

South Carolina
DEPARTMENT OF HEALTH AND HUMAN SERVICES
Post Office Box 8206
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www.scdhhs.gov
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MEDICAID BULLETIN

Phys
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Lab

TO: Providers Indicated

SUBJECT: 2013 Medicare Deductible, Coinsurance and Medicaid Blood Deductible Rates for Dually Eligible Medicaid Members

The South Carolina Department of Health and Human Services (SCDHHS) has updated its reimbursement calculations for Medicare Deductible, Coinsurance, and Blood Deductibles to reflect the new 2013 Medicare Rates for Dually Eligible Medicaid members.

SCDHHS' payment for dually eligible members is equal to the allowed amount minus the Medicare payment or the sum of the Coinsurance, Deductible, and Blood Deductible (up to 3 units), whichever is less. The Centers for Medicare and Medicaid Services (CMS) has published new amounts for patients' Deductible and Coinsurance. Effective with dates of service on or after January 1, 2013, the new rates are as follows:

Inpatient Deductible	\$1,184.00
Outpatient Deductible	\$ 147.00
Medicaid Blood Deductible	\$ 100.00 per unit (not to exceed 3)
Inpatient Coinsurance	\$8,880.00 (per period of illness 61-90 days)
Outpatient Coinsurance	20% of Medicare's allowed charges

If you have any questions regarding this bulletin, please contact the Provider Service Center at (1-888-289-0709). Thank you for your continued support and participation in the South Carolina Medicaid program.

/s/
Anthony E. Keck
Director