

## **Table of Contents**

**State/Territory Name: South Carolina**

**State Plan Amendment (SPA) #: 23-0008**

This file contains the following documents in the order listed:

- 1) Corrected Approval Letter
- 2) Approval Letter
- 3) Corrected CMS-179
- 4) Approved SPA Pages

**DEPARTMENT OF HEALTH & HUMAN SERVICES**

Centers for Medicare & Medicaid Services  
601 E. 12th St., Room 355  
Kansas City, Missouri 64106



Medicaid and CHIP Operations Group

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December 7, 2023

Robert M. Kerr, Director  
South Carolina Department of Health & Human Services  
P.O. Box 8206  
Columbia, South Carolina 29202-8206

Re: South Carolina State Plan Amendment (SPA) 23-0008

Dear Director Kerr:

Enclosed please find a corrected approval package for your South Carolina State Plan Amendment (SPA) submitted under transmittal number (TN) 23-0008. This SPA proposes to implement the Assertive Community Treatment (ACT) team. The ACT utilizes a team treatment approach designed to provide comprehensive, community-based behavioral health treatment, rehabilitation, and support to persons with serious and persistent mental illness and was originally approved on November 29, 2023.

The approval package sent to South Carolina included the following error:

- The SPA approval package included the version of the CMS-179 unsigned by the State Agency Official.

The enclosed corrected package contains the original signed letter, the corrected CMS-179, and approved SPA pages.

If you have any questions, please contact Etta Hawkins at (404) 562-7429, or via email at [Etta.Hawkins@cms.hhs.gov](mailto:Etta.Hawkins@cms.hhs.gov).

Sincerely,

A handwritten signature in blue ink that reads 'James G. Scott'.

Digitally signed by James  
G. Scott -S  
Date: 2023.12.07 17:34:09  
-06'00'

James G. Scott, Director  
Division of Program Operations

Enclosures

cc: Margaret Alewine  
Sheila Chavis

**DEPARTMENT OF HEALTH & HUMAN SERVICES**

Centers for Medicare & Medicaid Services  
601 E. 12th St., Room 355  
Kansas City, Missouri 64106



Medicaid and CHIP Operations Group

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November 30, 2023

Robert M. Kerr, Director  
South Carolina Department of Health & Human Services  
P.O. Box 8206  
Columbia, SC 29202-8206

Re: South Carolina State Plan Amendment (SPA) 23-0008

Dear Director Kerr:

The Centers for Medicare & Medicaid Services (CMS) reviewed your Medicaid State Plan Amendment (SPA) submitted under transmittal number (TN) 23-0008. This SPA proposes to implement the Assertive Community Treatment (ACT) team. The ACT utilizes a team treatment approach designed to provide comprehensive, community-based behavioral health treatment, rehabilitation, and support to persons with serious and persistent mental illness.

We conducted our review of your submittal according to statutory requirements in Title XIX of SSA, Sect. 1902 (a)(13), 42 C.F.R. 447.201, and 42 CFR 440.130(d). This letter is to inform you that South Carolina's Medicaid SPA 23-0008 was approved on November 29, 2023, with an effective date of July 1, 2023.

Enclosed are copies of the approved CMS-179 summary form and the approved SPA pages to be incorporated into the South Carolina State Plan.

If you have any questions, please contact Etta Hawkins at (404) 562-7429 or via email at [Etta.Hawkins@cms.hhs.gov](mailto:Etta.Hawkins@cms.hhs.gov).

Sincerely,

Ruth

Hughes -S

Ruth A. Hughes, Acting Director,  
Division of Program Operations

Digitally signed by Ruth Hughes -S  
Date: 2023.11.30 16:36:35 -06'00'

Enclosures

cc: Margaret Alewine  
Sheila Chavis

**TRANSMITTAL AND NOTICE OF APPROVAL OF  
STATE PLAN MATERIAL**

**FOR: CENTERS FOR MEDICARE & MEDICAID SERVICES**

|   |                               |
|---|-------------------------------|
| 1. TRANSMITTAL NUMBER<br><u>2</u> <u>3</u> — <u>0</u> <u>0</u> <u>0</u> <u>8</u>  | 2. STATE<br><u>S</u> <u>C</u> |
| 3. PROGRAM IDENTIFICATION: TITLE OF THE SOCIAL SECURITY ACT<br><input checked="" type="radio"/> XIX <input type="radio"/> XXI |                               |

