

**Medicaid Advisory Council (MAC)
 Meeting Agenda**

Henry McMaster GOVERNOR
 Eunice Medina DIRECTOR
 P.O. Box 8206 > Columbia, SC 29202
www.scdhhs.gov

Agenda

Date: Nov. 4, 2025

Time: 10 a.m.-12 p.m.

Location: Microsoft Teams

Topic	Presenter
1. Director’s Welcome	Eunice Medina, Director
2. MAC Member Updates	Shadda Winterhalter, Strategic Initiatives Specialist
3. MAC Member Disclosure of Conflict of Interest	
4. Medicaid Enrollment	Lori Risk, Bureau Chief, Eligibility, Enrollment and Member Services Policy and Contracts
5. Advisement: FFY 2026 DSH Payments and Swing Bed Hospital and Administrative Day Rates	Nika Simmons, Chief of Reimbursements
6. Advisement: Speech-Language Therapy Rates	Margaret Alewine, Chief of Policy
7. Advisement: Sunset of Expiration Date for Medication-assisted Treatment for Opioid Use Disorder	
8. Advisement: State-owned Governmental PRTF Rate	
9. Advisement: Personal Needs Allowance	
10. Advisement: HCBS Waiver Amendment	
11. Advisement: 340B Drug Program FFS Billing	
12. Advisement: Update to Revised Fee Schedules and Updates for RBHS and LIP Providers	
13. Policy Updates	
Closing Comments	
Adjournment	



**Medicaid Advisory Council
Aug. 12, 2025, Meeting Minutes**

Present

Sue Berkowitz
Steve Boucher
Anna Maria Conner
Steven Ferruffino
Amy Holbert
Melanie Matney

Not Present

Graham Adams
Robert Bank
Maggie Cash
Dr. Thompson Gailey
Chief Brian Harris
Constance Holloway
JT McLawhorn
Raymond Tiller
Vicki Young

Director's Welcome and Staffing Updates

SCDHHS Director Eunice Medina welcomed the Medicaid Advisory Council (MAC) and announced the agency recently hosted the first Beneficiary Advisory Council (BAC) meeting. She also stated the agency is working on the fiscal year (FY) 27 budget request and many of the changes and updates reviewed today are effective Oct. 1 vs. July 1 as the agency was not sure what programs would be funded in the FY26 budget.

Director Medina highlighted a few upcoming priorities including restructuring on the Graduate Medical Education program payments effective Oct. 1, the first population set moving into Medicaid managed care organizations Jan. 1, 2026, and changes to the autism spectrum disorder services.

MAC Member Updates

Strategic Initiatives Specialist Shadda Winterhalter provided an update on the first meeting of the BAC.

There were no questions or comments.

Medicaid Enrollment

Eligibility, Enrollment and Member Services Chief of Policy and Contracts Lori Risk provided an update on South Carolina Healthy Connections Medicaid's enrollment stating there were no major shifts in the eligibility categories and full-benefit enrollment is approximately 1.05 million members.

There were no questions or comments.

Advisements and Updates

Advisement: Nursing Facility Rate Update

Chief of Reimbursements Nika Simmons provided an overview of the advisement.

There were no questions or comments.

Advisement: Payment Methodology for Graduate Medical Education

Director of Pricing Noelle Wriston provided an overview of the advisement.

There were no questions or comments.

Advisement: Payment Methodology Update for Inpatient Hospital Services

Actuary Leslie Jones provided an overview of the advisement.

There were no questions or comments.

Advisement: Changes to Estate Recovery

Program Manager of Estate Recovery Denise Benson provided an overview of the advisement.

There were no questions or comments.

Advisement: Managed Care Organization Carve-in for Prime/Duals and Certain Waivers

Chief of Managed Care Scott Timmons provided an overview of the advisement.

The following question was provided.

1. Are members in hospice to be carved in?
 - a. The agency responded yes, it is looking at the hospice program to be included in the carve-in and is planned to occur in phase three. Phase one of the Medicaid managed care organizations carve-in starts Jan. 1, 2026, and is focused on full-benefit members 18 years of age or older who are enrolled in both Medicaid and Medicare or are in certain waiver programs.

Advisement: Increase to Opioid Treatment Program Rates

Chief of Policy Margaret Alewine provided an overview of the advisement.

