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## An important message from our Market Chief Medical Officer: Appropriate antibiotic utilization affects us all

As the cold and flu season progresses, you may be pressured by your patients to prescribe antibiotics. As clinicians, we must ensure the continued effectiveness of antibiotics that save lives from bacterial infections through appropriate prescribing. We have a dedicated site addressing appropriate antibiotic use that has a wealth of physician resources and materials to use with patients, and links to the CDC's Get Smart: Know When Antibiotics Work website.

Please visit the Appropriate Antibiotic Use page at [www.keystonefirstpa.com](http://www.keystonefirstpa.com) > **Providers > Initiatives > Appropriate Antibiotic Use.**

Consider the following when treating these common conditions:

### Pharyngitis in children (2 – 18 years of age):

- The vast majority of pharyngitis is viral.
- Clinical signs and symptoms do not always point to a viral or bacterial cause.
- Wait to see if a strep culture or quick strep test is positive before treating.
- Penicillin is still the drug of choice for group A strep (or erythromycin if the patient is allergic to penicillin).

### Upper respiratory infection (URI) in children (3 months to 18 years of age):

- Clinicians know URIs are viral, but patients often pressure for a prescription.
- Antibiotics need to be reserved for bacterial infections to reduce emerging bacterial antibiotic resistance.
- Pediatric antibiotic tips from the CDC are available on the **Appropriate Antibiotic Use** page.

### Acute bronchitis in adults (18 – 64 years of age):

- Just like pharyngitis and URIs, acute bronchitis is mostly caused by viruses.
- Patients can have respiratory symptoms, including cough with or without sputum, usually for three weeks.
- Consider a chest X-ray if pulse is > 100, respiratory rate is > 24, or temperature is > 100.4 degrees, or based on a lung exam.
- Antibiotics are not needed if there is no evidence of pneumonia.
- Purulent sputum is not always predictive of bacterial infection.
- Avoid antibiotics, but treat symptomatically.

Dr. Lily Higgins,  
Market Chief Medical Officer  
Keystone First



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## **DHS released new Medical Assistance bulletins (MABs) announcing newly created Current Procedural Terminology (CPT) codes for the administration of SARS-CoV-2 vaccines.**

Keystone First and Keystone First Community HealthChoices (CHC) will follow the guidelines issued on December 27, 2021, in MAB 01-21-51 addressing newly created CPT codes for administration of pediatric SARS-CoV-2 Pfizer, Inc. vaccine (as applicable to membership), as well as guidelines issued December 28, 2021, in MAB 01-21-55, outlining CPT codes for the administration of booster doses of the SARS-CoV-2 vaccines.

### **What is new?**

1. CPT codes have been added for pediatric novel coronavirus (SARS-CoV-2) vaccines manufactured and administered by Pfizer, Inc.
2. CPT codes have been added that are distinct to the administration of a booster dose of the novel coronavirus (SARS-CoV-2) vaccines manufactured by Pfizer, Inc., Janssen Biotech, Inc., and Moderna, Inc.

The complete MABs, outlining the procedure codes, national code descriptions, provider types, provider specialties, place of service, and pricing and/or informational modifiers if applicable, can be found on the Coronavirus Vaccine section of the website at:

**[www.keystonefirstpa.com](http://www.keystonefirstpa.com) > Providers > Important information regarding COVID-19 vaccines**

**[www.keystonefirstchc.com](http://www.keystonefirstchc.com) > For Providers > Important information regarding COVID-19 vaccines**



## Postpartum home visits

A postpartum home visit is offered to all members who deliver a baby, to ensure they receive the appropriate clinical assessment, education, and support for a healthy transition from the hospital to home.

- All members and newborns receive a clinical nursing visit within one week of discharge from the hospital.
- All deliveries (vaginal or cesarean) are eligible for up to two home visits.
- If complications are identified during the home visit, it is the responsibility of the home visit provider to request the authorization of additional home visits or other services.
- When a detained baby is discharged more than one week from birth, an authorization is required to receive a home visit.
- The visit includes a physical, psychosocial, and environmental assessment with individualized education, counseling, and support.

Contact the Bright Start® department for assistance at **1-800-521-6867**.

