



Healthy BlueSM

BlueChoice[®] HealthPlan of SC

Healthy Connections



Healthy Blue 101

Agenda

- Role of Provider Relations and Education
- Your Role as a Participating Provider
- How to be a Self-Serving Provider
- Benefit Partners and Vendors
- Helpful Resources & Information

Role of Provider Relations and Education

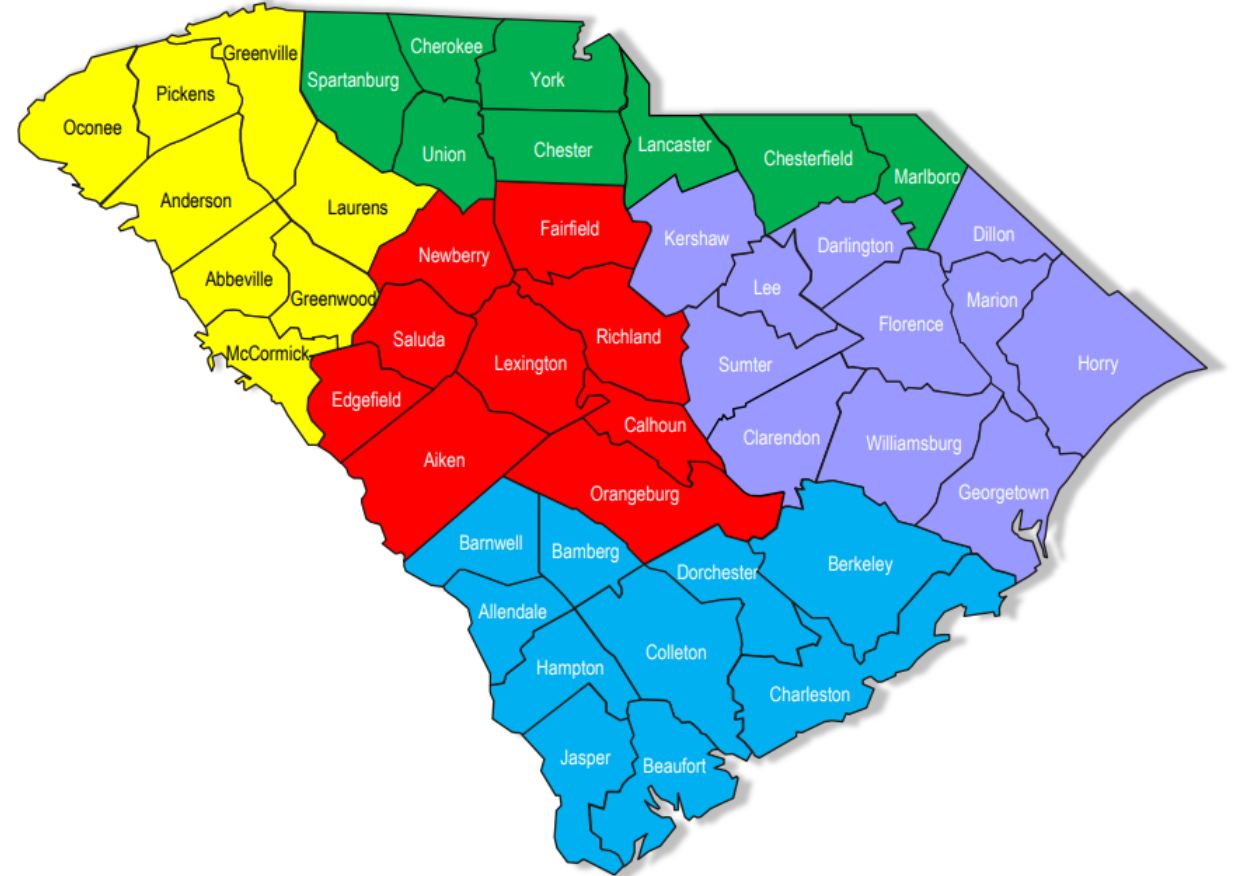
Role of Provider Relations and Education

We educate providers by:

- Conducting on-site visits to providers
- Offering training and support.
- Hosting webinars on various topics.
- Providing newsletters and bulletins on different information.
- Conducting annual workshops that include initiatives for the upcoming benefit year.

Find Your Provider Relations Consultant

- Visit www.HealthyBlueSC.com
 - *Providers > Resources > Contact Us*



Note: Always check the website for the most current map.

Your Role as a Participating Provider

Your Role as a Participating Provider

Participating provider responsibilities include:

- Filing all claims for applicable members.
- Accepting Healthy Blue's payment plus any patient liability as full reimbursement.
- Cooperating fully with the utilization review procedures.
- Using other preferred providers for a member's care unless medically necessary services, supplies or equipment are not available from a preferred provider, or in cases of medical emergency.

Note: Refer to the Provider Office Manual for a full list.

Your Role as a Participating Provider

Other helpful tips:

- Always ask for the member's current identification (ID) card at each visit.
- Always verify eligibility and benefits before rendering services.
- Check the member's cost-sharing before processing payment.
- Submit all claims with the complete ID number, including the prefix.
- Submit other payer liability details with the claims when applicable.

Provider Rights

Participating provider rights include:

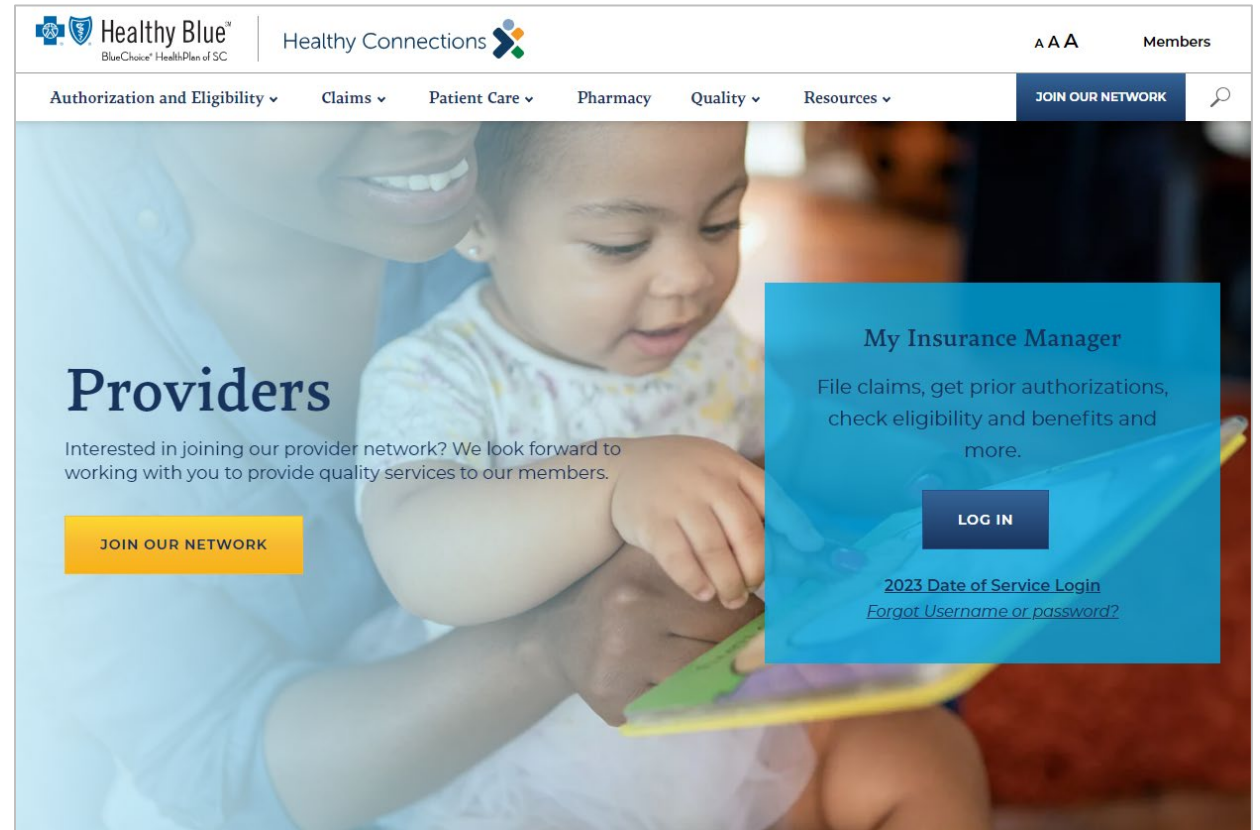
- Documenting health care screenings, immunizations, procedures, etc.
- Scheduling preventive care appointments for all members under age 21.
- Referring members to appropriate dentists, optometrists, case management, etc.
- And more

Note: Refer to the Provider Office Manual for a full list.

Being a Self-Serving Provider

Self-serving tools

- www.HealthyBlueSC.com
 - Provider manual
 - Claims information
 - Patient care
 - Authorizations and benefits
 - And much more



Self-serving tools

My Insurance ManagerSM (MIM)

Online tool that allows you to:

- Check eligibility and benefits.
- Submit prior authorizations.
- Submit claims.
- And much more.

MIM guides are available on www.HealthyBlueSC.com

Self-serving tools

[My Remit Manager](#) (MRM)

Online tool that allows you to:

- View ERA information.
- View information categorized by check number or by patient.
- View and print remittances.

More information is available on www.HealthyBlueSC.com

Benefit Partners and Vendors

Healthy Connections

- Healthy Connections allows providers to register their NPI to become a Medicaid provider, review manuals, check fee schedules and more.
- The South Carolina Department of Health and Human Services (SCDHHS) requires separate NPI registration for each group and individual provider.
- Once registered, the NPI must match the Medicaid ID number on the claim.
- For more information, providers can also:
 - Call 888-549-0820 (TTY: 888-842-3620)
 - Visit www.scdhhs.gov

The screenshot displays the 'Providers' page on the Healthy Connections Medicaid website. The page features a navigation bar with 'MEMBERS', 'PROVIDERS', and 'APPLY FOR MEDICAID' links, along with a search bar. The main content area includes three circular icons: 'Become a Medicaid Provider', 'Log in to Medicaid Web Portal', and 'Contact a Provider Representative'. Below these is a search bar with the placeholder text 'Where can' and a 'SEARCH' button. A 'Quick Links' section lists various resources such as 'Annual Eligibility Review Info', 'COVID-19', 'EPSDT Provider Resources', 'Federal Resources', 'Fraud, Waste & Abuse', 'Pharmacy', and 'Provider Directory'. On the right side, there is a 'PROVIDERS' menu with expandable sections for 'Manuals', 'Fee Schedules', 'Provider Enrollment', 'Managed Care', 'Revalidation', 'Trainings', 'Contact a Provider Representative', 'Provider Appeals', 'All Patient Refined Diagnosis Related Groups (APR-DRGs)', 'Claims', and 'Pharmacy'.

Vision Service Provider (VSP)

- VSP handles the vision coverage for our Healthy Blue members.
 - Only applies to routine vision services.
- The provider must participate in the VSP network.
- Call 800-877-7195 for information on the available vision options.
 - Available Monday – Saturday from 6 a.m. to 5 p.m. PST

