

Ordering, Referring and Prescribing (ORP) Provider Training

South Carolina Department of Health and Human Services (SCDHHS)

Updated July 2026

ORP Training Agenda

- ORP provider overview
- ORP provider enrollment
- Claims requirements
- ORP resources

ORP Provider Overview

Federal Requirements

- Under 42 CFR 455.410(b) and Section 6401 of the Affordable Care Act (ACA), any physician or other professional who orders, refers, or prescribes to Medicaid patients must enroll in the state Medicaid program.
- Additionally, 42 CFR 455.440 requires all claims for items and services ordered or referred to contain the National Provider Identifier (NPI) of the ordering or referring provider.

Who Must Enroll

- ORP providers are:
 - Chiropractors
 - Dentists
 - Nurse practitioners, midwives, physician assistants, certified registered nurse anesthetists, residents and attendings
 - Optometrists
 - Physicians (all specialties)
 - Podiatrists
- Note: This list is subject to update based on the South Carolina Department of Health and Human Services (SCDHHS) decisions and requirements. Any updates to this list will be communicated with providers in advance, allowing time for new provider types to enroll as ORP.

Other States Enrollment

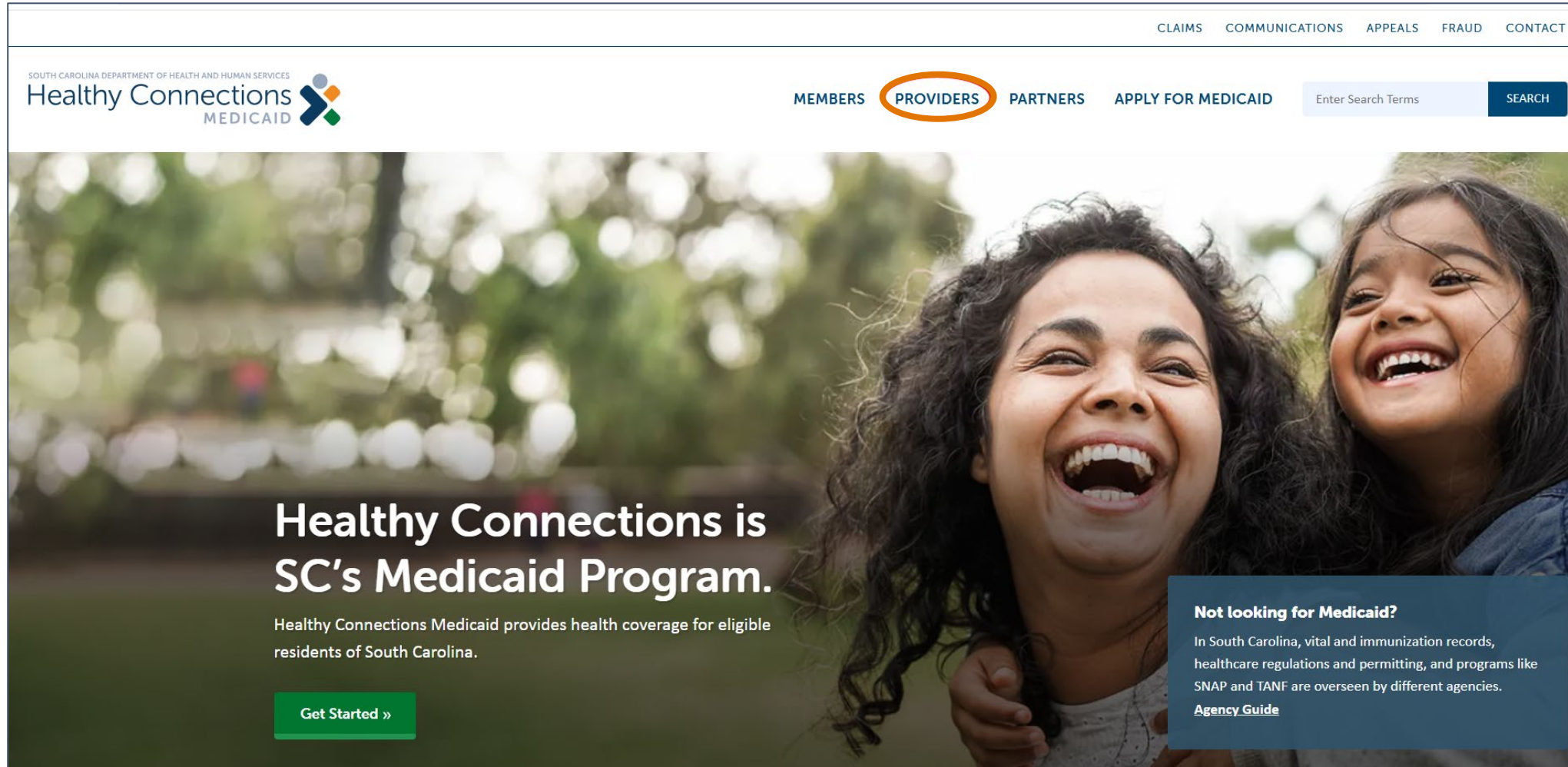
- Providers must enroll in each state Medicaid program where they render ORP services, regardless of enrollment in another state.
- Out-of-state providers must enroll if they provide ORP services to members of another state's Medicaid program.

