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Keystone First

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Welcome, Keystone First – CHIP Enrollees and Providers!

On July 1, 2025, Independence Blue Cross (IBX) transitioned their Pennsylvania Children's Health Insurance Program (CHIP) plan to the Keystone First Family of Health Plans. We will administer this product using the name Keystone First – CHIP.

We look forward to welcoming eligible children and teens under the age of 19 in Bucks, Chester, Delaware, Montgomery, and Philadelphia counties to the Keystone First – CHIP family, and to working with our contracted providers and their office staff to help meet Enrollees' health care needs.

Please visit the Keystone First – CHIP Provider Center at www.keystonefirstchip.com for a wealth of information and resources, or contact your Provider Account Executive.

The updated 2025 Keystone First and Keystone First Community HealthChoices (CHC) Provider Manuals are now available online

Updates and changes include:

- Home Health Care: Added All Home Health Agencies are required to validate any home health service provided to Participants using Electronic Visit Verification (EVV).
- Recipient Restriction Program: Updated review criteria.
- NaviNet Supports Back Office Functions: Added Provider Directory Information Form details.
- Cultural Responsiveness: Updated the top 15 written non-English languages in Pennsylvania.

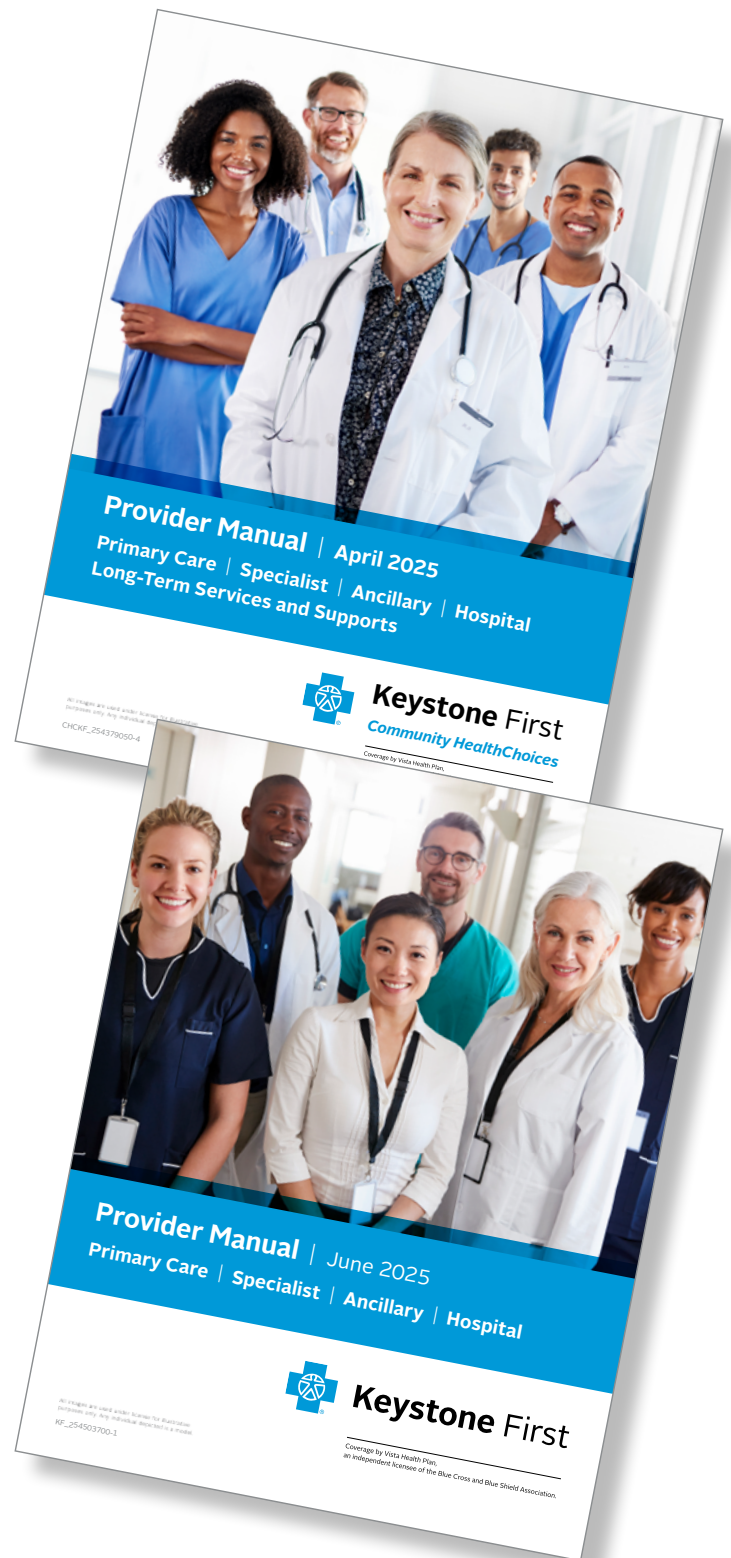
For the complete list of 2025 manual updates and changes, and to access the manual in its entirety, visit www.keystonefirstpa.com > **Providers > Provider manual and forms** and www.keystonefirstchc.com > **For Providers > Provider manual and forms**.

