

Healthy Connections *Visual*

MEDICAID BASICS BOOK



➤ Resources

An illustrated companion to the interactive courses at: [MedicaidLearning.com](https://www.MedicaidLearning.com).

Updated February 2026

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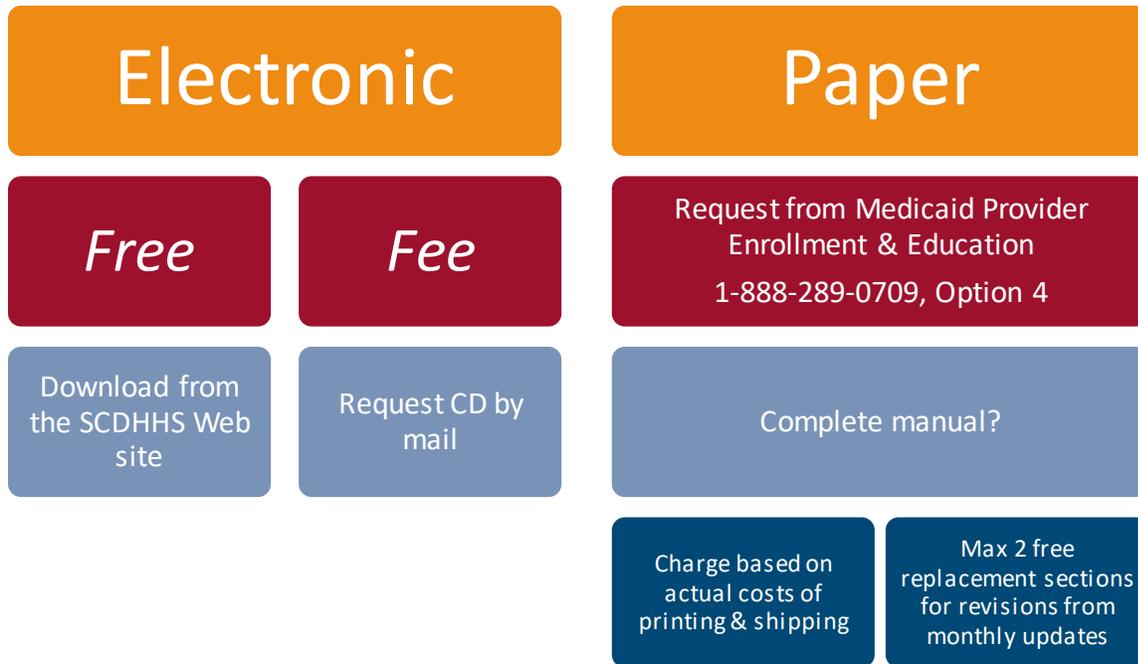
Provider Manuals

Each provider specialty has its own manual. Some content is common to all manuals; other content is program-specific.

Contents	Explanation
Section 1	<p><u>General Information and Administration</u></p> <ul style="list-style-type: none"> • Standard policy and practices for all policy program areas • Includes: records/documentation requirements, reimbursement, anti-fraud provisions, provider exclusions/suspensions, and program integrity & utilization review
Section 2	<p><u>Policies and Procedures</u></p> <ul style="list-style-type: none"> • Program-specific policies: provider qualifications; and staff, documentation, beneficiary, and billing requirements
Section 3	<p><u>Billing Procedures</u></p> <ul style="list-style-type: none"> • Claim filing policies, timeliness, claim filing options (such as paper or electronic), claim processing, Remittance Advice, ECFs, checks, third-party liability • Billing procedures for the type of billing your program uses <ul style="list-style-type: none"> ○ Turnaround documents (TADs) [nursing, Optional State Supplementation (OSS), Integrated Personal Care (IPC)] ○ Dental, CMS 1500 (professional claims) or UB-04 (hospital claims)
Section 4	<p><u>Procedure codes</u></p> <ul style="list-style-type: none"> • Program-specific procedure codes, fee schedules, approval codes, and modifiers • Some programs (e.g. nursing program), use this section for other information such as resident rights. Some programs do not include this section.
Section 5*	<p><u>Administrative Services</u></p> <ul style="list-style-type: none"> • SCDHHS contact information: SCDHHS county offices, addresses/telephone numbers, and claim form providers. • Forms section • *Administrative information will be shifted to section 4 if your program does not include typical section 4 procedure codes, fee schedules, etc. In this case, there would be no section 5.
Appendices	<p><u>Edit Codes · CARCs/RARCs (claims adjustment reason codes, remittance advice remark codes) · (edit) Resolutions · Carrier Codes · Schedule of Copayments · Fee Schedule</u></p> <ul style="list-style-type: none"> • Appendices are included only when applicable to the program. For instance, not all programs receive copayments. • Some specialties without all of the appendices: Nursing Home, IPC – Integrated Personal Care, OSS – Optional State Supplementation, CLTC – Community Long Term Care • <u>TPL Supplement</u>: Additional information to correctly file third-party liability claims: cost avoidance vs. pay and chase, reasonable effort, etc. • <u>Managed Care Supplement</u>

Obtaining a Provider Manual

Provider manuals come in two formats.



