

# Web Tool Times



Up-to-date information about the South Carolina Medicaid Web-based Claims Submission Tool

Volume 1, Issue 2

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## Let's Talk About... **ELIGIBILITY**

The South Carolina Medicaid Web-based Claims Submission Tool (SCMWBCST) can be used to retrieve accurate eligibility information from the Medicaid Eligibility Verification System (MEVS). To verify eligibility, log in to the Web Tool with your Medicaid Provider ID and password, and select Eligibility from the Main Menu; the Eligibility Verification Screen will appear. Search by entering a SC Medicaid ID, a Social Security number, or a combination of name and date of birth; then, click the Submit button. Eligibility information returned to you will include recipient (subscriber) data, benefit information, recipient special programs data and third party liability. Once you have verified eligibility for a recipient, you can add this information to your Recipient List by clicking the Add Recipient List button. Please refer to pages 2 and 3 in this issue for screen explanations.

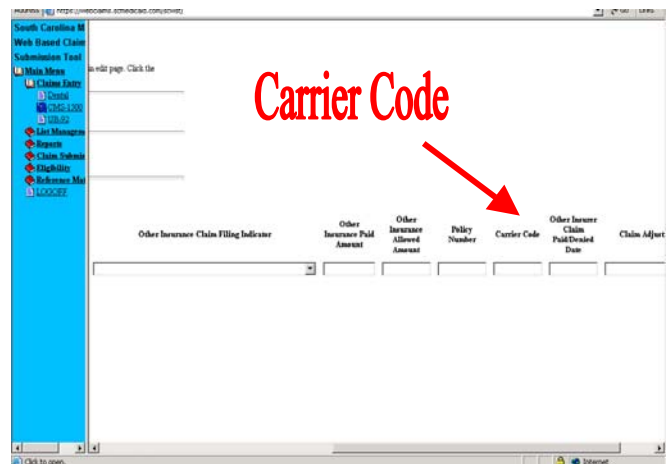
If you have questions about how to check eligibility using the Web Tool, consult the User Guide; or, call South Carolina Medicaid HIPAA Provider Outreach at 1-888-289-0709. If you have questions concerning the information returned to you, please contact your program area.

## Insurance Carrier Codes

You must include a Carrier Code on the Insurance Detail screen if the claim you are submitting on the Web Tool includes other insurance carrier information. You may not, however, file the same Carrier Code more than once on the same claim. If you file multiple lines of the same Carrier Code, you will receive an edit code on your Edit Correction Form (ECF) indicating that you have filed with inconsistent Carrier Codes.

If the other insurance carrier's Explanation of Benefits has multiple lines of paid amounts, add the amounts together and submit the total on only one Insurance Detail line. The system will distribute the Other Insurance Paid Amount over the entire claim.

Remember, you can file up to 10 **different** Carrier Codes on the same claim.



Please note that Medicare has multiple Carrier Codes. Although these codes are not the same, they are all considered Medicare. File only one of these codes per claim.

Medicare Carrier Codes:

- |                       |                                  |
|-----------------------|----------------------------------|
| 618 - Medicare Part A | 643 - BCBS of TN                 |
| 620 - Medicare Part B | 644 - BCBS GA                    |
| 635 - Mutual of Omaha | 645 - Sterling Medicare + Choice |
| 636 - Mutual of Omaha | 646 - Cigna Medicare             |

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# Let's Look At...

