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Updated Credentialing Department fax number	3
Added Home Oxygen Therapy to Prior Authorization list	33
Added reminder that payment may be adjusted if a member's eligibility changes between an authorization being issued and the service provided.	34, 142
Updated MATP section and language	36
Dental - added Silver Diamine Fluoride as a covered service for under 21	39
Dental - added requirement for benefit limit exception for requests for additional partial, full or lower denture.	40
Clarified that DME monthly rental items (regardless of cost/charge) require prior authorization.	41
Added section regarding Home Oxygen Therapy	42
Added language regarding the Adult Protective Services (APS) and how to report.	44, 119
EPSDT - added the required time frames for oral health risk assessments, first dental examinations and referral to dental home.	62
EPSDT billing - added other appropriate Z diagnosis codes	64
Current Childhood and Immunization, catch-up schedule and EPSDT periodicity schedule is posted on the provider website	75
Pharmacy Services - added dedicated Opioid phone and fax number	76
Add no copay for naloxone	23, 38, 76
Drugs requiring prior authorization - deleted B from A rated generic equivalent	79
Drugs requiring prior authorization - changed some prescriptions that exceed \$500 to exceed \$1000.	79
Reminder that speciality medications can be filled at any specialty pharmacy in the Keystone First speciality network	80
Removed references to the physician administered drug replacement process. Prior authorization now goes through Pharmacy only.	79, 85
Added that the newly marketed monoclonal antibody Hemlibra is subject to review.	82
Added the Erythropoiesis-Stimulating Agents (ESA) policy section and deleted the Epogen Policy section.	82-83
Member are able to self-refer for two (changed from one) routine eye exam per year.	92
Added section that addresses gain/loss of Keystone First to Keystone First Community HealthChoices coverage	101-102
Nursing Facilities - revised section to reflect changes due to a member becoming eligible for coverage through Community HealthChoices	102
Updated section on when DHS disenrolls a Member from Keystone First	105

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Program Integrity - included language further explaining claims accuracy efforts by Keystone First	141
Added definitions of Recipient and Provider Fraud	144-145
Added section on the Bureau of Program Integrity Restrospective Review, Rebuttals and Provider Correction Action Plans (PCAP)	145-146
Updated the DHS fax number to report suspected fraud, waste and abuse to 717-772-4655	149
Updated the address to submit a dispute via mail and added the option to submit through NaviNet.	155
Changed the time frame from 15 day to 7 days to give a Member written notification of the date that the Grievance Review Committee will meet to review their grievance.	166
Added Substance Abuse Treatment Practitioners as requiring credentialing and recredentialing.	182
Clarified that Providers will have 10 days from the date of notification from the credentialing department to correct erroneous information and added clarification to the types of information shared with providers.	185
Added that a facility is required to include an Ownership Disclosure Form with the credentialing application	186
Updated the language in the Facilities rights section.	187
Bright Start - added the visit timeframes to the postpartum home nursing visit.	202
Let Us Know Program - deleted the care gap worksheet as a method of notification	204