

Select News

Fall 2024

This newsletter can also be viewed on the [Provider Newsletters and Updates](#) page on our website at www.selecthealthofsc.com. You can [sign up](#) there to receive our monthly newsletter via email.

Welcome to fall!

As the weather cools and the season changes, I want to take a moment to thank each of you for your unwavering dedication to providing exceptional care to our First Choice members, especially during the recent hurricanes. Your resilience in the face of adversity has been nothing short of extraordinary, and we are immensely grateful for your commitment to our shared mission. We are incredibly grateful for the care and support you provide not just during these trying times but always.

With the arrival of fall also comes flu season, and we are committed to encouraging our members to have access to the flu vaccine and get vaccinated. We know that the flu can be especially hard on vulnerable populations, and with your partnership, we can make sure that as many members as possible are protected. We recently encouraged our members to get vaccinated by offering them tickets to the South Carolina State Fair and the Carolina Coast Fair. Please continue to encourage flu vaccinations at your practice to help our members avoid complications and remain well this season. If your team has ideas to support this, please reach out to us!

Thank you for your ongoing commitment to our shared mission of improving the health of South Carolinians. We are grateful for your partnership and the work you do. Together, we will continue to provide high-quality care, even in the face of changing seasons and unexpected challenges.



Courtney Thompson, Market President

Medicaid Eligibility Renewals Continue - Reach Out to Ensure Continued Eligibility

Medicaid enrollees must complete an annual review to process each year to verify their continued eligibility for healthcare benefits. This annual review is essential to retaining access to the healthcare benefits they depend on. We regularly reach out to our members to ensure they complete this form. We encourage you to proactively reach out to your Medicaid patients before they come in for a visit to be sure they are up to date on the annual review.

By working together to keep your patients Medicaid-enrolled, we can avoid lapses in their coverage and ensure a seamless continuity of care. Our provider network [account executive](#) team is happy to partner with you on messaging that can help encourage members to complete the annual review. We're committed to collaborating with you to safeguard your patients' healthcare access and maintain the high-quality care they deserve, even during transition periods. Let's continue to prioritize this important task and set our Medicaid members up for success.

Ways to Help Your Communities with Hurricane Relief

[The South Carolina Office of Resilience](#) has a wide array of Recovery Resources for those impacted by Hurricane Helene.

Quality Corner

Kidney Health Evaluation for Patients with Diabetes

According to the CDC, diabetes is the leading cause of chronic kidney disease (CKD). To support the care of our members with diabetes, emphasis should be given to the importance of kidney health evaluation to include *both*.

1. a blood test for kidney function – estimated glomerular filtration rate (eGFR) *and*
2. a urine test for kidney damage - urine albumin-creatinine ratio (uACR) identified by *either* of the following:
 - **Both** a quantitative urine albumin test (Quantitative Urine Albumin Lab Test Value Set) and a urine creatinine test (Urine Creatinine Lab Test Value Set) *with* service dates four days or less apart.
 - A uACR (Urine Albumin Creatinine Ratio Lab Test Value Set).

The following billing codes should be used to ensure your office receives credit for services provided.

| Measure | Measure Description | Measure Information/Documentation Required | Coding |
|---|--|---|--|
| Kidney Evaluation for Patients with Diabetes (KED) | The percentage of members ages 18 – 85 with diabetes (Type 1 and Type 2) who received a kidney health evaluation, defined by an estimated glomerular filtration rate (eGFR) and a urine albumin-creatinine ratio (uACR), during the Measurement Year (MY). | Documentation must include the required tests with result and date of service. Required Exclusions: Members who meet any of the following criteria are excluded from the measure: <ul style="list-style-type: none">• In hospice or using hospice services any time in the Measurement Year (MY).• Deceased in the MY.• Receiving palliative care any time in the MY.• Evidence of ESRD or dialysis at any time during the member's history through 12/31 of the MY.• 66 years of age and older with frailty and advanced illness during the MY. | All three are required: Estimated Glomerular Filtration Rate Lab Test: CPT: 80047, 80048, 80053, 80069, 82565. Urine Creatinine Lab Test: CPT: 82570 <i>Service dates of Quantitative Urine Albumin Lab Test and Urine Creatinine Lab Test must be four or less days apart.</i> |

| | | | |
|--|--|---|--|
| | | <ul style="list-style-type: none"> • 81 years of age and older with frailty during the MY. • No diagnosis of diabetes in any setting during the MY or the year prior and who had a diagnosis of polycystic ovarian syndrome, gestational diabetes, or steroid-induced diabetes during the MY or the year prior. | <p><i>Note: LOINC and SNOMED codes can be captured through electronic data submissions. Please contact your provider network Account Executive for more information.</i></p> |
|--|--|---|--|

To help your members overcome any barriers to care, medical care management is available at **1-866-899-5406**. There is no charge for this service.

