

PROVIDERS SHOULD VERIFY ENROLLMENT RECORD REVALIDATION STATUS

3/19/2024

Organizational providers should review the <u>Medicare Revalidation List</u> for potential revalidation requirement of your Centers for Medicare & Medicaid Services (CMS) enrollment record. Currently, this does not apply to individual providers; CMS will advise providers if this changes.

CMS usually posts revalidation due dates 6–7 months in advance; but will establish your date at least 90 days in advance. A due date of "TBD" means that CMS hasn't set your due date, and you don't need to do anything now.

Please review the CMS web page for more information: Revalidations (Renewing Your Enrollment)

For additional assistance or guidance on the information above, please see the resource below.

South Country Provider Contact Center 1-888-633-4055

Hours: 8 a.m. - 4:30 p.m., closed from 12 noon to 1 p.m.

The Provider Contact Center staff are available as your first point of contact to assist with the following.

Member benefit coverage Provider web portal issues
Authorization verification Claim rejection guidance
Website questions General information

Claims billing and processing guidelines

Remittance adjustment code details and payment information

South Country wants to ensure providers are reimbursed for services provided to our members and following all billing guidelines. Our staff are committed to support and guide you in understanding all South Country processes and procedures. In addition, callers that utilize our Provider Contact Center are provided a reference number that identifies your call in our system. Please keep the reference number in your records to refer to if you have any additional questions or need to check the status of an open issue. The reference number will help the representative locate your issue quickly.