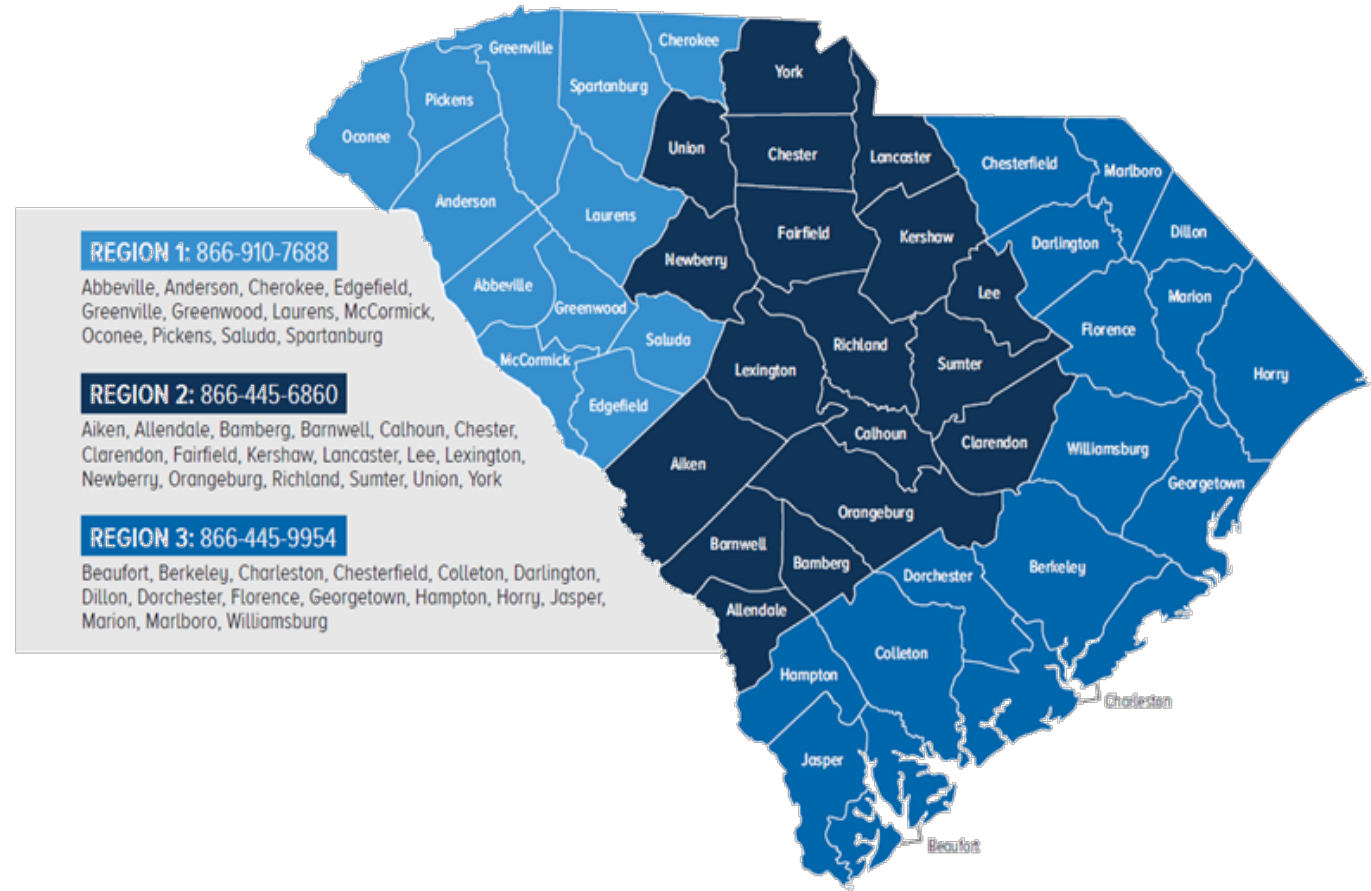


Visit www.vsp.com for more information.

Modivcare

Modivcare

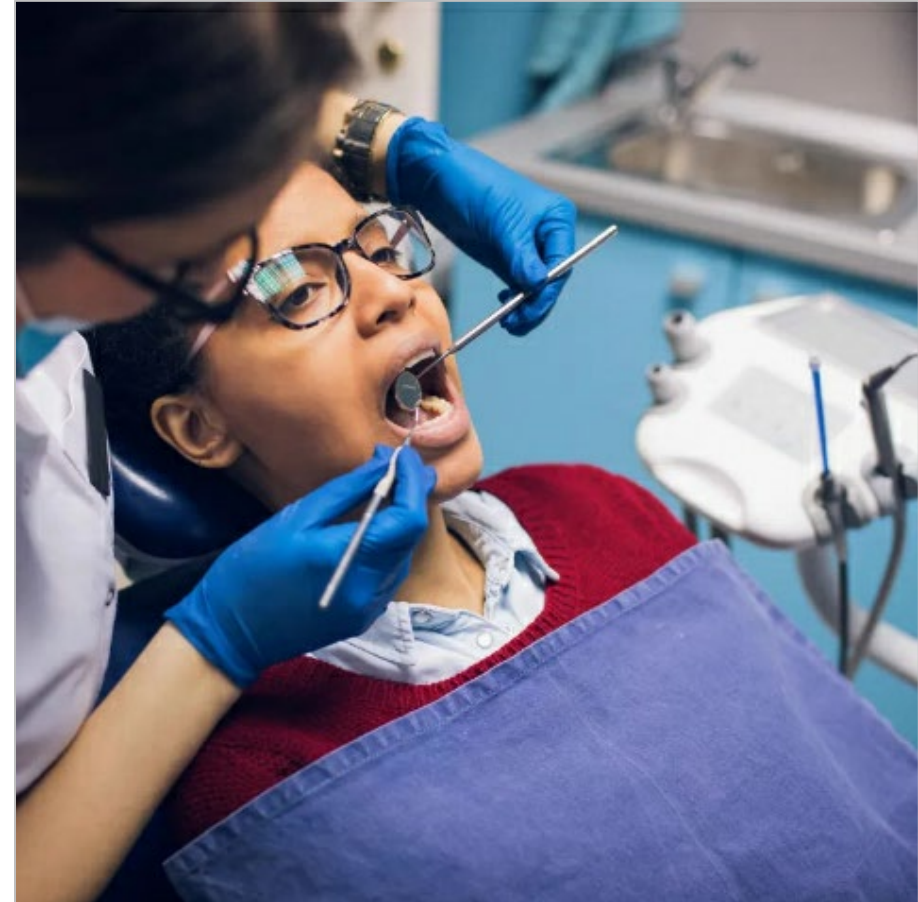
- Service line available Monday – Friday from 8 a.m. to 5 p.m., EST
- Call at least three business days before the appointment
- Read more [information](#) online.



Modivcare is an independent company providing transportation services on behalf of BlueChoice® HealthPlan.

DentaQuest

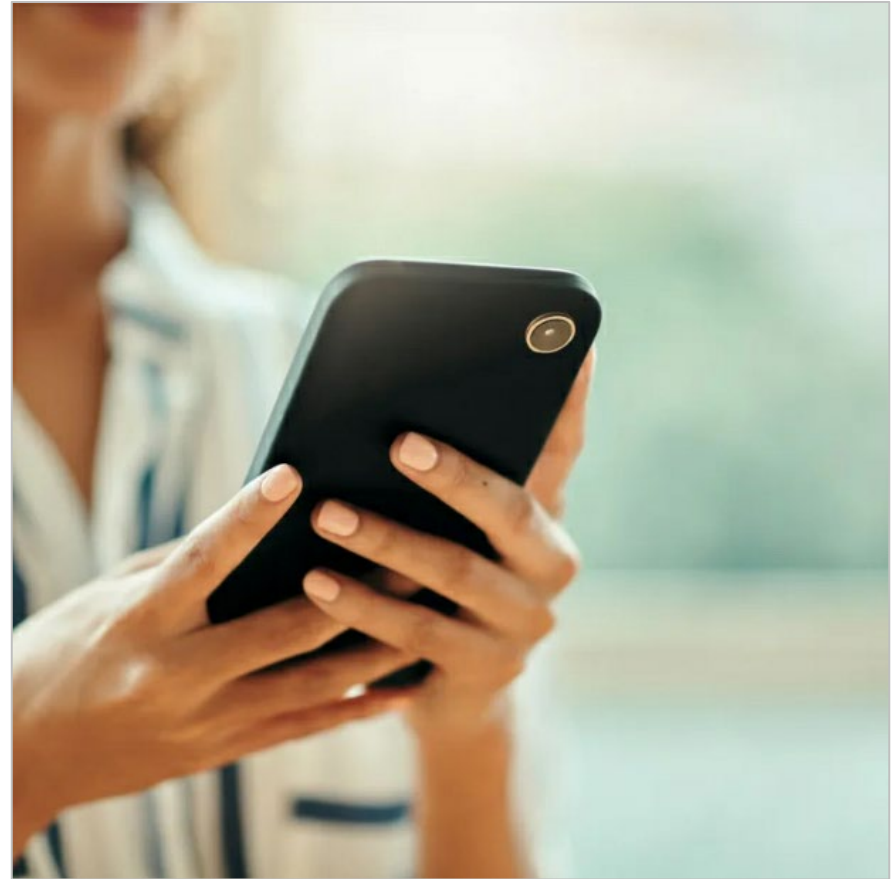
- DentaQuest provides dental coverage for members 21 years of age or younger.
- For coverage details, call 888-307-6552.



