

SOUTH CAROLINA COMMISSION ON DISABILITIES AND SPECIAL NEEDS

MINUTES

December 17, 2020

The South Carolina Commission on Disabilities and Special Needs met on Thursday, December 17, 2020, 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 In-Person

Gary Lemel – Chairman

Barry Malphrus – Vice Chairman

Robin Blackwood – Secretary

Eddie Miller

David Thomas

Stephanie Rawlinson

DDSN Administrative Staff

Mary Poole, State Director; Pat Maley, Deputy Director; Chris Clark, CFO; Kevin Yacobi, Director of Internal Audit; Kim McLeod, Legislative Liaison & Public Information Officer; and Christie Linguard, Administrative Coordinator.

Notice of Meeting Statement

Chairman Lemel called the meeting to order and Secretary Blackwood read a statement of announcement about the meeting that was distributed to the appropriate media, interested persons, and posted at the Central Office and on the website in accordance with the Freedom of Information Act.

Adoption of the Agenda

On motion of Commissioner Thomas, seconded by Commissioner Blackwood, the Commission unanimously adopted the December 17, 2020 Meeting Agenda. (Attachment A)

Invocation

Commissioner Blackwood gave the invocation.

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Approval of the Minutes from the November 19, 2020 Commission Meeting

Commissioner Malphrus made a motion to accept the November 19, 2020 Commission Meeting minutes as written, seconded by Commissioner Blackwood and unanimously approved by the Commission. (Attachment B)

Commissioners' Update

Commissioner Malphrus requested a case management update at the January meeting. He also announced that the Policy Committee will be presenting a list of communication items at the January Commission Meeting. Commissioner Blackwood thanked the DDSN network, providers, caregivers, boards, staff and others who help to care and assist individuals with disabilities across the state.

Public Input

There was one public input request; however, the Commission was unsuccessful in their three (3) attempts to contact Ms. Sandra Loy at the telephone number left on the website.

Commission Committee Business

A. Legislative Committee – Notice of Drafting Submission

Committee Chairman Thomas stated the Committee met on December 10, 2020 to review and approve the Notices of Drafting documents for the agency Regulations to be submitted to the Legislative Council and published in the State Register. The Committee will meet again in January to review the specifics of the Regulations and make any necessary changes. The Regulation amendments will be brought back to the full Commission for approval.

Old Business

A. Band B & I Switch to Fee for Service (FFS) Update

Mr. Clark updated the Commission on the progress being made on implementing at home services FRS. Two trainings were held with providers to discuss a variety of implementation considerations. The sessions were also recorded and one is available on the agency's website for anyone who was not able to listen in on the live broadcast. There will be another session tomorrow morning at 10:00 AM and a January training session as well. Mr. Clark thanked all staff members involved in the process. The Band rates were discussed in great detail. (Attachment C)

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B. Cost Reports Update

Mr. Clark stated that there is not a lot to report on this subject since November's meeting. He and his team are still working on 2013-2015 Cost Reports. An update was given on the status of the cost reports and where the Agency stood with each year that was not filed. He explained in detail the steps being taken internally to begin preparation of 2018 and 2019 cost reports.

C. Internal Audit Monthly Report

Mr. Yacobi briefed the Commission on Internal Audit's monitoring of the Bands B and I conversion to Fee For Service. There was much decision about the three Phases. Mr. Yacobi addressed his concerns about the size of the internal team for Phase II of the process in regards to helping move the evaluations along quickly and thoroughly and to build in some double blind evaluations within the evaluation team to ensure fairness. Director Poole suggested that DDSN could identify internal staff to help with this Initial round of evaluation but stated that she thought a specific level of expertise was needed for the proceeding rounds. Mr. Yacobi reminded us that he would like to be invited to meetings and that materials would be shared with him regarding all Bands B and I conversion planning documents. Director Poole also stated that Phase 3 cannot be advanced until the waiver amendment is finalized with the Department of Health and Human Services (DHHS).

D. COVID Update

Mr. Maley briefed the Commission on COVID cases per month with residential and community staff as well as the regional centers. He also explained the vaccination plan, which included the three phases implemented by the SC Department of Health and Environmental Control. (Attachment D)

New Business

A. Financial Update

Mr. Clark gave the financial update as of November 2020. He provided a detailed discussion of the report and commented on changes to the format that we are working on. He explained the cash basis presentation of the information and how it proves unreliable information. He is seeking a way to adjust these figures outside of the accounting program so that information is more useful and an accurate reflection of our operations. The agency is operating 3% under the Spending Plan based on the cash basis, but is operating 5% under budget when you adjust for timing issues related to prospective payments to providers. On a motion

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by Commissioner Miller, seconded by Commissioner Thomas, the Commission unanimously approved the financial update as presented. (Attachment E)

B. Contract Amendments over \$200,000

Mr. Clark presented the four (4) contract amendments over \$200,000 for the Commission to review and approve. On a motion by Commissioner Blackwood, seconded by Commissioner Malphrus, the Commission unanimously approved the amendments as presented. (Attachment F)

C. FY21 Strategic Objectives

State Director Mary Poole read aloud each strategic objective for all Commission members. Commissioner Miller made a motion to approve the FY21 Strategic Objectives; and the motion was seconded by Commissioner Malphrus and unanimously approved by the Commission. (Attachment G)

D. Electronic Visit Verification (EVV) Update

State Director Mary Poole explained that the agency is working with Department of Health and Human Services (DHHS) to find an acceptable solution to the software issue. Director Poole is working on a Memorandum of Understanding (MOU) with Director Joshua Baker prior to him leaving DHHS in January 2021.

State Director's Report

Director Poole provided a State Director's Report. (Attachment H)

Executive Session

At 2:13 p.m., Chairman Lemel requested a motion to go into Executive Session to discuss a contractual employment matter. On a motion by Commissioner Thomas, seconded by Commissioner Malphrus and unanimously approved by the Commission, executive session will began at 2:20 p.m.

Upon rising out of Executive Session at 2:30 p.m., Chairman Lemel announced that there were no motions made, no decisions rendered and no votes taken.

Next Regular Meeting

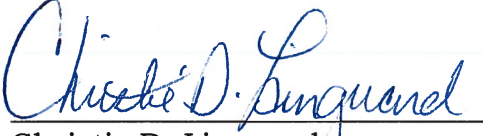
January 21, 2021

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Adjournment

On a motion by Commissioner Miller, seconded by Commissioner Blackwood and unanimously approved by the Commission, the meeting was adjourned at 2:31 p.m.