4. PROPOSED EFFECTIVE DATE  
**July 1, 2023**

6. FEDERAL BUDGET IMPACT (Amounts in WHOLE dollars)  
a FFY 2023 \$ 419,500  
b FFY 2024 \$ 1,604,000

8. PAGE NUMBER OF THE SUPERSEDED PLAN SECTION OR ATTACHMENT (If Applicable)  
Attachment 3.1-A Limitation Supplement, pages 6c.24, 6c.25, 6c.26, 6c.27, 6c.28, 6c.29, 6c.30, **6c.31**  
Attachment 4.19-B, page 6.1d.a

TO: CENTER DIRECTOR  
CENTERS FOR MEDICAID & CHIP SERVICES  
DEPARTMENT OF HEALTH AND HUMAN SERVICES

5. FEDERAL STATUTE/REGULATION CITATION  
Title XIX of SSA, Sect. 1902 (a)(13), 42 CFR 447.201, and 42 CFR 440.130(d)

7. PAGE NUMBER OF THE PLAN SECTION OR ATTACHMENT  
Attachment 3.1-A Limitation Supplement, pages 6c.10.1 (New Pages), 6c.24, 6c.25, 6c.26, 6c.27, 6c.28, 6c.29, 6c.30, **6c.31**, **6c.32 (New Page)** and **6c.33 (New Page)**  
Attachment 4.19.B, pages 6.1d.a, 6.1d.a.1 (New Page)

9. SUBJECT OF AMENDMENT  
Amendment of the SC Title XIX State Plan to implement Assertive Community Treatment (ACT), adding service description, rates, and codes to Rehabilitative Behavioral Health Services.

10. GOVERNOR'S REVIEW (Check One)  
 GOVERNOR'S OFFICE REPORTED NO COMMENT  
 COMMENTS OF GOVERNOR'S OFFICE ENCLOSED  
 NO REPLY RECEIVED WITHIN 45 DAYS OF SUBMITTAL  
 OTHER, AS SPECIFIED:  
Mr. Kerr was designated by the Governor to review and approve all State Plans.

11. SIGNATURE OF STATE AGENCY OFFICIAL  


12. TYPED NAME  
Robert M. Kerr

13. TITLE  
Director

14. DATE SUBMITTED  
September 15, 2023

15. RETURN TO  
South Carolina Department of Health and Human Services  
Post Office Box 8206  
Columbia, SC 29202-8206

**FOR CMS USE ONLY**

16. DATE RECEIVED  
September 15, 2023

17. DATE APPROVED  
November 29, 2023

**PLAN APPROVED - ONE COPY ATTACHED**

18. EFFECTIVE DATE OF APPROVED MATERIAL  
July 1, 2023

19. SIGNATURE OF APPROVING OFFICIAL  
  
Digitally signed by James G. Scott - S  
Date: 2023.12.07 17:45:53 -06'00'

20. TYPED NAME OF APPROVING OFFICIAL  
James G. Scott

21. TITLE OF APPROVING OFFICIAL  
Director, Division of Program Operations

22. REMARKS

On November 3, 2023 South Carolina authorizes a pen and ink change to add pages 6c.31, 6c.32 (New Page) and 6c.33 (New Page) of Attachment 3.1-A Limitation Supplement to block 7 of the CMS Form 179 and add page 6c.31 to block 8 of the CMS Form 179.

18. **Assertive Community Treatment (ACT)**: Assertive Community Treatment (ACT) is a team treatment approach designed to provide comprehensive, community-based behavioral health intervention, rehabilitation, and support to individuals with serious and persistent mental illness. ACT is a recovery focused evidence-based practice (EBP) where services are provided in vivo by a multidisciplinary team.

Services encompassed within the ACT model that are provided to eligible beneficiaries must be identified on the beneficiaries' individual plans of care (IPOC) and may include the following rehabilitative behavioral health services, which are described on pages 6b-6c.32 of this attachment or defined below:

- Psychiatric Diagnostic Evaluation without Medical Services - Comprehensive Diagnostic Assessment
  - Psychiatric Diagnostic Evaluation with Medical Services
  - Mental Health Comprehensive Assessment - Follow Up
  - Behavioral Health Screening
  - Service Plan Development Interdisciplinary Team with Client
  - Individual Psychotherapy (25-30, 45-50, 60-75 minutes)
  - Family Psychotherapy with or without Client Present
  - Medication Management
  - Peer Support Services
  - Family Support
  - Psychosocial Rehabilitation Services - Individual
  - Community Integration Services
  - Initial Alcohol and Drug Assessment without Physical
  - Follow-up Alcohol and Drug Assessment without Physical
  - Alcohol and Drug Assessment - Nursing Services
  - Alcohol and/or Substance Abuse Structured Screening and Brief Intervention Services
  - Individual alcohol and Drug Abuse Counseling
  - Crisis Management
  - Medication Administration
  - Community-Based Symptom Management - This service assists individuals with managing their symptoms of serious mental illness and resultant behaviors in the workplace in order to support their opportunities for vocational success.
- a. **Limitation of Services**: The beneficiary must meet medical necessity criteria to receive ACT services.
- b. **Staff Providing Services**: ACT services must be provided by qualified clinical professionals as defined on the "Staff Qualifications" chart (see pages 6c.23-6c.32). ACT teams shall be comprised, at minimum, of the following staff:
- Psychiatric Care Provider
  - ACT Team Leader
  - Qualified Mental Health Professional
  - Mental Health Professional or Mental Health Services Provider
  - Registered Nurse
  - Co-Occurring Disorder Professional
  - Peer Support Specialist
  - Vocational Success Specialist

| Title of Professional     | Level of Education/Degree/or Experience Required   | License or Certification Required        | Supervision  | Services Able to Provide |
|---------------------------|--|--|--|--------------------------|
| Psychiatric Care Provider | Must have a medical degree OR an advanced practice nursing degree or physician's assistant degree. | Licensed as an MD, DO, APRN, or PA in SC | APRNs or PAs must be under the supervision of an MD or DO; APRNs with prescription authority and a Drug Enforcement Administration (DEA) registration are also authorized to prescribe medications | All services             |

SC 23-0008  
 EFFECTIVE DATE: 07/01/23  
 APPROVAL DATE: 11/29/23  
 SUPERSEDES: SC 23-0012

| Title of Professional                  | Level of Education/Degree/or Experience Required  | License or Certification Required   | Supervision   | Services Able to Provide   |
|--|---|---|---------------|--|
| Licensed Psycho-Educational Specialist | Hold a Master's degree plus thirty hours or Master's degree or specialist degree that includes sixty hours or ninety quarter hours or a Doctoral degree in psychology. Complete 3 graduate classes in psychopathology (abnormal psychology, abnormal behavior and etiology dynamics). Complete 3 graduate classes diagnostic psychopathy and serve as a certified school psychologist for 2 years in a school and be certified by SCDE as a school psychologist level II or III. Must have a passing score (600 or above) on the ETS School Psychology exam (Praxis). Also must be licensed by the SC Board of Examiners for Licensure of Professional Counselors, Marriage and Family Therapists and Psycho-Educational Specialists. | Licensed by SC Board of Examiners for Licensure or Professional Counselors, Marriage and Family Therapists and Psycho-Educational Specialists | None Required | ADA, ADS, BMod, BHS, CIS, CM, DA, FS, FP, GP, IP, MFGP, PTA, PRS, SPD, SAC, ST, TCC, ACT, SUD Level of Treatment: II.I, II.5, III.2-D, III.7-D, III.5-R, III.7-R, III.7-RA |

| Title of Professional  | Level of Education/Degree/or Experience Required  | License or Certification Required             | Supervision   | Services Able to Provide   |
|--|---|---|---------------|--|
| Licensed Independent Social Worker-Clinical Practice (LISW-CP) | Master's or Doctoral degree from a Board-approved social work program.  | Licensed by SC Board of Social Work Examiners | None Required | ADA, ADS, BMod, BHS, CIS, CM, DA, FS, FP, GP, IP, MFGP, PRS, SPD, SAC, ST, TCC, ACT,<br><br>SUD Level of Treatment: II.I, II.5, III.2-D, III.7-D, III.5-R, III.7-R, III.7-RA |
| Licensed Masters Social Worker (LMSW)                          | Master's or a doctoral degree from a social work program, accredited by the Council on Social Work Education and one year of experience working with the population to be served. | Licensed by SC Board of Social Work Examiners | None Required | ADA, ADS, BMod, BHS, CIS, CM, DA, FS, FP, GP, IP, MFGP, PRS, SPD, SAC, ST, TCC, ACT,<br><br>SUD Level of Treatment: II.I, II.5, III.2-D, III.7-D, III.5-R, III.7-R, III.7-RA |