### **Additionally, we are pleased to introduce our Pregnancy, Baby, and Young Child Home Visiting Program.**

This program is available to all Keystone First members who are pregnant and/or parents or caregivers with young children at home, and may be facing difficult health risks or barriers to care.

As part of this program, we hope to:

Help prepare new moms with the resources they need to have a healthy transition from hospital to home, and help their newborns have a healthy start to life.

Provide parents and caregivers with individualized education, counseling, and support in order to promote healthy early childhood development.

Assist in ensuring the safety of children and parents or caregivers in the home.

Identify any social determinants of health that need to be addressed, as well as the resources available to do so.

Encourage, assist, and ensure that children and parents/caregivers have access to appropriate physical and behavioral health follow-up care.

Keystone First will provide home visiting services to our members throughout their entire pregnancy and up to 18 months of early childhood. Our staff is available to help connect our members with community-based organizations that provide home visiting programs during that time frame.

If you know a member who would benefit from participating in this new program, please have them call the Bright Start department at **1-800-521-6867**.





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## Change to your practice? Keep us informed!

The Pennsylvania Department of Human Services (DHS) has stated there will be a focused effort this year to perform provider directory audits. Provider directory accuracy is very important to ensure that members and Participants have access to care.

Please note that the following provider updates must be provided at least 30 days in advance of the change:

- Provider termination notification — when a provider is leaving your group.
- New provider notification — when a provider is joining your group.
- Change in location — new addresses or additional locations.

We ask for all of the above that you provide as much advance notice as possible.

A provider change form is available to document all the information needed to submit the request for changes. This form can be found at:

**[www.keystonefirstpa.com](http://www.keystonefirstpa.com) > Providers > Provider manual and forms**

**[www.keystonefirstchc.com](http://www.keystonefirstchc.com) > For Providers > Provider manual and forms**

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## Reminder: All providers and all locations must be enrolled and have a valid PPID number

As a reminder, Section 6401 of the Affordable Care Act (ACA) requires that all providers must be enrolled in Medicaid in order to be paid by Medicaid. This means all providers must enroll and meet all requirements of DHS, which then issues a Medicaid identification number called Promise Provider Identification (PPID). The enrollment requirements include registering every service location with the state and having a different service location extension for each location.

Additionally, DHS has implemented the requirement that all providers must revalidate their Medical Assistance enrollment every five years. (ACA) (§42 CFR 455.414).

Enroll by visiting **<https://provider.enrollment.dpw.state.pa.us/Home>**.

Or call **1-800-537-8862**, Monday – Friday, 8 a.m. to 4:30 p.m.

## Provider credentialing rights and reminders

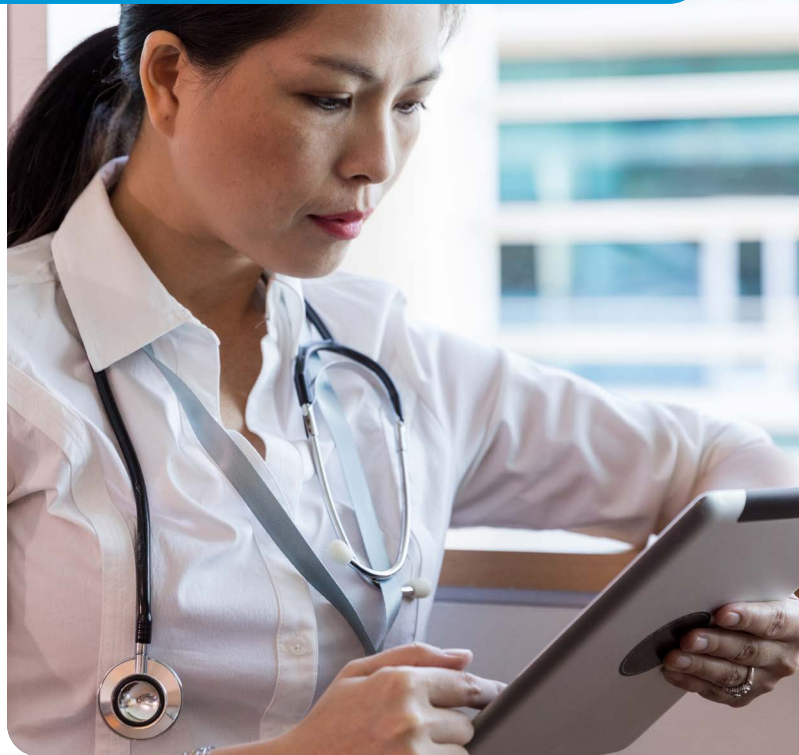
### Provider credentialing rights

After application submission, health care providers have the following rights:

- To review information submitted to support their credentialing application, with the exception of references, recommendations, and peer-protected information obtained by the plan.
- To correct erroneous information. When information obtained by the Credentialing department varies substantially from information provided by the provider, the Credentialing department will notify the provider to correct the discrepancy.
- To be informed, upon request, of the status of their credentialing or recredentialing applications.
- To be notified within 60 calendar days of the Credentialing Committee/Medical Director review decision.
- To appeal any credentialing/recredentialing denial within 30 calendar days of receiving written notification of the decision.
- To know that all documentation and other information received for the purpose of credentialing and recredentialing is considered confidential and is stored in a secure location that is only accessed by authorized plan associates.
- To receive notification of these rights.

To request any of the above, the provider should contact the Credentialing department at:

**Keystone First/Keystone First CHC**  
**Attn: Credentialing Department**  
**200 Stevens Drive**  
**Philadelphia, PA 19113**



### Credentialing reminders

Please remember that Keystone First and Keystone First CHC offer and encourage all practitioners to use the free Universal Provider DataSource through the Council for Affordable Quality Healthcare (CAQH)\* for simplified and streamlined data collection for credentialing and recredentialing. Through the CAQH, credentialing information is provided to a single repository, via a secure internet site, to fulfill the credentialing requirements of all health plans that participate in the CAQH. The complete list of credentialing guidelines and related forms, as well as practitioners' credentialing and recredentialing rights, can be found online at **[www.keystonefirstpa.com](http://www.keystonefirstpa.com) > Providers > Join our network** and **[www.keystonefirstchc.com](http://www.keystonefirstchc.com) > For Providers > Join our network.**

\*Note: CAQH credentialing does not apply to home- and community-based services (HCBS) and long-term services and supports (LTSS) providers. HCBS and LTSS providers should complete our paper application process.

## Translation services

To help ensure our members and Participants continue to have access to the best possible health care and services in their preferred language, we are extending to our network providers the opportunity to contract with Language Services Associates (LSA) at our low, corporate telephonic rates.

Visit [www.keystonefirstpa.com](http://www.keystonefirstpa.com) > **Providers > Resources > Initiatives > Cultural competency** or [www.keystonefirstchc.com](http://www.keystonefirstchc.com) > **For Providers > Training** to review a description of services and a letter of commitment for complete details and contact information. You may address any questions you have directly to LSA, since this relationship will be between your office and LSA. Feel free to call them at **1-800-305-9673, ext. 55321**.

If a Keystone First CHC Participant needs an interpreter, please ask the Participant to call us at **1-855-332-0729** to be connected with an interpreter who meets their needs. For TTY services, please call **1-855-235-4976**.

## Members' and Participants' rights and responsibilities

Keystone First and Keystone First CHC are committed to treating our members and Participants with dignity and respect. Keystone First and Keystone First CHC, our network providers, and other providers of service may not discriminate against members or Participants based on race, sex, religion, national origin, disability, age, sexual orientation, or any other basis prohibited by law. Our members and Participants also have specific rights and responsibilities.

The complete list is available in the Members, Participants, and Providers sections of [www.keystonefirstpa.com](http://www.keystonefirstpa.com) and [www.keystonefirstchc.com](http://www.keystonefirstchc.com).



## Pharmacy prior authorization — just a click away!

Use our online prior authorization request form to submit pharmacy prior authorization requests instantly.

To get started, go to [www.keystonefirstpa.com](http://www.keystonefirstpa.com) > **Pharmacy > Prior authorization > Online prior authorization request form** or [www.keystonefirstchc.com](http://www.keystonefirstchc.com) > **For Providers > Pharmacy services > Pharmacy prior authorizations > Online prior authorization request form**.

