



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
- My Insurance Manager
- My Remit Manager
- Authorizations
- Claim Submissions
- Provider Disputes
- Contacts and Resources

Role of Provider Relations and Education

How We Educate Providers By

- 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.

Your Role as a Participating Provider

Responsibilities of Participating Providers

- 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.
- Being culturally competent provider which includes providing interpreter services.

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.

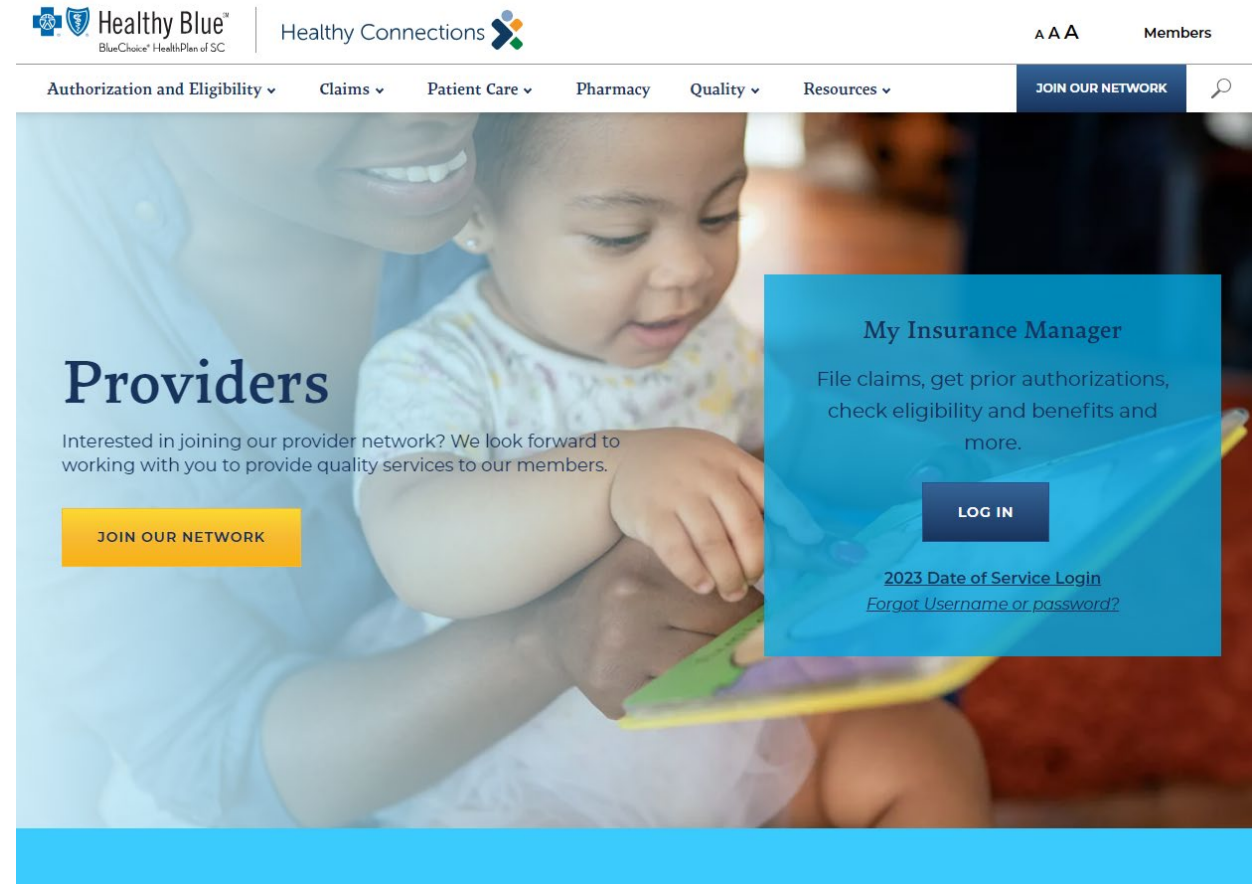
Being a Self-Serving Provider

Healthy Blue Website

www.HealthyBlueSC.com

includes:

- Authorization and Eligibility
- Claims
- Patient Care
- Pharmacy
- Quality
- Resources

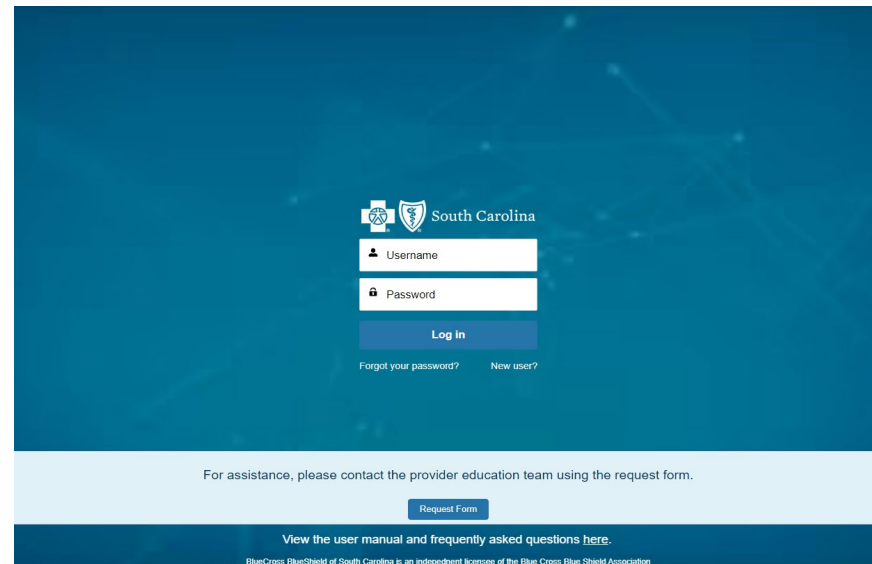


The screenshot shows the Healthy Blue website homepage. At the top left is the Healthy Blue logo with the tagline 'BlueChoice® HealthPlan of SC'. To its right is the 'Healthy Connections' logo. On the far right of the top bar are 'A A A' accessibility icons and a 'Members' link. Below this is a navigation menu with dropdown arrows for 'Authorization and Eligibility', 'Claims', 'Patient Care', 'Pharmacy', 'Quality', and 'Resources'. A 'JOIN OUR NETWORK' button is positioned to the right of the navigation menu. The main content area features a large background image of a woman smiling and holding a baby. Overlaid on this image are two primary sections: 'Providers', which includes the text 'Interested in joining our provider network? We look forward to working with you to provide quality services to our members.' and a yellow 'JOIN OUR NETWORK' button; and 'My Insurance Manager', which includes the text 'File claims, get prior authorizations, check eligibility and benefits and more.' and a dark blue 'LOG IN' button. Below the 'LOG IN' button is a link for '2023 Date of Service Login' with a sub-link 'Forgot Username or password?'.

My Provider Enrollment Portal



- [My Provider Enrollment Portal](#)
 - Used for all provider enrollment process to include demographics, credentialing and more
 - For participation in the Healthy Blue network, you must have your Medicaid ID number



My Insurance Manager

This is a web-based tool that gives providers quick and easy access to patient information.

You can log into MIM to:

- Get eligibility and benefits.
- Submit claim submissions.
- Access claims status.
- Request prior authorizations.
- And much more.

