

CHANGE CONTROL RECORD

Date	Section	Page(s)	Change
02-07-12	Cover	-	Manual cover updated January 1, 2012
02-07-12	Appendix 1	18 24 30	<ul style="list-style-type: none"> • Updated edit code 402 • Updated edit code 544 • Updated edit code 636, 637, and 642
02-01-12	3	20 22	<ul style="list-style-type: none"> • Added a note regarding The Web Tool • Updated the Remittance Advice -835 Transaction
02-01-12	5	9	Updated the Fairfield county office number
02-01-12	Appendix 1	18 30 42 49	<ul style="list-style-type: none"> • Updated edit code 402 • Updated edit code 636, 637, and 642 • Updated edit code 766 • Updated edit code 867
01-01-12	1	2-5, 20, 24	Deleted IVRS Information per “Retirement of Toll Free Eligibility Verification Line” bulletin released 11-18-11
01-01-12	3	- 23	<ul style="list-style-type: none"> • Updated hyperlinks throughout section • Updated EFT information
01-01-12	5	1	Deleted IVRS Information per “Retirement of Toll Free Eligibility Verification Line” bulletin released 11-18-11
01-01-12	Appendix 1	62 -	<ul style="list-style-type: none"> • Deleted IVRS Information per “Retirement of Toll Free Eligibility Verification Line” bulletin released 11-18-11 • Updated CARCs and RARCs throughout the document
01-01-12	Managed Care Supplement	9	Deleted IVRS Information per “Retirement of Toll Free Eligibility Verification Line” bulletin released 11-18-11
01-01-12	TPL Supplement	2	Deleted IVRS Information per “Retirement of Toll Free Eligibility Verification Line” bulletin released 11-18-11
11-01-11	1	24	Updated TPL contact information
11-01-11	3	34, 37,	Updated TPL contact information

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Date	Section	Page(s)	Change
		43-44	
11-01-11	TPL Supplement	6, 15 12 3, 17, 19	<ul style="list-style-type: none"> • Changed Medicare timely filing requirement to two years and six months • Deleted policy to use Medicaid legacy provider number on the same line as the Medicaid carrier code • Deleted sample legacy number from UB-04 TPL Fields table • Updated TPL contact information
10-01-11	Appendix 1	14, 29 47	<ul style="list-style-type: none"> • Added edit codes 334 and 584 • Updated edit code 845
09-01-11	1	19	Deleted information regarding National Correct Coding Initiative
09-01-11	5	13	Updated zip code for Spartanburg County office
09-01-11	Appendix 1	15, 29, 30	Added edit code 361, 591, 596 and 605
08-01-11	3	-	Updated language throughout section to reflect the current billing policies including claim processing, claim submission, and copayments
08-01-11	Appendix 1	8	Updated edit codes 165 and 166
08-01-11	Managed Care Supplement	1, 5	Updated to reflect the new beneficiary copayment requirements in accordance with Public Notice posted July 8, 2011
07-01-11	5	13	Deleted PO Box address for the Spartanburg County Office
07-01-11	Appendix 1	12 43 56	<ul style="list-style-type: none"> • Updated resolution for edit code 300 • Added edit codes 840 and 841 • Updated Provider Enrollment Contact information in edit codes 941 and 944
06-11-01	5	5	Corrected Abbeville County PO Box Zip+4 Code
05-01-11	1	8, 11	Added language prohibiting payment to institutions or entities located outside of the United States

