Important changes coming January 1, 2020, to the preferred drug list

As announced in Medical Assistance Bulletin 01-19-65, effective January 1, 2020, the Pennsylvania Department of Human Services (DHS) will implement a statewide preferred drug list (PDL). This implementation will require all Medical Assistance managed care organizations (MCOs) in the physical health HealthChoices and Community HealthChoices plans to move to the mandated statewide PDL.

What are the changes that will take effect on January 1, 2020*?

- Keystone First and Keystone First Community HealthChoices (CHC) will adhere to the preferred and nonpreferred status and list of drugs included in the statewide PDL.
  - Please see page 3 for a partial list of commonly prescribed drugs that will be changing formulary status for Keystone First and Keystone First CHC effective January 1, 2020.

- Keystone First and Keystone First CHC will use the same prior authorization guidelines as required by DHS for drugs included in the statewide PDL.

- Keystone First and Keystone First CHC will maintain a list of preferred and nonpreferred drugs in classes that are not included in the statewide PDL.

*Note: Please keep in mind that up until December 31, 2019, the Keystone First and Keystone First CHC PDL is still in effect.
What stays the same?

- Medication classes that are not included in the statewide PDL are reviewed and approved by the Keystone First and Keystone First CHC Pharmacy and Therapeutics Committee.

- The process for obtaining prior authorization remains the same. For more information about prior authorization, go to www.keystonefirstpa.com → Pharmacy or www.keystonefirstchc.com → Providers → Pharmacy Services.

<table>
<thead>
<tr>
<th>Prior authorization request by:</th>
<th>Keystone First</th>
<th>Keystone First CHC</th>
</tr>
</thead>
<tbody>
<tr>
<td>Phone</td>
<td>1-800-588-6767</td>
<td>1-866-907-7088</td>
</tr>
<tr>
<td>Fax</td>
<td>1-215-937-5018</td>
<td>1-855-851-4058</td>
</tr>
<tr>
<td>Online</td>
<td><a href="http://www.keystonefirstpa.com">www.keystonefirstpa.com</a></td>
<td><a href="http://www.keystonefirstchc.com">www.keystonefirstchc.com</a></td>
</tr>
</tbody>
</table>

Where can I see the changes?

The up-to-date PDL is available on DHS’ Pharmacy site at https://papdl.com/.
If you have questions about this change, please contact Keystone First Pharmacy Services at 1-800-588-6767 or Keystone First CHC Pharmacy Services at 1-866-907-7088.
Top 25 drugs (by claim volume) changing from preferred to nonpreferred status effective January 1, 2020