| Title of Professional                         | Level of Education/Degree/or Experience Required  | License or Certification Required   | Supervision   | Services Able to Provide  |
|---|---|---|---------------|---|
| Licensed Marriage and Family Therapist (LMFT) | A minimum of 48 graduate semester hours or 72 quarter hours in marriage and family therapy along with an earned master's degree, specialist's degree or doctoral degree. Each course must be a minimum of at least a 3 semester hour graduate level course with a minimum of 45 classroom hours of 4.5 quarter hours; one course cannot be used to satisfy two different categories.    | Licensed by SC Board of Examiners for Licensure of Professional Counselors, Marriage and Family Therapists and Psycho-Educational Specialists | None Required | ADA, ADS, BMod, BHS, CIS, CM, DA, FS, FP, GP, IP, MFGP, PRS, SPD, SAC, ST, TCC, ACT, SUD Level of Treatment: II.I, II.5, III.2-D, III.7-D, III.5-R, III.7-R, III.7-RA |
| Licensed Professional Counselor (LPC)         | A minimum of 48 graduate semester hours during a master's degree or higher degree program and have been awarded a graduate degree as provided in the regulations, or a post-degree program accredited by the commission on Accreditation for Marriage and Family Therapy Education or a regionally accredited institution of high learning subsequent to receiving the graduate degree. | Licensed by SC Board of Examiners for Licensure of Professional Counselors, Marriage and Family Therapist and Psycho-Educational Specialists  | None Required | ADA, ADS, BMod, BHS, CIS, CM, DA, FS, FP, GP, IP, MFGP, PRS, SPD, SAC, ST, TCC, ACT, SUD Level of Treatment: II.I, II.5, III.2-D, III.7-D, III.5-R, III.7-R, III.7-RA |

| Title of Professional                          | Level of Education/Degree/or Experience Required   | License or Certification Required   | Supervision   | Services Able to Provide   |
|--|--|---|---------------|--|
| ACT Team Leader <i>(for ACT services only)</i> | Master's degree in human services field with three years of clinical experience with the population served (SMI), with a minimum of two years post-graduate school.  | Licensed Psychologist, Licensed Independent Social Worker Clinical Practice (LISW-CP), Licensed Professional Counselor (LPC), Licensed Marriage and Family Therapist (LMFT), Licensed Psychiatric NP, and/or Clinical Nurse Specialist certified as an advanced practice psychiatric clinical nurse specialist. | None required | ADA, ADS, BMod, BHS, CIS, CM, DA, FS, FP, GP, IP, MFGP, PRS, SPD, SAC, ST, TCC, ACT, SUD Level of Treatment: II.I, II.5, III.2-D, III.7-D, III.5-R, III.7-R, III.7-RA  |
| Behavior Analyst                               | Must possess at least a Master's degree, have 225 classroom hours of specific graduate-level coursework, meet experience requirements, and pass the Behavior Analysis Certification Examination  | Behavior Analyst Certification Board  | None Required | ADA, ADS, BMod, BHS, CM, DA**, FS, FP*, GP*, IP*, MFGP*, TCC, CIS, PRS, SPD, SAC, ST, SUD Level of Treatment: II.I, II.5, III.2-D, III.7-D, III.5-R, III.7-R, III.7-RA |
| Licensed Addictions Counselor (LAC)            | Master's degree or higher (48 graduate hours) in addictions counseling, social work, family therapy, psychology, or other human services field, with 6 hours Substance Use Disorder/Addiction Specific Coursework, and a minimum of one hundred twenty (120) hours of supervision by a licensed addictions counselor supervisor or other qualified licensed mental health practitioner approved by the SC licensing board. | Licensed by South Carolina Board of Examiners for Licensure of Professional Counselors, Marriage and Family Therapists, Addictions Counselors and Psycho-Educational Specialists  | None Required | ADA, ADS, BMod, BHS, CIS, CM, DA, FS, FP, GP, IP, MFGP, PRS, SPD, SAC, ST, TCC, ACT  |

