

## **Table of Contents**

**State/Territory Name: South Carolina**

**State Plan Amendment (SPA) #: SC-25-0010**

**This file contains the following documents in the order listed:**

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

**DEPARTMENT OF HEALTH & HUMAN SERVICES**

Centers for Medicare & Medicaid Services  
601 E. 12th St., Room 355  
Kansas City, Missouri 64106



Medicaid and CHIP Operations Group

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February 13, 2026

Eunice Medina  
Director  
South Carolina Department of Health & Human Services  
P.O. Box 8206  
Columbia, SC 29202-8206

Re: South Carolina State Plan Amendment (SPA) - 25-0010

Dear Director Medina:

The Centers for Medicare & Medicaid Services (CMS) reviewed your Medicaid State Plan Amendment (SPA) submitted under transmittal number (TN) 25-0010. This amendment updates the payment methodology for two Medication-Assisted Treatment (MAT) procedure codes and removes the MAT sunset date of September 30, 2025.

We conducted our review of your submittal according to statutory requirements in Title XIX of the Social Security Act and implementing regulations Section 1902(a)(13) and 42 CFR Part 8. This letter informs you that South Carolina's Medicaid SPA TN 25-0010 was approved on February 13, 2026, with an effective date of October 1, 2025.

Enclosed are copies of Form CMS-179 and approved SPA pages to be incorporated into the South Carolina State Plan.

If you have any questions, please contact Vanessa Jefferies at 410-786-6412 or via email at [Vanessa.Jefferies@cms.hhs.gov](mailto:Vanessa.Jefferies@cms.hhs.gov)

Sincerely,

A solid black rectangular box redacting the signature of Wendy E. Hill Petras.

Wendy E. Hill Petras, Acting Director  
Division of Program Operations

Enclosures

cc: Sheila Chavis  
Margaret Alewine  
Jordan Desai

<p><b>TRANSMITTAL AND NOTICE OF APPROVAL OF STATE PLAN MATERIAL</b></p> <p><b>FOR: CENTERS FOR MEDICARE &amp; MEDICAID SERVICES</b></p>	<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:70%; border-bottom: 1px solid black;"> <b>1. TRANSMITTAL NUMBER</b>                  2 5 — 0 0 1 0             </td> <td style="width:30%; border-bottom: 1px solid black;"> <b>2. STATE</b>                  S C             </td> </tr> <tr> <td colspan="2" style="border-bottom: 1px solid black;"> <b>3. PROGRAM IDENTIFICATION: TITLE OF THE SOCIAL SECURITY ACT</b>  <input checked="" type="radio"/> XIX    <input type="radio"/> XXI             </td> </tr> <tr> <td colspan="2" style="border-bottom: 1px solid black;"> <b>4. PROPOSED EFFECTIVE DATE</b>                  October 1, 2025             </td> </tr> <tr> <td style="border-bottom: 1px solid black;"> <b>5. FEDERAL STATUTE/REGULATION CITATION</b>                  Title XIX of SSA, Sect. 1902(a)(13), 42 CFR Part 8             </td> <td style="border-bottom: 1px solid black;"> <b>6. FEDERAL BUDGET IMPACT (Amounts in WHOLE dollars)</b>                  a FFY 2026                      \$ 641,003                  b FFY 2027                      \$ 641,003             </td> </tr> <tr> <td style="border-bottom: 1px solid black;"> <b>7. PAGE NUMBER OF THE PLAN SECTION OR ATTACHMENT</b>                  Attachment 3.1-A, page 12 (New Page)                  Supplement 4 to Attachment 3.1-A, <del>Intro page and pages 1-9</del> 1-10                  Attachment 4.19-B, page 3a.8                  Attachment 4.19-B, page 7             </td> <td style="border-bottom: 1px solid black;"> <b>8. PAGE NUMBER OF THE SUPERSEDED PLAN SECTION OR ATTACHMENT (If Applicable)</b>                  Please see remarks in block 22.  <del>Supplement 4 to Attachment 3.1-A, Intro page and pages 1-9</del>                  Attachment 4.19-B, page 3a.8                  Attachment 4.19-B, page 7             </td> </tr> </table>	<b>1. TRANSMITTAL NUMBER</b> 2 5 — 0 0 1 0	<b>2. STATE</b> S C	<b>3. PROGRAM IDENTIFICATION: TITLE OF THE SOCIAL SECURITY ACT</b> <input checked="" type="radio"/> XIX <input type="radio"/> XXI		<b>4. PROPOSED EFFECTIVE DATE</b> October 1, 2025		<b>5. FEDERAL STATUTE/REGULATION CITATION</b> Title XIX of SSA, Sect. 1902(a)(13), 42 CFR Part 8	<b>6. FEDERAL BUDGET IMPACT (Amounts in WHOLE dollars)</b> a FFY 2026                      \$ 641,003 b FFY 2027                      \$ 641,003	<b>7. PAGE NUMBER OF THE PLAN SECTION OR ATTACHMENT</b> Attachment 3.1-A, page 12 (New Page) Supplement 4 to Attachment 3.1-A, <del>Intro page and pages 1-9</del> 1-10 Attachment 4.19-B, page 3a.8 Attachment 4.19-B, page 7	<b>8. PAGE NUMBER OF THE SUPERSEDED PLAN SECTION OR ATTACHMENT (If Applicable)</b> Please see remarks in block 22. <del>Supplement 4 to Attachment 3.1-A, Intro page and pages 1-9</del> Attachment 4.19-B, page 3a.8 Attachment 4.19-B, page 7
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**9. SUBJECT OF AMENDMENT**

