**Provider Services Department** 



**November 2023** 

### **Business Updates**



#### Prior authorization reduction news

Kaiser Permanente is pleased to announce the removal of several prior authorization requirements for our HMO, Medicare Advantage and Point of Service (POS) plans to reduce the administrative burden to our network partners. These changes do not apply to PPO plans which already do not require prior authorization for the services listed below. Here is a summary of the changes:

- Effective October 17, 2023, we have removed the separate prior authorization requirement for colonoscopies and EGD procedures performed in ambulatory settings. The referral authorization for Evaluate and Treat will now include authorization for these services.
  - Note: Colonoscopies and EGD procedures performed in hospital settings (place of service 21 and 22) will still require prior authorization. Please refer to the <u>Preauthorization Code Check Tool</u> and the <u>Ambulatory Surgery Center (ASC) - Site of</u> <u>Care Policy</u> for additional details.
- Effective immediately, we have removed the separate prior authorization requirement for echocardiograms. The referral authorization for Evaluate and Treat will now include authorization for this service.
- Effective immediately, we have removed the prior authorization requirement for over 70% of
  Durable Medical Equipment (DME) items when ordered through Apria. Please refer to the Apria
  DME list (located under More Resources) on our <a href="Prior Authorization for Durable Medical Equipment">Prior Authorization for Durable Medical Equipment</a>
   provider site page for a searchable list of items that no longer require prior
  authorization.
  - o Note: DME items ordered through other DME providers still require prior authorization.
- We sent you a 60-day notice that, as of December 1, 2023, we will remove the prior authorization requirements for hospital grade breast pumps when they are ordered via Apria.
   We are happy to share that we can implement this change immediately. When hospital grade breast pumps are ordered through other vendors, prior authorization is still required, but you do not need to submit notes along with the request.
  - Reminder: Consumer grade breast pumps do not require medical necessity review or prior authorization when ordered through a contracted provider.

If you have any questions about these changes, please contact Review Services at 1-800-289-1363.

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# Optum Post Adjudication Pre-pay Analytics (PAPP) tool to be used for evaluating E/M coding on Emergency Department professional claims

Kaiser Permanente will begin utilizing Optum's Post Adjudication Pre-Pay Analytics (PAPP) tool to evaluate Emergency Department (ED) professional claims on December 1, 2023. This tool flags professional ED claims for review when the diagnoses submitted as well as the services



performed do not substantiate the level of E/M coding submitted for the visit. Records may be requested to substantiate the level of coding submitted. If E/M codes are not supported by documentation, they may be denied. Providers have the option to rebill using the appropriate coding. Please see the <a href="Emergency Department">Emergency Department</a> (ED) <a href="Professional Claims Coding Policy">Professional Claims Coding Policy</a> for more information.

As a reminder, Kaiser Permanente uses Optum's ED Claim Analyzer tool to determine the appropriate and fair level of facility reimbursement for outpatient ED services. This tool reviews the diagnoses submitted as well as the facility services performed and then determines the appropriate ED visit level. If the visit level does not align with the submitted E/M code, it may be down coded and will be reimbursed accordingly. Providers have the option to rebill using the appropriate coding. Please see the <a href="Emergency Department">Emergency Department</a> (ED) Facility Evaluation and Management (E/M) Coding Policy for more information.

Questions about these policies can be directed to the Provider Assistance Unit at 888-767-4670.



#### **Change to Electronically Submitted Claims**

We are implementing an enhancement to the 837 electronic claims submission that will benefit providers and us when processing claims. As of November 12, 2023, claims that do not follow the CMS billing regulations for corrected and duplicate claims, which includes

referencing the original claim number, will be rejected following the standard 277CA process to notify the rejection on the claim. This means the claim will be not entered into the Kaiser Permanente claims system. This change will allow providers to rectify the submission and rebill in a timelier manner, avoiding a claims denial. If you have any questions about this enhancement, please contact the Provider Assistance Unit at 1-888-767-4670.

#### **Updated Kaiser Permanente payment policies page**

We have updated the introductory section of our payment policy page to include the resources and guidance used when processing claims and drafting our payment policies.



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#### Updates to note:

- Providers are responsible for accurate claims submissions. Billed codes should be fully supported in the medical records and/or office notes.
- Coverage of any service is determined by a member's eligibility, benefit limits for the service or services rendered and the application of the Kaiser Permanente's Medical Policy.
- Final payment is subject to the application of claims adjudication edits common to the industry and Kaiser Permanente's facility services claims coding policies.
- Reimbursement is restricted to the provider's contract and/or the scope of practice as well as the fee schedule applicable to that provider.

If you have any questions, please contact the Provider Assistance Unit at 1-888-767-4670.

#### **Clinical Updates**



#### Adult unhealthy drinking and teen alcohol use guidelines updated

Kaiser Permanente's guidelines for alcohol screening and intervention— <u>Unhealthy Drinking in Adults</u> and <u>Alcohol Use in Adolescents</u>—have been reviewed and updated.

### ADULT guideline highlights:

- **Baclofen** is now recommended as a second-line alternative for treating alcohol use disorder (AUD) for patients who are interested in abstinence.
- **Gabapentin** is now recommended as a second-line alternative for treating AUD in patients who are interested in reducing their drinking.
- Considerations for transgender/nonbinary individuals were added to the section on recommended drinking limits.