|   |  |   |                      |   |
|---|--|---|----------------------|---|
| <p>Certified Substance Abuse Professional</p> | <p>Master's degree in counseling, social work, family therapy, nursing, psychology, or other human services field, plus 250 hours of approved training related to the core functions and certification as an addictions specialist</p>   | <p>SC Association of Alcoholism and Drug Abuse Counselors Certification Commission and/or NAADAC Association for Addiction Professionals</p>  | <p>None required</p> | <p>ACT, ADA, ADS, BMod, BHS, CM, DA**, FS, FP*, GP*, IP*, MFGP*, TCC, CIS, PRS, SPD, SAC, ST,<br/><br/>SUD Level of Treatment: II.I, II.5, III.2-D, III.7-D, III.5-R, III.7-R, III.7-RA</p>                   |
| <p>Co-occurring Disorder Professional</p>     | <p>May have qualifications of the LAC or Certified Substance Abuse Professional as listed above; master of addiction counseling</p>  | <p>Licensed by South Carolina Board of Examiners for Licensure of Professional Counselors, Marriage and Family Therapists, Addictions Counselors and Psycho-Educational Specialists; OR SC Association of Alcoholism and Drug Abuse Counselors Certification Commission and/or NAADAC Association for Addiction Professionals</p> | <p>None required</p> | <p>ACT, ADA, ADS, BMod, BHS, CIS, CM, DA, FS, FP, GP, IP, MFGP, PRS, SPD, SAC, ST, TCC, CIS, PRS, SPD, SAC, ST,<br/><br/>SUD Level of Treatment: II.I, II.5, III.2-D, III.7-D, III.5-R, III.7-R, III.7-RA</p> |
| <p>Clinical Chaplain</p>                      | <p>Master of Divinity from an accredited theological seminary and have two years of pastoral experience as a priest, minister, or rabbi and one year of clinical pastoral education that includes a provision for supervised clinical services and one year of experience working with the population to be served</p> | <p>Documentation of training and experience</p>   | <p>None required</p> | <p>ADA, ADS, BMod, BHS, CM, DA**, FS, FP*, GP*, IP*, MFGP*, TCC, CIS, PRS, SPD, SAC, ST, ACT,<br/><br/>SUD Level of Treatment: II.I, II.5, III.2-D, III.7-D, III.5-R, III.7-R, III.7-RA</p>                   |

| Title of Professional                   | Level of Education/Degree/or Experience Required   | License or Certification Required   | Supervision   | Services Able to Provide  |
|---|--|---|---|---|
| Certified Mental Health Professional    | Master's or doctoral degree from a program that is primarily psychological in nature (e.g., counseling, guidance, or social science equivalent) from an accredited university or college and one year of experience working with the population to be served.            | LISW-CP, LMFT, LPC, Licensed Psychologist                                       | None required   | ADA, ADS, BMod, BHS, CIS, CM, DA, FS, FP, GP, IP, MFGP, PRS, SPD, SAC, ST, TCC, ACT, SUD Level of Treatment: II.I, II.5, III.2-D, III.7-D, III.5-R, III.7-R, III.7-RA       |
| Mental Health Professional (MHP)        | Master's or doctoral degree from a program that is primarily psychological in nature (e.g., counseling, guidance, social work or social science equivalent) from an accredited university or college and one year of experience working with the population to be served | DHHS-approved credentialing program   | None required   | ADA, ADS, BMod, BHS, CM, DA**, FS, FP*, GP*, IP*, MFGP*, TCC, CIS, PRS, SPD, SAC, ST, ACT, SUD Level of Treatment: II.I, II.5, III.2-D, III.7-D, III.5-R, III.7-R, III.7-RA |
| Mental Health Services Provider         | Bachelor's degree in a human services field and three years of experience working with the population to be served.  | DHHS-approved credentialing program   | Under the supervision of a master's level clinical professional or licensed practitioner of the healing arts (LPHA) | ACT, ADA, ADS, BMod, BHS, CM, FS, TCC, CIS, PRS, SAC, ST  |
| Substance Abuse Professional (SAP)      | Bachelor's degree in a health or human services related field and certification as a certified addiction counselor or in the process of becoming SCAADAC credentialed or be certified by SCAADAC   | SC Association of Alcoholism and Drug Abuse Counselors Certification Commission | Under the supervision of a master's level clinical professional or licensed practitioner of the healing arts (LPHA) | ADA, ADS, BMod, BHS, CM, FS, TCC, CIS, PRS, SAC, ST   |
| Licensed Bachelor of Social Work (LBSW) | Bachelor's degree in social work. Baccalaureate social work is practiced only in organized settings such as social, medical, or governmental agencies and may not be practiced independently or privately.)  | Licensed by SC Board of Social Work Examiners                                   | Under the supervision of a master's level clinical professional or licensed practitioner of the healing arts (LPHA) | ADA, ADS, BMod, BHS, CM, FS, TCC, CIS, PRS, SAC, ST, SPD, ACT   |

