

South Carolina
DEPARTMENT OF HEALTH AND HUMAN SERVICES
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MEDICAID BULLETIN

TO: Hospital Services Providers

SUBJECT: Medicaid Policy Manual for Hospital Services Providers

The enclosed revised Hospital Services Medicaid Provider Manual is effective April 1, 2005 and includes all previous HIPAA changes and Medicaid policy bulletins.

This manual is to be used for program information and requirements, billing procedures, and provider services guidelines. **Due to several substantial changes in policy, providers are urged to carefully review this revision.**

In addition to inclusion of policy changes specific to the Hospital Services program area, the new provider manuals for all Medicaid programs have been reformatted to give them a more consistent, standardized layout and to improve navigation and readability. Headings for each subsection appear on the left side of the page, with the corresponding information on the right. "Chapters" are now called "sections," and the numbering system has been simplified.

The revised manual is organized as follows, with each section having its own table of contents:

Section 1, **General Information and Administration**, contains an overview of the South Carolina Medicaid program, as well as information about record retention, documentation requirements, utilization review, program integrity, and other general Medicaid policies.

Section 2, **Policies and Procedures**, describes policies and procedures specific to the Hospital Services program.

Section 3, **Billing Procedures**, contains billing information that is common to all South Carolina Medicaid programs, as well as program-specific guidelines for claim filing and processing.

Section 4, **Billing Codes**, contains reimbursement types for the outpatient fee schedule, PPS DRG relative weights for inpatient billing, revenue codes, and a list of codes that require prior authorization and support documentation.

Section 5, **Administrative Services**, contains contact information for DHHS state and county offices, as well as program areas throughout DHHS, and examples of all forms referenced throughout the manual.

The **appendices** include the following:

- Edit Codes, Claim Adjustment Reason Codes (CARCs) & Remittance Advice Remark Codes (RARCs), and Resolutions
- Carrier Codes
- Schedule of Copayments

The enclosed compact disc contains a copy of the manual in Portable Document Format (pdf). To access the file, you will need Adobe Acrobat Reader software, which is pre-installed on most computers and also available for free download at www.adobe.com/support.

The most current version of the provider manual is maintained on the DHHS Web site at www.dhhs.state.sc.us. [From the DHHS home page, scroll down and click on the link for Resource Library; next, click on the link for Manuals, and scroll down to the listings located beneath the heading Service Providers.]

Should you wish to order a printed copy of your provider manual, or an additional compact disc, please call South Carolina Medicaid Provider Outreach at (803) 264-9609. Charges for printed manuals are based on actual costs of printing and mailing.

The policy manual and fee schedule are not subject to copyright regulations and may be reproduced in their entirety.

If you have any questions regarding this provider manual and fee schedule, please contact your Hospital Services program coordinator at (803) 898-2665. Thank you for your continued support of the South Carolina Medicaid program.

/s/

Robert M. Kerr
Director

RMK/bgaw

Enclosures

NOTE: To receive Medicaid bulletins by email or to sign up for Electronic Funds Transfer of your Medicaid payment, please go to the following link for instructions:
<http://www.dhhs.state.sc.us/ResourceLibrary/E-Bulletins.htm>