

## CHANGE CONTROL RECORD

Date	Section	Page(s)	Change
07-01-10	5	-	Updated telephone numbers and zip codes for multiple county offices
07-01-10	Appendix 1	32 35	<ul style="list-style-type: none"> <li>• Updated edit code 714</li> <li>• Updated edit code 738</li> </ul>
07-01-10	Appendix 2	21, 22, 25, 63, 89	Changed the TPL name for First Health to Magellan Medicaid Administration
06-01-10	Managed Care Supplement	1 3 17 20, 23, 25	<ul style="list-style-type: none"> <li>• Updated Managed Care Overview section</li> <li>• Updated Manage Care Organization (MCO), Core Benefits section</li> <li>• Updated the Managed Care Disenrollment Process, Overview section</li> <li>• Updated to reflect Medicaid Bulletin dated March 18, 2010 — Managed Care Organizational Change</li> </ul>
05-01-10	5	1	<p>Removed reference to sample form at the end of this section</p> <p>Replaced reference to sample form in the Forms section of this manual</p>
03-01-10	Cover	-	Replaced the manual cover
03-01-10	Change Control Record	1	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, 18	Removed modem as an electronic claims transmission method
02-01-10	Appendix 1	13 36	<ul style="list-style-type: none"> <li>• Added New Edit Codes 356,357 and 358</li> <li>• Updated Edit Code 738</li> </ul>
02-01-10	Appendix 2	All	Updated Carrier Code List
01-01-10	5	5 10 12	<ul style="list-style-type: none"> <li>• Updated Physical Address for Allendale County Office</li> <li>• Replaced Jasper County DSS with Jasper County DHHS</li> <li>• Replaced Orangeburg County DSS with Orangeburg County DHHS</li> </ul>

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Date	Section	Page(s)	Change
01-01-10	Appendix 1	49	Updated Edit Code 932
12-01-09	1	8  25	<ul style="list-style-type: none"> <li>• Updated policy to reflect Medicaid Bulletin dated November 13, 2009 – Electronic Remittance Package</li> <li>• Updated Timely Filing for Submitting Claims section to reflect Medicaid Bulletin dated November 24, 2009</li> </ul>
12-01-09	3	1-2 17, 19-24	<ul style="list-style-type: none"> <li>• Updated Claim Filing Timeliness section to reflect Medicaid Bulletin dated November 24, 2009</li> <li>• Updated policy to reflect Medicaid Bulletin dated November 13, 2009 – Electronic Remittance Package</li> </ul>
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"> <li>• Replaced CARC 17 with CARC 16</li> <li>• Updated CARC A1</li> <li>• Updated codes 509 and 510</li> <li>• Added code 533</li> </ul>
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"> <li>• Updated the Medicare/Medicaid Eligibility section to include Qualified Medicare Beneficiaries (QMBs)</li> <li>• Updated SC Medicaid Healthy Connections language throughout section</li> <li>• Updated South Carolina Medicaid Bulletins and Newsletters</li> <li>• Changed heading to Medicare Cost Sharing</li> </ul>
10-01-09	2	20-21	Updated the Non-Covered Services subsection to include the Qualified Medicare Beneficiary policy
10-01-09	5	10 11  12	<ul style="list-style-type: none"> <li>• Updated physical address for Jasper County office</li> <li>• Updated telephone number for Lexington County office</li> <li>• Updated zip codes for Orangeburg County office</li> </ul>

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Date	Section	Page(s)	Change
10-01-09	Appendix 1	3 60	<ul style="list-style-type: none"> <li>• Updated edit code 065</li> <li>• Updated edit code 852</li> </ul>
09-08-09	Managed Care Supplement	20	Replaced the Absolute Total Care Medicaid beneficiary card sample
09-01-09	Forms	-	Updated Referral Form/Authorization for Services Form (Form 252)
09-01-09	Managed Care Supplement	21 20, 25	<ul style="list-style-type: none"> <li>• Removed all references to CHCcares to reflect Medicaid Bulletin dated August 3, 2009</li> <li>• Updated Absolute Total Care entries as following:                             <ul style="list-style-type: none"> <li>o Changed the company's name to Absolute Total Care</li> <li>o Replaced the beneficiary card samples</li> <li>o Corrected contact information</li> </ul> </li> </ul>
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"> <li>• Updated address for Bamberg and Orangeburg County offices</li> <li>• Updated office zip code for Darlington County</li> <li>• Updated telephone number for Fairfield County office</li> </ul>
06-01-09	1	-	Corrected headers
06-01-09	TPL Supplement	19	Updated Department of Insurance Web site address
05-01-09	1	1-6, 11 2 3 5	<ul style="list-style-type: none"> <li>• Updated to reflect managed care policies and procedures effective May 1, 2009</li> <li>• Updated the Eligibility subsection</li> <li>• Added the beneficiary contact telephone number to the South Carolina Healthy Connections Medicaid Card subsection</li> <li>• Removed the program start date from the SC</li> </ul>