<table>
<thead>
<tr>
<th>Drug</th>
<th>Preferred alternative options*</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Diabetes-related products</strong></td>
<td></td>
</tr>
<tr>
<td>Accu-Chek blood glucose meters and test strips</td>
<td>Contour, Contour Next, One Touch Ultra, One Touch Verio</td>
</tr>
<tr>
<td>Basaglar insulin</td>
<td>Lantus, Levemir</td>
</tr>
<tr>
<td>Admelog insulin</td>
<td>Insulin lispro (generic), Apidra, NovoLog</td>
</tr>
<tr>
<td>Steglatro tablet</td>
<td>Farxiga, Jardiance</td>
</tr>
<tr>
<td>Ozempic pen</td>
<td>Trulicity, Victoza</td>
</tr>
<tr>
<td><strong>Respiratory agents</strong></td>
<td></td>
</tr>
<tr>
<td>Wixela Inhub inhaler</td>
<td>Fluticasone/salmeterol (generic)</td>
</tr>
<tr>
<td>QVAR RediHaler</td>
<td>Asmanex Twisthaler, Flovent HFA, Flovent Diskus</td>
</tr>
<tr>
<td>Arnuity Ellipta</td>
<td>Asmanex Twisthaler, Flovent HFA, Flovent Diskus</td>
</tr>
<tr>
<td>Stiolto Resprimat</td>
<td>Anoro Ellipta, Combivent Respimat, Spiriva Respimat</td>
</tr>
<tr>
<td><strong>Topical agents</strong></td>
<td></td>
</tr>
<tr>
<td>Clotrimazole cream (prescription)</td>
<td>Clotrimazole cream (over-the-counter)</td>
</tr>
<tr>
<td>Ketoconazole cream</td>
<td>Clotrimazole cream (over-the-counter)</td>
</tr>
<tr>
<td>Tretinoin cream, gel</td>
<td>Retin-A (brand) cream, gel</td>
</tr>
<tr>
<td>Erythromycin-benzoyl peroxide gel</td>
<td>Clindamycin-benzoyl peroxide gel</td>
</tr>
<tr>
<td>Betamethasone dipropionate ointment</td>
<td>Betamethasone dipropionate cream, betamethasone valerate ointment, triamcinolone acetonide ointment</td>
</tr>
<tr>
<td>Nystatin-triamcinolone</td>
<td>Clotrimazole-betamethasone cream, nystatin cream, triamcinolone cream</td>
</tr>
<tr>
<td>Hydrocortisone valerate</td>
<td>Fluticasone cream or ointment, mometasone</td>
</tr>
<tr>
<td>Tacrolimus ointment</td>
<td>Pimecrolimus ointment, Protopic (brand)</td>
</tr>
<tr>
<td><strong>Ophthalmic agents</strong></td>
<td></td>
</tr>
<tr>
<td>Tobramycin-dexamethasone drops</td>
<td>Neomycin-polymyxin-dexamethasone drops, Tobradex (brand)</td>
</tr>
<tr>
<td>Moxifloxacin drops</td>
<td>Ciprofloxacin drops, ofloxacin drops, Moxeza</td>
</tr>
<tr>
<td><strong>Other agents</strong></td>
<td></td>
</tr>
<tr>
<td>Carisoprodol tablet</td>
<td>Baclofen, cyclobenzaprine, tizanidine tablet</td>
</tr>
<tr>
<td>Naproxen sodium tablet (prescription)</td>
<td>Naproxen sodium (over-the-counter), naproxen</td>
</tr>
<tr>
<td>Lo Loestrin FE tablet</td>
<td>Drospirenone-ethinyl estradiol 3-0.02 mg, Gianvi, Nikki</td>
</tr>
<tr>
<td>Nadolol tablet</td>
<td>Carvedilol, labetalol, propranolol</td>
</tr>
<tr>
<td>Linzess 72 mcg capsule</td>
<td>Linzess 145 or 290 mcg, Amitiza</td>
</tr>
<tr>
<td>Azelastine 0.15% nasal spray</td>
<td>Azelastine 0.1% nasal spray, fluticasone nasal spray</td>
</tr>
</tbody>
</table>

*Not an all-inclusive list, and some drugs may be subject to additional limits. For a complete list of preferred and nonpreferred drugs to be included in the January 1, 2020, statewide PDL, as well as any limits associated with these drugs, please visit [https://papdl.com](https://papdl.com).
Formulary updates

<table>
<thead>
<tr>
<th>Additions</th>
<th>Update</th>
</tr>
</thead>
<tbody>
<tr>
<td>Orilissa 150 mg and 200 mg tablet (with prior authorization)</td>
<td>April 1, 2019</td>
</tr>
<tr>
<td>Choline citrate 650 mg tablet</td>
<td>April 1, 2019</td>
</tr>
<tr>
<td>Choline SR 300 mg tablet</td>
<td>April 1, 2019</td>
</tr>
<tr>
<td>Xarelto 2.5 mg tablet</td>
<td>April 1, 2019</td>
</tr>
<tr>
<td>Generic Advair Diskus</td>
<td>March 15, 2019</td>
</tr>
<tr>
<td>Refresh Repair 0.5–0.9% eye drops</td>
<td>May 2019</td>
</tr>
<tr>
<td>Refresh Optive eye drops</td>
<td>May 2019</td>
</tr>
<tr>
<td>Clobazam (Onfi) 10 mg and 20 mg tablets</td>
<td>June 17, 2019</td>
</tr>
<tr>
<td>Carbamazepine (Carbatrol) 100 mg, 200 mg, and 300 mg ER capsules</td>
<td>June 17, 2019</td>
</tr>
<tr>
<td>Atovaquone-Proguanil 250 mg –100 mg , 62.5 mg – 25 mg tablet</td>
<td>October 2019</td>
</tr>
<tr>
<td>Seasonal flu vaccines 2019–2020</td>
<td>August 2019</td>
</tr>
<tr>
<td>Delstrigo 100–300–300 mg tablet</td>
<td>October 2019</td>
</tr>
<tr>
<td>Evotaz 300 mg – 150 mg tablet</td>
<td>October 2019</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Removals</th>
<th>Update</th>
</tr>
</thead>
<tbody>
<tr>
<td>Breo Ellipta (fluticasone/vilanterol) 100–25 mcg and 200–25 mcg inhalers</td>
<td>June 3, 2019</td>
</tr>
<tr>
<td>All needles, pen needles, and syringes other than BD brand products</td>
<td>July 15, 2019</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Updates</th>
<th>Update</th>
</tr>
</thead>
<tbody>
<tr>
<td>Opioid prescription morphine milligram equivalent (MME): lowering the maximum (MME) from 90 MME per day to 50 MME per day</td>
<td>July 1, 2019</td>
</tr>
<tr>
<td>Albuterol HFA: increase in quantity (quantity limit of two inhalers per month)</td>
<td>October 2019</td>
</tr>
</tbody>
</table>