Additionally, the updated 2025 Keystone First and Keystone First CHC 2025 Medical Provider Claims Filing Instructions are now available online

Some important updates:

- Information on Availity as a clearinghouse choice and contact information
- Updated Change Healthcare to Optum/Change Healthcare
- Changes to disputes and appeals addresses

You can access the 2025 Medical Provider Claims Filing Instructions on our websites at:
<http://www.keystonefirstpa.com> > **Providers > Claims and billing > Claims filing instructions**
<http://www.keystonefirstchc.com> > **For Providers > Claims and billing > Claims filing instructions for medical providers**.



Important reminders regarding fraud, waste, and abuse

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

- Calling the toll-free fraud, waste, and abuse hotline at **1-866-833-9718**
- Emailing **fraudtip@amerihealthcaritas.com**
- Mailing a written statement to:
Special Investigations Unit
Keystone First/Keystone First Community HealthChoices
P.O. Box 7317
London, KY 40742



For more information about Medical Assistance (Medicaid) fraud, waste, and abuse, please visit the Department of Human Services (DHS) website at **<https://www.pa.gov/agencies/dhs/report-fraud/medicaid-fraud-abuse.html>**.

We are committed to detecting and preventing acts of fraud, waste, and abuse and have webpages dedicated to addressing these issues and mandatory screening information. Visit: **www.keystonefirstpa.com > Providers > Resources > Fraud, Waste, Abuse and Mandatory Screening Information** and **www.keystonefirstchc.com > For Providers > Resources > Fraud, waste, abuse and mandatory screening information**.

Topics 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 **<https://www.surveymonkey.com/r/9MQ7S8F>**.
- Keystone First CHC long-term services and supports (LTSS) providers, go to **<https://www.surveymonkey.com/r/577CX62>**.





Chlamydia screening made easy

Chlamydia is one of the most common sexually transmitted infections (STIs), and it often shows no symptoms. If left untreated, it can lead to serious health issues, including pelvic inflammatory disease and infertility, especially in women.

To improve early detection and treatment, HEDIS guidelines recommend annual chlamydia screening for sexually active women ages 16 to 24. Members and Participants can now use self-collection test kits at LabCorp Patient Service Centers.

These discreet, easy-to-use options help remove barriers to in-office visits, increase screening compliance, and contribute to improved HEDIS scores. By promoting self-collection, providers and health plans can enhance patient engagement and support better health outcomes.

Post-office-visit Member and Participant experience survey

Members and Participants receive a Member/Participant experience text survey 30 days after visiting with their provider.

