

Study of	Rec or Internal Change	Rec or Internal Change Number	RFI Year	RFI #	Status of Implementation	Date of 100% Completion - Actual or Anticipated, if not yet complete (mm/dd/yyyy)	If unable to implement, explain why?	Does this refine one or more agency processes and save/repurpose employee hours? (Yes/No)	Are there anticipated net savings? (Yes/No)	Other Benefits Realized from Implementing Recommendation or Internal Change, if any (e.g., results of agency performance measures and outcomes that improved)	Other Drawbacks Realized or from Implementing Recommendation or Internal Change, if any	Additional Comments (optional)
Department of Health and Human Services	Recommendation	4	2024	2	In progress	7/1/2025	The target for completion for the move to expedited enrollment has shifted out slightly due to system impacts and changes that are necessary for implementation. The effort is being combined with other work being completed in our enrollment systems to handle dual eligible enrollment into managed care.	No	No	N/A	N/A	The agency is focused on improvements to the experience for members who are navigating Medicaid enrollment and the subsequent managed care choice enrollment time periods. The agency remains focused on future enrollment enhancements into managed care which includes requirements to move forward with choosing an MCO plan at the time of originally applying for Medicaid coverage (expedited enrollment). The agency expects this enhancement to improve overall voluntary selections.
Department of Health and Human Services	Recommendation	7	2024	2	In progress	7/1/2025	N/A	No	No	N/A	N/A	MCO plans are currently conducting provider satisfaction surveys. SCDHHS is considering requiring plan reporting of those activities to review baseline data and make recommendations for utilizing MCO-reported information to establish a uniform approach for surveying.
Department of Health and Human Services	Recommendation	10	2024	2	In progress	7/1/2024	N/A	No	No	N/A	N/A	The agency has produced an internal, interactive map of graduate medical education (GME) locations and providers by specialty to help identify state resource gaps.
Department of Health and Human Services	Recommendation	14	2024	2	Not yet started - Plans to implement	9/1/2026	N/A	No	No	N/A	N/A	SCDHHS is working to ensure that chronic disease case management in its current format meets the expectations of this recommendation and is effectively managed while it works to better define care and case management. In accordance with new federal requirements, SCDHHS will be administering a Consumer Assessment of Health Plan Survey (CAHPS) to the entire membership. To ensure SCDHHS does not cause survey fatigue, the agency plans to use this data to stratify by population and make subsequent recommendations.
Department of Health and Human Services	Recommendation	15	2024	2	Not yet started - No plans to implement	1/16/2024	Section 11-3-185 directs the Comptroller General to establish rules and regulations for uniform reimbursement, remittance and transfers of funds to the General Fund of the State. Current regulations do not allow for agencies to pay for meals at staff meetings (CG Disbursement Regulations - Section 3, General Rules).	No	No	The agency will be able to effectively engage with staff in organized settings for strategic planning.	In order to implement this recommendation, a change would need to be made to the Comptroller General's disbursement regulations.	N/A
Department of Health and Human Services	Recommendation	16	2024	2	Complete	11/21/2024	NA	No	No	Understanding the best ways to address SDoH will lead to improved health outcomes	SCDHHS recognizes that data driven decision making is an organizational imperative and instead of recreating an additional dashboard, has elected to make publicly available multiple stratification dashboards that help guide SCDHHS in improving programming and the Medicaid service array to meet SDoH needs.	Addressing social determinants of health remains a part of the agency's quality strategy. Part of this strategy is the launch of "Community Connections," which includes an online database with free and low-cost social and health care services across the state. This resource is available on SCDHHS' website and the agency promotes it to Healthy Connections Medicaid members and applicants. The agency also has a contract with the University of South Carolina's Institute for Families in Society to publish health statistics and data and analysis that includes an emphasis on social determinants of health. That resource is available at <a href="https://www.schealthviz.sc.edu/">https://www.schealthviz.sc.edu/</a> and is also linked on the agency's website.

Department of Health and Human Services	Recommendation	17	2024	2	In progress	12/1/2021	N/A	Yes	Yes	N/A	N/A	<p>Phase I of this work was implemented in December 2021. Phase II of the internal study to evaluate telecommuting at SCDHHS is in progress. The agency is currently working with the State Office of Human Resources on an anticipated completion date for Phase II. As a part of the agency's study of telecommuting the agency reviewed turnover rates over the span of several years.</p> <p>2021: 23.19% 2022: 20.65% 2023: 22.27%</p> <p>In 2024 when the agency had program areas begin participating in telecommuting, the turnover rate decreased to 17.69%. As of July 1, 2024, the agency had approximately 28% of its workforce utilizing the option to telecommute with most using a hybrid schedule where staff work two days a week remotely and managers have one day a week to work remote. Many staff within the community long-term care area, which includes nurses and social workers, telecommute five days a week. As a customer service focused agency, SCDHHS does not allow our county offices, processing centers and facilities management areas to telecommute during normal business hours. The agency's department of human resources has revised the agency's telecommuting policy and procedures as well as completed all the requirements in the State Office of Human Resources toolkit for telecommuting to include the telecommute business case form and the telecommute reporting form. Human Resources submitted all required documentation to the State Office of Human Resources.</p>
Department of Health and Human Services	Recommendation	20	2024	2	In progress	3/31/2025	N/A	Yes	Yes	The change will improve the quality of provider and recipient complaints due to user friendly intake and better initial complaint information.	N/A	The targeted completion date changed in order for IT security concerns to be addressed before going live.
Department of Health and Human Services	Recommendation	24	2024	2	In progress	7/1/2025	N/A	No	No	Data-driven decision making is imperative. Illustrating the state of children's health, maternal health, and other key focus areas, the agency is able to remain accountable to the goals set in its strategic plan.	The agency created an internal dashboard for monitoring metrics and trends related to quality within children's health and maternal health. This is a foundational step to building a public-facing data collection.	SCDHHS intends to include stratified data by managed care plan in this data so the public is able to compare across managed care organizations. The agency has extended this deadline to July 2025 to ensure all managed care plans have adequate time to validate dashboard visualizations.