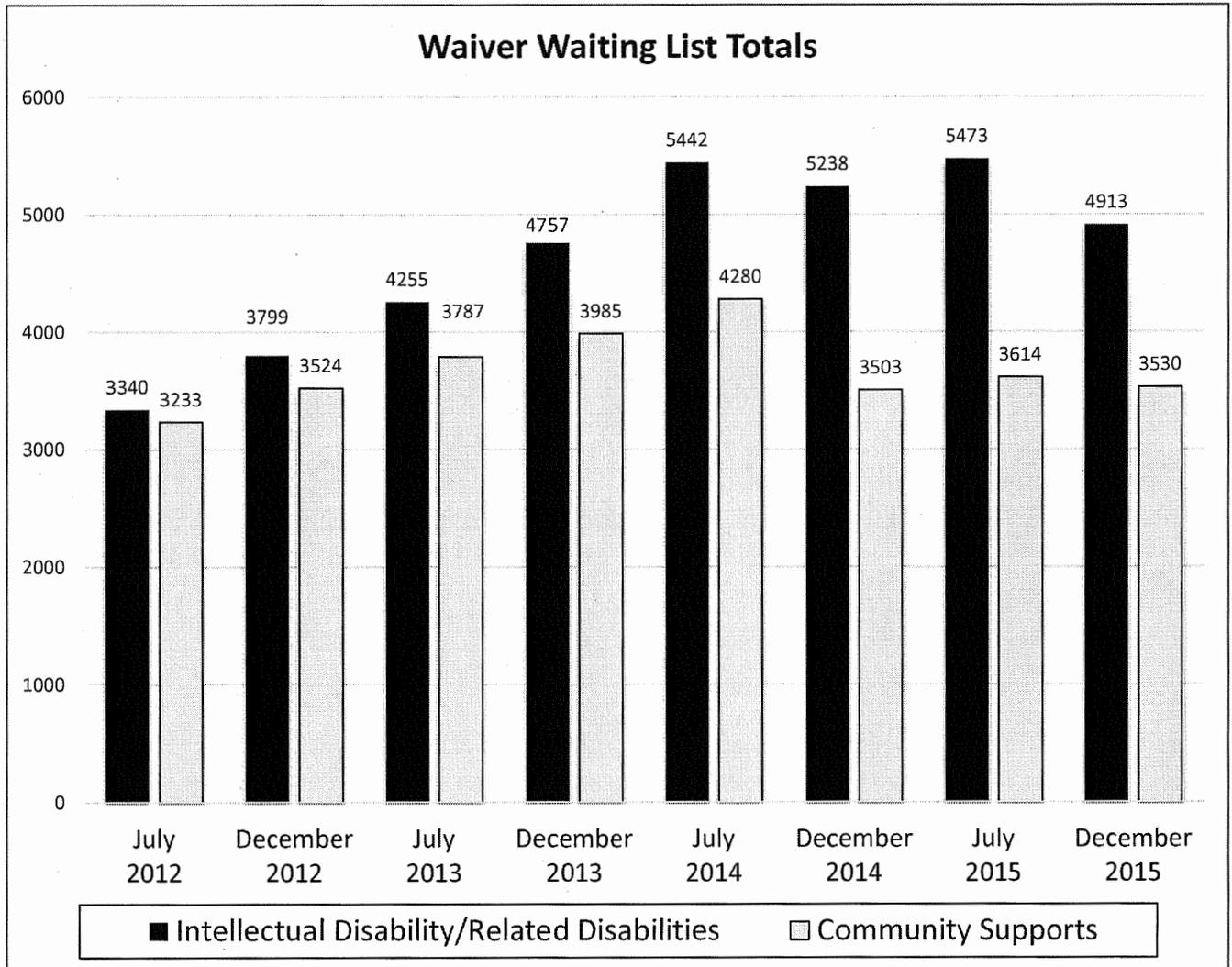
## SC Department of Disabilities and Special Needs