Provider Manual Navigation

Physicians Provider Manual Manual Updated 09/01/11

SECTION 5
ADMINISTRATIVE SERVICES

TABLE OF CONTENTS

GENERAL INFORMATION	1
ADMINISTRATION	1
CORRESPONDENCE AND INQUIRIES	1
PROCUREMENT OF FORMS	3
REPRODUCIBLE NEGATIVES	3
SOFTWARE	3
HARD COPY CLAIM FORMS	3
PRIVATE VENDORS	3
FAX REQUESTS	4
WEB ADDRESS	4

Search

What word or phrase would you like to search for?

Whole words only
 Case-Sensitive
 Include Bookmarks
 Include Comments

Search for a particular word. (Press Ctrl-F for the search screen.)

Click the page for the topic you wish to view.

Updates

Change Control Record (CCR) documents all changes made to each manual.

Date of change

- Check the SCDHHS Web site monthly for minor or non-policy changes made on the 1st of every month.
- Any policy changes are announced by bulletin.

Physician Provider Manual

CHANGE CONTROL RECORD

Date	Section	Page(s)	Change
12-01-11	2	70 85	<ul style="list-style-type: none">• Updated Prescription policy• Added Alcohol and Drug Testing policy to reflect Medicaid Bulletin dated November 3, 2011
12-01-11	4	12 18	<ul style="list-style-type: none">• Deleted codes 22551 and 22552• Added codes 22551 and 22552
11-10-11	2	36	Deleted reference to Q0091 in first paragraph

Changes documented on the CCR since the “birth” of the manual.

Adobe Reader

Adobe Reader

- Used to view PDF files: manuals, bulletins, forms
- **Free** - already installed on most computers
- Available at: www.adobe.com

SCDHHS Web site



MEMBERS

PROVIDERS

PARTNERS

APPLY FOR MEDICAID



Healthy Connections is SC's Medicaid Program.

Healthy Connections Medicaid provides health coverage for eligible residents of South Carolina.

[Get Started »](#)

Not looking for Medicaid?

In South Carolina, vital and immunization records, healthcare regulations and permitting, and programs like SNAP and TANF are overseen by different agencies.

[Agency Guide](#)

www.SCDHHS.gov

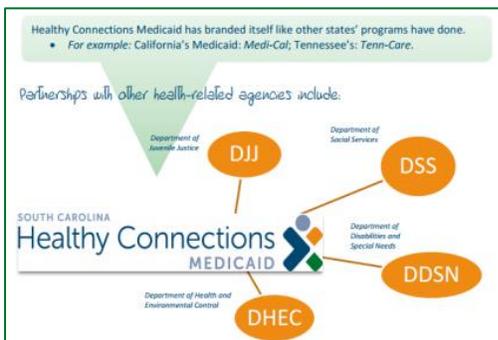
Medicaid information · Provider manuals · Managed Care information · Fee schedules and crosswalks (new procedure codes that are HIPAA compliant) · Edit codes and carrier codes · Electronic filing resources: Trading Partner Agreements, Companion Guides (used to help providers transfer software to meet HIPAA compliance regulations)

Online Learning

Locate provider training and resources at MedicaideLearning.com.

The screenshot shows the top navigation bar with the 'Healthy Connections MEDICAID' logo and a 'LOGIN' button. Below the navigation is a main banner for 'MEDICAID PROVIDER EDUCATION' with the subtext 'Ensuring providers have up-to-date information to understand Medicaid Policy'. Underneath the banner are three white boxes with blue icons and text: 'WORKSHOPS' (Free provider workshops registration), 'ONLINE COURSES' (Access e-Learning content here), and 'RESOURCES' (Provider contacts, manuals, news). Each box has a 'Go' button at the bottom.

Choose from a variety of learning tools...