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Date	Section	Page(s)	Change
05-01-11	Appendix 1	43	Updated edit code 796
04-01-11	5	6	Updated telephone number for Beaufort County
04-01-11	Forms	-	Updated Electronic Funds Transfer Form
03-01-11	1	7, 9	Updated to reflect Medicaid Bulletin dated February 9, 2011 – Provider Service Center
03-01-11	3	18, 23, 24	Updated to reflect Medicaid Bulletin dated February 9, 2011 – Provider Service Center
03-01-11	5	4 5	Updated to reflect Medicaid Bulletin dated February 9, 2011 – Provider Service Center Added toll free number to Aiken County
03-01-11	Appendix 1	- 67	Added SCDHHS Medicaid Provider Service Center (PSC) information at top of each page in header section Made change to Edit Code 990 description
03-01-11	Appendix 2	-	Updated alpha and numeric carrier code lists to reflect Web site update on 12/14/10
03-01-11	TPL Supplement	17 24, 25	<ul style="list-style-type: none"> • Changed the name of the Provider Outreach Web site to Provider Enrollment and Education • Updated the descriptions for Form130s
02-01-11	2	33	Eliminated Family Planning Section
02-01-11	4	7	Eliminated Family Planning Section
02-01-11	Appendix 1	3	Added edit codes 079 and 080
01-01-11	1	7 19-20	<ul style="list-style-type: none"> • Updated the South Carolina Medicaid Web-based Claims Submission Tool section • Updated to reflect Medicaid Bulletin dated December 8, 2010 – Information on NCCI Edits
01-01-11	3	18, 21, 22, 24 15, 29-30	<ul style="list-style-type: none"> • Updated electronic remittance package information • Updated to reflect Medicaid Bulletin dated December 10, 2010 – Reporting Patient Liability on Claims

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Date	Section	Page(s)	Change
		22	<ul style="list-style-type: none"> Updated to reflect Medicaid Bulletin dated December 10, 2010 – Requests for Duplicate Remittance Package
01-01-11	4	7-22	Updated Family Planning Waiver Billing Codes chart
01-01-11	5	13	Added toll-free telephone number for Saluda county
01-01-11	Forms	-	Added Duplicate Remittance Request Form
01-01-11	Appendix 1	9	Added edit codes 165 and 166
01-01-11	TPL Supplement	8, 10 8 10 13 15 15	<ul style="list-style-type: none"> Removed references to Dental claims Removed language to contact program areas for missing carrier codes Added reference to CMS-1500 for correcting edit code 151 on the ECF Added edit code 165 to other TPL-related insurance edit codes list Updated Retro Medicare section to include the following: <ul style="list-style-type: none"> Changed the timely filing requirement from 90 days of the invoice to 30 days Added SCDHHS TPL recovery language Updated the Retro Health and Pay & Chase section
12-01-10	Cover	-	<ul style="list-style-type: none"> Replaced “Medicaid Provider Manual” with “South Carolina Healthy Connections (Medicaid)” Changed program name from “Medicaid Enhanced Services” to “Enhanced Services”
12-01-10	CCR	-	<ul style="list-style-type: none"> Changed program name from “Medicaid Enhanced Services” to “Enhanced Services” in headers
12-01-10	1	-	<ul style="list-style-type: none"> Changed program name from “Medicaid Enhanced Services” to “Enhanced Services” in headers
12-01-10	2	-	<ul style="list-style-type: none"> Changed program name from “Medicaid Enhanced Services” to “Enhanced Services” in headers
12-01-10	3	-	<ul style="list-style-type: none"> Changed program name from “Medicaid Enhanced Services” to “Enhanced Services” in headers
12-01-10	4	-	<ul style="list-style-type: none"> Changed program name from “Medicaid Enhanced Services” to “Enhanced Services” in headers

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Date	Section	Page(s)	Change
			Services” to “Enhanced Services” in headers
12-01-10	5	-	<ul style="list-style-type: none"> Changed program name from “Medicaid Enhanced Services” to “Enhanced Services” in headers
12-01-10	Forms	-	<ul style="list-style-type: none"> Changed program name from “Medicaid Enhanced Services” to “Enhanced Services” in headers
12-01-10	Appendices	-	Replaced “South Carolina Medicaid” with “South Carolina Healthy Connections (Medicaid)” in the headers
12-01-10	Supplements	-	Replaced “South Carolina Medicaid” with “South Carolina Healthy Connections (Medicaid)” in the headers
11-01-10	Appendix 1	8 16 32 51 52	<ul style="list-style-type: none"> Edit code 202: added information to Resolution section Edit codes 421 and 424 deleted Edit code 733 information updated in Resolution section: “Adjust the net charge in field” changed from 26 to 29 Deleted edit code 959 Deleted edit codes 962 and 963
11-01-10	TPL Supplement	3, 8, 13-14, 18-19 6, 15-17	<ul style="list-style-type: none"> Updated to reflect Medicaid Bulletin dated July 8, 2010 – Transfer of the Dental Program Administration to DentaQuest Updated to reflect Medicaid Bulletin dated September 13, 2010 – Changes to the Third Party Liability Medicare Recovery Cycle
10-01-10	1	- 1 7 10	<ul style="list-style-type: none"> Removed all reference to the SCHIP program to reflect Medicaid Bulletin dated August 19, 2010 – Changes to the Healthy Connections Kids (HCK) Program Updated Program Description section Updated the SC Medicaid Web-Based Claims Submission Tool section to reflect Medicaid Bulletin dated July 8, 2010-Transfer of the Dental Program Administration to DentaQuest Updated Freedom of Choice section
10-01-10	5	11	Correct McCormick county office street address