Pharmacy prior authorization: no phoning or faxing — 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 → Providers → Pharmacy Services → Pharmacy Prior Authorization → Online Prior Authorization Request Form or

Please note that the following are available on our website:

- A list of pharmaceuticals, including restrictions and preferences.
- How to use pharmaceutical management procedures.
- 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 Committee.
Important information from DHS

Submission of all claims data even when no payment is due

On October 1, 2019, DHS notified all HealthChoices and Community HealthChoices managed care organizations (MCOs) that it is important that DHS receive all relevant encounter data so that service utilization of members/Participants is accurately captured.

DHS has determined that when third-party liability (TPL) is involved, providers do not always submit claims when there is no payment due from the MCO. It is critical for providers to submit all claims to Keystone First and Keystone First CHC even if there is no payment due.

If providers receive a payment from a primary payor, the claim with the explanation of benefits (EOB) should be submitted to Keystone First and Keystone First CHC so that services can be part of Medicaid services reporting. It is important for DHS to know what services are performed for its Medicaid population.

Some examples of the importance of receiving all encounter data include:

- To determine Hospital Quality Incentive Payments (HQIPs) using submitted inpatient and outpatient encounter data. See the link below for information on this initiative.

- To ensure that service records for Healthcare Effectiveness Data and Information Set (HEDIS®) measures are collected. For the HEDIS indicators, payment is not considered. HEDIS is based on utilization only by procedure code.

- To ensure that children are receiving Early and Periodic Screening, Diagnostic, and Treatment (EPSDT) services as part of Keystone First clinical oversight.

Information on HQIP is available at https://www.dhs.pa.gov/providers/Providers/Pages/Hospital-Assessment-Initiative-.aspx.
Thank you: HEDIS data collection and reporting

As we look forward to our next cycle of HEDIS data collection and reporting, Keystone First and Keystone First CHC thank you for your continued participation in this important quality initiative. We are also taking this opportunity to highlight some of the lessons we have learned through this process, and to remind you of your key role in helping us measure and report the quality of care delivered to our members/Participants — your patients.

- Every provider in our provider network is required by contract to cooperate with and participate in the quality management/quality assessment and performance improvement (QM/QAPI) program. We rely on your cooperation and participation to meet our own state and federal obligations as a Medicaid managed care organization (MCO) and a Community HealthChoices managed care organization (CHC-MCO).

- Our access to the medical records maintained by our providers is a critical component of our data collection as we seek to ensure appropriate and continued access to care for our member/Participant population. Our Plan or its designee must receive medical records from you in a timely manner for purposes of HEDIS data collection, National Committee for Quality Assurance (NCQA) accreditation, medical records documentation audits, and other quality-related activities that our QAPI program comprises. We will reach out from time to time to request records for these purposes; it is essential that you provide requested records within the time frames set forth in those notices.

