

## CHANGE CONTROL RECORD

Date	Section	Page(s)	Change
02-01-10	Appendix 1	13 36	<ul style="list-style-type: none"> <li>• Added New Edit Codes 356,357 and 358</li> <li>• Updated Edit Code 738</li> </ul>
02-01-10	Appendix 2	All	Updated Carrier Code List
01-01-10	2	6  15  47  158  173	<ul style="list-style-type: none"> <li>• Added new Direct Physician Supervision subsection</li> <li>• Updated to reflect co-signature policy in accordance with Medicaid bulletin dated December 17, 2009</li> <li>• Under Ambulatory Care Visit Guidelines, changed eligibility inquiries to unlimited for the number of calls to the IVRS and the number of transactions per call</li> <li>• Updated to reflect the Visual Evoked Potential (VEP) testing policy in accordance with Medicaid bulletin dated December 21, 2009</li> <li>• Updated the number of allowable chiropractic visits per year to 8 visits</li> <li>• Updated the Lesion Removal subsection</li> </ul>
01-01-10	4	21	Added Family Planning codes 73830, 78656, 78657
01-01-10	5	5  10  12	<ul style="list-style-type: none"> <li>• Updated Physical Address for Allendale County Office</li> <li>• Replaced Jasper County DSS with Jasper County DHHS</li> <li>• Replaced Orangeburg County DSS with Orangeburg County DHHS</li> </ul>
01-01-10	Appendix 1	49	Updated edit code 932
12-01-09	1	8  25	<ul style="list-style-type: none"> <li>• Updated policy to reflect Medicaid Bulletin dated November 13, 2009 – Electronic Remittance Package</li> <li>• Updated Timely Filing for Submitting Claims section</li> </ul>
12-01-09	2	86 99 172 208	<ul style="list-style-type: none"> <li>• Updated Ultrasound subsection</li> <li>• Updated Family Planning subsection</li> <li>• Added new Keloid/Scar Conditions subsection</li> <li>• Updated Retroactive Eligibility subsection</li> </ul>

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12-01-09	3	1-2 21-28	<ul style="list-style-type: none"> <li>• Updated Claim Filing Timeliness section</li> <li>• Updated policy to reflect Medicaid Bulletin dated November 13, 2009 – Electronic Remittance Package</li> </ul>
12-01-09	4	21	Family Planning CPT Codes list: <ul style="list-style-type: none"> <li>• Added code 96372</li> <li>• Deleted code 99384</li> </ul>
12-01-09	5	8	Updated the Dorchester County office street address
12-01-09	Appendix 1	- - 18, 19 20	<ul style="list-style-type: none"> <li>• Replaced CARC 17 with CARC 16</li> <li>• Updated CARC A1</li> <li>• Updated codes 509 and 510</li> <li>• Added code 533</li> </ul>
11-01-09	2	3	Updated policies to reflect Medicaid Bulletin dated October 12, 2009 – Qualified Medicare Beneficiaries and Physician Assistants
11-01-09	4	13, 19	Moved code J1453 to CPT codes that require SCDHHS prior authorization
11-01-09	Appendix 2	All	Updated carrier code list
11-01-09	Fee Schedule	-	Updated Physicians Fee Schedule
10-01-09	1	3-4  4-6  26	<ul style="list-style-type: none"> <li>• Updated the Medicare/Medicaid Eligibility section to include Qualified Medicare Beneficiaries (QMBs)</li> <li>• Updated SC Medicaid Healthy Connections language throughout section</li> <li>• Updated South Carolina Medicaid Bulletins and Newsletters</li> <li>• Changed heading to Medicare Cost Sharing</li> </ul>
10-01-09	2	155	Under Chiropractic Services, Covered Services, changed 12 maximum visits to 8 maximum visits
10-01-09	4	47-256	Revised the Support Documentation sections

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Date	Section	Page(s)	Change
10-01-09	5	10 11 12	<ul style="list-style-type: none"> <li>• Updated physical address for Jasper County office</li> <li>• Updated telephone number for Lexington County office</li> <li>• Updated zip codes for Orangeburg County office</li> </ul>
10-01-09	Appendix 1	3 60	<ul style="list-style-type: none"> <li>• Updated edit code 065</li> <li>• Updated edit code 852</li> </ul>
09-08-09	Managed Care Supplement	20	Replaced the Absolute Total Care Medicaid beneficiary card sample
09-01-09	2	147 156	<ul style="list-style-type: none"> <li>• Updated code for Cardiac Magnetic Resonance Imaging (MRI) of the Heart</li> <li>• Under Chiropractic Services, Covered Services, changed 12 maximum visits to 8 maximum visits</li> </ul>
09-01-09	4	11 14 15, 16, 17 18 19	<ul style="list-style-type: none"> <li>• Supporting Documentation ICD-9 Surgical Code and CPT Code list</li> <li>• Added code J0453 to the CPT Code Requiring Support Documentation for SCDHHS</li> <li>• Prior Authorization ICD-9 Surgical Codes and CPT Codes list: <ul style="list-style-type: none"> <li>o Added code 03.99</li> <li>o Changed code 85.60 to 85.6</li> <li>o Removed code 85</li> </ul> </li> <li>• CPT Codes Requiring Qualis Health Prior Authorization Review list: <ul style="list-style-type: none"> <li>o Added codes 19316, 22899, and 69714</li> <li>o Removed codes 15831 and 19140</li> </ul> </li> <li>• Added codes J9207, J9330, and Q4100 to the CPT Codes Requiring SCDHHS Review list</li> </ul>

