

December 20, 2021

Dear Keystone First/Keystone First Community HealthChoices Provider,

At the request of our state regulators in consideration of the recent resurgence of COVID-19 admissions, Keystone First and Keystone First Community HealthChoices (CHC) will temporarily waive prior authorization for patient transfers from inpatient hospitals to other skilled levels of care. This policy will be in place for a 90 day period beginning on December 20, 2021 and ending on March 20, 2022.

1. The changes to prior authorization requirements are specific to the following provider types:

- Inpatient Rehab Services
- Skilled Nursing Facility

Transfers to these facilities will still require notification to Keystone First/Keystone First CHC and will be subject to continued stay review after transfer.

(Note: transfers to Long Term Acute Care facilities and facilities that are not in the Keystone First/Keystone First CHC provider network will still require prior authorization).

2. As a reminder, claims submitted will need the following information:

- Institutional claims submitted related to the COVID-19 virus either electronically via ASC X12837 or paper UB-05 format must include a DR (disaster related) condition code.
- Professional claims submitted related to the COVID-19 virus either electronically via ASC X12837 or paper CMS-1500 format must include a CR (catastrophe/disaster related) modifier on the detail line.
- DR and CR modifiers should be billed in the last position, following any pricing/standard modifiers.

Thank you for your partnership and care of our Members and Participants as we work together through this challenging health situation. If you have any questions, please contact your Provider Account Executive.

Sincerely,



Denise Ameye
Director, Provider Network Management