Submitted by:


Christie D. Linguard
Administrative Coordinator

Approved by:

DocuSigned by:

6F3E8B062904478...
Commissioner Robin Blackwood
Secretary

SOUTH CAROLINA COMMISSION ON DISABILITIES AND SPECIAL NEEDS**A G E N D A**

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

December 17, 2020**10:00 A.M.**

1. Call to Order *Chairman Gary Lemel*
2. Notice of Meeting Statement *Commissioner Robin Blackwood*
3. Welcome
4. Adoption of Agenda
5. Invocation *Commissioner Robin Blackwood*
6. Approval of the November 19, 2020 Commission Meeting Minutes
7. Commissioners' Update *Commissioners*
8. Public Input
9. Commission Committee Business
 - A. Legislative Committee – Notice of Drafting Submission *Comm. Chair David Thomas*
10. Old Business:
 - A. Band B & I Switch to Fee for Service (FFS) Update *Mr. Chris Clark*
 - B. Cost Reports Update *Mr. Chris Clark*
 - C. Internal Audit Monthly Report *Mr. Kevin Yacobi*
 - D. COVID Update *Mr. Pat Maley*
11. New Business:
 - A. Financial Update *Mr. Chris Clark*
 - B. Contract Amendments over \$200,000 *Mr. Chris Clark*
 - C. FY21 Strategic Objectives *Director Mary Poole*
 - D. Electronic Visit Verification (EVV) Update *Director Mary Poole*
12. State Director's Report *State Director Mary Poole*
13. Executive Session
14. Enter into Public Session
15. Next Regular Meeting (January 21, 2021)
16. Adjournment

SOUTH CAROLINA COMMISSION ON DISABILITIES AND SPECIAL NEEDS

MINUTES

November 19, 2020

The South Carolina Commission on Disabilities and Special Needs met on Thursday, November 19, 2020, 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 In-Person

Gary Lemel – Chairman

Barry Malphrus – Vice Chairman

Robin Blackwood – Secretary

Eddie Miller

David Thomas

Present via Skype:

Stephanie Rawlinson

DDSN Administrative Staff

Mary Poole, State Director; Pat Maley, Deputy Director; Chris Clark, CFO; Rufus Britt, Associate State Director, Operations; Susan Beck, Associate State Director, Policy; Kevin Yacobi, Director of Internal Audit; Kim McLeod, Legislative Liaison & Public Information Officer; Andrew Tharin, Director of Engineering and Planning; Ann Dalton, Director of Quality Management; Melissa Ritter, Director of Head and Spinal Cord Injury (HASCI) and Christie Linguard, Administrative Coordinator.

Notice of Meeting Statement

Chairman Lemel called the meeting to order and Secretary Blackwood read a statement of announcement about the meeting that was distributed to the appropriate media, interested persons, and posted at the Central Office and on the website in accordance with the Freedom of Information Act.

Adoption of the Agenda

On motion of Commissioner Blackwood, seconded by Commissioner Malphrus, the Commission unanimously adopted the November 19, 2020 Meeting Agenda. (Attachment A)

Invocation

Chairman Lemel gave the invocation.

Approval of the Minutes from the October 14, 2020 Special-Called and the October 15, 2020 Commission Meetings

Commissioner Miller made a motion to accept the October 14, 2020 Special-Called Meeting minutes as written and to accept the October 15, 2020 Commission Meeting minutes with the addition of “for approval” in the second to the last sentence in section B under 2021 Spending Plan/Capital Budget; the motion was seconded by Commissioner Malphrus and unanimously approved by the Commission. (Attachment B)

Commissioners’ Update

Commissioner Thomas spoke briefly about his visit to Greenwood Genetics Center earlier in the month with Pat Maley. Commissioner Malphrus mentioned a great book he just read, *Help! My Sibling Has a Disability* by Dave Deuel. He recommended that everyone read this book.

Public Input

The following individuals spoke during Public Input: Jason Tavenner, Gerald Bernard and Ralph Courtney.

Commission Committee Business

A. Finance and Audit Committee

Committee Chairman Blackwood stated the Committee met on November 2, 2020 and presented the following topics for review and approval by the Commission:

Capital Project Review/Approval – Coastal Electrical Grid

Discussion was held on the proposal to replace the current grid and Andrew Tharin was present to answer all questions. Commissioner Lemel noted that the Finance and Audit Committee has already approved the proposal to replace the existing grid at the Coastal Center and the motion to approve was brought out of the Committee. The members of the Commission unanimously approved the proposal as presented. (Attachment C)

Contract Amendments over \$200k

Commissioner Blackwood informed the Commission that the Finance and Audit Committee approved the first two amendments listed but the last amendment by CHS Group was added after the Committee met. Commissioner Blackwood made a motion to accept the amendments

presented, seconded by Commissioner Malphrus and unanimously approved. (Attachment D)

General Duties of the DDSN Internal Audit Division (275-05-DD)

Commissioner Blackwood reminded everyone that this item was brought to the Commission meeting last month. After meeting the required posting for public comment, the Finance and Audit Committee has approved this directive as presented. Chairman Lemel noted that the Commission accepts the motion and second coming out of the Finance and Audit Commission and asked if any member opposed the directive as presented; there were five (5) ayes and one (1) nay (Chairman Lemel); the directive was approved as presented. Chairman Lemel was against the \$1,000 sanction included in this revised directive. (Attachment E)

B. Policy Committee

Committee Chairman Malphrus deferred the presentation of the following policy directive revisions to Ms. Beck. These revisions were reviewed and discussed at the November 10, 2020 Policy Committee meeting. Copies were previously provided to the Commission:

567-04-DD: DDSN Approved Crisis Prevention Curricula List and Curriculum Approval – After a brief summarization by Susan Beck, Chairman Lemel presented this directive as a motion and second coming out of the Policy Committee. After discussion, Commissioner Thomas asked if the word “prohibits” could be used instead of “does not approve” on page two under “Policy”. Commissioner Malphrus made a motion to approve the recommended change; seconded by Commissioner Blackwood and unanimously approved by the Commission. Commissioner Malphrus then made a motion to approve the directive with the aforementioned change; seconded by Commissioner Blackwood; and unanimously approved by the Commission. (Attachment F)

604-04-DD: Standard First Aid with Cardiopulmonary Resuscitation (CPR) - Adult, Child, Infant

This directive was referred from the Policy Committee for staff delegation and was posted for external review. A motion was made by Commissioner Malphrus to approve the directive as submitted, seconded by Commissioner Thomas; and unanimously approved by the Commission. (Attachment G)

367-02-DD: Acquiring Information Technology (IT) Products and Services

This directive was referred from the Policy Committee for staff delegation and was posted for external review. A motion was made by Commissioner Malphrus to approve the directive as submitted, seconded by Commissioner Rawlinson; and unanimously approved by the Commission. (Attachment H)

367-32-DD: Information Security and Privacy

This directive which combines 13 other directives, was written by the agency's Information Security division with the assistance of the Information Technology division. It was referred from the Policy Committee for staff delegation and was posted for external review. A motion was made by Commissioner Malphrus to approve the directive as submitted, seconded by Commissioner Blackwood; and unanimously approved by the Commission. (Attachment I)

100-11-DD: Absence with Leave of District Director or Facility Administrator from Duty Station

Ms. Beck asked that this directive be marked obsolete. Commissioner Rawlinson made a motion to mark this directive obsolete; seconded by Commissioner Malphrus and unanimously approved by the Commission. (Attachment J)

367-09-DD: Acceptable use of Network Services and the Internet; 367-12-DD: Service Provider Data Protection; 367-18-DD: Information Security Policy - Access Control; 367-19-DD: Physical Access and Environmental Security Policy; 367-21-DD: Data Protection and Privacy Policy; 367-22-DD: Information Security Policy - Asset Management; 367-23-DD: Information Security Policy Information Systems - Acquisitions, Development, and Maintenance; 367-24-DD: Information Security Policy - IT Compliance; 367-25-DD: Information Security Policy - IT Risk Strategy; 367-26-DD: Information Security Policy - Risk Management 367-27-DD: Information Security Policy - Threat and Vulnerability Management; 367-28-DD: Information Security Policy - Business Continuity Management; and 367-29-DD: Information Security Program Master Policy

The above directives are presented to the Commission for approval to mark them obsolete. On a motion by Commissioner Blackwood, seconded by Commissioner Malphrus, the directives above have been approved to mark them all as obsolete.

