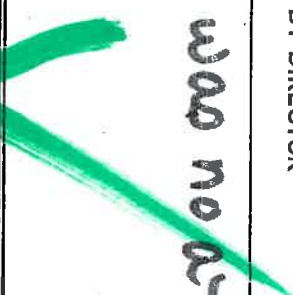


DEPARTMENT OF HEALTH AND HUMAN SERVICES
OFFICE OF DIRECTOR

ACTION REFERRAL

TO <i>Myers</i>	DATE <i>7-1-10</i>
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DIRECTOR'S USE ONLY	ACTION REQUESTED
1. LOG NUMBER <i>300514</i>	<input type="checkbox"/> Prepare reply for the Director's signature DATE DUE _____ <input type="checkbox"/> Prepare reply for appropriate signature DATE DUE _____ <input type="checkbox"/> FOIA DATE DUE _____ <input checked="" type="checkbox"/> Necessary Action
2. DATE SIGNED BY DIRECTOR	* There was no attachment. 

APPROVALS (Only when prepared for director's signature)	APPROVE	* DISAPPROVE (Note reason for disapproval and return to preparer.)	COMMENT
1.			
2.			
3.			
4.			

Thomas W. Uhde, M.D.
Professor and Chairman

June 22, 2010

Emma Forkner
Director
South Carolina Department of
Health and Human Services
P.O. Box 8206
Columbia, SC 29202

RECEIVED
JUN 30 2010
Department of Health & Human Services
OFFICE OF THE DIRECTOR

Dear Director Forkner:

Over the past two years, we have been an active State Agency participant in the revisions to the State Plan Amendment for Medicaid Rehabilitation Health Services. It has recently come to our attention that the Medical University of South Carolina (MUSC) would be best suited to participate in the State Plan Amendment's Clinic Services Option that currently applies to the South Carolina Department of Mental Health under the Community Mental Health Service Provider Manual.

The vast majority of the Medicaid mental health treatment services provided at MUSC are located within the Department of Psychiatry and Behavioral Sciences' outpatient and Children's Day Treatment programs. Our clinical services fall closely in line with the outpatient clinical services being provided by the South Carolina Department of Mental Health's Community Mental Health Clinics. As such, we believe the inclusion of the majority of the outpatient mental health services under the State Plan Amendment's Clinic Service Option is a reasonable request.

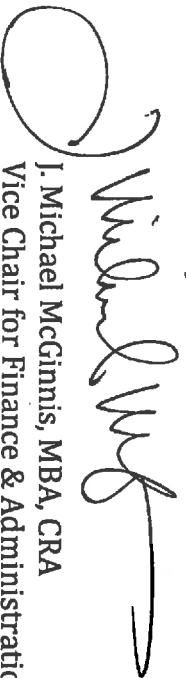
It is our understanding that participating in the State Plan Amendment's Clinic Services Option would allow MUSC to provide Medicaid billable services under both the Community Mental Health Services Provider Manual as well as the Rehabilitation Behavioral Health Services Provider Manual. The majority of our services would be billed under the Community Mental Health Services Provider Manual procedure codes except for services like Behavioral Modification, Peer Support, Family Support, and other paraprofessional services allowed under the Behavioral Health Services Provider Manual.

To be clear regarding our understanding of reimbursement for services under the Clinic Option, I am attaching our current rates for approved services. It is our understanding that the reimbursement for clinical services under Clinic Option would follow the services, procedure codes, unit time, maximum units/day and the rate/unit as detailed in the attachment. If that is not in fact the case, we would need

additional information and guidance regarding the reimbursement rates for services provided.

As we are quickly approaching the July 1, 2010 implementation of the State Plan Amendment, our hope is to receive a timely review and guidance regarding our request

Sincerely,

A handwritten signature in black ink, appearing to read "J. Michael McGinnis". The signature is fluid and cursive, with a large initial "J" and a long, sweeping horizontal line at the end.

J. Michael McGinnis, MBA, CRA
Vice Chair for Finance & Administration
Department of Psychiatry & Behavioral Science
Chief Financial Officer
Mental Health Service Line

Cc: Felicity Myers, Deputy Director Medical Services