



**MEDICARE-MEDICAID COORDINATION OFFICE**

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**DATE:** September 05, 2025

**TO:** South Carolina Applicable Integrated Plan (AIP) D-SNPs

**FROM:** Kerry Branick  
Deputy Director, Medicare-Medicaid Coordination Office

**SUBJECT:** South Carolina AIP D-SNPs: Updates to Contract Year 2026 Member Handbook

CMS and the state of South Carolina are issuing an update to Chapter 1 of the CY 2026 Member Handbook for use by applicable integrated plan (AIP) dual eligible special needs plans (D-SNPs) operating in South Carolina. MMCO will not issue a revised CY 2026 Member Handbook model for changes included in this memorandum. We instruct AIP D-SNPs in South Carolina to update their CY 2026 Member Handbook based on the information provided in this memorandum.

These updates include:

**Member Handbook**

- **Chapter 1 update- last paragraph of Section E, bottom of page 9 currently states:**

If you lose eligibility but can be expected to regain it within *[Insert the time period for deemed continued eligibility in days or months. Plans can choose any length of time from two to six months for deeming continued eligibility, as long as they apply the criteria consistently across all members and fully inform members of the policy.]* then you're still eligible for our plan.

Call Member Services for more information.

**Plans must replace the current language with the following language:**

If you lose eligibility but can be expected to regain it within our plan's *[Insert the time period for deemed continued eligibility in days or months. Plans can choose any length of time from two to six months for deeming continued eligibility, as long as they apply the criteria consistently across all members and fully inform members of the policy.]*-month period of deemed continued eligibility, we'll continue to provide all plan-covered Medicare benefits. However, we will not cover your Healthy Connections Medicaid services and your Medicare cost sharing amounts. In this period of deemed continued eligibility, you

can keep your Medicare benefits, but not your Healthy Connections Medicaid benefits.

Contact our Member Services team for more information.

Hard copy Member Handbooks must include this information before they are mailed to enrollees whenever possible. If updates to the hard copy Member Handbook are not practicable – for example, if they have already been printed – the model errata may be used to communicate the updated and accurate information until current stock of outdated materials is depleted.

This memorandum will also be posted to the Medicare-Medicaid Coordination Office’s “D-SNPs: Integration & Unified Appeals & Grievance Requirements” webpage at <https://www.cms.gov/medicaid-chip/medicare-coordination/qualified-beneficiary-program/d-snps-integration-unified-appeals-grievance-requirements> grouped alphabetically by state under the “Model Materials” heading.

If you have any questions about the contents of this memorandum, please contact the Medicare-Medicaid Coordination Office at [MMCO\\_DSNPOperations@cms.hhs.gov](mailto:MMCO_DSNPOperations@cms.hhs.gov).