

CHANGE CONTROL RECORD

Date	Section	Page(s)	Change
06-01-10	Managed Care Supplement	1 3 17 20, 23, 25	<ul style="list-style-type: none"> • 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	1	<ul style="list-style-type: none"> • Removed references to blank form at the end of this section • Replaced with references to blank 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 and section 3 entries dated 12-01-09
03-01-10	3	3, 18	Removed modem as an electronic claims transmission method
02-01-10	Appendix 1	13 36	<ul style="list-style-type: none"> • 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	5 10 12	<ul style="list-style-type: none"> • Updated Physical Address for Allendale County Office • Replaced Jasper County DSS with Jasper County DHHS • Replaced Orangeburg County DSS with Orangeburg County DHHS
01-01-10	Forms	-	Added Healthy Connections Kids form
01-01-10	Appendix 1	49	Updated Edit Code 932
12-01-09	1	8 25	<p>Updated policy to reflect Medicaid Bulletin dated November 13, 2009 – Electronic Remittance Package</p> <p>Updated Timely Filing for Submitting Claims</p>

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Date	Section	Page(s)	Change
			section to reflect Medicaid bulletin dated November 24, 2009
12-01-09	3	1-2 17-24	<ul style="list-style-type: none"> • Updated Claim Filing Timeliness section to reflect Medicaid bulletin dated November 24, 2009 • Updated policy to reflect Medicaid Bulletin dated November 13, 2009 – Electronic Remittance Package
12-01-09	5	8	Updated the Dorchester County street address
12-01-09	Appendix 1	- - 18, 19 20	<ul style="list-style-type: none"> • Replaced CARC 17 with CARC 16 • Updated CARC A1 • Updated codes 509 and 510 • Added code 533
11-01-09	2	59 35-115	<ul style="list-style-type: none"> • Under Targeted Case Management, update the Transition to Community Services subsection • Reformatted Program Services section
11-01-09	Appendix 2	All	Updated carrier code lis
10-01-09	1	3-4 4-6 8 25	<ul style="list-style-type: none"> • 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	2	27-28 101	<ul style="list-style-type: none"> • Removed prior authorization charts • Removed the requirement for the MHP or the DCS to cosign service notes
10-01-09	5	10 11 12	<ul style="list-style-type: none"> • Updated physical address for Jasper County office • Updated telephone number for Lexington County office • Updated zip codes for Orangeburg County office

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Date	Section	Page(s)	Change
10-01-09	Appendix 1	3 60	<ul style="list-style-type: none"> • 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	2	30	Under Level II.1: Intensive Outpatient Services, last paragraph, replaced concurrent case management with case management (TCM/CCM)
09-01-09	Forms	-	Updated Referral Form/Authorization for Services, Children's Behavioral Health Services Form (Form 254)
09-01-09	Managed Care Supplement	21 20, 25	<ul style="list-style-type: none"> • Removed all references to CHCcares to reflect Medicaid Bulletin dated August 3, 2009 • Updated Absolute Total Care entries as following: <ul style="list-style-type: none"> ○ Changed the company's name to Absolute Total Care ○ Replaced the beneficiary card samples ○ Corrected contact information
08-01-09	5	14	Updated telephone number for York County office
08-01-09	Appendix 1	3	Updated edit code 062
08-01-09	Appendix 2	All	Updated carrier code list
07-01-09	5	6, 12 8 9	<ul style="list-style-type: none"> • Updated address for Bamberg and Orangeburg County offices • Updated office zip code for Darlington County • Updated telephone number for Fairfield County office
06-01-09	TPL Supplement	19	Updated Department of Insurance Web site address
05-01-09	1	1-6, 11 2	<ul style="list-style-type: none"> • Updated to reflect managed care policies and procedures effective May 1, 2009 • Updated the Eligibility subsection

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Date	Section	Page(s)	Change
		3 5 28-33	<ul style="list-style-type: none"> • 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	5	13	Updated telephone number for Union County office
05-01-09	Appendix 1	43	Deleted edit code 694
05-01-09	Appendix 2	-	Updated list of carrier codes
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	2	100 107 109	<ul style="list-style-type: none"> • Updated verbiage for Peer Support Services • Updated verbiage for Behavioral Health Screening • Added Injectable Medication Administration (MED. ADM) section
04-01-09	3	4, 5, 7, 18, 24, 32, 34	Updated hyperlinks
04-01-09	4	2 3	<ul style="list-style-type: none"> • Added procedure codes H0002 HF, H0038 • Added Reimbursable Medicaid Codes for Injections section
04-01-09	5	11	Updated telephone number for Lexington County office
03-01-09	5	3-4 8 5, 11-13	<ul style="list-style-type: none"> • Update hyperlink • Corrected Dorchester County's Orangeburg Road telephone number • Change DSS to DHHS in addresses for Abbeville, McCormick, Newberry, and Saluda counties