This SPA will update the payment methodology for two MAT procedure codes and remove the MAT sunset date of Sept. 30, 2025

**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:**  
 Ms. Medina was designated by the Governor to review and approve all State Plans.

<b>11. NAME OF STATE AGENCY OFFICIAL</b> <div style="background-color: black; width: 100px; height: 20px; margin-bottom: 5px;"></div>	<b>15. RETURN TO</b> South Carolina Department of Health and Human Services Post Office Box 8206 Columbia, SC 29202-8206
<b>12. TYPED NAME</b> Eunice Medina	
<b>13. TITLE</b> Director	
<b>14. DATE SUBMITTED</b> November 19, 2025	

**FOR CMS USE ONLY**

<b>16. DATE RECEIVED</b> November 21, 2025	<b>17. DATE APPROVED</b> February 13, 2026
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**PLAN APPROVED - ONE COPY ATTACHED**

<b>18. EFFECTIVE DATE OF APPROVED MATERIAL</b> October 1, 2025	<b>19. SIGNATURE OF APPROVING OFFICIAL</b> <div style="background-color: black; width: 100%; height: 20px;"></div>
<b>20. TYPED NAME OF APPROVING OFFICIAL</b> Wendy E. Hill Petras	<b>21. TITLE OF APPROVING OFFICIAL</b> Acting Director, Division of Program Operations

**22. REMARKS**

On January 23, 2026, South Carolina authorized a pen and ink change via email to:

- For box 7, add "Attachment 3.1-A, page 12 (New Page)" and change "Supplement 4 to Attachment 3.1-A, Intro page and pages 1-9" to "Supplement 4 to Attachment 3.1-A, pages 1-10"
- For box 8, remove "Supplement 4 to Attachment 3.1-A, Intro page and pages 1-9" and add "Enclosure 8 Supplement 4 to Attachment 3.1-A, page 1", "Enclosure 9 Supplement 4 to Attachment 3.1-A, pages 1-7", "Enclosure 10 Supplement to Attachment 3.1-A, page 1" and "Enclosure 11 Supplement to Attachment 3.1-A, page 1".

State Plan under Title XIX of the Social Security Act  
State/Territory: South Carolina

**Section 1905(a)(29) Medication Assisted Treatment (MAT)**

Citation: 3.1-A Amount, Duration, and Scope of Services

**[Please check the box below to indicate if this benefit is provided for the categorically needy (3.1-A) or medically needy only (3.1-B)]**

1905(a)(29) MAT as described and limited in Supplement 4 to Attachment 3.1-A.

