

Provider Manual Change Control Record

Date	Section	Page	Change
01/01/25	Therapeutic foster care (TFC)	29	The Select Health behavioral health benefit also provides coverage of TFC services for Medicaid- eligible children 0 – 21 years of age. Added: SCDSS pre-approval required.
01/01/25	Services provided by Medicaid fee-for-service	88	Added: Collaborative Care Model (CoCM) Effective October 1, 2024, coverage of psychiatric Collaborative Care Model was added. CoCM is a systematic strategy for treating behavioral health conditions in a primary care setting through integration of care coordination and psychiatric consultation.
01/01/25	Services provided by Medicaid fee-for-service	89	Added: Intensive Outpatient Programs Effective October 1, 2024, coverage of intensive outpatient programs (IOPs) and partial hospitalization programs (PHPs), with a psychiatric focus for children and adults was added.
01/01/25	Services provided by Medicaid fee-for-service	89	Updated spelling for diagnosis and bacterial <ul style="list-style-type: none"> Nucleic acid amplification test (NAAT): NAAT is covered for the diagnosis of bacterial vaginosis when performed by qualified lab providers.
1/01/25	Services provided by Medicaid fee-for-service	89	Added: Genetic, Molecular and Biomarker Testing: These tests are used to identify changes or abnormalities in chromosomes, genes, or proteins to confirm or rule out suspected genetic conditions. A genetic test involves an analysis of human chromosomes, deoxyribonucleic acid (DNA), ribonucleic acid (RNA), or gene products to establish a diagnosis of a genetic condition.
02/02/25	No updates		
03/01/25	No updates		

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04/01/25	CLAIM FORMAT	62	<p>Under</p> <ul style="list-style-type: none"> Use valid diagnosis, revenue, and CPT codes. Some health care professionals/providers inadvertently submit invalid codes not recognized by Medicaid. If your contractual agreement with Select Health indicates health care professional/provider specific codes, please use the specific codes indicated in your agreement. <p>ADD new bullets</p> <ul style="list-style-type: none"> In order to prevent unnecessary claim denials, please ensure all services provided by the same practitioner on the same date of service are included on a single claim. When submitting a claim to Select Health, typical providers must use the NPI of the ordering/referring provider and NPI and taxonomy code for each rendering pay-to and billing provider.