HEDIS reminders

Review your monthly **Healthcare Effectiveness Data and Information Set (HEDIS)** reports available in **NaviNet** <https://navinet.net>. Ask your provider network [account executive](#) about monthly Quality meetings and data exchange.

Refer Select Health members to Care Management

Select Health has nurse Care Managers who help keep our members healthy. We have health programs for asthma, pregnancy, heart problems, diabetes, and more. These programs are offered to members at no cost to them.

We welcome you to refer members for support from our clinical Care Managers. Our Care Managers are registered nurses who assist members with coordinating care and linking to services that best meet their needs.

Benefit Update Reminders

Effective **September 1, 2024**, SCDHHS published consolidated Federally Qualified Health Center (FQHC) and Rural Health Clinic (RHC) Services Provider Manuals. These updated manuals will combine existing policies for covered services, utilization management and billing procedures currently published in the Physicians Services FQHC and RHC Behavioral Health Services Manuals. The new consolidated manuals will provide a cohesive, user-friendly reference for providers.

FQHCs: <https://www.scdhhs.gov/communications/draft-consolidated-federally-qualified-health-center-services-provider-manual>.

RHCs: <https://www.scdhhs.gov/communications/draft-consolidated-rural-health-clinics-services-provider-manual>.

Provider Training Opportunities

Select Health offers quarterly provider training. These trainings are made available for both physical and behavioral health participating providers' office managers, billing representatives, and those involved in claims processing. The dates for 2025 will be posted soon. For details and to register, go to <https://www.selecthealthofsc.com/provider/training/index.aspx>

In need of CME/CEU's?

Free Virtual CME/CEU Training Opportunity on Health Care for People with Intellectual Disabilities

The South Carolina Department of Disabilities and Special Needs (SC DDSN) has partnered with the South Carolina Department of Health and Human Services (SCDHHS), to offer a free training opportunity for Healthy Connections Medicaid providers interested in better understanding the special health care needs of people with intellectual and developmental disabilities (IDD). The training is titled "Curriculum in IDD Healthcare" and is produced by IntellectAbility. The cost of the training is being covered by DDSN. Continuing Medical Education (CME) or Continuing Education Units (CEU) credits through the self-paced training. See [flyer](#) and [register here](#) if interested in taking the course. The training will be available until **June 30, 2026**.

Reducing the Disparities in the Management of Hypertension

Select Health and healthcare industry leaders agree that there cannot be high quality of care without equity. Research shows that African American patients experience a higher prevalence of hypertension when compared to their white counterparts.

We have created a toolkit that outlines culturally responsive best practices when providing care to [African American patients with hypertension](#).

Foster Care: Initial Well-Visits Are Required

When a child enters foster care, they must have an initial well-visit, preferably within 7 days but no longer than 30 days of entering care, as well as at least 2 well-visits per year as determined by age.

| Under 6 months old | 6 months – 24 months | Over 24 months – 21 years old |
|--------------------|----------------------|-------------------------------|
| Monthly | Every 3 months | Every 6 months |

Source: <https://www.aap.org/en/patient-care/foster-care/health-care-standards>

Select Health will cover the well-visit even if the child received one earlier in the year.

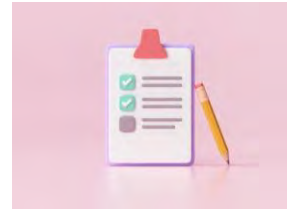
Use CPT 99358 with modifier UA, which is defined as "initial visit with patient in foster care" by SCDHHS. This code should be submitted along with the appropriate E/M or well-visit code for the direct patient care component, which provides reimbursement for the non-direct care activities associated with an initial visit, such as record collection and coordination with various providers and state agencies.

Did you know that if a child comes in for a sick visit and is also due for a well visit, you can combine both visits? Well-child visits on the same day as sick-child visits for members from birth to age 21 can be billed using modifier 25.

Important Reminders:

Provider Satisfaction Survey-Fill out Now!

The second phase of the **Provider Satisfaction Survey** began the week of **November 5th**, and will continue through **December 5th**, via mail, email, or a phone call. Please be on the lookout for the annual confidential, anonymous, **Provider Satisfaction Survey!** We truly value your feedback and review all responses for how we can better work together. We would appreciate it if you or your office staff could take a few minutes to let us know how we are doing and how we can improve. Your insights are incredibly important to us.



Prior authorization – Current Procedural-Terminology (CPT) online lookup tool

You can easily determine if a service requires [prior authorization](#) by using the CPT lookup tool on our website. No need to call – using the CPT lookup tool is as easy as 1-2-3!

1. Enter a CPT/HCPCS code.
2. Click the submit button.
3. The tool will indicate if the service requires prior authorization as of the day queried.

To access the tool, visit the Provider section of the Select Health website:

www.selecthealthofsc.com/provider/resources/prior-authorization-lookup.aspx.