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Date	Section	Page(s)	Change
		28-33	Healthy Connections Kids SCHIP Dental Coverage subsection <ul style="list-style-type: none"> <li>• Updated the Medicaid Program Integrity subsection</li> </ul>
05-01-09	5	13	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
04-01-09	1	2, 3, 8	Updated hyperlinks
04-01-09	3	4, 5, 17, 23, 31, 34	Updated hyperlinks
04-01-09	5	11	Updated telephone number for Lexington County office
03-01-09	2	- 7	<ul style="list-style-type: none"> <li>• Removed highlighting through the document</li> <li>• Update hyperlinks</li> </ul>
03-01-09	5	4 8  5, 11-13	<ul style="list-style-type: none"> <li>• Updated hyperlink</li> <li>• Corrected Dorchester County’s Orangeburg Road telephone number</li> <li>• Change DSS to DHHS in addresses for Abbeville, McCormick, Newberry, and Saluda counties</li> </ul>
03-01-09	Appendix 1	43  72	<ul style="list-style-type: none"> <li>• Added new edit codes 693 and 694</li> <li>• Changed edit code 945 Resolution to input “26” modifier in field 18</li> </ul>
03-01-09	Managed Care Supplement	1, 7, 10, 17, 23, 25-30, 35	Updated hyperlinks

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Date	Section	Page(s)	Change
03-01-09	TPL Supplement	8, 9, 19	Updated hyperlinks
02-01-09	4	1	Updated Unit of Service for 96101 to 60 minutes - \$93.23
02-01-09	5	5	Updated Allendale County office PO Box zip code
02-01-09	Forms	-	Updated Authorization Agreement for Electronic Funds Transfer (EFT) form
02-01-09	Appendix 2	-	Updated list of carrier codes
01-01-09	1	8	Updated hyperlink for <a href="http://bulletin.scdhhs.gov">bulletin.scdhhs.gov</a>
01-01-09	5	11	Updated Lee County office address
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"> <li>• Updated address for Lake City</li> <li>• Updated phone number for Sumter County office</li> </ul>
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, 928, 941, 942, 943, 945, 952
09-01-08	5	6 10	<ul style="list-style-type: none"> <li>• Updated phone number for Berkeley County office</li> <li>• Updated phone number for Kershaw County office</li> </ul>
09-01-08	Appendix 1	17 3	<ul style="list-style-type: none"> <li>• Added Edit Code 318</li> <li>• Updated Edit Code 062</li> </ul>
08-01-08	5	7	Deleted PO Box for Chester County

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Date	Section	Page(s)	Change
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	5, 13, 16, 21	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	Form	-	<ul style="list-style-type: none"> <li>• Deleted sample claim form showing NPI and Medicaid Provider ID</li> <li>• Updated DHHS Form 252 to reflect May 23, 2008, deadline requiring NPI only on claims for typical providers</li> </ul>
06-01-08	Appendix 1	30, 39, 42	<ul style="list-style-type: none"> <li>• Added new edit code 529</li> <li>• Deleted NPI warning edits 578, 579, 580, 581, 582, 583, 692</li> </ul>
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
04-01-08	TPL Supplement	2 3, 8, 15	<ul style="list-style-type: none"> <li>• Updated reference to Medicaid card name</li> <li>• Changed references to location of forms from Section 5 to Forms section</li> </ul>