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Date	Section	Page(s)	Change
09-01-09	Managed Care Supplement	21 20, 25	<ul style="list-style-type: none"> <li>• Removed all references to CHCcares to reflect Medicaid Bulletin dated August 3, 2009</li> <li>• Updated Absolute Total Care entries as following:               <ul style="list-style-type: none"> <li>o Changed the company's name to Absolute Total Care</li> <li>o Replaced the beneficiary card samples</li> <li>o Corrected contact information</li> </ul> </li> </ul>
08-01-09	3	ii	Corrected Table of Contents formatting
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	-	Updated carrier code list
07-08-09	2	129	Updated policies to reflect Medicaid Bulletin dated March 11, 2009 – Psychiatric and Counseling Services
07-08-09	4	18	Added procedure code 19316 to the CPT Code Requiring Qualis Health Prior Authorization Review list
07-08-09	Forms	-	Added new Psychiatric Prior Authorization Form - Inpatient
07-01-09	2	43 54-55 111-112, 121, 125, 222, 229 155	<ul style="list-style-type: none"> <li>• Added notes to the Forensic Medical Evaluations HCPCS chart</li> <li>• Updated administration fee to \$13.00 for CPT codes 90473 and 90474</li> <li>• Updated policies to reflect Medicaid Bulletin dated June 5, 2009 – Modification to Psychiatric and Counseling Services</li> <li>• Updated policies to reflect Medicaid Bulletin dated June 5, 2009 – Modification to Chiropractic Services</li> </ul>
07-01-09	4	18	Added procedure code 19340 to CPT Codes Requiring Qualis Health Prior Authorization Review list

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Date	Section	Page(s)	Change
07-01-09	5	6, 12 8 9	Updated address for Bamberg and Orangeburg County offices <ul style="list-style-type: none"> <li>• Updated office zip code for Darlington County</li> <li>• Updated telephone number for Fairfield County office</li> </ul>
07-01-09	Forms	-	Updated Mental Health Form
06-01-09	2	43 86	<ul style="list-style-type: none"> <li>• Updated the Forensic Medical Evaluations subsection</li> <li>• Added Laboring Services subsection</li> </ul>
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	<ul style="list-style-type: none"> <li>• Updated to reflect managed care policies and procedures effective May 1, 2009</li> <li>• Updated the Eligibility subsection</li> <li>• Added the beneficiary contact telephone number to the South Carolina Healthy Connections Medicaid Card subsection</li> <li>• Removed the program start date from the SC Healthy Connections Kids SCHIP Dental Coverage subsection</li> <li>• Updated the Medicaid Program Integrity subsection</li> </ul>
05-01-09	2	1-2, 109, 154, 177, 180, 206 35, 36, 38-42, 94 129	<ul style="list-style-type: none"> <li>• Updated to reflect managed care policies and procedures effective May 1, 2009</li> <li>• Replaced the following Pediatrics and Neonatal procedures codes: 99293-99296, 99431 - 99435, 99440</li> <li>• Deleted the following Pediatrics and Neonatal procedures codes: 90918-90921 and 90922-90925</li> </ul>
05-01-09	5	14	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

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Date	Section	Page(s)	Change
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	31  42-43  111-112, 121, 125, 222-225, 230-233	<ul style="list-style-type: none"> <li>• Updated policies to reflect Medicaid Bulletin dated March 4, 2009 – Medicaid Eligibility and Services Updates</li> <li>• Updated Forensic Medical Evaluations subsection</li> <li>• Updated policies to reflect Medicaid Bulletin dated March 4, 2009 - Psychiatric and Counseling Services</li> </ul>
04-01-09	3	4, 6, 7, 10, 21, 22, 27, 35, 38	Updated hyperlinks
04-01-09	4	11-12  15-16	<ul style="list-style-type: none"> <li>• Replaced “Supporting Documentation Diagnosis Codes” heading with “Supporting Documentation ICD-9 Surgical Codes and CPT Codes”</li> <li>• Replaced “Prior Authorization Diagnostic Codes” heading with “Prior Authorization ICD-9 Surgical Codes and CPT Codes”</li> </ul>
04-01-09	5	11	Updated telephone number for Lexington County office
04-01-09	Forms	-	Added Mental Health Form

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Date	Section	Page(s)	Change
03-06-09	4	13, 18, 15	Corrected the following Qualis Health Prior Authorization lists: <ul style="list-style-type: none"> <li>• Qualis Health Support Documentation               <ul style="list-style-type: none"> <li>◦ Added codes 54235, 54240, 57292, and 63650</li> </ul> </li> <li>• ICD-9 Qualis Health Prior Authorization Review               <ul style="list-style-type: none"> <li>◦ Added code 03.09</li> <li>◦ Changed code 71.90 to 71.9</li> <li>◦ Added code 03.09</li> </ul> </li> <li>• Qualis Health Prior Authorization Review               <ul style="list-style-type: none"> <li>◦ Changed code 52435 to 54235</li> <li>◦ Added codes 54240, 57292</li> <li>◦ Removed duplicate code 63170</li> </ul> </li> </ul>
03-01-09	2	43  180, 182	<ul style="list-style-type: none"> <li>• Updated Forensic Medical Evaluations subsection to reflect Medicaid Bulletin dated February 13, 2009</li> <li>• Updated Organ Transportation subsection to reflect Medicaid Bulletin dated February 18, 2009</li> </ul>
03-01-09	5	4 8  5, 11-13	<ul style="list-style-type: none"> <li>• Updated hyperlink</li> <li>• Corrected Dorchester County's Orangeburg Road telephone number</li> <li>• Change DSS to DHHS in addresses for Abbeville, McCormick, Newberry, and Saluda counties</li> </ul>
03-01-09	Forms	-	<ul style="list-style-type: none"> <li>• Added new Transplant Prior Authorization Form</li> <li>• Removed outdated Out-of-Service Referral Form to reflect Medicaid Bulletin dated February 18, 2009</li> </ul>
03-01-09	Appendix 1	43 72	<ul style="list-style-type: none"> <li>• Added new edit codes 693 and 694</li> <li>• Changed edit code 945 Resolution to input "26" modifier in field 18</li> </ul>
03-01-09	Managed Care Supplement	1, 7, 10, 17, 23, 25-30, 35	Updated hyperlinks

