

## **Table of Contents**

**State/Territory Name: South Carolina**

**State Plan Amendment (SPA) #: 23-0015**

This file contains the following documents in the order listed:

- 1) Approval Letter
- 2) CMS-179 Summary Form
- 3) 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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March 18, 2024

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) 23-0015

Dear Director Kerr:

The Centers for Medicare & Medicaid Services (CMS) reviewed your Medicaid State Plan Amendment (SPA) submitted under transmittal number (TN) 23-0015. This SPA proposes to add Multisystemic Therapy (MST) to the South Carolina Rehabilitative Services benefit.

We conducted our review of your submittal according to statutory requirements in 42 CFR 440.130(d) and 1905(a)(13). This letter informs you that South Carolina's Medicaid SPA TN 23-0015 was approved on March 18, 2024, with an effective date of January 1, 2024.

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

Digitally signed by  
Ruth Hughes -S  
Date: 2024.03.18  
10:58:25 -05'00'

Ruth A. Hughes, Acting Director  
Division of Program Operations

Enclosures

cc: Margaret Alewine  
Shelia Chavis

<b>TRANSMITTAL AND NOTICE OF APPROVAL OF STATE PLAN MATERIAL FOR: CENTERS FOR MEDICARE &amp; MEDICAID SERVICES</b>	1. TRANSMITTAL NUMBER <u>2</u> <u>3</u> — <u>0</u> <u>0</u> <u>1</u> <u>5</u>	2. STATE <u>S</u> <u>C</u>
	3. PROGRAM IDENTIFICATION: TITLE OF THE SOCIAL SECURITY ACT <input checked="" type="radio"/> XIX <input type="radio"/> XXI	
TO: CENTER DIRECTOR CENTERS FOR MEDICAID & CHIP SERVICES DEPARTMENT OF HEALTH AND HUMAN SERVICES	4. PROPOSED EFFECTIVE DATE <b>January 1, 2024</b>	
5. FEDERAL STATUTE/REGULATION CITATION <b>42 CFR 440.130(d) 1905(a)(13)</b>	6. FEDERAL BUDGET IMPACT (Amounts in WHOLE dollars) a. FFY <u>2024</u> \$ <u>223,158</u> b. FFY <u>2025</u> \$ <u>297,544</u>	
7. PAGE NUMBER OF THE PLAN SECTION OR ATTACHMENT  Attachment 3.1-A Limitation Supplement page 6c.10.2 (New Page), 6c.25, 6c.26, 6c.27, 6c.28, 6c.29, 6c.30  Attachment 4.19-B page 6.1, 6.1d.a.	8. PAGE NUMBER OF THE SUPERSEDED PLAN SECTION OR ATTACHMENT (If Applicable)  Attachment 3.1-A Limitation Supplement page 6c.25, 6c.26, 6c.27, 6c.28, 6c.29, 6c.30  Attachment 4.19-B page 6.1, 6.1d.a	

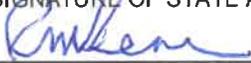
9. SUBJECT OF AMENDMENT  
This plan amendment will add Multisystemic Therapy to the array of rehabilitative behavioral health service interventions available to South Carolina beneficiaries.

10. GOVERNOR'S REVIEW (Check One)

GOVERNOR'S OFFICE REPORTED NO COMMENT  OTHER, AS SPECIFIED:

COMMENTS OF GOVERNOR'S OFFICE ENCLOSED

NO REPLY RECEIVED WITHIN 45 DAYS OF SUBMITTAL

11. SIGNATURE OF STATE AGENCY OFFICIAL 	15. RETURN TO South Carolina Department of Health and Human Services Post Office Box 8206 Columbia, SC 29202-8206
12. TYPED NAME Robert M. Kerr	
13. TITLE Director	
14. DATE SUBMITTED Dec. 29, 2023	

**FOR CMS USE ONLY**

16. DATE RECEIVED December 29, 2023	17. DATE APPROVED March 18, 2024
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**PLAN APPROVED - ONE COPY ATTACHED**

18. EFFECTIVE DATE OF APPROVED MATERIAL January 1, 2024	19. SIGNATURE OF APPROVING OFFICIAL <b>Ruth Hughes -S</b> <small>Digitally signed by Ruth Hughes -S Date: 2024.03.18 10:57:57 -05'00'</small>
20. TYPED NAME OF APPROVING OFFICIAL Ruth A. Hughes	21. TITLE OF APPROVING OFFICIAL Acting Director, Division of Program Operations

22. REMARKS  
3/12/2024 SC approved pen and ink change to Box 5: add 1905(a)(13)

**Rehabilitative Services (con't.)**

19. **Multisystemic Therapy (MST)**: MST is an intensive, evidence-based family and community-based treatment that addresses the externalizing behaviors of youth who have significant clinical impairment in disruptive behavior, mood and/or substance use. MST component services include counseling, therapy, and psychoeducation. MST is provided using a home-based model of service delivery for youth and their families, however services are provided for the direct benefit of the beneficiary. MST focuses on youth who are at high risk of out-of-home placement or may be returning home from a higher level of care. MST seeks to understand and intervene with youth within their network of systems, including family, peers, school and neighborhood/community.

MST services are delivered in the natural environment (e.g., home, school, community). The required supervision, consultation, and monitoring provided through the evidence-based MST model work to uphold treatment fidelity expectations around service delivery intensity/frequency. MST also requires a rigorous quality assurance and improvement plan, ongoing training, and regular measures of fidelity to ensure services are delivered as per model standards.

Youth up to age 21 who do not fall within the age guidelines may receive services that are comparable in intensity if medically necessary.