There were no questions or comments.

Advisement and Policy Update: Revised Fee Schedules and Updates for Rehabilitative Behavioral Health Services and Licensed Independent Practitioners Provider Manuals

Margaret Alewine provided an overview of the advisement.

The following comment was provided.

1. An attendee stated it was excellent for behavioral health services.

Policy Update: Autism Spectrum Disorder Services Provider Manual

Margaret Alewine provided an overview of the policy changes.

The following comment was provided.

1. An attendee noted the change will help children get the services they need and earlier. They stated it has been so stressful for families waiting/trying to get a diagnosis and thanked the agency team for the work done on this issue.

Policy Update: 1915(c) Home and Community-based Waiver Amendments

Margaret Alewine provided an overview of the changes.

There were no questions or comments.

Policy Updates

Margaret Alewine provided an overview of policy changes to the Physician Services Provider Manual.

There were no questions or comments.

Closing

The meeting was closed by thanking attendees for their participation. The next MAC meeting will be held Nov. 4, 2025.

Thank you for participating in the
Medicaid Advisory Council.

The meeting will begin shortly.

Medicaid Advisory Council (MAC)

Nov. 4, 2025

**The meeting will begin shortly.
Microphones are muted.
All cell phones are silenced.**

**Thank you for participating in the
MAC meeting.**

Meeting Logistics

- Attendee lines will be muted for the duration of the webinar to minimize disruption.
- MAC members are welcome to comment or ask questions throughout the meeting.
- All other attendees who wish to comment or ask questions should do so during the specified public comment periods using the chat feature in Teams.

Director's Welcome

Eunice Medina, Director

MAC Member Updates

Shadda Winterhalter, Strategic Initiatives Specialist

MAC Member Updates

- Outgoing members:
 - Graham Adams
 - Robert Banks
 - Raymond Tiller
 - Anna Conner
 - Tom Gailey, M.D.
 - Melanie Matney

Member Disclosure of Conflict of Interest

MAC members who wish to speak on a topic in which they have a conflict of interest must disclose the conflict before participating in the discussion.