Please visit the Pharmacy Services section of our websites at [www.keystonefirstpa.com](http://www.keystonefirstpa.com) > **Pharmacy** and [www.keystonefirstchc.com](http://www.keystonefirstchc.com) > **For Providers > Pharmacy services** for up-to-date information, including:

- A list of pharmaceuticals, including restrictions and preferences.
- An explanation of limits or quotas.
- Drug recalls.
- How to use pharmaceutical management procedures.
- Prior authorization criteria and procedures for submitting prior authorization requests.
- Changes approved by the Pharmacy and Therapeutics (P&T) Committee.





## Member and Participant copayment schedule

The most current member and Participant copayment schedule is available at [www.keystonefirstpa.com](http://www.keystonefirstpa.com) > **Providers > Resources > Member information** and [www.keystonefirstchc.com](http://www.keystonefirstchc.com) > **For Providers > Resources > Participant information**.

## Reminder: Balance billing to members and Participants is prohibited

As outlined in your provider agreement with the plan and as outlined in DHS MAB 99-99-06, titled Payment in Full, Keystone First and Keystone First CHC strongly remind all providers of the following points from the bulletin:

The Pennsylvania Code, 55 Pa. Code § 1101.63 (a) statement of policy regarding full reimbursement for covered services rendered specifically mandates that:

- All payments made to providers under the MA program plus any copayment required to be paid by a recipient shall constitute full reimbursement to the provider for covered services rendered.
- A provider who seeks or accepts supplementary payment of another kind from DHS, the recipient, or another person for a compensable service or item is required to return the supplementary payment.

To review the complete MAB 99-99-06, visit [www.keystonefirstpa.com](http://www.keystonefirstpa.com) > **Providers > Resources > MA bulletins** or [www.keystonefirstchc.com](http://www.keystonefirstchc.com) > **For Providers > Resources > Department of Human Services (DHS) bulletins and news**.

Similarly, the Centers for Medicare & Medicaid Services (CMS) clearly outlines that Keystone First VIP Choice providers are prohibited from balance billing members as follows:

- Section 1902(n)(3)(B) of the Social Security Act, as modified by Section 4714 of the Balanced Budget Act of 1997, prohibits Medicare providers from balance billing qualified Medicare beneficiaries for Medicare cost-sharing.
- Under the requirements of the Social Security Act, all payments from Keystone First VIP Choice to participating providers must be accepted as payment in full for services rendered. Members/Participants may not be balance billed for medically necessary covered services under any circumstances.



## If you suspect it, report it: Help us fight fraud, waste, and abuse

### Fraud tip hotline

If you or any entity with which you contract to provide health care services on behalf of Keystone First and Keystone First CHC becomes concerned about or identifies potential fraud or abuse, please contact us by:

- Calling the toll-free Fraud, Waste, and Abuse hotline at **1-866-833-9718**.
- Emailing **[fraudtip@amerihealthcaritas.com](mailto:fraudtip@amerihealthcaritas.com)**.
- Mailing a written statement to:
  - Special Investigations Unit  
Keystone First/Keystone First Community HealthChoices  
200 Stevens Drive  
Philadelphia, PA 19113

For more information about Medical Assistance fraud and abuse, please visit the DHS website at **<https://www.dhs.pa.gov/about/Fraud-And-Abuse/Pages/MA-Fraud-and-Abuse---General-Information.aspx>**.

### Explore our fraud, waste, and abuse websites

Keystone First and Keystone First CHC are committed to detecting and preventing acts of fraud, waste, and abuse, and we have webpages dedicated to addressing these issues and mandatory screening information.

Visit **[www.keystonefirstpa.com](http://www.keystonefirstpa.com)** > **Providers** > **Resources** > **Manuals, guides and training** > **Fraud, Waste, Abuse and Mandatory Screening Information** and **[www.keystonefirstchc.com](http://www.keystonefirstchc.com)** > **For Providers** > **Training** > **Fraud, Waste, Abuse and Mandatory Screening Information**.

Topics on the sites include:

- Information on screening employees for federal exclusion.
- How to report fraud to us.
- How to return improper payments or overpayments to us.
- Information on provider mandatory fraud, waste, and abuse training.
  - After you have completed the training, please complete the attestation:
    - ◇ Keystone First and Keystone First CHC medical providers, go to **[www.surveymonkey.com/r/9MQ7S8F](http://www.surveymonkey.com/r/9MQ7S8F)**.
    - ◇ Keystone First CHC LTSS providers, go to **[www.surveymonkey.com/r/577CX6](http://www.surveymonkey.com/r/577CX6)**.



