March 17, 2021

SCDHHS – Office of the Director
1801 Main St.
Columbia, S.C. 29201

Via Email

RE: Follow-up from the Subcommittee meeting with the agency on March 8, 2021

Dear Director Phillip:

The Healthcare and Regulatory Subcommittee appreciates the Department of Health and Human Services continued partnership in the oversight process. The agency's March 8, 2021, Medicaid Eligibility presentation provided great insight.

As a follow up to the meeting, the Subcommittee requests the agency provide written responses to questions that were either unanswered during the agency's presentation, or that will provide additional clarification regarding agency processes. Please note the Subcommittee cannot accept any confidential information that cannot be placed online and that all correspondence received from agencies who have been or are currently under study is sworn testimony. Listed below and on the next page, please find questions of interest to the Subcommittee.

Medicaid State Plan

1. Please elaborate on what flexibility South Carolina has from the federal Centers for Medicaid and Medicare Services (CMS) with developing the state plan.

Medicaid Data and Demographics

2. During the meeting, agency leadership mentioned that the Department of Health and Human Services (DHHS) is a source of population data.
   - Who is permitted to access this data?
   - What type of data can be shared?
3. Does South Carolina's Medicaid population look similar to other states in the southeast? Please provide data to support your response.
4. Please provide the total number of residents per county and the total number of Medicaid beneficiaries by county.
5. Testimony was received indicating the South Carolina Medicaid program has approximately 1.1 million full benefit beneficiaries (20% of population).
   - What percentage of South Carolinians will likely qualify for Medicaid benefits at some point in their life?

Organizational Structure and Processes

6. Agency leadership mentioned the organizational structure of Eligibility, Enrollment, and Member Services (EEMS) could be improved. What initiatives will the agency implement to improve the organizational structure of EEMS?
7. Please provide a staff allocation plan for the division of EEMS.
8. Has online acceptance of applications, which began in 2014, improve the efficiency and timeliness of processing applications?
9. Please create an appeals process flow chart explaining what occurs at each step.

Employee Engagement

10. Please provide the results and findings from the agency's FY2018-19 employee satisfaction survey.
    - Does the agency have a strategy for improving employee satisfaction?
    - Has the agency ever surveyed employees to determine if they are confident in the reporting process for work place concerns (e.g., harassment, bullying, discrimination, interpersonal conflict, gossip, communication problems, etc.)?

Member Services

11. Does the agency assist eligible enrollees with the selection of optional benefits that may best meet their specific healthcare needs?

Eligibility Verification

12. Explain how the agency tracks the eligibility of beneficiaries.
13. How does the agency determine or validate an applicant's personal assets? Is the information received from the applicant available to be shared with other entities (e.g., judicial department)?
14. Does the agency require a beneficiary to obtain Social Security Card?
15. Does the agency assist beneficiaries in obtaining a Social Security Card?

Public Health Emergency

16. If the Public Health Emergency (PHE) , as a result of the continued consequences of the COVID-19 pandemic, continues until the end of the calendar year:
    o Approximately how many pending reviews will the agency have?
    o How long will it take to work those reviews?
17. Will the agency, once annual reviews resume, "clawback" payments to providers if it is found that certain beneficiaries no longer qualified for services?
18. Will the agency continue to provide COVID-19 testing, treatment, and vaccination for full benefit members after the Public Health Emergency (PHE) is lifted?
19. Will the agency continue to provide the COVID-19 limited benefit coverage after the Public Health Emergency (PHE) is lifted?
20. Will the agency continue to provide the telehealth services implemented during the pandemic after the Public Health Emergency (PHE) is lifted?

Information Technology

21. How will the Cúram Global Income Support (CGIS) project improve the processing of non-Modified Adjusted Gross Income (MAGI) and long term care applications?

Optional State Supplementation (OSS)

22. The legislature establishes the Community Residential Care Facility (CRCF) fee each year.
    o What is the process for amending the CRCF fee and does the agency provide an opinion regarding the fee?
    o When was the CRCF fee last amended?

Material for Inclusion in Future Meetings

23. Identify any noncompliance issues the agency has experienced with the Centers for Medicare and Medicaid Services (CMS) for past three years.
    o Explain what the agency has done to remedy or resolve these issues.
24. Please explain the agency's process for monitoring and mitigating vendor fraud (e.g., providers, contractors, etc.).

25. Please note Subcommittee members have expressed an interest in agency leadership elaborating on the following topics during future meetings:

    o Training and Development
    o Marketing and Communication
    o Employee Recruitment and Retention/Compensation
    o Medicaid Provider Network
        • Access to care across the state
        • Primary care and specialty services
    o BabyNet

- Sickle Cell Services
- Behavioral Health Services
- Medical Contracts
- Disproportionate Share
- Graduate Medical Education (GME)

The Subcommittee looks forward to working collaboratively with the Department of Health and Human Services. Thank you and your team for your service to the people of South Carolina.

Sincerely,

John Taliaferro (Jay) West, IV

cc: Healthcare and Regulatory Subcommittee