PRA Disclosure Statement - This use of this form is mandatory and the information is being collected to assist the Centers for Medicare & Medicaid Services in implementing section §1905(a)(29) of the Social Security Act. Under the Privacy Act of 1974, any personally identifying information obtained will be kept private to the extent of the law. An agency may not conduct or sponsor, and a person is not required to respond to a collection of information unless it displays a currently valid Office of Management and Budget (OMB) control number. The OMB control number for this project is 0938-1148 (CMS-10398 #68). Public burden for all of the collection of information requirements under this control number is estimated to take about 25 hours per response. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to CMS, 7500 Security Boulevard, Attn: Paperwork Reduction Act Reports Clearance Officer, Mail Stop C4-26-05, Baltimore, Maryland 21244-1850.

TN: 25-0010  
Supersedes TN: New Page

Approval Date: 02/13/26  
Effective Date: 10/01/25

**State Plan under Title XIX of the Social Security Act  
State/Territory: South Carolina**

**Section 1905(a)(29) Medication Assisted Treatment (MAT)**

**General Assurances**

**[Select all three checkboxes below.]**

MAT is covered under the Medicaid state plan for all Medicaid beneficiaries who meet the medical necessity criteria for receipt of the service for the period beginning October 1, 2020.

The state assures coverage of Naltrexone, Buprenorphine, and Methadone and all of the forms of these drugs for MAT that are approved under section 505 of the Federal Food, Drug, and Cosmetic Act (21 U.S.C. 355) and all biological products licensed under section 351 of the Public Health Service Act (42 U.S.C. 262).

The state assures that Methadone for MAT is provided by Opioid Treatment Programs that meet the requirements in 42 C.F.R. Part 8.

**Service Package**

The state covers the following counseling services and behavioral health therapies as part of MAT: **[Please describe in the text fields as indicated below.]**

Please set forth each service and components of each service (if applicable), along with a description of each service and component service.

Each of the following services can be provided specifically to treat beneficiaries with Opioid Use Disorders:

1. Behavioral Health Screening (BHS):

The purpose of this brief screening is to provide early identification of opioid use disorders to facilitate appropriate referral for assessment and/or treatment services.

2. Diagnostic Assessment (DA):

a. *Diagnostic Assessment without Medical:* The purpose of this face-to face assessment is to determine the need for MAT to treat OUD, to establish or confirm a diagnosis (diagnoses), to assist in the development of an individualized plan of care based upon the beneficiary's strengths and deficits, or to assess progress in and need for continued treatment. This assessment includes a comprehensive bio-

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TN: 25-0010  
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Effective Date: 10/01/25

**State Plan under Title XIX of the Social Security Act  
State/Territory: South Carolina**

**Section 1905(a)(29) Medication Assisted Treatment (MAT)**

psychosocial interview and review of relevant psychological, medical, and educational records.

- b. *Diagnostic Assessment with Medical:* When a determination of the appropriateness of initiating or continuing the use of MAT for OUD is required, the diagnostic assessment must be carried out by a physician/psychiatrist or advanced practice registered nurse with prescriptive authority.
3. Service Plan Development (SPD):  
The purpose of this service is the development of an individual plan of care (IPOC) for the beneficiary. The IPOC, which may be developed by an interdisciplinary team, establishes the beneficiary's needs, goals, and objectives, and identifies appropriate treatment/services needed by the beneficiary to meet those goals. An interdisciplinary team is typically composed of the beneficiary, his/her family and/or other individuals significant to the beneficiary, treatment providers, and care coordinators. The IPOC will incorporate information gathered during screening and assessment. The IPOC will be person/family centered and the beneficiaries must be given the opportunity to determine the direction of his/her IPOC. An interdisciplinary team may be responsible for periodically reviewing progress made toward goals and modifying the IPOC as needed.
4. Individual Psychotherapy (IP):  
The purpose of this face-to-face intervention is to assist the beneficiary in improving his/her emotional and behavioral functioning. The therapist assists the individual in identifying maladaptive behaviors and cognitions, identifying more adaptive alternatives, and learning to utilize those more adaptive behaviors and cognitions.
5. Group Psychotherapy (GP):  
The purpose of this face-to-face intervention is to assist several beneficiaries, who are addressing similar issues, in improving their functioning. The group process allows members to offer each other support, share common experiences, identify strategies that have been successful for them, and to challenge each other's behaviors and cognitions. The therapist guides the group to ensure that the process is productive for all members and focuses on identified issues.
6. Family Psychotherapy (FP):

