

From: [Linguard, Christie](#)
Subject: Meeting Notice - SC Commission on Disabilities & Special Needs Commission Meeting - October 21, 2021
Date: Wednesday, October 20, 2021 8:48:17 AM
Attachments: [Agenda and Attachments for Commission Meeting - October 21 2021.pdf](#)

Good Afternoon,

The South Carolina Commission on Disabilities and Special Needs will hold its regularly scheduled meeting in person on Thursday, October 21, 2021, at 10:00 a.m. in conference room 251 at the SC Department of Disabilities and Special Needs Central Administrative Office, 3440 Harden Street Extension, Columbia, SC. Any member of the public attending in person must view this meeting in a separate conference room at the central office. To access the live audio stream for the 10:00 a.m. meeting, please visit www.ddsn.sc.gov.

Please see the attached agenda and attachments for the Commission Meeting.

This Miracle Park video link will be shared with the commission members during the meeting: <https://www.wbtv.com/2021/09/19/designed-everyone-miracle-park-opens-rock-hill/>

For further information or assistance, contact (803) 898-9769 or (803) 898-9600.

Thank you.

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 (TEAMS)
Columbia, South Carolina**

October 21, 2021

10:00 A.M.

1. Call to Order *Chairman Stephanie Rawlinson*
2. Notice of Meeting Statement *Commissioner Robin Blackwood*
3. Welcome
- Tab 1 4. Adoption of Agenda
5. Invocation *Commissioner David Thomas*
- Tab 2 6. Approval of the following Commission Meeting Minutes:
 - A. September 15, 2021 Special Called Commission Meeting
 - B. September 16, 2021 Commission Meeting
 - C. October 7, 2021 Special Called Commission Meeting
7. Commissioners' Update *Commissioners*
- Tab 3 8. National Disability Employment Awareness Month *Mr. Rufus Britt
Ms. Susan Davis
Ms. Becky Peters*
9. Public Input
10. Disability Rights South Carolina *Beth Franco*
11. Commission Committee Business
 - A. Finance and Audit Committee *Committee Chair Robin Blackwood*
 - Tab 4 1. 200-02-DD: Financial Management of Personal Funds
 - Tab 5 2. Financial Approval & Threshold Report for October 2021
 - Tab 6 3. Band B and I Report for October 2021
 - B. Policy Committee *Committee Chair Barry Malphrus*
- Tab 7 800-07-CP: SC Commission on Disabilities and Special Needs Committee Procedures
12. Special Commission Subcommittees and Taskforce Updates
 - FMAP Subcommittee *Chair Robin Blackwood*
13. Old Business
 - A. ID/RD Waiver Renewal Update *Ms. Lori Manos*
 - B. Fee-for-Service Update *Mr. Pat Maley*
 - C. Cost Report Update *Mr. Pat Maley*
 - D. Internal Audit Update *Ms. Courtney Crosby*

14. New Business

Tab 8

1. Financial Update

Mr. Pat Maley

Tab 9

2. Processing Retirement & Health Insurance Appropriations
To Providers

Mr. Pat Maley

15. Director's Update

Dr. Michelle Fry, J.D.

16. Next Regular Meeting (November 18, 2021)

17. Adjournment

SOUTH CAROLINA COMMISSION ON DISABILITIES AND SPECIAL NEEDS

SPECIAL-CALLED WORKGROUP TRAINING MEETING MINUTES

September 15, 2021

The South Carolina Commission on Disabilities and Special Needs met on Wednesday, September 15, 2021, at 1:00 p.m. at the Department of Disabilities and Special Needs Central Office, 3440 Harden Street Extension, Columbia, South Carolina.

The following were in attendance:

COMMISSIONPresent In-Person

Stephanie Rawlinson – Chairman

Barry Malphrus – Vice Chairman

Robin Blackwood – Secretary

Gary Kocher, M.D.

Eddie Miller

David Thomas

Microsoft Teams

Gary Lemel

DDSN Administrative Staff

Pat Maley, Chief Financial Officer; Ken Parks, Manager - Information Technology Division; and Christie Linguard, Administrative Coordinator.

Others Present

Attorneys Ashley Story and Scott Winburn from White & Story, LLC.

Call to Order and Notice of Meeting Statement

Chairman Rawlinson called the meeting to order at 10:50 a.m. 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

Commissioner Thomas made a motion to adopt the agenda as presented. This motion was seconded by Commissioner Malphrus and unanimously approved by the commission members. (Attachment A)

Invocation

Commissioner Miller gave the invocation.

Executive Session #1

At 1:11 a.m., Commissioner Miller made a motion to enter into executive session to receive legal advice. This motion was seconded by Commissioner Kocher and unanimously approved by the commission.

Rise Out of Executive Session #1

Upon rising out of executive session, Chairman Rawlinson announced that there were no decisions or motions made and no action or votes taken during executive session. Due to technical difficulties, Commission Malphrus made a motion for information technology to stop live broadcasting until the video problems can be corrected, seconded by Commissioner Miller, and unanimously approved by the commission.

After a brief break, Commission Malphrus made a motion to resume with the balance of the agenda, seconded by Commissioner Thomas and unanimously approved.

Commissioner Blackwood made a motion to have the agency's human resource director fulfill back pay and benefits for former state director, Mary Poole, and to also include payment of her attorney's fees once they are confirmed tomorrow; the motion was seconded by Commissioner Thomas and unanimously approved by the commission.

Commissioner Thomas requested that documents be sent to the public when the meeting notice and agenda are sent out. Commissioner Rawlinson asked if that discussion can be tabled until the Commission meeting tomorrow.

Workgroup Training Topics for Discussion

Scott Winburn, Esq. began by introducing himself. He discussed the roles of the state director versus the role of the Commission. Commissioner Malphrus noted that SC Code of Law Section 44-20-230 should be included in DDSN's Executive Limitation Policy. The Commission discussed possibly making the Personnel Committee a standing committee that meets on a regular basis.

Ashley Story, Esq. presented on the Freedom of Information Act (FOIA), conducting executive sessions and Robert's Rules of Order. Discussion was held on quorums for the full commission meetings (four commissioners) as well as quorums as it relates to subcommittees and task force meetings (two-third commissioners). Attorney Story noted that the quorum may change depending on the group that is meeting.

(Attachment B)

Executive Session #2

Commissioner Miller made a motion to enter into the second executive session, seconded by Commissioner Malphrus and unanimously approved by the full commission.

Rise Out of Executive Session #2

Upon rising out of executive session where a personnel matter was discussed, Chairman Rawlinson announced that there were no decisions or motions made and no action or votes taken during executive session. Commissioner Blackwood made a motion to instruct Find Great People to make an offer to Candidate #3, subject to salary negotiations and clearance provisions, provided that Candidate #3 accepts this offer within 24 hours. Commissioner Blackwood asked that this motion be voted on by individual members according to FOIA. Commissioner Miller seconded the motion. Commissioner Malphrus requested that the motion be amended to instruct both Find Great People and State HR; Commissioner Miller seconded the amended motion. Commissioner Malphrus noted that FOIA requests that in situations like this, individual votes be taken. Commissioners Miller, Malphrus, Blackwood, Thomas and Rawlinson voted yes to Candidate #3; Commissioners Kocher and Lemel voted no to Candidate #3. The motion is approved by a majority of five to two to make an offer to Candidate #3.

Adjournment

On a motion by Commissioner Thomas, seconded by Commissioner Malphrus, and unanimously approved by the commission, the meeting was adjourned at 4:18 p.m.

Submitted by:

Approved by:

Christie D. Linguard
Administrative Coordinator

Commissioner Robin Blackwood
Secretary

MINUTES

September 16, 2021

The South Carolina Commission on Disabilities and Special Needs met on Thursday, September 16, 2021, 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**

Stephanie Rawlinson – Chairman

Barry Malphrus – Vice Chairman

Robin Blackwood – Secretary

Gary Kocher, M.D.

Gary Lemel

Eddie Miller

David Thomas

DDSN Administrative Staff

Pat Maley, Chief Financial Officer and Deputy Director; Rufus Britt, Associate State Director of Operations; Lori Manos, Interim Associate State Director of Policy; Courtney Crosby, Internal Audit Director; Tommy Windsor, Public Information Officer and Legislative Liaison; Robb McBurney, Emergency Operations and Special Projects; Melissa Ritter, Head and Spinal Cord Injury Director; Ken Parks, Information Technology Division; and Christie Linguard, Administrative Coordinator.

Notice of Meeting Statement

Chairman Rawlinson 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.

Welcome

Chairman Rawlinson welcomed everyone to the meeting and announced that Constance Holloway, Interim State Director, is still out on leave and is doing well.

Adoption of the Agenda

Commissioner Thomas made a motion to adopt the September 16, 2021 agenda to include deleting the executive session after Chairman Rawlinson indicated that there there will not be a need for an executive session. The motion to adopt the agenda and to delete the executive session was seconded by Commissioner Malphrus and unanimously approved by the commission. (Attachment A)

Approval of the Minutes from August 19, 2021 Commission Meeting and September 8, 2021 Special Called Meeting

Commissioner Thomas has asked if the public can receive attachments to the agenda when the agenda is posted to the agency's website. Chairman Rawlinson agreed to speak to the IT department to see if they can upload attachments and mark them as a "Draft" copy. Commissioner Thomas further requested that the chairman of the Policy Committee work on a standard operating procedure to upload attachments with the agenda prior to the meeting. Commissioner Lemel expressed his appreciation to the DDSN staff for taking on the additional burden of uploading documents to the website prior to the meetings. On a motion by Commissioner Malphrus seconded by Commissioner Blackwood and unanimously approved by the commission, the August 19, 2021 and September 8, 2021 minutes were approved as presented. (Attachment B)

Commissioners' Update

Commissioner Blackwood spoke about her attendance to the Thrive Upstate board meeting and a presentation at the Triple Center. Commissioner Lemel announced that the formal opening of Miracle Park in Rock Hill, SC is this Saturday. Chairman Rawlinson reminded everyone that this is Spinal Cord Awareness Month. Also, she and Commissioner Blackwood had a virtual meeting with Disability Rights South Carolina. Chairman Rawlinson encouraged all disabilities agencies to call her or Commissioner Blackwood if they would like to present to the Commission. Lastly, Chairman Rawlinson noted that she visits with the Governor's Office often and has even taken Commissioners Miller and Blackwood with her. The Governor's Office is very excited about things that are happening at the agency, including the agency's leadership. Chairman Rawlinson has arranged to meet with the Governor's Office on a quarterly bases.

Public Input

There were two public input requests from Michelle Shaffer and Beth Bunge.

Commission Committee Business

A. Finance and Audit Committee

The Finance and Audit Committee met on September 7, 2021. The following topics were presented for review and approval by the Commission:

There were two service contracts that were presented and approved by the committee; the commission does not need to vote on these two contracts as they are routine in nature. (Attachments C)

Four outlier requests were presented and approved by the committee. Chairman Rawlinson noted that the commission will treat the approval as a motion and second coming out of committee. The commission unanimously approved the four preliminary staff recommendations for band outliers. (Attachment D)

B. Policy Committee

The Policy Committee met on September 14, 2021. The following topic was presented for review and/or approval by the Commission:

502-10-DD: Transition of Individuals from DSN Regional Centers to Community; 700-03-DD –Informed Choice in Living Preference (ICFs/IID); and Discharge Planning for Individuals Leaving ICFs/IID and Enrolling in DDSN Operated Home and Community-Based Waiver – Ms. Manos stated that all three directives were referred to staff, went out for public comment and approved by the committee. Chairman Rawlinson treated the committee's approval as a motion and second; the commission unanimously approved all three directives. (Attachments E, F & G)

Special Commission Subcommittees and Taskforce Updates

Chairman Rawlinson asked if all committee chairs give an update on new members of their respective committees. Commissioner Miller was asked to give Commissioner Lemel committee member Mr. Holt's contact information. Chairman Rawlinson noted that while no decisions are made at these meetings; and they are not live broadcasted, the public can come in to watch in a separate conference room. Minutes will be taken at these meetings and posted on the DDSN website.

- A. Formal Decision – Subcommittees and Taskforce Meetings – Chairman Rawlinson briefed the commission on these meetings and the fact that they are working meetings that will be treated as commission meetings. She also defined both subcommittees and taskforce. Currently, there are two subcommittees (Communications and FMAP Oversight; and there are four taskforce (ICF Reform & Improvement; Wage, Equity & Parity; Autism; and Training). (Attachment H)

- B. Communications Subcommittee – Chair of the subcommittee, Commissioner Malphrus, noted that this subcommittee met on August 24, 2021 and voted to purchase three (3) runners; a plaque for each departing commission member (a total of five) who was appointed by Governor McMaster; two (2) podium signs; and a conference room sign. The subcommittee is requesting an amount no more than \$900 to pay for these items. This subcommittee is looking to hold future meetings in locations throughout the state to make these meetings easily accessible for everyone. We realize that COVID may stop this for the next several months. The members of the subcommittee is also looking at posting recruiting videos on social media. Discussion was held in the subcommittee meeting about having a meet and greet with all Disability of Special Needs Board Chairs sometime next year. Commissioner Malphrus asked for a motion for the subcommittee to spend no more than \$900 on the purchase of the aforementioned items; this motion was seconded by Commissioner Blackwood. Commissioner Lemel noted that while he is pleased with the look of the commission room, he would like to know why the subcommittee has not looked into purchasing new items for the ICFs and regional centers (i.e., microwaves, sofas, etc.). Chairman Rawlinson answered that the ICF Reform and Improvement Taskforce will be looking into these items for the ICFs and regional centers in the future. The commission unanimously approved the budget to purchase of the aforementioned items.
- C. FMAP Oversight Subcommittee – Commissioner Blackwood noted that their first meeting took place on September 1, 2021, at 2:30 PM. The committee members were announced. The budget areas that the commission approved were discussed in great detail. The agency has not yet received this money from the federal government. The next meeting will take place on October 6, 2021.
- D. Wage, Equity & Parity Subcommittee – Commissioner Thomas announced that this subcommittee met on September 14, 2021. He will send the minutes from the meeting to all commission members. He solicited membership from anyone listening today who is interested in the work of this subcommittee.

Chairman Rawlinson reminded commission members that they can submit a written copy of their meetings if they choose to do so. Eventually, she would like to see a running list of scheduled subcommittee and taskforce meetings.

Old Business

- A. Spinal Cord Injury Awareness Month

Ms. Ritter commenced by calling the members' attention to a painting in the room created by a spinal cord injury consumer who paints with a paintbrush in his mouth. She went on to share the festivities for the month were shared.

B. Intellectual Disability/Related Disabilities (ID/RD) Waiver Renewal Update

Ms. Manos updated the commission on the two webinars held by the Department of Health and Human Services. The deadline for final input from the public is September 25, 2021 at 5:00 PM. The residential tiers will be in the waiver; however, the rates have yet to be determined.

C. Fee-for-Service Update

Mr. Maley noted that once the ID/RD waiver renewal is finalized, the agency can move to fee-for-service.

D. Cost Report Update

Mr. Maley stated that FY13 and 14 cost reports are completed; he does have the draft form of FY15; however, he has not reviewed it yet.

E. Internal Audit Update

Ms. Crosby introduced herself, shared a little of her background and future plans for the division of internal audit at the agency. She stressed that the goal of internal audit is to add value for the agency; it is a partnership with management.

F. Legislative Update

Mr. Windsor addressed the commission and discussed the upcoming general assembly schedule. He noted that there will be meetings with key legislators and stakeholders taking place soon. He would like for commission members, if available, to meet with legislators in their districts as the meetings are scheduled.

G. COVID-19 Update

Mr. McBurney briefed the commission on the status of COVID cases in the regional centers. There is a decline in the number of cases in the state of South Carolina. He commented on the importance of getting vaccinated. Commissioner Thomas would like a six month to a year death comparison total. Approximately 90% of our consumers and 55% of our staff has been vaccinated. The third vaccine shot has been approved for

immunocompromised individual, which is different from the booster shot. Chairman Rawlinson asked what the agency will do if the federal government mandates for companies who employ over 100 individuals and agencies that receive federal funding will have. Mr. Burney stated that the Centers for Medicare and Medicaid Services (CMS) will put out a final rule and have an opportunity to for the public to comment. Chairman Rawlinson would like the commission to be updated on any federally mandated vaccination plans.

H. Impact of Chronic Workforce Shortages

Mr. Britt discussed some of the critical needs cases that show up in area emergency rooms. A tremendous positive that has come out of this pandemic is the fact that there are an enormous amount of communication and commitment amongst providers. This includes the day programs. The weekend enhanced pay initiative is helping considerably in our regional centers. Lastly, Mr. Britt commended the families and family groups of our consumers. They have been very supportive in beautifying the campuses, donating monies, etc. to the regional centers.