Visit www.dentaquest.com for more information.

Relay South Carolina

- Relay South Carolina offers members that have hearing or speech loss a way to communicate by telephone.
- Members can dial 711 or call 800-735-2583.



Visit www.relaysouthcarolina.com for more information.

ProgenyHealth

- ProgenyHealth specializes in neonatal care management.
- They promote healthy outcomes for premature and medically complex newborns.
- ProgenyHealth has a team of neonatologists, pediatricians, and neonatal nurse care managers that collaborate closely with the member.
- Members have 24/7 access by:
 - Calling 888-832-2006.
 - Faxing a request to 877-471-0549



Avalon Healthcare Solutions

Avalon provides laboratory benefit management services.

Request an authorization by:

- PAS Portal
 - www.avalonhcs.com
- Phone: 844-227-5769
 - Hours: Monday – Friday, 8 a.m. to 8 p.m. EST
- Fax: 813-751-3760
 - Complete the Preservice Review Request form.
 - Providers>Authorizations and Eligibility>Prior Authorization

Avalon is an independent company providing laboratory benefit management services on behalf of Healthy Blue.



Preservice Review Request Form

Submission of this form is only a request for services and does not guarantee approval of the services. Avalon will review the information you provide on this form and the supporting clinical documents that you submit with the form to make a medical necessity determination. Incomplete or missing information will delay our review. Please fax the completed form to Avalon's Preservice Review Department at 1-813-751-3760. If you have any questions, please call 1-844-227-5769. Our clinical staff is available Monday thru Friday, 8:00 AM to 8:00 PM Eastern Time.

A preservice authorization is not a guarantee of payment. Payment is subject to member eligibility and benefits on the date of service.

Requesting Provider: Ordering Rendering

Member's Health Plan: North Carolina South Carolina Kansas City*

| MEMBER INFORMATION | | |
|--|--|--|
| First Name: | Last Name: | |
| ID Card #*: | Group #: | |
| DOB (MM/DD/CCYY): | | |
| ORDERING PROVIDER INFORMATION | | |
| First Name: | Last Name: | |
| NPI: | Phone #: | |
| Street, Bldg., Suite #: | Fax #: | |
| City: | Contact Name: | |
| State: | Zip Code: | Contact Email: |
| Specialty | | |
| <input type="checkbox"/> AI – Allergy & Immunology | <input type="checkbox"/> ID – Infectious Disease | <input type="checkbox"/> PDO – Pediatric Otolaryngology |
| <input type="checkbox"/> CD – Cardiovascular Disease | <input type="checkbox"/> IM – Internal Medicine | <input type="checkbox"/> PP – Pediatric Pathology |
| <input type="checkbox"/> CHP – Child & Adolescent Psych | <input type="checkbox"/> MFM – Maternal Fetal Medicine | <input type="checkbox"/> PPR – Pediatric Rheumatology |
| <input type="checkbox"/> DBP – Dev Beh Pediatrics | <input type="checkbox"/> MG – Medical Genetics | <input type="checkbox"/> PDS – Pediatric Surgery |
| <input type="checkbox"/> CGC – Certified Genetic Counselor | <input type="checkbox"/> NPM – Neonatal-Perinatal Med | <input type="checkbox"/> UP – Pediatric Urology |
| <input type="checkbox"/> CHN – Child Neurology | <input type="checkbox"/> NEP – Nephrology | <input type="checkbox"/> PD – Pediatrics |
| <input type="checkbox"/> CG – Clinical Genetics | <input type="checkbox"/> NS – Neurological Surgery | <input type="checkbox"/> PS – Plastic/Reconstructive Sur |
| <input type="checkbox"/> CRS – Colon & Rectal Surgery | <input type="checkbox"/> N – Neurology | <input type="checkbox"/> P – Psychiatry |
| <input type="checkbox"/> D – Dermatology | <input type="checkbox"/> OBG – Obstetrics & Gynecology | <input type="checkbox"/> PUD – Pulmonary Disease |
| <input type="checkbox"/> DMP – Dermatopathology | <input type="checkbox"/> ON – Oncology | <input type="checkbox"/> DR – Diagnostic Radiology |
| <input type="checkbox"/> END – Endo, Diabetes & Met | <input type="checkbox"/> OPH – Ophthalmology | <input type="checkbox"/> REN – Reproductive Endo |
| <input type="checkbox"/> FP – Family Practice | <input type="checkbox"/> OTO – Otolaryngology | <input type="checkbox"/> RHU – Rheumatology |
| <input type="checkbox"/> GE – Gastroenterology | <input type="checkbox"/> APM – Pain Medicine | <input type="checkbox"/> SO – Surgical Oncology |
| <input type="checkbox"/> GP – General Practice | <input type="checkbox"/> PDC – Pediatric cardiology | <input type="checkbox"/> TS – Thoracic surgery |
| <input type="checkbox"/> GS – General Surgery | <input type="checkbox"/> PDE – Pediatric Endocrinology | <input type="checkbox"/> U – Urology |
| <input type="checkbox"/> GO – Gynecology Oncology | <input type="checkbox"/> PG – Pediatric Gastroenterology | <input type="checkbox"/> VS – Vascular Surgery |
| <input type="checkbox"/> HEM – Hematology | <input type="checkbox"/> PHO – Pediatric Hematology-Onc | |
| <input type="checkbox"/> HO – Hematology & Oncology | <input type="checkbox"/> PN – Pediatric Nephrology | |
| RENDERING PROVIDER | | |
| Facility Name: | | |
| NPI: | TIN*: | Phone #: |

Avalon Administrative Services, LLC is a wholly owned subsidiary of Avalon Health Services, LLC d/b/a Avalon Healthcare Solutions 01/2022



CVS/Novologix

CVS/Novologix provides medical injectable benefit management services.