My Insurance Manager

Available Guides Include

- Getting Started
- Eligibility and Benefits
- Claims Entry
- Claims Status, Patient Directory, Superbill Maintenance and Coordination of Benefits
- Precertification
- Office Administration
- Provider Validation: MD Checkup User Guide

The screenshot shows the My Insurance Manager website. At the top, there is a dark blue header with the logo "My INSURANCE MANAGER SM". Below the header, the main content area is white. On the left, there is a login form with fields for "Username" and "Password", a "Login" button, and a "Register Now!" link. Below the login form, there are links for "Forgot Username?" and "Forgot Password?". To the right of the login form, there is a large banner featuring a smiling female doctor in a white coat. The banner text reads "Welcome to My Insurance Manager!" and "Log in to file a claim, check benefits and more! If you have never registered, you will need to create a profile." Below the banner is a "Register Now" button. Below the banner, there is a section titled "Browser Requirements" with a sub-header "For predictable, reliable performance, we recommend viewing My Insurance Manager using one of these browsers:". Below this, there are four browser icons and their names: "Microsoft Edge*", "Mozilla Firefox (current version)", "Google Chrome (current version)", and "Safari (Mac OS Only)". Below the browser requirements, there is a small text block: "For training or assistance with using My Insurance Manager, please contact us at provider.education@bcbsc.com. * STATchat can be accessed with Google Chrome or Mozilla Firefox." To the right of the browser requirements, there is a section titled "Latest Features" with two feature cards. The first card is titled "Is your password strong enough? Safeguard PHI!" and contains the text "Protect important information on the MIM portal by making sure your password is secure." Below the card is a "Learn how" button with a right-pointing arrow. The second card is titled "Want To Stay in the Know? See the Latest Bulletins!" and contains the text "Get informed of any changes or updates taking place." Below the card is a "Learn Now" button with a right-pointing arrow.

My Remit Manager

Web-based tool used to track payments and pull electronic remittance advices.

Use My Remit Manager to:

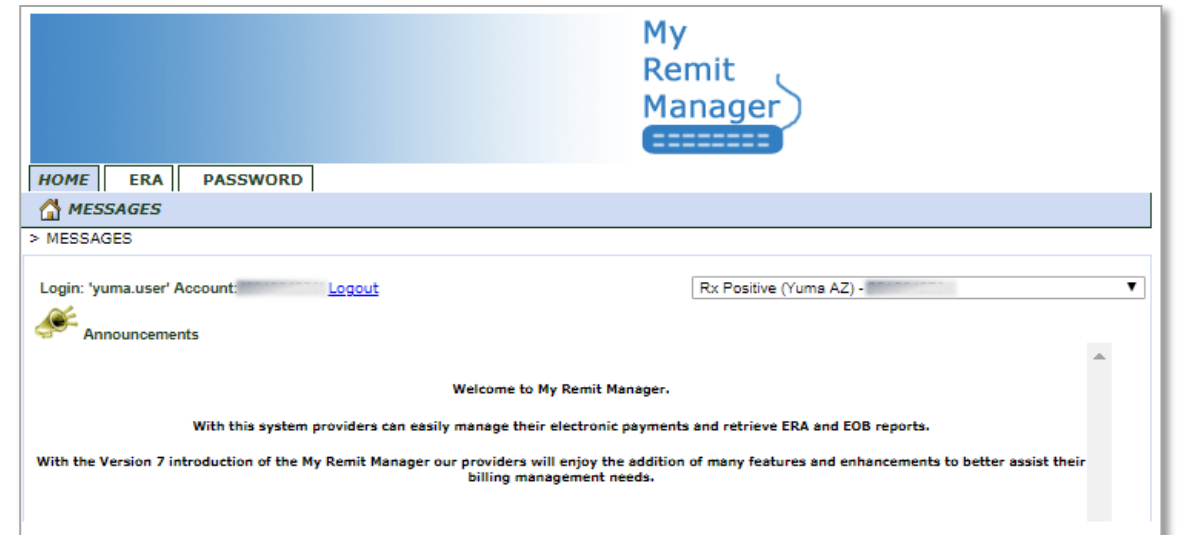
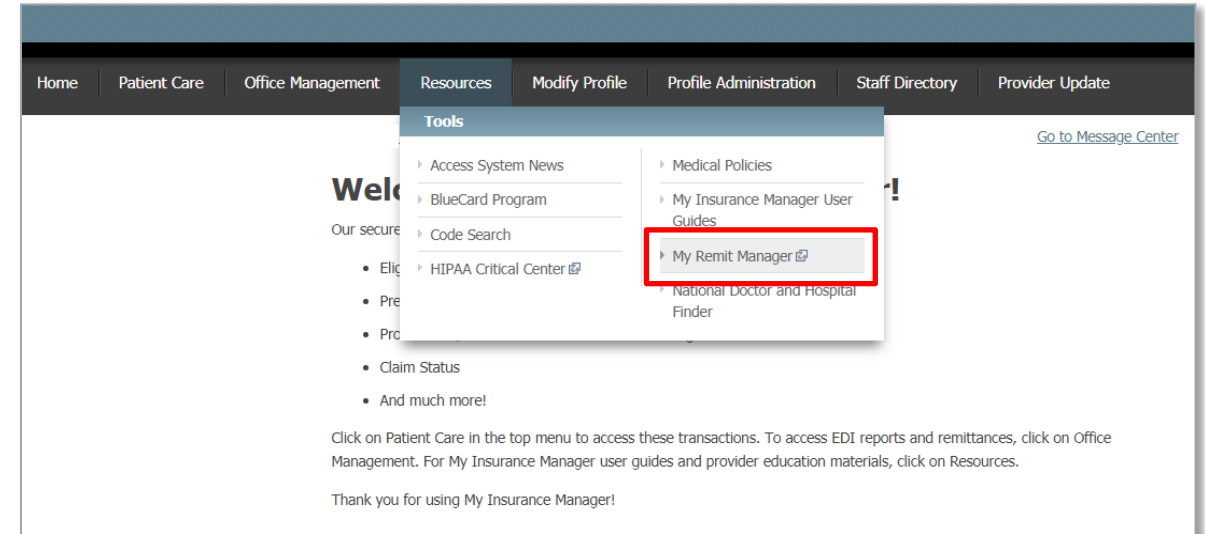
- View electronic remittance advices
- View information categorized by check number or patient
- Print individual remittances by patient or group