New Business

A. Financial Options to Assist in Mitigating Staffing Shortages

Mr. Maley discussed his memorandum sent to commission members yesterday outlining funds authorized and is being executed to providers; funds authorized but awaiting approval, which includes an option for the agency to immediately “advance” the 2.5% cost of living allowance (COLA) and retroactive lumpsum payment until rates are approved; rate increases to support the system’s long-term sustainable health; and the ID/RD waiver renewal to include the tier rates. Commissioner Blackwood made a motion to advance the 2.5% COLA to our healthcare network based on the FY22 legislative mandate and in anticipation of DHHS’ Medicaid rate increases; this motion was seconded by Commissioner Miller and unanimously approved by the commission. (Attachment I)

B. FY21 Accountability Report

Mr. Maley brief the members on DDSN’s accountability report, which is now electronic. He updated the numbers and has sent the narrative in to the commission members and to the Department of Administration. Once Mr. Maley finishes the report, he will send to Chairman Rawlinson for her signature and then to the full commission.

C. FY23 Legislative Budget Proposal

The one-page FY22-23 budget request was discussed in great deal by Mr. Maley. The agency's proposal is to escrow three (3) years of FMAP money (approximately \$39 to \$50 million) so that the agency can work its way through the legislative process to receive recurring funds to pay for the ID/RD waiver renewal. The final costs cannot be calculated until DHHS provides us with the ID/RD rates. Once these rates are received by the agency, the commission will need to reconvene to approve the budget request. (Attachment J)

D. 10% FMAP Planning

Mr. Maley presented the commission with options/decisions for how the agency should execute the 10% budget items after CMS approves the FMAP budget. He presented three budget items that requires a decision from the commission: 1) \$1.0 million "gap" funds; 2) \$7.0 million hiring/retaining incentive funds; and 3) \$7/unit add-on for at-home Day services retroactive to April 2021, which totals \$1.57. Written input from providers included four responses and after a virtual meeting with six executive directors of Disability and Special Needs Boards, they recommended percentage of revenue for budget item #1 (gap funds) and full-time equivalents (FTEs) for budget item #2 (hiring/retention initiatives). Commissioner Blackwood made a motion to use percentage of FTEs as the allocation method for budget items #1 and #2 for the 10% FMAP to establish one allocation method to simplify communications, and budget execution in addition to pay \$7/unit add-on for at-home Day services retroactive to April 2021, upon CMS' approval. Commissioner Malphrus seconded the motion; and the commission unanimously approved both 10% FMAP recommendations. (Attachment K)

E. Financial Update

Mr. Maley presented the financial update, FY22 spending plan versus actual expenditures as of 8/31/2021. Commissioner Lemel made a motion to approve the update as presented, seconded by Commissioner Blackwood and unanimously approved by the commission. (Attachment L)

Executive Session

There was no executive session.

Next Regular Meeting

October 21, 2021

Adjournment

On a motion by Commissioner Blackwood, seconded by Commissioner Miller and unanimously approved by the commission, the meeting was adjourned at 1:23 p.m.

Submitted by:

Approved by:

Christie D. Linguard
Administrative Coordinator

Commissioner Robin Blackwood
Secretary

SOUTH CAROLINA COMMISSION ON DISABILITIES AND SPECIAL NEEDS

SPECIAL-CALLED MEETING MINUTES

October 7, 2021

The South Carolina Commission on Disabilities and Special Needs met on Thursday, October 7, 2021, at 10:30 a.m. at the Department of Disabilities and Special Needs Central Office, 3440 Harden Street Extension, Columbia, South Carolina.

The following were in attendance:

COMMISSIONPresent In-Person

Eddie Miller

Present Microsoft Teams

Stephanie Rawlinson – Chairman

Barry Malphrus – Vice Chairman

Robin Blackwood – Secretary

Gary Lemel

DDSN Administrative Staff

Pat Maley, Chief Financial Officer; Ken Parks, Interim Director of Information Technology Division; Tommy Windsor, Legislative Liaison/Public Information Officer; Kimberly Cochran, Administrative Coordinator; and Christie Linguard, Administrative Coordinator.

Call to Order and Notice of Meeting Statement

Chairman Rawlinson called the meeting to order at 10:30 a.m.; Ms. Linguard 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

Commissioner Miller made a motion to adopt the agenda. This motion was seconded by Commissioner Malphrus and unanimously approved by the commission members. (Attachment A)

FY23 Legislative Budget Approval

Mr. Maley discussed the one-page FY23 budget proposal. The SC Department of Health and Human Services (SCDHHS) has provided our agency with the rates needed to calculate priority #1, which is to modernize waiver services to include rebasing service rates through evidence and market-based assumptions. The increased cost of the enhanced ID/RD waiver renewal services and corresponding service rates increases requires \$14 million in state funds. The agency is requesting a two year legislative appropriate strategy by requesting \$7 million in state funds in

FY23 and \$7 million in FY24. Priorities 2-7 were discussed in detail at the September full commission meeting. In addition, Mr. Maley referenced an executive memo sent out to the provider network yesterday alerting everyone that the agency is scheduled to go fee-for-service on January 1, 2022. Staff is working diligently to format this initiative. Commissioner Malphrus made a motion to accept the FY23 Legislative Budget as written; this motion was seconded by Commissioner Miller and unanimously approved by the commission. (Attachment B)

Adjournment

On a motion by Commissioner Miller, seconded by Commissioner Blackwood and unanimously approved by the commission, the meeting was adjourned at 10:44 a.m.

Submitted by:

Approved by:

Christie D. Linguard
Administrative Coordinator

Commissioner Robin Blackwood
Secretary



Celebrating National Disability Employment Awareness Month October 2021

- 1 DDSN thanks Governor McMaster for his proclamation to acknowledge October, as National Disability Employment Awareness Month.
- 2 In 2015, DDSN was the first state agency to establish an Employment First Directive DD 700-07 and embraced individual, integrated employment at or above minimum wage as the preferred outcome for working age adults, regardless of their disability.
- 3 Employment provides:
 - a. An avenue to contribute, a sense of purpose and belonging
 - b. A place to make wonderful and lasting relationships
 - c. Offers tangible financial gains which afford opportunities to fully participate in life
- 4 DDSN would like to thank the Employment Services provider network who have worked diligently, despite Covid, quarantining and business lay-offs and numerous barriers for securing new job opportunities as well as providing ongoing supports to individuals already working.
- 5 Employment Statistics:
 - a. 1311 individuals are currently receiving Employment Services – Individual
 - b. 227 individuals secured new jobs at the height of Covid from Feb 2020-Feb 2021
 - c. 152 additional jobs have been secured since March 1, 2021, and
 - d. 1172 individuals have received Employment Services – Group in the last year.
Those in Group are paid a rate at or above minimum wage.

Current employment initiatives:

- 1 South Carolina Vocational Rehabilitation Department (SCVRD) and DDSN have been meeting regularly to strengthen collaborative efforts and develop a strategy to increase employment outcomes for individuals served by both agencies.
- 2 The DDSN Post-Secondary Transition Team is focusing on making referrals for employment to SCVRD, with the goal of increasing the number of students exiting school with jobs.
- 3 DDSN Case Managers have increased the number of referrals to SCVRD for employment services. 137 referrals have been made during the past year.
- 4 The intent of “Career Preparation Services” moving forward is to further expand and enhance pre-employment activities and training, with the anticipated outcome of more individuals securing employment.

Michelle G. Fry, J.D., PH.D.
State Director
Patrick Maley
Chief Financial Officer
Rufus Britt
Associate State Director
Operations
Lori Manos
Interim Associate State Director
Policy



3440 Harden Street Extension
 Columbia, South Carolina 29203
803/898-9600
Toll Free: 888/DSN-INFO
Home Page: www.ddsn.sc.gov

COMMISSION
Stephanie M. Rawlinson
Chairman
Barry D. Malphrus
Vice Chairman
Robin B. Blackwood
Secretary
Gary Kocher, M.D.
Gary C. Lemel
Eddie L. Miller
David L. Thomas

Reference Number:	200-02-DD
Title of Document:	Financial Management of Personal Funds
Date of Issue:	May 28, 1987
Effective Date:	May 28, 1987
Date of Last Revision:	October 21, 2021 (REVISED)
Applicability:	DDSN Regional Centers and DSN Boards Operating Intermediate Care Facilities for Individuals with Intellectual Disabilities (ICFs/IID)

I. APPLICABILITY AND PURPOSE

This directive is applicable to DDSN Regional Centers and all county Disabilities and Special Needs Boards (DSN Boards) operating Intermediate Care Facilities for Individuals with Intellectual Disabilities (ICFs/IID). Unless specifically stated otherwise, future use of the term “DDSN ICF/IID” applies collectively to DDSN Regional Center and DSN Board operated ICFs/IID. DSN Boards may also be referred to as “Providers” in this directive.

The policies and procedures in this directive are designed to:

- (1) Protect the financial interests and personal funds of people receiving residential services in a DDSN ICF/IID, and
- (2) Assist them in money management by promoting normalization in the use of money to the extent of each person’s ability.

Facility Administrators at DDSN Regional Centers and Executive Directors at the DSN Boards are responsible for the personal funds entrusted to their organizations. They must ensure that financial records are appropriately maintained and the money is safeguarded and properly spent. They must also ensure that procedures are established in accordance with the stated objectives in this directive.

II. FINANCIAL RIGHTS

During the admission process into a DDSN ICF/IID, persons shall be advised of their financial rights. They, or other responsible party acting on their behalf, should read and sign a Statement of Financial Rights (Attachment A) before entrusting their personal funds to DDSN. The only exceptions to this requirement is when another party other than DDSN has been appointed representative payee for the person.

Except when assessment of financial skills clearly demonstrates a person's cognitive ability to manage his or her own financial affairs, the funds shall be managed under the direction of DDSN. Upon recommendation by their Program Team, people may manage their own personal financial affairs or designate another party to do so. If a third party payer agency (i.e., Social Security, Veterans Administration, etc.) determines that benefits should be paid through a guardian, conservator or other representative payee, that person or entity shall be solely responsible for holding, safeguarding and accounting for those funds. DDSN is not responsible for any personal funds not held in the Regional Bank or under the management of DDSN.

Also during the admissions process, people shall be advised by their Qualified Intellectual Disability Professional (QIDP) what services will be provided and what services/goods may be charged to the person (Attachment B). All persons entering DDSN ICFs/IID must be informed of their financial rights and of what costs will be covered by DDSN funds. This advisement shall be evidenced by signed copies of the Statement of Financial Rights (Attachment A) and the Guideline for Purchases (Attachment B). Both of these forms must be retained in each person's permanent record.

All rights and responsibilities shall transfer from a person to his/her parent, guardian, next of kin, sponsoring agency or personal representative if one or both of the following situations occur:

- a. The person is found to be mentally incapable of understanding his or her rights (must be documented by the Program Team); and/or
- b. The person has been adjudicated incompetent in accordance with state law.

If either or both of these situations occur, a written acknowledgement detailing the transfer of financial rights should be placed in the person's permanent record. Both the Statement of Financial Rights (Attachment A) and the Guidelines for Purchases (Attachment B) should be explained to the acting responsible party and the appropriate signatures obtained. These documents must be retained in the person's permanent record.

III. FINANCIAL MANAGEMENT

After admission to a DDSN ICF/IID, all persons shall have a Financial Plan (see Attachment M for Sample) developed with them by their Program Team. Whenever possible, parents, guardians or other responsible parties should take part in this process. The Financial Plan should state the level of staff assistance to be required, as well as general saving and expenditure goals. ICF/IID staff members are responsible for adhering to each person's established Financial Plan.

Training should be provided to assist the person in becoming more independent and responsible in managing their personal funds. Upon Program Team recommendation and approval, a person believed capable of managing his or her own funds may be excluded from participation in the Regional Bank if so assessed by the facility's interdisciplinary oversight team. If the person chooses not to use the Regional Bank, he/she may choose to maintain an account at a local bank. The means of handling the account and sound money management practices should be specifically outlined in the person's Financial Plan. QIDPs or designated staff are required to notify Regional Claims and Collections Officers and/or appropriate Regional Bank staff what the person's account balance is at least quarterly so the funds may be recorded in his/her total assets inventory. Per Article VI of contract with South Carolina Department of Health and Human Services (DHHS) states that "SCDDSN must notify each Resident that receives Medicaid benefits when the amount in the Resident's account reaches Two Hundred Dollars (\$200.00) less than the SSI resource limit for one (1) individual, specified in section 1611(a)(3)(B) of the Act. This paragraph shall not apply to any person found capable by the Program Team of independently managing his/her own funds.

IV. REGIONAL BANK (THIS SECTION APPLICABLE TO DDSN REGIONAL CENTERS ONLY)

Each DDSN Regional Center is required to operate a Regional Bank. With the exception of "dedicated accounts," all sources of personal funds shall be deposited into a single checking account at an approved local bank. Regional Bank funds in excess of current estimated needs should be transferred to the State Treasurer's Office for optimal investment. Ownership of and accounting for all transferred funds shall reside with the State Treasurer's Office.

Interest accrued on accounts within the Regional Bank shall be in an amount proportionate to cash balances and posted on a quarterly basis utilizing a method in compliance with current federal regulations.

Bank records and ledgers shall be maintained in accordance with established accounting practices and procedures. Regional Finance Offices are required to forward a copy of their Regional Bank reconciliation and balance sheet to the DDSN Central Office Finance Division-General Ledger Control Area by the 15th of the subsequent month to receiving necessary reports (e.g., Month ending 4/30 would be due by 6/15). Additionally, copies of all account statements should be provided to QIDPs for their review at least quarterly.

People with funds in the Regional Bank may request to review their personal financial records at any time. This right extends to parents, guardians or other responsible parties.

V. ACCESS TO FUNDS

With the exception of weekends and holidays, people with funds in the Regional Bank shall have access to their funds daily during established operating business hours.

Procedures should be in place to make funds available for scheduled activities on weekends and holidays. Minimal amounts of personal funds may be kept in a secure location at residences in accordance with DDSN Directive 200-01-DD: Cash on Hand Maintained at the Residential Level. Upon proper request and approval for disbursement of personal funds, Regional Banks should disburse the funds as soon as possible within five (5) business days.

VI. WITHDRAWAL OF FUNDS

With documented QIDP recommendation, designated ICF/IID staff may obtain funds from the Regional Bank and purchase items for persons according to their Financial Plans. Funds may be withdrawn from the Regional Bank using a fully completed and signed Personal Funds Draft (PFD) (Attachment C). Withdrawals of \$50 or less may be paid in cash. All other withdrawals should be made by check unless withdrawals of cash over \$50 have been authorized for a person by the Regional/Provider Finance Director. Payment may be made to the person, parent/guardian or staff member on their behalf, as documented on the approved PFD. All withdrawals of \$200 or more per person must have the signature approval of the Program Administrator or Residential Director. All withdrawals of \$500 or more per person require the signature approval of the Facility Administrator/Executive Director.

Funds withdrawn for group trips or outings should be listed on a Group Withdrawal Draft (GWD) (Attachment D). If anyone person's withdrawal request is for more than \$200, a separate Personal Funds Draft (PFD) should be completed and the necessary signatures obtained to ensure proper approval.

Within three (3) business days after a withdrawal from the Regional Bank has been made, appropriately signed Personal Funds Draft/Group Withdrawal Drafts should be returned to the Regional Bank along with copies of all purchase receipts, Shopping Worksheet(s) (Attachment E), and any unspent funds to be re-deposited. The copies of all Personal Funds Draft/Group Withdrawal Drafts should be kept at the Regional Bank as a record of disbursement of funds for audit purposes. The residence copies should only be returned to residence staff after the Regional Bank Liaison Clerk has received all required documentation and signed off on the transaction.

A Personal Funds Draft/Group Withdrawal Draft presented to the Regional Bank for withdrawals of funds for a trip on behalf of a person or group must have copies of an approved trip packet attached. Within three (3) business days after the trip has been completed, copies of all trip expenditures should be sent returned to the Regional Bank along with the appropriately signed Funds Draft/Group Withdrawal Draft copy.

In regard to situations when third party payments or other revenues are deposited into a person's account, the account should be drafted for Care and Maintenance charges due DDSN, if any, according to DDSN Directive 200-09-DD: Fees for Residential Services in Intermediate Care Facilities for Individuals with Intellectual Disabilities (ICFs/IID). These funds may be withdrawn by group, single or automated Care and Maintenance withdrawal processes.

VII. PURCHASES

Items may be purchased for a person from a commercial source with adequate documentation of approvals. All items should be listed individually and approved by the QIDP. The purchase request should not receive Regional Bank approval until the Regional Bank Liaison has verified that the necessary funds are available. State procurement practices should be followed whenever purchasing items using consumer personal funds even though the state procurement system will not be used.