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Date	Section	Page(s)	Change
10-01-10	Managed Care Supplement	- 1 2 3 4 5 6 13 17	<ul style="list-style-type: none"> • Removed all references to the SCHIP program to reflect Medicaid Bulletin dated August 19, 2010 – Changes to the Healthy Connections Kids (HCK) Program • Updated Managed Care Overview • Updated Managed Care Organizations and Core Benefits paragraphs • Updated MCO Program ID card paragraph • Updated MHN Program ID card paragraph • Updated Core Benefits • Updated Exempt Services • Updated Overview • Deleted “Medicaid Managed” from “Current Medicaid Managed Care Organizations” heading and following paragraph
09-01-10	2	18 19	<ul style="list-style-type: none"> • Added rehabilitative services to bullet 1 of P/RSECE and Dental Services section • Deleted S.C. Medicaid Dental Program Referral Form for Broken Appointments
09-01-10	3	18 19 36	<p>Updated the following sections to reflect Medicaid Bulletin dated July 8, 2010 – Transfer of the Dental Program Administration to DentaQuest:</p> <ul style="list-style-type: none"> • Companion Guides • South Carolina Medicaid Web-based Claims Submission Tool • Claim-Level Adjustments
09-01-10	5	5 8 11	<ul style="list-style-type: none"> • Removed County Commissioner’s Building from the Aiken County address • Deleted Dorchester County physical address telephone number • Removed Highway 28 N from the McCormick County address
09-01-10	Forms	-	Deleted the Refund for Broken Appointments dental form
09-01-10	Appendix 1	9 -	<ul style="list-style-type: none"> • Added edit code 225 • Removed all references to the ADA Claim in the Resolution column

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Date	Section	Page(s)	Change
09-01-10	TPL Supplement	12	<ul style="list-style-type: none"> Updated the Dental Paper Claims section to delete paper claims submission instructions and added the DentaQuest contact information
		13	<ul style="list-style-type: none"> Updated the Web-Submitted Claims section with the exception to Dental claims
		18	<ul style="list-style-type: none"> Updated the TPL Resources section to include the DentaQuest contact information for TPL questions
08-01-10	5	5, 9, 11-13	<ul style="list-style-type: none"> Updated the zip codes for Aiken, Edgefield, McCormick, Newberry, and Saluda counties
		6	<ul style="list-style-type: none"> Updated the address for Barnwell County Updated the telephone number for Beaufort County
08-01-10	Appendix 1	20	<ul style="list-style-type: none"> Deleted edit code 520
		51, 52	<ul style="list-style-type: none"> Deleted Provider Enrollment e-mail address from codes 941 and 944
		59	<ul style="list-style-type: none"> Changed resolution for edit code 994
07-01-10	5	-	Updated telephone numbers and zip codes for multiple county offices
07-01-10	Forms	-	Updated the Consent for Sterilization form
07-01-10	Appendix 1	32	<ul style="list-style-type: none"> Updated edit code 714
		35	<ul style="list-style-type: none"> Updated edit code 738
07-01-10	Appendix 2	21, 22, 25, 63, 89	Changed First Health to Magellan Medicaid Administration
06-01-10	Managed Care Supplement	1	<ul style="list-style-type: none"> Updated Managed Care Overview section
		3	<ul style="list-style-type: none"> Updated Manage Care Organization (MCO), Core Benefits section
		17	<ul style="list-style-type: none"> Updated the Managed Care Disenrollment Process, Overview section
		20, 23, 25	<ul style="list-style-type: none"> Updated to reflect Medicaid Bulletin dated March 18, 2010 — Managed Care Organizational Change
05-01-10	5	1	<ul style="list-style-type: none"> Removed reference to blank form at the end of this section Replaced reference to blank form in the Forms section of this manual
03-01-10	Cover	-	Replaced the manual cover