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**State Plan under Title XIX of the Social Security Act  
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**Section 1905(a)(29) Medication Assisted Treatment (MAT)**

The purpose of this face-to-face intervention is to address the beneficiary's relationship with his/her family unit. The therapist assists the family members in developing a greater understanding of the beneficiary's opioid use disorders and mental health disorders and appropriate treatment for this disorder, identifying maladaptive interaction patterns between family members and how they contribute to the beneficiary's impaired functioning, and identifying and developing competence in utilizing more adaptive patterns of interaction. Treatment is focused on changing the family dynamics, reducing and managing conflict, improving interaction and communication, and promoting the family's support to facilitate the beneficiary's progress. Services can be rendered with or without the beneficiary present, but the beneficiary's issues must be the main focus of the discussion. This service provides guidance to the family or caregiver on navigating systems that support individuals with opioid use disorders and mental health disorders.

7. Crisis Management (CM):

The purpose of this face-to-face, or telephonic, short-term service is to assist a beneficiary, who is experiencing a marked deterioration of functioning related to a specific precipitant, in restoring his/her level of functioning. The goal of this service is to maintain the beneficiary in the least restrictive, clinically appropriate level of care. The clinician must assist the beneficiary in identifying the precipitating event, in identifying personal and/or community resources that he/she can rely on to cope with this crisis, and in developing specific strategies to be used to mitigate this crisis and prevent similar incidents.

8. Peer Support Services (PSS):

The purpose of this service is to allow people with similar life experiences to share their understanding to assist beneficiaries in their recovery from opioid use disorders and mental health disorders. This service is person centered with a recovery focus and allows beneficiaries the opportunity to direct their own recovery and advocacy process. The Peer Support Specialist will utilize her/his own experience and training to assist the beneficiary in understanding how to manage her/his illness in their daily lives by helping them to identify key resources, listening and encouraging beneficiaries to cope with barriers, working towards their goals, providing insight, and sharing information on services and empowering the beneficiary to make healthy decisions. The unique relationship between the Peer Support Specialist and the beneficiary fosters understanding and trust in

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**State Plan under Title XIX of the Social Security Act  
State/Territory: South Carolina**

**Section 1905(a)(29) Medication Assisted Treatment (MAT)**

beneficiaries who otherwise would be alienated from treatment. The beneficiary's plan of care determines the focus of this service.

Please include each practitioner and provider entity that furnishes each service and component service.

1. An Opioid Treatment Program (OTP) certified by the Substance Abuse and Mental Health Services Administration (SAMHSA) Center for Substance Abuse Treatment (CSAT) and accredited by a federally approved accrediting body. Must be certified by and registered with the Drug Enforcement Agency and comply with federal regulations to dispense medications for opioid use disorder. Must also be licensed by the SC Department of Public Health as a Facility for Chemically Dependent or Addicted Persons.
2. Local County Substance Use Authorities must be licensed by the SC Department of Public Health as a Facility for Chemically Dependent or Addicted Persons. Must be accredited by an SCDHHS-approved national accreditation body.
3. Community Mental Health Centers (CMHCs) are freestanding outpatient facilities that provide clinic services as defined in 42 CFR 440.90. CMHCs, operated by the Office of Mental Health and/or the Medical University of South Carolina, have a primary function to diagnose, treat, and/or rehabilitate those with mental illness or emotional/behavioral problems, disturbances, or dysfunctions.
4. Medical University of South Carolina outpatient clinics. The Medical University of South Carolina (MUSC) provides outpatient behavioral health services through operation of a CMH clinic in accordance with 42 CFR 440.90. MUSC also provides substance use services, including MAT, in a clinic setting staffed by professionals from their Addiction Sciences Division within the Department of Psychiatry and Behavioral Sciences.
5. Rehabilitative Behavioral Health Services providers
6. Licensed Independent Practitioners

