

## PROVIDER MANUAL SUPPLEMENT

### MANAGED CARE

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## MANAGED CARE SUPPLEMENT

### INTRODUCTION

The South Carolina Department of Health and Human Services (SCDHHS) offers eligible beneficiaries the option to enroll in a Managed Care program for health care services. Under the program, Medicaid services are administered by contracted Managed Care Organizations (MCOs) and Medical Homes Networks (MHNs). Services may vary from plan to plan according to the contracted terms and conditions between SCDHHS and the managed care contractor. Managed Care Organizations and Medical Home Networks may offer additional services, such as unlimited visits, suspension of copayment requirements or adult vision benefits. Providers should contact the MCO or the MHN directly for prior authorization (PA) requirements before administering services to Medicaid-eligible beneficiaries. Providers should also check Medicaid eligibility and MCO/MHN membership prior to each authorization or delivery of services. Additional information about South Carolina Medicaid Managed Care plans is available on the SCDHHS Web site, [www.scdhhs.gov](http://www.scdhhs.gov).

This supplement provides contact information for MCOs and MHNs currently participating in the South Carolina Medicaid Managed Care program. Managed Care MCOs and MHNs are subject to change at any time. Providers are encouraged to visit the SCDHHS Web site for the most current listing of participants and the counties in which they are authorized to operate. New participants and their contact information will be added to supplement on a monthly basis.

### CURRENT MEDICAID MEDICAL HOMES NETWORKS (MHNs)

The following MHNs are participants in the South Carolina Medicaid Managed Care program. MHN members should present their South Carolina Partners for Health Medicaid Insurance card in order to receive health care services. No additional card is necessary. In most cases, referrals to specialty care providers, from a primary care physician (PCP), do require prior authorization and a PA number from the PCP.

#### Palmetto Medical Homes Local Network

2007 Cherry Hill Lane

Charleston, SC 29405

(843) 266-8281

[www.palmettomhn.com](http://www.palmettomhn.com)

#### South Carolina Solutions

132 Westpark Blvd

Columbia, SC 29210

(803) 612-4120 or (866) 793-0006

(803) 612-4152 or (888) 893-0018

[www.sc-solutions.org](http://www.sc-solutions.org)

## MANAGED CARE SUPPLEMENT

### CURRENT MEDICAID MANAGED CARE ORGANIZATIONS (MCOs)

South Carolina Medicaid Managed Care Organizations (MCOs) are required to issue a plan identification card to members. Beneficiaries should present both the MCO-issued identification card and the Partners for Health Medicaid Insurance card in order to obtain services. MCO cards contain important information on the beneficiary (name, plan number), the MCO (toll free contact numbers), and the primary care physician (PCP).

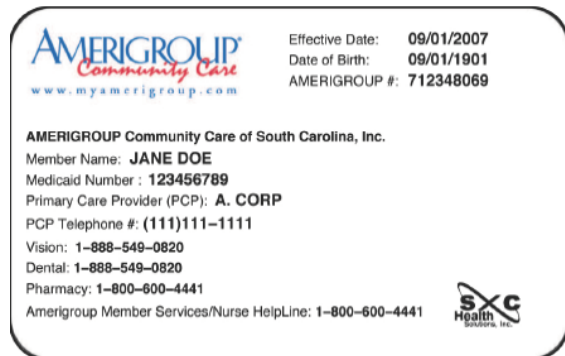
The following card samples are used by Medicaid MCOs who are currently authorized to operate in South Carolina. Not all MCOs are authorized to operate in every county of the state. Please consult the SCDHHS Web site at [www.scdhhs.gov](http://www.scdhhs.gov) or call the SCDHHS Division of Care Management at (803) 898-4614 for the current list of authorized plans and counties.