| Title of Professional          | Level of Education/Degree/or Experience Required   | License or Certification Required    | Supervision  | Services Able to Provide  |
|--------------------------------|--|--------------------------------------|--|---|
| Behavior Analyst               | A board certified associate behavior analyst must have at least a bachelor's degree, have 135 classroom hours of specific coursework, meet experience requirements, and pass the Associate Behavior Analyst Certification Examination.   | Behavior Analyst Certification Board | Under the supervision of a master's level clinical professional or licensed practitioner of the healing arts (LPHA)          | ADA, ADS, BMod, BHS, CM, FS, TCC, CIS, PRS, SAC, ST                                   |
| Licensed Registered Nurse (RN) | At a minimum, an associate's degree in nursing from a Board-approved nursing education program and one year of experience working with the population to be served   | Licensed by SC Board of Nursing      | Under the supervision of an APRN or licensed physician.  | ADA, ADN, BMod, FS, MM, TCC, CIS, PRS, MA, ST, ACT                                    |
| Licensed Practical Nurse (LPN) | Completion of an accredited program of nursing approved by the Board of Nursing and one year of experience working with the population to be served High school diploma or GED equivalent.   | Licensed by SC Board of Nursing      | Under the supervision of an APRN, RN, licensed physician, or other practitioner authorized by law to supervise LPN practice. | ADS, ADN, BMod, FS, MM, TCC, CIS, PRS, MA, ST, ACT                                    |
| <b>PARAPROFESSIONALS</b>       |  |                                      |  |   |
| Child Service Professional     | Bachelor's degree from an accredited university of college in psychology, social work, early childhood education, child development or a related field or bachelor's degree in another field and has a minimum of 45 documented training hours related to child development and children's mental health issues and treatment. | None Required                        | Under the supervision of a master's level clinical professional or licensed practitioner of the healing arts (LPHA)          | BMod, BHS, CM, FS, TCC, CIS, PRS, SAC, ST, ADA, ADS, (Assist with developing the SPD) |
| Mental Health Specialist       | At a minimum, a high school diploma or GED equivalent and have three years of documented direct care experience working with the identified target population or completion of an approved 30 hour training and certification program  | DHHS-approved Certification program  | Under the supervision of a master's level clinical professional or licensed practitioner of the healing arts (LPHA)          | PRS, BMod, FS, ST, TFC  |

| Title of Professional         | Level of Education/Degree/or Experience Required  | License or Certification Required          | Supervision   | Services Able to Provide |
|-------------------------------|---|--|---|--------------------------|
| Substance Abuse Specialist    | At a minimum, a high school diploma or GED equivalent and have three years of documented direct care experience working with the identified target population or completion of an approved training and certification program   | DHHS-approved Certification program        | Under the supervision of a master's level clinical professional or licensed practitioner of the healing arts (LPHA) | PRS, BMod, FS, ST        |
| Peer Support Specialist       | High school diploma or GED equivalent peer support providers must successfully complete a pre-certification program that consists of 40 hours of training. The curriculum must include the following topics: recovery goal setting; wellness recovery plans, problem solving; person centered services; and advocacy. Additionally, peer support providers must complete a minimum of 20 hours of continuing education training annually, of which at least 12 hours must be face-to-face training. | Certification as a Peer Support Specialist | Under the supervision of a master's level clinical professional or licensed practitioner of the healing arts (LPHA) | PSS, ACT                 |
| Vocational Success Specialist | a minimum of a bachelor's degree in a human services field, at least one year experience working with population served (SMI), and at least six months experience providing employment or educational supports.   | Documentation of training and experience   | Under the supervision of a masters or bachelor's level professional   | ACT                      |

\*Private Service Providers (non-governmental) who are not licensed at the independent level may not provide these services unless under the supervision of an independently licensed professional.

\*\*Private Service Providers must be licensed at the independent level in order to conduct a diagnostic assessment

Supervision Requirements

Rehabilitative behavioral health services provided by licensed/certified professionals must follow supervision requirements as required by SC State Law for each respective profession. Rehabilitative behavioral health services provided by any para-professionals must be supervised by a master's level clinical professional or licensed practitioner of the healing arts (LPHA). Any Master's level clinical professional performing a service that requires a masters degree, not licensed at the independent level must be supervised by an LPHA licensed at the independent level. Substance Abuse Professionals who are in the process of becoming credentialed must be supervised by a Certified Substance Abuse Professional or LPHA.