- As our technological capabilities continue to advance, we will seek to enhance the efficiency of our data collection activities in support of our QAPI and population health programs, including through the use of bi-directional automated data exchange with our providers. These exchange opportunities, as available, are intended to capture data related to gaps in care, and to identify social determinants of health that may also be targets for intervention. We will work with our providers to identify and implement the most appropriate format and cadence for data exchange.

- Our clinical reviewers fully investigate potential quality of care (QOC) concerns, in accordance with our Plan’s policy. Providers are expected to comply with QOC review processes, beginning with the timely submission of records in response to requests from us. Your support of and participation in this critical review process helps to ensure the provision of high-quality care and service to our members/Participants.

The expectations listed above serve to clarify and expand upon the information in your Provider Manual regarding our Quality Management program. If you have any questions or concerns, please contact Provider Services at 1-800-521-6007 or your Provider Account Executive. We appreciate your continued participation in our provider network, and look forward to continuing to work with you as we improve and enhance the quality of care and services delivered to our members/Participants in the new year.
Tips for providing Culturally and Linguistically Appropriate Services (CLAS) to Chinese patients

Keystone First and Keystone First CHC have recently seen a large increase in our Chinese membership. Here are some tips and observations from the University of Washington Medical Center’s Culture Clues™ that can assist you in communicating with and treating your Chinese patients. For more suggestions, please visit the center’s website at https://depts.washington.edu/pfes/CultureClues.htm.

Understanding communication about health care and treatments

- Your patient may nod, smile, and/or say “yes” or “ya” to acknowledge he or she heard you, rather than that he or she understands or approves. Your patient may be reluctant to say “no” to a doctor or health care provider because it may be considered disrespectful or cause disharmony.

- Ask your patients open-ended questions to verify understanding and encourage them to ask questions.

- Ask them to repeat what they understand in their own words.

Customs that influence decision making

- In addition to religious beliefs, there are many cultural and traditional beliefs that your patient may subscribe to that will influence decisions about health care treatment. For example, your patient may seem hesitant to make a decision about surgery because of the preference to retain a full complement of body parts (e.g., uterus, gall bladder, etc.).

- Whenever possible, allow time for your patient to gain perspective and make decisions. Schedule a follow-up appointment or set up a scheduled phone call to allow for needed time. Offer time limits that are acceptable to the patient and for medical necessity. Patients tend to rely heavily on their doctor’s advice, so they may have trouble deciding between different options.
How are medical decisions made in the Chinese culture?

Understanding relationships

- The Chinese culture emphasizes loyalty to family and devotion to traditions and puts less emphasis on individual feelings. Assess your patient’s kinship relationships and determine which family members are most influential in decision making. When possible, engage the whole family in discussions that involve decisions and education about care.

- Be aware of the importance of family members serving in caregiver roles and consider extending visiting hours. Explain the visitation policy before admission or surgery so that the family knows what to expect.

- Bad medical news is often shielded from the patient by the family in the belief that telling the patient will only make the patient’s condition worse.

- Ask your patient whom they want included in medical decisions. If patients do not want to make medical decisions for themselves, let them know they need to prepare a Durable Power of Attorney for health care.

Building bridges between traditional remedies and Western health care

Your patient may use foods and herbs to restore yin/yang balance. In addition to special foods, your patient may use other traditional Chinese remedies as an initial approach for healing, especially during the early stages of illness. Some traditional Chinese therapies, including massage, acupuncture, and moxibustion, are commonly used as an adjunct to Western medicine.

Your patient may prefer to drink only hot liquids (water or tea) when sick or postpartum.

Patients may try traditional approaches first, and will seek Western medical care if these treatments fail. Patients may occasionally delay seeking care out of concern for communication barriers, costs, etc. As a result, patients may present at the medical center acutely ill.

- Ask your patient, “What do you call your problem? When did it start? What do you think caused the problem? Have you taken any medicines or herbs? What results have you had from the medicines or herbs? Do you believe the illness is serious? How can I help you?”

- Build bridges between traditional medicine and Western care. When considering traditional practices, determine when the remedies are beneficial, neutral, or harmful. Incorporate beneficial and neutral remedies into the plan of care, such as dietary advice. Consider potential drug interactions.
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 → Providers → Resources → Initiatives → Cultural competency and www.keystonefirstchc.com → 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.