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TN: 25-0010  
Supersedes TN: 21-0003

Approval Date: 02/13/26  
Effective Date: 10/01/25

**State Plan under Title XIX of the Social Security Act  
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**Section 1905(a)(29) Medication Assisted Treatment (MAT)**

Please include a brief summary of the qualifications for each practitioner or provider entity that the state requires. Include any licensure, certification, registration, education, experience, training and supervisory arrangements that the state requires.

Staff Qualifications

Service providers must fulfill the requirements for South Carolina Licensure/certification and appropriate standards of conduct by means of evaluation, education, examination, and disciplinary action regarding the laws and standards of their profession as promulgated by the South Carolina Code of Laws and established and enforced by the South Carolina Department of Labor Licensing and Regulation. Professionals, who have received appropriate education, experience and have passed prerequisite examinations as required by the applicable state laws and licensing/certification board and additional requirements as may be further established by SCDHHS, may be qualified to provide mental health and/or substance use disorder services. The presence of licensure/certification means the established licensing board in accordance with SC Code of Laws has granted the authorization to practice in the state. Licensed professionals must maintain a current license and/or certification from the appropriate authority to practice in the State of South Carolina and must be operating within their scope of practice.

*PROFESSIONALS:*

**Psychiatrist.** Doctor of medicine or osteopathy who has completed a residency in psychiatry and is licensed by the SC Board of Medical Examiners. Services that can be provided include Behavioral Health Screening, Diagnostic Assessment, Service Plan Development, Individual Psychotherapy, Group Psychotherapy, Family Psychotherapy, and Crisis Management.

**Physician.** Doctor of medicine or osteopathy who is licensed by the SC Board of Medical Examiners. Services that can be provided include Behavioral Health Screening, Diagnostic Assessment, Service Plan Development, Individual Psychotherapy, Group Psychotherapy, Family Psychotherapy, and Crisis Management.

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**Section 1905(a)(29) Medication Assisted Treatment (MAT)**

**Physician Assistant (PA).** Completion of an educational program for physician assistants approved by the Commission on Accredited Allied Health Education Programs and licensed by the SC Board of Medical Examiners. Services that can be provided include Behavioral Health Screening, Diagnostic Assessment, Service Plan Development, Individual Psychotherapy, Group Psychotherapy, Family Psychotherapy, and Crisis Management.

**Advanced Practice Registered Nurse (APRN).** Completion of a doctoral degree, post-nursing master's certificate, or a minimum of a master's degree that includes advanced education composed of didactic and supervised clinical practice in a specific area of advanced practice registered nursing. Must be licensed by the SC Board of Nursing and maintain national certification, as recognized by the Nursing Board, in an advanced practice registered nursing specialty. Services that can be provided include Behavioral Health Screening, Diagnostic Assessment, Service Plan Development, Individual Psychotherapy, Group Psychotherapy, Family Psychotherapy, and Crisis Management.

**Psychologist.** Completion of a doctoral degree in psychology and licensed by the SC Board of Psychology Examiners. Services that can be provided include Behavioral Health Screening, Diagnostic Assessment, Service Plan Development, Individual Psychotherapy, Group Psychotherapy, Family Psychotherapy, and Crisis Management.

**Licensed Psycho-Educational Specialist.** Completion of a Doctoral degree in psychology or a 60 hour (or 90 quarter hour) Master's level program (Master's degree, Master's degree plus thirty hours, or an Educational Specialist degree); has had three graduate classes in psychopathology and psychodiagnostics, respectively; has served as a certified school psychologist for 2 years in a school and is certified by the SC Department of Education as a school psychologist level II or III. Must also have scored (600 or above) on the ETS School Psychology exam (Praxis) and be licensed by the SC Board of Examiners for Licensure of Professional Counselors, Marriage and Family Therapists and Psycho-Educational Specialists. Services that can be provided include Behavioral Health Screening, Diagnostic Assessment, Service Plan Development, Individual Psychotherapy, Group Psychotherapy, Family Psychotherapy, and Crisis Management.