Other Committee Updates – Ms. Beck reported that there have been 18 complete reviews and also marked 18 directives as obsolete, which means the Policy Committee is on pace to complete the goal of 45 directives per year. Ms. Beck thanked the Committee and Commission

for their attention and diligence. State Director Poole thanked the staff for all of their hard work. Commissioner Malphrus announced that the next Policy Committee meeting will take place on January 12, 2021 at 3:00 PM. (Attachment K)

Old Business

A. HHS Admin Contract Update

SCDHHS State Director Joshua D. Baker joined the Commission meeting via telephone to discuss in detail the 2014 Administrative Contract with SCDHHS, which ended June 30, 2020. Mr. Clark noted that the current Administrative Contract is in process and will be ready for execution soon. Commissioner Thomas moved that the 2014 Administrative Contract be approved as presented; seconded by Commissioner Miller and unanimously approved by the Commission.

B. Band B & I Switch to Fee for Service (FFS) Update

Mr. Clark commenced by stating that the baseline data from 2019 was used in the documents presented. He went on to explain that providers from the Coalition as well as the SC Human Services Providers Association were nominated by their peers to attend agency meetings to discuss the different Band Options. The provider network overwhelming supported Option 2. After detailed discussion, Commissioner Malphrus made a motion to approve Option 1 and seconded by Commissioner Thomas. Discussion ensued after the motion and before the vote of four (4) ayes (Commissioners Blackwood, Malphrus Rawlinson and Thomas) and two (2) nays (Commissioners Lemel and Miller). Option 1 was approved by the Commission. (Attachment L)

C. Cost Reports Update

Mr. Clark briefed the Commission on the status of the agency's Cost Reports dating back to 2013. The 2017 Cost Report was filed on November 4, 2020 and is awaiting approval from SCDHHS.

D. Legislative Update

Ms. McLeod announced that the Notice of Drafting documents for the agency's Regulations must be submitted to the Legislative Council by December 11, 2020 to publish in the State Register. The Notices of Drafting are valid for one calendar year. The 2021 session begins a new two-year cycle for regulations. If the proposed regulations are not approved this year, the agency still has another full session for the regulations to be approved. Commissioner Thomas and Ms. McLeod will work together on a meeting date for the Legislative Committee. The SC

House of Representatives will have an Organizational Session on December 1-2, 2020. Senator Brad Hutto has replaced Senator Nikki Setzler as the Senate Minority Leader.

E. Internal Audit Monthly Report

Mr. Yacobi presented the cost for an external assessment review (\$27,600) and the cost for a self-assessment with an external party to validate (\$14,800) per the Institute of Internal Auditors. He added that these estimates are only good for one year; and the next review year for the agency is 2022.

F. Abuse Neglect and Exploitation (ANE) Quarterly Report

Ms. Dalton gave the ANE report for community residential, day service and regional centers. There was no further discussion after her presentation. (Attachment M)

G. COVID Update

Mr. Britt briefed the Commission on COVID policies, updated positive result numbers, requests for individuals to spend Thanksgiving with family members outside of their residential facilities and hazard/hero pay for staff members.

New Business

A. Financial Update

Mr. Clark gave the financial update as of October 31, 2020. On a motion by Commissioner Thomas, seconded by Commissioner Miller, the Commission unanimously approved the financial update as presented. (Attachment N)

B. Hiring & Retention Bonus for LPNs/Nurses at Regional Centers

Mr. Britt expressed the critical need to hire and retain nurses, especially during COVID. The proposal outlined was explained in great detail. On a motion by Commissioner Rawlinson, seconded by Commissioner Miller, the Commission unanimously approved the hiring & retention bonus plan for LPNs/Nurses at Regional Centers. (Attachment O)

C. Head and Spinal Cord Injury (HASCI) Waiver Waiting List

Ms. Ritter presented the HASCI Waiver Waiting List for approval. She briefly went over the reason for requesting a waiting list. Commissioner Miller made a motion to approve the creation of a HASCI Waiver Waiting

List; and the motion was seconded by Commissioner Blackwood and unanimously approved by five (5) Commission members. Commissioner Rawlinson abstained from participation in this vote. (Attachment P)

State Director's Report

Director Poole provided a State Director's Report. Ms. Poole has requested that the Commission schedule a Workgroup meeting in January. Commissioner Lemel stated that he will communicate with each member to finalize a date. (Attachment Q)

Executive Session

At 1:50 p.m., Chairman Lemel requested a motion to begin Executive Session to discuss an employment matter regarding the Executive Director. On a motion by Commissioner Blackwood, seconded by Commissioner Malphrus and unanimously approved by the Commission.

Upon rising out of Executive Session at 2:18 p.m., Chairman Lemel announced that there was no motions made, no decisions were rendered and no votes taken.

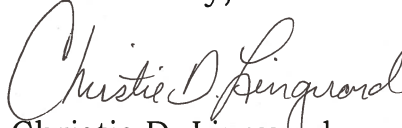
Next Regular Meeting

December 17, 2020

Adjournment

On a motion by Commissioner Blackwood, seconded by Commissioner Malphrus and unanimously approved by the Commission, the meeting was adjourned at 2:18 p.m.

Submitted by,


Christie D. Linguard

Approved:



Commissioner Robin Blackwood
Secretary

FINANCIAL MANAGERS FFS IMPLEMENTATION PLAN DISCUSSION



IMPLEMENTATION PLAN

- ICF Rates and ICF individuals' acuity reviews will be handled outside of the implementation plan and will be a separate project DDSN will be working on simultaneous with the following.
- All Providers will be asked to complete an acuity self-assessment of all CTH 2 and CRCF residential placements – three step process to be discussed later.



IMPLEMENTATION PLAN

- DDSN completed a “risk assessment” of the financial health of the Provider network.
- Identified those Providers that have low cash reserves (less than 1.5 months operating dollars) based on FY 2019 audited figures – 9.
- Identified those Providers with projected negative impact from implementation of Band B and I FFS conversion – 10.
- Those with low cash reserves and a projected annualized negative impact from implementation of FFS will be our highest priority – Phase 1.
- Others with projected significant annualized negative impact (> \$100,000) from implementation of FFS will be our next priority – Phase 2.

