Provider Services Department



October 2020

Clinical Practice and Business Updates

<u>Kaiser Permanente offers \$0 copay for primary care office visits for</u> Medicare Advantage members through December 2020

Kaiser Permanente realizes that, due to the onset of the COVID-19 pandemic, some of our Medicare Advantage members may have delayed seeking care during this time. To assist them with their



healthcare needs, from October 1 through the end of the year, we are waiving the copay for all primary care office visits for our Medicare Advantage members. Fees for services performed in connection with primary care visits, for example, labs or x-rays, will not be waived.

Your contractual allowable with Kaiser Permanente will not change when we reimburse you for the primary care services you provide to our Medicare Advantage members. You will be reimbursed for the copay by Kaiser Permanente. We will run a daily report to capture any claims back to October 1, 2020. If a copay was taken for a primary care visit, we will adjust the claim to remove the copay. You will receive the adjusted claims information on your next remit, advising you to reimburse the member for the copay amount. Thank you for your support in caring for our Medicare Advantage members.

New Ambulance Partnerships for Kaiser Permanente



Effective August 1, 2020, Kaiser Permanente's Emergency Medical Service (EMS) partnerships changed in Western Washington. Kaiser Permanente has developed new partnerships with smaller, local EMS transportation providers. The First Call Guide, which lists our preferred EMS transportation provider by county, along with the contact information for each provider, has an updated preferred providers list as of September

2020. Please use this updated guide when coordinating transportation services for Kaiser Permanente members. For more information, please email Provider Services at kpwa.provider-services@kp.org.

Women's healthcare performed by non-network providers requires prior authorization

Effective January 1, 2021, Kaiser Permanente will no longer cover care or pay claims when a patient is being seen for maternity care, reproductive health services, gynecological care, general examination, and preventive care when done without authorization to a non-network provider. Many maternity services are billed on global billing cycles, such that no indication may exist that the member is seeing a non-network provider



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until delivery. Allowing this practice goes against our mission to provide high quality, affordable care for our members. Please see our updated Women's Health payment policy for further details.

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No change in submitting radiology orders to Kaiser Permanente Radiology

The implementation of Affiliate Link (Tapestry), the updated referral request system accessed through One Health Port, had no impact on the process for ordering radiology internally within Kaiser Permanente. The only change was the method for sending referrals externally when appropriate.

Radiology orders within Kaiser Permanente are made via Epic. Epic routing functionality sends the order to the appropriate local clinic team or the Kaiser Permanente Radiology Appointing Center. If that team determines that the test should be performed externally for any reason, the team submits an external referral request. This was previously submitted via the One Health Port/Kaiser Permanente provider site, but now it is done directly in Epic Tapestry using Referral Entry. The radiology teams have numerous templates built to help them enter external referrals.

Once an external referral is entered and authorized, the external provider who is being referred to can access Affiliate Link through our provider site to see the status of the referral and, in some cases, receive an authorization or denial notification electronically.

Please note that, if you are referring a patient to a Kaiser Permanente clinic for radiology, you must fax the request using the Radiology Request form found on our provider site.

<u>Kaiser Permanente pharmacy services offers many mail order</u> <u>delivery advantages</u>

During this pandemic, it's important to provide our members with options to stay healthy and consistent with their medications. One way to do this is to take advantage of our mail order services. The Kaiser Permanente pharmacy mail order service offers several advantages:



- A majority of our mail order prescriptions are delivered via USPS First Class mail and Priority Mail
- Current delivery rates for western Washington are 96% in 1 day and 99% in 2 days.
- We have regular meetings with our partners at USPS and actively monitor the delivery rates, especially with upcoming extra volumes from the election and holiday shopping.

You can easily and safely transfer prescriptions to use Kaiser Permanente pharmacy mail order services. Prescriptions may be transferred electronically to us via SureScript or faxed to 206-630-7950 or 1-800-350-1683. For mail order pharmacy questions, please call 206-630-7979 or 1-800-245-7979, option 3 then option 1.

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Magellan Healthcare, Inc. partnership for mental health care navigation - we heard your feedback

Within the first month of launch, Magellan and Kaiser Permanente received provider feedback which prompted these process improvements:



- Multiple emails for the same referral:
 - Effective October 15th, Magellan will implement a solution restricting e-mails to one per provider or e-mail address per referral. If your practice has been one affected by this issue, you should see a significant reduction in e-mail volume after that date.
- Member Information received to hold appointments:
 - Magellan is updating the content of these e-mails to include more demographic information about the member (including a diagnostic statement) and information about the provider type they are looking for. We expect to implement this update very soon.