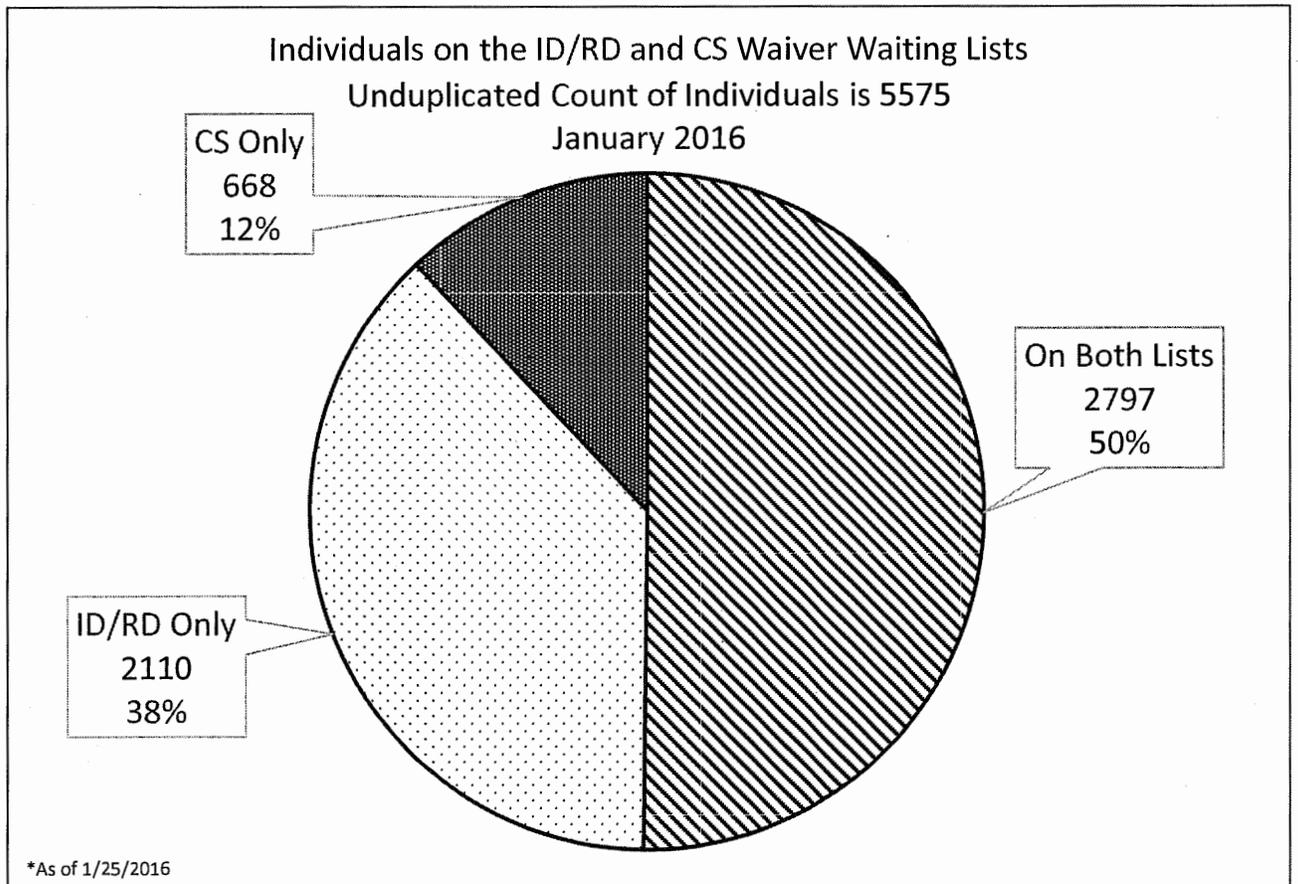
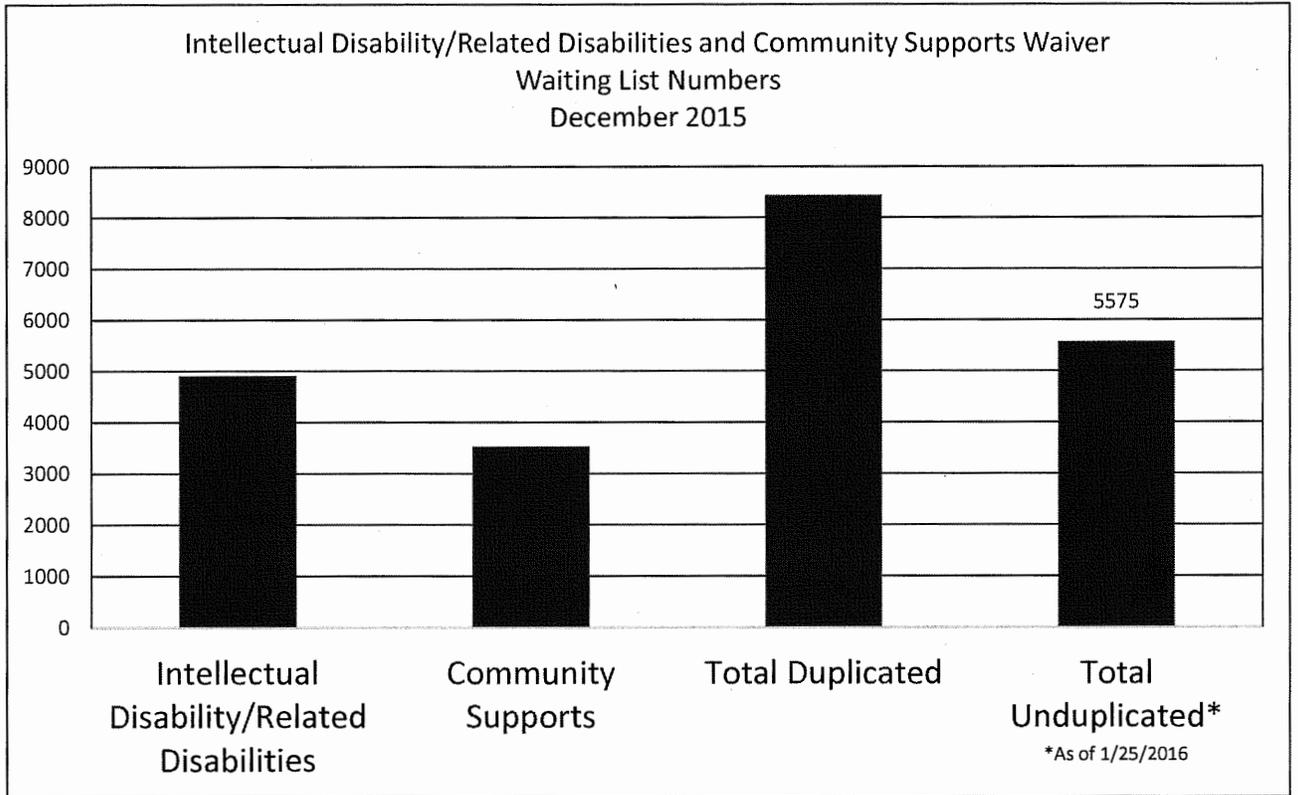
# SC Department of Disabilities and Special Needs



