DEPARTMENT OF HEALTH & HUMAN SERVICES Centers for Medicare & Medicaid Services Atlanta Regional Office 61 Forsyth Street, Suite 4T20 Atlanta, Georgia 30303



DIVISION OF MEDICAID & CHILDREN'S HEALTH OPERATIONS

RECEIVED

JUN 08 2015

Department of Health & Human Services OFFICE OF THE DIRECTOR

June 3, 2015

Mr. Christian L. Soura Director SC Department of Health and Human Services Post Office Box 8206 Columbia, South Carolina 29202-8206

Attention: Sheila Chavis

Re: South Carolina State Plan Amendment 15-002

Dear Mr. Soura:

We have reviewed the proposed South Carolina state plan amendment, SC 15-002, which was submitted to the Centers for Medicare & Medicaid Services (CMS) on May 5, 2015. This state plan amends the nondiscrimination pages of the State Plan by updating outdated language, which outlines how and to whom nondiscrimination information and policies will be disseminated and how complaints and noncompliance will be handled.

Based on the information provided, the Medicaid State Plan Amendment SC 15-002 was approved on June 3, 2015. The effective date of this amendment is July 1, 2015. We are enclosing the approved HCFA-179 and a copy of the new state plan pages.

If you have any additional questions or need further assistance, please contact Maria Drake at (404) 562-3697 or Maria Drake@cms.hhs.gov.

Sincerely,

Yackie Glaze

Associate Regional Administrator

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Division of Medicaid & Children's Health Operations

Enclosures

DEPARTMENT OF HEALTH AND HUMAN SERVICES HEALTH CARE FINANCING ADMINISTRATION		FORM APPROVED OMB NO. 0938-0193		
TRANSMITTAL AND NOTICE OF APPROVAL OF STATE PLAN MATERIAL	1. TRANSMITTAL NUMBER: 15-002	2. STATE South Carolina		
FOR: HEALTH CARE FINANCING ADMINISTRATION	3. PROGRAM IDENTIFICATION: TITLE XIX OF THE SOCIAL SECURITY ACT (MEDICAID)			
TO: REGIONAL ADMINISTRATOR HEALTH CARE FINANCING ADMINISTRATION DEPARTMENT OF HEALTH AND HUMAN SERVICES 5. TYPE OF PLAN MATERIAL (Check One):	4. PROPOSED EFFECTIVE DATE July 1, 2015			
	CONSIDERED AS NEW PLAN			
COMPLETE BLOCKS 6 THRU 10 IF THIS IS AN AME	NDMENT (Separate Transmittal for each	amendment)		
6. FEDERAL STATUTE/REGULATION CITATION: 45 CFR Part 80, 45 CFR Part 84, 45 CFR Part 90, 45 CFR Part 91, 28 CFR Part 35 and 28 CFR Part 36	7. FEDERAL BUDGET IMPACT: a. FFY 2015 \$0 b. FFY 2016 \$0			
8. PAGE NUMBER OF THE PLAN SECTION OR ATTACHMENT:	9. PAGE NUMBER OF THE SUPERS OR ATTACHMENT (If Applicable):			
Attachment 7.2-A Basic Index Page 87	Attachment 7.2-A Basic Index page 87			
10. SUBJECT OF AMENDMENT: This SPA amends the nondiscrimination outlining how and to whom nondiscrimination information and policie noncompliance will be handled. 11. GOVERNOR'S REVIEW (Check One): GOVERNOR'S OFFICE REPORTED NO COMMENT	s will be disseminated, how complaints	will be handled, and how CIFIED:		
☐ COMMENTS OF GOVERNOR'S OFFICE ENCLOSED ☐ NO REPLY RECEIVED WITHIN 45 DAYS OF SUBMITTAL	to review and appro	nated by the Governor ve all State Plans		
12. SIGNATURE OF STATE AGENCY OFFICIAL:	16. RETURN TO:			
13. TYPED NAME: Christian L. Soura 14. TITLE: Director 15. DATE SUBMITTED: May 5, 2015	South Carolina Department of Health and Human Services Post Office Box 8206 Columbia, SC 29202-8206			
FOR REGIONAL OF	FICK HEE ONLY			
17. DATE RECEIVED: 05/05/15	18. DATE APPROVED: 06/03/15	▼ 1		
PLAN APPROVED - ONE COPY ATTACHED				
19. EFFECTIVE DATE OF APPROVED MATERIAL: 07/01/15	20 SIGNATURE OF REGIONAL OFF	ICIAL:		
21. TYPED NAME: Jackie Glaze	22/ITTLE: Associate Regiona Admini Division of Medicaid & Children Health	strator n Opns		
23. REMARKS:		11 - Carlo C		

Revision:

HCFA-PM-91-4

(BPD)

OMB. No. 0938-

AUGUST 1991

State/Territory:

South Carolina

Citation

7.2 Nondiscrimination

45 CFR Parts 80 and 84 In accordance with Title VI of the Civil Rights Act of 1964 (42 U.S.C. 2000d et. seq.), Title V Section 504 of the Rehabilitation Act of 1973 (29 U.S.C. 70b), Title II Section 202 of the Americans with Disabilities Act of 1990, the Age Discrimination Act of 1975 and the regulations at Title 45 Code of Federal Regulations Parts 80, 84, and 91, the South Carolina Department of Health and Human Services (SCDHHS) ensures that no individual shall be subject to discrimination under this plan on the grounds of race, color, national origin, age or disability.