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**Section 1905(a)(29) Medication Assisted Treatment (MAT)**

**Licensed Independent Social Worker-Clinical Practice (LISW-CP).** Completion of, at minimum, a Master's degree from a graduate social work program accredited by the Council on Social Work Education. Licensed by the SC Board of Social Worker Examiners at the Clinical Practice level. Services that can be provided include Behavioral Health Screening, Diagnostic Assessment, Service Plan Development, Individual Psychotherapy, Group Psychotherapy, Family Psychotherapy, and Crisis Management.

**Licensed Master Social Worker (LMSW).** Completion of, at minimum, a Master's from a graduate social work program accredited by the Council on Social Work Education and one year of experience working with the population served. Licensed by the SC Board of Social Work Examiners at the Master's level. Services that can be provided include Behavioral Health Screening, Diagnostic Assessment, Service Plan Development, Individual Psychotherapy, Group Psychotherapy, Family Psychotherapy, and Crisis Management.

**Licensed Marriage and Family Therapist (LMFT).** A minimum of 48 graduate semester hours or 72 quarter hours in marriage and family therapy along with an earned master's degree, Educational Specialist's degree, or Doctoral degree. Licensed by the SC Board of Examiners for Licensure of Professional Counselors, Marriage and Family Therapists and Psycho-Educational Specialists. Services that can be provided include Behavioral Health Screening, Diagnostic Assessment, Service Plan Development, Individual Psychotherapy, Group Psychotherapy, Family Psychotherapy, and Crisis Management.

**Licensed Professional Counselor (LPC).** Completion of a graduate program with a minimum of 48 semester hours and awarded a graduate degree, or a master's degree of lesser hours plus a post-master's degree program which provides the required hours and is accredited by the Commission on Accreditation for Marriage and Family Therapy Education or is a regionally accredited institution of higher learning. Licensed by SC Board of Examiners for Licensure of Professional Counselors, Marriage and Family Therapist and Psycho-Educational Specialists. Services that can be provided include Behavioral Health Screening, Diagnostic Assessment, Service Plan Development, Individual Psychotherapy, Group Psychotherapy, Family Psychotherapy, and Crisis Management.

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**Section 1905(a)(29) Medication Assisted Treatment (MAT)**

**Licensed Addiction Counselor (LAC).** Completion of a minimum of a master's degree in a human services field program of study and field experiences at an accredited college or university. Must be a Certified Addiction Counselor II (CACII) or Certified Clinical Supervisor (CCS) through the South Carolina Association of Alcohol and Drug Abuse Counselors, a current certification as a Masters Addiction Counselor (MAC), or have a current certification as an Alcohol and Drug Counselor (ADC), Advanced Alcohol and Drug Counselor (AADC) or Clinical Supervisor (CS) through Addiction Professionals of South Carolina. Must also be licensed as a Professional Counselor, Professional Counselor Supervisor, or Marriage and Family Therapist. Services that can be provided include -Behavioral Health Screening, Diagnostic Assessment, Service Plan Development, Individual Psychotherapy, Group Psychotherapy, Family Psychotherapy, and Crisis Management.

**Certified Substance Abuse Professional.** Completion of a Master's degree in a human services field plus 250 hours of approved training related to the core functions and certification as an addictions specialist. Certified by the SC Association of Alcoholism and Drug Abuse Counselors or Addiction Professionals of South Carolina, and/or the National Association for Addiction Professionals. Services that can be provided include Behavioral Health Screening, Diagnostic Assessment, Service Plan Development, Individual Psychotherapy, Group Psychotherapy, Family Psychotherapy, and Crisis Management.