# SC Department of Disabilities and Special Needs

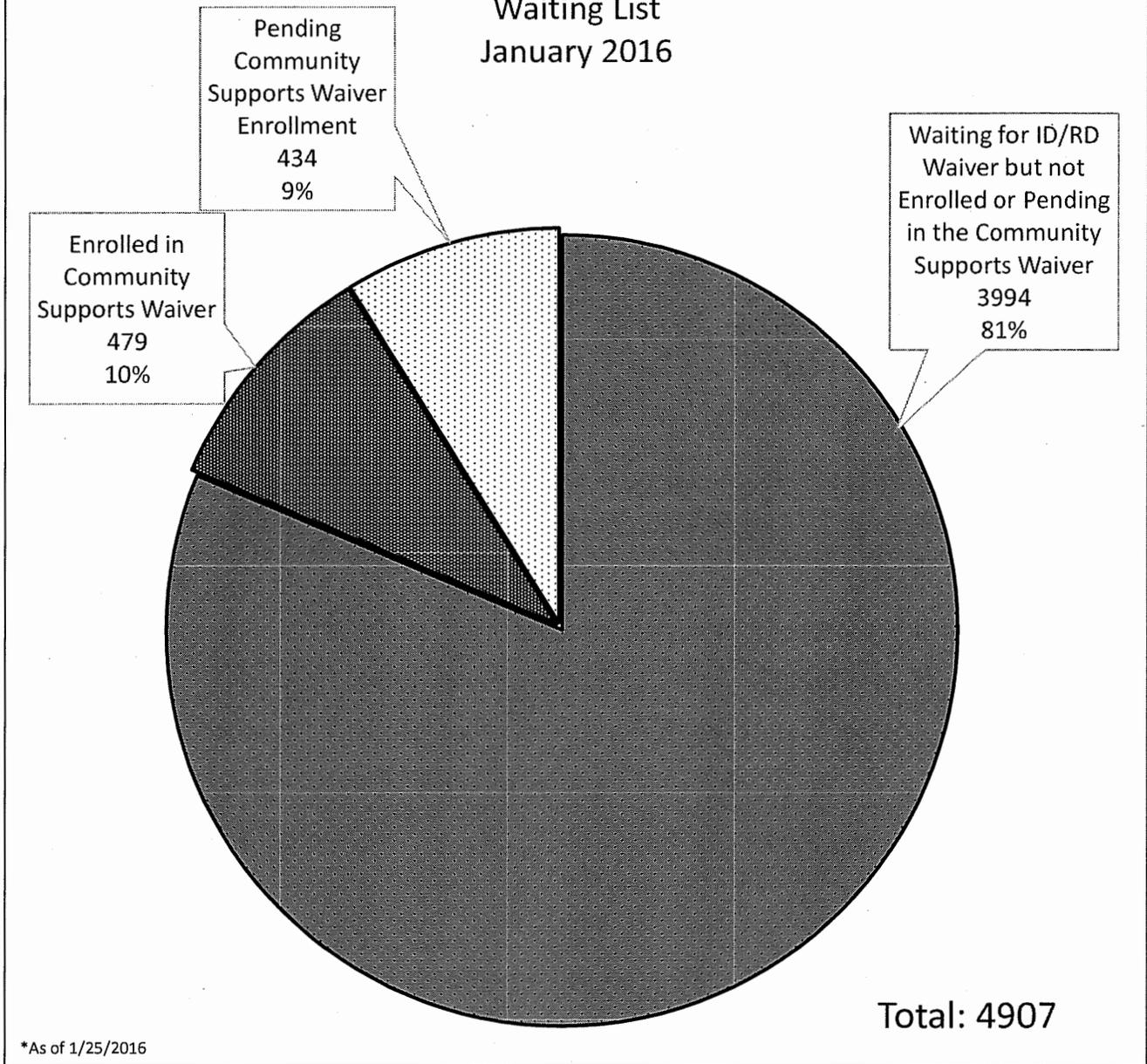


# SC Department of Disabilities and Special Needs

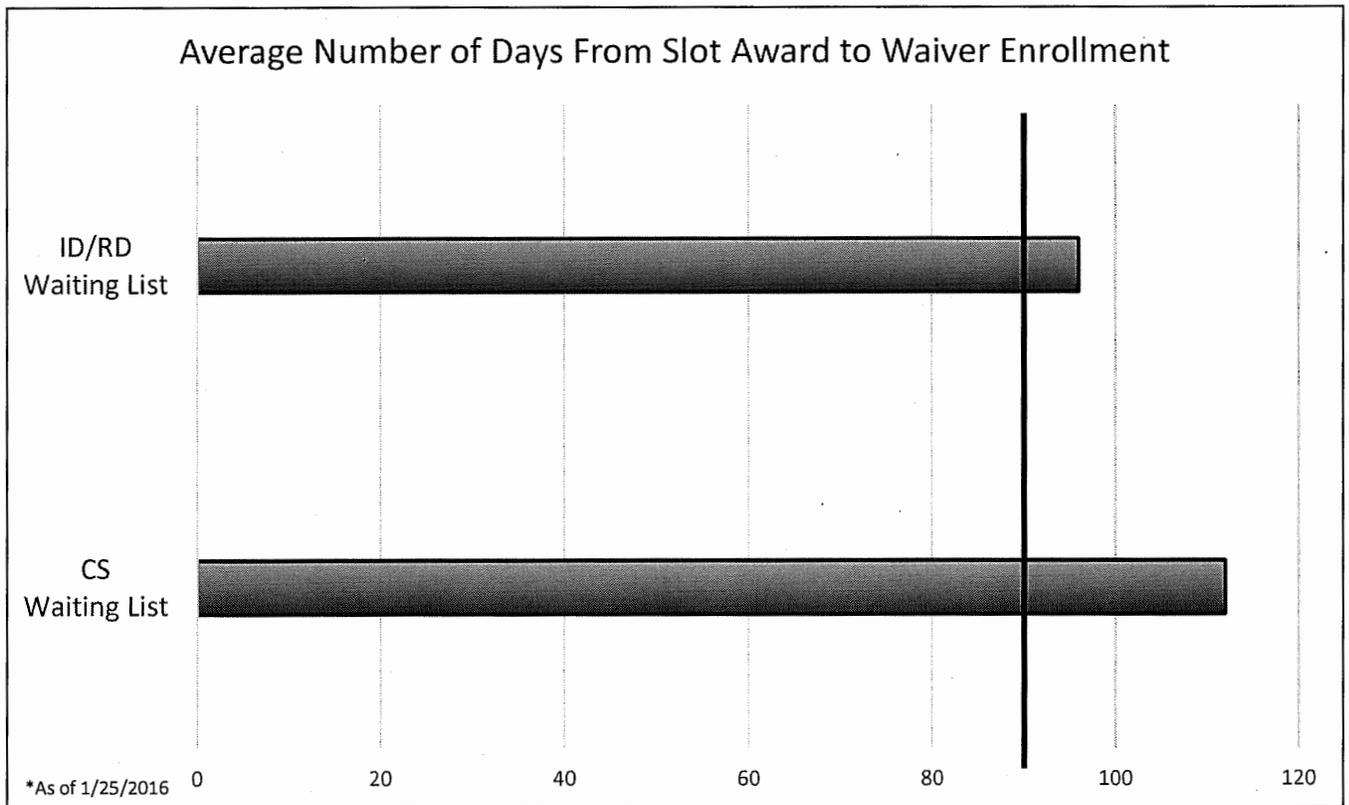