As soon as possible, but not to exceed three (3) business days following the purchase of items, staff should complete all of the following steps:

1. Submit to the Regional Bank Liaison all completed Shopping Worksheets (Attachment E) along with copies of all purchase receipts and any unspent funds in excess of one (\$1) dollar per person or depending on Financial Plan.
2. Report and display all items purchased to the Residence Supervisor or QIDP.
3. Mark all items with a value of \$100 or more, including clothing, with the person's name and then record the items on the person's property record. A current inventory listing of all personal items shall be maintained in the residence as required by DDSN Directive 600-10-DD: Individual Clothing and Personal Property-Regional Centers and DDSN Directive 604-01-DD: Individual Clothing and Personal Property. All personal property should be safeguarded and inspected by the Residence Supervisor or QIDP at least quarterly to ensure the items are accounted for and that such items have not been accidentally recorded as DDSN property.

VIII. REGIONAL BANK PURCHASING CARDS (THIS SECTION APPLICABLE TO DDSN REGIONAL CENTERS ONLY)

REGIONAL BANK LIAISON RESPONSIBILITIES

Each Region shall have at least one Regional Bank Liaison who has been approved by the Regional Finance Director. Prospective staff should complete a Regional Bank Liaison Application (Attachment F) and submit it to their Regional Finance Director. If there is more than one Regional Bank Liaison at a Region, the Regional Finance Director should assign a Liaison to each new purchasing card application upon receipt.

Under no circumstances should a Regional Bank Liaison also be a cardholder.

Regional Bank Liaisons are responsible for all of the following duties:

1. Purchasing Card Security

Purchasing cards must be secured when not in use. Cardholders (designated staff) are responsible for keeping cards locked up and secured.

2. Purchasing Card Application Review

All purchasing card applications should be carefully reviewed for appropriate information and proper signatures before processing.

3. Accurate Record Keeping

Current permanent files should be maintained for all purchasing cards to include approved applications, other pertinent documents or forms and purchasing documentation. All documents should be processed in a timely manner. Note: After a purchasing card has been issued, the shopper's name and account number (only last six (6) digits) should be confidentially recorded by the Regional Bank Finance Director.

4. Theft/Loss Reporting

Lost or stolen purchasing cards should be reported immediately by the cardholder to Credit Card Company and Regional Bank Finance Director.

5. Billing Resolution

Billing discrepancies should be resolved as soon as possible by cardholder with assistance from Regional Bank Clerk.

PURCHASING CARD APPLICATIONS

Purchasing cards are issued in the names of individual shoppers. Therefore, each shopper is required to complete a Regional Bank Purchasing Card Application (Attachment G) and obtain the appropriate approval signature before forwarding to the Regional Bank Finance Director for processing.

PURCHASING CARD UPDATES

The Purchasing Card Change Request form (Attachment H) should be used to request a name change or an account closure for existing cardholders. The completed form should be reviewed, approved and processed by the Regional Bank Finance Director.

PURCHASING CARD CREDIT LIMITS

Purchasing cards should be issued with a per transaction limit of \$500, a per day limit of \$1,500, and a per month limit of \$5,000. These limits may be changed, if necessary, by completing a Purchasing Card Credit Limit Change Request (Attachment I). This form may be used to temporarily increase credit limits for accelerated shopping times such as Christmas. Requests must have the required signatures before forwarding to the Regional Bank Finance Director for processing.

PURCHASE REQUISITIONS

Shoppers should list all items to be purchased with the card on a Purchasing Card Request for Purchase (Attachment J) and obtain the required signature(s). Personal Funds Draft (Attachment C) can also be used. The requestor and Residential Manager or QIDP must sign all requests. Purchases above \$200 require the approval of the Program Administrator or Residential Program Director. Purchases above \$500 must be approved by the Facility Administrator/Executive Director. Regional Bank Liaisons must verify the availability of funds before the purchase is made. Separate forms are required for each person's shopping requests. Regional Bank Liaisons should ensure the Purchasing Card Request for Purchase form has been properly completed and all approval signatures obtained.

ACCEPTABLE CHARGES

Purchases must conform to the DDSN Guidelines for Purchases (Attachment B). Generally, personal grooming articles, recreational equipment, clothing and personal comfort items may be charged on the purchasing card, as well as movie tickets, candy, clothing, radios and plants.

SHOPPING

Each person's purchases should be handled as a separate transaction. If shopping for a group of 10, a shopper will be required to complete 10 separate transactions when feasible. The two most common exceptions to this policy are:

- (1) Consumer restaurant meals; and
- (2) Consumer movie tickets.

In these situations, one (1) purchasing card transaction may cover all participants. Sales receipts and a completed Purchasing Card Record for Group Entertainment Purchases (Attachment K) should be used to document the dollar amounts to debit each participating person's personal funds.

PURCHASE DOCUMENTATION

Within five (5) business days, shoppers should ensure that QIDPs (or their designees) verify all the items purchased, sign off on purchase receipts and record all items having a value of \$100 or more (clothing included) into each person's property record. Within the same timeframe, the shopper should also submit to the Regional Bank Liaison all Shopping Worksheets (Attachment E) along with copies of all purchase receipts. Regional Bank Liaisons should maintain records of all purchasing card expenditures and match all purchases to billings before payments are processed.

IX. AUTHORIZED SIGNATURES

Regional Finance Offices shall retain a Regional Bank Authorized Signatures Record (Attachment L) for each DDSN ICF/IID residence. This form lists all staff and their accompanying signatures that are authorized to approve Personal Funds Drafts or Group Withdrawal Drafts up to the \$200 maximum. This form should also be used to record the names and signatures of staff authorized to pick up personal funds from the Regional Bank on behalf of a person. Please note withdrawals/expenditures exceeding the \$200.00 and \$500.00 thresholds will require Administrator/Executive level signature authority.

QIDPs are responsible for:

- (1) Obtaining authorized signature forms associated with the Regional Bank and
- (2) Notifying the Regional Bank promptly of any changes.

X. DEATH

Should a person pass away while living in a DDSN ICF/IID, all funds conserved or managed by Providers or Regional Finance Offices shall be frozen and no disbursements made without the legal authority of the Probate Court except for reasonable funeral expenses.

NOTIFICATION OF DEATH

Within 10 calendar days of the date of death, Provider/Regional Finance Offices should send a written notification of death to the probate judge in the county in which the death occurred. (Typically, the county of legal residence is the county where the person was receiving residential services.) If prohibited by a presiding judge from filing a notification of death, the parents, next of kin or guardian should notify the court.

A copy of the notification of death should be sent to the parent(s)/guardian(s)/next of kin, the financial representative (if known) and the decedent's QIDP. If the decedent owned property in other counties or states, the probate judges in those counties should also be notified.

Notifications of death should contain all of the following information:

- (1) Complete financial accounting and listing of the decedent's assets and known liabilities (available from Regional Claims and Collections Officers);
- (2) Name and address of the parent(s)/guardian(s)/next of kin;
- (3) Name and address of the personal representative, if known; and
- (4) Request for legal authorization to disburse from the decedent's personal funds.

For reimbursement of costs from any remaining balance in a decedent's estate, the provider shall follow the procedures set forth in DDSN Directive 505-02-DD: Death or Impending Death of Persons Receiving Services from DDSN.

XI. TRANSFER WITHIN REGIONAL BANK

Upon a person's transfer to another residence that is associated with the same Regional Bank, the Regional Finance Office shall record the new residence on the person's account within five (5) business days. The QIDP should secure new authorized signature forms within five (5) business days.

XII. DISCHARGE OR TRANSFER TO ANOTHER REGIONAL BANK

Upon discharge or transfer of a person to another residence associated with another Regional Bank, a Personal Funds Draft (PFD) shall be prepared and processed for up to 90% of the person's available funds (after remaining encumbrances or other currently due obligations). The funds should be forwarded following paying agency's established procedures to the Regional Bank for the new residence with notification provided by the QIDP. The QIDP and Claims and Collections Officer or Regional Finance Director are collectively responsible for determining the amount to be forwarded. The funds should be forwarded within 10 business days of discharge or transfer.

If DDSN is representative payee for a person's benefits, the Regional Claims and Collection Officer should notify the appropriate payer agency of the change within five (5) business days of transfer or discharge. If a person's funds are to be transferred to another Regional Bank, the Claims and Collections Officer for the new region should make a request that the new region be made representative payee within five (5) business days of the transfer. If a person's funds are to be handled by a provider or person not associated with any Regional Bank, that provider or person should be notified to request a new representative payee within five (5) business days. Requests for termination of or new representative payee status should be made in accordance with the paying agency's established procedures.

Within 30 calendar days, all obligations to be paid from the Regional Bank for a person who has transferred should be paid and all remaining funds forwarded to the Regional Bank for the new residence with notification provided to the QIDP. Unless the person is still receiving benefits at the Regional Bank, the account at the former Regional Bank should be discharged. If the person is still receiving benefits from the Regional Bank, the account should remain open and in current status until all benefits are sent directly to the new payee. As benefits are received in the Regional Bank, they should be forwarded to the new payee unless expressly instructed to do otherwise by the benefit paying agency. As soon as all benefit payments have been transferred, any remaining balances should be forwarded and the account discharged. One exception to this rule is when the family requests that burial funds remain at the Regional Bank. In this case, burial funds may remain in the Regional Bank and accrue interest.

XIII. QUARTERLY REVIEW

Regional Claims and Collections Officers shall conduct a quarterly review of all financial ledgers associated with the Regional Bank to ensure that financial guidelines are properly followed. Also during that review, they should be alert to any possible eligibility problems for Medicaid recipients. QIDPs should review account transactions on a quarterly basis and document doing so by initialing statement copies. These documents should be retained in accordance with current documentation retention policies.

Barry D. Malphrus
Vice-Chairman

Stephanie M. Rawlinson
Chairman

RELATED POLICIES:

- 200-01-DD: Cash on Hand Maintained at the Residential Level
- 200-09-DD: Fees for Residential Services in ICFs/IID Facilities
- 200-12-DD: Management of Funds for People Participating in Community Residential Programs
- 505-02-DD: Death or Impending Death of Persons Receiving Services from DDSN
- 600-10-DD: Individual Clothing and Personal Property - Regional Centers
- 604-01-DD: Individual Clothing and Personal Property

To access the following attachments, please see the agency website page “Current Directives” at: <https://ddsn.sc.gov/providers/ddsn-directives-standards-and-manuals/current-directives>

- Attachment A. Statement of Financial Rights
- Attachment B. Guidelines for Purchases (Personal vs. Department Funds)
- Attachment C. Personal Funds Draft
- Attachment D. Group Withdrawal Draft
- Attachment E. Shopping Worksheet
- Attachment F. Regional Bank Liaison Application
(APPLICABLE TO DDSN REGIONAL CENTERS ONLY)
- Attachment G. Regional Bank Purchasing Card Application
(APPLICABLE TO DDSN REGIONAL CENTERS ONLY)
- Attachment H. Purchasing Card Change Request
(APPLICABLE TO DDSN REGIONAL CENTERS ONLY)
- Attachment I. Purchasing Card Credit Limit Change Request
(APPLICABLE TO DDSN REGIONAL CENTERS ONLY)
- Attachment J. Purchasing Card Request For Purchase
(APPLICABLE TO DDSN REGIONAL CENTERS ONLY)
- Attachment K. Purchasing Card Record For Group Entertainment Purchases
(restaurant/movie tickets)
(APPLICABLE TO DDSN REGIONAL CENTERS ONLY)
- Attachment L. Regional Bank Authorized Signatures Record
- Attachment M. Sample Financial Plan

SC Department of Disabilities and Special Needs

STATEMENT OF FINANCIAL RIGHTS

- 1. Upon enrollment for services from the South Carolina Department of Disabilities and Special Needs (DDSN), DDSN shall require a financial statement of the person's resources and request that he or she entrust those personal funds to DDSN except in cases where alternative financial arrangements have already been made.
2. A person enrolling for services with DDSN has the right to receive, retain and manage his or her own personal funds. This may be done by a legal guardian or other designated person or the person may authorize DDSN in writing to hold, safeguard and account for those personal funds.
3. DDSN shall hold, safeguard and account for a person's funds only upon written authorization by the person, parent, guardian or other responsible party or if DDSN is appointed representative payee.
4. DDSN shall not charge a person enrolling for services to hold, safeguard or account for his or her personal funds, but shall include any charges for this service in DDSN's basic per diem rate.
5. In accordance with DDSN policy, written records of all financial transactions involving a person's funds for which DDSN is custodian shall be kept current and maintained by the ICF/IID.
6. In accordance with DDSN policy, people with personal funds in the Regional Bank shall be provided reasonable access to their financial records and personal funds.
7. Personal funds received by DDSN for safe-holding, safeguarding and accounting shall be kept separate from DDSN's operating funds.
8. For any person managing his or her own personal funds while receiving services from DDSN who becomes unable to continue managing those funds, DDSN shall serve as temporary representative payee for the person until a permanent representative payee may be appointed.

These rights have been explained to me and I understand how they affect me.

Person's Name: _____

File No.: _____

Signature (Person)

Date: _____

Signature (QIDP/Designated Staff)

Date: _____

Signature (Witness)

Date: _____

As parent, guardian or conservator, these rights have been explained to me and I understand how they affect my relative/person for whom I am responsible. I understand that I am signing on his/her behalf. Relationship to the Person: _____

Signature (Parent/Guardian/Responsible Party)

Date: _____

SC DEPARTMENT OF DISABILITIES AND SPECIAL NEEDS

**GUIDELINES FOR PURCHASES
(PERSONAL VS. DDSN FUNDS)**

For people requesting residential services from an ICF/IID, this document declares what costs are chargeable to their personal funds and what costs are to be paid by DDSN funds. Personal funds shall be used to purchase non-medical needs and specific comfort items. DDSN funds shall provide for:

- (1) Medically related needs;
- (2) Services to provide at least a minimum level of personal hygiene, decency, and presentability, essential to a person's healthy well-being; and
- (3) Active treatment needs as defined in applicable Medicaid regulations.

The following list of charges to DDSN funds is not all-inclusive. The list of items/services that may be purchased with personal funds shows acceptable or allowable purchases. All prospective personal fund purchases shall be dependent upon each person's financial condition (reference DDSN Directive 200-09-DD: Fees for Residential Services in Intermediate Care Facilities for Individuals with Intellectual Disabilities (ICFs/IID) Facilities). People receiving residential services from DDSN shall not be denied necessary special medical needs due to a shortage of personal funds. This directive does not prevent the use of donated funds to purchase items listed under Item B.

A. CHARGES TO DDSN FUNDS

1. Professional, Special Programs and Services

Provision of these services is contingent upon a thorough evaluation of each person's needs and pending DDSN approval.

- a. Dietary/Nutritional Services.
- b. Dental Services.
- c. Education Services.
- d. Health Services.
- e. Medical Services.
- f. Nursing Services.
- g. Pharmacy Services.
- h. Physical and Occupational Therapy.
- i. Psychological Services.
- j. Religious Services.
- k. Social Services.
- l. Speech Pathology and Audiology.
- m. Training and Habilitation Services.

2. Items/Services Necessary for the Physical Well-Being of Recipients and Routinely/Uniformly Provided to All People Receiving Services from DDSN

- a. Necessary medications, medical and surgical supplies.
- b. Use of equipment and facilities.
- c. Special dietary supplements used for tube feeding or oral feeding.

- d. Routine laundry (including personal clothing), toiletries and housekeeping services (including sheets, towels, wash cloths, incontinence supplies, soaps, bathroom tissue).
- e. Activity programs.
- f. Routine personal hygiene items and services as required to meet needs including but not limited to: hair hygiene products, comb, brush, bath soap, disinfecting soaps or specialized cleansing agents when indicated to treat special skin problems or to fight infection, razor, shaving cream, toothbrush, toothpaste, denture adhesive, denture cleaner, dental floss, moisturizing lotion, tissues, cotton balls, cotton swabs, deodorant, incontinence care and supplies, sanitary napkins and related supplies, towels, wash cloths, hospital gowns, over the counter drugs, hair and nail hygiene services, haircuts, bathing and basic personal laundry.
- g. Items required for behavior management.

3. Medical Equipment and Supplies

- a. Wheelchairs.
- b. Mats.
- c. Walkers.
- d. Special Geriatric Chairs.
- e. Dentures.
- f. Eyeglasses.
- h. Hearing Aids/Supplies.
- i. Similar Items.

See B (4) for items required beyond these basic medical needs.

Note: DDSN shall not be responsible for the purchase of any of the above items or services when a parent or guardian initiated the purchase without the prior approval of authorized DDSN staff.

- 4. Purchases from Related Organizations (Services, Facilities, Supplies)
- 5. Administrative Costs Incurred by DDSN in order to meet Intermediate Care Facilities for Individuals with Intellectual Disabilities (ICFs/IID) Standards and Applicable State Health and Licensure Requirements
- 6. Personnel Costs (Wages, Fringe Benefits)
- 7. Physical Plant Maintenance, Development and Expansion
- 8. Food and Housing costs except where covered through Care and Maintenance Charges as provided for in DDSN Directive 200-09-DD: Fees for Residential Services Provided by DDSN.