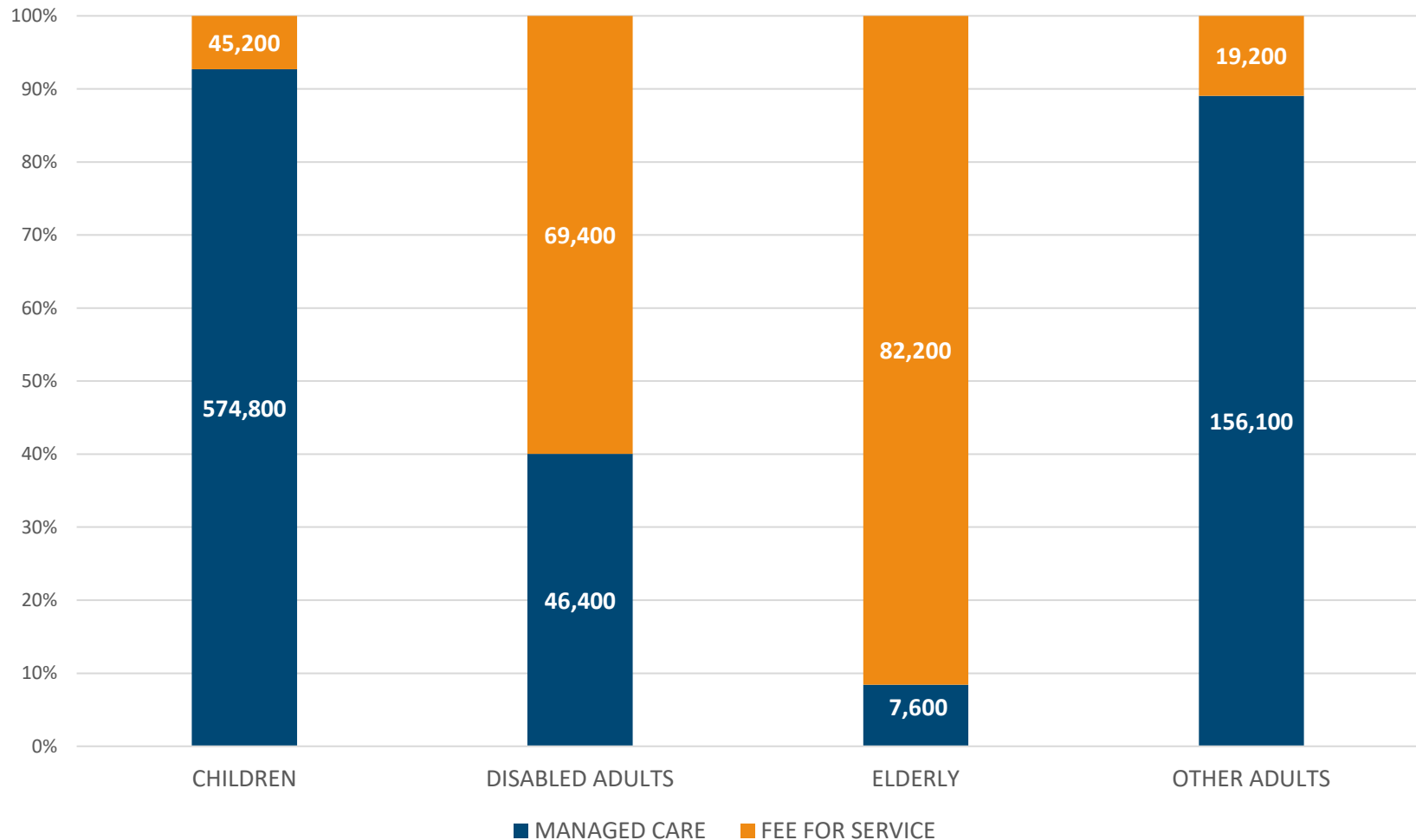
Medicaid Enrollment

Lori Risk, Bureau Chief

Eligibility, Enrollment and Member Services Policy and Contracts

Full-benefit Membership by Population

(as of Sept. 30, 2025)



Full-benefit Enrollment: Approximately 1 million members



Disability Determinations Process Improvement

University of Massachusetts (UMass)

- Additional resource to conduct disability determinations

Capitol Bridge

- Complete disability packet
- Collect medical records
- Communicate with applicants, authorized representatives and providers

Process

- OnBase workflow for UMass and Capitol Bridge
- Medical records collected while financial decision is in process
- UMass has 45 days to make disability determination once complete disability packet is received
- Updated forms, document types and training
- Use of DocuSign for Form 921, permitting release of medical records

Status

- Statewide as of April 2025
- Developing efficiencies for medical records collection process

Partners

- Agency, interagency and community



Advisement: FFY 2026 DSH Payments and Swing Bed Hospital and Administrative Day Rates

Nika Simmons, Bureau Chief of Reimbursements

Background

- Update Disproportionate Share Hospital (DSH) payments for federal fiscal year (FFY) 2026 using updated base year DSH financial and statistical data, hospital fiscal year (HFY) 2024, as well as the updated FFY 2026 DSH allotment amount.
- Update the inpatient hospital swing bed rate and administrative day rate effective Oct. 1, 2025, based on the Oct. 1, 2025, nursing facility rebasing project.

Changes For FFY 2026 DSH Payment Period

- Update the base year used to calculate the interim DSH payments for the DSH allotment period that ends Sept. 30, 2026 (FFY 2026) using HFY end 2024 data, the continued use of the Dec. 19, 2008, Final Rule (Federal Register/Vol. 73, No. 245) relating to the audits of the Medicaid DSH payment plans, and the Dec. 3, 2014, Final Rule (Federal Register/Vol. 79, No. 232), which relates to the Medicaid program DSH payments uninsured definition
- Update the inflation rate used to trend the DSH base year cost to the end of the 2024 calendar year
- Centers for Medicare and Medicaid Services (CMS) has not yet approved the state directed payment for the Health Access, Workforce and Quality program. Upon approval, the agency does not anticipate expending 100% of its FFY 2026 DSH allotment.

Inpatient Hospital Reimbursement Changes

- Update the inpatient hospital swing bed and administrative day rates based upon the Oct. 1, 2025, rebasing of nursing facility payment rates.