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Date	Section	Page(s)	Change
03-01-09	TPL Supplement	8, 9, 19	Updated hyperlinks
02-04-09	2	5 12-15 24, 26, 33, 34, 87 42-43  130  131  134-138 224	<ul style="list-style-type: none"> <li>• Changed Medicaid ID number to NPI number</li> <li>• Updated Ambulatory Care Visit Guidelines</li> <li>• Changed code 90772 to 96372</li> <li>• Added Forensic Medical Evaluations subsection</li> <li>• Updated Ophthalmology and Optometry subsection</li> <li>• Updated Exam and Glasses for Beneficiaries Age 21 and Over subsection to reflect verbiage change for post-surgical lens and medical necessity</li> <li>• Updated vision policy to reflect Medicaid Bulletin dated December 19, 2008</li> <li>• Changed Dental program manager telephone number</li> </ul>
02-04-09	4	15-18	Updated Qualis Prior Authorization codes to reflect Medicaid bulletin dated January 15, 2009
02-04-09	5	5	Updated Allendale County office PO Box zip code
02-04-09	Forms	-	Updated Authorization Agreement for Electronic Funds Transfer (EFT) form
02-04-09	Appendix 2	-	Updated list of carrier codes revised 02/01/09
01-01-09	1	8	Updated hyperlink for <a href="http://bulletin.scdhhs.gov">bulletin.scdhhs.gov</a>
01-01-09	2	30, 219, 225 219, 225	<ul style="list-style-type: none"> <li>• Changed adult physical exam frequency from every two years to every five years</li> <li>• Changed code range for adult physical exam from 99391-99394 to 99391-99395</li> </ul>
01-01-09	4	18	Added procedure codes 19342 and 52435
01-01-09	5	11	Updated Lee County office address

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Date	Section	Page(s)	Change
12-01-08	2	94, 149, 150, 168, 169, 170, 175-179, 187	Made revisions to reflect InterQual information.
12-01-08	4	-	Added and deleted various codes in the Prior Authorization and Supporting Documentation from Qualis Health procedure code and diagnosis codes sections.
11-01-08	1	8	Added e-bulletin information to reflect Medicaid Bulletin dated August 26, 2008
11-01-08	2	-	Removed codes S4989 and 90657
11-01-08	2	118-120  208  209	<ul style="list-style-type: none"> <li>• Revised verbiage for Psychiatric Counseling Services section</li> <li>• Out-of-state services – revised address and verbiage</li> <li>• Revised verbiage and added chart for Ancillary and Other OOS Services section</li> </ul>
11-01-08	3	25, 27	Added EFT information to reflect Medicaid Bulletin dated August 26, 2008
11-01-08	4	19	Removed code S4989
11-01-08	Forms	-	Added the Out-of-State Referral Form
10-01-08	3	29	Changed ECF field 1 to Prov/Xwalk ID
10-01-08	4	17	Added procedure codes 58570, 58571, 58572, 58573
10-01-08	5	9, 13	<ul style="list-style-type: none"> <li>• Updated address for Lake City</li> <li>• Updated phone number for Sumter County office</li> </ul>
10-01-08	Forms	-  -	<ul style="list-style-type: none"> <li>• Revised ECF example to show update for field 1</li> <li>• Revised the DHHS Pediatric Sub-Specialist Certification Form</li> </ul>

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Date	Section	Page(s)	Change
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
09-01-08	2	4 89 92 93 105 225 231 232	<ul style="list-style-type: none"> <li>• Revised definition of Licensed Midwife</li> <li>• Deleted Birthing Centers section</li> <li>• Added 59409 with TC modifier and Observation for Maternity/Labor information</li> <li>• Added Mirena J7302 coverage information</li> <li>• Changed Essure Sterilization BMI to 35</li> <li>• Added code J7307</li> <li>• Added code J7307</li> <li>• Added Pediatric Anesthesia Services section</li> </ul>
09-01-08	4	13-14  17	<ul style="list-style-type: none"> <li>• Deleted 36 Support Documentation procedure codes</li> <li>• Deleted 3 Prior Authorization procedure codes</li> </ul>
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	Forms	-	Added revised Pediatric Sub-specialist Certification form
09-01-08	Appendix 1	17	Added Edit Code 318
08-01-08	2	- 108	<ul style="list-style-type: none"> <li>• Corrected document formatting</li> <li>• Added Psychiatric and Counseling Services Information</li> </ul>
08-01-08	5	7	Deleted PO Box for Chester County
08-01-08	Appendix 1	3	Updated Edit Code 062
07-01-08	5	11	Deleted PO Box for Lancaster County
07-01-08	Managed Care Supplement	27	Replaced Web site address for BlueChoice

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Date	Section	Page(s)	Change
06-01-08	3	10, 18, 20, 21, 27	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	-	Updated the following forms to reflect May 23, 2008, deadline requiring NPI only: <ul style="list-style-type: none"> <li>• Pediatric Sub-Specialist Certification</li> <li>• Request for Prior Approval Review</li> <li>• Surgical Justification Review for Hysterectomy</li> </ul>
06-01-08	Appendix 1	30, 39, 42	<ul style="list-style-type: none"> <li>• Added new edit code 529</li> <li>• Deleted NPI warning edits 578, 579, 580, 581, 582, 583, 692</li> </ul>
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	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	2	14 17 22 29  37 43 48 51	<ul style="list-style-type: none"> <li>• Updated Medical Necessity Guidelines for ambulatory care visits</li> <li>• Updated Exceptions to the 977 Edit section</li> <li>• Deleted Case Management Services section</li> <li>• Added instructions for faxing prior approval requests for Boxtox® (JO585, Botulinum Toxin Type A) and Myobloc® (Botulinum Toxin Type A)</li> <li>• Changed adult physical exam frequency from every five years to every two years</li> <li>• Deleted code 99501 for Newborn Care Billing Notes</li> <li>• Deleted code X0401 for additional neonatology services</li> <li>• Changed reference section from “EPSDT Resources” to “Reimbursement Policies”</li> </ul>