# SC Department of Disabilities and Special Needs

## Individuals on the Intellectual Disability/Related Disabilities Waiting List January 2016



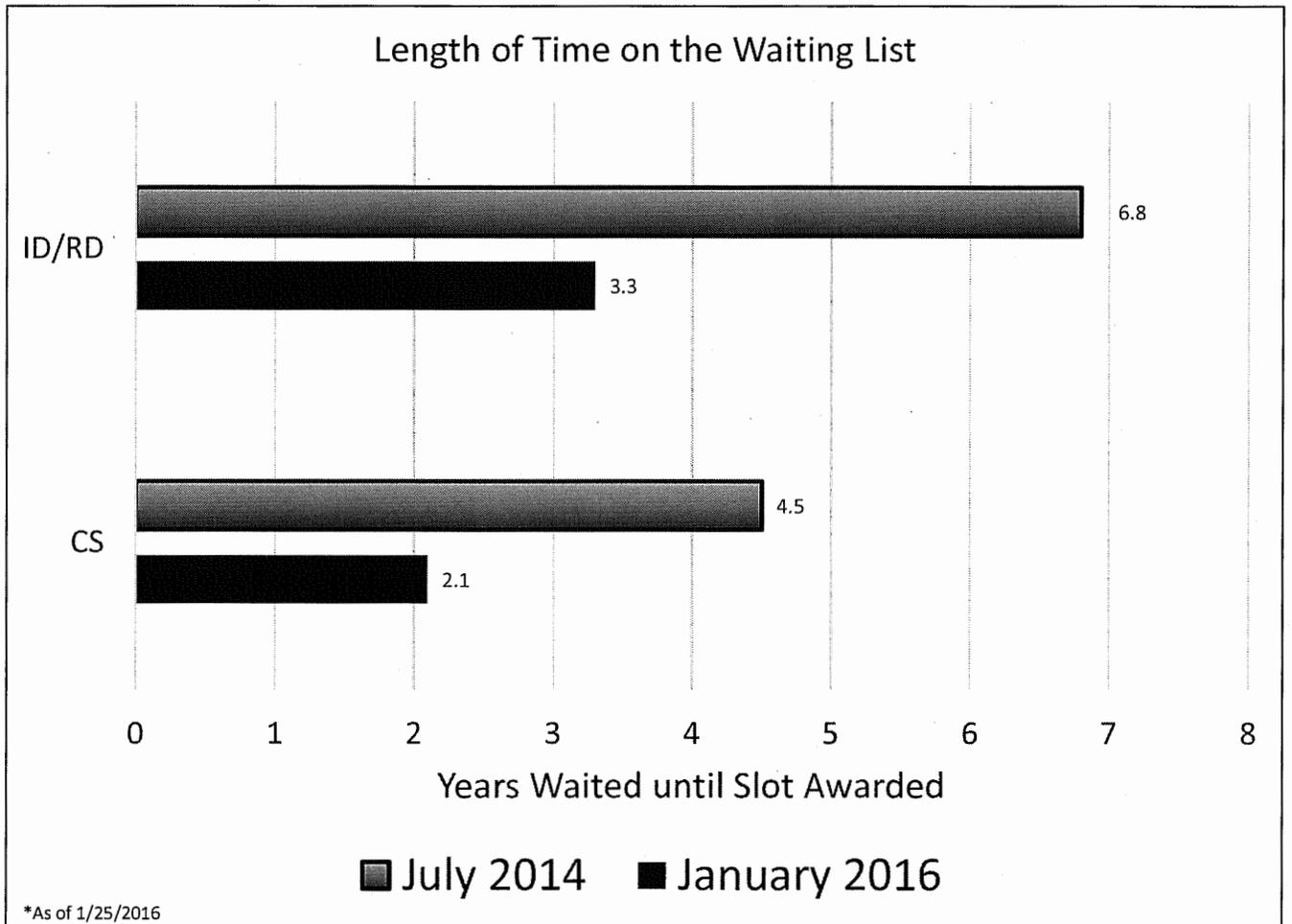
# SC Department of Disabilities and Special Needs