ORP Provider Enrollment

Enrollment Information

- National Provider Identifier (NPI): Individual NPIs must be used, not organizational NPIs.
- Enrollment as an ORP provider is not for billing.
 - Full enrollment is required to bill Medicaid directly.
- Revalidation is required to remain compliant.
 - Typically, revalidation occurs every three to five years depending on specialty.
- Providers already enrolled in Healthy Connections Medicaid:
 - With an individual NPI, there is no need to re-enroll
 - With an organizational NPI, need to enroll with your individual NPI
- Services billed by group, clinic or hospital:
 - Each provider must be enrolled individually.

How to Enroll in ORP



Go to scdhhs.gov and select “providers” towards the top right-hand side of the website.

HOME / PROVIDERS

Providers



Become a Medicaid
Provider »



Log in to Medicaid Web
Portal »



Contact a Provider
Representative »

PROVIDERS

- Manuals +
- Fee Schedules
- Provider Enrollment +
- Revalidation
- Managed Care +
- Trainings +
- Contact a Provider Representative
- Provider Appeals
- All Patient Refined Diagnosis Related Groups (APR-DRGs)
- Claims

What d

SEARCH

Quick Links

Click on the circle icon labeled **“Become a Medicaid Provider.”**

HOME / PROVIDERS / BECOME A PROVIDER

Become a Provider

[Apply Online »](#)[Call \(888\) 289-0709 #4 »](#)[Email »](#)

Provider Enrollment and Screening Requirements

The enrollment process includes screening, licensure verification and site visits (if applicable), to ensure that all enrolling providers are in good standing and meet the requirements for which they are seeking enrollment.

PROVIDERS

Manuals

+

Fee Schedules

Provider Enrollment

-

Agreements and Forms

FAQs

Revalidation

Managed Care

+

Trainings

+

Contact a Provider Representative

Provider Appeals

All Patient Refined Diagnosis Related Groups

Click on the circle icon labeled **“Apply Online.”**

Provider Enrollment

Individuals, Organizations, Atypical Individuals, Atypical Organizations, Ordering/Referring providers as well as currently enrolled providers adding a new location can enroll into the system. A unique Reference ID is assigned to each application. Emails containing the Reference ID will be sent to both the authorized individual completing the application and the provider. The Reference ID is required to retrieve a saved application and to correct or update enrollment information after the application is approved. If the application is not completed and submitted at the time the Reference ID is issued, the provider has thirty (30) calendar days from the issuance date of the Reference ID in which to log back into the online application and complete the submission or the record will be deleted from the system.

Who Can Enroll

Individual Provider

— An individual provider is a person enrolled directly who provides health services to health care members. An individual may bill independently for services or may have an affiliation with an organization. Individuals enrolling in SCDHHS Medicaid program are required to submit their Social Security Number (SSN) and National Provider Identifier (NPI).