Latest Change Healthcare Update: **275 Claim Attachment transaction is now available!**

Select Health is now accepting ANSI 2010 ASC X12 275 claim attachment transactions (unsolicited) via **Availity**.

Please contact your Practice Management System Vendor or EDI clearinghouse to inform them that you wish to initiate electronic 275 claim attachment transaction submissions for payer ID: **23285**.

A maximum of ten attachments are allowed per submission. Each attachment cannot exceed 10 megabytes (MB) and total file size cannot exceed 100MB. The acceptable supported formats are pdf, tif, tiff, jpeg, jpg, png, docx, rtf, doc, and txt. There are two ways 275 claim attachment transactions can be submitted:

- **Batch** — You may either connect to Availity directly or submit via your EDI clearing house.
- **Portal** — Individual providers may also register at: <https://www.availity.com/Essentials-Portal-Registration> to submit attachments.

If you have questions, please contact Availity Client Services at **1-800-AVAILITY (282-4548)**. Assistance is available Monday through Friday from 8 A.M. to 8 P.M. EST.

First Choice Next

On January 1, 2023, Select Health began an Individual and Family Qualified Health Plan offered on the South Carolina Health Insurance Marketplace to serve:

- Our members who are no longer eligible for Medicaid.
- Others who are unable to obtain health insurance through their employer, Medicaid, or Medicare.
- We are currently enhancing our network of hospital, physician, ancillary, and behavioral healthcare providers in select counties, and we want to partner with dedicated providers like you.

First Choice Next counties:

| | | | | | |
|----------|------------|------------|------------|-----------|----------|
| Anderson | Charleston | Dorchester | Greenville | Lancaster | Pickens |
| Berkeley | Chester | Fairfield | Horry | Laurens | Richland |
| Calhoun | Dillon | Georgetown | Kershaw | Marion | |

How to join:

Providers who already participate in our Medicaid plan: To request an amendment to your existing contract, please contact your provider network account executive.

NaviNet Provider Portal

The NaviNet provider portal is a valuable resource to help providers manage administrative functions including checking eligibility, reviewing HEDIS and quality reports, verifying other insurance information, and submitting prior authorization requests.

The NaviNet portal is provided at no cost to Select Health providers. Registration is required. To register, visit *Self-service tools* in the Provider section of the Select Health website at:

www.selecthealthofsc.com/provider/self-service/navinet.aspx.

Providers may report suspected fraud, waste, and abuse to:

Select Health Fraud, Waste, and Abuse Hotline (secure and confidential, available 24 hours a day, seven days a week): **1-866-833-9718**.

Mail: Special Investigations Unit
200 Stevens Drive
Mail Stop 13A
Philadelphia, PA 19113

Select Health Compliance Hotline (secure and confidential, available 24 hours a day, seven days a week): **1- 800-575-0417**

Providers may also report suspected fraud, waste, and abuse to:

South Carolina Division of Program Integrity Fraud and Abuse Hotline:

Phone: **1-888-364-3224**

Fax: **1-803-255-8224**

Email: **fraudres@scdhhs.gov**

Mail: South Carolina Fraud Hotline

Division of Program Integrity

P.O. Box 100210

Columbia, SC 29202-3210

Can you spot the phish?

More than 3.4 billion phishing emails are sent out each day worldwide. But one factor can make life much harder for scammers: **You**. As the first line of defense, it is important that you are able to recognize and report a suspected phishing email.



What is phishing?

Phishing scams often appear legitimate but are designed to steal sensitive information. Emails that look real, but they are designed to steal important information. A phishing email with malicious software can allow cybercriminals to take control of your computer and put protected health information (PHI) and personally identifiable information (PII), as well as your organization's confidential and proprietary information, at risk.

Beware of ransomware

In addition to stealing information, phishing scams can lead to ransomware attacks. Ransomware is a form of malware designed to encrypt files on a device, rendering them unusable until a ransom is paid.

It may be a phishing email if it:

- Promises something of value (e.g., "Win a free gift card!").
- Asks for money or donations.
- Comes from a sender or company you don't recognize.
- Links to a site that is different than the company the sender claims to be from.
- Asks you for personal information, such as your username and password/passphrase.
- Includes misspelled words in the site's URL address or subject line.
- Has a sense of urgency for you to act now.

What you should do

If you receive a suspicious email:

- Do not click any links in the email.
- Do not provide your username and password; you should never share your username or password, even if you recognize the source. Phishing scams frequently mimic well-known companies, such as banks or retailers like Target or Amazon.
- Do not reply/respond to the email or forward it to anyone else within your organization.
- Familiarize yourself with your organization's process for reporting suspicious emails. If you suspect an email is a phishing attempt, report it immediately.
- Your organization's information security department may have additional information and guidance on how to protect yourself from phishing scams.

Visit the Provider section of the Select Health website for more information, news, and resources for providers. If you need assistance regarding this communication or other issues, please contact your provider network [account executive](#) or Select Health's Provider Network Management leadership.