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### Business Updates



#### **Procedural update for reconsideration requests for claims denied due to lack of pre-authorization**

We have updated our procedure regarding the filing of reconsideration requests for claims denied due to lack of pre-authorization. **Provider offices no longer need to call the Provider Assistance Unit (PAU) to obtain a reference number before filing these requests.** However, if you have questions about claims but are not yet ready to file a reconsideration, please don't hesitate to contact our Provider Assistance Unit at 1-888-767-4670 for assistance. We hope the removal of this requirement is beneficial to you, and we thank you for caring for our members.



#### **Durable Medical Equipment Claims**

Kaiser Permanente will reimburse the most appropriate durable medical equipment (DME) item, including prosthetic and orthotic devices, that meets a member's medical needs when benefits allow and [medical necessity](#) is met.

DME items, including prosthetic and orthotic devices, may not be reimbursed when treating physician orders are not included in the patient record.

DME items must be furnished by authorized DME vendors and maintenance services must be performed by authorized technicians to be reimbursable. DME utilized during an inpatient stay (hospital or skilled nursing facility) is considered bundled into the facility payment and is not separately reimbursable unless contracted rates apply.

As a reminder, all claims must be billed according to CMS guidelines. Rental equipment must be billed consecutively with the same billing date every month and appropriate rental or purchase modifiers. DME claims submitted for the same procedure code on the same date of service for the same member may be denied. Please see our [Durable Medical Equipment](#) payment policy for full details.



#### **Durable Medical Equipment Alignment with CMS Final Rule**

Beginning this summer, you will see some changes to our order set questions for many of our online Durable Medical Equipment/Prosthetics and Orthotics authorization requests that will align more closely with Medicare criteria. The answers to these questions will be used to make coverage determinations. Some authorization requests may pend for manual review. Please see the [CMS 2024 Medicare Advantage and Part D Final Rule](#) for further details.

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### Pharmacy location changes

On August 5, 2024, we will no longer operate on-site retail pharmacies at 4 of our smaller medical center locations – Ballard, Redmond, Smokey Point, and West Olympia.

Patients who used the 4 closing pharmacies were notified by letter and/or secure message about their options moving forward. Current prescriptions for these patients will continue to be active and available at all Kaiser Permanente pharmacies. Patients can simply choose our convenient mail order service or one of our 24 other Kaiser Permanente retail pharmacies for their next refill – no additional planning or prescription transfer is needed.

For new prescriptions going forward, please encourage patients to use mail order, which usually takes just 1-2 business days and includes free delivery (same-day delivery is also available for a \$10 fee, where applicable). To send electronic prescriptions to our mail order pharmacy, select “Kaiser Perm WA Mail Order Pharmacy” in your electronic medical record.

The closest Kaiser Permanente retail pharmacies to the locations that are closing are:

- Capitol Hill (from Ballard) – 125 16th Ave E, Seattle
- Bellevue (from Redmond) – 11511 NE 10th St, Bellevue
- Everett (from Smokey Point) – 2930 Maple St, Everett
- Olympia (from West Olympia) – 700 Lilly Road NE, Olympia

Patients can also find another pharmacy in their health plan’s contracted network by accessing the [Pharmacy Services](#) section of our provider directory.

## Clinical Updates



### Tobacco & Nicotine Cessation Guideline updated

Kaiser Permanente’s [Tobacco and Nicotine Cessation Guideline](#) has been reviewed and updated. This guideline offers recommendations for prevention, screening, and cessation interventions for adolescents and adults.

#### New in this edition:

There is emerging evidence that switching *completely* from conventional cigarettes to e-cigarettes is an effective intervention for harm reduction and for smoking cessation, at least in the short term.

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In light of this emerging evidence, the guideline now includes **guidance to inform conversations with adult, non-pregnant patients who are considering using e-cigarettes as an intermediate, harm-reduction approach when they have been unable to quit conventional cigarette smoking using the recommended pharmacologic and behavioral interventions.**

Because there is no safe tobacco product, **the guideline recommends eventual abstinence from all tobacco products—including e-cigarettes—as the end goal of intervention.**

The guideline’s strong recommendations against e-cigarette use in adolescent patients are unchanged.

*Special thanks* to Nancy Rigotti, MD, Director of the Tobacco Research and Treatment Center, Massachusetts General Hospital, and Professor of Medicine, Harvard Medical School, for her generous consultation and feedback in the review and updating of this guideline.

### Questions about this article?

- [John Dunn, MD, MPH](#), Medical Director, Knowledge & Implementation
- [Avra Cohen, MN, RN](#), Guideline Coordinator

## Kaiser Permanente Washington Health Research Institute News



### [Neighborhood density connected to changes in body mass index for children](#)

Using data from Kaiser Permanente and King County in Washington state, researchers have found that certain neighborhood features can impact levels of obesity for children and adolescents. Although the effects are small, they may accumulate over time.