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Date	Section	Page(s)	Change
03-01-10	Change Control Record	1, 2	Added Time Limit for Submitting Claims Medicaid Bulletin date to section 1 and section 3 entries dated 12-01-09
03-01-10	3	3, 19	Removed modem as an electronic claims transmission method
02-01-10	4	11 17 18 19 20 21 23	<ul style="list-style-type: none"> • Updated codes 86592, 86593, added code 86780, deleted code 86781 • Updated codes 88174, 88175, 88300, 88302, 88305 • Updated codes 99201, 99202, 99203, 99204 • Updated codes 99205, 99212, 99213, 99214 • Updated codes 99215, 99241, 99242, 99243, 99244 • Updated code 99245, deleted code J0550, added code J0559 • Created surgical code
02-01-10	Appendix 1	13 36	<ul style="list-style-type: none"> • Added New Edit Codes 356,357 and 358 • Updated Edit Code 738
02-01-10	Appendix 2	All	Updated Carrier Code List
01-01-10	5	5 10 12	<ul style="list-style-type: none"> • Updated Physical Address for Allendale County Office • Replaced Jasper County DSS with Jasper County DHHS • Replaced Orangeburg County DSS with Orangeburg County DHHS
01-01-10	Appendix 1	49	Updated Edit Code 932
12-01-09	1	8 25	<ul style="list-style-type: none"> • Updated policy to reflect Medicaid Bulletin dated November 13, 2009 – Electronic Remittance Package • Updated Timely Filing for Submitting Claims section to reflect Medicaid Bulletin dated November 24, 2009
12-01-09	2	3 38	<ul style="list-style-type: none"> • Added Covered Services and Procedural and Diagnostic Coding policy • Corrected formatting
12-01-09	3	1-2	<ul style="list-style-type: none"> • Updated Claim Filing Timeliness section to reflect

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Date	Section	Page(s)	Change
		17-18, 20-25	Medicaid Bulletin dated November 24, 2009 <ul style="list-style-type: none"> • Updated policy to reflect Medicaid Bulletin dated November 13, 2009 – Electronic Remittance Package
12-01-09	4	7-23 8 17	<ul style="list-style-type: none"> • Updated Billing Codes chart to remove “or” from the diagnosis codes and modifier heading • Added HCPCS codes 76830, 76856, and 76857 • Changed code 90772 to 96372
12-01-09	5	8	Updated the Dorchester County office street address
12-01-09	Appendix 1	- - 18, 19 20	<ul style="list-style-type: none"> • Replaced CARC 17 with CARC 16 • Updated CARC A1 • Updated codes 509 and 510 • Added code 533
11-01-09	Appendix 2	All	Updated carrier code list
10-01-09	1	3-4 4-6 26	<ul style="list-style-type: none"> • Updated the Medicare/Medicaid Eligibility section to include Qualified Medicare Beneficiaries (QMBs) • Updated SC Medicaid Healthy Connections language throughout section • Updated South Carolina Medicaid Bulletins and Newsletters • Changed heading to Medicare Cost Sharing
10-01-09	5	10 11 12	<ul style="list-style-type: none"> • Updated physical address for Jasper County office • Updated telephone number for Lexington County office • Updated zip codes for Orangeburg County office
10-01-09	Appendix 1	3 60	<ul style="list-style-type: none"> • Updated edit code 065 • Updated edit code 852
09-08-09	Managed Care Supplement	20	Replaced the Absolute Total Care Medicaid beneficiary card sample
09-01-09	Managed Care Supplement	21 20, 25	<ul style="list-style-type: none"> • Removed all references to CHCcares to reflect Medicaid Bulletin dated August 3, 2009 • Updated Absolute Total Care entries as following: <ul style="list-style-type: none"> ◦ Changed the company’s name to Absolute

