



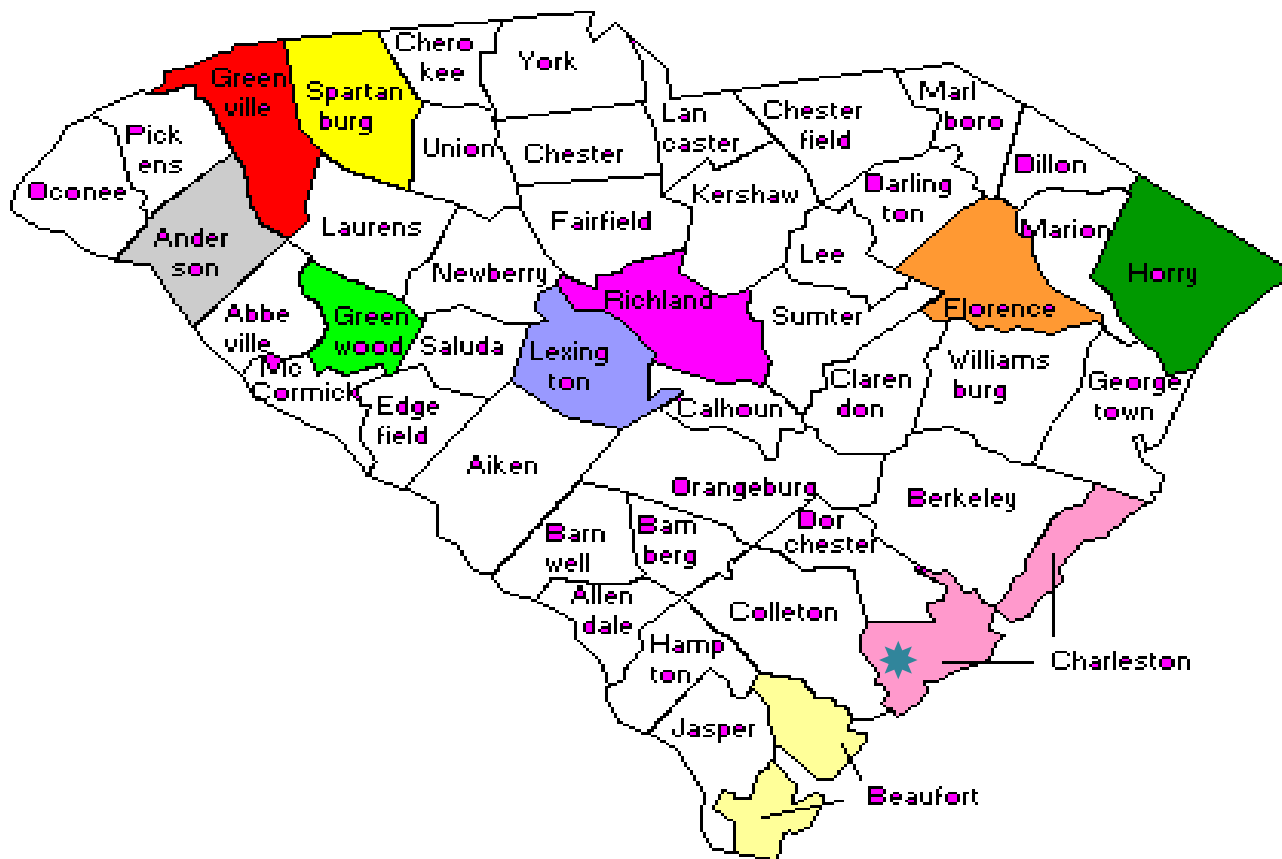
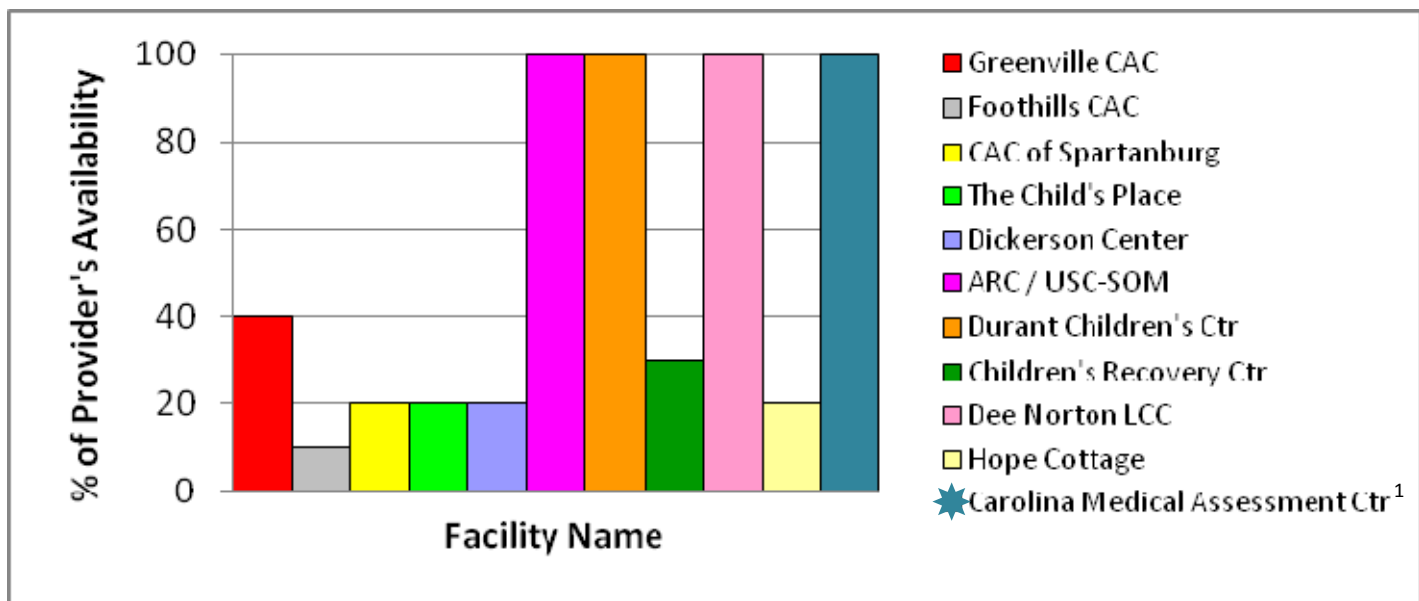
— SOUTH CAROLINA —
Children's Advocacy
Medical Response System

