

**South Carolina**  
**DEPARTMENT OF HEALTH AND HUMAN SERVICES**  
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## MEDICAID BULLETIN

**TO:                   Providers Indicated**

**SUBJECT:           Billing Change for End Stage Renal Disease (ESRD) Reimbursement**

Effective with dates of service on or after January 1, 2011, the South Carolina Department of Health and Human Services (SCDHHS) will change the billing requirements for claims submitted to Medicaid as secondary to Medicare for ESRD patients. Medicaid is not required to adopt the new payment methodology mandated by Centers for Medicare and Medicaid (CMS) for Medicare Bundled services. However, in order to apply the correct reimbursement as secondary payor, providers should only submit charges to Medicaid for the Bundled Treatment and for services that are separately reimbursed by Medicare. Claims submitted to Medicaid for bundled services with a \$0.00 charge will generate a rejected claim and delay payment. This change is specific to claims filed to SCDHHS and not for services rendered to beneficiaries enrolled in a Managed Care Organization (MCO). For claims assistance for MCO enrolled beneficiaries, please contact the MCO's Provider Services area.

If you have questions regarding this bulletin or any other Medicaid ESRD billing or policy, please contact your Medicaid program representative in the Division of Hospital Services (803) 898-2665. Thank you for your continued support and participation in the South Carolina Medicaid program.

/S/  
Emma Forkner  
Director

EF/mgyvb

**Note:** To receive Medicaid bulletins by email, please register at <http://bulletin.scdhhs.gov/>. To sign up for Electronic Funds Transfer of your Medicaid payment, please go to <http://www.dhhs.state.sc.us/dhhsnew/hipaa/index.asp> and select "Electronic Funds Transfer (EFT) for instructions.