

FREQUENTLY ASKED QUESTIONS

DME POS

GENERAL INFORMATION

1. **Q. How do I register to be a User Administration Console (UAC) user?**
 - A. Go to the First Health website, <http://southcarolina.fhsc.com>, click on “UAC” at the top right section of the screen. Click on the option that begins with “I do NOT have a User ID”. Click “Continue”. Follow the directions on the screen to request a PIN.

2. **Q. Can we file lancets and other DME supplies through the POS system?**

At this time, only diabetic testing meters and strips may be billed through POS. However, the addition of other items may be considered in the future.

3. **Q. Can a provider bill diabetic test strips and meters through the Pharmacy POS system for a beneficiary who is in a Skilled Nursing Facility (SNF)?**
 - A. No. SNFs are responsible for providing these items. However, if a beneficiary is living in a residential group home or assisted living facility, these products should be billed through the Pharmacy POS system.

4. **Q. What do the red asterisks mean on the First Health web claims submission tool?**
 - A. The red asterisks indicate that a particular field or segment is required.

CLAIMS PROCESSING

5. **Q. What BIN#, PCN# and GROUP # should I use for processing diabetic meters and test strips through the Pharmacy POS system?**
 - A. The BIN#, PCN# and GROUP# are the same for DME supplies as they are for Pharmacy claims. The BIN# is 009745. The PCN# is P006009745. The Group is SCMEDICAID.

6. **Q. What are the requirements for assigning a prescription number for DME POS items?**
 - A. Prescription numbers must be assigned on each claim that is processed

through the First Health Services. The number must be assigned by the provider and must be unique for each physician request or certificate of medical necessity. A record should be kept of the prescription numbers assigned on DME products.

7. **Q. I have a pharmacy NPI and a DME NPI. Which should I use when billing for test strips and meters?**
 - A. The provider should use their DME NPI number when billing for diabetic strips and meters.
8. **Q. Who is responsible for making the Prior Authorization (PA) request for a non-preferred DME product being processed through the POS system?**
 - A. The physician must request a PA for a non-preferred DME products by calling the Clinical Call Center, 866-247-1181. PA's will be approved only in unique situations.

COORDINATION OF BENEFITS (COB)

9. **Q. How do we bill diabetic test strips and meters to Medicaid secondarily to Medicare?**
 - A. These claims are billed the same way Pharmacy claims are billed when Medicare Part B is the primary payer. Please see the COB reference guide at: http://southcarolina.fhsc.com/Downloads/provider/SCRx_Reference_Guide_Coordination_of_Benefits.pdf
10. **Q. What is the 5-digit insurance carrier code for Medicare?**
 - A. 90798
11. **Q. If a patient has Medicare as primary insurance, will SC Medicaid allow the DME provider to bypass the PA requirements for non-preferred products?**
 - A. No, SC Medicaid will not allow a DME provider to bypass the PA requirement for non-preferred brands for meters and test strips based on TPL coverage.
12. **Q. If a patient has private insurance, how should the claim be submitted to Medicaid?**
 - A. In a situation where there is a private third party insurance, the provider must bill the primary insurance first and then populate the COB fields.
13. **Q. If a beneficiary has commercial insurance, Medicare, and Medicaid how**

should the claim be filed to Medicaid?

- A. Both Medicare and the private insurance should be billed first. Identify Medicare as the payer on the COB fields (ID number 90798), and then use the total amount of payment received from both insurers as the amount paid.

REIMBURSEMENT

14. Q. How is the pricing determined for for test strips and meters?

- A. Medicaid currently reimburses at 97% of the Medicare payment. With the new system, the reimbursement will be AWP minus 10% (no dispensing fee).