

# NON-CONTRACTED PROVIDER REIMBURSEMENT

Scope

This policy applies to:

🛛 Kaiser Permanente	🛛 Kaiser Permanente	
Health Plan of	Health Plan of Washington	
Washington	Options, Inc.	
☑ Commercial	□ Medicare	□ Medicaid
Delieu		isingl Effective Deter 02/04/2045
Policy	Ur	iginal Effective Date: 02/01/2015

When benefits allow, Kaiser Permanente will reimburse HMO, POS, and Options PPO plans from providers not directly contracted with Kaiser Permanente billing for covered services. Reimbursement rates are calculated from...

- Other contractual agreements
- Hospital market cost data allowable plus a percentage
- Generally accepted amounts based on market rates
- Billed charges

Other payment policies may supersede the above reimbursement rates.

## **Billing/Coding Guidelines**

All claims must be billed according to Centers for Medicare & Medicaid Services (CMS) guidelines.

#### **Policy Definitions**

Other Contractual Agreements – Reimbursement rates with associated discount vendors.

#### **Prerequisite(s)**

Not applicable

#### References

Not Applicable

## **Related Policies**

Access, Elect, and Omni PPO and GHO Kaiser Permanente Options Federal Plans Out-Of-Network Reimbursement

### **Frequently Asked Questions**

- **Q1:** A member has a medical office visit with a non-contracted physician. The provider codes for an Evaluation and Management service and has a contract with an associated discount vendor. How will the service be reimbursed?
- A1: Kaiser Permanente will reimburse covered services by the non-contracted provider at the other contractual agreement allowable, unless other payment policies supersede.
- **Q2:** A member on a POS plan was seen by a non-contracted physician when having outpatient services at the hospital. The physician does not have a contractual agreement with an associated discount vendor for services that are being billed. How will the services be reimbursed?
- A2: Kaiser Permanente will reimburse covered services by the non-contracted physician at generally accepted amounts based on market rates, unless other payment policies supersede.
- **Q3:** A member on a POS plan had services at a non-contracted hospital. The hospital does not have a contractual agreement with an associated discount vendor for services that are being billed. How will the services be reimbursed?
- A3: Kaiser Permanente will reimburse covered services by the non-contracted hospital at hospital market cost allowable plus a percentage, unless other payment policies supersede.

## **Revision History**

04/20/2022 - Updated to correct hyperlinks and formatting.

Note: This information is intended to serve only as a <u>general</u> reference resource regarding reimbursement policy for the services described and is not intended to address every aspect of a reimbursement situation. Accordingly, we may use reasonable discretion in interpreting and applying this policy to services being delivered in a particular case. Further, the policy does not cover all issues related to reimbursement for services rendered to our enrollees as legislative mandates, the provider contracts, the enrollee's benefit coverage documents, and the Provider Manual all may supplement or in some cases supersede this policy. This policy may be modified from time to time by publishing a new version of the policy on Kaiser Permanente provider website; however, the information presented in this policy is believed to be accurate and current as of the date of publication.