## Verifying Eligibility using the SCMWBCST

<b>Eligibility Verification Results</b>			
<b>Selection Criteria</b>			
<b>Date of Service:</b>	12232003	<b>Provider ID:</b>	test01
<b>SC Medicaid ID:</b>	1234567890	<b>SSN:</b>	
<b>Recipient First Name:</b>		<b>Recipient Middle Initial:</b>	
		<b>Recipient Last Name:</b>	
		<b>Birthdate:</b>	
<b>Recipient Eligibility Information</b>			
<b>Subscriber Data</b>			
<b>Recipient Name:</b>	JAMIE T KIRK		
<b>Address1:</b>	1146 MAIN STREET		
<b>Address2:</b>			
<b>City/State/Zip:</b>	ANYTOWN, SC 29000		
<b>Recipient Medicaid ID Number:</b>	1234567890	<b>SSN:</b>	987654123
<b>Family Number:</b>	70225252	<b>Gender:</b>	F
<b>Birthdate:</b>	07/19/1979	<b>DOS:</b>	12/23/2003
<b>Eligibility or Benefit Information</b>			
<b>Subscriber is:</b>	ELIGIBLE		
<b>Payment Category:</b>	PCAT: 87, PREGNANT WOMEN		
<b>Qualification Category:</b>	QCAT: 30, AFDC AND AFDC RELATED GROUPS		
<b>Qualified Medicare Beneficiary:</b>			

This is the search criteria entered.

Recipient Data includes Name, Address, Medicaid ID, SSN, Family Number, Gender and Date of Birth.

Eligibility Information indicates if the recipient is eligible for Medicaid services, the payment category (what services Medicaid will cover), the qualification category (how the recipient is Medicaid eligible) and if the recipient is a Qualified Medicare Beneficiary.

# Let's Look At...

## Reading the Eligibility Page

**Home visits remaining:** 75  
**Chiropractic visits remaining:** 12  
**Ambulatory visits remaining:** 12

**Eligibility Information also contains the number of remaining Home Visits, Chiropractic Visits and Ambulatory Visits.**

**Recipient Special Programs Data**

-- RSP Info----

**RSP Code:** MCPP  
**RSP Description:** PHYSICIAN ENHANCED PROGRAM  
**RSP Message:** NOTE! RECIPIENT(S) WITH A MGD CARE INDICATOR PARTICIPATE IN A MANAGED CARE PLAN.

**Recipient Special Programs indicates any special program (i.e., Hospice and HMO). If the recipient participates in a managed care plan, the primary care provider information is displayed.**

**TPL - Third Party Liability**

**Medicare:**  
**Medicare ID:**  
-----Policy Information-----

**POLICY TYPE:**  
**Policy Number:**  
**Carrier:**  
**Maternity Insured:**  
**Eligibility Date:**  
**Eligibility To:**  
**Policy Holder:**

**Third Party Liability (TPL) information indicates the recipient has other insurance that is primary to Medicaid. If the recipient has Medicare Part A and/or Part B, it will be indicated and their Medicare ID will be listed.**



**Have You Heard?**

# What's New...



## **CMS-1500, Dental, UB-92 -**

### ***Rendering/ Attending Provider Data***

Rendering/Attending Provider Data is not required for all provider types on **paper** claim submission; however, this data is required in order to save claim information on the SCMWBCST in HIPAA compliant format. You must enter information in Rendering/Attending First Name, Rendering/Attending Last Name and Rendering Attending ID. Providers who do not have a Rendering/Attending ID should enter their SC Medicaid Provider ID.

## **CMS-1500, UB-92, Dental -**

### **76 Modifier – Same Procedure, Day and Recipient**

Do you perform the same procedure more than once in a day for the same recipient? To file claims for these procedures, simply use the 76 modifier on the detail line. The 76 modifier indicates to SCDHHS that you have performed the same procedure on the same day for the same recipient.

Please note: some program areas are not allowed to bill for the same procedure on the same day for the same recipient. Please contact your specific program area for further details on the use of the 76 modifier.

## **CMS-1500, UB-92 -**

### **Diagnosis Code – Do Not Key Decimals**

The Principal and Additional Diagnosis Code fields have a 5-character limit. If you key a decimal point into the diagnosis code fields, it will take up one of the five character spaces. To ensure that your claims are processed correctly, **do not key decimal points into the diagnosis code fields.**

For example: Code 123.45 is 6 characters long, including the decimal point. If you key the decimal point, your claim will process with a diagnosis code of 123.4. To correctly enter the diagnosis code of 123.45, key 12345, with no decimal.