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Date	Section	Page(s)	Change
			Total Care <ul style="list-style-type: none"> o Replaced the beneficiary card samples o Corrected contact information
08-01-09	5	14	Updated telephone number for York County office
08-01-09	Appendix 1	3	Updated edit code 062
08-01-09	Appendix 2	-	Updated carrier code list
07-01-09	5	6, 12 8 9	<ul style="list-style-type: none"> • Updated address for Bamberg and Orangeburg County offices • Updated office zip code for Darlington County • Updated telephone number for Fairfield County office
06-01-09	TPL Supplement	19	Updated Department of Insurance Web site address
05-01-09	1	1-6, 11 2 3 5 28-33	<ul style="list-style-type: none"> • Updated to reflect managed care policies and procedures effective May 1, 2009 • Updated the Eligibility subsection • Added the beneficiary contact telephone number to the South Carolina Healthy Connections Medicaid Card subsection • Removed the program start date from the SC Healthy Connections Kids SCHIP Dental Coverage subsection • Updated the Medicaid Program Integrity subsection
05-01-09	2	7	Updated to reflect managed care policies and procedures effective May 1, 2009
05-01-09	5	14	Updated telephone number for Union County office
05-01-09	Appendix 1	43	Deleted edit code 694
05-01-09	Appendix 2	-	Updated list of carrier codes
05-01-09	Managed Care Supplement	-	Updated supplement to include general policies and procedures effective May 1, 2009

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Date	Section	Page(s)	Change
04-01-09	1	2, 3, 8	Updated hyperlinks
04-01-09	2	31	Updated the Progress Reports subsection
04-01-09	3	4-6, 17, 18, 23, 31, 34	Updated hyperlinks
04-01-09	5	11	Updated telephone number for Lexington County office
04-01-09	Forms	-	Updated the following forms: <ul style="list-style-type: none"> • Updated the Case Plan form • Renamed the Service Summary Report to Progress Report and updated form • Combined Individual or Group Session Form and Patient Education into MAPPS Counseling Form
03-01-09	2	24	Updated hyperlink
03-01-09	5	3-4 8 5, 11-13	<ul style="list-style-type: none"> • Updated hyperlinks • Corrected Dorchester County's Orangeburg Road telephone number • Change DSS to DHHS in addresses for Abbeville, McCormick, Newberry, and Saluda counties
03-01-09	Forms	-	Updated the MAPPS Case Plan form
03-01-09	Appendix 1	43 72	<ul style="list-style-type: none"> • Added new edit codes 693 and 694 • Changed edit code 945 Resolution to input "26"modifier in field 18
03-01-09	Managed Care Supplement	1, 7, 10, 17, 23, 25-30, 35	Updated hyperlinks
03-01-09	TPL Supplement	8, 9, 19	Updated hyperlinks
03-01-09	2	24	Updated hyperlink
03-01-09	5	3-4 8	<ul style="list-style-type: none"> • Updated hyperlinks • Corrected Dorchester County's Orangeburg Road telephone number

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Date	Section	Page(s)	Change
		5, 11-13	<ul style="list-style-type: none"> Change DSS to DHHS in addresses for Abbeville, McCormick, Newberry, and Saluda counties
02-15-09	2	27 28 29 30	<ul style="list-style-type: none"> Updated Eligibility Criteria Updated verbiage for Needs Assessment and Intervention Case Plan Deleted “of a new participant” Updated Frequency information for Group Session Added Progress Report section
02-15-09	4	5	<ul style="list-style-type: none"> Changed the maximum of eight to four units for code T1023 Deleted “of a new participant”
02-15-09	5	5	Updated Allendale County office PO Box zip code
02-15-09	Forms	-	<ul style="list-style-type: none"> Updated Authorization Agreement for Electronic Funds Transfer (EFT) form, MAPPS Screening form, and MAPPS Case Plan form Added Service Summary Report form
02-15-09	Appendix 2	-	Updated list of carrier codes
01-01-09	1	8	Updated hyperlink for bulletin.scdhhs.gov
01-01-09	5	11	Updated Lee County office address
12-01-08	2	2	Added “when medically indicated” to the first bullet
11-01-08	1	8	Added e-bulletin information to reflect Medicaid Bulletin dated August 26, 2008
11-01-08	3	21, 23	Added EFT information to reflect Medicaid Bulletin dated August 26, 2008
10-01-08	3	25	Changed ECF field 1 to Prov/Xwalk ID
10-01-08	5	9, 13	<ul style="list-style-type: none"> Updated address for Lake City Updated phone number for Sumter County office
10-01-08	Forms	-	Revised ECF example to show update for field 1
10-01-08	Appendix 1	-	Updated edit codes 007, 059, 112, 219, 308, 339, 386, 403, 710, 722, 786, 798, 799, 843, 844, 845, 912, 914,