Individual/Sole Proprietor

— An Individual/Sole proprietor is a person enrolled directly who provides health services to health care members. An individual may bill independently for services or may have an affiliation with an organization. An Individual/Sole proprietor enrolling in SCDHHS Medicaid program is required to submit their Social Security Number (SSN) and National Provider Identifier (NPI).

For SCDHHS individual Medicaid enrollment, type of ownership defaults to Individual/Sole Proprietor when an EIN is submitted on the application. As a sole proprietor, you would need to obtain an identification number if either of the following apply: (1) pay wages to one or more employees, or (2) you file pension or excise tax returns. If these conditions do not apply, your SSN is your taxpayer identification number.

Organization

— Any entity, agency, facility or institution that provides health services to health care members. An organization may bill independently for services performed or may be an affiliation of individual providers. Organizations enrolling in SCDHHS Medicaid program are required to submit their Employer Identification Number (EIN) and NPI.

Atypical Providers

— CMS defines atypical providers as "providers that do not provide health care, as defined under HIPAA in Federal regulations at 45 CFR section 160.103." Providers who perform home and vehicle modifications, respite services, and attendants working in Community Long Term Care (CLTC) facilities are examples of atypical providers reimbursed by the Medicaid program. Even if these atypical providers submit HIPAA transactions, they still do not meet the HIPAA definition of health care and therefore cannot receive an NPI.

Atypical Individual

— An Atypical Individual provider is a person enrolled directly who provides non-health related services to health care members. An atypical individual may bill independently for services or may have an affiliation with an organization. Individuals enrolling in SCDHHS Medicaid program are required to submit their Social Security Number (SSN). The provider may or may not be eligible for an NPI and NPI is not required.

Atypical Organization

— An Atypical Organization provider is a facility, agency, entity, institution, clinic or group of providers enrolled directly, submit their Employer Identification Number (EIN). The provider may or may not be eligible for an NPI and NPI is not required. Providers enrolling in SCDHHS Medicaid program are required to submit their Social Security Number (SSN). The provider may or may not be eligible for an NPI and NPI is not required.

Add a Location

— Organizations (facilities, agencies, groups, etc.) enrolled with a unique combination of an Employer Identification Number (EIN) and location. If a provider is adding a new location to an existing enrollment, the provider must complete a new enrollment for that location.

Medicare Cost-Sharing Provider

— This enrollment type is for Medicare provider types not recognized by the South Carolina Healthy Connections Medicaid program. Providers enrolling in SCDHHS Medicaid program are required to submit their Social Security Number (SSN). The provider may or may not be eligible for an NPI and NPI is not required.

Change Request

— Providers successfully enrolling as a SC Medicaid provider through the web application are able to submit change requests. Providers enrolling in SCDHHS Medicaid program are required to submit their Social Security Number (SSN). The provider may or may not be eligible for an NPI and NPI is not required.

Revalidation Request

— Participating providers (Individuals and Organizations) enrolled on or before December 02, 2012, must have their enrollment information revalidated. The enrolled information will be verified and screened to ensure compliance according to the patient protection and Affordable Care Act of the provider enrollment and screening regulations published by the Centers for Medicare and Medicaid services. To start OR continue the Enrollment Revalidation, click the Enrollment Revalidation button.



You should be directed to the provider enrollment website. Click “Begin a New Enrollment” on the bottom of the screen.

SOUTH CAROLINA

Healthy Connections
MEDICAID



Exit Enrollment »

Provider Services Menu

Required fields are marked with an asterisk (*).

Please choose the option that best describes your intent: *

☒ New Enrollment ☐ Add a Location

Enrollment Type* -- Select One -- A selection is required

- Select One --
- Individual
- Organization
- Atypical Individual
- Atypical Organization
- Ordering/Referring

Medicaid Service Area (MSA) Determination

Please choose the State of your Primary Practice Location *:

Enroll Now

SC Health & Human Services • P.O. Box 8809 • Columbia, SC 29202-8809 • Phone: (888) 289-0709

Click “New Enrollment,” then select the option “Ordering/Referring” from the drop-down menu for “Enrollment Type.”