- The purpose of the survey is to provide real-time insight into our Members' and Participants' experiences.
- An added benefit is that it highlights trends we see on the annual CAHPS survey.
- Survey results to date show:
 - Members and Participants are satisfied with their provider appointments, with a performance metric of 90% or above in all responses.
 - The average appointment wait time was less than 45 minutes.

Please be sure that your team is aware of our appointment access to care standards and the language and translation services available for Members and Participants.

2024 Provider Satisfaction Survey Summary

Keystone First sincerely thanks the practices that were able to participate in the 2024 Provider Satisfaction Survey, and we value your feedback and opinions.

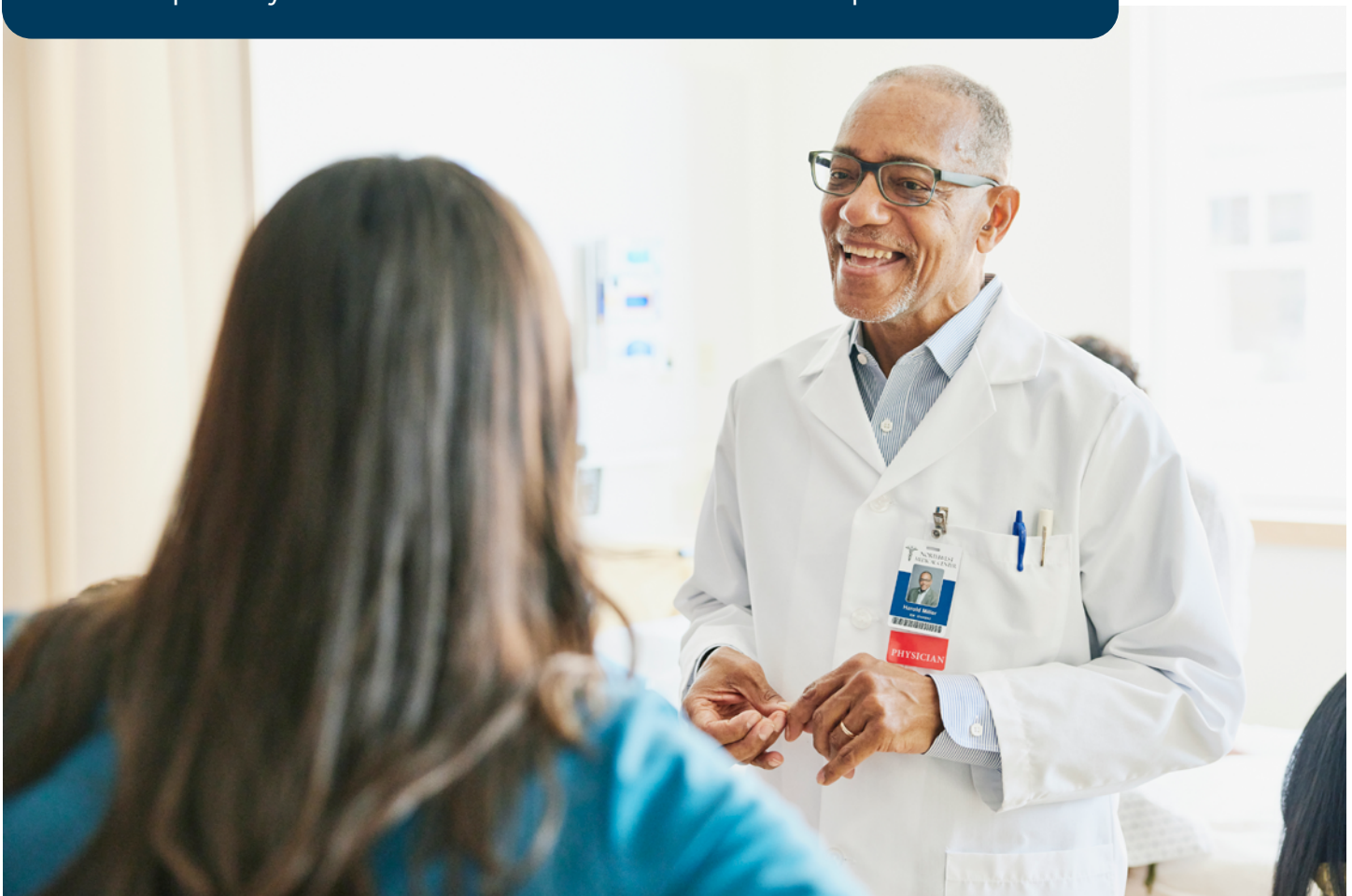
We are so encouraged and proud of your commitment to cultural competency.