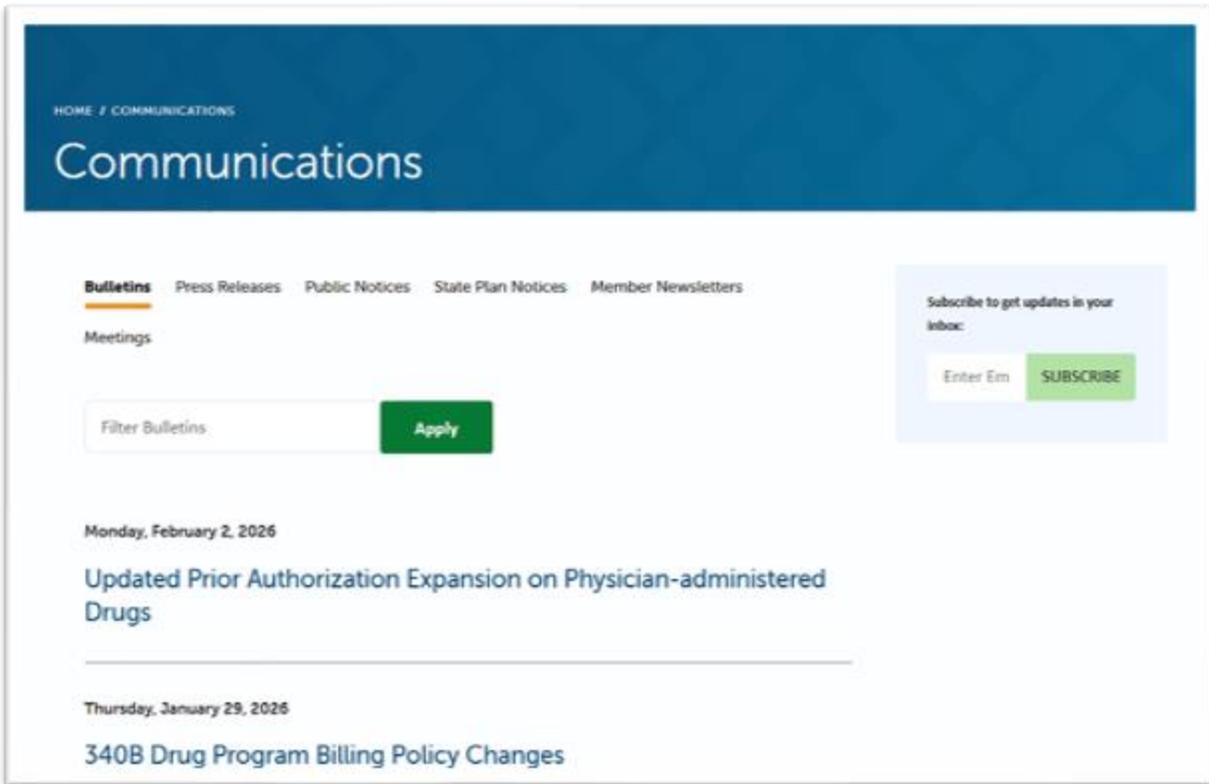


The form is titled 'HEALTH INSURANCE CLAIM FORM' and is 'APPROVED BY NATIONAL UNIFORM CLAIM COMMITTEE (NUCC) 02/12'. It includes a QR code in the top left and a 'Menu' button in the top right. The form is divided into several sections for data entry:

- 1. MEDICARE (Medicare#), MEDICAID (Medicaid#), TRICARE (ID#/DuDr#), CHAMPVA (Member ID#), GROUP HEALTH PLAN (ID#), FECA (BUS/LUNG) (ID#), OTHER (ID#)
- 1a. INSURED'S I.D. NUMBER (For Program in Item 1)
- 2. PATIENT'S NAME (Last Name, First Name, Middle Initial)
- 3. PATIENT'S BIRTH DATE (MM | DD | YY) and SEX (M | F)
- 4. INSURED'S NAME (Last Name, First Name, Middle Initial)

There are also checkboxes for 'PICA' and 'CARRIER' on the right side of the form.

Bulletins



Bulletins

- Used by SCDHHS to inform providers of policy changes
- Issued as necessary
- Available by automatic e-mail notification upon request
- To subscribe, go to bulletin.scdhhs.gov
- Otherwise, visit the scdhhs.gov website to view bulletins that have been issued

Provider Workshops

SCDHHS offers free workshops for providers that you'll be notified about if you've subscribed to receive bulletins.

