

Your provider account executive: \_\_\_\_\_

Phone number: \_\_\_\_\_

Keystone First – CHIP

Payer ID: 30070

## Provider Services | 1-800-521-6007

### Enrollee Services | 1-844-472-2447

24 hours a day, 7 days a week.

### NaviNet | [www.navinet.net](http://www.navinet.net) | 1-888-482-8057

Provides access to Enrollee eligibility, claims status inquiry, submission of prior authorization requests, Care Gap and Enrollee Clinical Summary reports, and electronic copies of remittance advices and panel rosters.

### Behavioral Health Services — PerformCare® | 1-877-244-7124

### Dental services | 1-855-343-7401

Access detailed information at

<https://www.dentaquest.com/en/providers/pennsylvania>

### Vision services | 1-800-773-2847

Administered by Davis Vision.

### Laboratory services

Except for STAT services, lab services should be directed to the lab found on the Enrollee's ID card.

### Family planning services

Enrollees self-refer for routine family planning services and may go to any physician or clinic.

### CONNECT Helpline | 1-800-692-7288

For family inquiries on Pennsylvania's Early Intervention System.

### PA tobacco cessation information | 1-800-QUIT-NOW

### Pharmacy services | 1-844-779-2447 | Fax: 1-833-873-2908

Prior authorization is required for many multisource branded injectable products, as well as for non-preferred and non-formulary medications. Please visit [www.keystonefirstchip.com](http://www.keystonefirstchip.com) > **Pharmacy > Formulary** for up-to-date information.

### Fraud, waste, and abuse reporting | 1-866-833-9718

- Email: [fraudtip@amerihealthcaritas.com](mailto:fraudtip@amerihealthcaritas.com)
- U.S. mail: Special Investigations Unit  
Keystone First – CHIP  
3875 West Chester Pike  
Newtown Square, PA 19073

## Emergency room (ER) policy

- Prior authorization is not required for ER visits.
- Participating providers are not required to obtain prior authorization for emergent short procedure unit (SPU) or emergent 23-hour observation stays.

## Referrals

**An official, plan-issued paper or electronic referral is not required. Primary care practitioners (PCPs) should:**

– “Refer” Enrollees to specialists; this may be in the form of a prescription, a phone call, sending a letter, or faxing a request to the specialist.

**Specialists should:**

- Not turn Enrollees away if there has been no communication or indication of reason for the visit from the PCP. Contact the PCP office.
- Contact the PCP if the Enrollee needs to be referred to another specialist for consultation, treatment, etc.

**Self-referral services include, but are not limited to, the list below:**

- Emergency services
- Routine dental services
- Routine eye exams
- Family planning
- OB visits
- GYN visits
- Chiropractic initial visits (by an in-network provider)

### Prior authorization | 1-877-486-2447 | Fax: 1-844-586-3296

The most up-to-date and detailed listing of services that require authorization can be found by using the prior authorization lookup tool on the Provider Center at [www.keystonefirstchip.com](http://www.keystonefirstchip.com).

## Outpatient radiology services

The following require prior authorization by Evolent Specialty Services, Inc. (Evolent) at [www1.radmd.com](http://www1.radmd.com) or **1-800-429-1779**:

- CT
- MRI/MRA
- PET scan
- Nuclear cardiology

## Contact information



**Keystone First**

Coverage by Vista Health Plan,  
an independent licensee of the Blue Cross and Blue Shield Association.

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**Electronic billing questions | 1-877-234-4271**

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**Peer-to-Peer Hotline | 1-833-762-4727**

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**Bright Start® | 1-800-521-6867 | Fax: 1-866-405-7946**

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**Case management and care coordination | 1-800-573-4100**

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**Credentialing | 1-833-806-2733**

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**Contracting | 1-866-546-7972**

## Websites and email addresses

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**PA Department of Human Services**  
<https://www.pa.gov/agencies/dhs.html>

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**Keystone First – CHIP website**  
[www.keystonefirstchip.com](http://www.keystonefirstchip.com)

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**For questions or suggestions, email**  
[provider.communications@keystonefirstpa.com](mailto:provider.communications@keystonefirstpa.com)

## All claims

Please indicate “Resubmitted” or “Corrected Claim” on the claim form (if applicable).

Keystone First – CHIP  
Claim Processing Department  
P.O. Box 21152  
Eagan, MN 55121

## Timely filing limits

**When submitting an explanation of benefits (EOB) with a claim, the dates and dollars must all match to avoid a rejection of the claim.**

Initial claims..... 180 days  
Resubmissions and corrections..... 365 days  
COB submissions after primary payment..... 60 days

## Provider disputes (informal)

**Dissatisfaction not concerning medical necessity:**

Keystone First – CHIP  
Informal Provider Dispute  
P.O. Box 21152  
Eagan, MN 55121

## Provider appeals

Written request for the reversal of a medical denial. Please indicate “Provider Appeals” on the envelope.

**Inpatient and Outpatient Clinical Appeals**

Clinical Provider Appeals Department  
Keystone First – CHIP  
P.O. Box 211352  
Eagan, MN 55121