Practices surveyed scored high in this category and are committed to providing culturally competent care to their patients. For example:

- **98%** use professional guidelines or best practices when working with Members from other religions, cultures, etc., representing a **3% increase** from the prior year.
- **51%** conduct the medical visit using the Members' preferred language, which is a **9% increase** from prior year.
- **65%** indicated their staff received LGBTQIA+ cultural competency training, and, of those, **84%** received the training in 2024.

Thank you for your continued support of our Members and your dedication to **ongoing training** in the following areas:

- Cultural competency
- Medical bias
- LGBTQIA+ cultural responsiveness



Home and community-based services (HCBS) Provider Satisfaction Survey summary

Keystone First CHC sincerely thanks the HCBS providers who participated in the 2024 Provider Satisfaction Survey. We value your insight and appreciate the time taken to complete the survey.

We are so encouraged and proud of your commitment to cultural competency. Providers surveyed scored high in this category and are committed to providing culturally competent care to Participants. For example:

- 99% use professional guidelines or best practices when working with Participants from other religions, cultures, etc.
- 73% conduct visits using the Participant's preferred language.

Thank you for your continued support of our Participants and your dedication to ongoing training in the following areas:

- Cultural competency
- Medical bias
- LGBTQIA+ cultural responsiveness



The Updated 2025 Keystone First CHC HCBS Provider Claims Filing Instructions are now available online

Some important updates:

- Information on Availity as a clearinghouse choice and contact information
- Updated Change Healthcare to Optum/Change Healthcare
- Changes to disputes and appeals addresses

To access the 2025 HCBS Provider Claims Filing Instructions simply navigate to the provider center at: **www.keystonefirstchc.com > For Providers > Claims and billing > Claims filing instructions for HCBS providers.**

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 long-term services supports (LTSS) needs.

The 2025 Participant Advisory Committee meeting schedule is as follows:

| Date | Time | Location |
|--------------|------------------|---|
| September 23 | 11 a.m. – 1 p.m. | Keystone First Wellness and Opportunity Center 1929 W. 9th Street, Chester, PA 19013 |
| December 18 | 11 a.m. – 1 p.m. | Keystone First Wellness and Opportunity Center 1929 W. 9th Street, Chester, PA 19013 |

We are excited to share that we are actively recruiting a diverse group of Participants and providers!

- 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 Relations Outreach team at advisoryacpchc@amerihealthcaritas.com with the contact information of the potential committee member, and we will do the rest!

Office of Long-Term Living (OLTL) critical incident reporting annual training is due by December 31

Provider and service coordination entity staff must be trained annually on preventing abuse and exploitation of Participants, critical incident reporting, and mandatory reporting requirements. OLTL offers provider and service coordination entity online training to meet this mandatory annual training requirement. After finishing each module, you will be linked to a webpage to register your completion and print your certificate. Note that you will need your provider number/service location or Federal Employee Identification Number (FEIN) to complete the registration page at the end of each module. **This mandatory annual training must be completed by December 31.**

Training for Incident Management and Protective Services is available on OLTL contractor Dering Consulting Group's website: <https://deringconsulting.com/OLTL-Provider>.



