

January 2024

### Business Updates

#### **Kaiser Permanente is piloting the removal of prior authorization requirements for a subset of in-network specialty office visits**

##### **Background**

Kaiser Permanente’s clinical model of care is rooted in the foundation that our patients’ care should be delivered and coordinated by high-performing Primary Care teams with timely access to specialty and hospital-based services when required.



Kaiser Permanente has used the physician referral/order (the request process to define the clinical question and transfer clinical information) and health plan authorization practices to promote our proven model of care. At the same time, we recognize the administrative burden that the prior authorization process places on clinical teams both within Kaiser Permanente Care Delivery (our owned and operated clinics) and on our contracted network providers, as well as the potential delay in care if the prior authorization process is delayed.

##### **What’s changed?**

We want to simplify the process for our partner providers and improve the care experience for our members. Effective immediately, we are piloting the removal of prior authorization requirements for a subset of in-network specialty office visits with the specialties listed below. While we continue to strongly encourage the use of clinical referrals between primary and specialty care providers, we have removed the health plan prior authorization requirements for evaluation and treatment in the office with an in-network provider to allow us to evaluate the impact on care patterns.

- Allergy
- Anesthesia Pain
- ENT/Otolaryngology
- Endocrinology
- Gastroenterology
- General Surgery
- Genetic Counseling
- Infectious Disease
- Lactation
- Nephrology
- Psychiatry (Physical Medicine & Rehab)
- Pulmonology
- Urology
- Vascular/Interventional Radiology
- Cardiac surgery
- Thoracic surgery
- Gynecological oncology
- All specialties - Removal of the “Evaluate and Treat authorization from PCP” requirement for specialty office visits in all regions – we will accept referral/authorization requests from any provider

Ordering providers in the network no longer need to submit their referral to Kaiser Permanente for a health plan authorization when referring a member to a Kaiser Permanente network provider in any of

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the above specialties. Current clinical communication processes from the Primary Care referring physician to the specialist should continue.

Kaiser Permanente Care Delivery will continue to provide a referral and Summary of Care document for all specialties when referring a patient to a network provider. Contracted providers will continue to see all referrals from Kaiser Permanente providers in Affiliate Link.

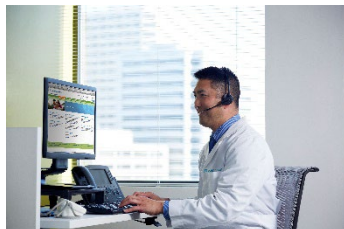
In-network specialty providers in any of the above listed specialties do not need to wait for the Kaiser Permanente health plan authorization to schedule patients for their appointments. A Kaiser Permanente authorization number is not required for claims payment.

Surgical and diagnostic procedures performed outside of the office setting will continue to require a Kaiser Permanente health plan authorization per medical policies. Network providers should continue to utilize Kaiser Permanente's Affiliate Link to obtain pre-authorization for those services.

Note - Members in our PPO plans currently do not require health plan prior authorization for specialty care office visits so there is no change for them.

### Questions?

Please refer to this [FAQ](#) or contact the Provider Assistant Unit at 1-888-767-4670.



### **Free specialty consultation for network primary care providers**

Kaiser Permanente has launched a new free service for our contracted network Primary Care providers that we hope will allow you to provide specialty-level care for certain symptoms to your Kaiser Permanente patients without the need to refer the patient to a specialist.

Our [Curbside Consultation](#) service offers specialist to primary care provider phone consultations in 21 specialty areas to our contracted network providers within 20 minutes of the request for a consultation. Having this specialist consultation in the moment may avoid the primary care provider's need to refer the patient to a specialist, allowing the patient to get treatment advice on the day of the primary care appointment.

If you are seeing a patient with symptoms that would typically lead you to refer to a specialist, you may call Kaiser Permanente for a consultation. The call would be made to the paging operator, stating the desired specialty consultation and a call back number. A specialist will call you within 30 minutes to provide a consultation on the patient.

Please contact Brad Pope, MD, at [Bradley.W.Pope@kp.org](mailto:Bradley.W.Pope@kp.org) or 509-990-4790 for more information and to sign up for the program.

# Provider E-News

## Provider Services Department



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### Learn more about Kaiser Permanente's Specialty Care

We realize there will be times when you need to refer a Kaiser Permanente patient to a specialist. We created a dedicated [Kaiser Permanente Specialty Services](#) page on our provider site to inform you about the award-winning specialty care that we offer. On this page, you can learn more about our Structural Heart Program of Excellence, our Home-Based Cardiac Rehabilitation program, our Comprehensive ALS Care program, and many more services that we provide. For more information on these services, please click on any of the specialties listed on the page to view a one-page summary of services provided, a team roster, and a number to call for further information.