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Date	Section	Page(s)	Change
			928, 941, 942, 943, 945, 952
09-01-08	5	6	Updated phone number for Berkeley County office
09-01-08	5	10	Updated phone number for Kershaw County office
09-01-08	Appendix 1	17	Added Edit Code 318
08-01-08	Appendix 1	3	Updated Edit Code 062
08-01-08	5	7	Deleted PO Box for Chester County
07-01-08	5	11	Deleted PO Box for Lancaster County
07-01-08	Managed Care Supplement	27	Replaced Web site address for BlueChoice
06-01-08	3	6, 14, 16, 17, 23	Updated NPI policy and form instructions to reflect May 23, 2008, deadline requiring NPI only on claims for typical providers
06-01-08	5	12	Updated telephone number for Orangeburg county office
06-01-08	Appendix 1	30, 39, 42	<ul style="list-style-type: none"> • Added new edit code 529 • Deleted NPI warning edits 578, 579, 580, 581, 582, 583, 692
06-01-08	TPL Supplement	-	Updated Example Dental Claim Form Reporting Third Party for Medicare Information to show NPI only; change/removed sample entries for fields 8, 15, 23, and 49; and added a tooth number to line 4
05-01-08	Managed Care Supplement	-	Revised supplement to include general policies and procedures effective May 1, 2008 and updated the SCDHHS-approved MCO contractors section
04-01-08	5	8	Updated address and phone number for Dorchester County office
04-01-08	Appendix 1	4, 13, 20, 33	Added new edit codes 062, 219, 339, 528

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Date	Section	Page(s)	Change
04-01-08	TPL Supplement	2	<ul style="list-style-type: none"> Updated reference to Medicaid card name Changed references to location of forms from Section 5 to Forms section
		3, 8, 15	
		12	<ul style="list-style-type: none"> Updated field numbers for occurrence codes on UB-04
03-01-08	1	29	<ul style="list-style-type: none"> Replaced sample ADA form with more attractive version
		3-5	<ul style="list-style-type: none"> Replaced sample Partners for Health Medicaid card with new Healthy Connections card and updated card information. Deleted information about location of supervising entities – requirements will be included in Section 2 where applicable
03-01-08	2	7	
		4	Updated FPW and MAPPS policies and coding
03-01-08	3	24-38	<ul style="list-style-type: none"> Updated NPI policy and form instructions to reflect March 1, 2008, deadline requiring NPI on claims for typical providers (with or without Medicaid legacy number). Standardized formatting
		5-25	
03-01-08	Forms	-	Replaced Form 931 with new version dated January 2008
03-01-08	Appendix 1	59	<ul style="list-style-type: none"> Added edit code 808 Revised edit code 943 description and status (from warning to active)
		70	
03-01-08	TPL Supplement	9	<ul style="list-style-type: none"> Added information on carrier code “CAS” for open casualty cases Replaced Form 931 samples with new versions
		21-22	
02-01-08	3	10	<ul style="list-style-type: none"> Corrected instructions for field 10b Standardized references to six-character legacy provider number Corrected mailing address for refunds
		29, 32	
		45	
02-01-08	5	1	Removed “including Partners for Health” from first paragraph