The updated 2025 Keystone First and Keystone First CHC dental provider supplements are now available online

- Procedures Requiring Prior Authorization: Updated information on the process for Hospital/Special Procedure Unit (SPU)/Ambulatory Surgical Center (ASC) outpatient admissions for dental services.
- Paper Claim Submission: Updated information needed for paper claim submission.
- Corrected Claims: Added instructions for Providers to make corrections to incorrectly submitted claims during the timely filing period.
- Dental Services Requiring Prior Authorization or Retrospective Review: Updated the list of procedures requiring Authorization and Retrospective Review.
- Dental Benefit Grid: Updated procedure codes and eligibility criteria where applicable.

For the complete list of the 2025 supplement updates and changes, and to access the entire Dental Provider Supplement, visit **www.keystonefirsttpa.com > Providers > Resources > Dental or **www.keystonefirstchc.com > For Providers > Resources > Dental program.****

Formulary changes

The following products will have new or updated quantity limits.

Members/Participants currently receiving more than the quantity limit, and for whom it is not medically advisable to change therapy, will require prior authorization effective **June 16, 2025**.

| Formulary limits | |
|---|----------------------|
| Product list | Daily quantity limit |
| Palonosetron HCl Intravenous Solution 0.25 mg/5 mL | 0.36 mL |
| Retevmo oral tablet 80 mg | 2 tablets |
| Vioice oral tablet therapy pack 50 mg | 1 tablet |
| Crexont oral capsule extended release 52.5–210 mg and 87.5–350 mg | 6 capsules |
| Austedo XR oral tablet extended release 24-hour 24 mg | 1 tablet |
| Onyda XR oral suspension extended release 0.1 mg/mL | 4 mL |

Note: **Additional prior authorization criteria may apply.** Please refer to most recent drug formulary and prior authorization information available online at: **www.keystonefirsttpa.com > Pharmacy > Pharmacy Homepage** or **www.keystonefirstchc.com > For Providers > Pharmacy services**

Save time! Submit all your pharmacy prior authorization requests online

Providers can submit electronic prior authorization (ePA) requests either through their electronic health record (EHR) software or via the following online portals:

- **CoverMyMeds**
- **Surescripts**



Please visit our websites for:

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

No prior authorization required for fluticasone HFA inhalers for Members under the age of 19

As a reminder, Keystone First formularies have aligned with the Pennsylvania Department of Human Services (DHS) Statewide Preferred Drug List (PA PDL) in updating the coverage status of the **fluticasone HFA inhaler** (generic Flovent HFA). **This drug is now covered without prior authorization for Keystone First Members under the age of 19.**

Please consider this additional option when caring for your pediatric asthma patients.

Coverage status for other PA PDL Preferred Agents in the “Glucocorticoids, Inhaled” single-ingredient

inhaled corticosteroid (ICS) class remain unchanged at this time. Preferred agents include:

- Arnuity Ellipta
- Asmanex HFA
- Asmanex Twisthaler
- budesonide 0.25 mg/2 mL and 0.5 mg/2 mL (respules)
- Pulmicort Flexhaler
- QVAR Redihaler

Consider prescribing preferred adalimumab biosimilar products

Keystone First/Keystone First CHC adheres to the preferred and non-preferred status of drugs included in the Pennsylvania (PA) Department of Human Services (DHS) statewide preferred drug list (PDL), which includes Humira and several lower-cost biosimilar adalimumab products.

Humira is priced at approximately \$7,000/month versus the biosimilar products priced around \$1,000/month. Given the availability of biosimilar alternatives that provide the same clinical efficacy and safety at a significantly lower cost, we ask that you consider a biosimilar to help support the efficient use of finite health care dollars while maintaining quality care.

We are respectfully asking your practice to consider prescribing one of the PA PDL-preferred adalimumab biosimilars if any of your Keystone First/Keystone First CHC patients are currently prescribed Humira or are starting adalimumab therapy. The biosimilars are:

- Adalimumab-fkjp
- Amjevita (adalimumab-atto)
- Hadlima (adalimumab-bwwd)
- Yusimry (adalimumab-aqvh)

Scan the QR codes below to access FDA fact sheets regarding biosimilars to address any concerns you may have regarding the safety and efficacy of these biosimilar agents.