- a) **Limitations of Services**: MST includes 48 encounters total over a period of 120 days, with the ability to request additional service units when medically necessary. MST is an inclusive service and should not be provided concurrently with Group or Family Therapy, outpatient or inpatient substance use disorder services (except for opioid use disorders), Partial Hospitalization, or Intensive Outpatient.
  
- b) **Staff Providing Services**: MST providers are masters or bachelors level professionals with specific training and mastery of the MST model. Supervision of services is provided by qualified clinical professionals as specified under the "Staff Qualifications" section (see pages 6c.23-6c.32).

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, MST,  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, MST,  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, MST,  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, MST,  SUD Level of Treatment: II.1, 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 quired	ADA, ADS, BMod, BHS, CIS, CM, DA, FS, FP, GP, IP, MFGP, PRS, SPD, SAC, ST, TCC, ACT, MST,  SUD Level of Treatment: II.1, 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 (for ACT services only)	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, MST

Title of Professional	Level of Education/Degree/or Experience Required	License or Certification Required	Supervision	Services Able to Provide
Certified Substance Abuse Professional	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	SC Association of Alcoholism and Drug Abuse Counselors Certification Commission and/or NAADAC Association for Addiction Professionals	None required	ACT, ADA, ADS, BMod, BHS, CM, DA**, FS, FP*, GP*, IP*, MFGP*, TCC, CIS, PRS, SPD, SAC, ST, MST,  SUD Level of Treatment: II.I, II.5, III.2-D, III.7-D, III.5-R, III.7-R, III.7-RA
Co-occurring Disorder Professional	May have qualifications of the LAC or Certified Substance Abuse Professional as listed above; master of addiction counseling	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	None required	ACT, ADA, ADS, BMod, BHS, CIS, CM, DA, FS, FP, GP, IP, MFGP, PRS, SPD, SAC, ST, TCC, CIS, PRS, SPD, SAC, ST, MST,  SUD Level of Treatment: II.I, II.5, III.2-D, III.7-D, III.5-R, III.7-R, III.7-RA
Clinical Chaplain	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	Documentation of training and experience	None required	ADA, ADS, BMod, BHS, CM, DA**, FS, FP*, GP*, IP*, MFGP*, TCC, CIS, PRS, SPD, SAC, ST, ACT, MST  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
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, MST,  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, MST,  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, MST
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, MST
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, MST

In accordance with federal interpretation, the disease management contracts are risk contracts. The method of payment has been developed using actuarially sound methodology per 42 CFR438.6 (c).

The State will pay the DMOs a per member per month capitated fee based on the total eligible population, and the prevalence of each disease within the total population.

The State expects a minimum, annual net cost savings of five percent (5%) in the overall medical costs of those beneficiaries with asthma, diabetes or hypertension. The guaranteed, annual net savings is defined as total savings minus SCDHHS expenditures on disease management services under the contract.

If the amount of guaranteed minimum, annual net savings is not achieved, the DMOs will pay the difference between the guaranteed minimum, annual net savings and the actual net savings to the SCDHHS. The DMOs will also be required to forfeit their fees.

#### 13.d Rehabilitative Services

Rehabilitative behavioral health services are medical or remedial services that have been recommended by a physician or other licensed practitioner of the healing arts within the scope of their practice, under South Carolina State Law and as may be further determined by the South Carolina Department of Health and Human Services (SCDHHS) for maximum reduction of physical or mental disability and restoration of a beneficiary to their best possible functional level. The following services are considered Medicaid Rehabilitative services:

Behavioral Health Screening, Behavior Modification, Crisis Management, Diagnostic Assessment, Family Therapy, Family Support, Multisystemic Therapy, Group Therapy, Individual Therapy, Medication Management, Peer Support Services, Rehabilitative Psychosocial Services, Assertive Community Treatment, Therapeutic Child Care, Service Plan Development, Substance Abuse Counseling, and Substance Abuse Examination.

In order to develop Medicaid payment rates by provider type (i.e. practitioner) for each service listed above, the Medicaid Agency employed the following reimbursement methodology:

1. First, the agency developed annual compensation amounts for each provider type:
  - Salary data was obtained from the South Carolina Office of Human Resources (SCOHR) Classifications Manual (midpoint per position salary data) as well as the May 2008 South Carolina Occupational Employment and Wage Estimates from the United States Department of Labor (mean salary data). For unclassified professional positions that are not identified within the SCOHR Classification Manual, provider compensation amounts were obtained from applicable providers.

SC 23-0015

EFFECTIVEDATE: 01/01/24

APPROVAL DATE: 03/18/24

SUPERSEDES: SC 22-0014

**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/providers/fee-schedules>. A uniform rate is paid to governmental and non-governmental providers.

**Multisystemic Therapy (MST)**

Effective on or after January 1, 2024, the Medicaid Agency will reimburse for MST services. MST providers must be part of a licensed MST team in good standing with MST Services, Inc, and have the training required to implement the evidence-based practice. Services are described in section 3.1-A Limitation Supplement.

MST is reimbursed based on a per diem unit of service, which was developed considering the specific costs of implementing this model. The billing unit is one day. MST per diems may be billed only on days when the provider has performed a 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 South Carolina MST providers regarding the following: staffing levels; licensing, consultation, and training requirements; volume of MST services provided; costs related to salaries and wages (including cost consideration for providers' availability 24 hours per day, 7 days per week, 365 days per year); transportation expenses; and administrative, overhead, and program support costs.

Except as otherwise noted in the plan, state-developed fee schedule rates are the same for both governmental and private providers. All rates are published on the SCDHHS website <https://www.scdhhs.gov/providers/fee-schedules>.

SC 23-0015  
EFFECTIVE DATE: 01/01/24  
APPROVAL DATE: 03/18/24  
SUPERSEDES: SC 23-0008