Goal: 90 days

ID/RD – Intellectual Disability/Related Disabilities Waiver  
CS – Community Supports Waiver

# SC Department of Disabilities and Special Needs



ID/RD – Intellectual Disability/Related Disabilities Waiver  
CS – Community Supports Waiver

**SC Department of Disabilities and Special Needs**  
**Waiting List Reduction Efforts**  
As of January 1, 2016

Waiting List	Number of Individuals Removed from Waiting Lists	Consumer/Family Determination		Number of Individuals Services are Pending
		Number of Individuals Enrolled in a Waiver	Number of Individuals Opted for Other Services/ Determined Ineligible	
Intellectual Disability/Related Disabilities (As of July 1, 2014)	1,448 (FY15) <u>1,640 (FY16)</u> 3,088	713 (FY15) <u>504 (FY16)</u> 1,217	503 (FY15) <u>390 (FY16)</u> 893	121 (FY15) <u>857 (FY16)</u> 978
Community Supports (As of July 1, 2014)	2,430 (FY15) <u>894 (FY16)</u> 3,324	701 (FY15) <u>290 (FY16)</u> 991	1418 (FY15) <u>240 (FY16)</u> 1,658	161 (FY15) <u>514 (FY16)</u> 675
Head and Spinal Cord Injury (As of Oct 1, 2013)	638	290	168	180
		2,498	2,719	
<b>Total</b>	<b>7050</b>	<b>5,217</b>		<b>1,833</b>

Waiting List *	Number of Individuals Added Between July 1, 2014 and January 1, 2016	Number of Individuals Waiting as of January 1, 2016
Intellectual Disability/Related Disabilities	2,744 (968 since 7/1/15)	4,913
Community Supports	2,673 (842 since 7/1/15)	3,530
Head and Spinal Cord Injury	422 (91 since 7/1/15)	0
<b>Total</b>	<b>5,839</b>	<b>8,443**</b>

\* There is currently no Head and Spinal Cord Injury (HASCI) Waiver waiting list.

\*\* Approximately 34 percent of 8,443 are duplicated names; therefore approximately 5,580 people are on waiting lists.

**FINANCIAL POSITION ANALYSIS - OPERATING FUNDS  
FY 2016 AS OF 1/31/2016**

	State Fund Revenue (Appropriations)	Earned Medicaid Revenue	Other Revenue and One-Time Carry Forward	Federal and Restricted Funds	Total
<b>Activity through 1/31/2016</b>					
Revenue	\$223,026,113	\$214,684,659	\$3,274,730	\$326,371	\$441,311,873
Carry Forward	\$1,030,471	\$1,912,919	\$969,009	\$135,055	\$4,047,454
Interfund Loan	(\$38,250,000)	\$38,000,000		\$250,000	\$0
Personal Services Expense	(\$26,933,238)	(\$8,526,954)		(\$143,603)	(\$35,603,795)
Fringe & Benefit Expense	(\$10,991,654)	(\$3,692,940)		(\$60,072)	(\$14,744,666)
Other Operating Expense	(\$75,573,195)	(\$227,098,532)	(\$213,135)	(\$1,186)	(\$302,886,048)
<b>Balance as of 1/31/2016 per Financial System</b>	<b>\$72,308,497</b>	<b>\$15,279,152</b>	<b>\$4,030,604</b>	<b>\$506,565</b>	<b>\$92,124,818</b>