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Date	Section	Page(s)	Change
		59	<ul style="list-style-type: none"> <li>• Added oral health training module Web sites to EPSDT Required Services section</li> </ul>
		83	<ul style="list-style-type: none"> <li>• Deleted Telephone Referral section from Alcohol and Drug Abuse Rehabilitation Services section</li> </ul>
		94	<ul style="list-style-type: none"> <li>• Changed code range for administrative days from 99304-99340 to 99304-99337</li> </ul>
		109	<ul style="list-style-type: none"> <li>• Changed HCPCS code from S0180 to J7307 for Etonogestrel Implant (Implanon™) Coverage</li> </ul>
		112-118	<ul style="list-style-type: none"> <li>• Updated Family Planning section</li> </ul>
		134	<ul style="list-style-type: none"> <li>• Deleted verbiage and description for CPT code 99371, supervising allied professionals</li> </ul>
		134, 136	<ul style="list-style-type: none"> <li>• Added physical location requirement for physicians (including physicians not specializing in psychiatric care) who supervise allied professionals</li> </ul>
		146	<ul style="list-style-type: none"> <li>• Prescription Request section:               <ul style="list-style-type: none"> <li>o Changed address for Robertson Optical Lab</li> <li>o Updated Prescription Request Form instructions</li> </ul> </li> </ul>
		165	<ul style="list-style-type: none"> <li>• Added adult age limit for reimbursement of Physical Medicine and Therapy services</li> </ul>
		253	<ul style="list-style-type: none"> <li>• Changed adult physical exam frequency from every five years to every two years</li> </ul>
04-01-08	4	1-3	<ul style="list-style-type: none"> <li>• Deleted Injection Code and Chemotherapy Code lists</li> </ul>
		14	<ul style="list-style-type: none"> <li>• Updated the CPT Codes Requiring Support Documentation for SCDHHS list</li> </ul>
		18	<ul style="list-style-type: none"> <li>• Replaced the CPT Codes Requiring SCDHHS Prior Approval Review list</li> </ul>
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

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Date	Section	Page(s)	Change
04-01-08	TPL Supplement	2 3, 8, 15  12  29	<ul style="list-style-type: none"> <li>• Updated reference to Medicaid card name</li> <li>• Changed references to location of forms from Section 5 to Forms section</li> <li>• Updated field numbers for occurrence codes on UB-04</li> <li>• Replaced sample ADA form with more attractive version</li> </ul>
03-01-08	1	3-5  7	<ul style="list-style-type: none"> <li>• Replaced sample Partners for Health Medicaid card with new Healthy Connections card and updated card information.</li> <li>• Deleted information about location of supervising entities – requirements will be included in Section 2 where applicable</li> </ul>
03-01-08	3	10-22  All	<ul style="list-style-type: none"> <li>• 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).</li> <li>• Standardized formatting</li> </ul>
03-01-08	Forms	-	Replaced Form 931 with new version dated January 2008
03-01-08	Appendix 1	59 70	<ul style="list-style-type: none"> <li>• Added edit code 808</li> <li>• Revised edit code 943 description and status (from warning to active)</li> </ul>
03-01-08	TPL Supplement	9  21-22	<ul style="list-style-type: none"> <li>• Added information on carrier code “CAS” for open casualty cases</li> <li>• Replaced Form 931 samples with new versions</li> </ul>
02-01-08	3	13 31, 34  47	<ul style="list-style-type: none"> <li>• Corrected instructions for field 10b</li> <li>• Standardized references to six-character legacy Medicaid provider number</li> <li>• Corrected mailing address for refunds</li> </ul>
02-01-08	5	1	Removed “including Partners for Health” from first paragraph
02-01-08	Forms	-	<ul style="list-style-type: none"> <li>• Updated bookmarks for forms</li> <li>• Updated mailing address for Medicaid Refunds Form 205</li> </ul>

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Date	Section	Page(s)	Change
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"> <li>• Removed PhyTrust from the list of MHNs</li> <li>• Added Carolina Crescent to the list of MCOs</li> </ul>
12-01-07	5	8, 10, 12	<ul style="list-style-type: none"> <li>• Updated addresses for Edgefield, Lancaster and Oconee County offices</li> <li>• Updated zip code for Kershaw county</li> </ul>
11-01-07	2	15-16, 37, 51, 53-54, 61-62, 122	Updated policies to reflect Medicaid Bulletin dated October 10, 2007
11-01-07	4	5-34	Separated Covered and Non-Covered Surgical Package procedures and added subheadings to Table of Contents
11-01-07	5	9, 10  10	<ul style="list-style-type: none"> <li>• Updated telephone numbers for Florence and Kershaw counties</li> <li>• Updated Horry County address to 1601 11<sup>th</sup> Ave., 1<sup>st</sup> Floor</li> </ul>
11-01-07	Forms	-	Updated DHHS Form 17623, Consent for Sterilization
11-01-07	Change Control Record	1	Added SILVERxCARD deletion to 10-01-07, Section 2 changes
11-01-07	Appendix 1	All	<ul style="list-style-type: none"> <li>• Corrected ECF field numbers throughout edit resolution instructions</li> <li>• Added new edit code 107</li> </ul>
11-01-07	Appendix 2	All	Updated list of carrier codes

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10-01-07	1	1-2 3  4  12 15  25	<ul style="list-style-type: none"> <li>• Removed PEP information</li> <li>• Added information about managed care enrollment broker and Managed Care Supplement</li> <li>• Removed managed care sample cards (cards and other information will appear in the new Managed Care Supplement).</li> <li>• Clarified that "days" refers to business days</li> <li>• Clarified which sections of manual may contain PA information</li> <li>• Expanded provider list under Program Integrity</li> </ul>
10-01-07	2	1-2, 51, 223 70  184  187	<ul style="list-style-type: none"> <li>• Removed PEP information</li> <li>• Remove reference to SILVERxCARD copayment schedule</li> <li>• Changed Musculoskeletal System to Prior Authorization for Mammoplasty and Mastectomy and Reconstructive Procedures</li> <li>• Inserted Musculoskeletal System subheading after Prior Authorization for Mammoplasty and Mastectomy and Reconstructive Procedures</li> </ul>
10-01-07	3	15, 47	<ul style="list-style-type: none"> <li>• Removed PEP information</li> <li>• Added 90-day time limit for reversing refunds</li> </ul>
10-01-07	4	-	Corrected document formatting
10-01-07	Appendix 1	26 38-40, 43, 70	<ul style="list-style-type: none"> <li>• Corrected description for edit code 502</li> <li>• Added NPI warning edits 578-583, 692, 943</li> </ul>
10-01-07	-	-	Added Managed Care Supplement
10-01-07	TPL Supplement	15-17	<ul style="list-style-type: none"> <li>• Added 90-day time limit for reversing refunds</li> <li>• Added information on Part B timely filing schedule to explain which claims are pulled into Retro Medicare</li> </ul>