**Clinical Chaplain.** Completion of a Master of Divinity degree from an accredited theological seminary and have two years of pastoral experience as a priest, minister, or rabbi; must complete one year of clinical pastoral education that includes supervised clinical service provision and one year of experience working with the population to be served. Documentation of training and experience must be available for review. Services that can be provided include Behavioral Health Screening, Diagnostic Assessment, Service Plan Development, Individual Psychotherapy, Group Psychotherapy, Family Psychotherapy, and Crisis Management.

**Mental Health Professional (MHP).** Master's or doctoral degree in a social sciences field from an accredited university or college and one year of experience working with the population to be

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**State Plan under Title XIX of the Social Security Act  
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**Section 1905(a)(29) Medication Assisted Treatment (MAT)**

served. Services that can be provided include Behavioral Health Screening, Diagnostic Assessment, Service Plan Development, Individual Psychotherapy, Group Psychotherapy, Family Psychotherapy, and Crisis Management.

PARAPROFESSIONAL

**Certified Peer Support Specialist.** Has obtained, at minimum, a high school diploma or GED equivalent and successfully completed a 40 hour peer support certification program. Must complete a minimum of 20 hours of continuing education annually, of which at least 12 hours must be in-person training. Certification as a Peer Support Specialist through SC SHARE or Addiction Professionals of South Carolina. Services that can be provided include Peer Support Services

**Utilization Controls**

**[Select all applicable checkboxes below.]**

- The state has drug utilization controls in place. (Check each of the following that apply)
- Generic first policy
  - Preferred drug lists
  - Clinical criteria
  - Quantity limits
- The state does not have drug utilization controls in place.

**Limitations**

**[Describe the state's limitations on amount, duration, and scope of MAT drugs, biologicals, and counseling and behavioral therapies related to MAT.]**

There are no limitations on amount, duration and scope of MAT drugs or biologicals; however, there are limitations on practitioners eligible to prescribe MAT drugs (Methadone, Buprenorphine and Naltrexone). The following criteria apply to prescribers of these drugs:

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- *Methadone* must be prescribed and administered by an Opioid Treatment Program.
- *Buprenorphine* can be prescribed and administered by certain physicians, clinical nurse specialists, certified registered nurse anesthetists, and certified nurse midwives.
- *Naltrexone* can be prescribed and administered by any provider who is licensed in the state to prescribe medications.

Beneficiaries receiving MAT are also able to receive all behavioral health services as described in the South Carolina State Plan as long as the services are medically necessary. Although services may have frequency caps, these may be removed or adapted as needed when dictated by medical necessity.

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- 1) Care coordination,
- 2) Counseling,
- 3) Medication management,
- 4) Nursing services related to medication administration,
- 5) Drug screens, and
- 6) Drug costs (opioid agonist treatment medications).

In order to determine the bundled rate, a monthly bundled rate was first developed using current SC Medicaid rates for comparable services provided in both physician and clinic settings as well as recommended monthly service frequencies for the discrete services identified. Drug costs are excluded in the calculation of the monthly bundled rate. The monthly service frequencies (i.e. units) associated with each service were then multiplied by the applicable service rate in order to determine the monthly bundled service package cost. The monthly bundled service package cost was then converted to a weekly bundled rate by dividing the monthly bundled service package cost by four. Finally, to account for the difference in the drug treatment options, the weekly drug costs associated with each drug option was added to the weekly bundled rate to determine the two weekly bundled rates for each of the following drug treatment options: Methadone Maintenance Treatment (MMT) and Buprenorphine Treatment. No room and board costs are included in the determination of the weekly bundled rates.

The OTP clinics, and not the individual practitioners, will be allowed to bill the bundled service rates. Reimbursement for any provider delivering services included in the bundled rate service package will be paid through the bundled rate. Individual providers cannot bill separately for services included in the bundled rate. As prepayment for bundled services is not permissible, providers may not bill for the weekly bundled reimbursement until at least one service has commenced for the week.

In order for the Medicaid Agency to periodically monitor the actual provision of the individual services being provided under each of the bundled service rates, each OTP provider will be required to record and supply the related service utilization data to the Medicaid Agency upon request.