IMPLEMENTATION PLAN

- All Providers will have the acuity review completed and given equal treatment when assessing the band assignment of individuals served.
- Phase 1 Providers (9) will be the first reviewed for acuity of individuals served and an operational/fiscal review.
- Phase 2 Providers (10) will be the next batch reviewed for acuity of individuals served. An operational/fiscal review will be elective and discussed with each Provider.
- Criteria will be established related to DDSN's willingness to advance funds to Providers with inadequate cash reserves.



ACUITY REVIEW PROCESS – STEP 1

- **Step #1:** *Internal review of currently assigned residential bands being served by a DSN Boards. In this step the board is to mount an internal review of all their Band Gs and their Band Hs to see if a band swap can be made within the current bands the provider already receives. Submissions may be verified by DDSN. For this you will need to submit Justification for Band Swap*
- **Documentation requirements:** for this step providers will need to justify the swap and the ED needs to sign off on the submission



ACUITY REVIEW PROCESS – STEP 2

- **Step #2:** *In this step we will need to look at those individuals who need to be moved into a Band H from a G Band but for whom the provider does not have any additional G's to facilitate the swap. For these folks we you will need to submit a Request for a Band Change – increase to an H.*
- **Documentation requirements:** for this step providers will need to justify the request for band increase and the ED needs to sign off on the submission.



ACUITY REVIEW PROCESS – STEP 3

- **Step #3:** *In this step we need to look at those Band H individuals who reach the old “outlier” status. These folks you may have already submitted an outlier request or did not ever send in a request since you knew would have not been approved because of your agency’s overall positive financial position. To request this level of acuity (behavior or another reason) you will need to submit a Request for High Management Funding.*
- **Documentation requirements:** for this step providers will need to justify the need for additional funding as a high management and the ED needs to sign off on the submission.



Implementation Plan for FFS January 1, 2021

- 1) Credit Reports
 - a. Split of ID/RD by residential and non-residential
 - b. No back charge of CS Waiver
 - c. Instructions to Providers how to run
 - d. Update to Finance Manual
 - e. Internal review process
 - f. Communication to Case Managers about responsibility to review
 - g. Any change in coding in our general ledger?
- 2) Medicare Part D – split by residential and non-residential
 - a. Instructions to Providers how to run
 - b. Update to Finance Manual
 - c. Internal review process
 - d. Any change in coding in our general ledger?
- 3) Fiscal Agent Payrolls
 - a. Split prior to 1/1/21 – charge to Providers
 - b. After 12/31/20 – do not charge Providers
 - c. Instructions to Providers how to run
 - d. Update to Finance Manual
 - e. Internal review process
 - f. Communication to Case Managers/Finance Managers about responsibility to review
 - g. Any change in coding in our general ledger? ID/RD vs CS vs HASCI
- 4) What will the payment schedules look like as far as column for Waiver programs?
 - a. Providers use our breakdown to do their revenue postings
- 5) Third-party contracted service provider day services
 - a. Communicate that bills are to be sent to us – provider and finance managers
 - b. What do they need to send us to get paid?
 - c. What is the review process going to look like?
 - d. When are they due and what happens if late?
 - e. Do we need to get busy setting up vendors for them?
 - f. How do we code to our ledger? ID/RD vs CS vs HASCI
- 6) Grandfathered over-enrolled/state funded slots
 - a. Get on top of who these people are
 - b. Communicate to providers no new people to be funded without our approval and grandfathering
- 7) Day program services
 - a. Is bill setup and ready to print?
 - b. When are they due to us?
 - c. What rate are we paying? Per Mary comments good faith and pay \$31.29
 - d. Instructions to Providers how to run
 - e. Update to Finance Manual
 - f. Internal review process
 - g. Any change in coding in our general ledger? ID/RD vs CS vs HASCI
- 8) Supported Employment services
 - a. Is bill setup and ready to print?
 - b. What rate are we paying? Per Mary comments good faith and pay what amount since it varies? IDR Rate per 15 minutes?
 - c. When are they due to us?

- d. Instructions to Providers how to run
 - e. Update to Finance Manual
 - f. Internal review process
 - g. Any change in coding in our general ledger? ID/RD vs CS vs HASCI
- 9) Board billed services billing process
- a. Are we modeling after HASCI?
 - b. Do we have forms ready and where are they located for Provider access?
 - c. Update to Finance Manual
 - d. Internal review process
 - e. Communication to Providers on how this works
 - f. Any change in coding in our general ledger? ID/RD vs CS vs HASCI
 - g. Admin billing process
- 10) Retro rate increase payment
- a. Reports needed
 - b. Calculate amount owed
 - c. Communicate to Providers
 - d. Coding to our general ledger - ID/RD vs CS vs HASCI
 - e. When paid? Couple with day program recoupment?
- 11) Bands to be recomputed – residential bands
- a. ICF rate increase
 - b. Day program rate increase
 - c. Payment to be calculated
 - d. Communicate to Providers
 - e. Contracted service providers impact?
- 12) Band B outliers reconciled and settled
- 13) Contract content and language updates
- a. Day program attendance requirements
 - b. Band B and I names tracked in Contracts?
- 14) 250-10-DD Funding for Services Directive needs immediate revision
- 15) Figure out advance/loan program
- a. How do they apply?
 - b. What is required to be submitted?
 - c. How do we determine amount?
 - d. How do we determine repayment terms?
- 16) Are there revisions to other forms, procedures, or other materials needed?
- 17) Training sessions needed
- a. Who leads?
 - b. When?
 - c. What are the topics?
 - d. How much time is needed?
 - e. How many sessions?
 - f. Who needs to attend from Provider organizations?