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Date	Section	Page(s)	Change
		12 29	<ul style="list-style-type: none"> <li>• Updated field numbers for occurrence codes on UB-04</li> <li>• Replaced sample ADA form with more attractive version</li> </ul>
03-01-08	1	3-5 7	<ul style="list-style-type: none"> <li>• Replaced sample Partners for Health Medicaid card with new Healthy Connections card and updated card information.</li> <li>• Deleted information about location of supervising entities – requirements will be included in Section 2 where applicable</li> </ul>
03-01-08	3	5-17 All	<ul style="list-style-type: none"> <li>• 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).</li> <li>• Standardized formatting</li> </ul>
03-01-08	Forms	-	Replaced Form 931 with new version dated January 2008
03-01-08	Appendix 1	59 70	<ul style="list-style-type: none"> <li>• Added edit code 808</li> <li>• Revised edit code 943 description and status (from warning to active)</li> </ul>
03-01-08	TPL Supplement	9 21-22	<ul style="list-style-type: none"> <li>• Added information on carrier code “CAS” for open casualty cases</li> <li>• Replaced Form 931 samples with new versions</li> </ul>
02-01-08	3	8 27, 30 43	<ul style="list-style-type: none"> <li>• Corrected instructions for field 10b</li> <li>• Standardized references to six-character legacy Medicaid provider number</li> <li>• Corrected mailing address for refunds</li> </ul>
02-01-08	Forms	-	Corrected mailing address for Medicaid Refunds for 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"> <li>• Removed PhyTrust from the list of MHNs</li> <li>• Added Carolina Crescent to the list of MCOs</li> </ul>

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Date	Section	Page(s)	Change
12-01-07	5	10, 12	Updated addresses for Lancaster and Oconee County offices
11-01-07	5	9, 10 10	Updated telephone numbers for Florence and Kershaw counties Updated Horry County address to 1601 11 <sup>th</sup> Ave., 1 <sup>st</sup> Floor
11-01-07	Appendix 1	All	<ul style="list-style-type: none"> <li>• Corrected ECF field numbers throughout edit resolution instructions</li> <li>• Added new edit code 107</li> </ul>
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"> <li>• Removed PEP information</li> <li>• Added information about managed care enrollment broker and Managed Care Supplement</li> <li>• Removed managed care sample cards (cards and other information will appear in the new Managed Care Supplement).</li> <li>• Clarified that “days” refers to business days</li> <li>• Clarified which sections of manual may contain PA information</li> <li>• Expanded provider list under Program Integrity</li> </ul>
10-01-07	3	10, 41	<ul style="list-style-type: none"> <li>• Removed PEP information</li> <li>• Added 90-day time limit for reversing refunds</li> </ul>
10-01-07	Appendix 1	26 38-40, 43, 70	<ul style="list-style-type: none"> <li>• Corrected description for edit code 502</li> <li>• Added NPI warning edits 578-583, 692, 943</li> </ul>
10-01-07	-	-	Added Managed Care Supplement
10-01-07	TPL Supplement	15-17	<ul style="list-style-type: none"> <li>• Added 90-day time limit for reversing refunds</li> <li>• Added information on Part B timely filing schedule to explain which claims are pulled into Retro Medicare</li> </ul>
07-01-07	Appendix 2	-	Updated list of carrier codes
06-01-07	3	-	Removed Time Restricted Supplement

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Date	Section	Page(s)	Change
06-01-07	3	All	<ul style="list-style-type: none"> <li>• Updated form completion instructions for new CMS-1500 and Form 130 versions</li> <li>• Updated ECF and RA descriptions</li> <li>• Added information about National Provider Identifier</li> <li>• Replaced Reference to Forms 110 and 120 with Form 115</li> <li>• Clarified retroactive eligibility policy</li> <li>• Updated ECF correction instructions</li> <li>• Added CPT and HCPCS ordering information</li> <li>• Made minor editorial changes throughout section</li> </ul>
06-01-07	5	3-4 6-8 12 -	<ul style="list-style-type: none"> <li>• Revised “Procurement of Forms” to address new CMS-1500 version and updated vendor information</li> <li>• Added toll-free number for Berkeley, Charleston, and Darlington county offices</li> <li>• Updated phone number for Oconee County</li> <li>• Split forms and exhibits forms from Section 5 to create separate Forms section</li> </ul>
06-01-07	Forms	-	<ul style="list-style-type: none"> <li>• Updated DHHS forms to add National Provider Identifier field</li> <li>• Updated sample claims to new CMS-1500 version</li> <li>• Updated ECF and remits to new version</li> <li>• Updated DHHS Form 252, 219-OMP, and 219-TG-PGS</li> </ul>
06-01-07	Appendix 1	-	Updated list of edit codes
06-01-07	TPL Supplement	All	<ul style="list-style-type: none"> <li>• Updated all sample forms and claims with new versions</li> <li>• Updated form completion instructions to match new form versions</li> </ul>
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

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<b>Date</b>	<b>Section</b>	<b>Page(s)</b>	<b>Change</b>
04-01-07	Time Restricted Supplement	-	Updated date for mandatory use of revised CMS-1500
03-02-07	5	6	Updated Barnwell county office address
03-02-07	Time Restricted Supplement	All	Removed all references to NDC quantity and unit
03-02-07	Appendix 1	-	Updated list of edit codes