Privacy practices

Keystone First and Keystone First CHC are committed to protecting the privacy of our member and Participant health information, and to complying with applicable federal and state laws that protect the privacy and security of a member’s/Participant’s health information. Consistent with this commitment, we have established basic requirements for the use or disclosure of member and Participant protected health information (PHI). For a complete and detailed description of our routine uses and disclosures of PHI, as well as the organization’s internal protection of oral, written, and electronic PHI, please visit www.keystonefirstpa.com → Providers → Resources → Communications → HIPAA and www.keystonefirstchc.com → Participants → Participant rights, responsibilities, and privacy.

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 become concerned about or identify potential fraud or abuse, please contact us by:

• Calling the toll-free Fraud Tip Line at 1-866-833-9718.
• Emailing 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 recently launched a webpage dedicated to addressing these issues and mandatory screening information. Visit www.keystonefirstpa.com → Providers → Resources → Manuals, guides and training → Fraud, Waste, Abuse and Mandatory Screening Information and www.keystonefirstchc.com → 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 Keystone First and Keystone First CHC.
- How to return improper payments or overpayments to us.
- Information on provider mandatory fraud, waste, and abuse training.

Note: 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.
- Keystone First CHC long-term services and supports (LTSS) providers, go to www.surveymonkey.com/r/577CX62.
Flu reminder

Please review these Keystone First and Keystone First CHC billing instructions.

Participating providers will be reimbursed for the administration of the seasonal flu vaccine to children and adults for the following procedure codes:

<table>
<thead>
<tr>
<th>Code</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>90630</td>
<td>Influenza, quadrivalent (IIV4), split virus, preservative free, intradermal</td>
</tr>
<tr>
<td>90654</td>
<td>Influenza, trivalent, split virus, 18–64 years, intradermal use, preservative free</td>
</tr>
<tr>
<td>90655</td>
<td>Influenza, trivalent, split virus, 6–35 months, preservative free</td>
</tr>
<tr>
<td>90656</td>
<td>Influenza, trivalent, split virus, 3 years and over, preservative free</td>
</tr>
<tr>
<td>90657</td>
<td>Influenza, trivalent, split virus, 6–35 months</td>
</tr>
<tr>
<td>90658</td>
<td>Influenza, trivalent, split virus, 3 years and older</td>
</tr>
<tr>
<td>90660</td>
<td>Influenza virus vaccine, trivalent, live (LAIV3) for intranasal use</td>
</tr>
<tr>
<td>90661</td>
<td>Influenza, derived from cell cultures, subunit, preservative and antibiotic free, intramuscular</td>
</tr>
<tr>
<td>90662</td>
<td>Influenza, split virus, 65 years and older, enhanced immunogenicity via increased antigen content, intramuscular use, preservative free</td>
</tr>
<tr>
<td>90672</td>
<td>Influenza, quadrivalent, live, intranasal, 2–49 years</td>
</tr>
<tr>
<td>90673</td>
<td>Influenza, quadrivalent, split virus, derived from recombinant DNA (RIV3), hemagglutinin (HA) protein only, preservative and antibiotic free, intramuscular</td>
</tr>
<tr>
<td>90674</td>
<td>Influenza, quadrivalent (ccIIV4), derived from cell cultures, subunit, preservative and antibiotic free, intramuscular use</td>
</tr>
<tr>
<td>90682**</td>
<td>Influenza, quadrivalent (RIV4), derived from recombinant DNA, hemagglutinin protein only, preservative and antibiotic free, intramuscular, 18 and over **Payable when deemed medically necessary and billed with the appropriate egg allergy diagnosis code</td>
</tr>
<tr>
<td>90685</td>
<td>Influenza, quadrivalent, split virus, 6–35 months, preservative free, intramuscular</td>
</tr>
<tr>
<td>90686</td>
<td>Influenza, quadrivalent, split virus, preservative free, 3 years and older, intramuscular</td>
</tr>
<tr>
<td>90687</td>
<td>Influenza virus vaccine, quadrivalent, split virus, 6–35 months of age, intramuscular</td>
</tr>
<tr>
<td>90688</td>
<td>Influenza virus vaccine, quadrivalent, split virus, 3 years and older, intramuscular</td>
</tr>
<tr>
<td>90756</td>
<td>Influenza virus vaccine, quadrivalent (ccIIV4), derived from cell cultures, subunit, antibiotic free, 0.5 mL dosage, for intramuscular use</td>
</tr>
</tbody>
</table>

continued on page 12
• Reimbursement for administration of seasonal flu vaccine to members over age 18 includes the cost of the vaccine.

