CHANGE CONTROL RECORD

Date	Section	Page(s)	Change
05-01-13	2	12 5, 6, 12, 57 53 54 55	• Updated Exceptions language • Revised language to include Abilify Maintena • Updated Waiver Programs Operated By Division of Community Long Term Care language • Updated South Carolina Dept. of Disabilities Special Needs Wavier Programs language • Updated Family Planning Services language
05-01-13	3	1 14 14, 15 15	• Updated Billing Media Information • Revised heading to Claims Submission for Family Planning Beneficiaries • Changed reference of FPW to Family Planning • Revised language to include Abilify Maintena
05-01-13	4	3	Updated Possible Reasons For Encountering Error Code
04-01-13	1	6	Corrected the URL for MedicaideLearning.com
03-01-13	2	5, 6, 12	Revised language to include Depo Provera
03-01-13	3	3	Updated Magellan mailing address for cartridges and diskettes
03-01-13	5	14	Deleted Jasper County PO Box address
03-01-13	Appendix 1	i 2, 38, 70 38, 54, 70	Deleted Change Log Changed edit code description reference to DMR and MR/RD to ID/RD for edit codes 052, 053, 712, and 953 Updated resolutions for edit codes 714, 851, and 953
03-01-13	Managed Care Supplement	7	Deleted the Department of Alcohol and Other Drug Abuse from agencies exempt from prior authorizations
02-01-13	1	18	Updated URL address for the National Correct Coding Initiative (NCCI)
01-01-13	5	9 12	• Added Chester county Zip+4 code • Updated Greenville PO Box address
01-01-13	Appendix 1	-	Added Change Log for section changes

CHANGE CONTROL RECORD

Date	Section	Page(s)	Change
12-03-12	1	6 7-8 27-32 33-41	• Updated web addresses for provider information and provider training • Revised heading and language to reflect new provider enrollment requirements • Updated Program Integrity language (entire section) • Revised heading and language for Medicaid Anti-Fraud Provisions/Payment Suspension/Provider Exclusions/Terminations (entire section)
12-03-12	3	20-21	• Updated Electronic Funds Transfer (EFT)
12-01-12	5	5 13	• Updated URL for provider information • Updated McCormick county office telephone number
12-01-12	Appendix 1	24, 26, 27, 32, 33 19, 27, 40, 44, 45, 47, 49, 50, 55, 56, 57, 59, 60, 61,	• Updated CARCs for edit codes 538, 552, 555, 561, 562, 563, 636, 637, 690 • Updated resolutions for edit codes 402, 561, 562, 563, 721, 722, 748, 749, 752, 753, 769, 791, 795, 852, 853, 856, 860, 884, 887, 892, 897, 925, 926
12-01-12	TPL Supplement	8, 9, 17	Updated web addresses for provider information and provider training
11-01-12	5	1	Updated Allendale county office address
11-01-12	Appendix 2	-	Updated carrier code list
10-05-12	Forms	-	Updated Duplicate Remittance Advice Request Form
10-01-12	1	4	Replaced back of Healthy Connections Medicaid card
08-01-12	1	2, 8, 9, 12, 13, 15, 25, 34	Updated program area contact information to reflect Medicaid Bulletin dated June 29, 2012
08-01-12	2	56, 57	Updated program area contact information to reflect Medicaid Bulletin dated June 29