Request an authorization by:

- Phone: 844-345-2803
 - Hours: Monday – Friday, 9 a.m. to 7 p.m. EST
- Fax: 866-494-9927
 - Complete the Precertification Request for Medical Injectables form.
 - Providers>Pharmacy
 - Review the **medical specialty drug** list to determine which drugs require authorization.

| Healthy Blue SM | | Healthy Connections | | |
|--|----------------|---------------------|---|-----------------------|
| BlueChoice® HealthPlan of SC | | | | |
| Precertification Request for Medical Injectables | | | | |
| <small>Fax this completed form to 866-494-9927. If the following information is not complete, correct and/or legible, the review process can be delayed.</small> | | | | |
| General Information | | | | |
| Date of Request: | | | | |
| Service Type: <input type="checkbox"/> Nonurgent <input type="checkbox"/> Urgent/Expedited — Clinical reason for urgency: | | | | |
| Member Information | | | | |
| Last Name: | | First Name: | | |
| Member ID #: | | DOB: | Gender: <input type="checkbox"/> Male <input type="checkbox"/> Female | |
| Member Address: | | | | |
| City, State and ZIP Code: | | | | |
| Member Phone: | | | | |
| Requesting Provider <input type="checkbox"/> Contracted <input type="checkbox"/> Noncontracted | | | | |
| Last Name: | | First Name: | | |
| Provider Specialty: | | Provider NPI: | | |
| Tax ID: | | Office Phone: | | |
| Office Contact Name: | | Office Fax: | | |
| Provider Address: | | | | |
| City, State and ZIP Code: | | | | |
| Servicing Provider <input type="checkbox"/> Contracted <input type="checkbox"/> Noncontracted | | | | |
| Last Name: | | First Name: | | |
| Provider Specialty: | | Provider NPI: | | |
| Tax ID: | | Office Phone: | | |
| Office Contact Name: | | Office Fax: | | |
| Provider Address: | | | | |
| City, State and ZIP Code: | | | | |
| PLEASE SEND ALL CLINICAL NOTES AND ANY SUPPORTING DOCUMENTATION | | | | |
| Request Type: <input type="checkbox"/> Initial Request <input type="checkbox"/> Continuation Request | | Previous Auth #: | | |
| Diagnosis Code (ICD-10): | | Description: | | |
| Place of Service: <input type="checkbox"/> MD office <input type="checkbox"/> Home <input type="checkbox"/> Outpatient Hospital <input type="checkbox"/> Other: | | | | |
| Continuation Only: Has member improved or stabilized while on therapy: <input type="checkbox"/> Yes <input type="checkbox"/> No | | | | |
| Medication Information | | | | |
| Medication: | Dose/Strength: | Directions: | Quantity: | Special Instructions: |
| | | | | |
| Pertinent Lab Values: | | | | |
| Additional Information: | | | | |
| <small>www.HealthyBlueSC.com</small> | | | | |
| <small>Healthy Blue is offered by BlueChoice HealthPlan, an independent licensee of the Blue Cross Blue Shield Association. To report fraud, call our confidential Fraud Hotline at 800-763-0703. You may also call the South Carolina Department of Health and Human Services Fraud Hotline at 888-364-3224 or email fraudres@scdhhs.gov.</small> | | | | |

CVS/Novologix is an independent company providing medical injectable benefit management services on behalf of Healthy Blue.

Evolut

- Evolut provides radiology benefit management services.
- Improves outcomes for members with health conditions.
- Access clinical guidelines and experts.

Request an authorization:

- Online
 - www.RadMD.com
- Phone: 855-569-6749

Evolut is an independent company providing radiology benefit management services on behalf of Healthy Blue.



Helpful Resources

Helpful Contacts

Provider Service

Phone: 866-757-8286 or TTY: 866-773-9634

Email: HBPProviderService@healthybluesc.com

Fax: 803-870-6511

Hours: Monday – Friday, 8:30 a.m. to 5 p.m. EST

Disease Management (DM) Department

Phone: 866-757-8286 or TTY: 866-773-9634

Fax: 803-870-6502

Hours: Monday – Friday, 8:30 a.m. to 5 p.m. EST

Utilization Management (UM) Department

Phone: 866-757-8286 or TTY: 866-773-9634

Fax: 803-870-6500

Hours: Monday – Friday, 8:30 a.m. to 5 p.m. EST

24/7 Nurse line

Phone: 800-830-1525

Vision Service Plan* (VSP)

Phone: 800-615-1883

Hours: Monday – Friday, 8 a.m. to 5 p.m. EST

Saturday, 10 a.m. to 3 p.m. EST

Sunday, 10 a.m. to 4 p.m. EST

Case Management (CM) Department

Phone: 866-757-8286 or TTY: 866-773-9634

Fax: 803-870-6501

Hours: Monday – Friday, 8:30 a.m. to 5 p.m. EST

Behavioral Health

Phone: 800-868-1032

Fax: 803-870-6506

Hours: Monday – Friday, 8:30 a.m. to 5 p.m. EST

NIA Magellan*

Phone: 888-642-9181

Hours: Monday – Friday, 8 a.m. to 5 p.m. EST

Website: www.RadMD.com

* These are independent companies that manage services on behalf of BlueChoice HealthPlan.

Helpful Contacts

Language Line

Access an Interpreter
Phone: 844-641-7704

SCDHHS

Phone: 888-289-0709

Technology Support (MIM)

Phone: 855-229-5720

SCDHHS Fraud Reporting

Phone: 888-364-3224
Fax: 803-255-8224

Email: fraudres@scdhhs.gov

Vision Service Plan* (VSP)

Phone: 800-615-1883
Hours: Monday – Friday, 8 a.m. to 5 p.m. EST
Saturday, 10 a.m. to 3 p.m. EST
Sunday, 10 a.m. to 4 p.m. EST

Case Management (CM) Department

Phone: 866-757-8286 or TTY: 866-773-9634
Fax: 803-870-6501
Hours: Monday – Friday, 8:30 a.m. to 5 p.m. EST

Behavioral Health

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NIA Magellan*

Phone: 888-642-9181
Hours: Monday – Friday, 8 a.m. to 5 p.m. EST
Website: www.RadMD.com

** These are independent companies that manage services on behalf of BlueChoice HealthPlan.*

Quick Reference Guide

- Find efficient methods to get benefit information, obtain prior authorization, review important telephone numbers and other valuable resources.
- Visit www.HealthyBlueSC.com > Provider > Resources > User Manual, Guides and Forms.