Not an enrolled provider with Healthy Blue? Begin the [enrollment process](#) today.

My Remit Manager

Options include:

- Sort and view checks by the check date or posting date
- Select the Adobe icon to view the Remit
- Select the check number to view
 - Members associated with the check
 - Date of service
 - Processed status (paid or denied)
 - Amount billed and paid



Authorizations

Authorizations — Medical Services

Healthy Blue requires prior authorization for certain procedures and durable medical equipment. This process allows us to check ahead of time whether services meet criteria for coverage by a member's health plan.

Methods:

- Call Provider Service at 866-757-8286.
- Use My Insurance Manager.
- Use the [Medical Forms Resource Center](#).

Authorizations — Behavioral Health Services

Healthy Blue requires prior authorization for certain mental health and substance use disorders.

Methods:

- Call Companion Benefit Alternatives at 800-868-1032.
- Fax to 803-870-6506.
- Use My Insurance Manager.
- Use the [Forms Resource Center](#).

Claim Submissions

Claim Submissions

Timely filing for both electronic and paper claims submission is 365 days for original and corrected claims.

To submit claims, you can:

- Use My Insurance ManagerSM.
- Submit through your clearinghouse.
- Submit hard copy by mail to:

Healthy Blue

P.O. Box 100317

Columbia, SC 29202-3317.

Reminder: The payer ID for Healthy Blue is 00403.

Provider Disputes

Provider Disputes

Must be submitted within 90 calendar days of the date of the Explanation of Payment.