South Carolina Department of Disabilities and Special Needs

COVID-19 Update

December 17, 2020

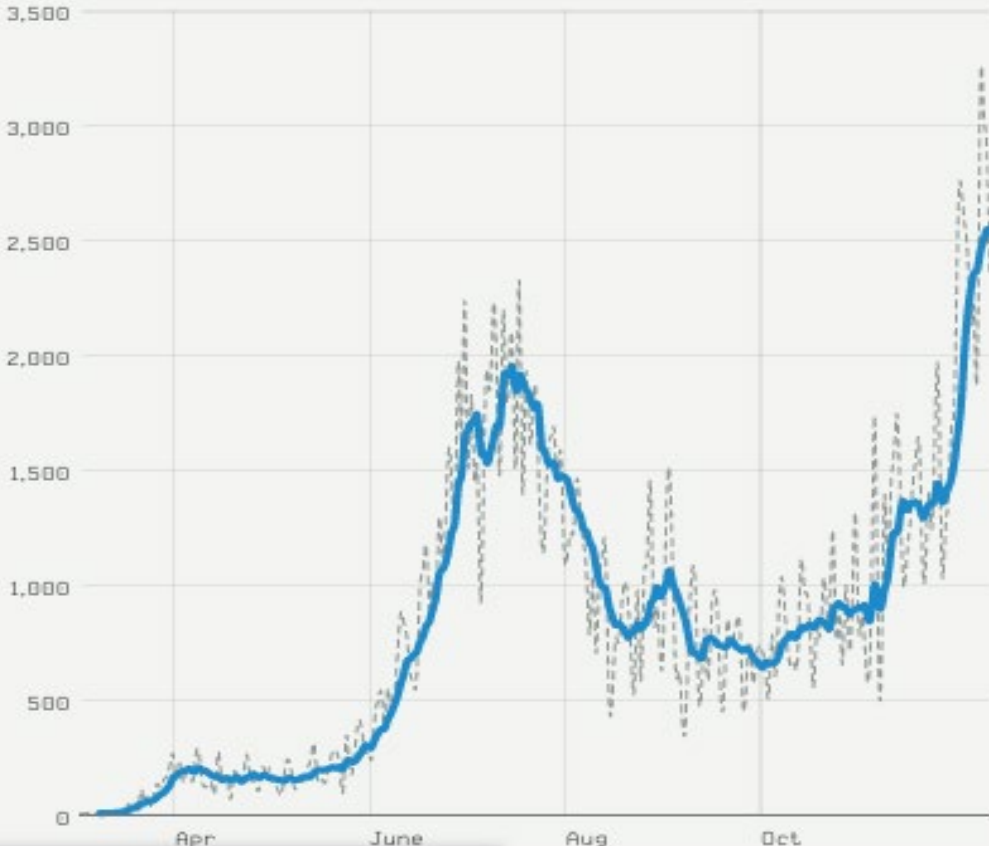
Deputy Director Pat Maley

SC Statewide COVID-19 Trends

COVID-19 CASES PER DAY IN S.C.

CONFIRMED CASES ONLY, UPDATED: 12/14/20, 3:21 PM

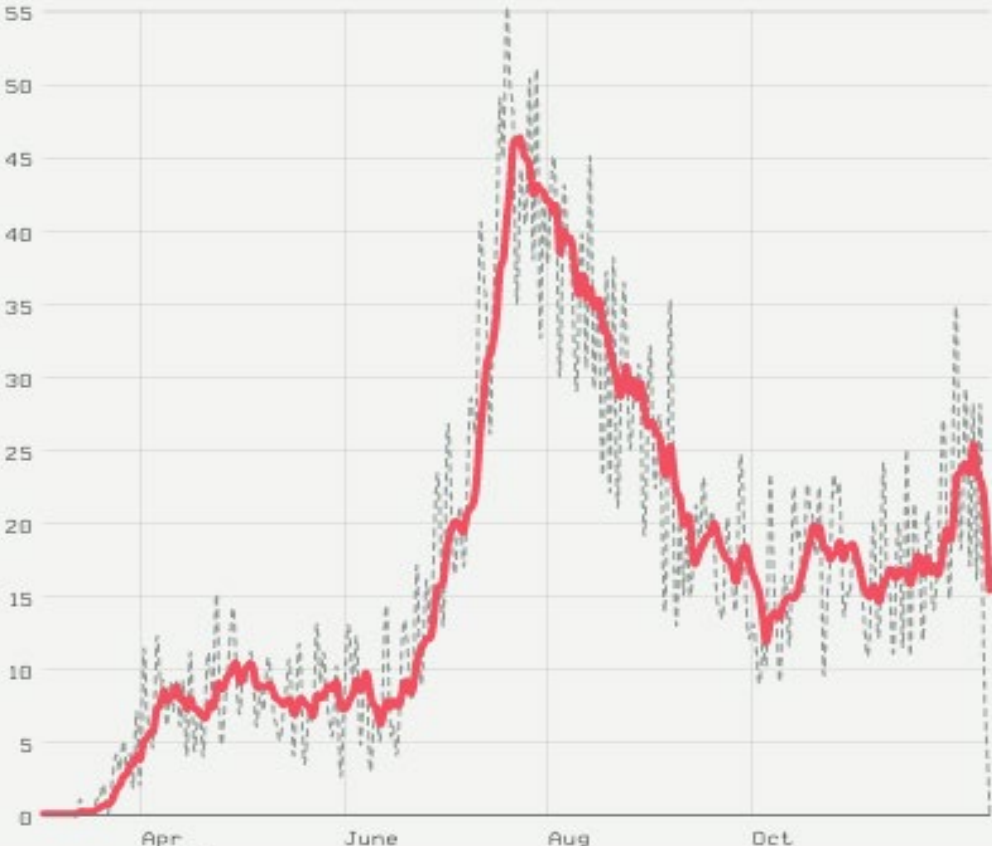
● 7-Day Average ● New Cases



COVID-19 DEATHS PER DAY IN S.C.

CONFIRMED AND PROBABLE DEATHS, UPDATED: 12/14/20, 3:21 PM

● 7-Day Average ● New Deaths



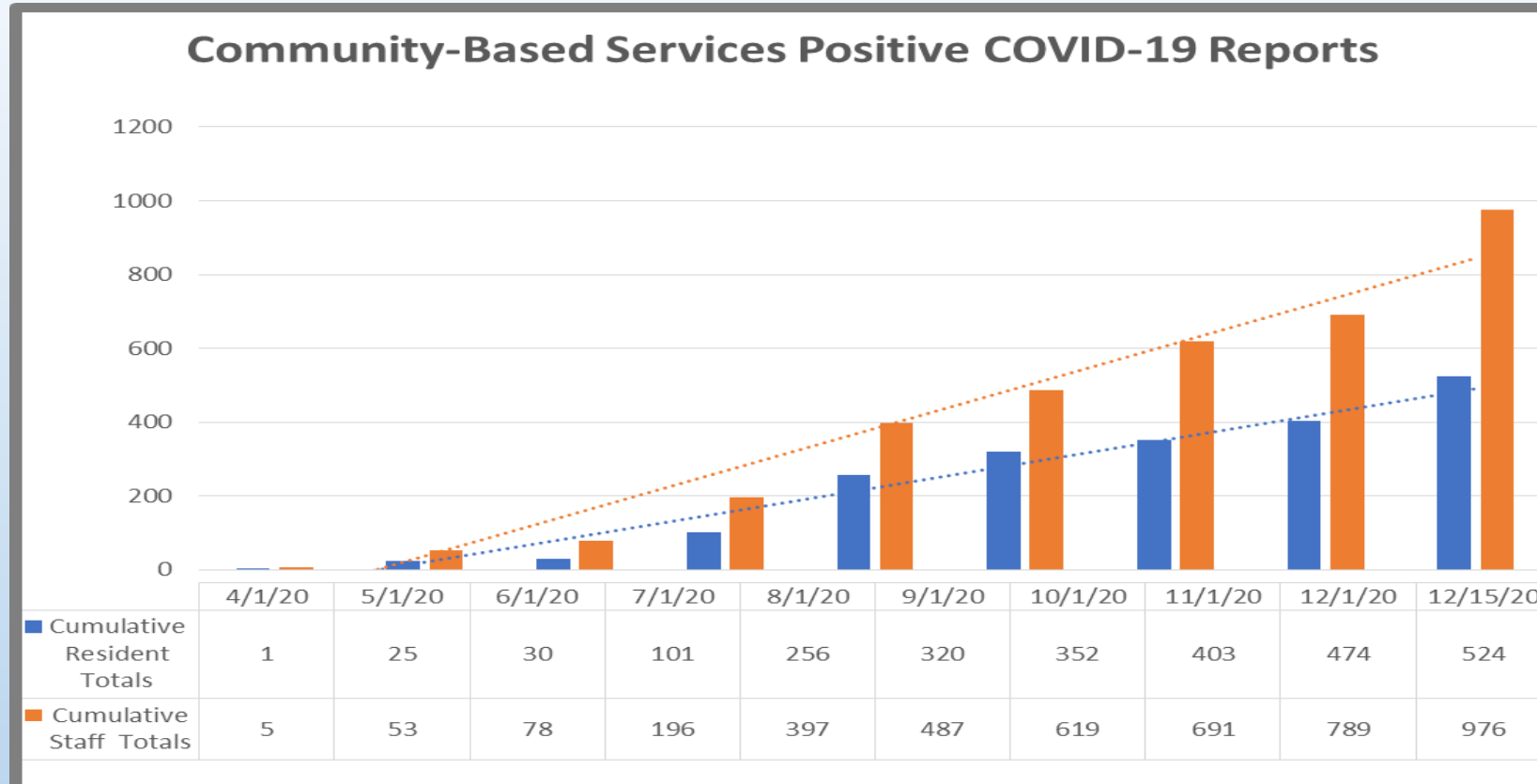
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DATA