Before SCCAMRS and After: Accomplishments to Date

Before SCCAMRS

Framework of South Carolina medical response to child abuse and neglect in December 2003:

Healthcare Provider Availability in Children's Advocacy Centers (CAC) / Multidisciplinary Abuse Assessment (MDA) Facilities

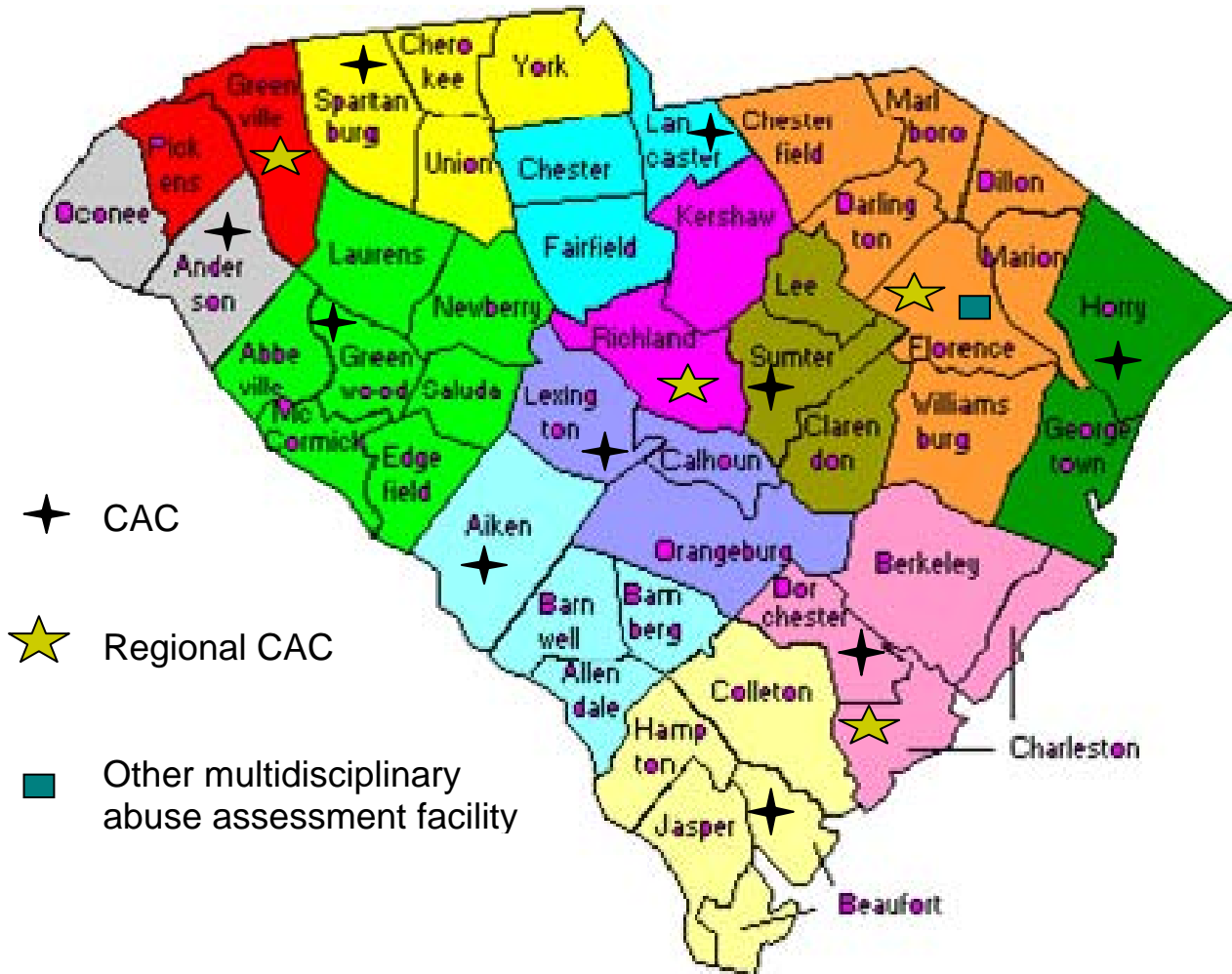
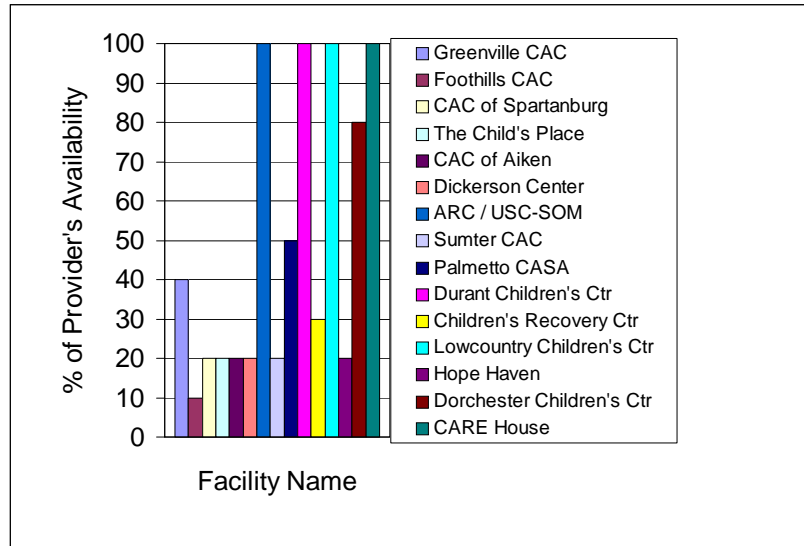


¹ Multidisciplinary abuse assessment facility

After SCCAMRS

Current framework as of April 2008:

Healthcare Provider Availability



Before and After: Statistics and Growth

	2003	2007	% Variance
Number of medical evaluations	1,938	3,603	+86%
Number of healthcare providers	11	17	+56%
Percentage of medical services needs met	23%	43%	+87%
Percentage of providers available for services at least 3 days/ week	36% (45% available ≤1 day/week)	57% (21% available ≤1 day/week)	+58% (-53%)

What else has SCCAMRS been up to?

- Development and gradual implementation of statewide guidelines for:
 - The medical management of the clinical spectrum of child abuse and neglect, including methamphetamine-exposed children.
 - Assisting child welfare and law enforcement agencies, children's and community hospitals and their healthcare providers on when and how to refer and consult with a Child Abuse Pediatrics provider once concerns for child maltreatment are raised
- Update and implementation of a standardized clinical assessment tool – SLED Child Maltreatment Protocol – with development of appropriate billing forms for the State Office of Victim Assistance (SOVA), Medicaid and other Third Party Payors.
- With the recognition of Child Abuse Pediatrics as a new subspecialty by the American Board of Pediatrics in December 2006, SCCAMRS has developed and progressively put into effect:
 - Qualification standards for primary healthcare providers willing to participate in the medical assessment of child abuse and neglect.
 - Curriculum for resident training in Child Abuse Pediatrics at primary care residency programs.

- Implementation of a quality assurance and peer review system through statewide healthcare provider roundtable meetings.
- Development and implementation of a statewide database system to track children receiving these specialized medical services, to identify areas in need of such services and to assess the quality of the services provided.
- Development and implementation of a claims-based reimbursement system for primary healthcare providers meeting the qualification criteria to practice in the field of Child Abuse Pediatrics.