• Providers administering seasonal flu vaccine to members over age 18 should obtain the vaccine and supplies from their regular vaccine supplier.

• Reimbursement for administration of seasonal flu vaccine to members 18 and under is an administration fee only.

• Seasonal flu vaccines for children (up to age 18) are provided free through the Pennsylvania Department of Health’s Vaccines for Children (VFC) program.

• Philadelphia County primary care providers (PCPs) should contact the Philadelphia VFC program at 1-215-685-6728. The program is administered by the Philadelphia Department of Public Health Division of Disease Control Immunization Program.

• Providers in all other Pennsylvania counties should contact the Pennsylvania Department of Health at 1-888-646-6864.

*Reminder: Keystone First members and Keystone First CHC Participants (age 9 and older) can also be referred to their local participating pharmacy for flu vaccination.
Pregnancy and dental care

As you are aware, oral health is an important component of general health and should be maintained during pregnancy.

Oral health care during pregnancy is safe and should be recommended to improve the oral and general health of your patients. Improved oral health of women may decrease transmission of potentially cariogenic bacteria to infants and reduce children's future risk of caries.

Take these steps to educate your patients on the safety of oral health care during pregnancy.

- Reassure your patients that prevention, diagnosis, and treatment of oral conditions, including dental X-rays (with shielding of the abdomen and thyroid) and local anesthesia with epinephrine such as bupivacaine, lidocaine, mepivacaine, are safe during pregnancy.

- Remember to inform your pregnant patients that conditions that require immediate treatment, such as extractions, root canals, and restoration (amalgam or composite), of untreated caries may be managed at any time during pregnancy. Delaying treatment may result in more complex problems.

- For patients with vomiting secondary to morning sickness, hyperemesis gravidarum, or gastric reflux during late pregnancy, the use of antacids or rinsing with a baking soda solution (i.e., 1 teaspoon of baking soda dissolved in 1 cup of water) may help neutralize the associated acid.

- Reinforce routine oral health maintenance, such as limiting sugary foods and drinks, brushing twice daily with fluoridated toothpaste, flossing once daily, and going to dental visits twice a year.

It is also helpful to reach out to your patient’s obstetrician to develop a working relationship should consultation be needed later. Questions you may want to ask are:

- When is the expected delivery date?
- Is this a high-risk pregnancy? If so, are there any special concerns or contraindications?
- Is there a recommended medication for pain control?

Remember: During pregnancy, women may be at increased risk for oral conditions such as gingivitis and dental caries, and should be counseled on the importance of good oral hygiene throughout the pregnancy. Regular and emergency dental care, including the use of local anesthetics and radiographs, is safe at any stage during pregnancy.

Sources


Participant rights and responsibilities

We are committed to treating our Participants with dignity and respect. Keystone First CHC, its network providers, and other service providers may not discriminate against Participants based on race, sex, religion, national origin, disability, age, sexual orientation, or any other basis prohibited by law. Our Participants also have specific rights and responsibilities. The complete list is available on the Participants and Providers sections of www.keystonefirstchc.com.

Covered benefits

All Participants are entitled to the medical benefits provided under the Pennsylvania Community HealthChoices program. Additionally, Participants who qualify through DHS are eligible to receive LTSS benefits under the same program. For more information about benefits and services, go to Section 1 of the Provider Manual at www.keystonefirstchc.com → Providers → Provider manual and forms.

Benefit limits and copayments may apply. The most current version of the Participant copayment schedule is available at www.keystonefirstchc.com → Providers → Resources → Participant information.

