Provider E-News

Provider Services Department

KAISER PERMANENTE

August 2026

Business Updates

Attaching Documents to Provider Reconsideration Requests

We encourage providers to send in provider reconsideration requests electronically rather than via mail or fax. Sending your attachments electronically reduces processing time by submitting the documents directly to the correct department, allowing for a timely response.

Electronic submission forms available on our provider website

- Submission of Claim Supporting Documents
- Request For Post Service Non-Authorization Reconsideration
- Provider Reconsideration Request - Referrals and Medical Necessity Form

Tips for submitting attachments

- Attachment size limit is 6MB (6,000KB)
- Remove logos, color and extra formatting to minimize file size
- Zip large files to reduce file size (do not require a password on zip files)

How to tell what the file size is

When choosing the file from your folder, the Size heading lists the file size in KB (1000 KB = 1 MB)

Name	Date modified	Type	Size

Please refer to the Attaching Files to Online Forms job aid for further information on how to successfully submit your reconsideration electronically for faster processing.

Please Include the Claim Number on Corrected Claims Submissions

When you submit a corrected claim, please include the original claim number on the request. Many corrected claims are denied because the corrected claim does not include the original claim number we are asked to void and replace with the new claim. If you do not fill in the original claim number in box 22, we will deny the claim and ask providers to resubmit the request with the required information.

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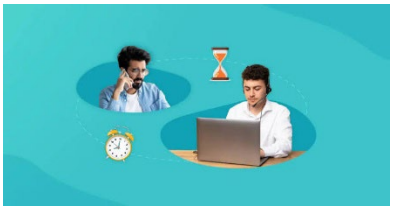

Provider Assistance Unit Hold Times

We are currently experiencing a staff shortage in our Provider Assistance Unit which has resulted in long hold times for providers. We understand the impact on you and we are actively evaluating options to improve capacity and service levels. We appreciate your patience and understanding as we work through these challenges.

Clinical Updates

Upcoming Diabetes Kaiser Permanente Commercial Formulary Changes Effective October 1, 2026 for Jardiance® (empagliflozin) and Humalog® U-100 Pens/Vials

Beginning October 1, 2026, Jardiance (empagliflozin) and Humalog U-100 pens/vials (insulin lispro) will move to nonpreferred formulary status and require prior authorization for Kaiser Permanente Commercial members. Coverage for Jardiance will require documentation of a contraindication to, or failure/intolerance of, dapagliflozin. Coverage for Humalog U-100 pens and vials will require documentation of a contraindication to, or failure/intolerance of, a preferred insulin aspart biosimilar U-100, such as Kirsty® (insulin aspart-xjhz).

Prescribers are encouraged to consider formulary-preferred alternatives for both new and existing patients when clinically appropriate. Patients currently receiving Jardiance may be candidates for conversion to dapagliflozin 10 mg daily. Patients receiving Humalog U-100 pens or vials may be candidates for conversion to an aspart insulin biosimilar (such as Kirsty®) using a unit-for-unit conversion with appropriate glucose monitoring.

Jardiance and dapagliflozin have similar efficacy and established cardiovascular and renal benefits. Kaiser Permanente Endocrinology, Cardiology, Nephrology, and Primary Care chiefs endorse conversion from Jardiance to dapagliflozin. Likewise, insulin lispro and insulin aspart have comparable efficacy and safety profiles and conversion is endorsed by Endocrinology.

As October 1 approaches, please convert Kaiser Permanente members receiving Jardiance or Humalog U-100 vials/pens to preferred alternatives when clinically appropriate to help promote a seamless transition and minimize potential barriers to care.

Estradiol Patch Supply Shortage

Since the FDA removed the boxed warning from hormone therapy labeling approximately 18 months ago, demand for transdermal estradiol products has increased substantially. This has resulted in ongoing nationwide shortages across multiple brands and strengths, including **Climara®** and **Dotti®**. Kaiser Permanente is experiencing similar supply constraints. The shortage remains highly unpredictable. Product availability varies by brand and strength, and supply may change frequently. Although the duration of the shortage is unknown, current trends suggest that disruptions may continue through at least the end of 2026.

Objective
Preserve transdermal estrogen supply for existing patients while continuing to meet increasing demand during ongoing shortages.

Potential Strategies
The following strategies may be used to help maintain therapy during periods of limited supply. The most appropriate option will depend on product availability and individual patient circumstances.

Priority	Option	When to Use	Key Prescriber Notes
First-line	**Use available estradiol patches** (switch between once-weekly and twice-weekly products as needed)	When a specific brand or strength is unavailable, but an alternative patch product is available.	Switching between patch brands and dosing frequencies is preferred before changing to a different dosage form.
First-line	**Cut matrix patches** (Climara® and Dotti®/generic Mylan only)	When the required lower-dose patch is unavailable, but a higher-strength patch is available.	• Store at 20-25°C (68-77°F); excursions permitted 15-30°C (59-86°F). • Do not refrigerate. • Cut diagonally using sharp scissors. • Store the unused portion in the original pouch within an airtight container. • **Important:** Patients must be informed if their patch is being dispensed with instructions to cut it.
Second-line	**Oral estradiol**	When transdermal therapies are unavailable or otherwise not appropriate.	Oral estradiol carries a higher thromboembolic risk than transdermal formulations. Avoid or use caution in patients at elevated risk for venous thromboembolism or other relevant comorbidities. **A provider assessment (telephone, virtual, or office visit) is**

Priority	Option	When to Use	Key Prescriber Notes
			recommended prior to initiating oral therapy.
Second-line	**Topical estradiol gel** (generic Divigel® packets)	When patch-based strategies are not feasible.	• Absorption varies considerably between patients and may require dose titration and follow-up. • Transitioning back to patches may be challenging. • Approximate conversion: 0.05 mg/day estradiol patch ≈ 1 mg/day estradiol gel. • Maximum FDA-approved estradiol gel dose is 1.25 mg/day. • **Note:** Generic Divigel® is also experiencing intermittent backorders and may not be available.

