DEPARTMENT OF HEALTH AND HUMAN SERVICES HEALTH CARE FINANCING ADMINISTRATION	FORM APPROVED OMB NO. 0938-0193	
TRANSMITTAL AND NOTICE OF APPROVAL OF STATE PLAN MATERIAL	1. TRANSMITTAL NUMBER: SC 10-007	2. STATE South Carolina
FOR: HEALTH CARE FINANCING ADMINISTRATION	PROGRAM IDENTIFICATION: TITLE XIX OF THE SOCIAL SECURITY ACT (MEDICAID)	
TO: REGIONAL ADMINISTRATOR HEALTH CARE FINANCING ADMINISTRATION DEPARTMENT OF HEALTH AND HUMAN SERVICES	4. PROPOSED EFFECTIVE DATE September 15, 2010	
5. TYPE OF PLAN MATERIAL (Check One):  NEW STATE PLAN  AMENDMENT TO BE	CONSIDERED AS NEW PLAN	
COMPLETE BLOCKS 6 THRU 10 IF THIS IS AN AME		
6. FEDERAL STATUTE/REGULATION CITATION:	7. FEDERAL BUDGET IMPACT: Estimated @ 7.43% for 2011 a. FFY 2010 (\$ 74,606) b. FFY 2011 (\$1,629,675)	
8. PAGE NUMBER OF THE PLAN SECTION OR ATTACHMENT:	9. PAGE NUMBER OF THE SUPERSEDED PLAN SECTION OR ATTACHMENT (If Applicable):	
Supplemental 1 to Attachment 4.19-B Pages 1, 2, &3	Supplemental 1 to Attachment 4.19-B, Pages 1, 2 & 3	
10. SUBJECT OF AMENDMENT: Change methods and standards for establishing payment rates as it relates to Pharmacy Services  11. GOVERNOR'S REVIEW (Check One):  ☐ GOVERNOR'S OFFICE REPORTED NO COMMENT ☐ GOVERNOR'S OFFICE REPORTED NO COMMENT ☐ GOVERNOR'S OFFICE REPORTED NO COMMENT		
☐ COMMENTS OF GOVERNOR'S OFFICE ENCLOSED ☐ NO REPLY RECEIVED WITHIN 45 DAYS OF SUBMITTAL	Mrs. Forkner was designated by the Governor to review and approve all State Plans	
12. SIGNATURE OF STATE AGENCY OFFICIAL:	16. RETURN TO:	
13. TÝPEĎ NAME: Emma Forkner  14. TITLE: Director  15. DATE SUBMITTED:	South Carolina Department of Health and Human Services Post Office Box 8206 Columbia, South Carolina 29202-8206	
August 27, 2010		
FOR REGIONAL OF	FICE USE ONLY	
17. DATE RECEIVED:	18. DATE APPROVED:	
08/30//10	11/17/10	
PLAN APPROVED - ONE COPY ATTACHED		
19. EFFECTIVE DATE OF APPROVED MATERIAL:	20. SIGNATURE OF REGIONAL OF	FICIAL:
21. TYPED NAME: 09/15/10  Jackie Glaze	22. TITLE: Associate Regional Admin Division of Medicaid & Ch	
23. REMARKS:		

Approved with following change as authorized by State Agency on email and letter dated 11/03/10.

Block # 6 changed to read: Section 1902(n) of the Social Security Act.