B. ITEMS/SERVICES THAT MAY BE CHARGED TO A PERSON'S PERSONAL FUNDS¹

1. Personal Grooming and Care Articles

Cosmetic and grooming items or services in excess of those for which payment is made under Medicaid or Medicare: painted or acrylic nails, hair weaves, and similar items.

¹ The Residential Director and/or Program Team members should ensure appropriate uses of personal funds. In cases where a question may arise as to whether DDSN or personal funds should be used, the expenditure of personal funds must be justified in the remarks section of a Personal Funds Draft (PFD)/Group Withdrawal Draft (GWD). Appropriate documentation must be attached, such as minutes from Program Team meetings, physician statements of medical necessity or requests from parents for equipment, supplies and/or services to be purchased for the convenience of the person or family.

2. Personal Recreational Items and Equipment Not Covered Under a Required Activities Program

Bicycles, magazine or newspaper subscriptions, aquariums, plants/flowers, radios, televisions, records and books.

3. Personal Clothing

Gloves, hats, scarves, hosiery, slippers, shoes and similar items.

4. Special Medical Equipment, Supplies and Services for the Convenience of People and their Families

Certain purchases of medical equipment, supplies and services that are for the convenience of the person and/or family and not determined by DDSN to be medically necessary may be purchased with personal funds. This would include items mentioned in A.(3) such as an extra wheelchair for home visits or certain nonessential chiropractic, podiatry visits or dental services. These items and services are considered to be for personal convenience and therefore would not be allowable charges to the Medicaid program.

5. Damaged Property

Personal funds may be used to replace damaged property owned by staff, the provider, DDSN or another person when it is consistent with the responsible person's Plan and when funds are available.

6. Miscellaneous Items

- a. Special food/drinks that are not essential dietary needs (e.g., candy, cookies, soft drinks).
- b. Tobacco products and accessories.
- c. Costs of trial visits.
- d. Expenses involved in relatives visiting the residence or a person's visit/extended stay in the home setting.
- e. Postage
- f. Stationery.
- g. Insurance premiums
- h. Taxes
- i. Movies passes
- j. Special entertainment/recreational activities
- k. Special bedspreads or other similar purchases.

These purchases are subject to the availability of personal funds.

7. Personal Comfort Items

Items and services that do not constitute a meaningful contribution for treatment of an illness or injury or to achieve/enhance independence (except for hospice care). Items also considered to be personal comfort items include radios, televisions, telephones, computers, laptops, tablets,

musical instruments, hobby items, lessons in leisure interests or memberships in clubs or fitness centers.

These rights/services have been explained to me and I understand how they will affect me.

Person's Name: _____

File Number: _____

Signature (Person)

Date: _____

Signature (QIDP)

Date: _____

Signature (Witness)

Date: _____

As parent, guardian or conservator, these rights/services have been explained to me and I understand how they will affect my relative/person for whom I am responsible. I understand that I am signing on his/her behalf.

Signature (Parent/Guardian/Responsible Person)

Date: _____

Relationship to Person

SC DEPARTMENT OF DISABILITIES AND SPECIAL NEEDS
PERSONAL FUNDS DRAFT (PFD)

Person's Name: _____ Date: _____

Social Security Number (last four (4) only): _____

Residence: _____

I want/need \$ _____ of my personal funds.

I want/need \$ _____ of my personal funds spent for me to: _____

Additional Information: _____

Make check payable to: _____

Signed (Person): _____

Address (optional): _____

(Necessary only if over \$200)

Requested By: _____ / _____
(Staff Representative) Date

Approved: _____ / _____
(Program Administrator or Residential Director) Date

(Necessary only if over \$500)

Approved: _____ / _____
(Manager or QIDP) Date

Approved: _____ / _____
(Facility Administrator/ Executive Director) Date

Funds Verified (Initials): _____
(Regional Bank Clerk)

Paid: [] Cash [] VISA [] Check #: _____

Paid By: _____
(Cashier)

Date: _____

Received By: _____
(Staff Representative)

Date: _____

I certify that the above mentioned withdrawn funds were either given to or expended for the sole benefit of the above named person, with the exception of \$ _____ in unspent funds that I am returning to the Regional Bank.

_____/_____/_____
(Staff Representative) Date

_____/_____/_____
(Regional Bank Clerk) Date

- Regional Bank (1st Copy) For posting purposes after disbursing funds.
Certification (2nd Copy) For Regional Bank audit records after purchases are made and unspent funds, if any, are returned to the Regional Bank for deposit (within three (3) business days).
Residence (3rd Copy) For residence staff after certification signature of Regional Bank Liaison Clerk has been obtained.

SC DEPARTMENT OF DISABILITIES AND SPECIAL NEEDS

GROUP WITHDRAWAL DRAFT (GWD)

Residence _____

Date _____

NOTE: If any one person's withdrawal request is for more than \$200, a separate Personal Funds Draft (PFD) must be completed and the necessary signatures obtained to ensure proper approval.

Social Security Number (last four (4) only)	Names (list alphabetically) Last Name First (Smith, Joe)	Amounts Requested
XXX-XX-_____		\$ _____
XXX-XX-_____		\$ _____
XXX-XX-_____		\$ _____
XXX-XX-_____		\$ _____
XXX-XX-_____		\$ _____
XXX-XX-_____		\$ _____
XXX-XX-_____		\$ _____
XXX-XX-_____		\$ _____
XXX-XX-_____		\$ _____
TOTAL FUNDS REQUESTED		\$ _____

Purpose of Withdrawal: Weekly Canteen Other - Explain in detail: _____

Requested By: _____ / _____ Date Approved: _____ / _____ Date
(Staff Representative) (Manager or QIDP)

Funds Verified and Encumbered (Initials): _____ Paid : Cash VISA Check #: _____
(Regional Bank Clerk)

Paid By: _____ Date: _____
(Cashier)

Received By: _____ Date: _____
(Staff Representative)

I certify that the above mentioned withdrawn funds were either given to or expended for the sole benefit of the people named above, with the exception of \$ _____ in unspent funds that I am returning to the Regional Bank.

_____/_____
(Staff Representative) Date (Regional Bank Clerk) Date

- Regional Bank (1st Copy) For posting purposes after disbursing funds.
- Certification (2nd Copy) For Regional Bank audit records after purchases are made and unspent funds, if any, are returned to the Regional Bank for deposit (within three (3) business days).
- Residence (3rd Copy) For residence staff after certification signature of Regional Bank Clerk has been obtained.

SC DEPARTMENT OF DISABILITIES AND SPECIAL NEEDS

SHOPPING WORKSHEET

*****IMPORTANT*****

1. Use one Shopping Worksheet per person. Do not combine purchases for several people on one worksheet.
2. Attach copies of store receipts and purchase approval documentation to this completed worksheet. Send packet to the Regional Finance Office.
3. Cash withdrawn from a person's account may only be spent on or by that person. If shopping for more than one person, **do not combine separate funds**. Each person's personal funds should only be spent on the person to whom it belongs.
4. List each item purchased and the price of each item separately.

PURCHASES MADE FOR: _____ (Person's Name)	DATE OF SHOPPING TRIP: _____
--	-------------------------------------

ITEMS PURCHASED	PRICE (EA.)	QUANT.	TOTAL
	\$		\$
	\$		\$
	\$		\$
	\$		\$
	\$		\$
	\$		\$
	\$		\$
	\$		\$
	\$		\$
THE ITEMS LISTED ON THIS SHEET WERE POSTED TO THE PERSONAL PROPERTY RECORD OF THE ABOVE NAMED PERSON	\$		\$
		SALES TAX TOTAL	\$

Paid: Cash VISA Check #: _____

TOTAL AMOUNT OF FUNDS SPENT \$ _____

+ FUNDS RETURNING TO REGIONAL BANK \$ _____

+ CASH GIVEN TO PERSON (IF ANY) \$ _____

= GRAND TOTAL (SHOULD EQUAL PFD) \$ _____

 (Manager/Supervisor or QIDP)

SC DEPARTMENT OF DISABILITIES AND SPECIAL NEEDS

REGIONAL BANK CLERK APPLICATION

(This form is applicable to DDSN Regional Centers only)

Regional Finance Directors must select at least one person (or more, if needed) from their staff to act as Regional Bank Clerk in accordance with DDSN Directive 200-02-DD: Financial Management of Personal Funds.

NOTE: UNDER NO CIRCUMSTANCES SHOULD A REGIONAL BANK LIAISON ALSO BE A CARDHOLDER.

In order to process this application, the entire form must be completed. The request cannot be processed unless ALL required information has been supplied.

APPLICANT INFORMATION:

Full Name: _____

Physical Street Address
And Building Name (include zip code): _____

Mailing Address (if different from Street Address – include zip code):

Email Address: _____ Phone Number (include area code): _____

Region/County: _____

I certify by my signature below that I will fulfill the responsibilities of Regional Bank Clerk as explained in DDSN Directive 200-02-DD: Financial Management of Personal Funds.

Signature (Applicant) Date: _____

I delegate authority to the above named applicant to fulfill the duties of Regional Bank Clerk and I agree that he or she will comply with all guidelines of the DDSN Regional Bank Purchasing Card Program as well as with DDSN policies and procedures as they relate to the Regional Bank.

Signature (Regional Finance Director) Date: _____

SC DEPARTMENT OF DISABILITIES AND SPECIAL NEEDS

REGIONAL BANK PURCHASING CARD APPLICATION

(This form is applicable to DDSN Regional Centers only)

SECTION 1: APPLICATION REQUIREMENTS

- 1. Applicants must be permanent, full-time employees of DDSN.
2. Applicants must agree to sign a cardholder's agreement upon receipt of a new purchasing card.
3. All requested information must be supplied fully before this application can be processed.

SECTION 2: APPLICANT INFORMATION

Full Name: _____

Physical Street Address
And Building Name (include zip code): _____

Mailing Address (if different from Street Address - include zip code):

Email Address: _____ Phone Number (include area code): _____

Facility/Region: _____ Requested Monthly Credit Limit: \$ _____

Default Account Number (last four (4) digits only): _____

SECTION 3: APPLICANT SIGNATURE

As a cardholder, I agree that I will always treat the Regional Bank Purchasing Card with at least the same level of care that I would treat my own personal credit card. I will maintain the card in a secure location and carefully guard the account number. I understand that I am the only person that is authorized to use the card. I fully understand the intent of this program and will comply with all guidelines and procedures of the DDSN Regional Bank Purchasing Card Program as well as all DDSN policies and procedures related to the handling of personal funds.

Signature (Applicant) _____ Date: _____

SECTION 4: APPROVAL SIGNATURE

I delegate transaction authority to this applicant and agree that he/she will comply with all the guidelines of the DDSN Regional Bank Purchasing Card Program as well as the DDSN policies and procedures relating to the handling of personal funds.

Signature (Regional Finance Director) _____ Date: _____

SC DEPARTMENT OF DISABILITIES AND SPECIAL NEEDS
PURCHASING CARD CHANGE REQUEST
(This form is applicable to DDSN Regional Centers only)

Date: _____

Division/Department: _____

Cardholder Name on Purchasing Card: _____
(Record name as it appears on card)

Purchasing Card Account Number *(last four (4) digits only)*: _____

Type of Request:

Account Closure

Name Change - Current Information: _____

New Information: _____

Explanation of Change (i.e., employee termination, name change due to marriage/divorce, etc.):

Requestor's Signature

Date: _____

Forward to Regional Finance Director for REVIEW AND approval

Signature *(Regional Finance Directors)*

Date: _____

SC Department of Disabilities and Special Needs

PURCHASING CARD CREDIT LIMIT CHANGE REQUEST

(This form is applicable to DDSN Regional Centers only)

Cardholder's Name: _____

Purchasing Card Account Number *(last four (4) digits only)*: _____

Division/Department: _____

Regional Bank Clerk: _____

Current Monthly Limit: \$ _____

Requested *New* Monthly Limit: \$ _____

Explanation for Request:

Signature (*Cardholder*)

Date: _____

Signature (*Regional Bank Clerk*)

Date: _____

FORWARD TO REGIONAL FINANCE DIRECTOR FOR REVIEW AND APPROVAL

Signature (*Regional Finance Director*)

Date: _____

SC DEPARTMENT OF DISABILITIES AND SPECIAL NEEDS

REGIONAL BANK AUTHORIZED SIGNATURES RECORD

Residence: _____

Date: _____

The following staff may approve withdrawals and expenditures of less than \$200.00 from personal funds in the Regional Bank for the persons residing in the above named residence. Withdrawals and expenditures of \$200.00 or more will require the signature approval of the Program Administrator or Residential Director. Withdrawals and expenditures of \$500.00 or more will require the signature approval of the Facility Administrator or Executive Director.

NAME (Printed or Typed)

SIGNATURE

_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

The following staff is authorized to pick up personal funds at the Regional Bank.

NAME(Printed or Typed)

SIGNATURE

_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

Date: _____

Signature (Program Administrator/Residential Director/Residential Director)

Sample Financial Plan

Financial Plan

This form is to be completed and attached to each person's file (SLP-I and II, CTH-I and II, ICF and CRCF)

Name: _____

Date of Financial Plan: _____

1. Financial Skills

A. Can the person maintain his/her own financial Records in sufficient order and correctness?
 Yes No If no is answered complete the following:

- Person can make deposits alone Yes No
- Person can write checks alone Yes No
- Person needs assistance with balancing checkbook and reconciling statements Yes No
- Person needs assistance with all areas of banking Yes No

Rep-payee: _____

Financial Institution Utilized: _____

Note: If the board is Rep-Payee ensure there are two (2) staff listed on the bank signature cards as authorized signers.

B. Can the person manage cash on their own? Yes No

If yes, how much cash can the person manage \$ _____

Is this person working on improving his/her money management skills? Yes No

If yes, in what way: _____

2. Budget/Monthly Income (Based on averages)

SSI	\$	Competitive Employment	\$
VA	\$	Other	\$
Workshop	\$	Other	\$

Monthly Expenditures

Rent	\$	Clothing	\$
Lights	\$	Water	\$
Phone	\$	Groceries/Supplies	\$
Medication/Medical	\$	Other	\$
Cable	\$	Other	
Personal Spending	\$	Other	

3. Future financial plan: (Emphasis here should be place on determining any need to accumulate resources for a particular purchase or purpose, Medicaid eligibility, where available, should not be jeopardized: however, some resources accumulation can be done without jeopardizing Medicaid eligibility.)

4. Weekly personal spending amount \$ _____ (exact amount)
The amount should balance leisure activities with income (Blanket terms such as "or more as needed" should not be used.)
(Call team meeting should be used to document if additional funds are warranted)

Will this money be given all at one to the person Yes No
If no, how and why will it be given differently?

5. Will cash on hand be maintained for the person? Yes No Amount \$ _____
Note: If this amount is over \$50, this must be by programmatic justification

6. List all approved shared cost and how they will be shared.

7. List the date each task was completed below:

- a. Review/summary of last year's financial activity: _____
- b. Statement of Financial Rights reviewed and signed: _____
- c. Authorization for Management of Personal Funds reviewed an signed: _____
- d. Authorization for application and management of entitlements and benefits reviewed and signed: _____

8. Additional Financial Comments:

Signature and Date:

Program Team Chair person

Date: _____

Signature of Plan Owner

Date: _____

Case Manager

Date: _____

Monthly DDSN Staff Report - Financial Approval & Threshold Reporting for October 2021

The purpose of this monthly report is to ensure staff comprehensively reports on all Executive Limitation Policy (800-CP-03) financial transactions for approval and financial threshold reporting requirements. The Finance and Audit Committee will decide which items require presentation to the Commission for a formal vote, as well as which items need only be reported via this monthly report to the Commission to ensure transparent reporting. After the Finance and Audit Committee's decisions, this report will highlight items in green to notify Commission this will not need a formal vote and highlight items in yellow indicating item will require a formal Commission vote to approve.

I. New Non-Service Contracts \$200,000 or Greater:

Intent to Sole Source Therap Software for 1 Year - A notice was posted in the South Carolina Business Opportunity (SCBO) on October 1, 2021, to provide notice that South Carolina Disabilities and Special Needs(SCDDSN, in accordance with §11-35-1560 (A) of the SC Consolidated Procurement Code, intends to award without competition, a sole source contract to THERAP Services, LLC. THERAP Services will provide Software as a Service (SaaS). For the past seven (7) THERAP has been the solution that meet the needs, business, practices, security, and reporting requirements of DDSN, and supporting agencies including providers and federal agencies. This SaaS is used by our provider network through the State, and it will be advantageous for the State to utilize the THERAP platform during this **one year** contract period. DDSN and provider staff have already completed trainings, and have been administering THERAP user accounts to individuals that have been providing services through DDSN. Therefore, continued use of this services will maintain the current system and functionally to the agency. No additional changes were made on the existing contract, therefore the total amount for the one (1) is \$1,130,531.60.