CHANGE CONTROL RECORD

Date	Section	Page(s)	Change
08-01-12	3	20	Updated hyperlink
08-01-12	5	1 5 7	• Updated program area contact information to reflect Medicaid Bulletin dated June 29, 2012 • Removed fax request information for SCDHHS forms • Added SCDHHS forms online order information • Updated telephone number for Greenville county office
08-01-12	Forms	-	• Deleted forms 140 and 142 • Updated Duplicate Remittance Advice Request Form
08-01-12	Appendix 1	- 1, 24, 60, 65, 66-67,70-72 15, 31, 69 8, 10, 29, 31 10, 11, 14, 34, 48	• Updated program area contact information to reflect Medicaid Bulletin dated June 29, 2012 • Replaced CARC 141 or CARC A1 for edit codes 52, 053, 517, 600, 924-926, 929, 954, 961, 964, 966, 967, 969, 980, 985-987 • Added edit codes 349, 590, 978, 990, 991-995 • Deleted edit codes 166, 205, 573, 574, 593, 596 • Updated resolution for edit codes 170-172, 171, 174, 210, 321, 711, 798
08-01-12	Managed Care Supplement	1-2 7 11 17 19	• Changed Division of Care Management to Bureau of Managed Care • Updated program area contact information to reflect Medicaid Bulletin dated June 29, 2012 • Removed language limiting enrollment to 2500 members • Update contact information for Palmetto Physician Connections • Added to “Medicaid” to BlueChoice HealthPlan
08-01-12	TPL Supplement	5, 6, 10,17, 24	Updated program area contact information to reflect Medicaid Bulletin dated June 29, 2012
04-01-12	1	4	Replaced South Carolina Healthy Connections card
04-01-12	2	24 47	• Updated Medicaid Coverage of Tobacco Cessation Products • Updated Copayment

CHANGE CONTROL RECORD

Date	Section	Page(s)	Change
04-01-12	3	3 16	• Updated Submission of Claims • Updated Multi-ingredient Compound Claims
04-01-12	5	5 12 13	• Updated Universal Claim Form • Updated address for Marion County • Updated phone number for Newberry County
03-01-12	2	40 43 45 50 56	• Updated Upper Limits of Payment for Certain Multiple Source Products • Updated Prescription Code Origin • Updated Payment Methodology Information • Updated Medicaid Point-of-Sale Denial Response • Updated Claims Submission for Certain Physician-Injectable Products
03-01-12	3	7 8 10-16 20	• Updated Prescription Number • Updated Monthly Prescription Limit Override Procedures • Updated sections starting at Cost Avoidance Claims Processing until Date of Service is More than One Year Old • Added Web-Based Application and Electronic Funds Transfer (EFT)
02-01-12	5	10	Updated the Fairfield county office number
01-01-12	1	2-5, 20, 24	Deleted IVRS Information per “Retirement of Toll Free Eligibility Verification Line” bulletin released 11-18-11
01-01-12	2	7, 64 14 41, 47 52 56 31, 57-59,	• Added spacers for metered dose inhalers to DME billables • Updated Prior Authorization section • Added WAC + 0.8% to Upper Limits of Payment for Certain Multiple Source Products and Payment Methodology Information • Updated South Carolina PDPs section to reflect the new annual enrollment period • Updated FPW to reflect current eligible beneficiaries • Deleted IVRS Information per “Retirement of

CHANGE CONTROL RECORD

Date	Section	Page(s)	Change
		61&62	Toll Free Eligibility Verification Line" bulletin released 11-18-11
01-01-12	3	10 12 14 18	• Deleted IVRS Information per "Retirement of Toll Free Eligibility Verification Line" bulletin released 11-18-11 • Deleted Medical Home Network under Copayments • Added Risperdal Consta and Invega Sustenna to list of injectable products • Updated hyperlink • Updated EFT information
01-01-12	5	2	Deleted IVRS Information per "Retirement of Toll Free Eligibility Verification Line" bulletin released 11-18-11
01-01-12	Managed Care Supplement	9	Deleted IVRS Information per "Retirement of Toll Free Eligibility Verification Line" bulletin released 11-18-11
01-01-12	TPL Supplement	2	Deleted IVRS Information per "Retirement of Toll Free Eligibility Verification Line" bulletin released 11-18-11
11-01-11	1	24	Updated TPL contact information
11-01-11	TPL Supplement	6, 15 12 3, 17, 19	• Changed Medicare timely filing requirement to two years and six months • Deleted policy to use Medicaid legacy provider number on the same line as the Medicaid carrier code • Deleted sample legacy number from UB-04 TPL Fields table • Updated TPL contact information
09-01-11	1	19	Deleted information regarding National Correct Coding Initiative
09-01-11	5	15	Updated zip code for Spartanburg County office