#### AMERIGROUP Community Care

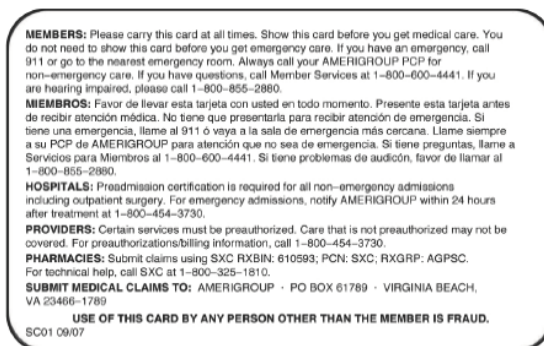
Amerigroup Corporation

(888) 821-1108

[www.myamerigroup.com](http://www.myamerigroup.com)




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## MANAGED CARE SUPPLEMENT

Carolina Crescent Health Plan, Inc.  
Virginia Commonwealth University Health System  
(866) 748-8661  
[www.CarolinaCHP.com](http://www.CarolinaCHP.com)




**Welby, Marcus, MD**  
4201 Riverview Drive  
Lexington, S.C. 29072  
803-799-1234

POWERED BY  
**ARUBA**

Name: Doe, Jane C.  
DOB: 06/25/78 F  
ID#: 001033756000  
Effective: 10/01/02

PCP \$0 SPC \$0 RX \$0

CAID/MC/08/06



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**Members:**

- 1 If medical assistance is needed when your doctor's office is closed, please call:  
Nurse Line Number 800-504-3402
- 2 Do not let anyone else use this card. Call to report a lost or stolen card.  
If you lose your eligibility for health benefits, this card is no longer valid.
- 3 If you have questions or need a ride to your doctor's appointment, call the Member Services Department Monday - Friday, 8:00a.m. - 5:00p.m. at 866-748-8661.

**Providers:** For Authorizations, please contact our UM Department at 866-748-8661  
If you have questions about pharmacy/prescriptions, please call PerformRx at 888-354-0796. The electronic transaction routing information is:

RxBin 000600428 PCN# 0499

**MCO Claims Address:**  
Carolina Crescent Health Plan Inc. P.O. Box 11277, Columbia, S.C. 29211

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CHCcares of South Carolina  
Coventry Health Care, Inc.  
(866) 802-2474  
[www.chcsouthcarolina.com](http://www.chcsouthcarolina.com)



140 Stoneridge Drive, Suite 200  
Columbia, SC 29210 ■ 1.866.802.2474

**Membership Card**

**Member Name: Jane A. Doe**  
CHCcares #: 123456789  
Primary Care Provider: XYZ and associates  
PCP Phone: (800) 123.4567  
Co-pays: ER \$0, PCP \$0, Specialists \$0, Inp. \$0  
CHCcares of South Carolina brought to you by Wellpath of South Carolina, Inc.



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**NOTICE TO MEMBERS:**

1. Show this card each time you seek medical care.
2. All routine health care must be provided by or authorized by your Primary Care Provider (PCP).
3. **IN CASE OF EMERGENCY:** If the emergency is so urgent that it could cause loss of life, limb or senses, get care immediately at the nearest emergency room or CALL 911. Notify CHCcares within 24 hours or as soon as medically possible.

**IMPORTANT NUMBERS**  
Member Services (questions or problems): 1.866.802.2474  
24 Hour Medical Hotline (medical questions or emergencies): 1.866.802.2474  
S.C. Beneficiary Services Helpline: 888.549.0820 [www.cvtv.com](http://www.cvtv.com)

**NOTICE TO PROVIDERS**  
Provider Services: 1.866.802.2477  
Authorization: 1.866.802.2475  
Pharmacy Help Desk: 1.800.378.7040

Hearing Impaired: 1.866.896.3565  
Payor ID: 25151  
Claims submission address:  
P.O. Box 7158  
London, KY 40742

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## MANAGED CARE SUPPLEMENT

First Choice of South Carolina  
 Select Health of South Carolina, Inc.  
 (888) 276-2020  
[www.selecthealthofsc.com](http://www.selecthealthofsc.com)



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**Members:** 764-1877 in Charleston area or 1-888-276-2020 statewide. Call the Nurse Help line anytime day or night with your health questions - 1-800-304-5436. Always carry your ID card and your Medicaid card. Always make sure your doctor is a First Choice provider. Go to an emergency room near you when you believe your medical condition may be an emergency. For all other non-emergency situations, call your primary care provider or our Member Services department.

**Providers:** 764-1988 in Charleston area or 1-888-559-1010 statewide. This card does not guarantee coverage or payment. Verify plan eligibility by calling First Choice, checking the web site listed on the front of this card, or using the Medicaid eligibility system. Except for emergency care, some medical services require prior authorization. For admissions following emergency treatment, secure prior authorization within one business day following admission. Mail claims to: P.O. Box 7120, London, KY 40742.

