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State/Territory Name: South Carolina

State Plan Amendment (SPA) #: 11-004

This file contains the following documents in the order listed:

1) Approval Letter
2) CMS 179 Form
3) Approved SPA Pages
May 23, 2011

Mr. Anthony E. Keck, Director
South Carolina Department of Health and Human Services
P.O. Box 8206
Columbia, SC 29202-8206

Re: South Carolina State Plan Amendment 11-004

Dear Mr. Keck:

We have reviewed the proposed South Carolina State plan amendment (SPA) 11-004, which was submitted to the Atlanta Regional Office on March 31, 2011. The effective date of this SPA is January 9, 2011.

This SPA outlines the agreed-upon Tribal Consultation process between the South Carolina Department of Health and Human Services and the Catawba Indian Nation. Specifically, the State and the Tribe will consult during monthly Tribal Advisory Group meetings held on a monthly basis, and Medical Care Advisory Committee meetings held on a quarterly basis. This Tribal Consultation SPA process complies with Section 5006 of the American Recovery and Reinvestment Act of 2009 (ARRA). ARRA provides protections for Indians in Medicaid and the Children’s Health Insurance Program.

South Carolina State plan amendment 11-004 was approved on May 23, 2011. The signed CMS-179 and the approved plan pages are enclosed.

If you have any additional questions or need further assistance, please contact Crystal Francis at (404) 562-7464 or Crystal.Francis@cms.hhs.gov.

Sincerely,

/s/

Jackie Glaze
Associate Regional Administrator
Division of Medicaid & Children's Health Operations

Enclosures
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<th>TRANSMITTAL AND NOTICE OF APPROVAL OF STATE PLAN MATERIAL</th>
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| TO: REGIONAL ADMINISTRATOR  
HEALTH CARE FINANCING ADMINISTRATION  
DEPARTMENT OF HEALTH AND HUMAN SERVICES |
| 1. TRANSMITTAL NUMBER: SC 11-004  
2. STATE: South Carolina  
3. PROGRAM IDENTIFICATION: TITLE XIX OF THE SOCIAL SECURITY ACT (MEDICAID)  
4. PROPOSED EFFECTIVE DATE: January 9, 2011  
5. TYPE OF PLAN MATERIAL: (Check One):  
   - NEW STATE PLAN  
   - AMENDING TO BE CONSIDERED AS NEW PLAN  
   - AMENDMENT  
   COMPLETE BLOCKS 6 THRU 10 IF THIS IS AN AMENDMENT (Separate Transmittal for each amendment)  
6. FEDERAL STATUTE/REGULATION CITATION:  
   Section 1916, 1916A, 1902(ff), 1917(b)(3), 1932(h) and 1902(a)(73) of the Social Security Act.  
7. FEDERAL BUDGET IMPACT:  
   a. FY 10-11 $ N/C  
   b. FY 10-12 $ N/C  
8. PAGE NUMBER OF THE PLAN SECTION OR ATTACHMENT:  
   Basic Text, page 9 and 9.1  
9. PAGE NUMBER OF THE SUPERSEDED PLAN SECTION OR ATTACHMENT (if Applicable):  
   Basic Text, page 9  
10. SUBJECT OF AMENDMENT:  
   Indian health programs and Urban Indian Organizations  
11. GOVERNOR'S REVIEW (Check One):  
   - GOVERNOR'S OFFICE REPORTED NO COMMENT  
   - COMMENTS OF GOVERNOR'S OFFICE ENCLOSED  
   - NO REPLY RECEIVED WITHIN 45 DAYS OF SUBMITTAL  
   OTHER, AS SPECIFIED:  
   Mr. Keck was designated by the Governor to review and approve all State Plans  
12. SIGNATURE OF STATE AGENCY OFFICIAL:  
   /s/  
13. TYPED NAME:  
   Anthony E. Keck  
14. TITLE: Director  
15. DATE SUBMITTED: 03-31-11  
16. RETURN TO:  
   South Carolina Department of Health and Human Services  
   P.O. Box 8206  
   Columbia, South Carolina 29202-8206  
17. DATE RECEIVED: 03-31-11  
18. DATE APPROVED: 05-23-11  
19. EFFECTIVE DATE OF APPROVED MATERIAL: 01-09-11  
20. SIGNATURE OF REGIONAL OFFICIAL:  
   /s/  
21. TYPED NAME:  
   Jackie Glaze  
22. TITLE: Associate Regional Administrator Division of Medicaid & Children Health Ops  
23. REMARKS:
There is an advisory committee to the Medicaid agency director on health and medical care services established in accordance with and meeting all the requirements of 42 CFR 431.12.

The State enrolls recipients in MCO, PIHP, PAHP, and/or PCCM programs. The State assures that it complies with 42 CFR 438.104(c) to consult with the Medical Care Advisory Committee in the review of marketing materials.

Tribal Consultation Requirements:

Section 1902(a)(73) of the Social Security Act (the Act) requires a State in which one or more Indian Health Programs or Urban Indian Organizations furnish health care services to establish a process for the State Medicaid agency to seek advice on a regular, ongoing basis from designees of Indian health programs, whether operated by the Indian Health Service (IHS), Tribes or Tribal organizations under the Indian Self-Determination and Education Assistance Act (ISDEAA), or Urban Indian Organizations under the Indian Health Care Improvement Act (IHCIA). Section 2107(e)(1) of the Act was also amended to apply these requirements to the Children’s Health Insurance Program (CHIP). Consultation is required concerning Medicaid and CHIP matters having a direct impact on Indian health programs and Urban Indian organizations.

The State seeks the advice on an ongoing basis from federally recognized tribes, Indian health programs and Urban Indian organizations on matters related to Medicaid and CHIP programs. There are tribal designees who attend quarterly Medical Care Advisory Committee meetings to gain firsthand knowledge of any policy changes, State Plan Amendments, waiver proposals, waiver extensions, waiver amendments or renewals prior to submission to CMS. All committee members receive written Advisements prior to each meeting. There is opportunity for discussion at each meeting. Minutes are recorded and distributed. Written documents of advisement and draft bulletins or notices are reviewed face-to-face. Minutes are recorded and

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distributed to all attendees for comment and review. The State seeks to continue consulting on an ongoing basis through monthly meetings with the federally-recognized tribes, Indian Health Programs and Urban Indian organizations via video conference and calls. These calls are scheduled for 12 month periods. Minutes of the monthly calls are recorded and distributed to all attendees for comment and review. Tribal attendees include representatives from the Catawba Service Unit, including HIS staff and the Chief of the Catawba Indian Nation. The State will conduct an on-site visit with the tribal designees whenever new policy or amendments are introduced that would greatly affect a tribal member’s eligibility or when tribal representatives express concerns on the conference call.

This coordination was officially established on December 9, 2010 at a joint meeting at the Catawba Service Unit. The first monthly conference call was held January 19, 2011.