### Provider Notices



All notices below 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. Thank you for your partnership in the care of our members.

- [Changes to medical necessity review criteria for Applied Behavioral Analysis therapy \(ABA\)](#)
- [Changes to medical necessity review criteria for elective cardiac defibrillator and pacemaker placements](#)
- [Prolonged service add-on codes](#)
- [Behavioral health add-on codes](#)
- [Changes to medical necessity review criteria for chromoendoscopy](#)
- [Changes to medical necessity review criteria for office-based methadone treatment](#)
- [Changes to medical necessity review criteria for MRI cervical, thoracic and lumbar](#)
- [Oncology products updated prior authorization criteria](#)
- [Pegcetacoplan \(Syfovre\) updated prior authorization criteria](#)
- [Pasireotide \(Signifor LAR\) will require prior authorization approval](#)
- [Updated prior authorization criteria for Ranibizumab \(Lucentis\)](#)
- [Medicare Part B drugs requiring prior authorization](#)
- [Medicare Part B drugs requiring step therapy](#)
- [Changes to medical necessity review criteria for Myocardial Perfusion Imaging \(MPI\)](#)
- [Changes to medical necessity review criteria for prescription hearing aids](#)
- [Changes to medical necessity review criteria for breast cancer index](#)
- [Changes to medical necessity review criteria for sinus surgery](#)

# Provider E-News

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- [Changes to medical necessity review criteria for Clarifix®](#)
- [Changes to medical necessity review criteria for Endobronchial Ultrasound](#)
- [Changes to medical necessity review criteria for brain mapping](#)
- [Sinuplasty billed with functional endoscopic sinus surgery \(FESS\)](#)
- [ICD-10 CM diagnosis code combinations](#)

### EFT Deposit & Check Mailing Dates

#### 2024 Calendar



#### EFT deposit and check mail dates

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

<b>JANUARY</b>	1, 19, 25	<b>JULY</b>	5, 11, 18, 25
<b>FEBRUARY</b>	1, 7, 15, 23, 29	<b>AUGUST</b>	1, 7, 15, 22, 29
<b>MARCH</b>	7, 14, 21, 28	<b>SEPTEMBER</b>	6, 12, 19, 26
<b>APRIL</b>	4, 11, 18, 25	<b>OCTOBER</b>	7, 10, 17, 24, 31
<b>MAY</b>	7, 9, 16, 23, 31	<b>NOVEMBER</b>	7, 14, 21, 29
<b>JUNE</b>	6, 13, 20, 27	<b>DECEMBER</b>	5, 12, 19, 27

#### Kaiser Permanente holidays

##### NEW YEAR'S DAY

Monday, January 1

##### MARTIN LUTHER KING JR. DAY

Monday, January 15

##### PRESIDENTS' DAY

Monday, February 19

##### MEMORIAL DAY

Monday, May 27

##### INDEPENDENCE DAY

Thursday, July 4

##### LABOR DAY

Monday, September 2

##### THANKSGIVING

Thursday, November 28

##### CHRISTMAS

Wednesday, December 25

### Provider Demographic Updates



#### Have you made any recent changes to your practice?

Please let us know about any changes to your practice so we can maintain an accurate [Provider Directory](#).

On our [Provider Update Forms](#) page, you will be able to:

- Add new practitioners or term practitioners, including advanced registered nurse practitioners, physician assistants, and locum tenens

# Provider E-News

## Provider Services Department



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- Submit staff changes: in case we must adjust our records of clinic staff with Kaiser Permanente Electronic Medical Record (EMR) access.
- Submit demographic and business updates, including:
  - Clinic/services location updates
  - Close a clinic location
  - Remit/billing "Pay to" address updates
  - Tax ID update / Tax ID address update / 1099 address update

Thank you for your assistance to ensure our Provider Directory accurately reflects your information.

### CME and Workshop Opportunities

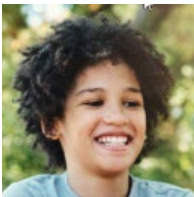
KAISER PERMANENTE  
*Save the Date and Register now!*  
[CME Catalog](#)



#### Hurt, Tired, and Stuck: Strategies for Central Sensitivity

Thursday, February 15, 2024 (Virtual)

Introduction to Central Sensitivity Syndrome, Illness Anxiety and Somatization, Non-pharmacologic Treatment of Chronic Pain, Managing High-risk Medications, Psychopharmacology Through CSS Lens, Ambiguous Headache, Pelvic Pain, Chronic Back and Neck Pain, Itch, Movement as Medicine



#### Mental Health and Wellness for Primary Care

Wednesday, May 15, 2024 (Virtual)

Topics to include: ADHD, Mental Health and Substance Use Disorder, Anxiety and Depression, Adult Autism, Nutrition, Mind Phone Case Vignettes, Geropsychiatry