CHANGE CONTROL RECORD

Date	Section	Page(s)	Change
08-01-11	3	-	Updated language throughout section to reflect the current billing policies including claim processing, claim submission, and copayments
08-01-11	Managed Care Supplement	1, 5	Updated to reflect the new beneficiary copayment requirements in accordance with Public Notice posted July 8, 2011
07-01-11	2	48	Deleted "Beneficiaries enrolled in Medical Homes Networks (SC Solutions) are exempt from copayments."
07-01-11	5	15	Deleted PO Box address for the Spartanburg County Office
06-01-11	2	38, 78	Added language to prohibit automatic prescription refills
06-01-11	5	7	Corrected Abbeville County PO Box Zip+4 Code
05-01-11	1	8, 11	Added language prohibiting payment to institutions or entities located outside of the United States
05-01-11	2	3 48	• Updated Scope of Coverage to include prohibiting payments to institution or entities located outside of the United States • Updated Copayment exemption to include Federally Recognized Indian Tribe
05-01-11	3	12	Updated Copayment exemption to include Federally Recognized Indian Tribe
04-01-11	2	3 48, 57 55	• Corrected the name of the Magellan paper claims unit • Changed outpatient hospital copayment to reflect Medicaid Bulletin dated March 6, 2011 – Copayments • CMS's Contingency Plan for Dual Eligibles, paragraph 2: Removed reference to GAPS or former SILVERxCARD member • Waiver Programs Operated by Division of

CHANGE CONTROL RECORD

Date	Section	Page(s)	Change
		56 57	Community Long Term Care paragraph 1: Removed language exempting CLTC waivers from collection of copayment on Medicaid-covered prescriptions • Family Planning Waiver (FPW), paragraph 4: Added STIs; paragraph 5: Deleted
04-01-11	3	11-12	Changed outpatient hospital copayment to reflect Medicaid Bulletin dated March 6, 2011 – Copayments
04-01-11	5	8	Updated telephone number for Beaufort County
04-01-11	Forms	-	Updated Electronic Funds Transfer Form
03-01-11	1	7, 9	Updated to reflect Medicaid Bulletin dated February 9, 2011 – Provider Service Center
03-01-11	3	17, 18	Updated to reflect Medicaid Bulletin dated February 9, 2011 – Provider Service Center
03-01-11	5	4 7	Updated to reflect Medicaid Bulletin dated February 9, 2011 – Provider Service Center Added toll free number for Aiken County
03-01-11	TPL Supplement	17 24, 25	• Changed the name of the Provider Outreach Web site to Provider Enrollment and Education • Updated the descriptions for Form130s
02-01-11	2	33	Changed the prescription limit overrides to three
01-01-11	1	7 19-20	• Updated the South Carolina Medicaid Web-based Claims Submission Tool section • Updated to reflect Medicaid Bulletin dated December 8, 2010 – Information on NCCI Edits
01-01-11	3	17 18	• Updated electronic remittance package information • Updated to reflect Medicaid Bulletin dated December 10, 2010 – Requests for Duplicate Remittance Package
01-01-11	5	15	Added toll-free telephone number for Saluda county

CHANGE CONTROL RECORD

Date	Section	Page(s)	Change
01-01-11	Forms	-	Added Duplicate Remittance Request Form
01-01-11	TPL Supplement	8, 10 8 10 13 15 15	• Removed references to Dental claims • Removed language to contact program areas for missing carrier codes • Added reference to CMS-1500 for correcting edit code 151 on the ECF • Added edit code 165 to other TPL-related insurance edit codes list • Updated Retro Medicare section to include the following: o Changed the timely filing requirement from 90 days of the invoice to 30 days o Added SCDHHS TPL recovery language • Updated the Retro Health and Pay & Chase section
12-01-10	Cover	-	Replaced “Medicaid Provider Manual” with “South Carolina Healthy Connections (Medicaid)”
12-01-10	2 Forms	21 -	Added new Proton Pump Inhibitors form
12-01-10	Appendices	-	Replaced “South Carolina Medicaid” with “South Carolina Healthy Connections (Medicaid)” in the headers
12-01-10	Supplements	-	Replaced “South Carolina Medicaid” with “South Carolina Healthy Connections (Medicaid)” in the headers
11-01-10	3	15	• Updated “Patient Paid Amount Submitted” Field (ID-433-DX) section
11-01-10	TPL Supplement	3, 8, 13-14, 18-19 6, 15-17	• Updated to reflect Medicaid Bulletin dated July 8, 2010 – Transfer of the Dental Program Administration to DentaQuest • Updated to reflect Medicaid Bulletin dated September 13, 2010 – Changes to the Third Party Liability Medicare Recovery Cycle