## Dental care — work with us to promote annual dental visits to our members and Participants

Recent research shows that poor oral health may contribute to numerous diseases and conditions, including cardiovascular disease, endocarditis, and diabetes. We encourage our members and Participants to see the health of their teeth and gums as a strong component of their overall well-being.

As provider partners in care, **you can help.**

Health care providers who serve our members and Participants are uniquely positioned to become involved in their patients' oral health. Join us in promoting annual visits to a participating dental provider and help us to help our members and Participants avoid preventable diseases, such as gingivitis and periodontitis. Let's work together to educate and inspire our members and Participants. Consistent care and education can help with early detection and encourage optimal preventive care.

We realize that barriers to dental care may exist for our members and Participants with more challenging health and transportation issues.

Members or Participants who need assistance with transportation or with locating a dentist to meet their needs should call Keystone First Member Services at **1-800-521-6860 (TTY 1-800-684-5505)** or Keystone First CHC Participant Services at **1-855-332-0729 (TTY 1-855-235-4976)**.

## Provider Services department

The Keystone First/Keystone First CHC Provider Services department operates in conjunction with the Provider Network Management department, addressing provider concerns and offering assistance. Both departments make every attempt to ensure all providers receive the highest level of service available.

Provider Services can be reached 24 hours a day, seven days a week. **Call 1-800-521-6007** to:

- Verify member/Participant eligibility/benefits.
- Request forms or literature.
- Ask policy and procedure questions.
- Report member/Participant noncompliance.
- Obtain the name of your provider Account Executive.
- Request access to centralized services such as:
  - Outpatient laboratory services.
  - Behavioral health services.
  - Dental services.
  - Vision.

**The following products will have a quantity limit on the Keystone First and Keystone First CHC drug formulary.**

Members/Participants currently receiving more than the quantity limit for whom it is not medically advisable to change therapy will require prior authorization after **January 3, 2022**.

Formulary limits	
Product	Quantity limit
Ivermectin (Stromectol®) 3 mg tablets	10 tablets per 30 days without prior authorization

Additional prior authorization criteria may apply. Please refer to the most recent drug formulary and prior authorization information available online at:

