

South Carolina
DEPARTMENT OF HEALTH AND HUMAN SERVICES
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CLTC

MEDICAID BULLETIN

TO: Early Intensive Behavioral Intervention (EIBI) Providers

SUBJECT: Pervasive Developmental Disorder (PDD) Waiver Participants and Third Party Liability (TPL) billing

In the past legislative session the South Carolina General Assembly enacted a bill known as Ryan's Law, requiring private insurers to begin covering Early Intensive Behavioral Intervention (EIBI) and Applied Behavioral Analysis (ABA) services for children with pervasive developmental disorders. Children currently enrolled and waiting to be enrolled in the Medicaid PDD waiver may have private insurance that may cover some or all of the costs of these therapies.

A provider who accepts a Medicaid beneficiary as a patient is required to request payment from all available third party resources prior to billing Medicaid. Should the third party payer deny or reduce payment to less than the Medicaid allowable amount, then the provider may file a claim to Medicaid. The claim filed to Medicaid must be properly completed with all applicable third-party information entered in the appropriate fields. Below are instructions for reporting TPL on the CMS 1500 claim form.

- If a patient has private insurance and Medicaid, field 9a or 11 must contain the policy number of the private insurance.
- Field 9c or 11b must be the actual amount of private insurance payment. This field should contain 0.00 if there was no payment by the private insurance, either because the service was denied or because the patient has not met their deductible.
- Field 9d or 11c must contain the three-digit carrier code of the private insurance carrier found in the appendix 2 section of any Medicaid manual. If the carrier code does not appear in either field 9d or 11c the claim will reject back to the provider. A listing of all insurance carrier codes can be found at the following website address:

<http://www.dhhs.state.sc.us/internet/pdf/manuals>

- Please use only fields 9 (9a, 9c, 9d) or 11 (11, 11b, 11c) of the CMS 1500 when reporting a single insurance, as a third party payer.
- Field 10d should be coded with the number 1 if there was no payment from private insurance, because the service was denied or because the patient has not met their deductible.

- If the patient has multiple insurance policies covering EIBI or ABA services, the TPL should be coded with the appropriate carrier codes, policy numbers and amounts of payment utilizing field 9 of the CMS 1500 for one insurance policy and field 11 for the second policy. If there was no payment from one of the private insurance policies, even if the second insurance paid an amount, Field 10d should be coded with the number 1.
- If the total payment by private insurance exceeds Medicaid allowable for the service, there will be no payment to the provider and an edit code of 690 (Other Sources amount greater than Medicaid amount) will be assigned.

Pursuant to §1902(a)(25)(C) of the Social Security Act [42 U.S.C. §1396a(a)(25)(C)], coinsurance, deductibles, co-pays and other cost sharing charges normally billed to private pay patients may not be billed to the Medicaid recipient, the Medicaid recipient's family, guardian or legal representative. The provider should contact the primary health insurance to establish coverage (for example, the State Health Plan contact is APS Health Care at 1-800-221-8699).

For detailed instructions on billing third party insurance across the South Carolina Medicaid Web Tool you may go www.scdhshipaa.org and access provider resources or you may call 1-888-289-0709. If you have questions or concerns regarding this bulletin, you may contact your program area at (803) 898 - 2590. Thank you for your continued support of the South Carolina Medicaid program.

/S/
Emma Forkner
Director

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.