CHANGE CONTROL RECORD

Date	Section	Page(s)	Change
10-01-10	1	- 1 7 10	• Removed all reference to the SCHIP program to reflect Medicaid Bulletin dated August 19, 2010 – Changes to the Healthy Connections Kids (HCK) Program • Updated Program Description section • Updated the SC Medicaid Web-Based Claims Submission Tool section to reflect Medicaid Bulletin dated July 8, 2010-Transfer of the Dental Program Administration to DentaQuest • Updated Freedom of Choice section
10-01-10	5	13	Correct McCormick county office street address
10-01-10	Managed Care Supplement	- 1 2 3 4 5 6 13 17	• Removed all references to the SCHIP program to reflect Medicaid Bulletin dated August 19, 2010 – Changes to the Healthy Connections Kids (HCK) Program • Updated Managed Care Overview • Updated Managed Care Organizations and Core Benefits paragraphs • Updated MCO Program ID card paragraph • Updated MHN Program ID card paragraph • Updated Core Benefits • Updated Exempt Services • Updated Overview • Deleted “Medicaid Managed” from “Current Medicaid Managed Care Organizations” heading and following paragraph
09-01-10	5	7 11 13	• Removed County Commissioner’s Building from the Aiken County address • Deleted Dorchester County physical address telephone number • Removed Highway 28 N from the McCormick County address
09-01-10	TPL Supplement	12 13	• Updated the Dental Paper Claims section to delete paper claims submission instructions and added the DentaQuest contact information • Updated the Web-Submitted Claims section with the exception to Dental claims

CHANGE CONTROL RECORD

Date	Section	Page(s)	Change
		18	• Updated the TPL Resources section to include the DentaQuest contact information for TPL questions
08-01-10	Change Control Record	1	Removed July 1 entries for Appendix 1 and Appendix 2
08-01-10	2	23 52	• Updated to reflect Medicaid Bulletin dated July 19, 2010 — Prescription Limit • Removed Gap Assistance Pharmacy Program for Seniors (GAPS) section
08-01-10	3	3	Corrected header
08-01-10	5	7, 11, 13-15 8	• Updated the zip codes for Aiken, Edgefield, McCormick, Newberry, and Saluda counties • Updated the address for Barnwell County • Updated the telephone number for Beaufort County
07-01-10	2	3 3, 4, 5, 9, 11, 14, 17-19, 22-24, 31, 32, 35-38, 45, 47, 54, 59, 60, 63, 64, 71, 75 33	• Changed First Health Services Corporation to Magellan Medicaid Administration, Inc. • Changed First Health to Magellan Medicaid Administration • Updated Monthly Prescription Limit Override Criteria for Adult Beneficiaries section
07-01-10	3	1, 3, 6-11, 13-15 7	• Replaced all references to First Health Services with Magellan Medicaid Administration • Added the 340B Providers section under the Special Billing Issues/Instructions section
07-01-10	4	1	Replaced reference to First Health Services with Magellan Medicaid Administration

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	Forms	-	Updated the following forms to changed First health to Magellan Medicaid Administration: • MedWatch • Prior Authorization Request • Growth Hormone – Adult Treatment • Growth Hormone – Pediatric Treatment • Prior Authorization Request – Adult Treatment • Prior Authorization Request – Antipsychotics • Prior Authorization Request – Hepatitis B • Prior Authorization Request – Hepatitis C
06-01-10	2	33 53 54 58 44	• Updated language in Monthly Prescription Limit Override Criteria for Adult Beneficiaries • Updated verbiage under Medicare Part B Drugs • Deleted duplicate paragraph at bottom of page • Added medications Risperdal Consta and Invega Sustenna for Claims Submissions for Certain Physician-Injectable Products • Added Prescription Origin Code
06-01-10	Managed Care Supplement	1 3 17 20, 23, 25	• Updated Managed Care Overview section • Updated Manage Care Organization (MCO), Core Benefits section • Updated the Managed Care Disenrollment Process, Overview section • Updated to reflect Medicaid Bulletin dated March 18, 2010 — Managed Care Organizational Change
05-01-10	5	3	• Removed reference to sample form at the end of this section • Replaced reference to sample form in the Forms section of this manual
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 entry dated December 1, 2009