**FM Budget vs Actual**

Author JGRANT

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Chart Filter Information

Table										
Fiscal year	Business area	Funded Program - Bud	Fund (High Level)	Original Budget	Budget Adjustments	Current Budget	YTD Actual Expense	Balance Before Commitments	Commitments and Other Transactions	Remaining Balance
2016	DDSN	ADMINISTRATION	GENERAL FUND	\$3,943,324	\$96,400	\$4,039,724	\$2,354,140	\$1,685,584		\$1,685,584
			EARMARKED FUNDS	\$3,335,645	-\$49,153	\$3,286,492	\$1,179,649	\$2,106,843	\$603,254	\$1,503,589
			Result	\$7,278,969	\$47,247	\$7,326,216	\$3,533,788	\$3,792,428	\$603,254	\$3,189,173
		PREVENTION PROGRAM	EARMARKED FUNDS	\$257,098	\$356,702	\$613,800	\$260,466	\$353,334	\$353,334	\$0
			Result	\$257,098	\$356,702	\$613,800	\$260,466	\$353,334	\$353,334	\$0
		GWOOD GENETIC CTR	GENERAL FUND	\$3,434,300	\$0	\$3,434,300	\$2,286,678	\$1,147,622	\$997,622	\$150,000
			EARMARKED FUNDS	\$6,534,076	\$0	\$6,534,076	\$3,529,042	\$3,005,034	\$3,005,034	\$0
			Result	\$9,968,376	\$0	\$9,968,376	\$5,815,720	\$4,152,656	\$4,002,656	\$150,000
		CHILDREN'S SERVICES	GENERAL FUND	\$3,053,909	\$800	\$3,054,709	\$1,942,636	\$1,112,073	\$1,044,877	\$67,196
			EARMARKED FUNDS	\$11,582,226	\$6,593,080	\$18,175,306	\$3,054,081	\$15,121,225	\$7,551,813	\$7,569,412
			FEDERAL FUNDS	\$223,000	\$0	\$223,000	\$0	\$223,000	\$0	\$223,000
			Result	\$14,859,135	\$6,593,880	\$21,453,015	\$4,996,717	\$16,456,298	\$8,596,689	\$7,859,609
		Babynet	GENERAL FUND	\$3,725,000	\$0	\$3,725,000	\$3,725,000	\$0	\$0	\$0
			EARMARKED FUNDS	\$5,587,500	\$0	\$5,587,500	\$3,628,599	\$1,958,901	\$0	\$1,958,901
			Result	\$9,312,500	\$0	\$9,312,500	\$7,353,599	\$1,958,901	\$0	\$1,958,901
		IN-HOME FAMILY SUPP	GENERAL FUND	\$36,998,158	\$309,114	\$37,307,272	\$15,563,812	\$21,743,460	\$9,552,848	\$12,190,613
			EARMARKED FUNDS	\$39,332,737	-\$8,874,290	\$30,458,447	\$6,916,586	\$23,541,861	\$13,026,604	\$10,515,256
			FEDERAL FUNDS	\$10,000	\$0	\$10,000	\$0	\$10,000	\$0	\$10,000
			Result	\$76,340,895	-\$8,565,176	\$67,775,719	\$22,480,398	\$45,295,321	\$22,579,452	\$22,715,869
		ADULT DEV&SUPP EMPLO	GENERAL FUND	\$15,179,630	\$9,405,514	\$24,585,144	\$15,274,611	\$9,310,533	\$9,107,790	\$202,743
			EARMARKED FUNDS	\$49,215,777	\$150,000	\$49,365,777	\$29,219,417	\$20,146,360	\$18,012,927	\$2,133,433
			Result	\$64,395,407	\$9,555,514	\$73,950,921	\$44,494,028	\$29,456,893	\$27,120,717	\$2,336,176
		SERVICE COORDINATION	GENERAL FUND	\$6,566,847	\$1,173,200	\$7,740,047	\$4,397,231	\$3,342,816	\$3,105,034	\$237,782
			EARMARKED FUNDS	\$16,140,763	\$48,207	\$16,188,970	\$8,328,859	\$7,860,111	\$4,216,045	\$3,644,067
			Result	\$22,707,610	\$1,221,407	\$23,929,017	\$12,726,089	\$11,202,928	\$7,321,079	\$3,881,848
		AUTISM SUPP PRG FY10	GENERAL FUND	\$4,649,334	\$10,400	\$4,659,734	\$1,527,977	\$3,131,757	\$1,844,983	\$1,286,774
			EARMARKED FUNDS	\$9,458,972	-\$1,000,000	\$8,458,972	\$4,079,580	\$4,379,392	\$2,536,397	\$1,842,995
			FEDERAL FUNDS	\$5,000	\$0	\$5,000	\$0	\$5,000	\$0	\$5,000
			Result	\$14,113,306	-\$989,600	\$13,123,706	\$5,607,557	\$7,516,149	\$4,381,379	\$3,134,769
		Pervasive Developmen	GENERAL FUND	\$7,886,794	-\$844,562	\$7,042,232	\$3,534,949	\$3,507,283	\$3,467,333	\$39,950
			EARMARKED FUNDS	\$5,140,309	-\$1,840,309	\$3,300,000	\$500	\$3,299,500	\$0	\$3,299,500
			Result	\$13,027,103	-\$2,684,871	\$10,342,232	\$3,535,449	\$6,806,783	\$3,467,333	\$3,339,450
		HD&SPINL CRD INJ COM	GENERAL FUND	\$958,763	\$62,922	\$1,021,685	\$643,233	\$378,452	\$377,672	\$780
			EARMARKED FUNDS	\$2,081,769	\$150,000	\$2,231,769	\$1,162,331	\$1,069,438	\$919,988	\$149,450
			Result	\$3,040,532	\$212,922	\$3,253,454	\$1,805,564	\$1,447,890	\$1,297,660	\$150,230
		REG CTR RESIDENT PGM	GENERAL FUND	\$36,540,363	\$1,488,566	\$38,028,929	\$21,427,370	\$16,601,559	\$0	\$16,601,559
			EARMARKED FUNDS	\$34,808,202	-\$227,670	\$34,580,532	\$14,820,138	\$19,760,394	\$4,306,825	\$15,453,568
			RESTRICTED FUNDS		\$344,048	\$344,048	\$83,962	\$260,086		\$260,086
			FEDERAL FUNDS	\$102,000	\$0	\$102,000	\$1,186	\$100,814	\$0	\$100,814
			Result	\$71,450,565	\$1,604,944	\$73,055,509	\$36,332,655	\$36,722,854	\$4,306,825	\$32,416,028
		HD&SPIN CRD INJ FAM	GENERAL FUND	\$7,593,153	\$3,082,390	\$10,675,543	\$5,276,544	\$5,398,999	\$3,773,029	\$1,625,970
			EARMARKED FUNDS	\$18,165,834	-\$7,837,713	\$10,328,121	\$5,490,417	\$4,837,704	\$3,940,668	\$897,036
			Result	\$25,758,987	-\$4,755,323	\$21,003,664	\$10,766,961	\$10,236,703	\$7,713,697	\$2,523,006