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03-01-09	Appendix 1	43 72	<ul style="list-style-type: none"> • Added new edit codes 693 and 694 • Changed edit code 945 Resolution to input “26”modifier in field 18
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	5	5	Updated Allendale County office PO Box zip code
02-01-09	Forms	-	Updated Authorization Agreement for Electronic Funds Transfer (EFT) form
02-01-09	Appendix 2	-	Updated list of carrier codes
01-01-09	1	8	Updated hyperlink for bulletin.scdhhs.gov
01-01-09	2	100 108	<ul style="list-style-type: none"> • Added section on Peer Support Services • Added section on Behavioral Health Screenings
01-01-09	5	11	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, 23	Added EFT information to reflect Medicaid Bulletin dated August 26, 2008
10-01-08	3	25	Changed edit correction form field 1 to Prov/Xwalk ID
10-01-08	5	9, 13	<ul style="list-style-type: none"> • Updated address for Lake City • Updated phone number for Sumter County office
10-01-08	Forms	-	Revised ECF example to show update for field 1
10-01-08	Appendix 1	-	Updated edit codes 007, 059, 112, 219, 308, 339, 386, 403, 710, 722, 786, 798, 799, 843, 844, 845, 912, 914, 928, 941, 942, 943, 945, 952

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Date	Section	Page(s)	Change
09-01-08	5	6	Updated phone number for Berkeley County office
09-01-08	5	10	Updated phone number for Kershaw County office
09-01-08	Appendix 1	17	Added Edit Code 318
08-01-08	Appendix 1	3	Updated Edit Code 062
08-01-08	5	7	Deleted PO Box for Chester County
07-01-08	5	11	Deleted PO Box for Lancaster County
07-01-08	Managed Care Supplement	27	Replaced Web site address for BlueChoice
06-01-08	3	7, 15, 17, 22	Updated NPI policy and form instructions to reflect May 23, 2008, deadline requiring NPI only on claims for typical providers
06-01-08	5	12	Updated telephone number for Orangeburg county office
06-01-08	Forms	-	Deleted sample claim form showing NPI and Medicaid Provider ID
06-01-08	Appendix 1	30, 39, 42	<ul style="list-style-type: none"> • Added new edit code 529 • Deleted NPI warning edits 578, 579, 580, 581, 582, 583, 692
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
05-01-08	2	58	Changed TCM Hierarchy and Guidelines services rendered from TCM services to concurrent case management services
05-01-08	3	8	Clarified NPI filing requirements for claims submitted after the May 23, 2008, NPI-only deadline for typical providers.

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Date	Section	Page(s)	Change
05-01-08	Appendix 1	3, 38 31	<ul style="list-style-type: none"> • Revised edit codes 062 and 569 • Added edit code 520
05-01-08	Managed Care Supplement	-	Revised supplement to include general policies and procedures effective May 1, 2008 and updated the SCDHHS-approved MCO contractors section
04-01-08	5	8	Updated address and phone number for Dorchester County office
04-01-08	Appendix 1	4, 13, 20, 33	Added new edit codes 062, 219, 339, 528
04-01-08	TPL Supplement	2 3, 8, 15 12 29	<ul style="list-style-type: none"> • Updated reference to Medicaid card name • Changed references to location of form from Section 5 to Forms section • Updated field numbers for occurrence codes on UB-04 • Replaced sample ADA form with more attractive version
03-01-08	1	3-5 7	<ul style="list-style-type: none"> • 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	3	7-19 All	<ul style="list-style-type: none"> • Updated NPI policy and form instructions to reflect March 1, 2008, deadline requiring NPI on claims for typical providers (with or without Medicaid legacy number). • Standardized formatting
03-01-08	Forms	-	Replaced Form 931 with new version dated January 2008
03-01-08	Appendix 1	42 52	<ul style="list-style-type: none"> • Added edit code 808 • Revised edit code 943 description and status (from warning to active)

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Date	Section	Page(s)	Change
03-01-08	TPL Supplement	9 21-22	<ul style="list-style-type: none"> • Added information on carrier code “CAS” for open casualty cases • Replaced Form 931 samples with new versions
02-01-08	3	10 27, 30 43	<ul style="list-style-type: none"> • Corrected instructions for field 10b • Standardized references to six-character legacy provider number • Corrected mailing address for refunds
02-01-08	5	1	Removed “including Partners for Health” from first paragraph
02-01-08	Forms	-	Corrected mailing address for Medicaid Refunds Form 205
01-01-08	5	10	Updated address for Lancaster County office
01-01-08	Managed Care Supplement	1 3	<ul style="list-style-type: none"> • Removed PhyTrust from the list of MHNs • Added Carolina Crescent to the list of MCOs
12-01-07	5	8, 10, 12 10	<ul style="list-style-type: none"> • Updated addresses for Edgefield, Lancaster and Oconee County offices • Updated zip code for Kershaw county
11-01-07	2	93 iv, 93	<ul style="list-style-type: none"> • Under Therapeutic Behavioral Services (Formerly Therapeutic Child Treatment) – Assessment, reinserted Individual Treatment Plan (ITP) that was inadvertently removed • Reformatted Table of Contents and TBS section to be consistent with division standards
11-01-07	5	9, 10 10	<ul style="list-style-type: none"> • Updated telephone numbers for Florence and Kershaw counties • Updated Horry County address to 1601 11th Ave., 1st Floor
11-01-07	Appendix 1	All	<ul style="list-style-type: none"> • Corrected ECF field numbers throughout edit resolution instructions • Added new edit code 107
11-01-07	Appendix 2	All	Updated list of carrier codes