CHANGE CONTROL RECORD

Date	Section	Page(s)	Change
03-01-10	2	41 & 69 53-54 54 71 20 21-22	• Added effective date of February 17, 2010 pharmacists must use DAW code of 1 (changed from 6) • Added policy and language pertaining to Contract X0001 done through LINET under section CMS'S Contingency Plan for Dual Eligibles • Deleted section Additional Contingency Plan for Dual Eligibles • Replaced MedWatch form • Replaced Prior Authorization Request Form • Replaced South Carolina Growth Hormone Prior Authorization Request Form
03-01-10	3	3 6 6-7 7	• Updated Physical Address for FIRST HEALTH Services Corporation • Added effective date of December 9, 2009 for requirement for providers to include prescribers NPI number when submitting claims • Deleted language pertaining to FIRST HEALTH website information under the Prescriber Identification Numbers Section • Changed DAW value from 6 to 1
03-01-10	Forms	-	• Replaced MedWatch Form • Replaced Prior Authorization Request Form • Replaced South Carolina Medicaid Growth Hormone Prior Authorization Request Form • Added South Carolina Prior Authorization Request Form - Antipsychotics • Added South Carolina Prior Authorization Request Form – Hepatitis B • Added South Carolina Prior Authorization Request Form – Hepatitis C • Updated hyperlinks
02-01-10	2	51 48	• Under CMS's Contingency Plan for Dual Eligibles heading, GAPS members are not included • Updated the Gap Assistance Pharmacy Program for Seniors (GAPS) section

CHANGE CONTROL RECORD

Date	Section	Page(s)	Change
02-01-10	3	9	Under Beneficiary ID Number heading, changed the card name to South Carolina Healthy Connections
02-01-10	Appendix 1	13 36	• Added New Edit Codes 356,357 and 358 • Updated Edit Code 738
02-01-10	Appendix 2	All	Updated Carrier Code List
01-01-10	5	8 13 14	• Updated Physical Address for Allendale County Office • Replaced Jasper County DSS with Jasper County DHHS • Replaced Orangeburg County DSS with Orangeburg County DHHS
12-01-09	1	8 25	• Updated policy to reflect Medicaid Bulletin dated November 13, 2009 – Electronic Remittance Package • Updated Timely Filing for Submitting Claims section to reflect Medicaid Bulletin dated November 24, 2009
12-01-09	2	5-6 9, 11, 13 45 50 60 70 55 57	• Updated the following sections: o General Exclusions o Prior Authorization o Copayment o Medicaid and Certain PDP-Excluded Drug Categories o Medicaid Coverage of OTC Pharmaceuticals o Quantity of Medication • Deleted Medically Fragile Children's Program section • Updated Reimbursement Guidelines for Influenza, Rabies, and Pneumococcal to reflect Medicaid Bulletin dated August 14, 2009
12-01-09	3	19-20	Updated policy to reflect Medicaid Bulletin dated November 13, 2009 – Electronic Remittance Package
12-01-09	5	11	Updated the Dorchester County office street address

CHANGE CONTROL RECORD

Date	Section	Page(s)	Change
10-01-09	1	3-4 4-6 - 26	• Updated the Medicare/Medicaid Eligibility section to include Qualified Medicare Beneficiaries (QMBs) • Updated SC Medicaid Healthy Connections language throughout section • Updated South Carolina Medicaid Bulletins and Newsletters • Changed heading to Medicare Cost Sharing
10-01-09	5	13 14 15	• Updated physical address for Jasper County office • Updated telephone number for Lexington County office • Updated zip codes for Orangeburg County office
10-01-09	Appendix 1	3 60	• Updated edit code 065 • Updated edit code 852
09-08-09	Managed Care Supplement	20	Replaced the Absolute Total Care Medicaid beneficiary card sample
09-01-09	Managed Care Supplement	21 20, 25	• Removed all references to CHCcares to reflect Medicaid Bulletin dated August 3, 2009 • Updated Absolute Total Care entries as following: o Changed the company's name to Absolute Total Care o Replaced the beneficiary card samples o Corrected contact information
08-01-09	2	31	Under Quantity of Medication Limits/DOS Optimization Program, changed the maximum one-month supply from 34-day supply to 31-day supply
08-01-09	5	16	Updated telephone number for York County office
07-01-09	5	10, 14 10 11	• Updated address for Bamberg and Orangeburg County offices • Updated office zip code for Darlington County • Updated telephone number for Fairfield County office

