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February 2025

Business Updates

Optum <u>New Portal For Optum Post Adjudication Prepay Medical Records Upload</u>

Beginning March 1, 2025, Optum's Notification of Review letters for the Post Adjudication Prepay (PAPP) program will contain a link to their new payment integrity portal. This new portal will offer a streamlined process for managing medical records requests.

The existing digital upload portal will still be available for use. However, to take advantage of the new features outlined below, we encourage you to start using the <u>new portal</u> beginning March 1.

Key Features of the new Portal:

- 1. User self-registration:
 - a. One Healthcare ID
 - b. Portal Registration: TIN, Authorization Code, Record Bar Code, First DOS
- 2. Digital Delivery: Providers opt in to digital notification for when records are available for submission
- 3. Claim Status: Claims awaiting medical records and records received (after upload)
- 4. All claims view Can view all outstanding claims within the portal
- 5. Document download Download associated letters
- 6. Access to user guides FAQ, navigation, and how-to
- 7. Max File Size Accepted: 200mb

Please see the <u>Optum One Healthcare ID Job Aid</u> for instructions on creating a One Healthcare ID and loggng onto the new Optum payment integrity portal. If you have questions, please call Optum's Provider Assistance line at 1-877-687-2062.



HEDIS® Medical Record Review Season: February – May 2025

From February through mid-May 2025, Kaiser Foundation Health Plan of Washington will be conducting HEDIS medical record reviews on members enrolled in a Kaiser Permanente plan in 2024 to measure the quality of care provided to our members. Our medical record reviewers will be contacting

your office to request remote access to your electronic medical record system (preferred), and/or request that medical records are faxed or mailed. We appreciate your assistance in providing access to the medical information as requested. Your prompt response will ensure that your group's HEDIS measures accurately represent the high quality of care that you provide to our members.

Please contact <u>Susie Jorgensen</u>, HEDIS Program Coordinator, if you have any questions.

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Clinical Updates

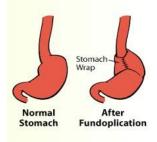


Reminder: Changes to medical necessity review criteria for hip arthroscopy

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Effective February 1, 2025, Kaiser Foundation Health Plan of Washington and Kaiser Foundation Health Plan of Washington Options, Inc. (Kaiser Permanente) implemented a new medical necessity review requirement for Hip Arthroscopy procedures for Medicare and non-Medicare members using

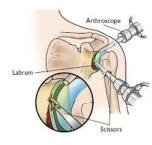
MCG KP-S-572 02012025. Medical necessity review will be required in addition to the preexisting review requirement for the level of care. These changes apply to our HMO, POS, PPO, and Medicare Advantage networks. Please see the Hip Arthroscopy clinical review criteria for more information.



Reminder: Changes to medical necessity review criteria for fundoplication procedures

Effective February 1, 2025, Kaiser Foundation Health Plan of Washington and Kaiser Foundation Health Plan of Washington Options, Inc. (Kaiser Permanente) implemented a new medical necessity review requirement for Fundoplication procedures for Medicare and non-Medicare members using MCG KP-S-505 02012025. Medical necessity review will be required in addition

to the preexisting review requirement for the level of care. These changes apply to our HMO, POS, PPO, and Medicare Advantage networks. Please see the <u>Fundoplication Surgery & Treatment of</u> <u>Gastroesophageal Reflux Disease</u> clinical review criteria for more information.



Upcoming change: Changes to medical necessity review criteria for shoulder arthroscopy

Effective March 1, 2025, Kaiser Foundation Health Plan of Washington and Kaiser Foundation Health Plan of Washington Options, Inc. (Kaiser Permanente) are implementing a new medical necessity review requirement for Shoulder Arthroscopy procedures for both Medicare and non-Medicare members using MCG KP-S-1045. A medical necessity review will be required in

addition to the preexisting review requirement for the level of care. Note that CPT codes 23800 and 23802 will have a new review requirement for ASC Site of Care and Level of Care in addition to the new medical necessity review requirement. These changes apply to our HMO, POS, PPO, and Medicare Advantage networks. Please see the <u>Shoulder Arthroscopy</u> clinical review criteria for more information.

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Kaiser Permanente Washington Health Research Institute News



Reframing how we speak about dying

Based on her legacy research, Marlaine Figueroa Gray reflects on how we talk about serious illness and death in *The Good Death Society Blog*.



Reducing sitting in older adults

KPWHRI researchers discuss the Healthy Aging Resources to Thrive (HART) trial, which explores reducing sedentary behavior to improve heart health.

Provider Notices



Notices can be viewed on our <u>Provider Notices</u> page on the <u>Kaiser</u> <u>Permanente provider site</u>. Please check our provider site on a regular basis for provider manual changes and updates. We communicate changes to the <u>Provider Manual</u> in the <u>Provider eNews</u> 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 sacral nerve stimulator
- <u>Changes to medical necessity review criteria for responsive neurostimulation for treatment of epilepsy</u>
- <u>Changes to medical necessity review criteria for single photon emission computed tomography</u> (SPECT)
- <u>Changes to medical necessity review criteria for transthyretin amyloidosis genetic testing</u>
- Leuprolide acetate (Fensolvi) will require prior authorization approval
- Site of care prior authorization requirement for oncology medications
- Changes to medical necessity review criteria for shoulder arthroscopy
- Changes to medical necessity review criteria for gender-affirming surgeries
- Changes to medical necessity review criteria for applied behavioral analysis therapy
- <u>Changes to medical necessity review criteria for sex-hormone binding globulin</u>
- <u>Changes to medical necessity review criteria for plethysmography</u>
- Changes to medical necessity review criteria for fecal DNA testing
- Oncology products updated prior authorization criteria
- Updated prior authorization criteria for ocrelizumab (Ocrevus)

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- Modification: New effective date is March 10, 2025
- <u>Nedosiran (Rivfloza) updated prior authorization criteria</u>
- Medicare Part B drug requiring step therapy: epcoritamab-bysp (Epkinly)

EFT Deposit & Check Mailing Dates



2025 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 9, 16, 24, 30	July 8, 10, 17, 24, 31
February 6, 13, 21, 27	August 7, 14, 21, 28
March 6, 13, 20, 27	September 5, 11, 18, 25
April 5, 10, 17, 24	October 2, 9, 16, 23, 30
May 3, 8, 15, 22, 30	November 6, 13, 20, 28
June 5, 12, 19, 26	December 4, 11, 18, 26

Kaiser Permanente Holidays

New Year's Day Monday, January 1

Martin Luther King Jr. Day Monday, January 20

Presidents' Day Monday, February 17

Memorial Day Monday, May 26

Independence Day Thursday, July 4

Labor Day Monday, September 1

Thanksgiving Thursday, November 27

Christmas Wednesday, December 25

Provider Resources



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



View our <u>Provider Directory</u>.



Learn more about our Specialty Services.



Read our latest Formulary Decision Highlights.

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View our 7 formularies on our Formulary page or ePocrates.



Register for one of our many <u>Continuing Medical Education</u> offerings.