

Table of Contents

State/Territory Name: SOUTH CAROLINA

State Plan Amendment (SPA) #: SC-24-0019

This file contains the following documents in the order listed:

- 1) Approval Letter
- 2) CMS 179 Form/Summary Form
- 3) Approved SPA Pages

DEPARTMENT OF HEALTH & HUMAN SERVICES

Centers for Medicare & Medicaid Services
Center for Medicaid & CHIP Services
230 South Dearborn Street
Chicago, Illinois 60604



Financial Management Group

November 6, 2024

Robert M. Kerr
Director
South Carolina Department of Health and Human Services
Post Office Box 8206
Columbia, SC 29202-8206

RE: TN 24-0019

Dear Director Kerr,

The Centers for Medicare & Medicaid Services (CMS) has reviewed the proposed South Carolina State Plan Amendment (SPA) to Attachment 4.19-B 24-0019, which was submitted to CMS on September 25, 2024. This plan amendment updates the rate for Home-Based Private Duty Nursing.

We reviewed your SPA submission for compliance with statutory requirements including in sections 1902(a)(2), 1902(a)(13), 1902(a)(30), and 1903 as it relates to the identification of an adequate source for the non-federal share of expenditures under the plan, as required by 1902(a)(2), of the Social Security Act and the applicable implementing Federal regulations.

Based upon the information provided by the state, we have approved the amendment with an effective date of July 1, 2024. We are enclosing the approved CMS-179 and a copy of the new state plan page.

If you have any additional questions or need further assistance, please contact Ysabel Gavino via email at Maria.Gavino@cms.hhs.gov.

Sincerely,

A black rectangular box redacting the signature of Todd McMillion.

Todd McMillion
Director
Division of Reimbursement Review

Enclosures

**TRANSMITTAL AND NOTICE OF APPROVAL OF
STATE PLAN MATERIAL
FOR: CENTERS FOR MEDICARE & MEDICAID SERVICES**

1. TRANSMITTAL NUMBER

2 4 — 0 0 1 9

2. STATE

S C

3. PROGRAM IDENTIFICATION: TITLE OF THE SOCIAL
SECURITY ACT



XIX



XXI

TO: CENTER DIRECTOR
CENTERS FOR MEDICAID & CHIP SERVICES
DEPARTMENT OF HEALTH AND HUMAN SERVICES

4. PROPOSED EFFECTIVE DATE

July 1, 2024

5. FEDERAL STATUTE/REGULATION CITATION

Title XIX of Social Security Act, 42 CFR Sec. 1902(a)

6. FEDERAL BUDGET IMPACT (Amounts in WHOLE dollars)

a FFY 2024 \$ 486,710

b FFY 2025 \$ 1,950,760

7. PAGE NUMBER OF THE PLAN SECTION OR ATTACHMENT

Attachment 4.19-B, page 2.1

8. PAGE NUMBER OF THE SUPERSEDED PLAN SECTION
OR ATTACHMENT (If Applicable)

Attachment 4.19-B, page 2.1

9. SUBJECT OF AMENDMENT

This SPA will update rates for Home Based Private Duty Nursing.

10. 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. Kerr was designated by the Governor to
review and approve all State Plans.

11. SIGNATURE OF STATE AGENCY OFFICIAL

12. TYPED NAME

Robert M. Kerr

13. TITLE

Director

14. DATE SUBMITTED

September 25, 2024

15. RETURN TO

South Carolina Department of Health and Human Services

Post Office Box 8206

Columbia, SC 29202-8206

FOR CMS USE ONLY

16. DATE RECEIVED

September 25, 2024

17. DATE APPROVED

November 6, 2024

PLAN APPROVED - ONE COPY ATTACHED

18. EFFECTIVE DATE OF APPROVED MATERIAL

July 1, 2024

19. SIGNATURE OF APPROVING OFFICIAL

20. TYPED NAME OF APPROVING OFFICIAL

Todd McMillon

21. TITLE OF APPROVING OFFICIAL

Director, Division of Reimbursement Review

22. REMARKS

Home Based Private Duty Nursing Services:

Effective July 1, 2023, Home Based Private Duty Nursing reimbursement rates will be combined into one rate for RN and LPN. Salaries, fringe benefits, limited direct, and indirect costs are considered in the development of the rates. Except as otherwise noted in the plan, the state-developed fee schedule rates are the same for both governmental and private providers of home based private duty nursing services. The agency's fee schedule rate was set as of July 1, 2024 and is effective for services provided on or after that date. The hourly rate for Home Based Private Duty nursing services is as follows:

Home Based Private Duty Nursing - \$47.00

Effective May 1, 2009, an additional classification of home-based private nursing services is reimbursable for services provided to children who are ventilator or respirator dependent, intubated or dependent on parenteral feeding or any combination of the above. This service has been developed to recognize the skill level that nurses caring for these children must have over and above normal home-based services. An hourly rate adjustment of \$3.00 is added to the home based rate for services provided to those children who are defined as High Risk/High Tech. Effective for services provided on or after July 1, 2024, the following enhanced rate is reflected below:

Enhanced Home Based Private Duty Nursing - \$50.00

Personal Care Services:

The Personal Care service reimbursement rate (currently \$25.00/hour was initially established based upon projected service costs of providers. The payment rate is calculated for Personal Care services on an hourly basis. This rate does not cover room and board services provided to Medicaid recipients. Annual cost reports are reviewed on an as needed basis to ensure the appropriateness of the payment rates in accordance with allowable cost definitions as outlined in 45 CFR Part 75 and 42 CFR Part 413. Except as otherwise noted in the plan, state-developed fee schedule rates are the same for both governmental and private providers of Personal Care services.

SC 24-0019
EFFECTIVE DATE: 07/01/24
APPROVAL DATE: November 6, 2024
SUPERSEDES: SC 23-0010