

Oct. 9, 2024

PUBLIC NOTICE

Public Notice of Proposed Action for Rural Hospital Payment Methodology

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 proposed actions regarding rates for rural hospital services under the State Plan under Title XIX of the Social Security Act Medical Assistance Program (Medicaid).

Effective for services on or after Oct. 1, 2024, SCDHHS proposes to amend Section 4.19-B of the South Carolina Title XIX State Plan as follows:

1. The agency proposes to supplement the Medicaid outpatient hospital fee-for-service rates paid to all South Carolina defined rural hospitals (as defined in the State Plan) to maintain and enhance access to quality care in the rural provider community and the state.
2. The agency proposes to establish the rural outpatient hospital access pool, under which all South Carolina rural hospitals will receive \$1.5 million annually. Individual supplemental payments will not exceed the Medicaid hospital-specific limit for any rural hospital participating in the South Carolina Medicaid Disproportionate Share Hospital program. If a hospital's payment amount is estimated to exceed its attributable Medicaid hospital-specific limit, SCDHHS will reduce the hospital's payment to ensure compliance with the applicable Medicaid hospital-specific limit. Total supplemental payments will not exceed the applicable Medicaid outpatient hospital upper payment limit for state government hospitals, non-state government hospitals, or private hospitals. If total payments from the rural outpatient hospital access pool are estimated to exceed the projected aggregate Medicaid outpatient hospital upper payment limits for state government hospitals, non-state government hospitals and/or private hospitals, SCDHHS will reduce payments proportionally for each hospital to ensure compliance with the applicable Medicaid upper payment limit.

Based on the proposed actions above, SCDHHS projects a budget impact of approximately \$21.7 million in total dollars.

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 these actions is available upon request at the address cited below.

Written comments may be sent to SCDHHS, Bureau of Policy, P.O. Box 8206, Columbia, S.C. 29202-8206. Comments may also be submitted to comments@scdhhs.gov. All comments must be received by 5 p.m. November 8, 2024.

Any written comments submitted may be reviewed by the public at SCDHHS, Bureau of Policy, 1801 Main Street, Columbia, South Carolina, Monday through Friday between the hours of 9 a.m. and 5 p.m.

Robert M. Kerr
Director

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.

SCDHHS provides free aids and services to people with disabilities, such as qualified sign language interpreters and written information in other formats (large print, braille, audio, accessible electronic formats, other formats). We provide free language services to people whose primary language is not English, such as qualified interpreters and information written in other languages. If you need these services, please contact the Americans with Disabilities Act (ADA)/Civil Rights Official by mail at: PO Box 8206, Columbia, SC 29202-8206, by phone at: 1-888-549-0820 (TTY: 1-888-842-3620), or by email at: civilrights@scdhhs.gov.

If you believe 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, by mail, or via 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> .