Provider Quick Reference Guide

My Insurance Manager™:

- ◆ Online: www.HealthyBlueSC.com/providers

Case management

- ◆ Hours: Monday – Friday from 8 a.m. – 5 p.m. Eastern time
- ◆ Phone: 866-757-8286

Provider disputes:

Provider disputes can be submitted in the following ways:

- ◆ Phone: 866-757-8286
- ◆ Mail: Healthy Blue
Provider Dispute
PO Box 100317
Columbia, SC 29202-3317

Claim filing:

- ◆ Online: My Insurance Manager
- ◆ EDI submissions via clearinghouse:
Healthy Blue payer ID: 00403
- ◆ Mail: Healthy Blue — Claims
PO Box 100317
Columbia, SC 29202-3317

Grievances:

Providers may only file a grievance on behalf of the member with the member's written consent:

- ◆ Phone: 866-757-8286
- ◆ Mail: Healthy Blue — Grievances
PO Box 100317
Columbia, SC 29202-3317

Dental claims and authorizations (DentaQuest):

- ◆ Online: www.DentaQuest.com*
- ◆ Hours: Monday – Friday from 8 a.m. – 6 p.m. Eastern time
- ◆ Phone: 888-307-6553
- ◆ Mail: DentaQuest
PO Box 2136
Columbia, SC 29202-2136

DentaQuest is an independent company providing dental benefit management services on behalf of BlueChoice HealthPlan.

Electronic funds transfer (EFT):

- ◆ Email: Provider.EFT@bcssc.com
- ◆ Fax: 803-870-8065

Completed EFT forms are required for new EFT setup and/or changes.

Electronic remittance advice:

Remittance advices can be obtained via the following ways:

- ◆ Online: My Insurance Manager
- ◆ Clearinghouse

24-Hour Nurseline:

- ◆ Phone: 800-830-1525 (TTY: 711)

Overpayments/refunds:

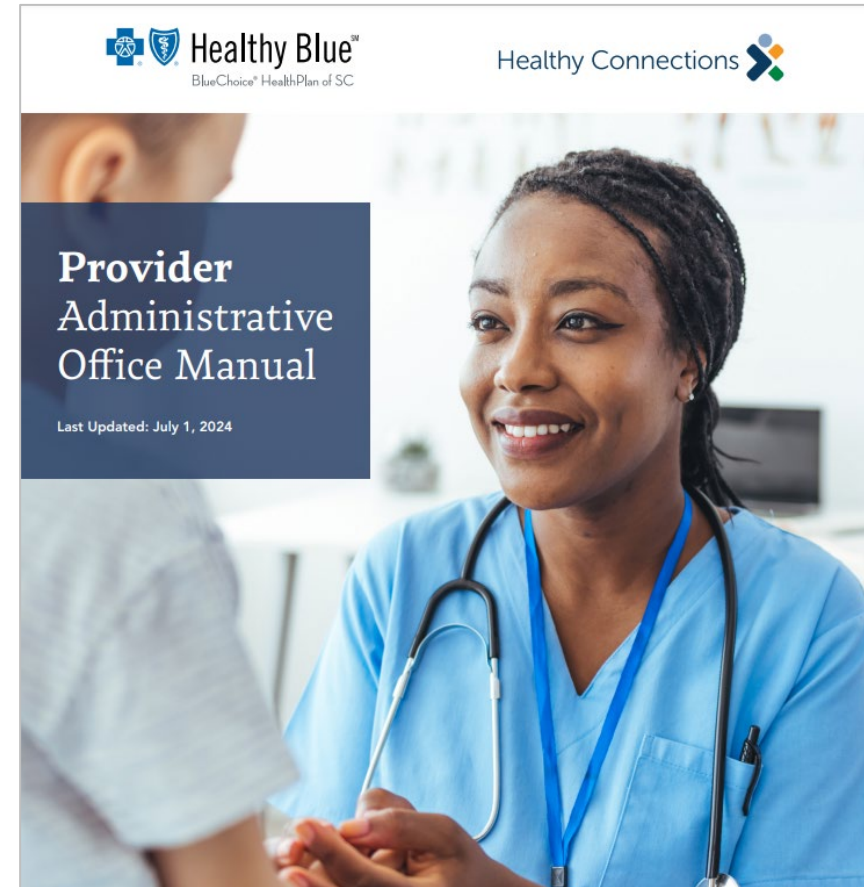
- ◆ Mail: Healthy Blue
Claims Overpayment/Refunds
PO Box 100317
Columbia, SC 29202-3317

Provider Manual

- Access information such as:
 - Administrative information
 - Quality improvements
 - Utilization management
 - Claims Information

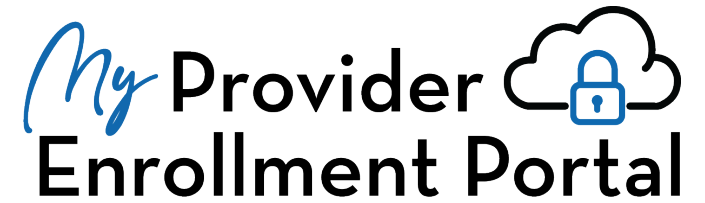
Providers>Resources>User Manual, Guides and Forms

Note: The manual is updated regularly.



Provider Enrollment

- [My Provider Enrollment Portal](#)
 - Used for all provider enrollment.
 - Demographic updates
 - For participation in the Healthy Blue network, you must your ***Medicaid ID number***.



Cultural Competency

Healthy Blue providers are required to complete cultural competency training.

Being culturally competent plays an integral role in the quality of care you provide.

- Cultural competency is a set of congruent behaviors, attitudes, and policies that enable effective work in cross-cultural situations.
- Cultural awareness is the ability to recognize the cultural factors, norms, values, communication patterns, socioeconomic status and world views that shape personal and professional behavior.

To learn more, visit www.HealthyBlueSC.com and under the Provider section, select Quality, then Improving Your Patient's Experience.

BlueBlast

- Monthly newsletter that includes:
 - Important health plan updates.
 - Healthy Connections updates.
 - Announcements.
 - Billing and claims information.
 - And much more!
- Visit www.HealthyBlueSC.com to sign up.



Benefits – Checking Covered Services

- Visit www.scdhhs.gov/resource/fee-schedules *
 - Information is listed by provider specialty.
 - If the code is on the SCDHHS fee schedule, it is covered.
 - Medicaid Manage Care Organization plans are required to offer at a minimum, the same benefits as Healthy Connections Fee for Service.