REHABILITATIVE SERVICE FOR PRIMARY CARE ENHANCEMENT

- B. A. Definition of Service - Rehabilitative Services for Primary Care Enhancement (RSPCE) are face-to-face counseling and health management interventions provided to reduce physical or psycho-social deterioration of a diagnosed medical condition and to restore an individual to his or her best possible functional level. A primary care physician (PCP) or other appropriate practitioner (i.e., nurse practitioner, physician assistant) must approve the plan of care. RSPCE are indicated if the beneficiary:
- Fails to attain an optimal level of health within the primary care delivery continuum
  - Enters into the primary health care continuum with an advance degree of disease/condition as evident by clinical evaluation and documentation

**Assertive Community Treatment (ACT)**

Effective for services provided on or after July 1, 2023, the Medicaid agency will implement a fee schedule for rehabilitative services provided to individuals receiving Assertive Community Treatment (ACT). The ACT team shall have among its staff, persons with sufficient individual competence and professional qualifications and experience to provide the services listed below, as described in section 3.1-A Limitation Supplement. ACT teams must be certified by the South Carolina Department of Health and Human Services (SCDHHS).

The fee schedule rates were developed to consider the unique costs of providing services via the ACT model. Services required to be provided by an ACT team are described in section 3.1-A Limitation Supplement.

The billing unit is one day. ACT per diems may be billed only on days when the ACT team has performed face-to-face service with the beneficiary or a family member. Only one per diem may be billed per beneficiary per day.

The unit costs were derived using information gathered from (i) data from the 2022 Bureau of Labor Statistics, National Compensation Survey: Employer costs for Employee Compensation; and (ii) information collected directly from South Carolina ACT providers about topics such as staffing levels, hourly wages and training requirements, number of individuals served, costs related to salaries and wages, transportation expenses, and administrative and program support costs.

There are two different daily rates for ACT services to reflect two different ACT team sizes - small and large - each of which has distinct requirements regarding beneficiary-to-staff ratio and maximum caseload. The rates include clinical staff and supervisor salary and wages, employee related expenses, transportation and fleet vehicle expenses, and administration, program support, and overhead. Total monthly costs were divided by an assumed average number of beneficiaries served (47.5 for a small team and 100 for a large team), which was then divided by 9 (the assumed average of face-to-face contacts per month) to develop the per diem rate.

The ACT fee schedule rates are published at the following SCDHHS website address: <https://www.scdhhs.gov/resource/fee-schedules>. A uniform rate is paid to governmental and non-governmental providers.

SC 23-0008  
EFFECTIVE DATE: 07/01/23  
APPROVAL DATE: 11/29/23  
SUPERSEDES: SC 20-0006

**Annual Cost Identification and Reconciliation Process for State Owned and Non-State Owned governmental providers:**

Each State Owned and Non-State Owned governmental provider rendering rehabilitative behavioral health services will be required to submit a CMS approved annual cost report to establish the costs of their services. Allowable costs will be accumulated by practitioner and service definition. Costs by practitioner by service will be accumulated for the total population of users of the service (i.e. regardless of the source of payment). Allowable costs will be classified as follows:

**Direct Costs:**

- 1) Directly chargeable salary costs of the practitioner(s) providing the service and associated fringe benefits,
- 2) Materials, supplies excluding injectibles, and non-capital related equipment expenditures required by the practitioners for the provision of service,
- 3) Required training and any associated travel costs of the practitioners, and
- 4) Any costs not noted above but directly assignable excluding subcontract arrangements for direct service delivery and costs included in indirect cost determination.

**Supervision:**

Costs of supervisory staff will be added to the direct costs associated with practitioners of specific services. Allowability of supervisory costs is determined based on the practitioners requiring supervision in accordance with the Rehabilitative Service definitions as outlined under Attachment 3.1-A. The provider types affected include: Registered Nurses, Licensed Practical Nurses, and all Masters Level, Bachelors Level, and High School Level professionals. Time and effort reports completed in accordance with HIM-15, Chapter 2300, Section 2313.2 (E) will be used to determine supervision costs.

**Indirect Costs:**

Allowable indirect costs can be determined in one of two ways:

1. The application of the provider's federally approved indirect cost rate (or federally approved cost allocation plan) or