

South Carolina

Medicaid Program: South Carolina Medicaid

Medicaid Program Administrator: South Carolina Health and Human Services Dept.

Regional Telehealth Resource Center:

Southeast Telehealth Resource Center

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| STATE LAW/REGULATIONS | MEDICAID PROGRAM |
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| Definition of telemedicine/telehealth | |
| <p>South Carolina law addresses telemedicine under veterinary services, stating, “telemedicine is an audio, video, or data communication of medical information.”</p> <p><i>Source: SC Code Annotated Sec. 40-69-20.</i></p> <p>Telemedicine' means the practice of medicine using electronic communications, information technology, or other means between a licensee in one location and a patient in another location with or without an intervening practitioner.</p> <p><i>Source: SC Code Annotated Sec. 40-47-20(52).</i></p> | <p>“Telemedicine is the use of medical information about a patient that is exchanged from one site to another via electronic communications to provide medical care to a patient in circumstances in which face-to-face contact is not necessary.</p> <p>In this instance, a physician or other qualified medical professional has determined that medical care can be provided via electronic communication with no loss in the quality or efficacy of the care.</p> <p>Electronic communication means the use of interactive telecommunication equipment that typically includes audio and video equipment permitting two-way, real-time interactive communication between the patient and the physician or practitioner at the referring site. Telemedicine includes consultation, diagnostic, and treatment services.”</p> <p><i>Source: SC Health and Human Svcs. Dept., Physicians Provider Manual, p. 2-54 (Mar. 2017) & Local Education Manual, p. 2-8. (Apr. 1, 2017).</i></p> |
| Live Video Reimbursement | |
| <p>No reference found.</p> | <p>South Carolina Medicaid will reimburse for live telemedicine and tele-psychiatry.</p> <p>Eligible services:</p> <ul style="list-style-type: none"> • Office or other outpatient visits; • Inpatient consultation; • Individual psychotherapy; • Pharmacologic management; • Psychiatric diagnostic interview examination and testing; • Neurobehavioral status examination; • Electrocardiogram interpretation and report only; Echocardiography. |

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| | <p>Eligible services must meet these requirements:</p> <ul style="list-style-type: none"> • The medical care is individualized, specific, and consistent with symptoms or confirmed diagnosis of the illness or injury under treatment, and not in excess of the beneficiary's need; • The medical care can be safely furnished, and no equally effective and more conservative or less costly treatment is available statewide. <p>Distant site eligible, reimbursed providers:</p> <ul style="list-style-type: none"> • Physicians; • Nurse practitioners. • Physician Assistants <p>Services provided by allied health professionals are not covered.</p> <p>Referring site presenters may be required to facilitate the delivery of the service.</p> <p><i>Source: SC Health and Human Svcs. Dept. Physicians Provider Manual, p. 2-56 (Mar. 1, 2017) & Local Education Manual, p. 2-8 to 2-14. (Apr. 1, 2017).</i></p> <p>These community mental health services are ineligible:</p> <ul style="list-style-type: none"> • Injectables; • Nursing services; • Crisis intervention • Individual, family, group and multiple family psychotherapy • Psychological testing which require "hands-on" encounters; • Mental health assessment by non-physician; and • Service Plan Development. <p><i>Source: SC Health and Human Svcs. Dept. Community Mental Health Services Provider Manual, p. 2-126 (Jan. 1, 2017).</i></p> |
| Store and Forward Reimbursement | |
| No reference found. | <p>South Carolina Medicaid will not reimburse for store and forward due to the requirement that the beneficiary must be present and participating in the visit.</p> <p><i>Source: SC Health and Human Svcs. Dept. Physicians Provider Manual, p. 2-56 (Mar. 1, 2017) & Local Education Manual, p. 2-8 to 2-14. (Apr. 1, 2017).</i></p> |
| Remote Patient Monitoring Reimbursement | |
| No reference found. | Medicaid Home Again Program for Community Long Term Care. |

