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## MEDICAID BULLETIN

**TO: CLTC, DDSN, Medically Complex Children and Palmetto Coordinated System of Care Home and Community Based Waiver Services Providers**

**SUBJECT: Provider Rate Increases for Home and Community Based Waiver Services**

The South Carolina Department of Health and Human Services (SCDHHS) is increasing specific reimbursement rates for home and community-based services (HCBS) provided through the state’s waiver programs. The rate increases are being made to enhance the network of providers rendering services to members enrolled in South Carolina’s HCBS waiver programs.

The rate increases are effective Jan. 1, 2023. As described below, they include services provided through the SCDHHS-operated community long term care (CLTC) waivers (Community Choices, HIV/AIDS, and Mechanical Ventilator Dependent [VENT] waivers); the Medically Complex Children (MCC) waiver; the Palmetto Coordinated System of Care (PCSC) waiver, which is operated by the South Carolina Continuum of Care; and, the Intellectual Disability/Related Disabilities (ID/RD), Community Supports (CS), and Head and Spinal Cord Injury (HASCI) waivers, which are operated by the South Carolina Department of Disabilities and Special Needs (SCDDSN).

<b>CLTC Waivers</b>				
<b>Service Description</b>	<b>Code</b>	<b>Modifier</b>	<b>Previous Rate per Unit</b>	<b>New Rate per Unit</b>
Case Management	G9012		\$72.00/mo.	\$86.00/mo.
Medicaid Nursing	S9124		\$29.80/hr.	\$35.00/hr.
Personal Care I	S5130		\$14.80/hr.	\$22.00/hr.
Personal Care II	T1019		\$19.40/hr.	\$25.00/hr.
Medicaid Nursing – RN	S9123		\$39.40/hr.	\$42.00/hr.

*Rate increases for CLTC waivers include services provided through the Community Choices, HIV/AIDS and VENT waivers.*

<b>MCC Waiver</b>				
<b>Service Description</b>	<b>Code</b>	<b>Modifier</b>	<b>Previous Rate per Unit</b>	<b>New Rate per Unit</b>
Enhanced Nursing Services – LPN	T1003		\$8.75/15 min.	\$9.50/15 min.
Respite In Home – (unskilled)	S5150		\$4.05/15 min.	\$6.25/15 min.
Respite In Home – (skilled)	T1005		\$6.00/15 min.	\$8.75/15 min.

PCSC Waiver				
Service Description	Code	Modifier	Previous Rate per Unit	New Rate per Unit
Respite In Home	S5150	U1	\$3.18/15 min.	\$6.25/15 min.
Respite In Home (daily)	S5151	U1	\$88.83/per day	\$150.00/per day

SCDDSN-operated Waivers				
Service Description and Affected Waiver(s)	Code	Modifier	Previous Rate per Unit	New Rate per Unit
Adult Attendant Care – ID/RD	S5125	U1	\$4.21/15 min.	\$4.48/15 min.
Adult Companion Services – ID/RD	S5135		\$3.76/15 min.	\$4.50/15 min.
Medicaid Nursing – LPN – ID/RD & HASCI	S9124		\$29.80/hr.	\$35.00/hr.
Enhanced Nursing Services LPN – ID/RD & HASCI	T1003		\$8.75/15 min.	\$9.50/15 min.
Personal Care I – ID/RD & CS	S5130		\$3.70/15 min.	\$5.50/15 min.
Personal Care II – ID/RD & CS	T1019		\$4.85/15 min.	\$6.25/15 min.
**Respite In Home – ID/RD, CS & HASCI	T1005		\$4.21/15 min.	\$6.25/15 min.
Medicaid Nursing – RN – ID/RD & HASCI	S9123		\$39.40/hr.	\$42.00/hr.
Attendant Care – Agency – HASCI	S5125	U2	\$5.02/15 min.	\$6.25/15 min.
Attendant Care – Boards – HASCI	S5125	U3	\$3.88/15 min.	\$6.25/15 min.
Attendant Care UAP – HASCI	S5125	U1	\$4.21/15 min.	\$4.48/15 min.
In Home Support – CS	T2025		\$16.82/hr.	\$17.90/hr.

**\*\*The DDSN “Respite In Home” service increase only applies to agency-based respite. It does not apply to self-directed respite.**

The new rates will be reflected on the [CLTC Fee Schedule](#) by Jan. 1, 2023.

Providers should direct any questions related to this bulletin to SCDHHS program staff at [MedicaidWaiver@scdhhs.gov](mailto:MedicaidWaiver@scdhhs.gov).

Thank you for your continued support of the South Carolina Healthy Connections Medicaid program.

/s/  
Robert M. Kerr