Except as otherwise noted in the plan, state-developed fee schedule rates for this service are the same for both governmental and private providers. The agency's fee schedule rate was set as of January 1, 2019 and is effective for services provided on or after that date. All rates are published on the agency's website at <https://www.scdhhs.gov/providers/fee-schedules>.

Effective October 1, 2025, rates for two MAT services (G2067 MAT-Methadone, weekly bundle, and G2068 MAT-Buprenorphine, weekly bundle) will be reimbursed at 72% of the 2025 Medicare Prospective Payment System rates.

#### 10. Dental Services:

Reimbursement to providers of dental services is made on the basis of an established fee schedule not to exceed prevailing charges in the state. Reimbursement will be provided on a per procedure basis. Reimbursement for dental services shall be based on a percentage of published usual and customary South Carolina dental rates, not to exceed the 75<sup>th</sup> percentile of usual and customary reimbursement for South Carolina. Except as otherwise noted in the plan, state-developed fee schedule rates are the same for both governmental and private providers. The agency's fee schedule rate for beneficiaries under the age of twenty-one (21) years was set as of July 1, 2024 and is effective for services provided to these beneficiaries on or after that date. Rates for adult beneficiaries, ages twenty-one (21) years or older remain the same as the rates set on July 1, 2017 for Preventive, Oral Surgery and Ancillary services and the rates set on July 11, 2011 for all other dental services. All rates are published on the agency's website at <https://www.scdhhs.gov/providers/fee-schedules>.

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**29. Medication-Assisted Treatment (MAT) Program Services**

Effective October 1, 2020, the Medicaid Agency will implement the Medication-Assisted Treatment (MAT) Program. The MAT Program provides medically necessary drugs as accredited by the Substance Abuse and Mental Health Services Administration (SAMHSA) as well as behavioral health services to eligible Medicaid beneficiaries with a diagnosis of opioid use disorder (OUD). The prescribed drugs covered under this benefit include all formulations of MAT drugs and biologicals for OUD that are approved under section 505 of the Federal Food, Drug, And Cosmetic Act (21 U.S.C. 355) and all biological products licensed under section 351 of the Public Health Service Act (42 U.S.C. 262). Behavioral health services covered under the MAT program include Behavioral Health Screening, Individual, Group, and Family Psychotherapy, Crisis Management, and Peer Support Services. Provision of MAT behavioral health services noted above must be consistent with Section 1905(a) (29) of the Act.

Practitioners rendering behavioral health services in the MAT program must meet eligibility requirements as stipulated for Rehabilitative Behavioral Health Services providers as defined in the State Medicaid Plan.

Except as otherwise noted in the plan, state-developed fee schedule rates for the drugs and behavioral health services covered under the MAT Program are the same for both governmental and private providers. The description of the fee schedule payment methodologies can be found in sections 5 (Physicians), 6d (CRNA, etc.), 9 (OTP), 12a (Drugs), and 13d (Behavioral Health Services). The agency's MAT Program fee schedule rates are those in effect as of October 1, 2020, and is effective for services provided on or after that date. All rates are published on the agency's website at <https://www.scdhhs.gov/providers/fee-schedules> .

Effective for services provided on or after October 1, 2025, reimbursement methodology was updated for two MAT procedure codes: G2067 MAT-Methadone, weekly bundle, and G2068 MAT-buprenorphine, weekly bundle, to 72% of the 2025 Medicare Prospective Payment System rate. Except as otherwise noted in the plan, state-developed fee schedule rates are the same for both governmental and private providers of MAT Program Services (i.e., prescribed drugs and behavioral health services). The agency's fee schedule rate was set as of October 1, 2025, and is effective for services provided on or after that date. All rates are published on the agency's website at <https://www.scdhhs.gov/providers/fee-schedules>.

The reimbursement for prescribed drugs and biologicals that are not included in the bundle but used to treat opioid use disorder will be reimbursed using the same methodology as described for prescribed drugs located in Attachment 4.19-B pages 3c and 3d, for drugs that are dispensed or administered.