

**SECTION 5**  
**ADMINISTRATIVE SERVICES**

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## SECTION 5 ADMINISTRATIVE SERVICES

### GENERAL INFORMATION

#### ADMINISTRATION

The South Carolina Department of Health and Human Services (DHHS) administers the South Carolina Healthy Connections Medicaid Program. This section outlines the available resources for Medicaid providers.

#### CORRESPONDENCE AND INQUIRIES

All correspondence to South Carolina Healthy Connections Medicaid should be directed to the SCDHHS Provider Service Center (PSC) at 1-888-289-0709. In addition, providers may submit an online inquiry at <https://www.scdhhs.gov/contact-us>. Inquiries concerning specific claims should also be directed to the PSC, but only after all claims filing requirements have been met. **Allow 45 days from the submission date before requesting the status of the claim.**

#### BENEFICIARY ELIGIBILITY

Questions concerning beneficiary eligibility or identification numbers should be directed to the SCDHHS county office in the beneficiary's county of residence. Beneficiaries who have questions regarding specific coverage issues should be referred to the appropriate staff of their county SCDHHS office for assistance. The contact information for county offices is located on the SCDHHS website at <https://www.scdhhs.gov/site-page/where-go-help>.

#### Eligibility Status

To verify eligibility status, please use the South Carolina Medicaid Web-based Claims Submission Tool (Web Tool), which is available 24 hours a day/7 days a week. For information on the Web Tool, you may contact the PSC at 1-888-289-0709.

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### **GENERAL INFORMATION**

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**SECTION 5 ADMINISTRATIVE SERVICES**

**PROCUREMENT OF FORMS**

The South Carolina Department of Health and Human Services will not supply the CMS-1500 claim form to providers. Providers should purchase the form in its approved format from the private vendor of their choice. Examples of vendors who supply the form are listed below. This list should not be viewed as an endorsement of these vendors by SCDHHS.

**REPRODUCIBLE NEGATIVES**

Government Printing Office  
(800) 512-1800

TFP Data Systems  
(800) 482-9367 ext. 1770  
[1500form@tfpdata.com](mailto:1500form@tfpdata.com)

**SOFTWARE**

Attn: Orders Department  
American Medical Association  
PO Box 930876  
Atlanta, GA 31193-0876  
(800) 621-8335  
Fax: (312) 464-5600  
<https://commerce.ama-assn.org/store/>

**HARD COPY CLAIM FORMS**

Government Printing Office  
Superintendent of Documents  
PO Box 979050  
St. Louis, MO 63197-9000  
(866) 512-1800 Toll Free  
Fax: (202) 512-2104  
<http://bookstore.gpo.gov>

**PRIVATE VENDORS**

RR Donnelley  
1210 Key Road  
Columbia, SC 29201  
(803) 576-1304  
Fax: (803) 252-7748

## SECTION 5 ADMINISTRATIVE SERVICES

### PROCUREMENT OF FORMS

#### PRIVATE VENDORS (CONT'D.)

Physicians' Record Company  
3000 S. Ridgeland Ave.  
Berwyn, IL 60402-0724  
(800) 323-9268 (toll free)  
Fax: (708) 749-0171  
[orders@physiciansrecord.com](mailto:orders@physiciansrecord.com)

Standard Register Company  
600 Albany Street  
Dayton, OH 45417  
(937) 221-1078  
(800) 867-8465  
Fax: (800) 473-3211

#### SCDHHS FORMS

Providers may order SCDHHS forms via email at [forms@scdhhs.gov](mailto:forms@scdhhs.gov). Copies of forms, including program-specific forms, are also available in the Forms section of this manual.

#### WEB ADDRESS

Providers should visit the Provider Information page on the SCDHHS Web site at <https://www.scdhhs.gov/provider> for the most current version of this manual.

To order a paper version of this manual, please contact the SCDHHS Provider Service Center (PSC) at 1-888-289-0709. From the Main Menu, select the Provider Enrollment and Education option. Charges for printed manuals are based on actual costs of printing and mailing.