Family planning services are not covered by First Choice, but are covered by Medicaid. Certain behavioral health and substance abuse initial assessment services are covered by First Choice and do not require prior authorization. Submit claims to Medicaid for all family planning and other mental health, alcohol and other drug (MH/AOD) abuse treatment services.

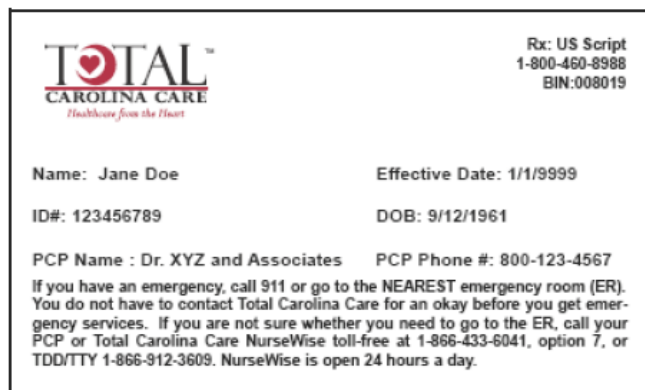
**Pharmacy Prior Auth #:** 1-866-610-2773  
**Pharmacy Claims Issues:** 1-800-522-7487

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**ARGUS**<sup>SM</sup>

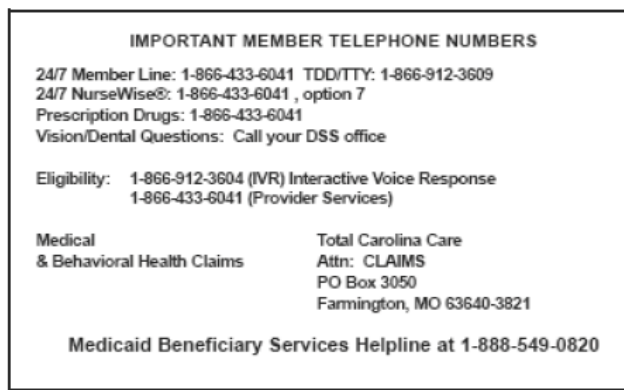
Part of the AmeriHealth Mercy family of companies. A healthcare ministry of the Sisters of Mercy.

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Total Carolina Care, Inc.  
 Centene Corporation  
 (866) 433-6041  
[www.totalcarolinacare.com](http://www.totalcarolinacare.com)



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**MANAGED CARE SUPPLEMENT****Unison Health Plan**

(800) 414-9025

[www.unisonhealthplan.com](http://www.unisonhealthplan.com)

Unison HEALTH PLAN <small>a product of Three Rivers Health Group</small>	
<b>Jane Doe</b> <b>ID #123456789</b>	
DOB: 12-9-62	RX Group: BSC19999
Dr: Dr. B. Well	RX BIN #: 610415
Dr ID#: 123456	Eff Date: 11-01-04
Ph#: 800-414-9025	Providers: To submit EDI, call 800-600-9007
Gp: B. Well & Associates	Web MD#: 25175
<b>Member Services</b> 1-800-414-9025 or TTY 1-888-616-0021 24 hours a day, 7 days a week	
CAREMARK	SCMA

Unison HEALTH PLAN <small>a product of Three Rivers Health Group</small>	
<a href="http://www.unisonhealthplan.com">www.unisonhealthplan.com</a>	
<ul style="list-style-type: none"><li>For fast and easy service, carry this card at all times. This is your Unison Health Plan ID card.</li><li>Go to your Unison Health Plan Primary Care Physician (PCP) before you go to a specialist.</li><li>In case of emergency, go to the nearest emergency room. Contact your PCP as soon as possible.</li><li>For Provider only: Utilization Management (800) 366-7366, Pharmacy (877) 651-2217</li></ul>	<ul style="list-style-type: none"><li>By using this card to obtain services, you consent to the release of medical information as stated in the Member Handbook.</li><li>This card is for identification only and is non-transferable. It does not automatically guarantee eligibility for benefits or create any legal obligations.</li></ul>

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