Keystone First

200 Stevens Drive Philadelphia, PA 19113



To: Keystone First Primary Care Providers

Date: January 20, 2021

Re: Discontinuation of Dental referral fax forms

To decrease your office's administrative burden, effective immediately Keystone First will discontinue the need to submit a dental referral fax form for reporting purposes. Paper is no longer necessary since EPSDT claim submission guidelines require the dental referral code to be included on claim encounters

As a reminder: All children ages 3 and above must be referred for an annual dental exam as part of each EPSDT Screening. How to report:

- Use the EPSDT modifier EP (Complete Screen) when the process outlined above has been followed.
- Enter the EPSDT referral code YD (dental referral) in field 10d on the CMS 1500 claim form, or field 37 on the UB-04 form.
- When the dental referral has not occurred, submit the claim with the EPSDT modifier 52 (Incomplete Screen).
- Payment for a complete screen is determined by the presence of <u>both the EP modifier</u> and YD referral code.

Thank you for your participation in our network and your continued care and commitment to the health of our members. If you have any questions, please contact Provider Services at 1-800-521-6007.