CHANGE CONTROL RECORD

Date	Section	Page(s)	Change
06-01-09	2	16-19	Corrected formatting
06-01-09	TPL Supplement	19	Updated Department of Insurance Web site address
05-01-09	1	1-6, 11 2 3 5 28-33	• Updated to reflect managed care policies and procedures effective May 1, 2009 • Updated the Eligibility subsection • Added the beneficiary contact telephone number to the South Carolina Healthy Connections Medicaid Card subsection • Removed the program start date from the SC Healthy Connections Kids SCHIP Dental Coverage subsection • Updated the Medicaid Program Integrity subsection
05-01-09	2	27 28, 45	• Replaced reference to Partners for Health Medicaid card with new Healthy Connections card • Updated to reflect managed care policies and procedures effective May 1, 2009
05-01-09	5	16	Updated telephone number for Union County office
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	11, 15, 19	Updated hyperlinks
04-01-09	5	13	Updated telephone number for Lexington County office
03-01-09	2	3, 8, 12, 31-35, 49-53, 61 6 52	• Updated hyperlinks • Added general exclusion 13 (cough/cold medications) • Deleted cough and cold products from the Medicaid and Certain PDP-Excluded Drug Categories

CHANGE CONTROL RECORD

Date	Section	Page(s)	Change
03-01-09	3	5	Changed 34-days' supply to 31-days'
03-01-09	5	1 3, 5 11 11, 14-15	• Changed Partners for Health to Healthy Connections • Update hyperlinks • Corrected Dorchester County's Orangeburg Rd telephone number • Change DSS to DHHS in addresses for Abbeville, McCormick, Newberry, and Saluda counties
03-01-09	Managed Care Supplement	1, 7, 10, 17, 23, 25-30, 35	Updated hyperlinks
03-01-09	TPL Supplement	8, 9, 19	Updated hyperlinks
02-01-09	2	50-51	Updated GAPS information and deleted the PDPs participating in GAPS Chart
02-01-09	5	8	Updated Allendale County office PO Box zip code
02-01-09	Forms	-	Updated Authorization Agreement for Electronic Funds Transfer (EFT) form
01-01-09	1	8	Updated hyperlink for bulletin.scdhhs.gov
01-01-09	5	13	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	Added EFT information to reflect Medicaid Bulletin dated August 26, 2008
10-01-08	5	11, 15	• Updated address for Lake City • Updated address for Sumter County office
09-01-08	5	9	Updated phone number for Berkeley County office
09-01-08	5	13	Updated phone number for Kershaw County office

CHANGE CONTROL RECORD

Date	Section	Page(s)	Change
08-01-08	2	56	Updated Family Planning Wavier information
08-01-08	3	6 16	• Updated Prescriber Identification Number with NPI info • Added paragraph for Claims Submission for FPW Beneficiaries
08-01-08	5	9	Deleted PO Box for Chester County
08-01-08	Appendix 1	3	Updated Edit Code 062
07-01-08	5	15	Deleted PO Box for Lancaster County
07-01-08	Managed Care Supplement	27	Replaced Web site address for BlueChoice
06-01-08	5	12	Updated telephone number for Orangeburg county office
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
04-01-08	TPL Supplement	2 3, 8, 15 12 29	• Updated reference to Medicaid card name • Changed references to location of forms from Section 5 to Forms section • Updated field numbers for occurrence codes on UB-04 • Replaced sample ADA forms with more attractive version
03-01-08	1	3-5 7	• Replaced sample Partners for Health Medicaid card with new Healthy Connections card and updated card information. • Deleted information about location of supervising entities – requirements will be included in Section 2 where applicable
03-01-08	Forms	-	Replaced Form 931 with new version dated January 2008