What You Can Do

- Watch for communications from Kaiser Permanente pharmacies requesting therapy modifications because of supply limitations.
- Be prepared to approve therapeutic interchange requests between available patch products (e.g., Climara® ↔ Dotti®).
- Consider using a higher-strength matrix patch that can be cut to achieve the desired dose when clinically appropriate.
- Consider oral estradiol, when appropriate, after assessing patient-specific risks and benefits.
- Consider nonhormonal treatment options when hormone therapy is unavailable, contraindicated, or no longer preferred by the patient.

Kaiser Permanente Washington Health Research Institute (KPWHRI) News

[As GLP-1 use expands, researchers look for answers]

David Arterburn, MD, MPH, is leading research to help patients and clinicians navigate the rapidly changing GLP-1 landscape. With GLP-1 use expanding and evolving rapidly outside of traditional research settings, scientists have turned to real-world data to answer pressing questions about these medications.

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[Pioneering a new approach to cervical cancer screening]

More than half of cervical cancers in the U.S. are diagnosed in people who are overdue for screening — which typically involves a test for human papillomavirus (HPV) collected during a pelvic exam. In 2023, Kaiser Permanente Washington became the first health care organization in the country to offer HPV self-collect as a way to help more people get timely screening.

Provider Notices

Notices can be viewed on our Provider Notices page on the Kaiser Permanente provider site. Please check our provider site on a regular basis for provider manual changes and updates.

We communicate changes to the Provider Manual in the Provider eNews for your convenience. However, it is your responsibility to remain updated on any changes by visiting our site regularly for updates on our policies and procedures.

- CHANGES TO MEDICAL NECESSITY REVIEW CRITERIA FOR TOTAL KNEE ARTHROPLASTY
- CHANGES TO MEDICAL NECESSITY REVIEW CRITERIA FOR VERICOSE VEINS TREATMENTS
- CHANGES TO MEDICAL NECESSITY REVIEW CRITERIA FOR WHOLE EXOME SEQUENCING
- CHANGES TO MEDICAL NECESSITY REVIEW CRITERIA FOR PET SCAN CRITERIA
- CHANGES TO MEDICAL NECESSITY REVIEW CRITERIA FOR UPPER LIMB PROSTHESIS
- CHANGES TO MEDICAL NECESSITY REVIEW CRITERIA FOR LOWER EXTREMITY REVASCULARIZATION PROCEDURES
- CHANGES TO MEDICAL NECESSITY REVIEW CRITERIA FOR CPAP DEVICES
- CHANGES TO MEDICAL NECESSITY REVIEW CRITERIA FOR APPLIED BEHAVIORAL ANALYSIS THERAPY
- CHANGES TO MEDICAL NECESSITY REVIEW CRITERIA FOR HYSTERECTOMY
- CHANGES TO MEDICAL NECESSITY REVIEW CRITERIA FOR BONE GRAFT SUBSTITUTES
- CHANGES TO MEDICAL NECESSITY REVIEW CRITERIA FOR CARDIAC ELECTROPHYSIOLOGIC PROCEDURES
- CHANGES TO MEDICAL NECESSITY REVIEW CRITERIA FOR LYMPHEDEMA DECONGESTIVE THERAPY
- PPO PRIOR AUTHORIZATION REQUIREMENT CHANGES
- MEDICARE PART B DRUGS REQUIRING PRIOR AUTHORIZATION
- ONCOLOGY PRODUCTS UPDATED PRIOR AUTHORIZATION CRITERIA

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EFT Deposit & Check Mailing Dates

2026 EFT Deposit & Check Mail Dates

Provider reimbursement checks are scheduled to be deposited ACH or mailed on the following dates. Mailed checks should arrive within approximately 3 business days.

January 2, 7, 8, 15, 23, 29	July 2, 8, 9, 16, 23, 30
February 5, 12, 20, 26	August 6, 13, 20, 27
March 5, 12, 19, 26	September 8, 11, 17, 24
April 2, 7, 9, 16, 23, 30	October 1, 7, 8, 15, 22, 29
May 7, 14, 21, 29	November 5, 13, 19, 27
June 4, 11, 18, 25	December 7, 10, 17, 24, 31

Holidays

New Year's Day
Monday, January 1

Martin Luther King Jr. Day
Monday, January 19

Presidents' Day
Monday, February 16

Memorial Day
Monday, May 25

Independence Day
Friday, July 3 (observed)

Labor Day
Monday, September 7

Thanksgiving
Thursday, November 26

Christmas
Friday, December 25

Provider Resources

Submit a Provider Update Form to inform us of changes to your practice.

View our Provider Directory.

KAISER PERMANENTE®
Specialty Services

Learn more about our Specialty Services.

Read our latest Formulary Decision Highlights.

View our 7 formularies on our Formulary page or ePocrates.

Register for one of our many Continuing Medical Education offerings.