II. Existing Service Contracts Increasing \$200,000 or Greater (simple list if based on indiv. choice; detail summary if not):

None

III. \$200,000 or Greater Increase in Personnel Positions for a Program or Division:

Bid Consideration - FEMA Generators - The project was advertised through South Carolina Business Opportunities (SCBO), and bids were received on September 30, 2021. Five bids were received. The low bid was from **Page Power Systems, Inc. out of Gastonia, NC with a Base Bid of \$626,207**. Page Power Systems, Inc. has installed generators for the Agency in the past, and are considered to be a responsive and responsible Contractor. It is recommended that a contract be awarded to Page Power Systems for the full amount of the Base Bid.

This project is largely funded through FEMA Grant DR-4346. **The current approved federal share is \$426,151.00**. FEMA can provide additional funds up to 75% of the total cost of the project if additional funds exist. DDSN will provide the remaining funds.

IV. New CPIP or Re-Scoping of an Existing CPIP:

Initial Approval – Whitten Interactive Garden - The scope for this project is to develop an interactive garden master plan to include shade trees, walking paths, sitting areas, and interactive stations including water features, art, and musical displays. The garden will allow for outdoor activities and gathering spaces for

residents and families. The initial phase of the plan was started several years ago with the addition of the Whitten Center Pavilion located in the center of campus. The proposed Interactive Garden will be located between the Pavilion and the Administration building.

This project will be funded by the Whitten Center Trust Fund, with contributions from the Whitten Parent Club, but the money will move through DDSN and therefore Commission approval is needed to proceed. Proposed budget is approximately \$300,000 - \$400,000 to include construction cost and professional fees. DDSN will seek professional services to develop the master plan. This project was not included on the 5-year CPIP plan approved by the Commission on May 21st, 2020. This is an interim CPIP project.

V. **New Consulting Contract:**

None

VI. **New Federal Grant:**

None

(NOTE: In July of each year, a report of all prior FY non-service expenditures by vendor over \$200,000 will be presented as a “post-payment” review. This will add visibility for expenditures from contracts originated in prior FYs and vendors with separate purchases aggregating over \$200,000 in current FY.)

Provider	Service	Amount	Description
Allendale	Adult Day	\$ 12,060	Band Increases for 2.5% COLA; Res. Appropriations
Allendale	SLP I	\$ 5,287	Band Increases for 2.5% COLA; Res. Appropriations
Allendale	CTH II	\$ 165,950	Band Increases for 2.5% COLA; Res. Appropriations
Allendale	CRCF	\$ 42,535	Band Increases for 2.5% COLA; Res. Appropriations
Allendale	ICF	\$ 44,544	Band Increases for 2.5% COLA; Res. Appropriations
	<i>Total -Allendale</i>	\$ 270,376	
Anderson	Adult Day	\$ 17,420	Band Increases for 2.5% COLA; Res. Appropriations
Anderson	Supported Employment	\$ 3,484	Band Increases for 2.5% COLA; Res. Appropriations
Anderson	CTH II	\$ 297,831	Band Increases for 2.5% COLA; Res. Appropriations
Anderson	SLP I	\$ 4,681	Band Increases for 2.5% COLA; Res. Appropriations
Anderson	SLP II	\$ 37,478	Band Increases for 2.5% COLA; Res. Appropriations
	<i>Total- Anderson</i>	\$ 360,894	
Babcock	Adult Day	\$ 51,456	Band Increases for 2.5% COLA; Res. Appropriations
Babcock	Supported Employment	\$ 5,360	Band Increases for 2.5% COLA; Res. Appropriations
Babcock	CTH I	\$ 3,588	Band Increases for 2.5% COLA; Res. Appropriations
Babcock	CTH II	\$ 820,148	Band Increases for 2.5% COLA; Res. Appropriations
Babcock	SLP I	\$ 4,751	Band Increases for 2.5% COLA; Res. Appropriations
Babcock	SLP II	\$ 72,612	Band Increases for 2.5% COLA; Res. Appropriations
Babcock	CRCF	\$ 96,554	Band Increases for 2.5% COLA; Res. Appropriations
Babcock	ICF	\$ 74,240	Band Increases for 2.5% COLA; Res. Appropriations
	<i>Total- Babcock</i>	\$ 1,128,709	
Beaufort	Adult Day	\$ 11,256	Band Increases for 2.5% COLA; Res. Appropriations
Beaufort	Supported Employment	\$ 804	Band Increases for 2.5% COLA; Res. Appropriations
Beaufort	CTH I	\$ 1,103	Band Increases for 2.5% COLA; Res. Appropriations
Beaufort	CTH II	\$ 189,324	Band Increases for 2.5% COLA; Res. Appropriations
Beaufort	SLP I	\$ 5,862	Band Increases for 2.5% COLA; Res. Appropriations
	<i>Total- Beaufort</i>	\$ 208,349	

Provider	Service	Amount	Description
Berkeley	Adult Day	\$ 20,100	Band Increases for 2.5% COLA; Res. Appropriations
Berkeley	Supported Employment	\$ 804	Band Increases for 2.5% COLA; Res. Appropriations
Berkeley	CTH I	\$ 1,103	Band Increases for 2.5% COLA; Res. Appropriations
Berkeley	CTH II	\$ 360,248	Band Increases for 2.5% COLA; Res. Appropriations
Berkeley	SLP I	\$ 1,111	Band Increases for 2.5% COLA; Res. Appropriations
Berkeley	ICF	\$ 29,696	Band Increases for 2.5% COLA; Res. Appropriations
	<i>Total- Berkeley</i>	\$ 413,062	
Broadstep Academy	CTH II	\$ 387,291	Rate Increases for 2.5% COLA; Res. Appropriations
	<i>Total- Broadstep</i>	\$ 387,291	
Burton	Adult Day	\$ 24,388	Band Increases for 2.5% COLA; Res. Appropriations
Burton	Supported Employment	\$ 804	Band Increases for 2.5% COLA; Res. Appropriations
Burton	CTH I	\$ 6,072	Band Increases for 2.5% COLA; Res. Appropriations
Burton	CTH II	\$ 325,226	Band Increases for 2.5% COLA; Res. Appropriations
Burton	SLP I	\$ 7,548	Band Increases for 2.5% COLA; Res. Appropriations
Burton	SLP II	\$ 24,679	Band Increases for 2.5% COLA; Res. Appropriations
Burton	ICF	\$ 85,376	Band Increases for 2.5% COLA; Res. Appropriations
	<i>Total- Burton</i>	\$ 474,093	
Charles Lea	Adult Day	\$ 46,364	Band Increases for 2.5% COLA; Res. Appropriations
Charles Lea	Supported Employment	\$ 4,556	Band Increases for 2.5% COLA; Res. Appropriations
Charles Lea	CRCF	\$ 101,082	Band Increases for 2.5% COLA; Res. Appropriations
Charles Lea	CTH I	\$ 1,103	Band Increases for 2.5% COLA; Res. Appropriations
Charles Lea	CTH II	\$ 820,384	Band Increases for 2.5% COLA; Res. Appropriations
Charles Lea	SLP I	\$ 22,795	Band Increases for 2.5% COLA; Res. Appropriations
Charles Lea	SLP II	\$ 47,652	Band Increases for 2.5% COLA; Res. Appropriations
	<i>Total- Charles Lea</i>	\$ 1,043,936	

Provider	Service	Amount	Description
Charleston	Adult Day	\$ 41,540	Band Increases for 2.5% COLA; Res. Appropriations
Charleston	Supported Employment	\$ 4,824	Band Increases for 2.5% COLA; Res. Appropriations
Charleston	CRCF	\$ 142,800	Band Increases for 2.5% COLA; Res. Appropriations
Charleston	CTH I	\$ 9,082	Band Increases for 2.5% COLA; Res. Appropriations
Charleston	CTH II	\$ 524,958	Band Increases for 2.5% COLA; Res. Appropriations
Charleston	SLP I	\$ 13,717	Band Increases for 2.5% COLA; Res. Appropriations
Charleston	SLP II	\$ 45,899	Band Increases for 2.5% COLA; Res. Appropriations
Charleston	ICF	\$ 14,848	Band Increases for 2.5% COLA; Res. Appropriations
	Total- Charleston	\$ 797,668	
CHESCO	Adult Day	\$ 48,240	Band Increases for 2.5% COLA; Res. Appropriations
CHESCO	Supported Employment	\$ 3,216	Band Increases for 2.5% COLA; Res. Appropriations
CHESCO	CRCF	\$ 258,774	Band Increases for 2.5% COLA; Res. Appropriations
CHESCO	CTH I	\$ 3,320	Band Increases for 2.5% COLA; Res. Appropriations
CHESCO	CTH II	\$ 506,692	Band Increases for 2.5% COLA; Res. Appropriations
CHESCO	SLP I	\$ 5,862	Band Increases for 2.5% COLA; Res. Appropriations
CHESCO	SLP II	\$ 72,767	Band Increases for 2.5% COLA; Res. Appropriations
	Total- CHESCO	\$ 898,871	
Clarendon	Adult Day	\$ 16,616	Band Increases for 2.5% COLA; Res. Appropriations
Clarendon	CRCF	\$ 64,079	Band Increases for 2.5% COLA; Res. Appropriations
Clarendon	CTH I	\$ 4,969	Band Increases for 2.5% COLA; Res. Appropriations
Clarendon	CTH II	\$ 189,084	Band Increases for 2.5% COLA; Res. Appropriations
Clarendon	SLP I	\$ 5,058	Band Increases for 2.5% COLA; Res. Appropriations
	Total- Clarendon	\$ 279,806	
Colleton	Adult Day	\$ 12,060	Band Increases for 2.5% COLA; Res. Appropriations
Colleton	Supported Employment	\$ 804	Band Increases for 2.5% COLA; Res. Appropriations
Colleton	CRCF	\$ 76,188	Band Increases for 2.5% COLA; Res. Appropriations
Colleton	CTH II	\$ 127,982	Band Increases for 2.5% COLA; Res. Appropriations
Colleton	SLP II	\$ 34,839	Band Increases for 2.5% COLA; Res. Appropriations
	Total- Colleton	\$ 251,873	

Provider	Service	Amount	Description
Community Options	High Management CTH II	\$ 479,670	New Forensic Contract- CTH II
Community Options	CTH II	\$ 1,015,498	Rate Increases for 2.5% COLA; Res. Appropriations
Community Options	CTH I	\$ 13,941	Rate Increases for 2.5% COLA; Res. Appropriations
Community Options	SLP III	\$ 5,716	Rate Increases for 2.5% COLA; Res. Appropriations
Community Options	SLP I	\$ 16,329	Rate Increases for 2.5% COLA; Res. Appropriations
Community Options	SLP II	\$ 3,803	Rate Increases for 2.5% COLA; Res. Appropriations
	<i>Total- Community Options</i>	\$ 1,534,957	
D & S Community	CTH II	\$ 228,450	Rate Increases for 2.5% COLA; Res. Appropriations
	<i>Total -D & S</i>	\$ 228,450	
Dorchester	Adult Day	\$ 19,832	Band Increases for 2.5% COLA; Res. Appropriations
Dorchester	Supported Employment	\$ 4,020	Band Increases for 2.5% COLA; Res. Appropriations
Dorchester	SLP I	\$ 10,652	Band Increases for 2.5% COLA; Res. Appropriations
Dorchester	SLP II	\$ 16,545	Band Increases for 2.5% COLA; Res. Appropriations
Dorchester	CTH II	\$ 356,314	Band Increases for 2.5% COLA; Res. Appropriations
Dorchester	ICF	\$ 29,696	Band Increases for 2.5% COLA; Res. Appropriations
	<i>Total- Dorchester</i>	\$ 437,059	
Fairfield	Adult Day	\$ 10,184	Band Increases for 2.5% COLA; Res. Appropriations
Fairfield	CTH II	\$ 209,834	Band Increases for 2.5% COLA; Res. Appropriations
	<i>Total- Fairfield</i>	\$ 220,018	
Florence	Adult Day	\$ 24,388	Band Increases for 2.5% COLA; Res. Appropriations
Florence	CRCF	\$ 71,932	Band Increases for 2.5% COLA; Res. Appropriations
Florence	CTH I	\$ 2,206	Band Increases for 2.5% COLA; Res. Appropriations
Florence	CTH II	\$ 225,948	Band Increases for 2.5% COLA; Res. Appropriations
Florence	SLP II	\$ 51,829	Band Increases for 2.5% COLA; Res. Appropriations
Florence	ICF	\$ 74,240	Band Increases for 2.5% COLA; Res. Appropriations
	<i>Total- Florence</i>	\$ 450,543	

Provider	Service	Amount	Description
Horry	Adult Day	\$ 20,100	Band Increases for 2.5% COLA; Res. Appropriations
Horry	Supported Employment	\$ 1,608	Band Increases for 2.5% COLA; Res. Appropriations
Horry	CRCF	\$ 72,408	Band Increases for 2.5% COLA; Res. Appropriations
Horry	CTH I	\$ 2,474	Band Increases for 2.5% COLA; Res. Appropriations
Horry	CTH II	\$ 182,748	Band Increases for 2.5% COLA; Res. Appropriations
Horry	SLP II	\$ 30,001	Band Increases for 2.5% COLA; Res. Appropriations
Horry	SLP I	\$ 6,169	Band Increases for 2.5% COLA; Res. Appropriations
	<i>Total- Horry</i>	\$ 315,508	
Laurens	Adult Day	\$ 17,420	Band Increases for 2.5% COLA; Res. Appropriations
Laurens	Supported Employment	\$ 2,144	Band Increases for 2.5% COLA; Res. Appropriations
Laurens	CRCF	\$ 72,200	Band Increases for 2.5% COLA; Res. Appropriations
Laurens	CTH II	\$ 240,110	Band Increases for 2.5% COLA; Res. Appropriations
Laurens	SLP I	\$ 8,927	Band Increases for 2.5% COLA; Res. Appropriations
Laurens	SLP II	\$ 31,341	Band Increases for 2.5% COLA; Res. Appropriations
Laurens	ICF	\$ 29,696	Band Increases for 2.5% COLA; Res. Appropriations
	<i>Total- Laurens</i>	\$ 401,838	
Marion/Dillon	Adult Day	\$ 13,936	Band Increases for 2.5% COLA; Res. Appropriations
Marion/Dillon	CRCF	\$ 31,342	Band Increases for 2.5% COLA; Res. Appropriations
Marion/Dillon	CTH II	\$ 210,770	Band Increases for 2.5% COLA; Res. Appropriations
Marion/Dillon	SLP II	\$ 3,766	Band Increases for 2.5% COLA; Res. Appropriations
	<i>Total- Marion/Dillon</i>	\$ 259,814	

Provider	Service	Amount	Description
Mentor	CTH II	\$ 314,838	Rate Increases for 2.5% COLA; Res. Appropriations
Mentor	CTH I	\$ 21,061	Rate Increases for 2.5% COLA; Res. Appropriations
Mentor	CTH II- High Management	\$ 305,986	Rate Increases for 2.5% COLA; Res. Appropriations
	Total- Mentor	\$ 641,885	
Newberry	Adult Day	\$ 11,792	Band Increases for 2.5% COLA; Res. Appropriations
Newberry	CTH II	\$ 175,343	Band Increases for 2.5% COLA; Res. Appropriations
Newberry	SLP II	\$ 11,030	Band Increases for 2.5% COLA; Res. Appropriations
Newberry	SLP I	\$ 3,235	Band Increases for 2.5% COLA; Res. Appropriations
Newberry	ICF	\$ 20,416	Band Increases for 2.5% COLA; Res. Appropriations
	Total- Newberry	\$ 221,816	
Oconee	Adult Day	\$ 17,152	Band Increases for 2.5% COLA; Res. Appropriations
Oconee	Supported Employment	\$ 3,484	Band Increases for 2.5% COLA; Res. Appropriations
Oconee	CTH II	\$ 222,441	Band Increases for 2.5% COLA; Res. Appropriations
Oconee	SLP II	\$ 29,860	Band Increases for 2.5% COLA; Res. Appropriations
Oconee	SLP III	\$ 34,664	Band Increases for 2.5% COLA; Res. Appropriations
Oconee	SLP I	\$ 16,207	Band Increases for 2.5% COLA; Res. Appropriations
	Total- Oconee	\$ 323,808	
Orangeburg	Adult Day	\$ 21,440	Band Increases for 2.5% COLA; Res. Appropriations
Orangeburg	CTH II	\$ 306,210	Band Increases for 2.5% COLA; Res. Appropriations
Orangeburg	SLP II	\$ 32,554	Band Increases for 2.5% COLA; Res. Appropriations
Orangeburg	ICF	\$ 59,301	Band Increases for 2.5% COLA; Res. Appropriations
	Total- Orangeburg	\$ 419,505	
Pickens	Adult Day	\$ 16,348	Band Increases for 2.5% COLA; Res. Appropriations
Pickens	Supported Employment	\$ 3,484	Band Increases for 2.5% COLA; Res. Appropriations
Pickens	CTH II	\$ 261,565	Band Increases for 2.5% COLA; Res. Appropriations
Pickens	SLP II	\$ 42,103	Band Increases for 2.5% COLA; Res. Appropriations
Pickens	SLP I	\$ 8,698	Band Increases for 2.5% COLA; Res. Appropriations
	Total- Pickens	\$ 332,198	