The study, [published in \*AJPM Focus\*](#), is part of the Moving to Health project, a collaboration between Kaiser Permanente Washington Health Research Institute (KPWHRI) and the University of Washington. The project takes a hyperlocal approach to understanding how aspects of the built environment — including the number of households in an area (residential density), the number and size of parks, and the presence of fast-food restaurants and supermarkets — influence the health of residents in individual neighborhoods. Moving to Health is one of the largest studies of children and adolescents to look at these associations.

# Provider E-News

## Provider Services Department



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### [Increasing access to cervical cancer screening in low-resource health care settings](#)

The University of Washington (UW) was recently awarded a grant from the National Cancer Institute to work in partnership with researchers at Kaiser Permanente Washington Health Research Institute (KPWHRI), [Kaiser Permanente Center for Health Research](#), and the University of Chicago to conduct research on strategies to implement HPV self-sampling in low-resource health care settings. The 6-year study, called “Self-Testing for Cervical Cancer in Priority Populations: the STEP-2 Trial,” will evaluate interventions to integrate HPV self-sampling into clinical practice at federally qualified health centers (FQHCs).



### [Center for Community Health and Evaluation launches CCHE.org](#)

For nearly 35 years, the Center for Community Health and Evaluation (CCHE) has dedicated itself to improving community health through collaborative approaches to planning, assessment, and evaluation. Now, CCHE, which is a part of Kaiser Permanente Washington Health Research Institute (KPWHRI), will be able to reach even more communities with the launch of the center’s new website — [CCHE.org](#).

Since its formation in 1990, CCHE has designed and evaluated health-related programs and initiatives throughout the United States, pioneering many tools and methods. The new website prominently features a [range of services](#) offered by CCHE, including evaluation, strategic learning, assessment, and capacity building.

## 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 high-end imaging site of care](#)
- [Changes to medical necessity review criteria for low-dose ct screening for lung cancer](#)
- [Changes to medical necessity review criteria for Bariatric Surgery](#)
- [Lymphocyte immune globulin \(Atgam\) will require prior authorization approval](#)
- [Medicare Part B: mirikizumab-mrkz \(Omvo\) requiring prior authorization](#)

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- [Changes to medical necessity review criteria for New and Emerging Technology](#)
- [Changes to medical necessity review criteria for treatments for Lower Limb Prostheses](#)
- [Changes to medical necessity review criteria for treatments for Bone Lengthening Procedures](#)
- [Changes to medical necessity review criteria for treatments for Radiation Therapy for Palmar Fibromatosis](#)
- [Changes to medical necessity review criteria for treatments for Superficial Radiation Therapy](#)
- [Changes to medical necessity review criteria for treatments for Sleep Studies](#)
- [Changes to medical necessity review criteria for treatments for Transcutaneous Electrical Stimulation \(TENS\) devices](#)
- [Changes to medical necessity review criteria for fecal gi infusion for the treatment of c. Difficile infection](#)
- [Changes to medical necessity review criteria for capsule endoscopy](#)
- [Changes to medical necessity review criteria for treatments for urinary incontinence](#)
- [Changes to medical necessity review criteria for treatments for renal sympathetic nerve ablation](#)
- [Changes to medical necessity review criteria for treatments for infrared thermography](#)
- [Changes to medical necessity review criteria for transcranial magnetic stimulation](#)
- [Changes to medical necessity review criteria for treatments for chelation therapy](#)

### EFT Deposit & Check Mailing Dates



#### 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 1, 19, 25	July 5, 11, 18, 25
February 1, 7, 15, 23, 29	August 1, 7, 15, 22, 29
March 7, 14, 21, 28	September 6, 12, 19, 26
April 4, 11, 18, 25	October 7, 10, 17, 24, 31
May 7, 9, 16, 23, 31	November 7, 14, 21, 29
June 6, 13, 20, 27	December 5, 12, 19, 27

#### Kaiser Permanente Holidays

<b>New Year's Day</b> Monday, January 1
<b>Martin Luther King Jr. Day</b> Monday, January 15
<b>Presidents' Day</b> Monday, February 19
<b>Memorial Day</b> Monday, May 27
<b>Independence Day</b> Thursday, July 4
<b>Labor Day</b> Monday, September 2
<b>Thanksgiving</b> Thursday, November 28
<b>Christmas</b> Wednesday, December 25

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### Provider Resources



Submit a [Provider Update Form](#) to inform us of changes to your practice.



View our [Provider Directory](#).



Learn more about our [Specialty Services](#).



Read our latest [Formulary Decision Highlights](#).



View our 7 formularies on our [Formulary](#) page or [ePocrates](#).



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