Overview of
Biosimilar Products



Biosimilar Regulatory
Review and Approval



Interchangeable
Biological Products



Help us improve Member/Participant and provider relationships by sharing your demographic data

At Keystone First and Keystone First CHC we believe quality care starts with informed choice and culturally responsive connections between Members/Participants and providers. Keystone First and Keystone First CHC collects, stores, and reports race, ethnicity, and language (REL) data from providers and their offices that may be made available to Members/Participants upon request.

By sharing your demographic information — including but not limited to race, ethnicity, and/or languages spoken — you help empower our Members and Participants to make informed decisions about their care, improve health equity, and support stronger health outcomes for the communities we serve.

This data allows us to:

- Provide Members/Participants with meaningful, choice-based information when selecting a provider.
- Tailor resources and services to meet the cultural and linguistic needs of our diverse Member/Participant population.
- Monitor and address health disparities across our network.

Why is language data necessary?

The first step to strong patient-centered care is direct communication. Language is more than a communication tool: We express emotions, retain critical information, and make decisions in the language that is most preferred. Providing language data that is spoken by the provider and their staff is the first step in strong communication between patients and providers.

Spoken language refers to the language in which a Member/Participant prefers to speak about their health care.

Written language refers to the language in which a Member/Participant prefers to read or write about their health care.

How do we collect this information?

- Keystone First and Keystone First CHC requests its contracted provider network voluntarily share their REL data, as well as their office support staff's languages.
- Keystone First and Keystone First CHC requests and collects network provider REL data using the same Office of Management and Budget (OMB) categories it uses to collect Members'/Participants' REL.

How do we store and share this information?

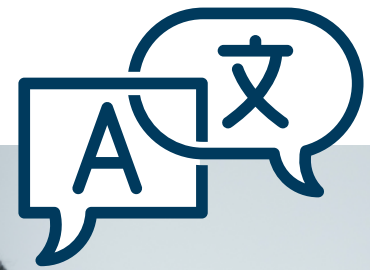
REL data is housed in a database that is made available to Members and Participants.

1. Gender data is available through Keystone First and Keystone First CHC provider directory.
2. Provider's language, staff's language, and additional language services are also available through the provider directory.
3. Information on race and ethnicity is only made available to Members and Participants upon request.

The collection of accurate race, ethnicity, and language data is critical in connecting Members and Participants with providers who may better understand their particular needs and language. Reliable data is crucial in tracking health care disparities and developing effective programs to address them. Thank you in advance for providing us with this information to ensure that our Members and Participants with cultural and linguistic needs have access to the best possible health care and services.

Sources

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5. Ivy Maina et al., “A Decade of Studying Implicit Racial/Ethnic Bias in Healthcare Providers Using the Implicit Association Test,” *Social Science & Medicine*, Vol. 199, February 2018, pp. 219 – 229.
6. Salimah Meghani et al., “Patient–Provider Race-Concordance: Does It Matter in Improving Minority Patients’ Health Outcomes?” *Ethnicity & Health* Vol. 14, No. 1, February 2009, pp.107 – 130.
7. Megan Johnson Shen, et al. “The Effects of Race and Racial Concordance on Patient-Physician Communication: A Systematic Review of the Literature,” *J Racial Ethn Health Disparities*. 2018;5(1):117-140. doi:10.1007/s40615-017-0350-4
8. Richard Street et al., “Understanding Concordance in Patient-Physician Relationships: Personal and Ethnic Dimensions of Shared Identity,” *The Annals of Family Medicine*, Vol. 6, No. 3, May 1, 2008, pp. 198 – 205.



Language and translation services

To help make sure 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 phone rates.

Visit **www.keystonefirstpa.com** > **Providers > Resources > Initiatives > Cultural Competency** and **www.keystonefirstchc.com** > **Providers > Training** 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 **1-866-221-1301**.

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 that meets their needs. For TTY services, please call **1-855-235-4976**.



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