Referrals

A referral is when your PCP sends you to a specialist. A specialist is a doctor (or a doctor’s group), or a CRNP who focuses his or her practice on treating one disease or medical condition or a specific part of the body. If you go to a specialist without a referral from your PCP, you may have to pay the bill. If KAS denies your referral, you may file a Complaint or Grievance about this decision. Please see Section 7, “Complaints, Grievances, and Fair Hearings,” for more information.

If KAS does not have at least 2 specialists in your area and you do not want to see the one specialist in your area, KAS will work with you to see an out-of-network specialist at no cost to you. Your PCP must contact KAS to let KAS know you want to see an out-of-network specialist and get approval from KAS before you see the specialist.

Your PCP will help you make the appointment with the specialist. The PCP and the specialist will work with you and with each other to make sure you get the health care you need.

Sometimes you may have a special medical condition where you need to see the specialist often. When your PCP refers you for several visits to a specialist, this is called a standing referral.

For a list of specialists in KAS’s network, please see the provider directory on our website at https://www.keystonehumanservices.org/assets/documents/autism-services/Network-Provider-Directory.pdf or call your Supports Coordinator to ask for a printed provider directory.

Self-Referral

Self-referrals are services you arrange for yourself and do not require that your PCP arrange for you to receive the service. If you do not have Medicare or other health insurance, you must use an ACAP network provider unless KAS approves an out-of-network provider.

The following services do not require referral from your PCP:

- Prenatal visits
- Routine obstetric (OB) care
- Routine gynecological (GYN) care
- Routine family planning services (may see out-of-network provider without approval)
- Routine dental services
- Routine eye exams
- Emergency services

You do not need a referral from your PCP for behavioral health services. You can call your Supports Coordinator for more information.
**Coordination of Benefits**

If you have Medicare and the service or other care you need is covered by Medicare, you can get care from any Medicare provider you pick. The provider does not have to be in KAS’s network. You also do not have to get prior authorization from KAS or referrals from your Medicare PCP to see a specialist. KAS can be billed for the co-payment, co-insurance or deductible that Medicare does not pay.

If you need a service that is not covered by Medicare but is covered by ACAP, you must get the service from a KAS network provider. All ACAP rules, such as prior authorization and specialist referrals, apply to these services.

If you do not have Medicare but you have other health insurance and you need a service or other care that is covered by your other insurance, you must get the service from a provider that is in the network of your other insurance. You need to follow the rules of your other health insurance, such as prior authorization and specialist referrals. KAS can be billed for the co-payment, co-insurance or deductible that your other health insurance does not pay.

If you need a service that is not covered by your other insurance, you must get the service from a KAS network provider. All ACAP rules, such as prior authorization and specialist referrals, apply to these services.
Language Assistance Services

ATTENTION: If you speak English, language assistance services, free of charge, are available to you. Call: [717-220-1465] (TTY: 1-877-501-4715).


ATENÇÃO: Se fala português, encontram-se disponíveis serviços linguísticos, grátis.

লক্ষ্য করুন: যদি আপনি বাংলা, কথা বলতে পারেন, তাহলে নিঃখরচায় ভাষা সহায়তা পরিষেবা উপলব্ধ আছে।
