



Your Provider Account Executive: _____

Phone Number: _____

Fax Number: 215-937-5343

Provider Services 1-800-521-6007

24 hours a day, 7 days a week

Member Services 1-800-521-6860

24 hours a day, 7 days a week

NAVINET | www.connect.navinet.net 1-888-482-8057

Find information on member eligibility, claims status inquiry, and electronic copies of your remittance advices and referrals.

Referrals 1-800-521-6007

Services requiring referrals:

- All Specialist Care Office Visits

Self-Referral Services **include:**

- Optometrist/Opticians
- Family Planning
- OB Visits
- GYN Visits
- Medicare covered services for members with Medicare A/B
- Chiropractic initial visit
- Diagnostic Tests/Procedures

1. Each referral is valid for 180 days starting from issue date
2. Each referral is valid for unlimited visits, unless otherwise specified.
3. Specialists should contact Provider Services to extend referral past 180 days and for additional services. No call to the PCP is necessary.
4. Referrals to Non-Participating providers always require prior authorization

Dental Services 1-800-341-8478

Administered by DentaQuest

Vision Services 1-800-773-2847

Administered by Davis Vision

Laboratory Services 1-800-521-6007

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

Family Planning Services 1-800-541-4560

Members self-refer to Keystone First

Family Planning..... **Fax 215-241-9945**

CONNECT Hotline 1-800-692-7288

For family inquiries on Pennsylvania's Early Intervention System

Pediatric Preventative (EPSDT) 1-888-765-9569

Available from 8:00 a.m. to 5:00 p.m., Mon–Fri.

Call for inquiries on EPSDT expanded services.

PA Tobacco Cessation Information 1-800-QUIT-NOW

Provider Reference Guide

All Prior Authorization phone/fax numbers, by department, are available on the reverse of this page

Services requiring prior authorization **include:**

- Elective hospital admissions
- Elective Air Ambulance Transportation
- Elective transfers for inpatient and /or outpatient services between acute care facilities
- Ambulance Transportation to and from Prescribed Pediatric Extended Care Center PPECC/Medical Daycare
- Transplant evaluations/consultations
- All DME rentals
- All DME/Prosthetics & Orthotics over \$500
- DME under \$500 not on MA Fee Schedule
- Wheelchairs (rental or sale), wheelchair accessories, & components regardless of cost or member age
- Diapers or Pullups® in excess of 200 items/month
- All diapers supplied by DME providers
- Enteral formula: age 21 & older - regardless of cost, under age 21 - in excess of \$200/month
- Physical, Speech, Occupational Therapy exceeding 24 visits in a calendar year
- Experimental and Investigational services or procedures
- Home Health, Home Infusion and Hospice Care
- Skilled Nursing Facility
- Specialists serving as PCP
- Chiropractic Treatment - following initial visit
- All non-emergent plastic or cosmetic procedures (except those immediately following traumatic injury) for example:
 - Blepharoplasty
 - Reduction Mammoplasty
 - Rhinoplasty
- Cardiac or Pulmonary Rehabilitation
- Any services/products not listed or in exceeding limits on the MA fee schedule
- Any service performed by a non-participating provider
- The following Diagnostic Tests/Procedures conducted in a Short Procedure Unit or Ambulatory Surgical Center:
 - Gastroplasty
 - Ligation and Stripping of Veins
 - Steroid injections or blocks for pain management
- Emergent Admissions require notification within 48 hours or first business day after the day services were rendered (by fax or phone).

Outpatient Radiology Services requiring prior authorization

by NIA 1-866-642-9700

- Outpatient PET Scans
- Nuclear Cardiology
- MRI
- CT Scans
- MRA

ER Policy 1-800-521-6007

- Prior Authorization is not required for emergency room visits.
- Participating Providers are not required to obtain prior authorization for emergent short procedure unit (SPU) or emergent 23 hour Observation stays.


Pharmacy Services 1-800-588-6767

Prior authorization is required for all prescriptions on multi-source branded products, Injectables and non-formulary medications.

- For pharmacy authorization Fax...1-888-981-5202
- Injectable questions and supplies 1-877-693-8275
- Claims questions (ARGUS) 1-800-522-7487



Contact Information

<p>All Claims</p> <p><i>Please indicate "Resubmitted" or "Corrected Claim" on the Claim Form</i></p>	<p>Keystone Mercy Health Plan Claims Processing Department P.O. Box 7115 London, KY 40742</p>	<p>Electronic billing questions: 1-877-234-4272</p> <p>PA Enrollment Services: 1-800-440-3989</p> <p>Peer to Peer Hotline: 1-877-693-8480</p>
<p>Family Planning Claims</p>	<p>Keystone First Family Planning P.O. Box 8369 Philadelphia, PA 19101-8369</p>	
<p>Provider Disputes (Informal)</p> <p><i>Dissatisfaction NOT concerning Medical Necessity</i></p>	<p>Keystone Mercy Health Plan Provider Disputes 200 Stevens Drive Philadelphia, PA 19113</p>	
<p>Provider Appeals (Formal)</p> <p><i>Written request for the reversal of a medical denial</i></p>	<p>Keystone Mercy Health Plan Provider Appeals Department P.O. Box 7307 London, KY 40742</p>	<p> Please indicate "Provider Appeals" on the envelope.</p>

Timely Filing Limits (When submitting an EOB with a claim, the Dates and the Dollars must all match to avoid a rejection of the claim.)

Initial claims.....	180 days
Resubmissions/Corrections.....	365 days
COB submissions after primary payment	60 days

Medical Assistance Transportation Program (MATP)

<u>County</u>	<u>Service Provider</u>	<u>Phone Number</u>
Bucks	Bucks Transportation.....	1-888-795-0740 (Local) 215-794-5554
Chester	Rover Community Transportation.....	1-877-873-8415 (Local) 610-594-3911
Delaware.....	Community Transit of Delaware County.....	1-866-450-3766 (Local) 610-490-3960
Montgomery	County Suburban Transit Network.....	(Local) 215-542-7433
Philadelphia	LogistiCare	1-877-835-7412 (Local) 215-542-7433

Nurse Call Line / 24 hours a day, 7 days a week 1-866-431-1514
A confidential line for members to ask health-related questions.

<u>Department</u>	<u>Fax Number</u>	<u>Phone Number</u>
Provider Service		1-800-521-6007
Member Services		1-800-521-6860
Prior Authorization	215-937-5322	1-800-521-6622
Adult Concurrent Review	215-937-7368	215-863-6425
Pediatric Concurrent Review.....	215-937-7370	215-863-6430
NICU Concurrent Review	215-937-7369	215-863-6447
OB Concurrent Review.....	215-937-7365	215-863-6443
Maternity Kick Data.....	215-937-7325	215-863-6475
Discharge Notification Review.....	215-937-7366	215-863-6477
Discharge Planning Review.....	215-937-7367	215-863-6454
DME Authorization Phone Number	215-937-5383	1-800-521-6622
WeeCare Phone Number.....	1-866-405-7946	1-800-521-6867

Websites & Email Addresses

Pa. Department of Public Welfare.....	www.dpw.state.pa.us
Keystone Mercy Health Plan Website	www.keystonemercy.com
For questions or suggestions, email	ProviderCommunications@kmhp.com
Register to receive electronic communications.....	http://www.keystonemercy.com/provider/