Provider	Service	Amount	Description
Sumter	Adult Day	\$ 19,296	Band Increases for 2.5% COLA; Res. Appropriations
Sumter	Supported Employment	\$ 268	Band Increases for 2.5% COLA; Res. Appropriations
Sumter	CTH II	\$ 308,158	Band Increases for 2.5% COLA; Res. Appropriations
Sumter	SLP II	\$ 21,792	Band Increases for 2.5% COLA; Res. Appropriations
Sumter	ICF	\$ 48,256	Band Increases for 2.5% COLA; Res. Appropriations
	<i>Total- Sumter</i>	\$ 397,770	
Thrive	Adult Day	\$ 32,964	Band Increases for 2.5% COLA; Res. Appropriations
Thrive	Supported Employment	\$ 6,432	Band Increases for 2.5% COLA; Res. Appropriations
Thrive	CRCF	\$ 176,398	Band Increases for 2.5% COLA; Res. Appropriations
Thrive	CTH II	\$ 393,898	Band Increases for 2.5% COLA; Res. Appropriations
Thrive	SLP I	\$ 19,123	Band Increases for 2.5% COLA; Res. Appropriations
Thrive	SLP II	\$ 72,640	Band Increases for 2.5% COLA; Res. Appropriations
Thrive	ICF	\$ 89,088	Band Increases for 2.5% COLA; Res. Appropriations
	<i>Total- Thrive</i>	\$ 790,543	
Tri-Development	Adult Day	\$ 30,552	Band Increases for 2.5% COLA; Res. Appropriations
Tri-Development	Supported Employment	\$ 2,680	Band Increases for 2.5% COLA; Res. Appropriations
Tri-Development	CRCF	\$ 75,176	Band Increases for 2.5% COLA; Res. Appropriations
Tri-Development	CTH I	\$ 12,020	Band Increases for 2.5% COLA; Res. Appropriations
Tri-Development	CTH II	\$ 395,042	Band Increases for 2.5% COLA; Res. Appropriations
Tri-Development	SLP II	\$ 33,018	Band Increases for 2.5% COLA; Res. Appropriations
Tri-Development	SLP I	\$ 15,096	Band Increases for 2.5% COLA; Res. Appropriations
Tri-Development	ICF	\$ 59,392	Band Increases for 2.5% COLA; Res. Appropriations
	<i>Total- Tri-Development</i>	\$ 622,976	
MaxAbilities	Adult Day	\$ 33,500	Band Increases for 2.5% COLA; Res. Appropriations
MaxAbilities	Supported Employment	\$ 1,608	Band Increases for 2.5% COLA; Res. Appropriations
MaxAbilities	CRCF	\$ 134,858	Band Increases for 2.5% COLA; Res. Appropriations
MaxAbilities	CTH II	\$ 392,226	Band Increases for 2.5% COLA; Res. Appropriations
MaxAbilities	SLP II	\$ 36,588	Band Increases for 2.5% COLA; Res. Appropriations
MaxAbilities	SLP I	\$ 7,855	Band Increases for 2.5% COLA; Res. Appropriations
	<i>Total- MaxAbilities</i>	\$ 606,635	

Provider	Service	Amount	Description
UCP	CTH II	\$ 361,562	Rate Increases for 2.5% COLA; Res. Appropriations
UCP	SLP II	\$ 7,607	Rate Increases for 2.5% COLA; Res. Appropriations
UCP	SLP I	\$ 8,583	Rate Increases for 2.5% COLA; Res. Appropriations
UCP	CTH I	\$ 3,138	Rate Increases for 2.5% COLA; Res. Appropriations
	<i>Total- UCP</i>	\$ 380,890	
	<i>Total ALL</i>	\$ 15,101,141	



MEMO

Date: October 1, 2021

To: DSN Commissioners

From: CFO Pat Maley

Re: Band B & I Project: Band Increase & Outlier Requests

On 4/5/21, DDSN initiated the Band Increase & Outlier Request Program with funding from the B & I Transition “gap” funds available. To date, DDSN received **43** requests for Band increases and requests for outlier funding. Of these requests, 14 have been approved, 24 denied; **4** being submitted to the October Commission meeting; and **1** is still pending review. Every Friday, new requests are staffed by Operations and Finance Divisions and either approved, denied, or held in abeyance while additional data is collected to make a determination. For all new requests not approved due to lack of sufficient justification, providers are re-contacted and given ample opportunity to send in additional financial information to support the request prior to a final denial is recommended to the Commission.

Attachment A to this memo contains a schedule itemizing all staff recommendations for the **October** 2021 Commission meeting, where staff will seek Commission final approval. Attachment B to this memo is a summary of all previously approved Commission funding decisions for this project.

Request of the Commission:

Approve the **4** preliminary staff recommendations contained on Attachment A.

Attachment A								
Staff Recommendation for Band Increases & Outliers for the October Commission Meeting								
Band Increase Request				Outlier Request			Staffing Decision	
Individual	Band from/to	Annualized Increase Request	Annualized Increase Approved	Individual	Amount Requested	Amount Approved	Approve	Disapprove
JH	G to H	\$18,561	\$18,561				X	
ES	G to H	\$18,561	\$0					X
JW	G to H	\$18,561	\$0					X
AC	G to H	\$18,561	\$0					X
		\$ 74,244	\$ 18,561		\$ -	\$ -		

Attachment B

Summary of All Band Increases & Outlier Decisions Pertaining to the B & I Transition Project									
Date Approved by Commission	Band Increase Request				Outlier Request			Staffing Decision	
	Individual	Band from/to	Annualized Increase Request	Annualized Increase Approved	Individual	Amount Requested	Amount Approved	Approve	Disapprove
5/20/2021	GB	G to H	\$18,561	\$ 18,561				X	
5/20/2021	CH	Low to High	\$18,561	\$ -					X
5/20/2021	DH	Low to High	\$18,561	\$ -					X
5/20/2021	LH	Low to High	\$18,561	\$ -					X
5/20/2021	RJ	Low to High	\$18,561	\$ -					X
5/20/2021	BL	G to H	\$18,561	\$ -					X
5/20/2021					TH	\$ 109,500	\$ -		X
5/20/2021					ML	\$ 112,099	\$ -		X
6/17/2021	LJ	G to H	\$18,561						X
6/17/2021	TH	G to H	\$18,561	\$ 18,561				X	
6/17/2021	JG	G to H	\$18,561	\$ -					X
6/17/2021	DP	G to H	\$18,561	\$ -					X
6/17/2021	BP	G to H	\$18,561	\$ 18,561				X	
6/17/2021	BB	G to H	\$18,561	\$ 18,561				X	
6/17/2021	WM	G to H	\$18,561	\$ 18,561				X	
6/17/2021	CW	G to H	\$18,561	\$ 18,561				X	
6/17/2021	AA	G to H	\$18,561	\$ 18,561				X	
6/17/2021	PK	G to H	\$18,561	\$ -					X
6/17/2021	DK	G to H	\$18,561	\$ -					X
6/17/2021	SH	G to H	\$18,561	\$ -					X
6/17/2021	MB	G to H	\$18,561	\$ -					X
6/17/2021	AS	G to H	\$18,561	\$ 18,561				X	
6/17/2021					GB	\$ 98,837	\$ 41,046	X	
6/17/2021					JB	\$ 134,783	\$ 80,660	X	
6/17/2021					MD	\$ 13,607	\$ -		X
6/17/2021					AJ	\$ 13,607	\$ -		X
6/17/2021					MS	\$ 73,362	\$ -		X
7/14/2021					DL	\$ 41,047	\$ -		X
7/14/2021					KM	\$ 66,163	\$ -		X
7/14/2021					JP	\$ 41,047	\$ -		X
7/14/2021					DG	\$ 37,987	\$ -		X
7/14/2021					JE	\$ 37,543	\$ -		X
7/14/2021					GB	\$ 19,384	\$ -		X
7/14/2021					AE	\$ 31,925	\$ -		X
9/16/2021	CC	G to H	\$18,561	\$18,561					
9/16/2021	RF	G to H	\$18,561	\$18,561					
9/16/2021	SK	G to H	\$18,561	\$18,561					
9/16/2021	TB	G to H	\$18,561	\$18,561					
			\$445,464	\$ 222,732		\$ 830,891	\$ 121,706		

DSN Commission Finance and Audit Committee Procedures
Commission Approved January 21, 2021

This document sets forth the procedure to be used by the Finance and Audit Committee (the Committee) of the South Carolina Commission on Disabilities and Special Needs (the Commission).

I. SCOPE:

The Committee provides assistance to the Commission in fulfilling its oversight responsibilities relating to budgeting, accounting and financial reporting processes, and the performance of the internal audit function. The Committee will oversee South Carolina Department of Disabilities and Special Needs (DDSN) management processes and activities relating to:

- a. Maintaining the reliability and integrity of DDSN's accounting policies, financial reporting practices, and internal controls;
- b. Review significant accounting and reporting developments and issues;
- c. The performance and work plan of the internal audit function in accordance with DDSN Directive 275-05-DD: General Duties of the DDSN Internal Audit Division;
- d. Compliance with applicable laws, regulations, and DDSN directives;
- e. Review and approval of the annual operating and capital budgets, as well as any amendments;
- f. Analyzing financings and capital transactions being considered by DDSN and the adequacy of its capital structure;
- g. Review of DDSN fiscal related directives; and
- h. Review of DDSN fiscal regulatory and oversight reports.

The Committee also provides an open avenue of communication between DDSN management, Internal Audit, and the Commission.

Consistent with the annual audit plan, the Committee has the authority to conduct or authorize investigations into any matters within its scope of responsibility. Inquiry and briefings on all significant financial matters along with related presentations and motions for full Commission approval originate from the Committee.

II. COMMITTEE MEMBERSHIP:

The Chair of the Commission will appoint members to the Committee. The Committee will consist of at least three (3) members of the Commission. Members will be sought that have relevant experience and/or fiscal expertise, but this is not a limiting factor related to Committee Membership. The members of the Committee will be appointed and may be removed by the Chair.

III. MEETING FREQUENCY:

The Committee will meet monthly or as determined by the Committee Chairperson based on the workflow of DDSN. Meetings of the Committee may be called by or at the request of the Commission, any member of the Committee, or the Chair of the Commission. Meetings will be held at the time and place designated in the meeting notice. The Chief Financial Officer, in coordination with other members of Executive Management, will prepare a suggested committee meeting agenda and share with the Committee Chair at least five days in advance of the scheduled meeting. Notice of the time, place, and agenda of the meetings will be posted as prescribed by the By-Laws and the South Carolina Freedom of Information Act. A majority of the appointed Committee members will represent a quorum and the actions of a quorum of the Committee shall be the act of the Committee. The Committee will retain minutes of each meeting.

IV. PROCEDURE:

A. Financial Reports/Budgets/Spending Plans

The Committee will consult with management concerning annual spending plans and budget processes, review budgets, projections of future financial performance, analysis of the financial effect of proposed transactions, borrowings, and capital structure. The Committee will review financial information with management in most cases before the information is presented to the Commission. The Committee will assist the Commission in analyzing financial information that is presented to them for review. The Committee will advise the Commission of finance matters that it believes require Commission attention.

Routine Committee business includes review and approval of staff prepared budgets, projects, and financial plans for general reasonableness of the underlying assumptions. The Committee will provide recommendations of approval or modification to the Commission.

B. Directives

The Committee shall receive fiscal-related directives for review and revision as referred by the DSN Commission Policy Committee or as referred by the Commission Chairman. Review and approval of directives follows Section III. A. of the Policy Committee Procedures: Committee Undertakes a Review of a Directive or Standards, listed below as adapted to conform to the Finance and Audit Committee.

“The Directive/Standard is reviewed by staff who will make revision recommendations regarding the document. A draft version, including staff recommendations, will be posted to the website and the public will have 10 business days to review and submit comments (see Directive 100-01-DD: Electronic Communications System).”

It is DDSN’s intent to solicit feedback/input from all entities affected by the directives/standards; however, in rare cases the 10 business day period may not occur due to extenuating circumstances.

Committee members will be given a copy of the suggested staff changes prior to posting for public comment. This effort will provide the Committee members a chance to give their input prior to the Directive being posted so that changes can be made prior to posting for public comment.

After the 10 business day public review period, staff will consider and respond to each comment; make additional changes to the Directive or Standards; and present the Directive or Standards to the Finance and Audit Committee at a scheduled meeting. The Committee members may request additional changes and will determine which changes will be accepted based on the comments as well as staff recommendations.

When a consensus is reached by the Finance and Audit Committee, a version representing this consensus will be created for presentation to the DSN Commission for approval. Following approval, the document will be posted on the DDSN website under “Current DDSN Directives” or “Current DDSN Standards.”

**DSN Commission Legislative Committee Procedures
Commission Approved January 21, 2021**

This document sets forth the procedure to be used by the Legislative Committee of the South Carolina Commission on Disabilities and Special Needs (DSN Commission).

I. SCOPE:

The DSN Commission Legislative Committee initiates, reviews and revises new and existing state statutes and regulations to bring to the full DSN Commission. Formal, prescribed state level promulgation procedures are followed. The Legislative Committee also reviews and approves for full Commission approval pertinent directives referred from the Policy Committee. Lastly, the Committee receives inquiries and briefings on all significant legislative issues and carries forward to the full Commission motions, approvals and presentations.

II. MEETING FREQUENCY:

The Committee meets as determined by the Committee Chairperson based on the workflow of the South Carolina Department of Disabilities and Special Needs (DDSN).

III. PROCEDURE

A. Statute and Regulation Review

Prior to initiating the state level promulgation procedures, the Legislative Committee drafts changes and reaches consensus on recommendations for new and existing state statutes and regulations. These drafts are brought to the DSN Commission for a full vote of approval prior to disseminating outside of DDSN.

B. Briefings on Significant Legislative Issues

DDSN staff communicate updates on significant legislative issues to include developments and the need for potential statutory or regulatory revisions based on the needs of the population served by DDSN.

C. Directives

The Committee shall receive pertinent directives for review and revision as referred by the DSN Commission Policy Committee. Review and Approval of directives follows Section III. A. of the Policy Committee Procedures: Committee Undertakes a Review of a Directive or Standards, listed below as adapted to conform to the Legislative Committee.

The directive is reviewed by staff who will make revision recommendations regarding the document. This draft revised version will be presented to the Legislative Committee at a scheduled meeting for consensus on changes. A draft version will be posted to the website and

the public will have 10 business days to review and submit comments (see Directive 100-01-DD: Electronic Communications System).

It is DDSN's intent to solicit feedback/input from all entities affected by the directives/standards; however, in rare cases the 10 business day period may not occur due to extenuating circumstances.

After the 10 business days public review period, staff will consider and respond to each comment; make additional changes to the Directive or Standards; and present the Directive to the Legislative Committee at a scheduled meeting. The Committee members may request additional changes and will determine which changes will be accepted based on the comments as well as staff recommendations.

When a consensus is reached by the Legislative Committee, a version representing this consensus will be created for presentation to the DSN Commission for approval. Following approval, the document will be posted on the DDSN website under "Current DDSN Directives" or "Current DDSN Standards."

DSN Commission Personnel Committee Procedures
Commission Approved ~~January 21~~ October 21, 2021

This document sets forth the procedure to be used by the Personnel Committee (the Committee) of the South Carolina Commission on Disabilities and Special Needs (DSN Commission).

I. SCOPE:

The Committee ~~appoints~~ recommends the action to hire the South Carolina Department of Disabilities and Special Needs (DDSN) ~~the~~ State Director for the approval of the full Commission. It also serves to draft and complete the State Director's annual evaluation. The Chairman of the DSN Commission serves as the Chairman of the Committee which includes up to seven (7) members.

II. MEETING FREQUENCY:

The Committee meets as determined by the Committee Chairman based on the workflow of DDSN associated with the hiring of the State Director. The Committee Chairman also serves as the point of contact regarding the State Director's performance planning and evaluation process.

III. PROCEDURE:

The Committee conforms to the requirements of the DDSN Hiring Commission in hiring and annually evaluating the State Director. The DDSN Human Resource Director is engaged in this process to advise the Committee and DDSN Commission as necessary.

The State Director Salary Commission establishes and administers the State Director's performance process. Guidance regarding the State Director's development of a planning and evaluation stage are provided on the State Fiscal Accountability Authority website: <https://www.sfaa.sc.gov/Agency-Head>.

