

Revision: HCFA-PM-91-4 (BPD)  
AUGUST 1991

Supplement 1 to ATTACHMENT 4.19-B  
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OMB No.: 0938-

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State/Territory: South Carolina

METHODS AND STANDARDS FOR ESTABLISHING PAYMENT RATES -  
OTHER TYPES OF CARE

Payment of Medicare Part A, Part B and Part C Deductible/Coinsurance

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Except for a nominal recipient copayment (as specified in Attachment 4.18 of this State plan), if applicable, the Medicaid agency uses the following general method for payment:

1. Payments are limited to State plan rates and payment methodologies for the groups and payments listed below and designated with the letters SP.

For specific Medicare services which are not otherwise covered by this State plan, the Medicaid agency uses Medicare payment rates unless a special rate or method is set out on Page 3 in item D of this attachment (see 3. below).

2. Payments are up to the full amount of the Medicare rate for the groups and payments listed below, and designated with the letters MR.
3. Payments are up to the amount of a special rate, or according to a special method, described on Page 3 in items A, B and C of this attachment, for those groups and payments listed below and designated with the letters NR.
4. Any exceptions to the general methods used for a particular group or payment are specified on Page 3 in item A of this attachment (see 3. above).

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**TN No. SC 11-012**

**Supersedes**

**TN No. SC 10-007**

**Approval Date: 10-17-11**

**Effective Date: 08/09/11**

**HCFA ID: 7982E**

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QMBs:	Part A <u>NR</u>	Deductibles	<u>NR</u>	Coinsurance
	Part B <u>NR</u>	Deductibles	<u>NR</u>	Coinsurance
	Part C <u>NR</u>	Deductibles	<u>NR</u>	Coinsurance

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Other	Part A <u>NR</u>	Deductibles	<u>NR</u>	Coinsurance
Medicaid	Part B <u>NR</u>	Deductibles	<u>NR</u>	Coinsurance
Recipients	Part C <u>NR</u>	Deductibles	<u>NR</u>	Coinsurance

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Dual	Part A <u>NR</u>	Deductibles	<u>NR</u>	Coinsurance
Eligible	Part B <u>NR</u>	Deductibles	<u>NR</u>	Coinsurance
(QMB Plus)	Part C <u>NR</u>	Deductibles	<u>NR</u>	Coinsurance

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OTHER TYPES OF CARE

Payment of Medicare Part A, Part B and Part C Deductible/Coinsurance

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- A. Effective with claims processed on or after August 9, 2011, payment for Medicare Part A coinsurance and deductibles (other than nursing facilities) will be reimbursed as follows:

The Medicaid payment will amount to the Medicaid claim payment less the amount paid by Medicare not to exceed the sum of the Medicare coinsurance and deductible. The Medicaid claim payment amount will be calculated in accordance with Attachment 4.19-A of the South Carolina State Plan.

- B. Effective with claims processed on or after August 9, 2011, payment for Medicare Part B coinsurance and deductibles will be reimbursed as follows:

The Medicaid payment will amount to the Medicaid claim payment less the amount paid by Medicare not to exceed the sum of the Medicare coinsurance and deductible.

- C. Effective with claims processed on or after August 9, 2011, payment for Medicare Part C coinsurance and deductibles will be reimbursed as follows:

The Medicaid payment will amount to the Medicaid claim payment less the amount paid by Medicare not to exceed the sum of the Medicare coinsurance and deductible (and/or co-payments and deductibles).

- D. For services which are covered by Medicare but are not covered by the SC State Plan, the Medicaid claim payment referenced in paragraphs A, B and C above, will be 75% of the Medicare rate for QMB recipients. There will be no payment for non-covered SC State Plan services for non-QMBs. See section 4.19-D of the Medicaid State Plan for the limitation on nursing home coinsurance payments.

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TN No. SC 11-012

Supersedes

TN No. SC 10-007

Approval Date: 10-17-11

Effective Date: 08/09/11

HCFA ID: 7982