THE POST AND COURIER

DATA

Community COVID-19 Trends



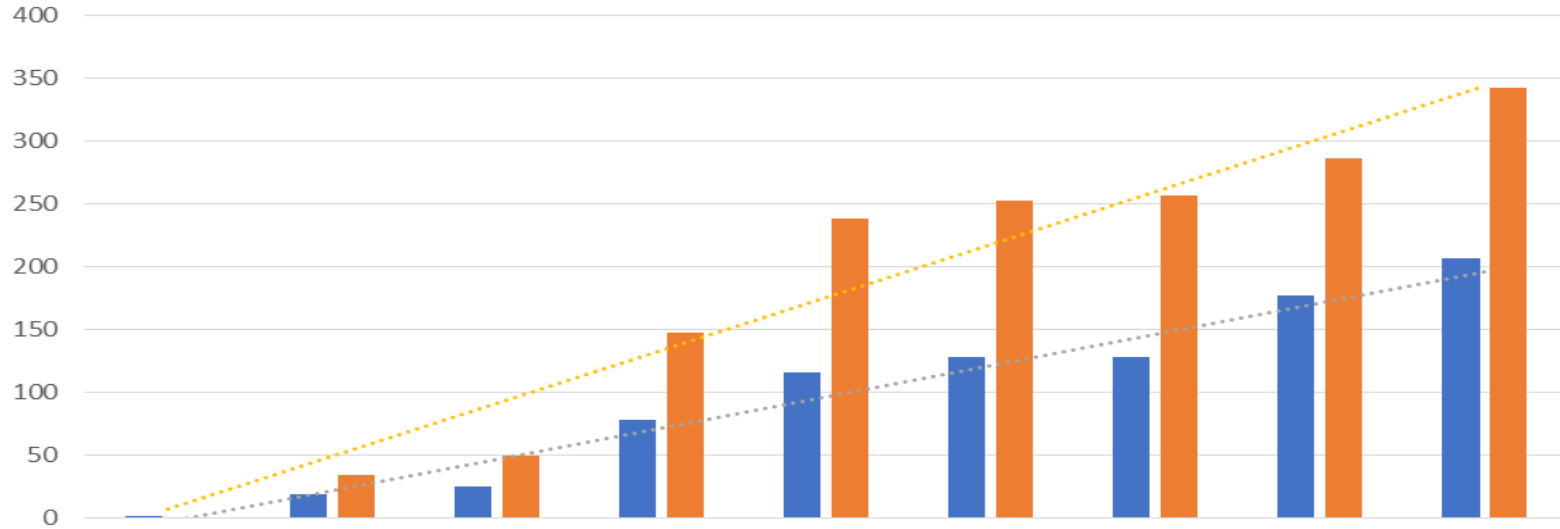
		May 1	June 1	July 1	Aug 1	Sept 1	Oct 1	Nov 1	Dec 1	Dec 15
Community-Based Residents	month increase	24	5	71	155	64	32	51	71	50
	percent increase	96%	17%	70%	61%	20%	9%	13%	15%	10%
Community-Based Staff	month increase	48	25	118	201	90	132	72	98	187
	percent increase	91%	32%	60%	51%	18%	21%	10%	12%	19%

← ½ month

← ½ month

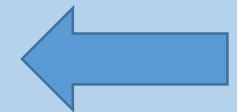
Regional Center COVID-19 Trends

Regional Center Positive COVID-19 Reports



	4/1/20	5/1/20	6/1/20	7/1/20	8/1/20	9/1/20	10/1/20	11/1/20	12/1/20	12/15/20
■ Cumulative Resident Totals	1	19	25	78	115	128	128	177	181	206
■ Cumulative Staff Totals	0	34	49	147	238	252	256	286	316	342

		May 1	June 1	July 1	Aug 1	Sept 1	Oct 1	Nov 1	Dec 1	Dec 15
Regional Center Residents	month increase	18	6	53	37	13	0	49	4	25
	percent increase	95%	24%	68%	32%	10%	0%	28%	2%	12%
Regional Center Staff	month increase	34	15	98	91	14	4	30	30	26
	percent increase	100%	31%	67%	38%	6%	2%	10%	9%	8%



½ month



½ month

SC Vaccine Plans

- SC COVID-19 Vaccine Plan has three phases.
- Phase I:
 - The CDC has only defined Phase IA to date: vaccinating frontline workers in a healthcare setting who are at highest risk of contracting COVID-19 and are essential to preventing mortality.
 - Residents of Long Term Care Facilities (LTCF) and staff involved in direct resident care, including janitorial/housekeeping/foodservice workers, are eligible to receive vaccines in Phase 1A. This permits DDSN providers to enroll their residential settings and DDSN enroll its Regional Centers.
- Two vaccines have been developed:
 - Pfizer: CDC approved - a messenger RNA vaccine; 2 dose; and stored in ultra-cold temps- approved Dec 12; and
 - Moderna: CDC approval expected in a week - a messenger RNA vaccine; 2 dose; and stored at regular freezer temps. Moderna has been designated by DHEC for LTCFs.