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Date	Section	Page(s)	Change
02-01-08	Forms	-	Corrected mailing address for Medicaid Refunds Form 205
01-01-08	5	10	Updated address for Lancaster County office
01-01-08	Managed Care Supplement	1 3	<ul style="list-style-type: none"> Removed PhyTrust from the list of MHNs Added Carolina Crescent to the list of MCOs
11-01-07	5	9, 10 10	<ul style="list-style-type: none"> Updated telephone numbers for Florence and Kershaw counties Updated Horry County address to 1601 11th Ave., 1st Floor
11-01-07	Forms	-	Replaced old Sterilization Consent Form with new version
11-01-07	Appendix 1	All	<ul style="list-style-type: none"> Corrected ECF field numbers throughout edit resolution instructions Added new edit code 107
11-01-07	Appendix 2	All	Updated list of carrier codes
10-01-07	1	1-2 3 4 12 15 25	<ul style="list-style-type: none"> Removed PEP information Added information about managed care enrollment broker and Managed Care Supplement Removed managed care sample cards (cards and other information will appear in the new Managed Care Supplement). Clarified that “days” refers to business days Clarified which sections of manual may contain PA information Expanded provider list under Program Integrity
10-01-07	3	6, 12, 46	<ul style="list-style-type: none"> Removed PEP information Added 90-day time limit for reversing refunds
10-01-07	Appendix 1	26 38-40, 43, 70	<ul style="list-style-type: none"> Corrected description for edit code 502 Added NPI warning edits 578-583, 692, 943
10-01-07	-	-	Added Managed Care Supplement

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Date	Section	Page(s)	Change
10-01-07	TPL Supplement	15-17	<ul style="list-style-type: none"> • Added 90-day time limit for reversing refunds • Added information on Part B timely filing schedule to explain which claims are pulled into Retro Medicare
07-01-07	2	-	<ul style="list-style-type: none"> • Updated information about Family Planning Waiver • Clarified P/RSPCE individual/group visits services • Clarified P/RSPCE risk-specific referrals
07-01-07	3	-	Updated information about Family Planning Waiver
07-01-07	4	-	Added Family Planning Waiver codes
07-01-07	Forms	-	Updated DHHS Form 205
07-01-07	Appendix 2	-	Updated list of carrier codes
06-01-07	2, 4	All	<ul style="list-style-type: none"> • Clarified who is authorized to bill for Medicaid Enhanced Services • Changed references to location of forms from “Section 5” to “Forms section”
06-01-07	3	All	<ul style="list-style-type: none"> • Updated form completion instructions for new CMS-1500 and Form 130 versions • Updated ECF and RA descriptions • Added information about National Provider Identifier • Replaced Reference to Forms 110 and 120 with Form 115 • Clarified retroactive eligibility policy • Updated ECF correction instructions • Added CPT and HCPCS ordering information • Updated edit resolutions for 713 and 852 • Changed references to location of forms from “Section 5” to “Forms section” • Made minor editorial changes throughout section
06-01-07	Forms		<ul style="list-style-type: none"> • Updated DHHS forms to add National Provider Identifier field • Updated sample claims to new CMS-1500 version • Updated ECF and remits to new versions

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Date	Section	Page(s)	Change
06-01-07	5	3-4 6-8 12 -	<ul style="list-style-type: none"> Revised “Procurement of Forms” to address new CMS-1500 version and updated vendor information Added toll-free number for Berkeley, Charleston, and Darlington county offices Updated phone number for Oconee County Split forms and exhibits from Section 5 to create separate Forms section
06-01-07	Appendix 1	-	Updated list of edit codes
06-01-07	TPL Supplement	All	<ul style="list-style-type: none"> Updated all sample forms and claims with new versions Updated form completion instructions to match new form versions
05-01-07	Appendix 1	-	Updated list of edit codes
04-01-07	5	8	Updated phone number for Darlington county office
04-01-07	Appendix 1	-	Updated list of edit codes
04-01-07	Appendix 2	-	Updated list of carrier codes
04-01-07	Time Restricted Supplement	-	Updated date for mandatory use of revised CMS-1500
03-01-07	5	6	Updated Barnwell county office address
03-01-07	Time Restricted Supplement	All	Removed all references to NDC quantity and unit
03-01-07	Appendix 1	-	Updated list of edit codes
02-01-07	TPL Supplement	31-32	Updated ECF Samples to show third payer line
01-01-07	3	-	Added Time Restricted Supplement
01-01-07	5	-	Added line “03” to sample ECF for the third payer declaration