Planning Stage

According to the guidance provided, the State Director will meet with the Commission to propose the objectives and standards for success he/she will meet in the upcoming year. The Commission will accept, reject, modify, and discuss the State Director's proposed objectives and success criteria. Success criteria include a statement of conditions that will exist when a duty or responsibility has been satisfactorily met. The success criteria must include the expected actions, timeframes, frequency, costs, quantities or other appropriate and specific measures and business results that will enable the State Director and evaluators to agree on expected outcomes and recognize when these outcomes have been satisfactorily achieved.

When acceptable objectives are identified, the DSN Commission will complete the planned objectives on the evaluation document and review them with the State Director. Signatures are obtained and the original will be retained by the DSN Commission for completion at the end of the evaluation period. The planning process should be completed by October 15th of each calendar year.

The State Director will schedule interim performance conferences as needed to discuss performance or revise/modify objectives through communication with the Committee Chairperson.

Evaluation Stage

The State Director will schedule a meeting with the DSN Commission to present his/her job performance in relation to the objectives and success criteria agreed upon during the planning process. Each DSN Commission member will complete a State Director evaluation survey and return it to the Personnel Committee Chairman to compile. The Personnel Committee Chairman will complete the evaluation document based on the assessment of the State Director's performance as presented by the State Director, input from the DSN Commission and the survey. The final document will be approved by a majority vote of the DSN Commission and signed by the DSN Commission Chairman.

The approved document and survey results will be reviewed with the State Director. The State Director will sign the document to indicate he/she has seen the document and survey results. The completed document and the survey composite score sheet will be submitted to the DDSN Head Salary Commission by September 15th of each calendar year.

The Agency Head Planning Stage, Performance Evaluation Form and related files/links are located on State Fiscal Accountability Authority website.

**DSN Commission Personnel Committee Procedures
Commission Approved October 21, 2021**

This document sets forth the procedure to be used by the Personnel Committee (the Committee) of the South Carolina Commission on Disabilities and Special Needs (DSN Commission).

I. SCOPE:

The Committee recommends the action to hire the South Carolina Department of Disabilities and Special Needs (DDSN) State Director for the approval of the full Commission. It also serves to draft and complete the State Director's annual evaluation. The Chairman of the DSN Commission serves as the Chairman of the Committee which includes up to seven (7) members.

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The Committee meets as determined by the Committee Chairman based on the workflow of DDSN associated with the hiring of the State Director. The Committee Chairman also serves as the point of contact regarding the State Director's performance planning and evaluation process.

III. PROCEDURE:

The Committee conforms to the requirements of the DDSN Hiring Commission in hiring and annually evaluating the State Director. The DDSN Human Resource Director is engaged in this process to advise the Committee and DDSN Commission as necessary.

The State Director Salary Commission establishes and administers the State Director's performance process. Guidance regarding the State Director's development of a planning and evaluation stage are provided on the State Fiscal Accountability Authority website: <https://www.sfaa.sc.gov/Agency-Head>.

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The Agency Head Planning Stage, Performance Evaluation Form and related files/links are located on State Fiscal Accountability Authority website.

DSN Commission Policy Committee
Procedure for Review of Policies, Directives and Standards
Commission Approved ~~January 21~~, 2021

This document sets forth the procedure to be used by the Policy Committee of the South Carolina Commission on Disabilities and Special Needs (DSN Commission) for the review and approval of approximately 180 DSN Commission Policies, Departmental Directives and Standards governing services funded by the agency.

I. SCOPE:

Approved Commission Policies, Departmental Directives and Standards shall, at a minimum, be reviewed every four (4) years to ensure the content remains current and applicable. All policies, directives and standards are available on the DDSN website. The website, at all times, provides an avenue for public comment on the policies, directives and standards. Public comments regarding policies, directives and standards under external review will only be accepted in written form and during the defined public comment period. It is DDSN's intent to solicit feedback/input from all entities affected by the directives/standards; however, in rare cases the 10 business day period may not occur due to extenuating circumstances.

II. PROCEDURE FOR REVIEW OF COMMISSION POLICIES, DEPARTMENTAL DIRECTIVES AND SERVICE STANDARDS:

- A. In accordance with Department Directive 100-01-DD: Electronic Communications System, when a policy, directive or standard is under external review, it will be posted on the website in a section entitled "External Review/Public Comment on Directives and Standards." A list of Department Directives and Standards due for external review during the fiscal year will be considered by the Policy Committee semi-annually (on or around July 1 and January 1) and adjusted as determined by the Committee. These directives and standards will then be placed on the website (External Review/Public Comment on Directives and Standards) to include a description as to the applicable groups (e.g., provider types).
- B. All Commission Policies will remain within the Policy Committee for review and updating. When the Policy Committee review is completed, a version including all recommended changes will be presented to the DSN Commission for approval. Following approval, the Policy will be posted on the DDSN Website in the "Current DDSN Directives" section.
- C. In coordination with the Policy Committee Chairperson, the Commission, DSN Committees or staff may request review and re-prioritization of a policy, directive or standard. Upon a vote of the full Commission, a policy, directive or standard may also be directed to another DSN Commission Committee. For each Directive or Standard the Committee will decide if they will:
- Undertake a review;
 - Direct to other committees for review; or

- Delegate to staff. Directives and Standards delegated to staff will be presented to the full Commission for final approval.

III. REVIEW AND APPROVAL OF COMMISSION POLICIES, DEPARTMENTAL DIRECTIVES AND SERVICE STANDARDS:

A. Committee Undertakes a Review of a Directive or Standards:

The directive/standard is reviewed by staff who will make recommendations regarding the document. A draft version, including staff recommendations, will be posted to the website and the public will have 10 business days to review and submit comments (see Directive 100-01-DD: Electronic Communications System).

It is DDSN's intent to solicit feedback/input from all entities affected by the directives/standards; however, in rare cases the 10 business day period may not occur due to extenuating circumstances.

After the 10 business days public review period, staff will consider ~~and respond to~~ each comment; make additional changes as needed to the Directive or Standards; and present the Directive or Standards to the Policy Committee. The committee members may request additional changes and will determine which changes will be accepted based on the comments as well as staff recommendations.

When a consensus is reached by the Policy Committee, a version representing this consensus will be created for presentation to the DSN Commission for approval. Following approval, the document will be posted on the DDSN website under "Current DDSN Directives" or "Current DDSN Standards."

B. Committee Directs to Another Committee for Review of Directive or Standards:

When the Policy Committee directs a Directive or Standards to another DSN Commission Committee for review, the procedures outlined in the section entitled, "Committee Undertakes a Review" (III. A) of this document will be followed by the directed Committee including reaching consensus and presenting to the DSN Commission for approval.

Following approval, the document will be posted on the DDSN website under "Current DDSN Directives" or "Current DDSN Standards."

C. Committee Delegates Review of a Directive or Standards to Staff:

When the Committee delegates to staff for revision, public comment and approval, staff will make recommendations regarding the document. A draft version including staff recommendations will be posted to the website and the public will have 10 business days to review and submit comments (see Directive 100-01-DD: Electronic Communications System).

After the 10 business day public review period, staff will consider each comment and make additional changes to the Directive or Standards. When comments have been considered and changes made, the document will be presented to the full Commission for final approval.

D. Obsolete Policies/Directives/Standards:

When the Committee determines directives shall be declared Obsolete, a master list will be maintained and the Chairman and Vice-Chairman will sign after voting by the full Commission.

E. Meeting Summary Notes:

The Committee will review and adopt the summary of the previous meeting notes at its next scheduled meeting. It should be noted, these are not considered minutes, as minutes are not required by a sub-committee. Accordingly, they are only a summary of the meeting.

IV. NEW DEPARTMENTAL DIRECTIVES OR SERVICE STANDARDS:

When a new Departmental Directive or Service Standard is created, the staff will advise the Policy Committee of the need for the document, seek approval to post as a draft for public comment, and ask for a decision regarding whether the Committee will:

- Undertake a review;
- Direct to another committee for review; or
- Delegate to staff. Directives and Standards delegated to staff will be presented to the full Commission for final approval.

Based on the decision by the Policy Committee, the document will follow the procedure outlined above for Directives or Standards being reviewed.

V. CHANGES TO OTHER DOCUMENTS HAVING THE EFFECT OF POLICY:

When substantive changes to other documents having the effect of policy (e.g., HCBS Waiver amendments, HCBS Waiver Manual) are needed, a summary of the needed changes will be presented to the Policy Committee for advisement. As a result of the advisement, the Committee will specify the additional actions, if any, to be taken.

**DSN Commission Policy Committee
Procedure for Review of Policies, Directives and Standards
Commission Approved October 21, 2021**

This document sets forth the procedure to be used by the Policy Committee of the South Carolina Commission on Disabilities and Special Needs (DSN Commission) for the review and approval of approximately 180 DSN Commission Policies, Departmental Directives and Standards governing services funded by the agency.

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Approved Commission Policies, Departmental Directives and Standards shall, at a minimum, be reviewed every four (4) years to ensure the content remains current and applicable. All policies, directives and standards are available on the DDSN website. The website, at all times, provides an avenue for public comment on the policies, directives and standards. Public comments regarding policies, directives and standards under external review will only be accepted in written form and during the defined public comment period. It is DDSN's intent to solicit feedback/input from all entities affected by the directives/standards; however, in rare cases the 10 business day period may not occur due to extenuating circumstances.

II. PROCEDURE FOR REVIEW OF COMMISSION POLICIES, DEPARTMENTAL DIRECTIVES AND SERVICE STANDARDS:

- A. In accordance with Department Directive 100-01-DD: Electronic Communications System, when a policy, directive or standard is under external review, it will be posted on the website in a section entitled "External Review/Public Comment on Directives and Standards." A list of Department Directives and Standards due for external review during the fiscal year will be considered by the Policy Committee semi-annually (on or around July 1 and January 1) and adjusted as determined by the Committee. These directives and standards will then be placed on the website (External Review/Public Comment on Directives and Standards) to include a description as to the applicable groups (e.g., provider types).
- B. All Commission Policies will remain within the Policy Committee for review and updating. When the Policy Committee review is completed, a version including all recommended changes will be presented to the DSN Commission for approval. Following approval, the Policy will be posted on the DDSN Website in the "Current DDSN Directives" section.
- C. In coordination with the Policy Committee Chairperson, the Commission, DSN Committees or staff may request review and re-prioritization of a policy, directive or standard. Upon a vote of the full Commission, a policy, directive or standard may also be directed to another DSN Commission Committee. For each Directive or Standard the Committee will decide if they will:
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When a consensus is reached by the Policy Committee, a version representing this consensus will be created for presentation to the DSN Commission for approval. Following approval, the document will be posted on the DDSN website under "Current DDSN Directives" or "Current DDSN Standards."

B. Committee Directs to Another Committee for Review of Directive or Standards:

When the Policy Committee directs a Directive or Standards to another DSN Commission Committee for review, the procedures outlined in the section entitled, "Committee Undertakes a Review" (III. A) of this document will be followed by the directed Committee including reaching consensus and presenting to the DSN Commission for approval.

Following approval, the document will be posted on the DDSN website under "Current DDSN Directives" or "Current DDSN Standards."

C. Committee Delegates Review of a Directive or Standards to Staff:

When the Committee delegates to staff for revision, public comment and approval, staff will make recommendations regarding the document. A draft version including staff recommendations will be posted to the website and the public will have 10 business days to review and submit comments (see Directive 100-01-DD: Electronic Communications System).

After the 10 business day public review period, staff will consider each comment and make additional changes to the Directive or Standards. When comments have been considered and changes made, the document will be presented to the full Commission for final approval.

D. Obsolete Policies/Directives/Standards:

When the Committee determines directives shall be declared Obsolete, a master list will be maintained and the Chairman and Vice-Chairman will sign after voting by the full Commission.

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When a new Departmental Directive or Service Standard is created, the staff will advise the Policy Committee of the need for the document, seek approval to post as a draft for public comment, and ask for a decision regarding whether the Committee will:

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Based on the decision by the Policy Committee, the document will follow the procedure outlined above for Directives or Standards being reviewed.

V. CHANGES TO OTHER DOCUMENTS HAVING THE EFFECT OF POLICY:

When substantive changes to other documents having the effect of policy (e.g., HCBS Waiver amendments, HCBS Waiver Manual) are needed, a summary of the needed changes will be presented to the Policy Committee for advisement. As a result of the advisement, the Committee will specify the additional actions, if any, to be taken.

FY22 Spending Plan VS Actual Expenditures as of 9/30/2021

Category	Spending Plan *	Cash Expenditures YTD	SCDHHS Monthly "Wash" Expenditures with Revenue YTD **	Total Monthly Expenditures YTD	Remaining Spending Plan	Spending Plan Deviation with Actual
DDSN spending plan budget base + DDSN 2.5% to date	\$ 815,138,477	\$ 173,344,556	\$ 34,280,529	\$ 207,625,085	\$ 607,513,392	REASONABLE
Percent of total spending plan remaining	100.00%	21.27%	4.21%	25.47%	74.53%	
% of FY Remaining					75.00%	
Difference %: over (under) budgeted expenditures					0.47%	

* FY22 spending plan base of \$812,708,604 + implementing 2.5% COLA & 1% retirement of \$2,429,873 = \$815,138,477; will increase spending plan as FY22 appropriations implemented and FY22 increases approved.

** In Sept, 2021, providers billed & paid by SCDHHS for approximately \$45.3 million in services (waiver services + state plan services). DDSN paid the \$11.1 million state match to SCDHHS recorded as a cash expenditure and the \$34,280,529 difference was the "wash" Medicaid reimbursement revenue & expense added to maintain "apples to apples" comparison to FY22 spending plan.

Methodology & Report Owner: DDSN Budget Division



TO: State Director Fry

FROM: CFO Pat Maley

SUBJECT: Implement FY22 Legislative Budget's 1% Increase for Employers' State Retirement Costs

DATE: October 14, 2021

The purpose of this memo is to set forth background, analysis, and recommendations on how to implement the FY22 legislative budget's 1% increase in employer state retirement costs for our healthcare provider network. In the approved FY22 statewide budget (117.169; Employee Compensation), the Department of Administration (DOA) was directed to ***“allocate associated compensation increases for retirement employer contributions based on the retirement rate of the retirement system in which individual employees participate.”*** Due to state retirement employer contributions increasing 1% in FY22 to 16.56%, the Executive Budget Office, DOA, allocated recurring funding to DDSN to meet this obligation to its healthcare provider network participating in the state retirement system.

Historically, DDSN calculated its legislatively required employer contribution increases for those Boards participating in the retirement system **AND**, in order to be fair, also paid the same amount to all residual Boards and Private Providers not participating in the state retirement system. Capitated bands (Boards) and residential bundled rates (Private Providers) were increased and DDSN was guaranteed to recover its Medicaid match in annual two-way cost settlements with SCDHHS. Those days have passed. Today, DDSN is faced with the challenge of implementing this legislative requirement in a hybrid fee-for-service and capitated/bundled rate payment system, which will completely change half-way through FY22 to be completely fee-for-service. It is much like a “round peg in a square hole” problem.

The following facts were considered when arriving at the recommendations to implement this legislatively required 1% employer retirement cost increase:

- The DDSN healthcare provider network contains 9505 employees, of which 5358 (56%) are in the state retirement system. These 9505 individuals have a total personnel salary cost of \$291 million, which equates to a legislative requirement and liability to pay approximately \$1.62 million annually to providers for their 1% increase in state retirement employer contributions (\$291 million X 56% X 1%). To continue DDSN's historical practice of paying all DDSN providers an equal increase despite not being in the state retirement, it would cost an additional \$1.28 million (\$291 million X 44% X 1%). The combine annual cost would be \$2.9 million. The Executive Budget Office provided DDSN \$942,657 to fund providers' 1% employer retirement cost increase; if we get into how this was calculated it would triple the complexity of this issue.
- Of the \$291 million in system-wide personnel costs, \$240 million is in residential and day services. These services are paid primarily through capitated bands and bundled residential rates, which will cease to exist on 1/1/22 when converted to fee-for-service upon implementing the IDR Waiver Renewal. Fortunately, the IDR Waiver Renewal is expected to have significant residential and day rate increases, to include factoring in the 1% employer retirement cost increase contained in Milliman's (SCDHHS consultant) rate analysis assumptions.