**[www.keystonefirstpa.com](http://www.keystonefirstpa.com) → Providers → Pharmacy Services**

**[www.keystonefirstchc.com](http://www.keystonefirstchc.com) → For Providers → Pharmacy Services**

**If you have any questions regarding this notice, please contact Pharmacy Services.**

Keystone First: **1-800-588-6767**

Keystone First CHC: **1-866-907-7088**







## Behavioral health services

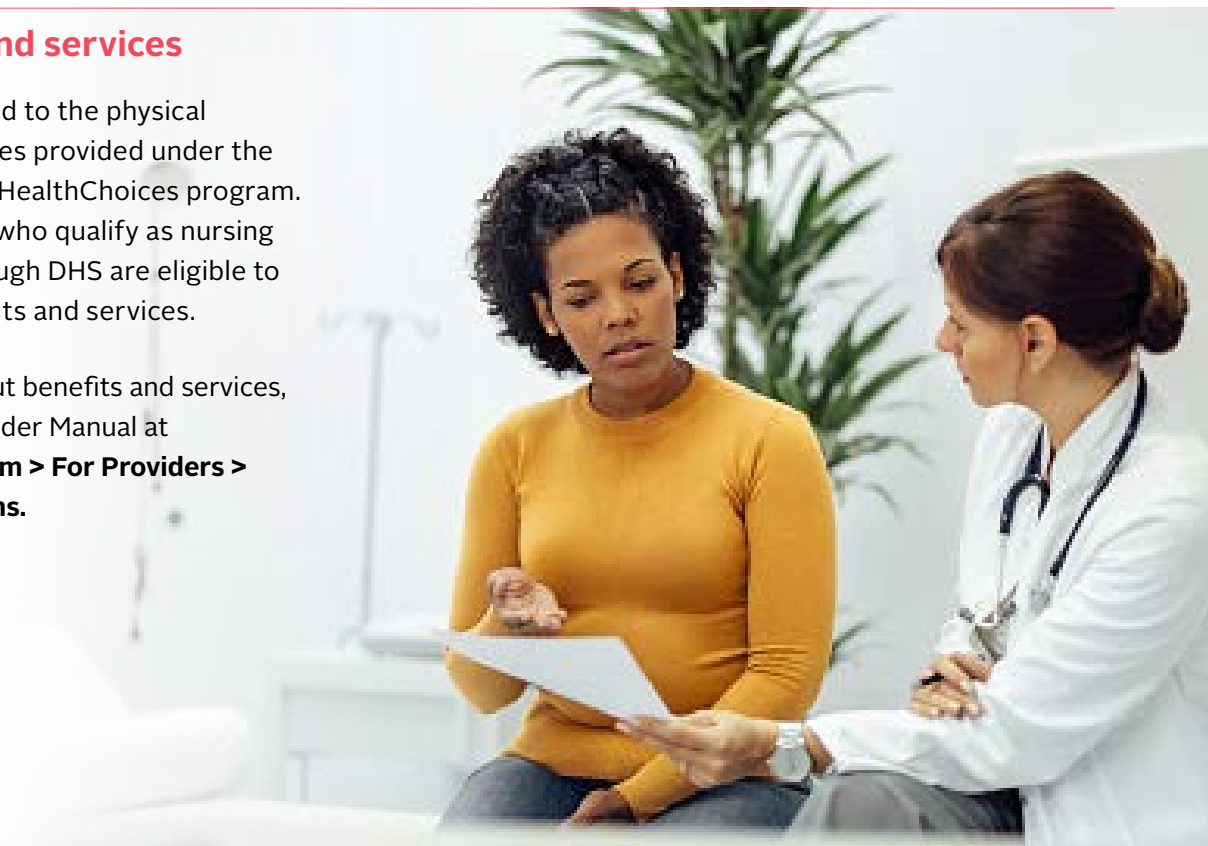
Keystone First CHC recognizes that a Participant's optimal health and well-being are better achieved through a whole-person approach. We strive to address our Participants' behavioral health (BH) needs through care coordination and collaboration with the behavioral health managed care organizations (BH-MCOs).

Keystone First CHC conducts a comprehensive needs assessment of every Participant who is eligible for LTSS, or who requests an assessment. If you are working with a Keystone First CHC LTSS Participant residing in the community or a nursing facility who has an identified unmet BH need, please contact a Keystone First CHC Service Coordinator. The Service Coordinator will make a referral to our BH Coordinator, who can assist the Participant with connecting to BH services. To reach a Keystone First CHC Service Coordinator, please call **1-855-349-6280**.

## Covered benefits and services

All Participants are entitled to the physical health benefits and services provided under the Pennsylvania Community HealthChoices program. Additionally, Participants who qualify as nursing facility eligible (NFE) through DHS are eligible to receive LTSS HCBS benefits and services.

For more information about benefits and services, go to Section I of the Provider Manual at [www.keystonefirstchc.com](http://www.keystonefirstchc.com) > **For Providers > Provider manual and forms.**





## Be involved — join our Participant Advisory Committee

Keystone First CHC hosts a quarterly Participant Advisory Committee meeting, and we are asking for your help.

The Participant Advisory Committee is a forum where Participants, providers, caregivers, family members, and direct care workers come together to help us make a difference.

The purpose of the committee is to provide our Participants with an effective means to consult with each other and, when appropriate, coordinate efforts and resources for the benefit of the entire CHC population in the zone, including people with LTSS needs.

### The 2022 Participant Advisory Committee meeting schedule is as follows:

Date	Time	Location
March 18	10:30 a.m. – noon	Zoom (until further notice)
June 17	10:30 a.m. – noon	Zoom (until further notice)
September 16	10:30 a.m. – noon	Zoom (until further notice)
December 16	10:30 a.m. – noon	Zoom (until further notice)

We are excited to share that we are actively recruiting a diverse group of Participants and providers based on geographic and plan diversity!

- Do you know a Participant who likes to be involved in community meetings or organizations?
- Do you know a formal or informal caregiver who has expressed interest in advocating for others?

If so, we want to hear from them!

Please reach out to Community Outreach Program Manager Maritza Padua at [mpadua@amerihealthcaritas.com](mailto:mpadua@amerihealthcaritas.com) with the contact information of the potential committee member, and we will do the rest!



## Connections Editorial Board

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KF\_221821104-1

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