



## **CMS Informal Questions Related to Targeted Case Management State Plan Amendments**

### **South Carolina's responses to SC 12-001 Coverage Informal Questions:**

1. Qualifications of providers - bullet 7

Please remove any reference to Title 40 of the South Carolina Code of Laws.

**SC ANSWER:** South Carolina has decided to keep the reference above since CMS stated it would be fine to leave this language.

2. Qualifications of providers (continued), Page 1.3 bullet 2

What would constitute State's records be stored outside of the State (within 25 miles of the South Carolina Border)?

**SC ANSWER:** Providers within 25 miles of the SC border are treated as in-state because they are considered within the South Carolina Medicaid Service Area (SCMSA). These providers have to meet the same requirements as an in-state provider. In this instance SC is referring to provider records and not state's records.

### **South Carolina's responses to SC 12-002 and 12-004 Coverage Informal Questions:**

#### **Spa 12-002, Supplement 1 to Attachment 3.1-A, Page 1a**

1. It is CMS understanding that the State combined the Severely Emotionally Disturbed Children, Physically Handicapped Children, Children 0-21 in Foster Care and Juvenile Justice Children ages 0-21 target groups into the At Risk Children under age 21 target group. Please clarify if this is accurate. If so, please clarify if there are any individuals that were eligible under the previous target groups that are no longer eligible under the proposed target group.

**SC ANSWER:**

For clarification, the State combined the previous target groups into the At Risk Children under age 21 target group, and the new criteria was developed to include individuals eligible in the previous target groups.

**Spa 12-004, Supplement 1 to Attachment 3.1-A, Page 1c**

2. The State plan indicates that the target group is limited to women who agree to “work with and receive visits from a nurse or other licensed practitioner of the healing arts during the pregnancy and consent to continued visits after the birth.” Please clarify how this policy complies with 42 CFR 441.18(a)(3).

**SC ANSWER:**

The agency is in compliance with the requirements of section CFR 441.18(a)(3) as it relates to pregnant women receiving targeted case management. The intent of the program is to provide ongoing Targeted Case management services over a period of time. Beneficiaries will need to be informed that this is a continuing service and that providers will be visiting them in the home on a monthly bases. Beneficiaries always have the option to not receive the service or to discontinue the service.

Accepting or declining this service does not preclude delivery of any other Medicaid service that this beneficiary is eligible to receive.

**South Carolina’s answers to CMS’ informal questions on the TCM SPAs:**

**General Question for all Target Groups**

1. Please clarify if there are any individuals that were eligible under the State’s previous target groups that are no longer eligible under the proposed target groups.

**SC ANSWER:** The State intends to serve the individuals that were previously covered under the previously defined target groups. Further, the state anticipates being able to serve additional people within the new target groups under the new target group definitions.

**Spa 12-004, Supplement 1 to Attachment 3.1-A, Page 1c**

2. The interim final rule indicates 4 elements of case management services: 1) Comprehensive assessment and periodic reassessments; 2) Development of a specific care plan; 3) Referral and related activities; and 4) Monitoring and follow-up activities. The State plan indicates that women are required to “work with and receive visits from a nurse or other licensed practitioner (OLP) of the healing arts during the pregnancy and consent to

continued visits after the birth.” Requiring women to receive nursing services or services from OLP’s of the healing arts is not part of TCM and should be removed from the State plan.

If the State would like to offer additional services to pregnant women, CMS would suggest adding these services under the OLP benefit. Then the State can use TCM to provide linkage/referral to any willing and qualified provider of these services, as well as any needed medical, educational, social or other services.

**SC ANSWER:** The State deleted number 5: *The pregnant woman must be willing to work with and receive visits from a nurse or other licensed practitioner of the healing arts during the pregnancy and consent to continued visits after the birth*, on page 1c of Supplement 1 to Attachment 3.1A (Please see attachment).