Common reasons for submitting a provider dispute includes but not limited to:

- Contractual payment issues
- Disagreements over reduced or zero-paid claims
- Post-service authorization issues
- Other health insurance denial issues
- Timely filing issues

Provider Disputes

Healthy Blue requires the following information when submitting a provider dispute:

- Your name, address, phone number, email, and either your NPI or TIN
- The member's name and Healthy Blue Medicaid ID number
- A listing of disputed claims, including the Healthy Blue claim number and the date(s) of service(s)
- All supporting statements and documentation

Submitting Provider Disputes

Options include:

- Email: ProviderService@HealthyBlueSC.com
- Call: Provider Service at 866-757-8286
- Mail: Healthy Blue
Provider Dispute Unit
Mail Code: AX-570
P.O. Box 100317
Columbia, SC 29202-3317
- Visit: In person at:
Healthy Blue
4101 Percival Road
Columbia, SC 29229

Providers>Claims>Provider Disputes

Contacts and Resources

Provider Service

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

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

Website: www.vsp.com

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

Evolent*

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.*

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

Novologix – Prior Authorizations

Phone: 844-345-2803

Fax: 866-494-9927

Hours: Monday- Friday 9 a.m. to 7 p.m. EST

Avalon Healthcare Solutions

Phone: 844-227-5769

Fax: 813-751-3760

Website: [PAS Portal](#)

BlueBlast

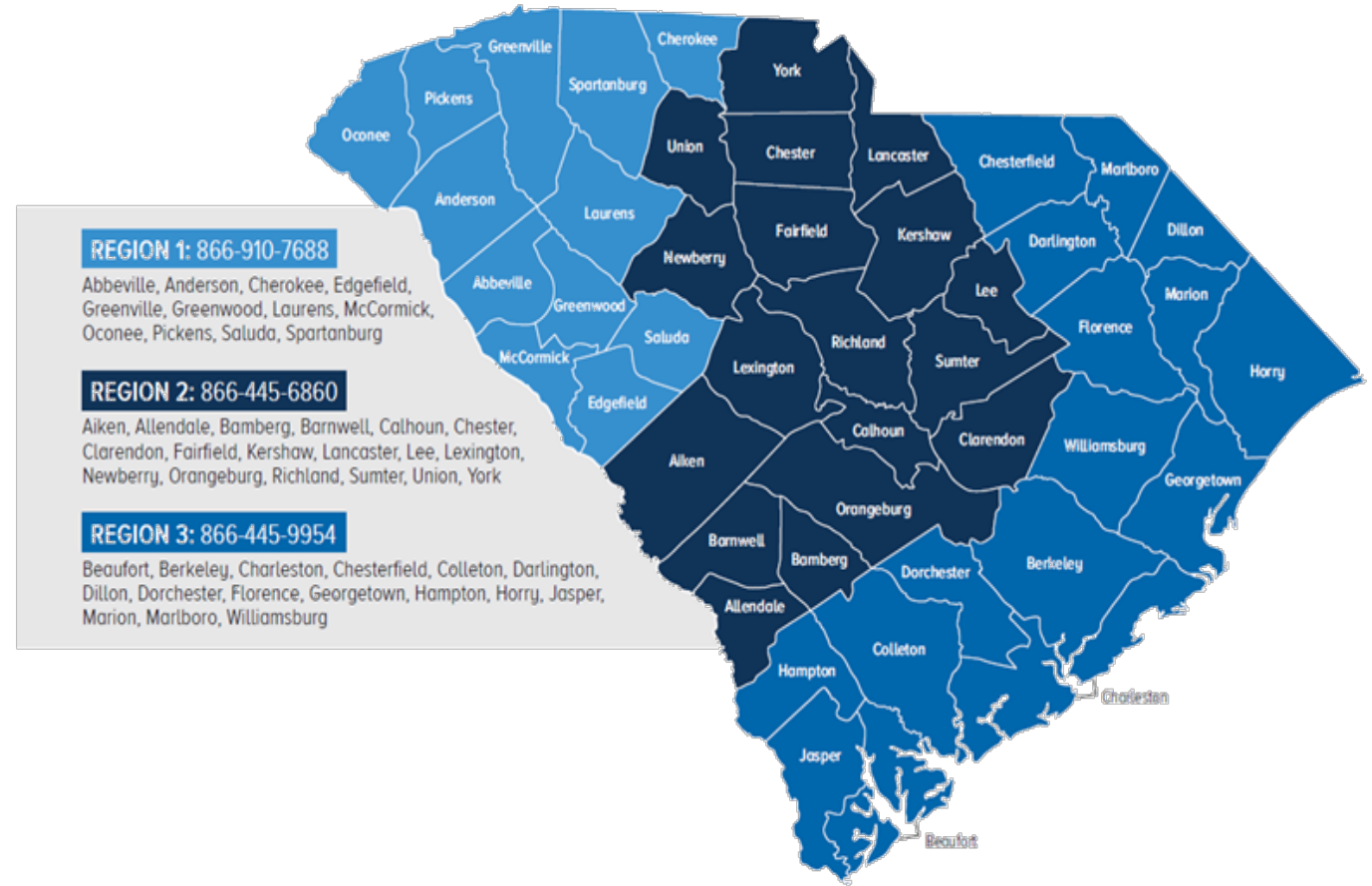
A monthly newsletter that includes:

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



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.

Healthy Blue 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.*

Example of a Benefit Manual

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](#)
- [Managed Care Supplement](#)

[Autism Spectrum Disorder \(ASD\) Services Manual](#)
[Ambulance Services Provider Manual](#)
[Clinic Services Manual](#)



PROVIDER ADMINISTRATIVE AND BILLING MANUAL

APRIL 29, 2024

South Carolina Department of Health and Human Services

Verifying 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.

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Example of Fee Schedule

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 +

Behavioral Health Fee Schedules +

PROVIDERS

Manuals +

Fee Schedules

Provider Enrollment +

Managed Care

Revalidation

Trainings

Contact a Provider Representative

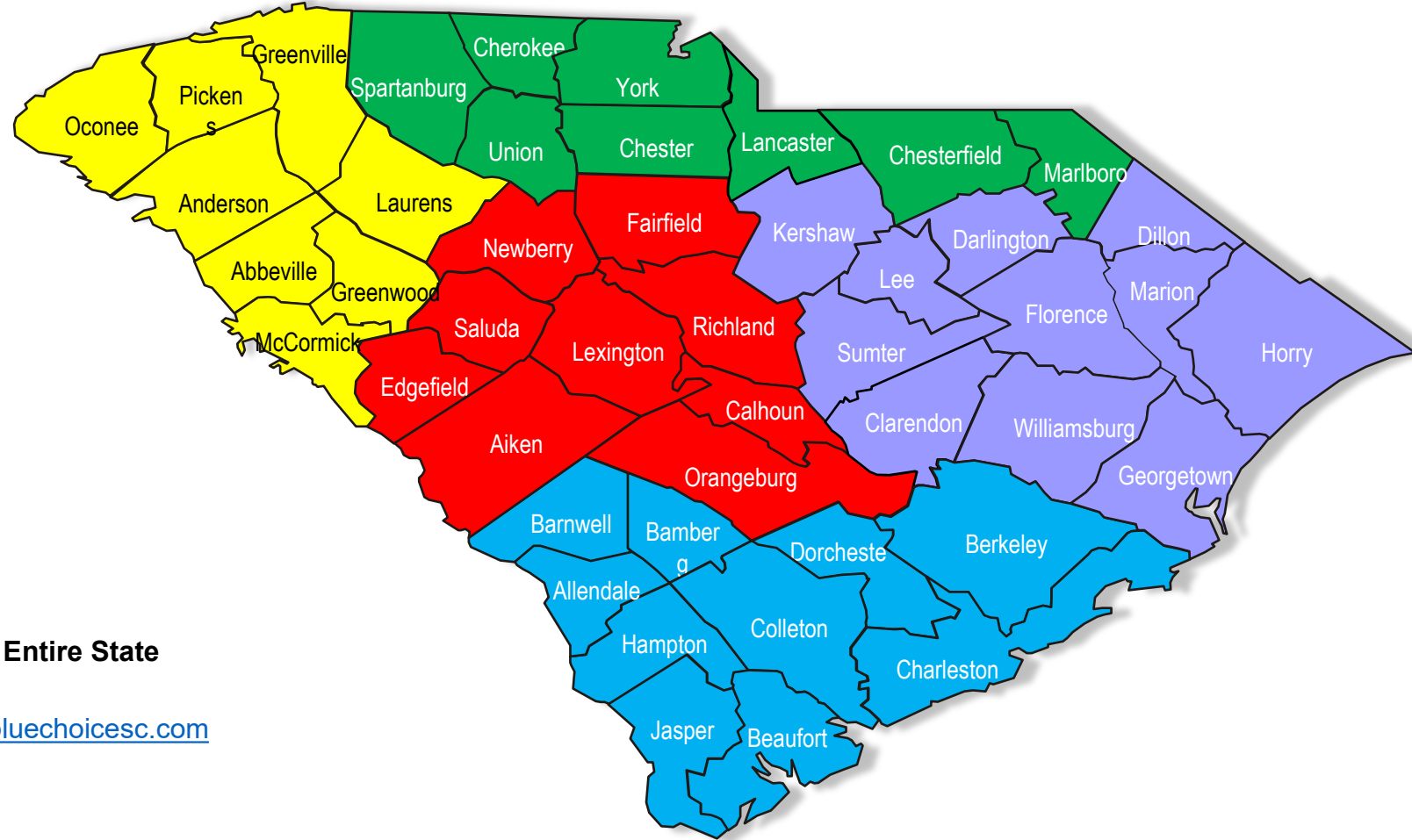
Provider Appeals

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	OUTPATIENT HOSPITAL FEE SCHEDULE					
3	SCHEDULE CREATION DATE 5/1/2024					
4	M - MANUALLY PRICED PROCEDURE					
5						
6	PROC	MOD	PAYMENT	FACILITY		
7			RATE	RATE		
8	A2001	0	\$984.00	\$0.00	1/1/2023	
9	A2002	0	\$192.31	\$0.00	#####	
10	A2004	0	\$12.79	\$0.00	1/1/2023	
11	A2013	0	\$919.22	\$0.00	1/1/2023	
12	A2014	0	\$5.85	\$0.00	#####	
13	A2022	0	\$1,033.20	\$0.00	4/1/2024	
14	A2023	0	\$0.00	\$0.00	#####	
15	A2025	0	\$205.00	\$0.00	1/1/2024	
16	A4264	FP	\$1,674.00	\$0.00	7/1/2012	
17	A4264	0	\$1,674.00	\$0.00	7/1/2012	
18	A9513	0	\$0.01	\$0.01	1/1/2022	
19	A9552	0	\$250.00	\$0.00	2/1/2007	
20	A9573	0	\$10.87	\$0.00	#####	
21	A9575	0	\$0.58	\$0.00	1/1/2017	
22	A9585	0	\$0.01	\$0.00	1/1/2021	
23	A9592	0	\$947.10	\$0.00	#####	
24	A9595	0	\$571.00	\$0.00	4/1/2024	

Healthy Blue Territory Map



Inga Rearden
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Michaelyn Jefferson
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Patricia Thompson
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(803) 264-5311

