



## Information for Providers

Healthy Connections Choices is a voluntary program of the South Carolina Department of Health and Human Services. It is a program that enrolls Medicaid beneficiaries into managed care organizations (MCO) or medical home networks (MHN) available to them in the county where they live.

### 1. Who can enroll?

Most categories of Medicaid beneficiaries can enroll into the Healthy Connections Choices program. Some beneficiaries, such as those residing in nursing homes, are not able to enroll.

### 2. What is the enrollment process?

The beneficiaries identified for enrollment each month are individuals who are newly eligible for Medicaid or who have completed their annual eligibility redetermination that month. Identified beneficiaries will be mailed either an Enrollment Packet or an Outreach Packet.

Enrollment Packets contain information about the program and available health plans along with an enrollment form. After receiving the Enrollment Packet, the beneficiary will have at least 30 days to voluntarily choose a health plan. The letter in the Enrollment Packet will note the deadline for choosing a health plan or selecting to remain in the Medicaid Fee-for-Service program. If a choice is not made by the deadline, the beneficiary will be assigned into a health plan (a health plan will be chosen for them).

Outreach Packets also contain information about the program, available health plans and an enrollment form but do not require the beneficiary to choose a health plan. A beneficiary who receives an Outreach Packet will not be assigned into a health plan but will remain in Fee-for-Service Medicaid if no health plan choice is made.

It is not necessary for a beneficiary (currently in Fee-For-Service Medicaid) to wait until they get an enrollment or Outreach Packet to join the Healthy Connections Choices program as they can contact the Enrollment Center to enroll at any time.

### 3. Does every member have to enroll in a plan?

No. Enrolling in a health plan is voluntary. However, Medicaid members must choose how they get their health care. A member can enroll in a health plan or choose to stay in Fee-For-Service Medicaid.

### 4. Will the beneficiaries' Medicaid benefits change?

Beneficiaries enrolled in the Healthy Connections Choices program will receive all of the benefits covered by Fee-for-Service Medicaid plus the extra services provided by their

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health plan. Some Medicaid benefits, such as long-term care/nursing facility services after the first 30 days, will continue to be covered outside of the health plan. These benefits are called “carve outs” and will continue to be provided/reimbursed by the current Fee-for-Service Medicaid program.

## 5. Do beneficiaries have to choose the same health plan for all family members?

No, each member of the family can select a plan that is best for them and it doesn't have to be the same plan for the entire family. Every family will be provided with the health plan options available to them based on where they live.

## 6. What if my patients are enrolled into a plan that I don't participate with?

All beneficiaries have the opportunity to select a plan based on the providers they see. If a beneficiary selects a plan that you don't participate with or the beneficiary is assigned into a plan because they didn't make a choice, they have a 90-day period following enrollment when they can change their plan or return to Fee-for-Service Medicaid by simply contacting the Enrollment Center at 1-877-552-4642. After that 90-day period, the beneficiary must request a transfer in writing and have a special reason for the transfer. All transfers after the 90-day period must be reviewed and approved by the SC Department of Health and Human Services.

## 7. How will I know what plan my patients are enrolled in?

The procedure for checking your patient's eligibility is unchanged. Providers may verify a beneficiary's Medicaid eligibility by utilizing a Point of Sale (POS) device, the Medicaid Interactive Voice Response System (IVRS), the South Carolina Web-based Claims Submission Tool, or an eligibility verification vendor. Current Medicaid managed care enrollment information, if any, will be provided as part of the Medicaid eligibility verification process.

## Contacting Healthy Connections Choices

### ➡ *Just for providers:*

- Call the Healthy Connections Choices toll-free provider line: **1-866-682-9919**
- Email our provider support team: **SCProviderSupport@SCchoices.com**

### ➡ *Information and services:*

- Enrollment Center: **1-877-552-4642** (Fax 1-877-552-4672; TTY 1-877-552-4670)
- Outreach Office: **803-667-4333**

### ➡ *Website:* **www.SCchoices.com**