SOUTH CAROLINA
Healthy Connections
MEDICAID

Exit Enrollment »

Provider Services Menu

Required fields are marked with an asterisk (*).

Please choose the option that best describes your intent: *

☒ New Enrollment ☐ Add a Location

Enrollment Type* Ordering/Referring ▼

Medicaid Service Area (MSA) Determination:

Please choose the State of your Primary Practice Location *:

-- Select One -- ▼ A selection is required

- Select One --
- SC
- GA
- NC
- AL
- AK
- AZ
- AR
- CA
- CO
- CT
- DE
- FL
- HI
- ID
- IL
- IN
- IA
- KS
- KY

Enroll Now

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On the second drop-down menu, select the state of your primary practice location. Then click “Enroll Now.”

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Healthy Connections
MEDICAID

Exit Enrollment »

Provider Enrollment-Ordering/Referring
Enrollment Progress

Provider Information → Provider Type & Specialty → Location Information → **Ordering/Referring** → Ownership, Associations & Affiliations → Sanctions, Trading Partners, W-9 & EFT → Terms & Conditions/Review & Submit

Important Enrollment Information

You must complete the Ordering/Referring-Information page before your enrollment will be saved.

OK

SC Health & Human Services • P.O. Box 8809 • Columbia, SC 29202-8809 • Phone: (888) 289-0709

Acknowledge the “Ordering/Referring” pop-up notification by selecting “OK.”



The screen will advance showing **“Enrollment Progress,”** continue entering provider information. Move through the next seven steps to review and submit your enrollment.

Claims Submission Requirements

ORP Claims Submissions

- Who must include ORP information on claims?
 - Pharmacy
 - Laboratory
 - Independent x-ray and physiology lab
 - Optician - individual
 - Home health
 - Durable medical equipment
 - Other medical professionals (physical and occupational therapists; speech pathologist)
- The ORP claim must include the following information:
 - The NPI of the ORP providers,
 - Proof the provider is enrolled in Healthy Connections Medicaid and
 - All pharmacy claims must identify the prescribing provider.

ORP Claims Submission *(cont.)*

- CMS-1500 (claims submission form)
 - Fields 17, 17a and 17b is used to enter the referring, ordering and other provider(s) information.
 - Valid qualifiers are DN = referring; DK = ordering.
 - Field 17: Name of the referring or other source.
 - Field 17a: Enter provider license number if applicable.
 - Field 17b: Enter the ORP provider's NPI number listed in field 17.

17. NAME OF REFERRING PROVIDER OR OTHER SOURCE		17a.		18. HOS
		17b.	NPI	FR
19. ADDITIONAL CLAIM INFORMATION (Designated by NUCC)				20. OU

ORP Claims Submission (cont.)

- Web Tool claims for CMS-1500

The screenshot displays the 'CMS-1500 Claim Entry - ICD 10' web application. The header includes the 'SOUTH CAROLINA Healthy Connections MEDICAID' logo and navigation links for 'Logout' and 'Home'. A secondary navigation bar contains links for 'Change PWD', 'Reports', 'Eligibility', 'Claims Entry', 'Claim Submission', 'Lists', and 'History'. The main content area is titled 'CMS-1500 Claim Entry - ICD 10' and includes a 'Welcome' message and a note that the user's IP address has been logged. Below this is a tabbed interface with tabs for 'Beneficiary Info', 'Provider Info', 'Misc Info', 'Diagnosis Codes', 'Det Lines', 'Documents', and 'Other Coverage'. The 'Beneficiary Info' tab is active, showing sections for 'Create Adjustment' (with an 'Initiate adjustment request' checkbox and fields for 'Original CCN' and 'Reason Code'), 'Accident Info' (with checkboxes for 'Auto Accident?', 'Employment Accident?', and 'Other Accident?', and a dropdown for 'EPSDT Referral Needed?'), and 'Other Info' (with fields for 'MHN Referral Number' and 'Prior Authorization Number'). Below these are sections for 'Referring Provider Info' and 'Ordering Provider Info', each with fields for 'NPI', 'Last Name', and 'First Name'. A 'Continue' button is located at the bottom right of the form. At the very bottom, contact information for the South Carolina Center is provided: 'For support, contact the South Carolina Center Phone: (888) 289-6709 Option 1, Fax: (803) 870-9021, Email: EDIG.OPS-MCAID@BCBSSC.COM'.