### ***Change Control pages***

The South Carolina Medicaid Web-Based Claims Submission Tool User Guide and Claim Addenda now have Change Control pages located at the end of each document. As additions or updates are made to the SCMWBCST, we will update the User Guide and Addenda and record our changes to the documents on the Change Control pages. When you receive an announcement that we have updated the guides, you can refer to the Change Control pages to review the new information.

### ***Viewlets are now available.***

Viewlets are self-paced online lessons about SCMWBCST Basics, Using Lists, Claims, Claim Submission, and Eligibility. To access the viewlets, click on Reference Materials from the Main Menu task bar, and then click the self-paced training icon. This training option is intended for Web Tool users who have already attended a Web Tool training session and who are familiar with the log in process and use of the navigation window.

## **CMS-1500, UB-92, Dental -**

### **Use Control F when searching in a list.**

Are you having difficulty negotiating long lists such as ones for Recipient, Insured or Diagnosis? You can now search any field within a pop-up window in List Management by using both the CTRL and F keys on your keyboard!

Once you access the desired list (for example, Recipient List), press Control and F; a window will appear. Type in the information you need to find and click Find Next; any topics that match your search will display. Once you have completed your search, click Cancel to close the search window. The list will then display your search selection.

## Web Tool Workshops

South Carolina Medicaid is offering Web Tool workshops in Columbia, South Carolina for providers who have not yet had the chance to attend or who would like a refresher course.

Please register online at [www.scdhhshipaa.org](http://www.scdhhshipaa.org) or call the toll-free number for South Carolina Medicaid HIPAA Provider Outreach at 1-888-289-0709.

### January 16, 2004

9:00am - 12:00pm Dental

1:00pm - 4:30pm CMS 1500/ UB-92

### February 20, 2004

9:00am - 12:00pm Dental

1:00pm - 4:30pm CMS 1500/ UB-92

## Web Tool Requirements

To use the SCMWBCST you must have:

- Current Internet Connection
- Microsoft Internet Explorer (5.0)
- 128-bit encryption
- Executed Trading Partner Agreement

## Frequently Asked Questions

### **Can I use AOL for the Web?**

*When using AOL as your Internet Service Provider (ISP), you must connect and minimize AOL. Then, open Internet Explorer from the desktop or icon bar.*

### **I have AOL and I'm having difficulty viewing update screens.**

*To avoid this, you should periodically delete your Temporary Internet files. To delete these files, open your web browser, choose Tools and the Internet Options. Under the General tab, click the Delete Files icon. You may need to reboot your system after performing these steps.*

### **What information do I need to complete the contact information for claims submission?**

*You will need to provide the name of the person submitting the batch, the preferred business mailing address, and the telephone number including area code.*

### **Who do I contact for claim status?**

*Your contact for claim status has not changed. If you have previously been able to obtain this information from your program area managers, you should continue to contact them. Claim status is not available from South Carolina Medicaid HIPAA Provider Outreach.*

## **Contact Us - Please notify us if there are any changes in your address, telephone number, or email address. Be sure to include your SC Medicaid Provider ID number.**

South Carolina Medicaid HIPAA Provider Outreach  
P.O. Box 17  
Columbia, SC 29202  
Phone Number: 1-888-289-0709  
Fax Number: 803-264-9630

Visit our Web site at:

[www.scdhhshipaa.org](http://www.scdhhshipaa.org)

You may contact us via e-mail at:

[Info@scdhhshipaa.org](mailto:Info@scdhhshipaa.org)

SCMWBCST is a free online web-based application offered by South Carolina Medicaid for claims submission and eligibility requests. For help with web claims, please call 1-888-289-0709, or email us at [Info@scdhhshipaa.org](mailto:Info@scdhhshipaa.org).