

Durable Medical Equipment



South Carolina DEPARTMENT OF HEALTH AND HUMAN SERVICES

Post Office Box 8206 Columbia, South Carolina 29202-8206 www.dhhs.state.sc.us

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DME 04-06

MEDICAID BULLETIN

TO: Durable Medical Equipment (DME) Providers

SUBJECT: Medicaid Policy Manual for Durable Medical Equipment Providers

The enclosed new Department of Durable Medical Equipment Medicaid Provider Manual is effective December 1, 2004, 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 policy changes specific to the DME 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 new manuals are organized generally 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 DME 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 - contains procedure codes, fee schedules, and other approval codes and modifiers.

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Section 5 - Administrative Services, contains contact information for DHHS state and county offices, examples of all forms referenced throughout the manual (as well as some generic forms), and contacts for claim form suppliers/vendors.

The appendices include the following:

- Resolutions for Frequently Occurring Edit Codes
- Claim Adjustment Reasons Codes (CARCs) and Remittance Advise Remark Codes (RARCs)
- 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 manual is also available on the DHHS Web site.

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 program coordinator in the Department of Durable Medical Equipment at (803) 898-2882. Thank you for your continued support of the South Carolina Medicaid program.

Robert M. Kerr Director

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Attachments

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

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