ORP Claims Submission *(cont.)*

- UB-04 or CMS-1450 (81-field claim document for inpatient and outpatient services)
 - Field 76: Attending physician's NPI
 - Field 77-79: Other physician's NPI

a		b		c		76	
76 ATTENDING		NPI		QUAL			
LAST				FIRST			
77 OPERATING		NPI		QUAL			
LAST				FIRST			
78 OTHER		NPI		QUAL			
LAST				FIRST			
79 OTHER		NPI		QUAL			
LAST				FIRST			

THE CERTIFICATIONS ON THE REVERSE APPLY TO THIS BILL AND ARE MADE A PART HEREOF.

ORP Claims Submission (cont.)

- Web Tool claims for UB-04

The screenshot displays the 'UB-04 Inpatient Claim Entry - ICD 10' web interface. The header includes the 'Healthy Connections MEDICAID' logo and navigation links for 'Change PWD', 'Reports', 'Eligibility', 'Claims Entry', 'Claim Submission', 'Links', and 'History'. A user is logged in, with their IP address and login status shown. The main form area contains several sections: 'Additional Information' with fields for Admission Date, Admission Hour, Discharge Hour, *From Date of Service, and *Through Date of Service; dropdown menus for *Adm. Source, *Adm. Type, and *Patient Status; a 'Type of Bill' dropdown set to '111 - Inpatient hospital, admit through discharge claim'; an 'Org. CCN' field; and four numeric input fields for Covered Days, Non-covered Days, Conformance Days, and Lifetime Reserve Days. Below these are fields for MHN Referral Number and Prior Authorization Number. The 'Referring Provider Info' section includes fields for Referring NPI, Referring Last Name, and Referring First Name, along with an 'EPSDT Referral Needed?' checkbox and an 'EPSDT Ref. Type' dropdown. A 'Continue' button is located at the bottom right of the form.

ORP Claims Submission *(cont.)*

- Incorrect or missing enrollment information can lead to a claim denial.
- Once the ORP provider is enrolled, claims can be resubmitted.
- Possible claim rejection edits:
 - Edit 611 – Referring/ordering NPI not on claim
 - Edit 612 – Referring/ordering NPI invalid
 - Edit 613 – Referring NPI not eligible on date of service (DOS)
 - Edit 614 – Ordering NPI not eligible on DOS
 - Edit 615 – Group provider cannot be ORP
 - Edit 616 – ORP only provider cannot be billing/rendering

Frequently Asked Questions

- **What if I don't want to be reimbursed for my services, do I still need to enroll?**
 - Yes. Failure to enroll can result in the ORP being denied and the patient not receiving needed services.
- **What if I am already an active Healthy Connections Medicaid provider?**
 - You do not need to enroll as an ORP provider.
- **If I am enrolled as an ORP provider, can I bill Medicaid directly?**
 - No. To bill Medicaid directly, you must enroll as a billing provider and submit a full application package.

Resources

- [The Center's for Medicare and Medicaid Services NPI registry](#)
- [Federal regulations 42 CFR 455.410](#)
- [South Carolina Healthy Connections Medicaid enrollment portal](#)
- General ORP guidelines can be found on scdhhs.gov
- Provider Service Center: (888) 289-0709
 - Open Monday through Thursday from 7:30 a.m. to 5 p.m. and Friday from 8:30 a.m. to 5 p.m.