#### ADOLESCENT guideline highlights:

- The **Screening to Brief Intervention (S2BI)** has replaced the CRAFFT as the screening tool for alcohol use and risk of a substance use disorder (SUD) for adolescents and has been implemented in the 13–17 Integrated Mental Health screening tool.
- The CRAFFT may be used after a positive S2BI screening for supplemental SUD risk assessment.

#### Questions about this article?

John Dunn, MD, MPH, Medical Director, Knowledge & Implementation Avra Cohen, MN, RN, Guideline Coordinator

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#### **Prostate Biopsy clinical review policy retired**

We know that all of you work hard to stay up to date with the latest medical evidence. So do we. And when the medical evidence changes, we work hard to adapt our policies. Medical evidence has grown around the best techniques for prostate biopsy and the role of MRI prior to making a diagnosis of prostate cancer. The Kaiser Foundation Health Plan has had a



policy of clinical review for MRI-US fusion prostate biopsy technique. Professional associations like the American Urologic Association and the National Cancer Care Network have taken more supportive positions on this technology. In response, Kaiser Permanente is retiring its clinical review policy, leaving the decision on biopsy technique between patients and their clinical teams, effective immediately.



# Methadone Treatment for Opioid Use Disorder medical necessity review criteria removed

Our nation and our state are facing an opioid crisis. At Kaiser Permanente, we have taken steps to put in place safety checks that promote appropriate prescribing and reduce the risk opioids pose to our patients. We also recognize that it can be just as important to remove barriers to

care that are appropriate and beneficial. We would like to announce that Kaiser Permanente is eliminating medical necessity review for methadone treatment of opioid use disorder. Additionally, prior authorization will not be required when a patient is receiving care from a contracted provider. While formally this criteria update is effective March 1, 2024, we have removed these requirements as of October 13, 2023. When a patient and a clinician have made a treatment plan, we don't want to stand in the way or delay care.

#### Cryosurgery of breast medical necessity criteria retired

Due to no utilization for this service in 8 years, the explicit medical necessity criteria for Cryosurgery of the Breast for breast cancer and benign lesions is being retired and will no longer be maintained and retired effective immediately. However, if requests are received for this service they will still be reviewed under our <a href="Medically Necessary">Medically Necessary</a> Services Coverage policy.



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#### **Provider Notices**



All notices below can be viewed on our <u>Provider Notices</u> page on the <u>Kaiser 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> and in our <u>Provider Updates</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. Thank you for your partnership in the care of our members.

- Sinuplasty billed with functional endoscopic sinus surgery (FESS)
- ICD-10 CM diagnosis code combinations
- Changes to medical necessity review criteria for fractional flow reserve (FFR)
- Changes to medical necessity review criteria for lumbar and cervical MRI
- Changes to medical necessity review criteria for bariatric surgery
- Changes to medical necessity review criteria for continuous glucose monitors
- Changes to medical necessity review criteria for transition of care
- Coreselect network discontinuation notice
- <u>Ixekizumab (Taltz) will require prior authorization approval</u>
- Cabotegravir extended release (apretude) will require prior authorization approval
- The following medications not covered under the medical benefit: adalimumab (humira), adalimumab-atto (amievita), and etanercept (enbrel, enbrel mini)
- New medically necessary services clinical review criteria
- Clarification regarding new medically necessary services clinical review criteria
- Changes to medical necessity review criteria breast pump
- Emergency department (ED) professional claim coding
- Multiple procedure payment reduction (MPPR) (professional claims)
- Short stay / 2 midnight rule
- Unspecified ICD-10 CM diagnosis codes
- Changes to medical necessity review criteria for Negative Pressure Wound Therapy
- Changes to medical necessity review criteria for High End Imaging Site of Care
- Changes to medical necessity review criteria Elective Surgical Procedures Level of Care

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### **Kaiser Permanente Washington Health Research Institute News**

We are pleased to share a sample of <u>Kaiser Permanente Washington Health Research Institute's</u> latest research and studies:



New numbers could help diagnose and treat a common, complex condition Researchers gain better understanding of polycystic ovary syndrome's impact in U.S.



Increasing opioid use disorder treatment in primary care

A trial led by KPWHRI researchers found that adding nurse care managers helped more people get needed treatment.



Stand up for your health!

Dori Rosenberg, PhD, MPH, researches ways to be less sedentary — and has 27 tips for sitting less.

### **EFT Deposit & Check Mailing Dates**

### 2023 Calendar



### EFT deposit and check mail

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

**NOVEMBER** 7, 9, 16, 24

**DECEMBER** 1, 7, 14, 21, 29

#### **Holidays**

INDEPENDENCE DAY

Tuesday, July 4

LABOR DAY

Monday, September 4

THANKSGIVING DAY

Thursday, November 23

**CHRISTMAS DAY** 

Monday, December 25

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### **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
- 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
  - o 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 2023-2024 CME CALENDAR

Save the Date and Register now!

KPWA CME Catalog - CME Home Page



<u>Hurt, Tired, and Stuck: Strategies for Central Sensitivity</u> – 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

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<u>Adult Gender Affirming Care</u> – Friday, March 15, 2024 - Hyatt Regency Lake Washington at Seattle's Southport, Renton, Wash.

Gender Affirming Medical Care at KPWA, Preventive Care for Transgender and Gender Diverse Patients, Vaginoplasty, Hormones (basic and advanced), Facial Harmonization, Behavioral Voice and Surgical Management, Legal and Political Landscape of Gender Care



Mental Health and Wellness for Primary Care – Wednesday, May 15, 2024 (Virtual) Save the Date!

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