	A	F	G	H	I	J	K	L	M	N	O	P	Q
			Fiscal year	Business area	Funded Program - Bud	Fund (High Level)	Original Budget	Budget Adjustments	Current Budget	YTD Actual Expense	Balance Before Commitments	Commitments and Other Transactions	Remaining Balance
15													
59					AUTISM COMM RES PRO	GENERAL FUND	\$5,323,997	\$26,400	\$5,350,397	\$2,982,825	\$2,367,572	\$1,234,164	\$1,133,408
60						EARMARKED FUNDS	\$18,233,612	-\$853,300	\$17,380,312	\$9,905,530	\$7,474,782	\$5,863,182	\$1,611,599
61						Result	\$23,557,609	-\$826,900	\$22,730,709	\$12,888,355	\$9,842,354	\$7,097,346	\$2,745,007
62					INTELL DISA COMM RES	GENERAL FUND	\$61,224,552	-\$10,005,099	\$51,219,453	\$21,560,179	\$29,659,274	\$20,917,364	\$8,741,911
63						EARMARKED FUNDS	\$225,226,675	\$13,384,446	\$238,611,121	\$144,479,633	\$94,131,488	\$92,095,249	\$2,036,239
64						RESTRICTED FUNDS		\$101,100	\$101,100	\$59,642	\$41,458		\$41,458
65						Result	\$286,451,227	\$3,480,447	\$289,931,674	\$166,099,453	\$123,832,221	\$113,012,613	\$10,819,608
66					STATEWIDE CF APPRO	GENERAL FUND		\$0	\$0		\$0		\$0
67						Result		\$0	\$0		\$0		\$0
68					STATEWIDE PAY PLAN	GENERAL FUND		\$0	\$0		\$0		\$0
69						Result		\$0	\$0		\$0		\$0
70					STATE EMPLOYER CONTR	GENERAL FUND	\$21,558,745	-\$486,331	\$21,072,414	\$10,991,654	\$10,080,760	\$0	\$10,080,760
71						EARMARKED FUNDS	\$6,809,487	\$0	\$6,809,487	\$3,692,940	\$3,116,547	\$0	\$3,116,547
72						RESTRICTED FUNDS		\$168,505	\$168,505	\$60,072	\$108,433	\$0	\$108,433
73						Result	\$28,368,232	-\$317,826	\$28,050,406	\$14,744,665	\$13,305,741	\$0	\$13,305,741
74					DUAL EMPLOYMENT	GENERAL FUND				\$9,479	-\$9,479		-\$9,479
75						Result				\$9,479	-\$9,479		-\$9,479
76					Autism Services	GENERAL FUND		\$1,000,000	\$1,000,000		\$1,000,000		\$1,000,000
77						Result		\$1,000,000	\$1,000,000		\$1,000,000		\$1,000,000
78					Special Needs Park -	GENERAL FUND		\$100,000	\$100,000		\$100,000		\$100,000
79						Result		\$100,000	\$100,000		\$100,000		\$100,000
80					Special Family Resou	GENERAL FUND		\$1	\$1		\$1		\$1
81						Result		\$1	\$1		\$1		\$1
82					Result		\$670,887,551	\$6,033,368	\$676,920,919	\$353,450,945	\$323,469,974	\$211,854,036	\$111,615,938

## **BabyNet Expenditures**

The department has two special line items appropriations for BabyNet Services, which are allocated under general funds \$3.725 and earmarked funds \$5.6 million. Since BabyNet is strictly for early intervention services for children birth to three years of age, the department transfers expenditures into these two special line items from expenditures that have been recorded under children services. The department's early intervention program serves children birth to six years of age which encompasses the BabyNet aged children. In the service contracts that are awarded to the providers there is no distinction for the age levels that each provider serves. The department uses documented service unit activity for the early intervention program to transfer expenditures into the special line items for the BabyNet eligible birth to age three population.

In FY 2015, two transfers (journal entries) were processed, one in February of 2015 and the other in April 2015. These same timeframes for transferring expenditures for the birth to three years of age children is expected for the current fiscal year. The department will spend \$9.3 million on the BabyNet early intervention population, which are all the appropriations identified for BabyNet program.