** This link leads to a third-party site. Their organization is solely responsible for the content and privacy policies on the site.*

Benefits – Example of Fee Schedule

CLAIMS COMMUNICATIONS APPEALS FRAUD CONTACT

SOUTH CAROLINA DEPARTMENT OF HEALTH AND HUMAN SERVICES
Healthy Connections
 MEDICAID

MEMBERS PROVIDERS APPLY FOR MEDICAID

HOME / PROVIDERS / FEE SCHEDULES

Fee Schedules

Fee Schedules

Dental Fee Schedule

[Dental Fee Schedule](#)

Audiology Fee Schedule

[Audiology Fee Schedule](#)

Advanced Practice Providers Fee Schedules +

PROVIDERS

- Manuals +
- Fee Schedules**
- Provider Enrollment +
- Managed Care
- Revalidation
- Trainings
- Contact a Provider Representative
- Provider Appeals
- All Patient Refined Diagnosis Related Groups (APR-DRGs)
- File a Claim

| | A | B | C | D | E | F |
|----|--------------------------------------|-----|--------------|---------------|----------|---|
| 1 | SC DEPT OF HEALTH AND HUMAN SERVICES | | | | | |
| 2 | AUDIOLOGY FEE SCHEDULE | | | | | |
| 3 | SCHEDULE CREATION DATE 05/01/2022 | | | | | |
| 4 | M - MANUALLY PRICED PROCEDURE | | | | | |
| 5 | | | | | | |
| 6 | PROC | MOD | PAYMENT RATE | FACILITY RATE | | |
| 7 | | | | | | |
| 8 | V5011 | | 0 \$42.26 | \$0.00 | ##### | |
| 9 | V5020 | | 0 \$47.12 | \$0.00 | 1/1/2015 | |
| 10 | V5090 | | 0 \$105.99 | \$0.00 | ##### | |
| 11 | V5264 | | 0 \$74.21 | \$0.00 | 1/1/2015 | |
| 12 | V5275 | | 0 \$29.16 | \$0.00 | ##### | |
| 13 | 92550 | | 0 \$10.16 | \$0.00 | 7/1/2019 | |
| 14 | 92551 | | 0 \$6.22 | \$0.00 | 7/1/2019 | |
| 15 | 92552 | | 0 \$13.98 | \$0.00 | ##### | |
| 16 | 92553 | | 0 \$15.49 | \$0.00 | 7/1/2019 | |
| 17 | 92555 | | 0 \$8.55 | \$0.00 | 7/1/2019 | |
| 18 | 92556 | | 0 \$13.24 | \$0.00 | 7/1/2019 | |
| 19 | 92556 | 52 | \$6.62 | \$0.00 | 7/1/2019 | |
| 20 | 92557 | U1 | \$37.94 | \$0.00 | 7/1/2019 | |
| 21 | 92557 | U2 | \$37.94 | \$0.00 | 7/1/2019 | |
| 22 | 92557 | | 0 \$37.94 | \$0.00 | ##### | |
| 23 | 92557 | 52 | \$18.97 | \$0.00 | ##### | |
| 24 | 92563 | | 0 \$11.01 | \$0.00 | 7/1/2019 | |
| 25 | 92567 | | 0 \$16.68 | \$0.00 | ##### | |
| 26 | 92567 | 52 | \$8.34 | \$0.00 | ##### | |
| 27 | 92568 | | 0 \$14.38 | \$0.00 | ##### | |
| 28 | 92570 | | 0 \$15.47 | \$0.00 | 7/1/2019 | |
| 29 | 92579 | | 0 \$50.00 | \$0.00 | 1/1/2015 | |
| 30 | 92582 | | 0 \$50.00 | \$0.00 | 1/1/2015 | |
| 31 | 92583 | | 0 \$17.73 | \$0.00 | 7/1/2019 | |
| 32 | 92584 | | 0 \$78.54 | \$0.00 | ##### | |
| 33 | 92587 | | 0 \$47.89 | \$0.00 | ##### | |
| 34 | 92588 | | 0 \$63.96 | \$0.00 | ##### | |
| 35 | 92590 | | 0 \$39.24 | \$0.00 | ##### | |
| 36 | 92591 | | 0 \$36.12 | \$0.00 | 7/1/2019 | |

Benefits – Checking Benefit Manuals

- Visit www.scdhhs.gov/provider-manual-list *
 - Manuals are listed by service type.
 - Includes general information, billing details, claims filing information and much more.

** This link leads to a third-party site. Their organization is solely responsible for the content and privacy policies on the site.*

Benefits – Example of Benefits Manual

CLAIMS COMMUNICATIONS APPEALS FRAUD CONTACT

SOUTH CAROLINA DEPARTMENT OF HEALTH AND HUMAN SERVICES
Healthy Connections
MEDICAID

MEMBERS PROVIDERS APPLY FOR MEDICAID

HOME / PROVIDERS / PROVIDER MANUAL LIST

Provider Manual List

The South Carolina Department of Health and Human Services (SCDHHS) reorganized its Medicaid provider manuals July 1, 2019. Beginning July 1, 2019, general administrative and billing information was consolidated into the [Provider Administrative and Billing Manual](#) while provider type-specific guidance and information remained in individual provider manuals.

SCDHHS' individual provider manuals and other resources that are specific to that provider type are available by clicking on the provider type below. Resources that are applicable to multiple provider types are available via the links below and also here:

- [Provider Administrative and Billing Manual](#)
- [Copayment Schedule](#)
- Appendices
 - Appendix 1: [Edit Code Descriptions and Resolutions](#)
 - [Appendix 2: Carrier Codes](#)
- [Third Party Liability Supplement](#)

SOUTH CAROLINA DEPARTMENT OF HEALTH AND HUMAN SERVICES
Healthy Connections
MEDICAID

PROVIDER ADMINISTRATIVE AND BILLING MANUAL

JULY 1, 2024

South Carolina Department of Health and Human Services

Community Outreach


Provides support to providers and their offices by:

- Offering health education resources.
- Providing giveaway items.
- Distributing posters with QR codes that patients can use to update their address.
- Sponsoring clinic days to close gaps in care.
- Supporting and sponsoring events