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| | <p>Medical telemonitoring will be of body weight, blood pressure, oxygen saturation, blood glucose levels, and basic hear rate information, at a minimum. Providers must meet certain conditions to participate.</p> <p>Community Choices waiver participants must meet the following criteria to participate:</p> <ul style="list-style-type: none"> • Have a primary diagnosis of Insulin Dependent Diabetes Mellitus, Hypertension, Chronic Obstructive Pulmonary Disease and/or Congestive Heart Failure; and • History of at least two hospitalizations and/or emergency room visits in the past 12 months; and • Have a primary care physician that approves the use of telemonitoring service and is solely responsible for receiving and acting upon the information received via the service; and • Be capable of using the telemonitoring equipment and transmitting the necessary data or have an individual available to do so. <p>Services to be provided:</p> <ul style="list-style-type: none"> • Unit of service is one day of direct telemonitoring provided to/for a participant in the participant's place of residence. • The equipment must record at a minimum body weight, blood pressure, oxygen saturation, blood glucose, and basic heart rate information. Data must be transmitted electronically and any transmission costs shall be incurred by the provider of the telemonitoring service. • Daily reimbursement rate is inclusive of monitoring of data, charting data from the monthly monitoring, visits or calls made to follow up with the participants and/or caregiver, phone calls made to primary care physician(s), all installation of the equipment in the home and training on the equipment's use and care in the home, including equipment removal. • Provider shall provide telemonitoring service seven days per week for authorized time period. <p>Other requirements on staffing, background checks, installation and equipment are required.</p> <p><i>Source: SC Health and Human Svcs. Dept. Community Long Term Care Provider Manual, p. 6-170 (April 1, 2017).</i></p> |
| Email/Phone/FAX | |
| No reference found. | No reimbursement for email. No reimbursement for telephone. |

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| | <p>No reimbursement for FAX. No reimbursement for video cell phone interactions.</p> <p><i>Source: SC Health and Human Svcs. Dept. Physicians Provider Manual, p. 2-56 (Mar. 1, 2017) & Local Education Manual, p. 2-8 to 2-14. (Apr. 1, 2017).</i></p> |
| Online Prescribing | |
| <p>A licensee shall not establish a physician-patient relationship by telemedicine for the purpose of prescribing medication when an in-person physical examination is necessary for diagnosis.</p> <p>Schedule II and Schedule III prescriptions are not permitted except for those Schedule II and Schedule III medications specifically authorized by the board, which may include, but not be limited to, Schedule II-nonnarcotic and Schedule III-nonnarcotic medications.</p> <p>To establish a physician-patient relationship via telemedicine, the provider must:</p> <ul style="list-style-type: none"> • Comply with HIPAA • Adhere to current standards of practice • Provide an appropriate examination • Verify the identity and location of the patient • Establish a diagnosis through the use of accepted medical practices • Ensure availability of follow-up care • Prescribe within a practice setting fully in compliance with the law. <p>Schedule II and III prescriptions are not permitted except as specifically authorized by the board.</p> <p><i>Source: SC Code Annotated Sec. 40-47-37.</i></p> | <p>No reference found.</p> |
| Consent | |
| No reference found. | No reference found. |
| Location | |
| No reference found. | <p>Referring sites (also known as originating sites) must be located in the South Carolina Medical Service Area.</p> <p>Eligible originating (referring) sites:</p> <ul style="list-style-type: none"> • Practitioner offices; • Hospitals (inpatient and outpatient); • Rural Health Clinics; • Federally Qualified Health Centers; • Community Mental Health Centers. <p>Distant (consultant) sites must be located in the SC Medical Service Area, which is the state of SC and areas in NC and GA within 25 miles of the SC border.</p> |

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| | <i>Source: SC Health and Human Svcs. Dept., Physicians Provider Manual, p. 2-54 & 2-55 (Mar. 1, 2017) & Local Education Manual, p. 2-8 to 2-14. (Apr. 1, 2017).</i> |
| Cross-State Licensing | |
| The physician must be licensed in South Carolina, however they do not need to reside in South Carolina. | No reference found. |
| Private Payers | |
| No reference found. | No reference found. |
| Site/Transmission Fee | |
| No reference found. | The referring site is eligible to receive a facility fee. <i>Source: SC Health and Human Svcs. Dept., Physicians Provider Manual, p. 2-58 (Mar. 1, 2017) & Local Education Manual, p. 2-8 to 2-14. (Apr. 1, 2017).</i> |
| Miscellaneous | |
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Comments: In 2011, a new state law, SCSB 588, established a statewide system of stroke care. It requires the Department of Health and Environmental Control to distribute to emergency medical services providers a list of primary stroke centers, telemedicine stroke centers, and other certified programs.

Effective July 1, 2014 the South Carolina Department of Health and Human Services will implement a project to leverage the use of teaching hospitals to provide rural physician coverage, expand the use of telemedicine, and ensure targeted placement and support of adequate OB/GYN services.

Source: South Carolina Healthy Connections Medicaid, Provider Alert