## **PDD Expenditures**

The majority of the expenditures that the department incurs for the PDD Program are in the general funds service program. Children that receive PDD services that are not in the Medicaid Waiver receive services that are funded 100% from state funds. These services are accounted for under the PDD general fund service program. Also, the state match that is needed for Medicaid PDD waiver services is expended to the PDD general fund account.

Case management services for PDD waiver consumers are charged to the PDD earmarked funds through transfers from the service coordination program. The transfers of expenditures are based on documented service activities that are reported for children in the PDD waiver. Contracts awarded to providers are service contracts. These contracts do not designate the populations being served or the age levels of consumers. Over \$1 million dollars in expenditures in the service coordination program will be transferred into the earmarked PDD program by the end of the fiscal year.

## **FY 2015 Expenditures Recap**

The department's FY2015 spending plan authorized expenditures of \$581.5 million. The spending plan includes recurring financial goals for the department's service delivery system based on some services provided the entire year and new services provided only part of the year but annualized for the full year. Most of the development of new expansion services that are reflected in the spending plan take the whole year to bring these new services online.

For FY 2015, the SCEIS accounting system reports that the department spent \$591.5 million in total expenditures. The \$591.5 million is actual expenditures that the department paid out during the year which includes personal services, fringe benefits, operating costs and contracted services. The \$591.5 Million expenditure included several items expended in FY 2015 that were not listed in the spending plan, such as the adult day rate adjustment. The department paid out \$40.8 million in three different payments to the provider network. DHHS provided payment to the department which in turn was paid out to the provider network. This funding was provided at the request of the department to adjust day rates back to October 2012. If DHHS had not paid DDSN the adult day rate adjustment during FY2015, DDSN would not have paid providers the additional funds. DDSN's actual expenditures in 2015 would have been less than \$581.5 million authorized in the spending plan if these day rate adjustments were not made.

**PROVISO 36.13**

(DDSN: Medicaid Direct Billing) The department shall facilitate Medicaid direct billing for all providers, including local disabilities and special needs boards, who choose to initiate the direct billing process regardless of the receipt of capital grant funds from the department for the specific facility involved. All entities receiving capital grant funds must use the funds as originally specified in the award. If the purpose or use of a facility constructed or purchased with departmental grant funds is altered without the department's approval, the entity must repay the department the amount of the funds awarded. The use of direct billing shall not be construed as a change in the purpose or use of a facility.

DSN Direct Billing Scope Table

Category	Task	Description	Change Mechanism(s)	Owner	Notes
Project Execution	Service selection	Choose which services will be addressed by this initiative	* Project Team Collaboration	DHHS	* Possible services to be addressed include: ICF/IIDs, ID/RD, CS and HASCI Waiver Services, TCM
Policy/Process	Provider enrollment	Development and implementation of provider enrollment processes	* DHHS policy development * Waiver Amendment * MMIS coding * Provider Enrollment System coding * Phoenix coding	DHHS	* DDSN QPL Process
Policy/Process	Billing	Development and implementation of direct billing processes	* DHHS policy development * MMIS coding * Phoenix coding * Therap coding	DHHS, DDSN	* Accounting for DDSN, governmental and private providers, the provision of interpreter services, initial ICF/IID Levels of Care (conflict free) * Can hybrid system exist where some providers direct bill and others continue to use DDSN's prospective band payment process? If so, what impact will provider choice have on entire system? * Guidance on provider management of cash flow in shifting from prospective to retrospective payment process
Financial	Rate development	Development of service rates not already being addressed by other initiatives	* Waiver Amendment * FY 2016-17 Budget * MMIS Code Changes * Therap Code Changes	DHHS, DDSN	* Considerations: - Capitated vs. fee for service - Separating admin from direct service - Bed vacancy - Capital costs * Cost neutrality * DHHS cost settlements * DDSN state match and rate-setting involvement
Financial	State funding	Determine how state funding for direct-billed services will be handled	* DHHS/DSN MOA	DHHS, DDSN	
Policy/Process	ANE/Incident Reporting	Update ANE/incident reporting process to accommodate direct billing environment	* DDSN policy * DDSN Client Data System * DHHS/DSN contract * DDSN/provider contracts * DHHS/DSN Board contracts * DHHS/DSN MOA	DHHS, DDSN	* Waiver requirements * Required monitoring of investigations * Licensing * QIO/other quality assurance processes
Policy/Process	ICF/IID licensing	Make changes to licensing requirements to allow direct billing	* DHHS/DSN contract * DDSN/DSN Board contracts * DHHS/DSN Board contracts * DHHS/DSN MOA	DHHS, DDSN	* ICF/IID reduction plan
Policy/Process	ICF/IID Technical Support	Update ICF/IID Technical Support Process to accommodate direct billing environment	* DDSN policy * DHHS/DSN contract * DDSN/DSN Board contracts * DHHS/DSN Board contracts * DHHS/DSN MOA	DHHS, DDSN	
Policy/Process	DHHS/DSN roles and responsibilities	Review waiver operation responsibilities	* DHHS/DSN MOA * DHHS policy * DDSN policy	DHHS, DDSN	* DHHS Program Integrity audits * DDSN Internal Audit * Recoupment process and responsibilities * Provider of Record status - ensuring we meet Medicaid requirements