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Date	Section	Page(s)	Change
10-02-07	2	- - - 14 27 27 71	<ul style="list-style-type: none"> • Updated policy to reflect Medicaid Bulletin dated June 14, 2007 • Changed human services to health- and human-related services throughout manual • Under Staff Qualification throughout manual, changed credentialed to certified • Moved V-Codes, Supplemental V-Codes, and Unacceptable V-Codes sections under Individual Treatment Plan • Deleted procedure codes H0008 and H0008-HA from chart of codes that require prior authorization • Changed Psychological Testing code to 96101, Units/Time to 1 hour, and Frequency to 4/day – 12/year on chart of codes that require prior authorization • Changed policy for Program Content under MHS-NOS
10-02-07	3	5 8-20	<ul style="list-style-type: none"> • Changed hyperlink format under Diagnostic Codes • Reformatted CMS-1500 Form Completion Instructions
10-02-07	4	- 1 1	<ul style="list-style-type: none"> • Updated policy to reflect Medicaid Bulletin dated June 14, 2007 • Deleted procedure codes H0008 and H0008-HA from chart • Changed Psychological Testing code to 96101, Units/Time to 1 hour, and Frequency to 4/day – 12/year on chart of codes that require prior authorization
10-02-07	Change Control Record	2	Added Section 3 updates for October 1, which were inadvertently left out of October 1 Change Control Record
10-01-07	1	1-2 3 4	<ul style="list-style-type: none"> • Removed PEP information • Added information about managed care enrollment broker and Managed Care Supplement • Removed managed care sample cards (cards and

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		12 15 25	<p>other information will appear in the new Managed Care Supplement).</p> <ul style="list-style-type: none"> • 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	3	4, 13 46	<ul style="list-style-type: none"> • Removed PEP information • Added 90-day time limit for reversing refunds
10-01-07	Appendix 1	26 38-40, 43, 70	<ul style="list-style-type: none"> • Corrected description for edit code 502 • Added NPI warning edits 578-583, 692, 943
10-01-07	-	-	Added Managed Care Supplement
10-01-07	TPL Supplement	15-17	<ul style="list-style-type: none"> • 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
07-01-07	Forms	-	Updated DHHS Form 205
07-01-07	Appendix 2	-	Updated list of carrier codes
06-01-07	Forms	-	<ul style="list-style-type: none"> • Updated DHHS forms to add National Provider Identifier field • Updated sample claims to new CMS-1500 version • Updated ECF and remits to new versions • Updated DHHS Form 254
06-01-07	5	3-4 6-8 12 -	<ul style="list-style-type: none"> • Revised “Procurement of Forms” to address new CMS-1500 and updated vendor information • Added toll-free numbers for Berkeley, Charleston and Dorchester county offices • Updated phone number for Oconee County • Split forms and exhibits from Section 5 to create Forms section

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Date	Section	Page(s)	Change
06-01-07	3	-	Removed Time Restricted Supplement
06-01-07	3	All	<ul style="list-style-type: none"> • Updated form completion instructions for new CMS-1500 and Form 130 versions • Updated ECF and RA descriptions • Added information about National Provider Identifier • Replaced Reference to Forms 110 and 120 with Form 115 • Clarified retroactive eligibility policy • Updated ECF correction instructions • Added CPT and HCPCS ordering information • Made minor editorial changes throughout section
06-01-07	Appendix 1	-	Updated list of edit codes
06-01-07	TPL Supplement	All	<ul style="list-style-type: none"> • Updated all sample forms and claims with new versions • Updated form completion instructions to match new form versions
05-01-07	Appendix 1	-	Updated list of edit codes
04-01-07	5	8	Updated phone number for Darlington county office
04-01-07	Appendix 1	-	Updated list of edit codes
04-01-07	Appendix 2	-	Updated list of carrier codes
04-01-07	Time Restricted Supplement	-	Updated date for mandatory use of revised CMS-1500
03-02-07	Time Restricted Supplement	All	Removed all references to NDC quantity and unit
03-02-07	Appendix 1	-	Updated list of edit codes