SOUTH CAROLINA DEPARTMENT OF HEALTH AND HUMAN SERVICES

Healthy Connections
MEDICAID

Henry McMaster GOVERNOR
T. Clark Phillip ACTING DIRECTOR
P.O. Box 8206 > Columbia, SC 29202
www.scdhhs.gov

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MEDICAID ALERT

TO: **BabyNet Providers**

SUBJECT: **Claim Correction (Void and Replace) Functionality in BRIDGES**

The South Carolina Department of Health and Human Services (SCDHHS) has enhanced its claim correction functionality in the integrated BabyNet Reporting & Intervention Data Gathering Electronic System (BRIDGES) and Medicaid Management Information System (MMIS). This functionality is an automatic internal void and/or replace process in the integrated BRIDGES and MMIS systems, and often requires little provider interaction with the claim. Exceptions to this occur when providers request to delete or update service logs in BRIDGES as described below.

Deletions
Deletions will occur when incorrect data elements were entered on a service log in BRIDGES. This may occur for a paid or denied claim. For example, if a provider entered the incorrect start and end times for a service, or a service log for the wrong BabyNet member, a deletion is necessary. In these instances, providers must complete a BabyNet Claims Inquiry Form and **securely email the form** to BabyNet@scdhhs.gov for review. If approved, BabyNet will request that the service log(s) be deleted. Once deleted, the provider should reenter the correct information for the service log(s) into BRIDGES and submit them. In this scenario, if the deleted service log's claims control number (CCN) was paid out by MMIS, it would be automatically voided and replaced with a new CCN for the reentered service log.

Updates
Updates to claims will be necessary when a previously submitted claim was denied with an edit code because it included incorrect information. For example, if the third-party liability (TPL) allowable amount and/or TPL paid amount were entered incorrectly into BRIDGES, this information must be updated. In these scenarios, providers must complete a BabyNet Claims Inquiry Form and **securely email the form** to BabyNet@scdhhs.gov for review. If approved, BabyNet will request the affected claims to be moved from the history to pending section in BRIDGES so providers can reenter the correct information. The claims will then be reprocessed and assigned a new CCN that will be posted to the provider's remittance advice available in the SCDHHS web tool.

Timing and Process Information Regarding Deletions and Updates
Requests that have already been submitted to BabyNet will be processed the week after the release of this alert and should not be resubmitted. SCDHHS is anticipating a high volume of requests and asks providers not to send the request directly, or via Carbon Copy (CC), to BabyNet staff members when securely emailing a fully completed BabyNet Claims Inquiry Form to BabyNet@scdhhs.gov. All requests will be logged, tracked, monitored and reviewed on a case-by-case basis and, if approved, processed in the order in which they are received. BabyNet staff will request to delete or move service logs from the

history to pending section in BRIDGES on a weekly basis. Providers will receive a response from BabyNet@scdhhs.gov when these delete and update requests have been submitted to BRIDGES developers. Void transactions (deletions) will take approximately three weeks to complete, and replacement transactions (updates) are dependent on when a provider submits a new service log or updates it. For example, if BRIDGES developers delete a service log in BRIDGES on Friday, a corresponding void transaction would appear on the remittance advice two weeks after the deletion occurred (the payment cycle is three weeks long.) Providers **must** only use the remittance advice in the SCDHHS web tool to reconcile their claims payments and adjudication results.

Void and replace is an internal operation at SCDHHS. Providers may request to delete or update service logs in BRIDGES but cannot initiate the void and replace on their own. Some void and replace transactions will automatically occur without prior notice to providers and be reflected on the remittance advice. For example, SCDHHS is aware of claims that need to be voided and replaced because of overlapping Individualized Family Service Plan (IFSP) meetings; these may have previously denied with an 852 edit code. Another example is when a provider has previously requested a service log deletion and needs to reimburse the agency. SCDHHS will automatically void those previously paid claims and will recoup those payments, which eliminates the need for providers to mail a check to the BabyNet State Office.

Examples
An example of a remittance advice with a void and replace transaction is now available on the BabyNet website, located here.

Another situation where the new void and replace functionality could be used is if a claim with the same information on it is submitted to SCDHHS twice on two different billing cycles. The first claim submitted to the agency would pay, while the second claim would deny with an 852 edit.

For example: A provider renders four units of T1016 today. The provider submits two units this week and submits the other two units the following week. Both of these unique claims are submitted in two different billing cycles. The first claim would pay while the second late-log claim would deny with an 852 edit because MMIS identified it as a duplicate claim.

With void and replace functionality, SCDHHS will void the first claim that initially paid out for two units and submit a replacement claim that combines the two claims together for four total units. The new combined claim will be resubmitted, and the provider will be paid for the full four units.

Reminders
1. The claim correction functionality will adjust affected claims from July 2019 to present that require a void and/or replacement and will be reflected in the next few weeks' payment cycles;
2. Claims correction is an internal value-added function that assists providers by automatically correcting claim submissions when necessary;
3. Only previously paid claims can be voided;
4. Whenever a request is made to delete a service log for a claim that has already been paid, BabyNet will review the request and, if approved, the provider will see a corresponding debit transaction on their remittance advice in the SCDHHS web tool;
5. The most frequent use of claims correction by SCDHHS is deleting an adjudicated CCN that was previously paid and replacing it with a new CCN that has been updated with corrected information in BRIDGES;

6. Adjudicated claims that denied with an edit code are treated as resubmissions; and,
7. Providers should not mail paper checks to the BabyNet State Office for any overage payments made by SCDHHS.

As a reminder, SCDHHS is requesting all emails to the BabyNet program be sent directly to BabyNet@scdhhs.gov. This will decrease response times and improve resolutions of issues submitted by email to the BabyNet program.

Thank you for your continued support of the South Carolina Healthy Connections Medicaid and BabyNet programs.