FREE WORKSHOPS: January-March 2015

Medicaid Basics [\(click to register\)](#)
Jan. 13 • Feb. 10 • March 10 — 10 a.m.-4 p.m., Columbia
March 5 — 10 a.m.- 4 p.m., Charleston
Discover the South Carolina Healthy Connections Medicaid Program. This course provides overviews on general policies and topics such as: eligibility, claim filing options, the remittance package, Third Party Liability (TPL) and claim-level adjustments.

KEPRO Quality Improvement Training [\(click to register\)](#)
Jan. 20 — 9 a.m.-Noon, Greenville Jan. 21 — 9 a.m.-Noon, Florence
Jan. 22 — 9 a.m.-Noon, Charleston Jan. 23 — 9 a.m.-Noon, Columbia
Held in conjunction with Keystone Peer Review Organization (KEPRO), this annual quality improvement training includes requirements, updates and a review of the process and procedures for prior authorization.

Comprehensive Web Tool [\(click to register\)](#)
Jan. 21 • Feb. 18 • March 18 — 10 a.m.-3 p.m., Columbia
Explore all the available features on the South Carolina Healthy Connections Medicaid Web-based Claims Submission Tool. This class navigates claim entry and submission as well as how to check eligibility, claim status and e-remits in the online tool.

Overview of Third Party Liability [\(click to register\)](#)
Jan. 27 • Feb. 26 • March 26 — 10 a.m.-3 p.m., Columbia
Examine Third Party Liability (TPL) reporting responsibilities, refund process, claim adjudication, edit resolution and other resource information.

Overview of Claim-level Adjustments [\(click to register\)](#)
Jan. 29 — 10 a.m.-12:30 p.m., Columbia
Learn the detail-level process that gives professional providers the capability of submitting claim-level adjustments directly to South Carolina Healthy Connections Medicaid.

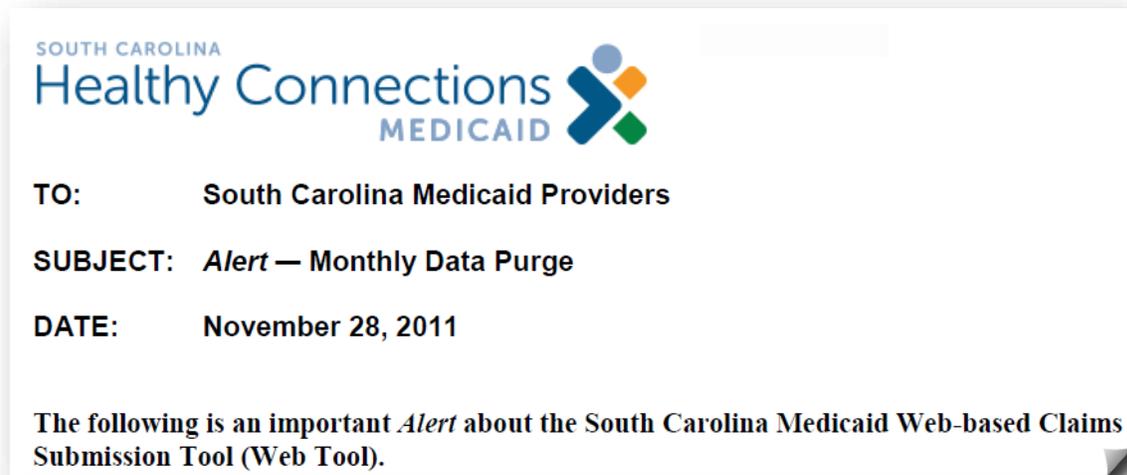
To register for a workshop, visit MedicaidLearning.com or call 1 (888) 289-0709 and select option 1.

Resources and training content are also available online at MedicaidLearning.com. For KEPRO Prior Authorization online training, visit scdhhs.kepro.com/content/training.aspx?t=GEN.

Better Care. Better Value. Better Health.

Web Tool Alerts

SCDHHS notifies WT users of any changes and events that pertain to the Web Tool.



Alert types

Monthly
system purge

System
updates

for claims
older
than 3
months

alert sent
one week
prior

changes
and
events

alert
issued as
necessary

- Alerts distributed electronically. Also, viewable on MedicaideLearning.com.

Obtaining a National Provider Identifier (NPI)



- Web: <https://nppes.cms.hhs.gov>
- Toll-free number
 - (800)465-3203 or (800)692-2326 (TTY)
- Email: customerservice@npienumerator.com
- Mailing address
 - NPI Enumerator
 - PO Box 6059
 - Fargo, ND 58108-6059