

# Medicaid Webinar: Incontinence Supplies and Durable Medical Equipment (DME)

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March 20, 2026

South Carolina Department of Health and Human Services

# Meeting Objectives

- Members added to managed care
  - Transition of existing authorizations
  - New authorizations, update on referral process
- Update on billing, claims and enrollment
- Updates from managed care plans
- Q & A
  - Hospice and incontinence supplies

# Members Added to Managed Care

- Effective Jan. 1, 2026, the South Carolina Department of Health and Human Services (SCDHHS) added some Healthy Connections Medicaid members to the managed care service delivery model.
- This included Medicaid members 18 years of age or older who:
  - Are dually enrolled in Medicare and Medicaid;
  - Are enrolled in the HIV/AIDS waiver;
  - Are enrolled in the Mechanical Ventilator Dependent (Vent) waiver;
  - Are enrolled in the Community Choices waiver; and
  - Reside in a nursing facility
    - Healthy Connections Medicaid members who reside in a nursing facility will now be enrolled in a Medicaid managed care organization (MCO) for coverage of medical services.
- Providers can find additional guidance about any changes to claims submission, payment and authorization at [www.scdhhs.gov/carvein](http://www.scdhhs.gov/carvein).

# Members Added to Managed Care *(cont.)*

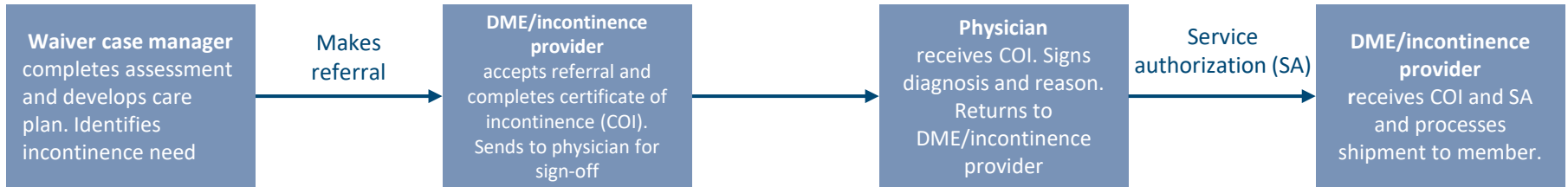
- Service providers can check eligibility and status of enrollment in managed care through the South Carolina Healthy Connections Medicaid web-based claims submission tool (web tool).
  - Update to web tool was made Jan. 24, 2026.
- [Web Tool Quick Reference Guide](#)
  - [Eligibility \(visual book\)](#)
    - Verification results screen
- To set up a new account, call Provider Service Center at (888) 289-0709. Hours are 7:30 a.m. – 5 p.m. M-Th and 8:30 a.m. – 5 p.m. Friday.
- Members enrolled in managed care will receive a new Healthy Connections Medicaid member card from their MCO.

# Update on Authorizations and Referrals

- New authorizations
  - Update on referral process
  - Authorizations for members in fee-for-service (FFS) will continue to be routed through Phoenix. This includes children receiving incontinence supplies (IS).

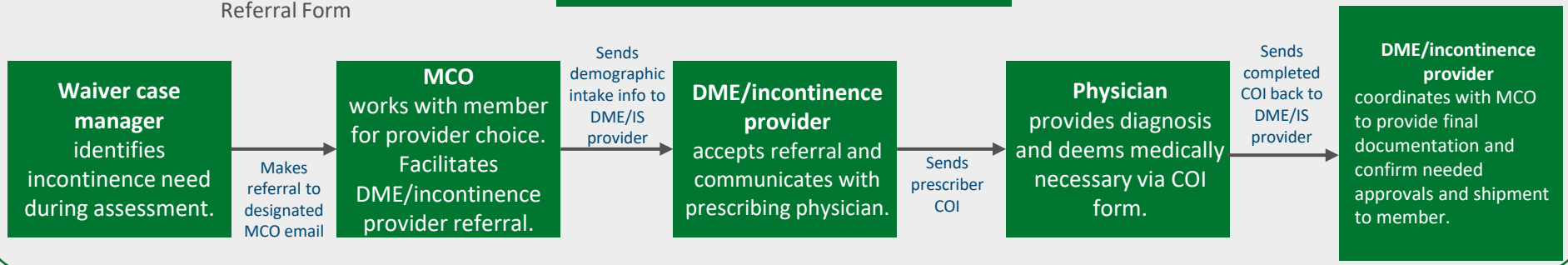
# Home and Community-based Services Waiver: Incontinence Referral Process

## Current Process



## Future Process (Proposed)

Referral Form



# Update on Claims

- Claims submitted through Phoenix for waiver services (nutritional supplements, hand-held shower, specialized equipment/supplies)
  - Re-exports from Phoenix

# Continuity of Care Period

- The MCOs are responsible for a 180-day continuity of care period for newly-enrolled MCO members. It is important that providers continue to deliver authorized services.
- During this continuity of care period, MCOs are required to:
  - Honor all previous prior authorizations without requiring additional authorization from providers; and
  - Pay previously authorized services at 100% of the applicable Medicaid FFS rate, unless a contractually negotiated rate exists, regardless of whether the provider is in-network with the MCO.
- Once the continuity of care period is over, providers must be enrolled with the MCO in which the Healthy Connections Medicaid member is enrolled.

# MCO Enrollment and Billing Processes

## Points of Contact

| MCO                 | Contact Name                   | Email  | Phone                            |
|---------------------|--------------------------------|--|----------------------------------|
| Absolute Total Care | Jennifer Helms<br>Donald Pifer | <a href="mailto:jennifer.b.helms@centene.com">jennifer.b.helms@centene.com</a><br><a href="mailto:dpifer@centene.com">dpifer@centene.com</a>   | (803) 206-2800<br>(803) 201-3355 |
| Healthy Blue        | Tammy Betts                    | <a href="mailto:Tammy.Betts@bcbssc.com">Tammy.Betts@bcbssc.com</a>   | (803) 264-9667                   |
| Select Health       | Nancy Carey<br>Jill Dunnigan   | <a href="mailto:ncarey@selecthealthofsc.com">ncarey@selecthealthofsc.com</a><br><a href="mailto:jdunnigan@selecthealthofsc.com">jdunnigan@selecthealthofsc.com</a>                           | (843) 300-5857<br>(843) 607-5649 |
| Molina              | Tyler Stalvey                  | <a href="mailto:tyler.stalvey@molinahealthcare.com">tyler.stalvey@molinahealthcare.com</a><br><a href="mailto:scgovtcontracts@molinahealthcare.com">scgovtcontracts@molinahealthcare.com</a> | (803) 667-8695                   |
| Humana              | Kryshinda Miles                | <a href="mailto:KMiles21@humana.com">KMiles21@humana.com</a>   | (803) 346-6909                   |

# MCO Points of Contact

- Points of contact and information on prior authorization and enrollment/credentialing for each South Carolina MCO is available on [SCDHHS' website](#) and below.
- MCO prior authorization and provider help lines
  - Absolute Total Care (866) 433-6041
  - Healthy Blue by BlueChoice HealthPlan of SC (866) 757-8286
  - Molina Healthcare of South Carolina (855) 237-6178
  - First Choice by Select Health of South Carolina (888) 559-1010
  - Humana Healthy Horizons in South Carolina (866) 432-0001