Credentialing information

Please remember that Keystone First CHC encourages 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 CAQH, credentialing information is provided through 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 Plan credentialing guidelines and related forms, as well as practitioners’ credentialing and recredentialing rights, is available at www.keystonefirstchc.com → 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.
Practitioner credentialing rights

After the submission of the application, 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 Keystone First CHC.
- 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 request any of the above, please contact our Credentialing department at:
Keystone First CHC
Attn: Credentialing Department
200 Stevens Drive
Philadelphia, PA 19113

Do you know your Account Executive?

Your Account Executive is your liaison with Keystone First CHC. They are responsible for orientation, continuing education, and problem resolution for our network providers. To access our list of provider Account Executives, please visit www.keystonefirstchc.com → Providers → Quick contact information.

Call your Account Executive:

- To arrange for orientation or in-service meetings.
- For service calls.
- To respond to any questions or concerns.
- To report any change in your status, such as a phone number, address, Taxpayer Identification Number, or additions/deletions of physicians at your practice.
Did you know you can submit claim investigation inquiries via the Claim Inquiry function in NaviNet?

The Claim Inquiry function in NaviNet® allows providers to submit a claim inquiry on claims that were previously finalized. For each submitted transaction, users receive an electronic response indicating if the claim was adjusted or an explanation for why it was not adjusted. This feature is for individual claims. If users have a large claim project, please continue to contact your Provider Account Executive for assistance.

You can find the full NaviNet Claims Inquiry User Guide at www.keystonefirstchc.com → Providers → Resources → NaviNet.

This guide was designed to help you:

- Submit a claim inquiry.
- Review or search the investigation list.
- Enable notifications.
- Start a new claim investigation.

Some of the reasons for claim investigation include:

- Eligibility updated.
- Authorization updated or on file.
- Third-party liability (TPL) or coordination of benefits (COB) changed.
- Duplicate payment received.
- Claim underpaid.
- Claim overpaid.

Please contact your Account Executive should you have questions or require further assistance.

Access to case management

Keystone First CHC has multiple programs and resources available for providers caring for our Participants who may require complex case management services, such as:

- Disease management and education.
- Discharge planner referral.
- Participant or caregiver referral.
- Practitioner referral.

Access to Utilization Management (UM) department

The UM department is available at least eight hours a day during normal business hours for inbound collect or toll-free calls regarding UM issues. You can reach UM staff at 1-800-521-6622.

After business hours and on weekends and holidays, please contact the on-call nurse through our Participant Services number, 1-855-332-0729.
Keystone First hosts its first Patient-Centered Medical Home (PCMH) symposium on social determinants of health

On November 4, 2019, Keystone First hosted its first symposium on social determinants of health for our PCMH providers in coordination with the Philadelphia Eagles at Lincoln Financial Field.

Our keynote speaker, Dr. Daniel R. Taylor D.O., FAAP, FACOP, Associate Professor at Drexel University College of Medicine and Director of Community Pediatrics and Child Advocacy at St. Christopher’s Hospital for Children, spoke on the necessity of understanding social influences of health, resiliency, and what the provider community can do about it. This moving keynote speech led to a panel discussion on best practices to assess and resolve unmet social needs. Our panelists included:

- Dr. Saba Khan, MBBS, MSCE, FAAP, Director, CHOP Food Pharmacy.
- Chinwe Onyekere, MPH, System Director, Health Equity and Graduate Medical Education, Main Line Health System.
- Jenn Lydic, LSW, MPA, Social Services Manager, PHMC Health Network.
- Amanda Garlen, LCSW, Behavioral Health Director, Project HOME.
- Angela Poole, Manager, Medical Economics, Keystone First.

In addition to our keynote speaker and panelists, we welcomed seven community resources:

- Career Wardrobe.
- Philabundance.
- The Foundation for Delaware County.
- Hunger Coalition.
- Catholic Social Services.
- Broad Street Ministry.
- Family Food.

This well-received and thought-provoking event may lead to future symposiums dedicated to this timely topic.
Have you called Provider Services lately?

Keystone First's Provider Network Management department works hand in hand with the Provider Services department to answer concerns and offer assistance, so you may not need to call your Provider Account Executive with questions.

