

To: Keystone First/Keystone First Community HealthChoices (CHC) Providers

Date: December 7, 2022

Subject: Inpatient (IP) claims and Medicare Part B billing recommendations

When billing for IP claims when a Keystone First/Keystone First CHC Member/Participant has Medicare Part A and B, but Medicare Part A has exhausted, or the Member/Participant has Medicare Part B only, please remember:

1. Providers should follow all Medicare billing requirements when billing Medicare for eligible Part B services.
2. After billing Medicare, providers should receive an Explanation of Benefits (EOB) for the Medicare Part B payment.
3. Providers should bill Keystone First/Keystone First CHC on a UB TOB 12X claim form only after receiving an EOB for Medicare Part B payment.
 - All IP charges, including Room and Board, must be included on the UB TOB 12X claim form.
 - Medicare Part B payments, as well as the UB TOB 12X claim, should be sent to the Plan.

If you need to resubmit a corrected or replacement claim to the original 121 claim, submit a 127 TOB with the original claim ID, as per our corrected/replacement claim resubmission requirements.

Thank you for your participation in our network and the dedicated care you provide to our Members/Participants. If you have any questions regarding this notice, please contact Provider Services at 1-800-521-6007.