With guidance from the ADA and Civil Rights Official, SCDHHS has implemented administrative methods to ensure that each program or activity for which it receives Federal financial assistance will be operated in accordance with the regulations delineated above. These methods are described in ATTACHMENT 7.2-A.

TN No. SC 15-002 Supersedes TN No. MA 92-07

Approval Date 06-03-15

Effective Date 07/01/15

HFCA ID: 7982E

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT Attachment 7.2-A

State	South	Carolina

NONDISCRIMINATION

South Carolina Department of Health and Human Services' policies and procedures for compliance with the Civil Rights Act of 1964, Title V Section 504 of the Rehabilitation Act of 1973 (29 U.S.C 70b), Title II Section 202 of the Americans with Disabilities Act of 1990, the Age Discrimination Act of 1975 and the regulations at Title 45 Code of Federal Regulations Parts 80, 84 and 91 are on file in the Regional Office.

> SC 15-002 EFFECTIVE DATE: 07/01/15 RO APPROVAL: 06/03/15 SUPERSEDES: 1973

SOUTH CAROLINA DEPARTMENT OF HEALTH AND HUMAN SERVICES
POST OFFICE BOX 8206
COLUMBIA, SOUTH CAROLINA 29202

METHODS OF ADMINISTRATION REGARDING COMPLIANCE WITH TITLE VI OF THE CIVIL RIGHTS ACT OF 1964 FOR THE STATE OF SOUTH CAROLINA

I. Assignment of Responsibility

The ADA and Civil Rights Official with the South Carolina Department of Health and Human Services' (SCDHHS) Civil Rights Division is the person assigned the responsibility of determining compliance with

Title VI of the Civil Rights Act of 1964 (42 U.S.C. 2000d et. seq.),

Title V Section 504 of the Rehabilitation Act of 1973 (29 U.S.C. 70b),

Title II Section 202 of the Americans with Disabilities Act of 1990, the

Age Discrimination Act of 1975 and the regulations at Title 45 Code of

Federal Regulations Parts 80, 84, and 91. Additionally, appropriate

SCDHHS staff will receive training on SCDHHS' Civil Rights policies.

Forms have been devised to report any discriminatory practices or

compliance problems noted.

II. Dissemination of Information

1. All beneficiaries/applicants requesting assistance or services from

SCDHHS are provided with a brochure describing their rights and

responsibilities under Title VI.

2. Training materials and policy information are available to educate

SCDHHS staff about their responsibility regarding protected classes

and to disseminate information to beneficiaries/applicants.

3. Information is available on SCDHHS' website, to both the general

public and applicants/beneficiaries, about the provisions of Title VI

of the Civil Rights

SC 15-002

EFFECTIVE DATE: 07/01/15

RO APPROVAL: 06/03/15

SUPERSEDES: 1973

Act of 1964 (42 U.S.C. 2000d et. seq.), Title V Section 504 of the Rehabilitation Act of 1973 (29 U.S.C. 70b), Title II Section 202 of the Americans with Disabilities Act of 1990, the Age Discrimination Act of 1975 and the regulations at Title 45 Code of Federal Regulations Parts 80, 84, and 91.

- 4. There is a section on the SCDHHS application which advises the applicant/beneficiary of his or her rights under these regulations.
- 5. All SCDHHS providers sign an agreement assuring compliance with these regulations.

III. Maintaining and Assuring Compliance

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The Civil Rights Division has developed a form for use in reviewing county offices, nursing homes, hospitals, and physicians' offices. The Civil Rights Division has developed a system whereby providers may be reviewed periodically.

All compliance information and reports will be reviewed as received. If additional information is needed, the ADA and Civil Rights Official will initiate appropriate requests. If the information received indicates non-compliance, corrective action will be initiated.

SC 15-002 EFFECTIVE DATE: 07/01/15 RO APPROVAL: 06/03/15

SUPERSEDES: 1973

IV. Handling Complaints

Complainants must file written complaints within 180 days after any

alleged act of discrimination based on race, color, national origin, age

or disability. Complaints may be filed with the SCDHHS Director, the

SCDHHS Civil Rights Division or designee or the United States Department

of Health and Human Services' Regional Office for Civil Rights in

Atlanta, Georgia. Any registered complaint will require an

investigation by a representative from the Civil Rights Division.

In accordance with SCDHHS policy, the initial complaint investigation

will be conducted within fourteen days of its receipt. Whenever

possible, complaints will be resolved within 30 days after the initial

complaint investigation. If complainants provide complete contact

information, they will receive a written response to their complaint

and/or a report of the completed investigation.

If a complaint is alleged or a breach is found and a provider is non-

compliant with resolving identified issues, such action is grounds for

termination. Providers will be given the opportunity to cure breaches,

except in certain circumstances of non-compliance. If they do not cure,

SCDHHS will terminate their services.

Electronic records of all compliance reports, compliance data and

complaints and subsequent investigations shall be maintained by the

Civil Rights Division.

SC 15-002

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