

June 12, 2026  
MB# 26-018

## MEDICAID BULLETIN

**TO: Hospital Providers**

**SUBJECT: Credit Balance Report Submissions for Overpayments**

Effective Dec. 1, 2024, the [Centers for Medicare and Medicaid Services](#) eliminated the mandatory submission of a quarterly [Medicare Credit Balance Report \(CMS-838\)](#). Hospital providers are still required to identify and report any overpayments, but they should only submit a credit balance report when they occur. Zero-balance certifications are also no longer required.

Any self-identified overpayments may be mailed to MIVS, Attn: Benefit Recovery-Credit Balance Reporting, P.O. Box 8355, Columbia, SC 29202-8355 or may be sent by fax to MIVS, Attn: Benefit Recovery-Credit Balance Reporting at (803) 462-2582. Written requests for debit adjustments may be submitted in lieu of a check.

Providers should direct any questions related to this bulletin to the Third Party Liability Fund Recovery team by emailing [MIVS@bcssc.com](mailto:MIVS@bcssc.com) or calling (888) 289-0709, option five then option one. The team is available Monday through Friday from 8:30 a.m. to 5 p.m.

Thank you for your continued support of the South Carolina Healthy Connections Medicaid program.

/s/  
Eunice Medina