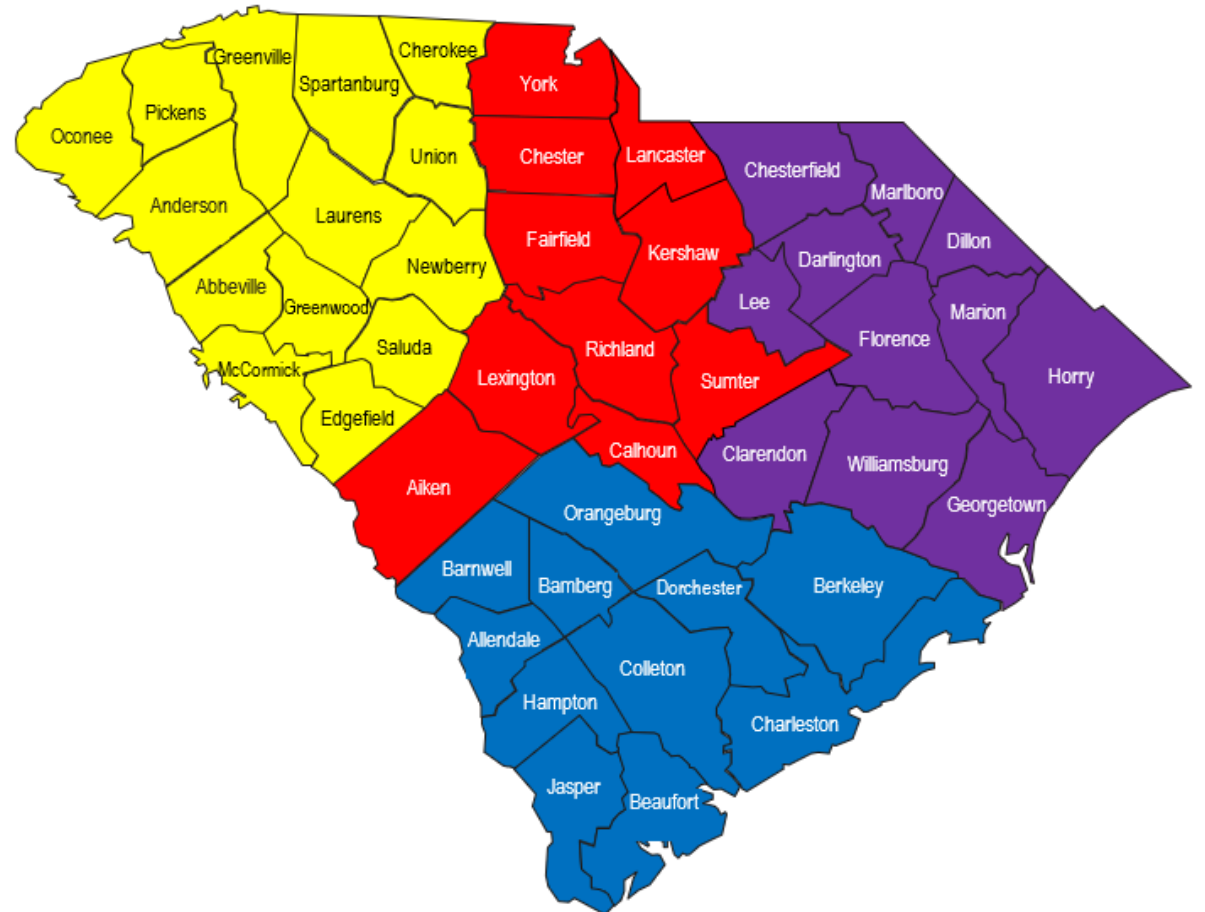
Community Outreach Territory Map

 **Nathan Cox**
Nathan.Cox@healthybluesc.com
(704) 941-7490

 **Marcell Barnes**
Marcell.BarnesJR@healthybluesc.com
(803) 467-6011

 **Jessica Barnett**
Jessica.Barnett@healthybluesc.com
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Quality

Quality Navigator Model

- The quality navigator model is a population health and quality improvement program designed to assist primary care physicians (PCPs) in meeting quality metrics. We currently have 13 Quality Navigators.
- The goal of the program is to assist PCPs by:
 - Streamline care coordination.
 - Providing help tools and resources to support patient care efforts.
- Benefits include:
 - Promotes accurate coding guidance.
 - Facilitates referrals to disease and case management programs to support treatment plans.
 - Assists with care coordination.

Quality

Medical Records

- As of Jan. 1, 2025, Healthy Blue will use the Medical Office Record Audit (MORCA) tool to conduct audits on medical records for primary care physicians (PCPs).
- A request will come from the Quality Management Department staff to review medical charts for up to 5 of your patients.
- The following categories are reviewed in the medical record review:
 - Patient name, Medicaid identification number, age, sex, and places of residence and employment and responsible party (parent or guardian)
 - All pages within chart contain member name and/or ID#
 - Services provided through the MCO, date of service, service site, and name of service provider
 - All chart entries are legible
 - Documentation of emergency and/or after-hours encounters and follow-up
 - Signed and dated consent forms.
 - Review of consults, labs, and other studies

Quality

HEDIS

- Evaluates performance in terms of clinical quality
- Administered by NCQA and used by Centers for Medicare & Medicaid Services for monitoring
- HEDIS Retrospective reviews care given or due in the prior year
- HEDIS Prospective is referred to Year-Round HEDIS, which continuously monitors rates in real time

How to Close Care Gaps

- Claims Submission
- Remote Access (to EMR)
- Data Transfers
- Medical Records

Pharmacy

Pharmacy

- On July 1, 2024, SCDHHS transitioned from multiple MCO-operated preferred drug lists (PDLs), to a single, state directed preferred drug list (sPDL).
- **The sPDL drug list is maintained by DHHS and are managed drugs.**
- **The sPDL does not encompass all medications in the universe.**
- All other drugs not addressed in the sPDL are **non-managed drugs**.

Comprehensive Drug List:



Pharmacy Contacts

CarelonRx – Prior Authorizations

Retail

Phone: 844-410-6890

Fax: 844-512-9005

Hours: Monday- Friday 8 a.m. to 8 p.m. EST

Saturday 10 a.m. to 2 p.m. EST

Home Delivery/Mail Order

Phone (24/7): 833-203-1737

Fax: 800-207-3118

Medical Injectables

Phone: 833-988-1264

Fax: 844-512-7027

Hours: 7 a.m. to 7 p.m. EST

Specialty Pharmacy


Phone (24/7): 833-255-0646


Fax: 833-263-2871


HEALTHY BLUE ♦ PO BOX 100317 ♦ COLUMBIA, SC ♦ 29202-3317


Provider Service: 866-757-8286 Monday – Friday from 8:30 a.m. - 5 p.m.

24-Hour Nurseline: 800-830-1525 (TTY: 711)

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