Both departments make every attempt to ensure all network providers receive the highest level of service available. The Provider Services department can be reached 24 hours a day, seven days a week.

Call the Provider Services department at 1-800-521-6007 to:

- Ask about claims issues.
- Ask about provider identification numbers.
- Ask about notifications.
- Verify member eligibility/benefits.
- Request forms or literature.
- Ask about policies and procedures.
- Report member noncompliance.
- Get the name of your Provider Account Executive.

Keystone First maintains commendable accreditation status from the NCQA

Keystone First members continue to be satisfied with their care and overall experience with our Plan, which measures member satisfaction directly from the annual results of the Consumer Assessment of Healthcare Providers and Systems (CAHPS®) survey.

Areas in which we continue to do well:

- Overall health care received by members.
- Overall personal doctor ratings.
- Overall specialist ratings.
- Experience with customer service.

Area in which we improved in satisfaction:

Shared decision making (10% increase): important for members to discuss the reasons to take or not take medicine, asked preference for medicine, and relevant additional recommendations.

Areas that we are committed to improving:

Include balancing our care management efforts for the following evaluations:

- Getting care quickly.
- Getting needed care.
- Care coordination.

As we move closer to a new year, we are looking forward to working with you to meet our mutual goals in providing the best care possible to our members. If you have feedback or suggestions for improvement, please reach out to us through our mailbox at provider.communications@keystonefirstpa.com.
Access to case management

Do you have Keystone First members who may require complex case management services? We have the following programs and resources available:

- Integrated Health Care Management.
- Let Us Know program.
- Special Needs Unit.
- Bright Start® program for pregnant members.

For more information and contacts for these programs, please visit [www.keystonefirstpa.com → Providers → Resources](http://www.keystonefirstpa.com → Providers → Resources).

Provide critical blood lead level screenings in your office today!

Each year in October, National Lead Poisoning Prevention Week (NLPPW) is observed to increase lead poisoning prevention awareness in an effort to reduce childhood exposure to lead — but awareness should be year-round!

Here are some quick facts:

- All Medicaid members are required to be tested for lead levels.
- All Medicaid-eligible children are considered at risk for lead toxicity and must receive blood lead level screening tests for lead poisoning starting at 9 months old, as well as other ages based on history and risk assessment.
- PCPs are required (regardless of responses to the lead screening questions) to ensure that children be screened for lead toxicity from 9 months to 18 months old and again from 2 years to 6 years old. Risk questions should be asked at every visit thereafter.
- Keystone First members with a venous lead draw showing an elevated blood level of ≥5 μl/dl are eligible for an environmental lead investigation.

To help PCPs comply with these standards, you are reimbursed for blood level screening services if they are performed in your office using the MEDTOX process.

MEDTOX Laboratories provides PCPs with supplies to conduct convenient in-office blood level screenings, via finger sticks, as well as the mailing supplies to return the samples back to MEDTOX for testing and processing. PCPs that use this process are reimbursed a $10 fee after submitting a claim with the CPT code 83655.

Visit our website at [www.keystonefirstpa.com → Providers → Resources → Lead Level](http://www.keystonefirstpa.com → Providers → Resources → Lead Level) for the complete process and appropriate forms. If you have questions, please reach out to your Provider Account Executive or Provider Services at 1-800-521-6007.
Do you have a patient who could use a helping hand? The Let Us Know program can help!

Keystone First patients that might be referred to the Let Us Know program are those who are:

• Not showing up for appointments or follow-up care.
• In need of education on proper use of the emergency room.
• In need of behavioral health/drug or alcohol assistance.
• Pregnant and in need of Bright Start maternity program.
• In need of help for any other reason.

How can you “let us know” about members who need intervention?

1. Call our Rapid Response and Outreach Team at 1-800-573-4100 from 8 a.m. to 6:30 p.m.

2. Use the Member Intervention Request Form (sample attached), available online at www.keystonefirstpa.com → Providers → Resources → Programs → Let Us Know. Fax it to 1-800-647-5627.

You will be notified of the outcome after all outreach has been attempted. This will be done based on your selected preference on the Member Intervention Request form or through your conversation with the Rapid Response and Outreach Team.