

CHANGE CONTROL RECORD

| Date | Section | Page(s) | Change |
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| 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 reference to blank form at the end of this section • Replaced reference 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 | 5, 21 | 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 | Appendix 1 | 49 | Updated Edit Code 932 |
| 12-01-09 | 1 | 8 | <ul style="list-style-type: none"> • Updated policy to reflect Medicaid Bulletin dated November 13, 2009 – Electronic Remittance Package |

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| | | 25 | <ul style="list-style-type: none"> Updated Timely Filing for Submitting Claims section to reflect Medicaid Bulletin dated November 24, 2009 |
| 12-01-09 | 3 | 1-2 19, 21- 22, 24- 27 | <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 office 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 | Appendix 2 | All | Updated carrier code list |
| 10-01-09 | 1 | 3-4 4-6 26 | <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 Updated South Carolina Medicaid Bulletins and Newsletters Changed heading to Medicare Cost Sharing |
| 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 |
| 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 | 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 |

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| | | | <ul style="list-style-type: none"> o Replaced the beneficiary card samples o 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 | - | 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 3 5 28-33 | <ul style="list-style-type: none"> • 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 | 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 | 3 | 4, 6-8, 19, 25, 33, 36 | Updated hyperlinks |

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| 04-01-09 | 5 | 11 | Updated telephone number for Lexington County office |
| 03-01-09 | 2 | 13 | Updated hyperlink |
| 03-01-09 | 5 | 4 8 5, 11-13 | <ul style="list-style-type: none"> • Updated hyperlink • Corrected Dorchester County's Orangeburg Road telephone number • Change DSS to DHHS in addresses for Abbeville, McCormick, Newberry, and Saluda counties |
| 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 | 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 | 23, 25 | Added EFT information to reflect Medicaid Bulletin dated August 26, 2008 |
| 10-01-08 | 3 | 27 | Changed ECF 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 |

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| 10-01-08 | Appendix 1 | 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 | 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 | 8, 15, 16, 18, 19, 24 | 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 | 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 | 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 |

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| 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 forms from Section 5 to Forms section • Updated field numbers for occurrence codes on UB-04 • Replaced sample ADA form with more attractive version |
| 05-01-08 | 1 | 5-6 | Added information and sample cards for the Health Opportunity Account and the Kids SCHIP Dental Coverage program. |
| 05-01-08 | 3 | 9 | Clarified filing requirements for claims submitted after the May 23, 2008, NPI-only deadline for typical providers. |
| 05-01-08 | Appendix 1 | 3, 38 31 | <ul style="list-style-type: none"> • Revised edit codes 062 and 569 • Added edit code 520 |