Budget Impact and Effective Date

Budgetary Impact:

- The South Carolina Department of Health and Human Services (SCDHHS) is unable to estimate a budgetary impact from the DSH program at this time.
- SCDHHS estimates a budget impact of \$10,000 in total dollars for swing bed/administrative day rates.
- All amounts reflected above relate to the Medicaid fee-for-service (FFS) program only.

Effective Date:

- For the South Carolina Medicaid DSH program, the FFY 2026 DSH payment period is Oct. 1, 2025, through Sept. 30, 2026.
- For the swing bed and administrative day rates, it is effective Oct. 1, 2025.

Public Comment

MAC Members and all other attendees who wish to comment, please use the chat feature now.

Advisement: Speech-Language Therapy Rates

Margaret Alewine, Chief of Policy

Background

- SCDHHS intends to update certain procedure code definitions to ensure alignment with American Medical Association Current Procedural Terminology (CPT) code set service definitions and clarify policy regarding service authorization.

Proposed Changes

- Convert the individual and group speech-language therapy procedure codes noted below, from a 15-minute unit-based procedure code to untimed encounters to comply with CPT code descriptions.
- Procedure codes impacted by this change:
 - 92507- Treatment of speech, language, voice, communication and/or auditory processing disorder
 - 92508- Treatment of speech, language, voice, communication and/or auditory processing disorder

Budget Impact and Effective Date

Budgetary Impact:

- SCDHHS does not anticipate a budgetary impact from the rate updates.

Effective Date:

- On or after Jan. 1, 2026

Public Comment

MAC members and all other attendees who wish to comment, please use the chat feature now.

Advisement: Sunset of Expiration Date for Medication-assisted Treatment for Opioid Use Disorder

Margaret Alewine, Chief of Policy

Background

- To increase access to medication-assisted treatment for opioid use disorders (MOUD), the SUPPORT for Patients and Communities Act, signed into law in October 2018, required states to provide Medicaid coverage for “certain drugs and biological products” and related behavioral health treatment.
- The mandatory MOUD benefit was initially effective for a five-year period beginning Oct. 1, 2020, and ending Sept. 30, 2025.
- Updates in the Consolidated Appropriations Act, 2024 made the mandatory MOUD benefit at section 1905(a)(29) of the Social Security Act permanent by amending this section to remove the end date of Sept. 30, 2025.

Proposed Changes

- As a result of additional guidance from CMS in 2024 reflecting this statutory change to require MOUD to be a permanent benefit, states must sunset the previous expiration date of Sept. 30, 2025, in their state plans.
- Upon final approval from CMS of the state plan amendment submitted by SCDHHS, MOUD will be reflected in the South Carolina Medicaid State Plan as a permanent benefit.

Budget Impact and Effective Date

Budgetary Impact:

- SCDHHS does not anticipate a budgetary impact.

Effective Date:

- On or after Oct. 1, 2025

Public Comment

MAC members and all other attendees who wish to comment, please use the chat feature now.

Advisement: State-owned Governmental PRTF Rate

Margaret Alewine, Chief of Policy

Proposed Changes

- SCDHHS will amend the State Plan to establish a payment methodology for state-owned governmental psychiatric residential treatment facility (PRTF) providers that contract with the South Carolina Medicaid program.
- A per diem rate will be calculated based on total costs for services incurred on or after Jan. 1, 2026.

Budget Impact and Effective Date

Budgetary Impact:

- SCDHHS anticipates a budgetary impact of \$11.6 million in total dollars.

Effective Date:

- On or after Jan. 1, 2026

Public Comment

MAC members and all other attendees who wish to comment, please use the chat feature now.

Advisement: Personal Needs Allowance

Margaret Alewine, Chief of Policy

Background

- SCDHHS will amend the State Plan to increase the personal needs allowance (PNA) amount for individuals residing in nursing and intermediate care facilities for individuals with intellectual disabilities (ICF-IID).

Proposed Changes

- Effective on or after Oct. 1, 2025, SCDHHS will amend the State Plan to increase the PNA deduction amount from \$30 to \$60 for individuals residing in skilled nursing facilities or ICF/IID.
- This increase does not impact individuals residing in an ICF/IID who are participating in a work therapy program.