CHANGE CONTROL RECORD

Date	Section	Page(s)	Change
03-01-08	TPL Supplement	9 21-22	• Added information on carrier code "CAS" for open casualty cases • Replaced Form 931 samples with new versions
02-01-08	2	19 49-51 50-51	• Updated policy on Medicaid Coverage of Tobacco Cessation Products • Removed references to SILVERxCARD • Updated GAPS information for 2008
02-01-08	3	9	Updated NPI policy
01-01-08	5	13	Updated address for Lancaster County office
01-01-08	Managed Care Supplement	1 3	• Removed PhyTrust from the list of MHNs • Added Carolina Crescent to the list of MCOs
11-01-07	5	11, 12 12	• Updated telephone numbers for Florence and Kershaw counties • Updated Horry County address to 1601 11th Ave., 1st Floor
10-01-07	1	1-2 3 4 12 15 25	• Removed PEP information • Added information about managed care enrollment broker and Managed Care Supplement • Removed managed care sample cards (cards and other information will appear in the new Managed Care Supplement). • Clarified that "days" refers to business days • Clarified which sections of manual may contain PA information • Expanded provider list under Program Integrity
10-01-07	2	38-39, 71 68	• Added information about tamper-resistant prescription pads to reflect Medicaid Bulletin dated August 30, 2007. • Updated record retention information
10-01-07	-	-	Added Managed Care Supplement

CHANGE CONTROL RECORD

Date	Section	Page(s)	Change
10-01-07	TPL Supplement	15-17	• Added 90-day time limit for reversing refunds • Added information on Part B timely filing schedule to explain which claims are pulled into Retro Medicare
07-01-07	1	All	Revised policies and procedures throughout section
06-01-07	4	2 - 4	Updated NCPDP error code definitions
06-01-07	TPL Supplement	All	• Updated all sample forms and claims with new versions • Updated form completion instructions to match new form versions
06-01-07	2 & 3	-	• Updated policies governing provider numbers to include National Provider Identifier • Changed references to location of forms from "Section 5" to "Forms section"
06-01-07	Forms	-	Updated DHHS forms to add National Provider Identifier field.
06-01-07	5	9, 11 14 -	• Added toll-free number for Berkeley, Charleston, and Darlington county offices • Updated phone number for Oconee County • Split forms and exhibits from Section 5 to create separate Forms section
04-01-07	5	10	Updated phone number for Darlington county office
03-01-07	5	8	Updated Barnwell county office address
02-01-07	TPL Supplement	31-32	Updated ECF Samples to show third payer line
10-01-06	5	-	Updated county office addresses
09-01-06	2 & 3	All	Updated policies to reflect Medicaid Bulletins dated November 21, 2005; November 29, 2005; December 15, 2005; March 16, 2006; and June 21, 2006.
09-01-06	4	7	Deleted SILVERxCARD edit
09-01-06	5	-	• Updated Web addresses • Updated county office addresses

CHANGE CONTROL RECORD

Date	Section	Page(s)	Change
09-01-06	Appendix 1	All	Deleted Alternate Reimbursement Methodology (ARM) Program Appendix
08-01-06	-	-	Added TPL Supplement
01-01-06	1	4 & 5	Removed SILVERxCARD sample and program description
11-01-05	1	6, 7	Removed "HIPAA" from names of S.C. Medicaid Provider Outreach and S.C. Medicaid EDI Support Center
10-10-05	2 & 3	3-70 (Sec. 2); 5-7 (Sec. 3)	Updated policies to reflect bulletins dated April 15, June 3, July 11, and July 20, 2005, and ongoing implementation of PDL. Revised policy topics include multi-ingredient compounds, partial fill prescriptions, voluntary PDL for mental health drugs, H2RAs, OxyContin, NSAIDs, ED drugs, and proper billing procedures. Also added new PA request form for growth hormone.
10-10-05	5	20 3-5 7-15	• Added new PA request form for growth hormone. • Updated links • Updated list of DHHS county offices
10-01-05	5	7-15	Updated list of DHHS county offices
10-01-05	Appendix	-	Removed the Change Control Record from the appendix to a separate file