CHANGE CONTROL RECORD

Date	Section	Page(s)	Change
01-01-07	Appendix 1	9, 14	Added Edit Codes 202, 203, 204, 301
01-01-07	Appendix 2	-	Updated list of carrier codes
11-01-06	5	-	Updated county office addresses
11-01-06	5	-	Updated Case Plan and Screening Form for MAPPS
10-01-06	5	-	Updated county office addresses
10-01-06	Appendix 2	-	Updated list of carrier codes
09-01-06	5	-	Updated county offices
09-01-06	Appendix 1	10,11,13 15,17,18 22, 23, 24 26, 27, 28 29, 30, 31 32, 35, 36 39, 40, 41 42, 46, 47 48, 49, 50 52, 58, 60 61, 62, 63 66, 67	<ul style="list-style-type: none"> • Updated CARCs for edit codes 504, 561, 562, 563, 636, 923, 940, 949 • Updated RARCs for edit codes 207, 208, 227, 234, 239, 263, 317, 369, 377, 421, 501, 504, 505, 507, 508, 515, 541, 545, 553, 564, 570, 672, 674, 709, 714, 719, 721, 722, 748, 749 • Updated resolutions for edit codes 761, 764, 765, 768, 769, 771, 772, 773, 774 • Added new edit codes 518, 724 • Deleted edit code 777
08-01-06	-	-	Added TPL Supplement
08-01-06	2 & 4	2-20; 4-4	Clarified repeat visit policy
08-01-06	5	-	Updated Reasonable Effort Documentation form
07-01-06	Appendix 1	23, 60, 61	Updated resolution for edit codes 504, 923, 940
07-01-06	Appendix 2	-	Updated list of carrier codes
05-01-06	Appendix 1	52	Updated resolution for edit code 852
03-01-06	3	17, 18 19	<ul style="list-style-type: none"> • Changed the Trading Partner Agreement (TPA) and the Companion Guides Web site references to www.dhhs.state.sc.us • Changed the Internet Explorer version required for the Web Tool to 6.0

CHANGE CONTROL RECORD

Date	Section	Page(s)	Change
		25	<ul style="list-style-type: none"> Added TPL indicators to the ECF field 4 description
		25	<ul style="list-style-type: none"> Added Injury Code indicators to the ECF field 5 description
		40	<ul style="list-style-type: none"> Changed address name for refund checks (Form 205) from Division of Finance to Cash Receipts
03-01-06	Appendix 1	60	Changed resolution for edit code 925
03-01-06	2	21 32	<ul style="list-style-type: none"> Clarified provider type requirements Updated Family Planning Waiver expiration date
03-01-06	4	5	Added 03 as a MAPPS place of service code
02-01-06	Appendix 1	41	Changed resolution for edit code 721
02-01-06	2 & 4	2-19, 2-20; 4-4	Updated Postpartum/Infant Home Visit policies to reflect Medicaid Bulletin dated January 24, 2006
01-01-06	5	-	Updated Authorization Agreement for Electronic Funds Transfer
01-01-06	1	4, 5	Removed SILVERxCARD sample and program description
01-01-06	Appendix 2	-	Updated list of carrier codes
01-01-06	Appendix 1	67	Added edit code 935
12-01-05	Appendix 1	70	Added edit code 949
11-01-05	1	6, 7	Removed "HIPAA" from names of S.C. Medicaid Provider Outreach and S.C. Medicaid EDI Support Center
11-01-05	2	28	Added definition of peer pressure
11-01-05	3	6	Changed verb tense under Procedural Coding and Diagnostic Codes
11-01-05	3	14	Removed requirement for entering whole numbers for day or units in field 24G
11-01-05	3	18, 19, 35	Changed generic reference for the South Carolina

CHANGE CONTROL RECORD

Date	Section	Page(s)	Change
			Medicaid Web-based Claims Submission Tool from SCMWBCST to Web Tool
11-01-05	3	17, 18	Changed Web site from www.scdhhshipaa.org to www.scmehicaidprovider.org
11-01-05	5	11	Updated list of DHHS county offices
10-01-05	5	11	Updated list of DHHS county offices
10-01-05	Appendices	-	Made each appendix a separate file; moved Change Control Record out of appendices to a separate file.
10-01-05	5	-	Removed “Missed preventive appointment – minor” from Referral Form for Broken Appointments
10-01-05	2	30	Corrected wording about unlicensed staff