## CHANGE CONTROL RECORD

Date	Section	Page(s)	Change
09-01-07	2	17 29 38 60 129 137 192 201 202 220 260 261-283	<ul style="list-style-type: none"> <li>• Under Ambulatory Care Visit Guidelines, removed “office” from consultation examination</li> <li>• Under Nursing Home/Rest Home Facility Services, Visit Guidelines, changed CPT codes</li> <li>• Under Cancer Screening Services, add code G0121 for low-risk clients</li> <li>• Updated policy on fluoride varnish treatment to reflect Medicaid Bulletin dated July 16, 2007</li> <li>• Under Psychiatry, removed code 90802 from Note</li> <li>• Under Medicare/Medicaid – Dual Eligibility, changed the program manager telephone number</li> <li>• Under Urinary System (50010 – 53899), changed WJ modifier to 99 modifier</li> <li>• Updated policy on the cost of corneal tissue to reflect Medicaid Bulletin dated June 25, 2007</li> <li>• Updated policy on Group II transplants to reflect Medicaid Bulletin dated June 27, 2007</li> <li>• Under Billing and Coding Requirements, changed WJ modifier to 99 modifier</li> <li>• Updated policy on Pediatric Sub-Specialist requirements to reflect Medicaid Bulletin dated July 31, 2007</li> <li>• Updated policy to delete Physicians Enhanced Program (PEP) in accordance with Medicaid Bulletin dated July 13, 2007</li> </ul>
09-01-07	4	5 50-53 54-57 58	<ul style="list-style-type: none"> <li>• Updated Surgical Package Codes list</li> <li>• Updated Support Documentation Codes list and added Qualis Health and SCDHHS forwarding addresses</li> <li>• Updated Support Documentation Codes list and added Qualis Health and SCDHHS forwarding addresses</li> <li>• Under Family Planning Waiver Diagnosis Codes, changed the sterilization diagnosis code</li> </ul>
07-01-07	1	-	Revised policies and procedures throughout section

## CHANGE CONTROL RECORD

Date	Section	Page(s)	Change
07-01-07	2	12  79  94  110  111  110, 111, 124, 125, 162, 184, 185, 187, 192, 193, 198, 199, 275 174 193  198	<ul style="list-style-type: none"> <li>• Under Locum Tenens Arrangements, included “vacation” to the list of reasons for a physician substitute</li> <li>• Under Services for AIDS Patients, added instruction to bill with P4 modifier</li> <li>• Under Levels of Service (Emergency Room (ER) Services), added additional requirement</li> <li>• Added new Etonogestrel Implant (Implanon™) Coverage section</li> <li>• Under Hysterectomies(Gynecology), added additional instruction for prior approval requests</li> <li>• Changed Quality Improvement Organization (QIO) from CCME to Qualis Health including the address and section heading</li> <li>• Replaced UB-94 with UB-04</li> <li>• Removed “Nurse Screening Criteria” from Prior Approval for Hysterectomy heading</li> <li>• Moved ICD-9 codes for prior authorization and support documentation to Section 4</li> <li>• Under Instructions for Prior Approval, updated the QIO review process</li> <li>• Under Points of Emphasis for Prior Authorization, added medical review documentation acceptable by mail</li> </ul>
07-01-07	4	41, 43	Inserted updated prior authorization and support documentation ICD-9 and diagnosis codes from Section 2
07-01-07	Forms	-	Updated DHHS Form 205
07-01-07	Appendix 2	-	Updated list of carrier codes
06-01-07	3	-	Removed Time Restricted Supplement

## CHANGE CONTROL RECORD

Date	Section	Page(s)	Change
06-01-07	3	All	<ul style="list-style-type: none"> <li>• Updated form completion instructions for new CMS-1500 and Form 130 versions</li> <li>• Updated ECF and RA descriptions</li> <li>• Added information about National Provider Identifier</li> <li>• Replaced Reference to Forms 110 and 120 with Form 115</li> <li>• Clarified retroactive eligibility policy</li> <li>• Updated ECF correction instructions</li> <li>• Added CPT and HCPCS ordering information</li> <li>• Made minor editorial changes throughout section</li> </ul>
06-01-07	5	3-4 6-8 12 -	<ul style="list-style-type: none"> <li>• Revised “Procurement of Forms” to address new CMS-1500 and updated vendor information</li> <li>• Added toll-free numbers for Berkeley, Charleston and Dorchester county offices</li> <li>• Updated phone number for Oconee County</li> <li>• Split forms and exhibits from Section 5 to create Forms section</li> </ul>
06-01-07	Forms	-	<ul style="list-style-type: none"> <li>• Updated DHHS forms to add National Provider Identifier field</li> <li>• Updated sample claims to new CMS-1500 version</li> <li>• Updated ECF and remits to new versions</li> <li>• Updated Pediatric Sub-Specialist Certification Form, Request for Prior Approval Review, and Surgical Justification Review for Hysterectomy</li> </ul>
06-01-07	Appendix 1	-	Updated list of edit codes
06-01-07	TPL Supplement	All	<ul style="list-style-type: none"> <li>• Updated all sample forms and claims with new versions</li> <li>• Updated form completion instructions to match new form versions</li> </ul>