- DDSN cannot justify asking SCDHHS for an across-the-board 1% Medicaid rate increase for a system-wide retirement cost because this cost only pertains to 56% of system employees. Further to mathematically adjust Medicaid rates to get retirement funds to providers, the below illustrates the challenge given the different payment models for each impacted service category:

TABLE 1

Healthcare Provider Network Service Category for FTE Personnel Costs	Total FTE Costs	1% Employer Retirement Contribution	Payment System for Service Category
Daily Residential Habilitation	\$ 186,225,011	\$ 1,862,250	Board Band & Private Provider Bundled Residential Rate
Day Programs	\$ 52,237,444	\$ 522,374	Board Band & Privat Provider Bundled Residential Rate (54%) and Fee-for-Service (46%)
Early Intervention (not include BabyNet)	\$ 10,019,729	\$ 100,197	Fee-for-Service
Case Management	\$ 15,403,369	\$ 154,033	Fee-for-Service
ICF Community	\$ 25,602,137	\$ 256,021	Board Band
Respite	\$ 251,464	\$ 2,514	Fee-for-Service
SLP I	\$ 1,386,130	\$ 13,861	Board Band & Private Provider Bundled Residential Rate
Total	\$ 291,125,284	\$ 2,911,250	N/A

It is recommended to extend the 1% employer retirement cost increase to all providers based on DDSN historical precedent. Further, this should be the last time DDSN will be confronted with this complex challenge as it leaves its current hybrid, mixed payment model and becomes 100% fee-for-service using Medicaid rates set by SCDHHS on 1/1/22.

Based on the above complexity, there is no ‘easy button’ to simply adjust rates or bands/bundled rates. It is not logical to partially implement through bands/bundle rates with retroactive lump sum payments back to 7/1/21 when both bands and bundle rates will cease to exist after being converted to fee-for-service in approximately less than 75 days on 1/1/22. It is also not feasible or justifiable to adjust Medicaid rates due to a lack of a measurable retirement cost increase in 46% of system-wide personnel. The simplest way forward to meet DDSN’s legislative obligation is to pay state funds as follows:

1. For providers with residential and day services, pay the retirement cost in a lump sum for six months (7/1/21 – 12/31/21) totaling \$1,200,500. Then, when the new IDR rates increase on 1/1/22, these retirement costs are included in the new rates to providers as set forth in Milliman’s rate assumptions.
2. For Early Intervention providers, increase the service rate by \$0.18/unit to fund the \$100,197 retirement cost increase. DDSN is able to raise this rate easily because Early Intervention is DDSN’s sole, remaining “split-rate.” DDSN can raise its Early Intervention rate unilaterally to DDSN providers which does not impact SCDHHS’s rate of \$25.54 to DDSN.
3. For Case Management and Community ICF providers, pay the employer retirement cost in a lump sum for one year at \$154,033 and \$256,021, respectively, which total \$410,054. This is needed because neither service categories’ rates will be impacted by the IDR Waiver Renewal on 1/1/22. Given DDSN’s EBO funding is in recurring dollars, DDSN is obligated to continue to pay this annual lump sum of \$410,054 until these service rates are increased in case management and Community ICFs to incorporate this employee related cost.

It should be noted DDSN has pending Medicaid rate increases at SCDHHS to fund the 2.5% COLA (see Attachment B). DDSN will inquire as to the appropriateness of adding marginal additional rate increases to Case Management and Community ICF for retirement and health insurance, but it must be done transparently (i.e., 44% of providers do not have these specific costs from State retirement & health insurance). These two rate issues need to be kept separate to avoid any impact on DDSN receiving the Medicaid rate increases for the 2.5% which are absolutely expected to obtain the Medicaid match to properly fund this General Assembly budget expectation.

One more convoluting factor in this analysis is the Executive Budget Office (EBO) annually assists in offsetting employer healthcare cost increases in state agencies’, as well as for the DDSN providers in the State healthcare system (56%). The EBO’s available funds for FY22 were abnormally low. DDSN was allocated \$91,805; \$55,679 for DDSN agency costs and \$36,126 for providers’ state healthcare costs. Given DDSN’s current reserves, I recommend proportionally allocating the entire \$91,805 to the provider network.

A summary of the above proposed plan is as follows:

TABLE 2

Healthcare Provider Network Service Category for FTE Personnel Costs	1% Employer Retirement Contribution	\$91,805 Health Insurance Allocation	Combined for Lump Sum Payment for 1/2 Year (6 Months) *	Increase DDSN Service Rate to Providers for Annualized Amount **	Combined for Lump Sum Payment for One Year & Annually Going Forward ***
Daily Residential Habilitation	\$ 1,862,250	\$ 58,726	\$ 960,488		
Day Program	\$ 522,374	\$ 16,473	\$ 269,423		
Early Intervention (not include BabyNet)	\$ 100,197	\$ 3,159		\$ 103,356	
Case Management	\$ 154,033	\$ 4,857			\$ 158,890
ICF Community	\$ 256,021	\$ 8,074			\$ 264,095
Respite	\$ 2,514	\$ 79	\$ 1,297		
SLPI	\$ 13,861	\$ 437	\$ 7,149		
Total	\$ 2,911,250	\$ 91,805	\$ 1,238,357	\$ 103,356	\$ 422,985
* Employer retirement contribution + health insurance allocation divided by 2.					
** \$0.19; \$0.18 for employer contribution & \$0.01 for health insurance allocation.					
***Going forward ends upon new rate increase incorporating these employee related costs.					

Given the complexity of this hopefully last capitated band induced challenge, 11 Executive Directors and Finance Directors were asked to provide input on this analysis to meet DDSN’s legislative mandate and offer suggestions to simplify. Five responded with their verbatim, non-attributable responses contained in Attachment A.

Recommendations:

1. The DSN Commission extend the 1% employer retirement cost increase to the 46% of providers not included in the state retirement system.
2. The DSN Commission allocate the entire EBO \$91,805 to our healthcare provider network for FY22.
3. The DSN Commission allocate the 1% employer retirement cost and healthcare increases to the provider community as set forth in Table 2 above.

Attachment A

ATTACHMENT A

Eleven provider Board Executive Directors and Finance Directors were asked to provide input on a DRAFT Memo titled, *“Implement FY22 Legislative Budget’s 1% Increase for Employers’ State Retirement Costs.”* Five responded. These five responses are provided below verbatim without attribution:

Response #1:

Pat:

Thank you for including me in on this conversation and I must say, the amount of work that has already gone into this analysis is exceptional. Just a couple of thoughts moving forward.

1. My one concern is that we are predicting that the 1% is already included in the Milliman analysis as well as the rates recommended in the ID/RD Waiver renewal. Not having seen the Milliman report and verifying this to be the case, this is a concern that I have going forward that it covers the increase and that it would cover this increase for the next several years as this 1% is to be adjusted upward every year until it reaches a 19% threshold. I do concur with the suggestions in the manner of allocation for the different service areas as they are all different but would be remiss if I did not worry about the subsequent years ahead.
2. On a separate question, this decision is based on the ID/RD Waiver renewal, however we have 2 other waivers that have yet to go through this process. How will those rates be adjusted to address this same issue? Will we be paid different rates for day services under the HASCI and CSW Waiver until which time they are up for renewal. A portion of the staff allocated to the programs are paid from these other sources as well and I am just trying to wrap my head around how the funding is going to work for those other waiver programs. Is this 1% only attached to the ID/RD rates?

Sorry for the rambling, but just trying to understand the bigger picture. Again, thank you for all the work you have done on this issue and trying to assure the provider network stays solvent. I know that Joe is going to respond separately and has other thoughts as well.

Response #2:

Pat,

Thank you for including us in this discussion. I appreciate your hard work. Are you including nursing, administration, maintenance, and any other support personnel into any of the 7 personnel categories in Table 1? 100% of our FTEs participate in state retirement and I’m not sure if all are considered in this calculation.

Thank you.

Response #3:

Pat,

It appears that you’ve really done some due diligence and put much thought into this already. Thank you for looking out for the Provider network and making suggestions to the Commission to try and help us as much as possible.

As others have expressed, my main concern is that we continue to receive increased funding annually for all of these things moving forward. It’s concerning that we still don’t know what these new rates look like and we continue to hear that “all” of these things will be in the new rate. Was the 1% retirement truly calculated into the Jan 2022 rate, or are we still basing the rate on the preliminary analysis done last year? I think we are all a little scared that this is going to turn out like CM, where we get a rate that was calculated based on past years’ expenses, and then stuck with an inappropriate rate for many years moving forward. Ideally, I would like to see this 1% added on top of the DHHS rate for Res & Day that is currently being reviewed.

I am also going to speak on behalf of the 46% of Providers who are not in the SCRS. We tried for many years to get into the State Health and Retirement systems. We were denied every time we applied because even though we were grandfathered in as the Berkeley County

Disabilities Board, we do not technically qualify as a state entity. Due to this, our Agency liability, workers comp, and health insurances, etc., are at much larger premiums, and/or extremely watered down through independent plans than those in the robust state system. Independent insurance plans cost a fortune and we have never been able to compete with the benefits offered via state health insurance. Furthermore, although we aren't allowed to participate in the SCRS, my Board feels that we must try to match what other Boards/Agencies in the Tri-County (our local workforce area) are offering to be competitive to recruit and retain staff. However, we have always put the full amount of the funded state retirement percentage into our employee's 401k accounts through Profit Sharing each year. So, thank you for including those of us who aren't technically in the SCRS so we can at least continue to offer this same benefit to our employees.

Any idea when Community ICF's will be re-evaluated or will they continue to be funded like the band systems with these small percentage increases for health and retirement each year?

Thanks for all you do!

Response #4:

Pat,

I am just reviewing this.

I believe you are seeking input before the Commission Finance meeting today, therefore I have reviewed this once and will reply. Typically, I would like to take more time to review and contemplate.

On surface seems to make sense to me and slants toward Provider friendly with the recommendations you are making.

Appreciate being included in this review opportunity. I will continue to roll this around and I will share any follow up thoughts.

With thanks,

Response #5:

Wow! Things are going to get even more complicated as we move forward with a FFS, aren't they? Pat, I read your proposal twice now and think you have come up with the best solution for now. I have not spoken with anyone of course but I am sure I will hear from Jason and Susan tomorrow. Thanks so much for including them along with the others. Working together these days is so much better!!!!

Attachment B

DRAFT

Attachment B**Memorandum**

To: Director Robert Kerr
CFO Thomas Clark Phillip
Program Manager Margaret Alewine

From: CFO Pat Maley

Re: Implementing DDSN FY22 Legislative Appropriations through Request for SCDHHS Rate Increases

Date: August 5, 2021

The purpose of this memo is to alert SCDHHS of DDSN's intent to ask for rate increases in early September 2021 to implement its FY22 legislative appropriations for the following:

- 1) \$10 million increase in waiver daily residential habilitation (\$2,900,000 state fund appropriation);
- 2) \$7,173,733 increase in waiver respite (\$2,090,000 state fund appropriation); and
- 3) 2.5% cost of living (COLA) increase and an employer 1% increase in retirement contribution to DDSN's healthcare network.

As you can see, Medicaid matching funds are required for DDSN to implement its legislative appropriations. DDSN will provide its recommended rate increases along with supporting documentation to SCDHHS in early September 2021. DDSN must first wait for the Executive Budget Office's (EBO) analysis to identify those individuals in DDSN's healthcare provider network in the State retirement system, which will then be used to calculate funding to be used for service rate changes.

Once the EBO data is provided to DDSN, implementing the 2.5% COLA, the 1% retirement, \$10 million residential, and \$7.17 million respite increases can be calculated into rate changes for the following services: 1) IDR Waiver daily residential habilitation; 2) HASCI Waiver daily residential; 3) Day Services (5); 4) Individual Employment; 5) Case Management; 6) Community ICF/DD; 7) Early Intervention; and 8) ICF/DD Regional Centers. The legislative appropriation requires the 2.5% COLA funding be applied "on the first pay date that occurs on or after July first of the current fiscal year." As a result, DDSN will request rate increases to be retroactive to July 1, 2021.

We will need to discuss implementing the Early Intervention COLA inasmuch as these healthcare workers also provide BabyNet services. Coordinating this when implementing a similar 2% COLA in FY20 was complicated.

DDSN recognizes and appreciates the additional administrative effort by SCDHHS required to assist DDSN implementing its FY22 legislative appropriations. After DDSN simplifies its payment system in the near-term with all fee-for-service rates, it is hopeful future legislative appropriations can be implemented in a more streamlined manner. DDSN also recognizes this

request comes at a time when SCDHHS is putting forth great effort to adjust many of the same rates for the IDR Waiver Renewal effective in less than five months. Nevertheless, DDSN has no other option but to still pursue the aforementioned rate increases retroactive to July 1, 2021, to carry out the will of the General Assembly.

REQUEST: Please identify a point of contact for CFO Pat Maley (cell# 803/360-6014) to work directly with on this rate issue.

Thanks again for all SCDHHS is doing for DDSN, particularly for the IDR Waiver Renewal.

From: Maley, Pat <pmaley@ddsn.sc.gov>
Sent: Tuesday, August 31, 2021 4:10 PM
To: Jeff Saxon <Saxon@scdhhs.gov>
Cc: Margaret Alewine <Margaret.Alewine@scdhhs.gov>; Rumbaugh, Nancy <NRumbaugh@ddsn.sc.gov>; Wilson, Debra <debra.wilson@ddsn.sc.gov>
Subject: 1) Requested Analysis of Impact of New \$16.22 Respite Rate & 2) Proposed Rate Increases for 2.5% COLA for Provider Network

Jeff,

Attached in an Excel with the following 4 tabs:

1. 2.5% COLA to Healthcare Network
2. \$10 million residential rate increase
3. Proposed Respite rate increase for self-directed & business
4. Analysis of the new \$16.22 Respite rate

Thank you for the new Respite rate increase; it is much appreciated. DDSN met with the Executive Budget Office yesterday to iron out details on the funding of the 2.5% COLA. We are ready to move forward with proposing rate increases to implement DDSN's FY22 appropriations.

Tab #4 sets out the calculation of the new self-directed caregiver rate of \$13.72/hour for the new \$16.22/hour respite rate. This is just deductive reasoning after backing out the \$0.40/hour for fiscal agent costs and \$2.10/hour self-employment tax cost (15.3%). As we all know, DDSN is out of the rate cutting business, so the entire residual goes to the self-directed caregiver. DDSN has not established a minimum caregiver salary for businesses at the current time.

Tab #4 also sets out DDSN's estimated FY22 respite costs. FY22 respite rate appropriation with Medicaid match totaled \$7,173,733. Using the \$16.22/hour new Respite rate, the FY22 estimated costs are expected to increase to \$9,404,943. This additional cost of \$2,231,210 will need an additional \$670,000 state match from DDSN, which DDSN can easily absorb given its FY21 carryover of \$54 million. DDSN estimated FY22 utilization increasing by 7% based on the prior four years' upward trend of incremental utilization increases, which does not count the likely utilization increase from the rate increasing to \$16.22 (27.8% increase). However, with the implementation of EVV on 1/1/22, this will likely have a dampening effect on utilization due to its cost control capabilities. As a result, 7% increase is a fair estimated FY22 utilization increase estimate.

Tab #1 sets out DDSN's six rate increase requests for the 2.5% rate increase along with the \$10 million residential rate increase appropriation. Hopefully, the spreadsheet is straight forward; call my cell 24/7 with any questions. There are two small wrinkles. First, the \$10 million residential rate increase calculated in Tab #2 is added on Tab #1 to the residential habilitation

daily rate after the 2.5 % COLA increase. This increased both the IDR & HASCI daily habilitation rates. Second, DDSN is not asking for an EI rate increase because we share this rate with SCDHHS for BabyNet; DDSN will absorb the \$250,000 costs unless SCDHHS deems it appropriate to raise the EI/BabyNet shared rate.

Summary of these six rate increases are as follows:

\$7,278,132 rate impact							
Cost Category	Total Healthcare Provider Network FTE Cost	2.5% increase allocation	FY22 increase rate % needed	Current Rate	Proposed Rate with 2.5% COLA	Increase from Residential Appropriation (Tab 2)	Total Residential Rate Increase
Daily Residential Hab	\$186,225,011	\$4,655,625	1.84%	\$196.99	\$200.61	\$7.79	\$208.40
			1.80%	\$230.50	\$234.65	\$8.89	\$243.54
Day	\$52,237,444	\$1,305,936	1.83%	\$31.29	\$31.86		
Early Intervention (not include BabyNet)	\$10,019,729	\$250,493	1.90%	\$23.74 (DDSN internal rate)	\$24.19 (see Note below)		
Case Management	\$15,403,369	\$385,084	2.37%	\$25.42 with Travel	\$26.02		
			2.39%	\$15.63 w/o Travel	\$16.00		
ICF Community	\$25,602,137	\$640,053	1.40%	\$295.17	\$299.30		
Respite	\$251,464	\$6,287	N/A; Respite Rate increased from \$12.69 to \$16.22 on 8/31/21, which is a 27.8% increase				
SLPI	\$1,386,130	\$34,653	Immaterial-- DDSN will put base in bands and pay private providers for one year or until rates change on 1/1/22				
Total	\$291,125,284	\$7,278,132					

NOTE: DDSN shares the EI Medicaid procedure code with SCDHHS's BabyNet, therefore it would be disruptive to ask for a rate increase. Fortunately, DDSN still uses a split rate with EI (\$25.54 SCDHHS rate; DDSN rate to providers \$23.74), so DDSN will handle this rate internally and absorb the \$250,493 cost unless SCDHHS deems it appropriate to increase the joint rate.

Thanks-Pat