SC Vaccine Plans

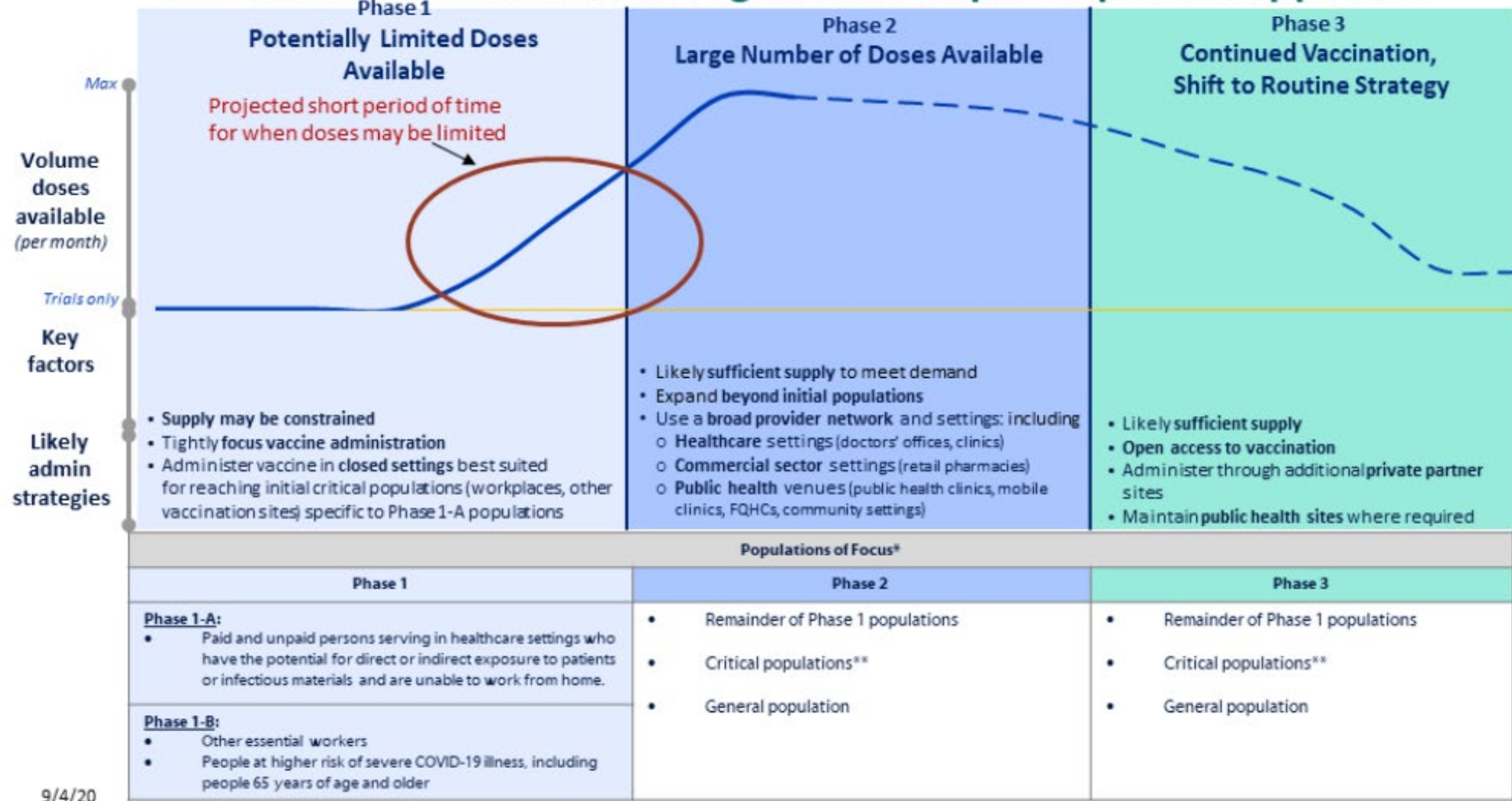
- LTCFs must enroll in the federal COVID-19 Vaccination Program coordinated through DHEC to receive COVID-19 vaccine at no cost.
- Providers must have a Chief Medical Officer to be responsible for aspects of the vaccination plan, which has been a challenge for some smaller providers.
- DDSN providers need to successfully enroll, and then DHEC will coordinate prioritizing and contacting to schedule vaccinations.

SC Vaccine Plans

- DHEC is planning to have the bulk of the LTCFs vaccinated through contracts with CVS and Walgreens.
- Residents and staff must individually consent. If a resident cannot give informed consent, consent will then be needed from the resident's legally authorized decision-maker.
- "Vaccine Information Sheets" will be distributed as soon as received after the Moderna vaccine receives CDC approval.
- Scheduling vaccines at LTCFs can start as soon as 12/28/2020.

SC Vaccine Plans—General Description of 3 Phases

The COVID-19 Vaccination Program will require a phased approach



Questions?

Thank You!

All State Agencies are Operating Under a Continuing Resolution Appropriations

FY 20/21 Legislative Authorized & Spending Plan Budget VS Actual Expenditures (as of 11/30/2020)

Funded Program - Bud	Continuing Resolution Appropriations	Adjustments	Adjusted Budget	YTD Actual Expense	Remaining Budget	Percent Expended - Target %
						41.67%
ADMINISTRATION	\$ 8,386,999	\$ 18,500	\$ 8,405,499	\$ 2,863,918	\$ 5,541,581	34.07%
PREVENTION PROGRAM	\$ 157,098	\$ -	\$ 157,098	\$ 12,500	\$ 144,598	7.96%
GREENWOOD GENETIC CENTER	\$ 15,185,571	\$ -	\$ 15,185,571	\$ 5,958,600	\$ 9,226,971	39.24%
CHILDREN'S SERVICES	\$ 12,291,594	\$ (24,000)	\$ 12,267,594	\$ 4,092,890	\$ 8,174,704	33.36%
IN-HOME FAMILY SUPP	\$ 86,302,031	\$ (11,594,000)	\$ 74,708,031	\$ 18,451,700	\$ 56,256,331	24.70%
ADULT DEV&SUPP EMPLO	\$ 83,358,338	\$ 4,600,000	\$ 87,958,338	\$ 37,091,792	\$ 50,866,546	42.17%
SERVICE COORDINATION	\$ 15,166,140	\$ -	\$ 15,166,140	\$ 4,872,397	\$ 10,293,743	32.13%
AUTISM SUPP PRG	\$ 26,368,826	\$ -	\$ 26,368,826	\$ 7,819,255	\$ 18,549,571	29.65%
HD&SPINL CRD INJ COM	\$ 5,040,532	\$ -	\$ 5,040,532	\$ 2,130,144	\$ 2,910,388	42.26%
REG CTR RESIDENT PGM	\$ 77,137,897	\$ 768,917	\$ 77,906,814	\$ 30,277,215	\$ 47,629,598	38.86%
HD&SPIN CRD INJ FAM	\$ 18,965,193	\$ 2,000,000	\$ 20,965,193	\$ 8,414,341	\$ 12,550,852	40.13%
AUTISM COMM RES PRO	\$ 29,749,084	\$ 5,000,000	\$ 34,749,084	\$ 15,682,289	\$ 19,066,795	45.13%
INTELL DISA COMM RES	\$ 340,593,466	\$ (61,266)	\$ 340,532,201	\$ 140,285,412	\$ 200,246,788	41.20%
STATEWIDE CF APPRO	\$ -	\$ 49,799	\$ 49,799		\$ 49,799	0.00%
STATE EMPLOYER CONTR	\$ 29,862,643	\$ 126,653	\$ 29,989,296	\$ 11,845,446	\$ 18,143,850	39.50%
Earmarked Authorization over DDSN Spending Plan	\$ 56,235,857	\$ -	\$ 56,235,857		\$ 56,235,857	
Legislative Authorized Total	\$ 804,801,269	\$ 884,603	\$ 805,685,872	\$ 289,797,899	\$ 515,887,972	35.97%
Legislative authorization capacity above actual spending plan budget			\$ (56,235,857)		\$ (56,235,857)	
DDSN spending plan budget			\$ 749,450,015	\$ 289,797,899	\$ 459,652,116	38.67%
Percent of total spending plan budget			100.00%	38.67%	61.33%	REASONABLE
% of FY completed (expenditures) & % of FY remaining (available funds)			100.00%	41.67%	58.33%	
Difference % - over (under) budgeted expenditures			0.00%	-3.00%	3.00%	