Budget Impact and Effective Date

Budgetary Impact:

- SCDHHS anticipates a budget impact of approximately \$3.7 million in total dollars.

Effective Date:

- On or after Oct. 1, 2025.

Public Comment

MAC members and all other attendees who wish to comment, please use the chat feature now.

Advisement: HCBS Waiver Amendment

Margaret Alewine, Chief of Policy

Background

- SCDHHS will amend the Community Choices, HIV/AIDS and Mechanical Ventilator Dependent waivers to update the adult day health care (ADHC) service.

Proposed Changes

- Effective on or after March 1, 2026, SCDHHS will amend the home and community-based services (HCBS) waiver provider qualifications for ADHC services.
- The service definition will be updated to clarify requirements currently listed in both the state regulation and HCBS waiver application and policies.
- These updates will ensure that there is no duplication of requirements for compliance monitoring and will reflect that the waiver authority relies on licensure and monitoring of compliance through the South Carolina Department of Public Health (DPH).
- Staffing requirements will be updated to reflect that they meet minimum staffing requirements consistent DPH licensing requirements.

Budget Impact and Effective Date

Budgetary Impact:

- SCDHHS does not anticipate a budgetary impact.

Effective Date:

- On or after March 1, 2026.

Public Comment

MAC members and all other attendees who wish to comment, please use the chat feature now.

Advisement: 340B Drug Program FFS Billing

Margaret Alewine, Chief of Policy

Background

- SCDHHS gives notice of the following proposed actions regarding reimbursement methodology for physician-administered drugs (PAD) purchased through the Health Resources and Services Administration's (HRSA) 340B Program under the State Plan under Title XIX of the Social Security Act for Medical Assistance Program.
- Effective on or after Dec. 1, 2025, SCDHHS will amend the South Carolina Title XIX State Plan to establish the reimbursement methodology for PAD purchased through HRSA's 340B program and delivered in an outpatient setting.
- SCDHHS is making this update to ensure providers comply with the HRSA 340B program's policies and procedures.

Proposed Changes

- All providers who are enrolled in the 340B program must now submit the modifier of "TB" on claim forms for physician-administered drugs purchased through the 340B program.
- These policy updates will impact the State Plan and the following provider manuals:
 - Clinic Services Manual
 - Hospital Services Manual
 - Physicians Services Provider Manual
 - Pharmacy Services Manual

Budget Impact and Effective Date

Budgetary Impact:

- SCDHHS anticipates a cost savings of approximately \$2.3 million in total dollars.

Effective Date:

- On or after Dec. 1, 2025

Public Comment

MAC members and all other attendees who wish to comment, please use the chat feature now.

Advisement: Update to Revised Fee Schedules and Updates for RBHS and LIP Providers

Margaret Alewine, Chief of Policy

Background

- Rehabilitative behavioral health services (RBHS) are provided by both licensed independent practitioners (LIPs) and RBHS-enrolled organizations.
- Historically, RBHS and LIP providers have followed two separate fee schedules and two distinct provider manuals for Healthy Connections Medicaid guidelines and service definitions.
- Additionally, rates for corresponding procedure codes have varied, resulting in misalignment across fee schedules. This includes rates for services on the Office of Substance Abuse Services (OSUS) fee schedule.

Proposed Changes

- SCDHHS intends to aligned rates for services delivered by RBHS, LIP and OSUS providers, allowing for a unified fee schedule for core behavioral health services.
- SCDHHS proposes to align certain RBHS, LIP and OSUS reimbursement as follows:
 - Rates for certain RBHS services delivered by these provider types will be increased to account for market trends.

Budget Impact and Effective Date

Budgetary Impact:

- SCDHHS anticipates an estimated budget impact of \$15.4 million total dollars.

Effective Date:

- On or after Dec. 1, 2025.

Policy Updates

Margaret Alewine, Chief of Policy

Clinics Services Manual Update

- Effective Jan. 1, 2026, SCDHHS will publish a **new** Clinics Services Manual.
- The new updated manual will provide a cohesive, user-friendly policy reference for providers.
- The manual includes policies related to services rendered in the following clinic settings:
 - Ambulatory Surgery Centers
 - Developmental Evaluation Centers
 - End-stage Renal Disease
 - Infusion Centers
 - Pediatric HIV Clinics