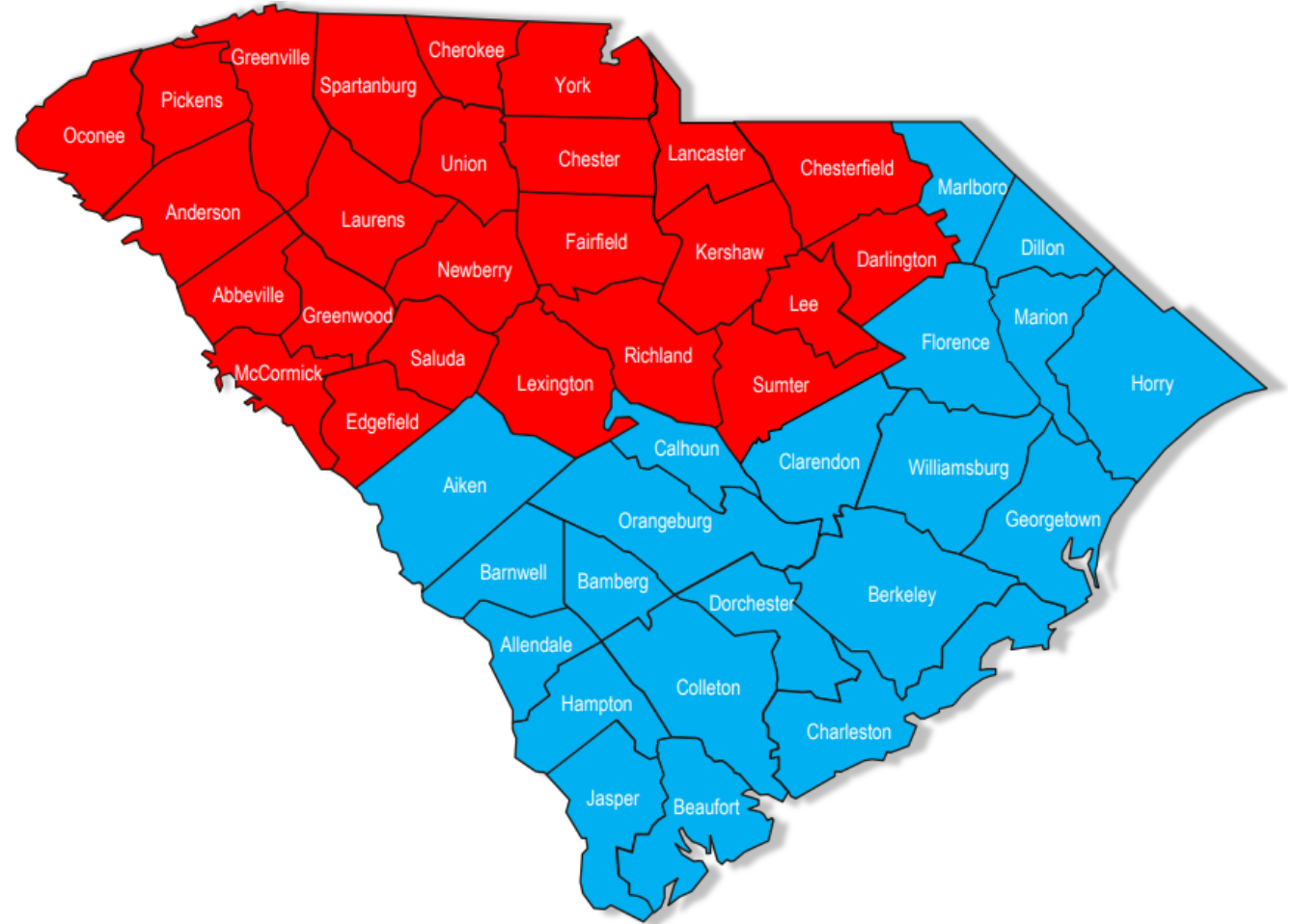
Jessica Ballard
Jessica.Ballard@bcbssc.com
(803) 382-5154

Cynthia Brown
Cynthia.Brown@bcbssc.com
(803) 264-8497

**Fancy Crayton – Entire State
CIMS/FQHCs**
Fancy.Crayton@bluechoicesc.com
(803) 264-3196

Providers>Resources>Contact Us

Behavioral Territory Map




Romona Williams
Romona.Williams@bcbssc.com
(803) 382-5282


Bridgette Honor
Bridgette.Honor@bcbssc.com
(803) 264-5585


Providers>Resources>Contact Us


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

Customer Service: 866-781-5094 (TTY: 866-773-9634) Monday – Friday from 8 a.m. – 6 p.m.
24-Hour Nurseline: 800-830-1525 (TTY: 711)

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