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Dec. 30, 2019

PUBLIC NOTICE

SUBJECT: Final Action for the Essential Public Safety Net Nursing Facility Payment Program

The South Carolina Department of Health and Human Services (SCDHHS), pursuant to the requirements of Section 1902(a)(13)(A) of the Social Security Act, gives notice of the following action regarding its methods and standards for setting payments for the Essential Public Safety Net (EPSN) Nursing Facility Payment Program under the State Plan under Title XIX of the Social Security Act Medical Assistance Program (Medicaid).

The Medicare program is currently converting its payment methodology for Part A skilled nursing care services from a Resource Utilization Group, Version IV (RUG-IV) to a Patient Driven Payment Model (PDPM) methodology. There are two main ways in which the Medicare transition to PDPM may affect the state Medicaid programs' calculation of the Upper Payment Limit (UPL) and changes in nursing facility (NF) reimbursement for case-mix states. With regard to the UPL calculation, while budget neutral in the aggregate and not impacting the scope of services covered under the Skilled Nursing Facility (SNF) Prospective Payment System (PPS), PDPM implementation changes how payment is made for SNF services, which can have an impact on UPL calculations. The new PDPM methodology was created without any consideration to state Medicaid NF payment programs. SCDHHS only uses the Medicare RUGs-IV payment methodology in order to determine the EPSN NF supplemental payments. Therefore in order to assist states in this transition, CMS will allow states that use the Medicare RUG-IV payment methodology rates in their UPL calculations to increase the Oct. 1, 2018, RUGS-IV rates by the increase in the average annual increase in Medicare rates per the fiscal year (FY) 2020 final rule. Therefore, effective for payments beginning on or after Jan. 1, 2020/service dates beginning on and after October 1, 2019, the SCDHHS will increase the Oct. 1, 2018, RUGS-IV rates by the increase in the average annual increase in Medicare rates per the FY 2020 final rule.

This action is not a new action, but one that continues the pre-Oct. 1, 2019, Medicare Part A payment methodology for skilled nursing services. Therefore, SCDHHS has determined this action to be budget neutral.

Copies of this notice are available at each South Carolina Healthy Connections Medicaid county office and at www.scdhhs.gov for public review. Additional information regarding this action is available upon request at the address cited below.

Any written comments submitted may be reviewed by the public at the SCDHHS, Reimbursement Methodology and Policy Department, Room 1219, 1801 Main Street, Columbia, South Carolina, Monday through Friday between 9 a.m.-5 p.m.

Notice of Non-Discrimination

The South Carolina Department of Health and Human Services (SCDHHS) complies with applicable Federal civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability, or sex. SCDHHS does not exclude people or treat them differently because of race, color, national origin, age, disability, or sex.

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If you believe that SCDHHS has failed to provide these services or discriminated in another way on the basis of race, color, national origin, age, disability, or sex, you can file a grievance with the Civil Rights Official using the contact information provided above. You can file a grievance in person or by mail or email. If you need help filing a grievance, we are available to help you.

You can also file a civil rights complaint with the U.S. Department of Health and Human Services, Office for Civil Rights, electronically through the Office for Civil Rights Complaint Portal, available at <https://ocrportal.hhs.gov/ocr/portal/lobby.jsf> or by mail or phone at: U.S. Department of Health and Human Services, 200 Independence Avenue, SW, Room 509F, HHH Building, Washington, D.C. 20201 or by phone at: 800-368-1019, 800-537-7697 (TDD). Complaint forms are available at <http://www.hhs.gov/ocr/office/file/index.html>

Language Services

If your primary language is not English, language assistance services are available to you, free of charge. Call: 1-888-549-0820 (TTY: 1-888-842-3620).

si habla español, tiene a su disposición servicios gratuitos de asistencia lingüística. Llame al 1-888-549-0820 (TTY: 1-888-842-3620).

خدمات المساعدة اللغوية تتوافر لك بالمجان. اتصل برقم 888-549-0820 (رقم هاتف الصم والبكم: 888-842-3620). إذا كنت تتحدث اذك اللغة، فإن

Se fala português, encontram-se disponíveis serviços linguísticos, grátis. Ligue para 1-888-549-0820 (TTY: 1-888-842-3620).

Если вы говорите на русском языке, то вам доступны бесплатные услуги перевода. Звоните 1-888-549-0820 (телетайп: 1-888-842-3620).

Nếu bạn nói Tiếng Việt, có các dịch vụ hỗ trợ ngôn ngữ miễn phí dành cho bạn. Gọi số 1-888-549-0820 (TTY: 1-888-842-3620).

Se você fala português do Brasil, os serviços de assistência em sua lingua estão disponíveis para você de forma gratuita. Chame 1-888-549-0820 (TTY : 1-888-842-3620)

如果您使用繁體中文，您可以免費獲得語言援助服務。請致電1-888-549-0820 (TTY: 1-888-842-3620)

Falam tawng thiam tu na si le tawng let nak asi mi 1-888-549-0820 (TTY: 1-888-842-3620) ah tang ka pek tul lo in na ko thei.

धयद आप हदी बोलते ह तो आपके लिए मुफ्त म भाषा सहायता सेवाएं उपलब्ध ह। 1-888-549-0820 (TTY: 1-888-842-3620) पर कॉल कर।

한국어를 사용하시는 경우, 언어 지원 서비스를 무료로 이용하실 수 있습니다. 1-888-549-0820 (TTY: 1-888-842-3620) 번으로 전화해 주십시오.

Haka tawng thiam tu na si le tawng let asi mi 1-888-549-0820 (TTY: 1-888-842-3620) ah tang ka pek tul lo in ko thei.

Si vous parlez français, des services d'aide linguistique vous sont proposés gratuitement. Appelez le 888-549-0820 (ATS : 888-842-3620).

နမူကတိကညီ ကျိအလိ၊ နမူနာ ကျိအတိမာစာလၢ တလၢ်ဘျုးလၢ်စ့ၤ နီတံၤဘျုးသ့န့ၢ်လီၤ. ကိ: 888-549-0820 (TTY: 888-842-3620)

ማስታወሻ: የማናገገሩት ቋንቋ አማርኛ ከሆነ የትርጉም እርዳታ ድርጅቶች: በነጻ ሊያግዝዎት ተዘጋጅተዋል: ወደ ሚከተለው ቁጥር ይደውሉ 1-888-549-0820 (መስማት ለተሳናቸው: 1-888-842-3620).

အကယ်၍ သင်သည် မြန်မာစကား ကို ပြောပါက၊ ဘာသာစကား အကူအညီ၊ အခမဲ့၊ သင့် ငဲ့အတူက်

စီစဉ်ဆောင်ရွက်ပေးပါမည်။ ဖုန်းနံပါတ် 888-549-0820 (TTY: 888-842-3620) သို့ ခေါ်ဆိုပါ။