## CHANGE CONTROL RECORD

Date	Section	Page(s)	Change
05-02-07	2	34	<ul style="list-style-type: none"> <li>• Updated policies on Synagis® to reflect Medicaid Bulletin dated October 3, 2006</li> </ul>
		38	<ul style="list-style-type: none"> <li>• Changed procedure codes in table for sigmoidoscopy and screening colonoscopy</li> </ul>
		51	<ul style="list-style-type: none"> <li>• Deleted Multi Channel Testing — Physician Interpretation</li> </ul>
		53	<ul style="list-style-type: none"> <li>• Removed paragraph on SCDHEC and Child Health Maintenance Course from Enrollment Prerequisites</li> </ul>
		61	<ul style="list-style-type: none"> <li>• Add statement “children under the age of 19” in Immunizations for clarity</li> </ul>
		63-65	<ul style="list-style-type: none"> <li>• Under Reimbursement Policies:               <ul style="list-style-type: none"> <li>◦ Removed paragraph on vaccine administration and added verbiage including codes 90473 and 90474 to reflect Medicaid Bulletin dated 03/30/07</li> <li>◦ Added Indicator “N” under Reimbursement Policies to reflect Medicaid Bulletin dated 03/30/07</li> </ul> </li> </ul>
		99	<ul style="list-style-type: none"> <li>• Add verbiage to Ultrasounds to reflect Medicaid Bulletin dated 03/28/07</li> </ul>
		113-117	<ul style="list-style-type: none"> <li>• Complete revision of the Family Planning</li> </ul>
		120	<ul style="list-style-type: none"> <li>• Separated the signature and date requirements under Sterilization Consent Form for clarity</li> </ul>
		141	<ul style="list-style-type: none"> <li>• Removed extra section heading under Exam and Glasses for Age 21 and Over</li> </ul>
		142	<ul style="list-style-type: none"> <li>• Changed Exam and Glasses for Age 21 and Over section heading to Guidelines for Lenses and Frames</li> </ul>
		142	<ul style="list-style-type: none"> <li>• Listed trifocals and executive bifocals separately</li> </ul>
		143	<ul style="list-style-type: none"> <li>• Added new paragraph at the of the Vision Non-Covered Services section for lens replacement of non-Medicaid frames</li> </ul>
		163	<ul style="list-style-type: none"> <li>• Add new section, Gastrostomy Button Device Feeding Tube Kit to reflect Medicaid Bulletin dated 03/30/07</li> </ul>
		171	<ul style="list-style-type: none"> <li>• Replaced verbiage under Neurology section to reflect Medicaid Bulletin 03/30/07</li> </ul>
		177	<ul style="list-style-type: none"> <li>• Added new verbiage at the end of the first paragraph for multiple procedure reduction under Payment Guidelines section</li> </ul>

## CHANGE CONTROL RECORD

Date	Section	Page(s)	Change
		198	<ul style="list-style-type: none"> <li>Removed codes 19301 – 19307 from the CCME prior authorization list</li> </ul>
05-02-07	4	1-4 5-28, 41-42 45-46 47-50	<ul style="list-style-type: none"> <li>Reformatted the Injection Code list and Chemotherapy Drug codes list</li> <li>Updated Surgical Package, Support Document, Prior Authorization procedure codes</li> <li>Added Family Planning CPT and diagnosis codes</li> <li>Added Anesthesia procedure codes and corresponding base units</li> </ul>
05-02-07	Appendix 1	-	Updated list of edit codes
05-02-07	Fee Schedules	All	Replaced the Physicians Fee Schedule for 2007
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
03-01-07	2	66-67 114 143-144 204 242	<ul style="list-style-type: none"> <li>Updated Children and Adolescents Immunization Schedules</li> <li>Changed verbiage in Department of Health and Environmental Control and Initial Family Planning and Follow-up Exams sections</li> <li>Changed “Dispensing Codes and Fees for Contact Lenses” to “Dispensing Codes for Contact Lenses and Glasses”</li> <li>Added new paragraph in Corneal Transportation section to reflect bulletin dated December 13, 2006</li> <li>Added new section: Positron Emission Tomography (PET) Scans to reflect bulletin dated January 19, 2007</li> </ul>

## CHANGE CONTROL RECORD

Date	Section	Page(s)	Change
		261-262	<ul style="list-style-type: none"> <li>• Added new section: Pediatric Sub-Specialist Program Participation Requirements to reflect bulletin dated November 30, 2006</li> </ul>
03-01-07	5	6	<ul style="list-style-type: none"> <li>• Updated Barnwell county office address</li> <li>• Added DHHS Pediatric Sub-Specialists Certification form</li> </ul>
03-01-07	Time Restricted Supplement	All	Removed all references to NDC quantity and unit
03-01-07	Appendix 1	-	Updated list of edit codes
02-01-07	TPL Supplement	31-32	Updated ECF Samples to show third payer line
01-01-07	2	31, 32, 34  37 38  39 79  99  111  112  114, 116, 248, 250, 251, 255, 257, 258 136  155	<ul style="list-style-type: none"> <li>• Updated sections to remove pricing of Botox, Mybloc, Xolair, Synagis</li> <li>• Changed code 76092 with 77057</li> <li>• Added codes 82271 and 82272 to Hemocult Test</li> <li>• Changed code 76092 with 77057</li> <li>• Removed “4<sup>th</sup> Floor” from the address for DME inquiries</li> <li>• Updated venipuncture information to match the system limits</li> <li>• Removed reference to Norplant as no longer covered since 2004</li> <li>• Changed Family Planning Waiver from 22 months to 10 months</li> <li>• Removed references to Norplant</li> <li>• Changed “Providers must notify the ESRD program manager...” to “Providers must notify their program manager...”</li> <li>• Changed code 95078 to 95075</li> <li>• Added the following statement to clarify of acne diagnosis code 706.1 documentation: “Support documentation is not required for billing purposes; however, the patient's record must clearly document the condition and medical necessity.”</li> </ul>

## CHANGE CONTROL RECORD

Date	Section	Page(s)	Change
		158 161 182 196 197 265	<ul style="list-style-type: none"> <li>• Changed code 15831 to 15830 and added the correct CPT information</li> <li>• Changed code range 17304 – 17310 to range 17311-17315</li> <li>• Added the Moh’s Technique 2007 definitions</li> <li>• Changed code 19140 to range 19300 – 19307</li> <li>• Deleted code 15831</li> <li>• Added codes 15830 and 15847 with definitions</li> <li>• Deleted codes 19140</li> <li>• Added codes 19300 – 19307</li> <li>• Updated code 19361</li> <li>• Changed description for procedure code 17000</li> </ul>
01-01-07	3	-	Added Time Restricted Supplement
01-01-07	5	-	Added line “03” to sample ECF for the third payer declaration
01-01-07	Appendix 1	9, 14	Added Edit Codes 202, 203, 204, 301
01-01-07	Appendix 2	-	Updated list of carrier codes
11-01-06	2	- - 2 56 201	<ul style="list-style-type: none"> <li>• Change “S.C. Medicaid” to South Carolina Medicaid</li> <li>• Changed “DHHS” and “DHEC” to SCDHHS and SCDHEC, respectively</li> <li>• Managed Care Overview – Added prior authorization criteria</li> <li>• Changed “12- and 24-months of age” to “9- and 24-months of age”</li> <li>• Points of Emphasis for Prior Authorization               <ul style="list-style-type: none"> <li>◦ Updated prior authorization criteria</li> <li>◦ Change “Better Health Plan” to “Unison Health Plan of South Carolina”</li> </ul> </li> </ul>
11-01-06	2	41-43, 57, 63	Updated policies to reflect Medicaid Bulletins dated September 19, 2006 and October 9, 2006.
11-01-06	5	-	Updated county office addresses