Carry Forward + Cash Flow Analysis Indicates Sufficient Cash to Meet FY 21 Estimated Expenditure Commitments: YES ; At-Risk ; NO

Expenditures categorized to provide insight into direct service consumers costs vs. non-direct service costs:

Expenditure	FY 20 - % of total	FY 19 - % of total
Central Office Admin & Program	2.24%	2.35%
Indirect Delivery System Costs	1.03%	1.22%
Board & QPL Capital	0.04%	0.07%
Greenwood Autism Research	0.03%	0.03%
Direct Service to Consumers	96.67%	96.33%
Total	100.00%	100.00%

NOTE: Prior FY data will be calculated and presented to provide assurance as to the consistent pattern of direct service & non-direct service expenditures and explanation for increases/decreases

FY 2021 Amendments for Review

	Amendment #3	FY 2021	Description
Babcock Center	Capitated- Band B	\$ 182,192	16 Additional Band B Consumers
Babcock Center	Capitated- CSW	\$ 184,247	14 Additional Band I Consumers
		\$ 366,439	
	Amendment #3	FY 2021	Description
Charles Lea Center	Capitated- Band B	\$ 23,633	4 Additional Band B Consumers
Charles Lea Center	Capitated- CSW	\$ 213,763	16 Additional Band I Consumers
		\$ 237,396	
	Amendment #3	FY 2021	Description
Thrive Upstate	Capitated- Band B	\$ 103,210	8 Additional Band B Consumers
Thrive Upstate	Capitated- CSW	\$ 259,845	21 Additional Band I Consumers
		\$ 363,055	
	Amendment #2	FY 2021	Description
MaxAbilities of York	Capitated- Band B	\$ 100,872	10 Additional Band B Consumers
MaxAbilities of York	Capitated- CSW	\$ 117,311	9 Additional Band I Consumers
		\$ 218,183	

DRAFT FY21 Strategic Objectives (Updated 11/17/2020)

Strategic Objective #	Strategic Objective Description
I	Move from the "Band" capitated payment system to a fee-for-service model, to include substantial progress for at-home and residential bands during FY21 and complete conversion by 1/1/22.
II	Obtain full compliance with the HCBS Settings Regulation as far in advance of the March 2023 deadline as possible, along with accomplishing FY21 milestones set out in its project plan. *State compliance schedule set forth by SC Department of Health and Human Services as the single state Medicaid Agency.
III	Obtain full compliance with the Conflict Free Case Management Rule prior to the March 2023 deadline, along with accomplishing FY21 milestones set out in its project plan. *State compliance schedule set forth by SC Department of Health and Human Services as the single state Medicaid Agency.
IV	Internal Audit will commit to reviewing both DDSN internal processes and the provider network. Internal Audit must provide assurance to the Commission that DDSN is operating properly and the Commission is being provided accurate and full information to make appropriate decisions.
V	Management will ensure the Commission receives accurate and full information on both specific issues of interest (e.g., fee-for-service conversion; waiver waiting list) and overall agency operational efficiency and effectiveness.
VI	Management will ensure it operates in a highly transparent manner with an affirmative duty to alert the Commission to significant issues (e.g., new divisions; major staff changes; new programs), along with seeking Commission formal support when appropriate.
VII	Address weak financial reserve position by controlling administrative costs, increasing process efficiencies, plug band system revenue holes, and justifying rate increases from SC Department of Health & Human Services through market rate data and delayed cost reporting.
VIII	Improve the Quality Management functions for community settings & Regional Centers through better analysis of performance data to identify problems; follow-up problems identified with higher expertise providing technical assistance; build a systematic training program for providers; enhance technology; enhance performance data through improved standards better correlating with actual performance and a risk-based methodology; and ensure accountability for required corrections.
IX	Institutionalize a continuous improvement workplace environment through process improvements, improved management information systems to support evidenced based management, and accountability for results.
X	Address the impact of COVID-19 on the individuals we serve, providers, and DDSN operations.

Director's Report – December 2020

1. This meeting had a lot of meaty topics so my report is very short.
2. Joshua Baker has resigned his position as the director of DHHS – he stated that he will be working through January. That being said we have a lot to be done:
 - a. The EVV MOU
 - b. Complete the current year's admin contract along with some Individuals Service Agreements – which will allow for a higher match to be pulled down
 - c. Try and get a rate agreement - not discrete residential rates as that requires a waiver amendment; but an increase based on our cost reports for the single residential rate we currently receive
 - d. Begin the process with Mercer to build the residential and day program rates.
3. This next item is one of those pre-announcements of an item that will be on the January agenda – and it is one we have spoken about previously. Legacy bed vacancies – at this time when a bed is vacated at a provider - and the individual did not choose another provider and take their funding with them – the provider retains that vacancy. We pay for 30 days (60 now because of COVID – but that is temporary) allowing them to retain staffing levels – but the bottom line is that they have the bed and it cannot be used elsewhere. At this time with fee for service on the horizon, we must have an incentive to fill the vacant beds within the community provider network. Legacy beds do not do that – we need to pull the bed back after a number of vacant days and place it into a pool – which is the way we operate the Supervised Living Program level 1. When a provider finds a person to fill their vacancy they would simply request a bed from the residential pool to fill it. This would encourage providers to fill their beds and to provide services to those in needs as well as to keep up their revenues. I just want to bring this to your attention since prior to putting it on the agenda.

4. I want to thank all of the Regional Center DSPs and staff who have been working and will be working through the holidays. I also want to thank all of the community DSPs and staff who are doing the same. – Working in a 24/hr. facility is always difficult during holidays, bad weather and – yes - pandemics. Now they are working through the holidays and a pandemic. I want all of us who are not doing this to remember them, thank them for they are where the rubber meets the road – they are there giving the care – the hands on. I want you all to know that you have my deepest appreciation.
5. I want to thank the staff who are working diligently to make this transition to fee for service work as smoothly and as seamlessly as possible for the provider network. Again – we cannot care for our folks without a strong, vibrant provider network and my goal is to maintain the health of our provider network as well as our regional centers.
6. I would also like to wish everyone a very Happy Holiday Season with prayers for a very Happy and Healthy New Year!