## Keystone First Community HealthChoices 200 Stevens Drive Philadelphia, PA 19113



To: Keystone First Community HealthChoices Adult Day Care Providers

Date: January 16, 2025

Re: Non-Solicitation Reminder

Dear Provider,

The purpose of this letter is to remind you of the amended contract notice with Keystone Family Health Plan (KFHP), and its affiliate, AmeriHealth Caritas Health Plan (ACHP), which was communicated on February 6, 2023, regarding solicitation of Participants. For your ease, the relevant provisions are set forth in Exhibit 1 below.

In addition, all Medicaid Providers, including Adult Day Care Providers, are subjected to Pennsylvania's regulations related to being prohibited from soliciting/receiving or offering/paying any remuneration for referral of goods/services reimbursable by the state medical assistance program and the Anti-Kick Back Statute. This includes paying any remuneration, or incentivizing, Participants to attend your Adult Day program.

To view the legislative language related to 62 Pa. Stat. § 1407, please visit https://tinyurl.com/3muza2k4.

## EXHIBIT 1

The Participation Provider Agreement for the Community HealthChoices (CHC) product was modified as set forth below:

1. The section designated as "Regulatory Provisions" is amended to add a new section which shall read as follows:

Providers in the CHC-KFHP and the CHC-ACHP network are prohibited from soliciting Participants to receive services from the Provider including:

- Referring an individual for CHC evaluation with the expectation that, should CHC enrollment occur, the Provider will be selected by the Participant as the service Provider.
- Communicating with existing CHC Participants via telephone, face-to-face or written communication for the purpose of petitioning the Participant to change Providers.
- Communicating with hospitals, discharge planners or other institutions for the purposes of soliciting potential CHC Participants.
- 2. The parties agree that the validity of any of the aforementioned amendatory provisions shall be

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unaffected in any way due to an incorrect sectional designation. The parties further agree that Provider's Agreement shall be modified in such a manner as to reflect the amendatory provisions contained herein.

Please note that any suspicion of solicitation can be reported to our Special Investigations Unit for further review. Please contact us by:

- Calling the toll-free Fraud Tip Line at 1-866-833-9718
- Emailing <u>FraudTip@amerihealthcaritaschc.com</u>
- Mailing a written statement to: Special Investigations Unit Keystone First CHC
  P.O. Box 7317
  London, KY 40742

Thank you for your continued participation in our network and for your commitment to our Participants. If you have any questions, please contact your Provider Account Executive.

Sincerely,

Frank Santoro

Director, LTSS Plan Operations and Administration