## CHANGE CONTROL RECORD

Date	Section	Page(s)	Change
10-01-06	2	6, 18, 37-38, 44, 138, 140, 146, 162-163, 194, 203-204	Updated policies to reflect Medicaid Bulletins dated June 21, 2006; July 19, 2006, and July 28, 2006
10-01-06	5	-	Updated county office addresses
10-01-06	Appendix 2	-	Updated list of carrier codes
09-01-06	5	-	Updated county office addresses
09-01-06	Appendix 1	10, 11, 13 15, 17, 18 22, 23, 24 26, 27, 28 29, 30, 31 32, 35, 36 39, 40, 41 42, 46, 47 48, 49, 50 52, 58, 60 61, 62, 63 66, 67	<ul style="list-style-type: none"> <li>• Updated CARCs for edit codes 504, 561, 562, 563, 636, 923, 940, 949</li> <li>• Updated RARCs for edit codes 207, 208, 227, 234, 239, 263, 317, 369, 377, 421, 501, 504, 505, 507, 508, 515, 541, 545, 553, 564, 570, 672, 674, 709, 714, 719, 721, 722, 748, 749</li> <li>• Updated resolutions for edit codes 761, 764, 765, 768, 769, 771, 772, 773, 774</li> <li>• Added new edit codes 518, 724</li> <li>• Deleted edit code 777</li> </ul>
08-01-06	-	-	Added TPL Supplement
08-01-06	5	-	Updated Reasonable Effort Documentation form
07-01-06	2	65-66  188	<ul style="list-style-type: none"> <li>• Updated the Children and Adolescents Immunization Schedules</li> <li>• Updated CCME telephone number for prior authorizations</li> </ul>
07-01-06	Appendix 1	23, 60, 61	Updated resolution for edit codes 504, 923, 940
07-01-06	Appendix 2	-	Updated list of carrier codes
05-02-06	2	-	Updated policies to reflect bulletin dated May 1, 2006
05-01-06	Appendix 1	52	Updated resolution for edit code 852

## CHANGE CONTROL RECORD

Date	Section	Page(s)	Change
04-01-06	2	139-146	<ul style="list-style-type: none"> <li>• Changed Vision Care Services to Part I</li> <li>• Changed Diagnostic Ophthalmology Services to Part II</li> <li>• Changed Ocular Surgery to Part III</li> </ul>
04-01-06	Appendix 1	43	Updated resolution for edit code 735
04-01-06	Appendix 2	-	Updated list of carrier codes
03-01-06	3	4, 18, 19 20 25 25 40	<ul style="list-style-type: none"> <li>• Changed the Trading Partner Agreement (TPA) and the Companion Guides Web site references to <a href="http://www.dhhs.state.sc.us">www.dhhs.state.sc.us</a></li> <li>• Changed the Internet Explorer version required for the Web Tool to 6.0</li> <li>• Added TPL indicators to the ECF field 4 description</li> <li>• Added Injury Code indicators to the ECF field 5 description</li> <li>• Changed address name for refund checks (Form 205) from Division of Finance to Cash Receipts</li> </ul>
03-01-06	5	-	Removed “Sample Only” from Claim Adjustment Form (DHHS Form 130)
03-01-06	Appendix 1	60	Changed resolution for edit code 925
02-01-06	Appendix 1	41	Changed resolution for edit code 721
01-01-06	1	4, 5	Removed SILVERxCARD sample and program description
01-01-06	2	-  17 21 28-29 31	<p>Changed “Carolina Medical Review” to “The Carolinas Center for Medical Excellence” throughout manual; updated CCME address, telephone, and fax number.</p> <ul style="list-style-type: none"> <li>• Deleted Confirmatory Consultations CPT codes</li> <li>• Corrected Special Services/Visits – Emergency Office Services procedure code</li> <li>• Changed Visit Guidelines CPT code range and deleted the frequency limitations on codes</li> <li>• Corrected Myoblock® spelling; removed statement to bill Myoblock® using J3490</li> </ul>

## CHANGE CONTROL RECORD

Date	Section	Page(s)	Change
		40	<ul style="list-style-type: none"> <li>• Changed prior authorization forwarding address, fax, and telephone number to FIRST HEATLH Clinical Call Center</li> <li>• Added reimbursement codes for Influenza Vaccine under the VAFAC program</li> <li>• Added “DHHS will not reimburse for the FlueMIST vaccine product or the administration fee outside of the VAFAC program.”</li> </ul>
		54	<ul style="list-style-type: none"> <li>• Replaced Lead Screening paragraph</li> </ul>
		62	<ul style="list-style-type: none"> <li>• Added Well-child care indicators for field 24H of CMS-1500</li> </ul>
		76	<ul style="list-style-type: none"> <li>• Changed Initial Consultation and Follow-up Consultation procedure code ranges</li> </ul>
		90-91	<ul style="list-style-type: none"> <li>• Replaced Administrative Days procedure code ranges and deleted Medicaid code limitation statements</li> </ul>
		100	<ul style="list-style-type: none"> <li>• Added to Postpartum Care, “Effective July 1, 2005” and “not” to family planning counseling or instruction</li> </ul>
		103	<ul style="list-style-type: none"> <li>• Deleted requirement to complete DHHS Form 204 for Physician’s Backup</li> </ul>
		112	<ul style="list-style-type: none"> <li>• Added to Appropriate Staff, “Effective July 1, 2005” and “not” to family planning counseling or instruction for office visits, an initial family planning exam, or a postpartum exam</li> </ul>
		113	<ul style="list-style-type: none"> <li>• Deleted E/M visit for Family Planning Counseling for Diaphragms (57170)</li> <li>• Added “Effective July 1, 2005” and “in addition to billing for the appropriate E/M office visit code or postpartum visit” for Norplant</li> </ul>
		113, 251, 258	<ul style="list-style-type: none"> <li>• Deleted A4260 for Norplant</li> </ul>
		124, 125, 129	<ul style="list-style-type: none"> <li>• Delete all sections with code 96100, Psychological Testing with interpretation and report</li> </ul>
		126, 137 142	<ul style="list-style-type: none"> <li>• Delete codes 90871, 96115</li> <li>• Added to Exam and Glasses for Beneficiaries Under 21, “Repairs and replacements during the year are not authorized.”</li> </ul>

## CHANGE CONTROL RECORD

Date	Section	Page(s)	Change
		154	<ul style="list-style-type: none"> <li>Added to Exam and Glasses for Age 21 and over, “detached retina surgery, corneal surgery, or glaucoma surgery. Prior authorization is required for post surgical lenses for recipients age 21 and over.”</li> </ul>
		156	<ul style="list-style-type: none"> <li>Changed CPT code range for Chemotherapy Administered in a Physician’s Office</li> </ul>
		212	<ul style="list-style-type: none"> <li>Deleted code 96140</li> </ul>
		216	<ul style="list-style-type: none"> <li>Changed Billing Notes CPT code range; deleted CPT range 90780-90781</li> </ul>
		218	<ul style="list-style-type: none"> <li>Changed code for refilling and maintenance of the implantable pump</li> </ul>
		226-227	<ul style="list-style-type: none"> <li>Removed Automated Multi-channel Chemistry Tests code 83715</li> </ul>
		259-263,	<ul style="list-style-type: none"> <li>Changed Pathology Consultations procedure code range</li> </ul>
		271	<ul style="list-style-type: none"> <li>Deleted Lab Procedures 78160 and 82273</li> </ul>
		267	<ul style="list-style-type: none"> <li>Deleted Healthy Option Program</li> </ul>
		272-273	<ul style="list-style-type: none"> <li>Deleted Category 1 Service codes 99201-99215</li> <li>Deleted Category 2 Services codes 99301-99313, 99321-99333</li> </ul>
01-01-06	5	Exhibits	Changed “Carolina Medical Review” to “The Carolinas Center for Medical Excellence” throughout manual; updated CCME address, phone, and fax number.
01-01-06	5	21	Updated Authorization Agreement for Electronic Funds Transfer
01-01-06	Appendix 1	67	Added edit code 935
01-01-06	Appendix 2	-	Updated list of carrier codes
12-01-05	Appendix 1	70	Added edit code 949
11-01-05	1	6, 7	Removed “HIPAA” from names of S.C. Medicaid Provider Outreach and S.C. Medicaid EDI Support Center

## CHANGE CONTROL RECORD

Date	Section	Page(s)	Change
11-01-05	3	6 16	<ul style="list-style-type: none"> <li>• Changed verb tense under Procedural Coding and Diagnostic Codes</li> <li>• Removed requirement for entering whole numbers for day or units in field 24G</li> </ul>
11-01-05	3	4, 20, 34, 35	Changed generic reference for the South Carolina Medicaid Web-based Claims Submission Tool from SCMWBCST to Web Tool
11-01-05	3	4, 18, 19	Changed Web site from <a href="http://www.scdhshipaa.org">www.scdhshipaa.org</a> to <a href="http://www.scm Medicaidprovider.org">www.scm Medicaidprovider.org</a>
11-01-05	5	5-14	Updated list of DHHS county offices
10-01-05	5	5-14	Updated list of DHHS county offices
10-01-05	Appendices	-	Made each appendix a separate file; moved Change Control Record out of appendices to a separate file
09-01-05	2	18 32 56 62 63 114 203	<ul style="list-style-type: none"> <li>• Added Provider ID and recipient ID to prior approval statement</li> <li>• Changed zip code from 8602 to 8206</li> <li>• Added bullet for “No “Lead” for the purchase of mini-blinds</li> <li>• Procedure code 99394 added “This code should be used for both new and established patients.”</li> <li>• Deleted Modifiers 1 and 2 for well-child care treatment and referral for treatment for an identified problem</li> <li>• Corrected spelling of IUD</li> <li>• Deleted Cornea telephone number [(843) 792-2765]</li> </ul>
09-01-05	4	-	Corrected CMS-1500 claim form entries
09-01-05	Appendix 2	All	Updated lists of carrier codes
09-01-05	Appendix 1	38 and 64	Added edit codes 577 and 900
09-01-05	Fee Schedules	All	Added the Physicians Fee Schedule and Laboratory Fee Schedule at the end of manual
08-01-05	Appendix 1	62	Added edit code 868

## CHANGE CONTROL RECORD

Date	Section	Page(s)	Change
07-01-05	2	44, 45, 94, 95, 106, 252, 259, 281	Deleted information pertaining to Pregnancy/Newborn Risk Assessments and Form 204 in accordance with Medicaid Bulletin dated June 14, 2005.
07-01-05	3	All	<ul style="list-style-type: none"> <li>• Added description of new Web Tool features</li> <li>• Removed instruction to attach EOB to paper claims</li> <li>• Change MIVS zip code to 29211-9804 (from 29201)</li> </ul>
07-01-05	5	Exhibits	Deleted Pregnancy/Newborn Risk Assessment Form (Form 204)
07-01-05	Appendix 2	All	Updated lists of carrier codes
03-14-05	2	216	Deleted first sentence in second paragraph of General Guidelines Section and added information in accordance with Medicaid Bulletin dated March 1, 2005
03-02-05	5	10, 11	Changed incorrect area codes for county offices in Saluda & Union
03-01-05	Appendices	All	Added new edit codes & changed some resolutions
02-11-05	5	4	Updated manual ordering information under Web Address header