Magellan and Kaiser Permanente are committed to working collaboratively with the provider community to improve member and provider experience. Please contact our Provider Service Unit with your comments and concerns.

<u>Reminder - please use the Emergency Department Facility Evaluation and Management Coding Policy</u> when submitting Emergency Department claims



When coding Emergency Department (ED) claims, facilities should code a level of service based on facility resource consumption. Kaiser Permanente uses the Optum® Emergency Department Claim (EDC) tool to determine the appropriate and fair level of facility reimbursement for outpatient ED services. The EDC AnalyzerTM reviews the diagnoses submitted, as well as the facility services performed, and then determines the appropriate ED visit level. The

intention of the implementation of the EDC Analyzer $^{\text{TM}}$ is to achieve fair and consistent evaluation and management coding and reimbursement of facility outpatient ED claims.

Please see the <u>Emergency Department (ED) Facility Evaluation and Management (E/M) Coding Policy payment policy</u> for more details.

Reminder for Ordering Providers: Prior authorization is required for genetic testing

If you plan to order genetic testing for your patient, please be sure to obtain health plan authorization before sending the specimen to the laboratory for review. This will help avoid any unnecessary denials for your patients and our members. Please refer to our <u>recent letter</u> about our preferred genetic testing provider, Invitae Corporation. Thank you for your assistance with this process.



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Flu Campaign Toolkit

Flu vaccine is more important than ever during this pandemic. As part of this year's Knock Out Flu campaign, <u>Think of It as Essential</u>, please consider using the Washington State Department of Health's extensive toolkit of companion materials for your own outreach efforts.

This toolkit includes bilingual (English and Spanish) assets including:

- Posters/fliers
- Customizable postcards
- Social media graphics & sample messages for Facebook, Instagram and Twitter
- Videos (can be streamed or downloaded)
- Flu vs. COVID-19 Infographic





New ways to deliver flu shots to our members

The COVID-19 pandemic is still underway as we move into flu season. This year, more than ever, it is critical that everyone who can get a flu shot does so as soon as possible. The flu shot is the best way to protect against flu and can reduce the risk of illness or hospitalization from the flu.

This year, we're focused on new ways to deliver flu shots to our members safely and conveniently, including offering extended hours and drive-up vaccination clinics to ensure patients can adhere to physical distancing requirements.

In addition to the many flu shot locations available at Kaiser Permanente, for a limited time (October 17 – December 31, 2020), we are also offering Kaiser Permanente members the ability to receive a flu shot from multiple retail locations (see table at right):

Members who receive a flu shot from a designated retail location will not have to pay for the shot and will not need to file a claim. In addition, their medical record will be updated with the information that they received a flu shot this year. The option to receive a flu shot from retail locations is a limited time opportunity (October 17 – December 31, 2020) and only for the flu shot. This option is being made available due to the COVID-19 pandemic and the urgency of ensuring that everyone who can get a flu shot does so as soon as possible.

For more information on seasonal flu and how to get a flu shot with Kaiser Permanente, please visit kp.org/wa/flu-shot.

NATIONAL Retailers/Pharmacies

- Albertsons
- Costco
- CVS Health
- Fred Meyer
- Haggen's
- Kroger
- QFC
- Rite Aid
- Safeway
- Save-on
- Walgreens
- Walmart

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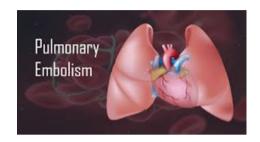


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Updated Pulmonary Embolism Diagnosis & Treatment Guideline

Kaiser Permanente's Pulmonary Embolism Diagnosis & Treatment Guideline has been reviewed and

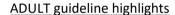
updated. The changes are minor, and include recommendations for the expanded use of direct oral anticoagulants (DOACs) in patients with cancer, recommendations to treat subsegmental and incidental pulmonary embolism in patients with cancer, and options for reduced dosing of DOACs for long-term use in all patients with pulmonary embolism. The guideline also provides talking points for shared decision-making about the pulmonary embolism treatment setting (inpatient versus outpatient).



If you have questions, please email <u>Dave McCulloch</u>, <u>MD</u>, Medical Director, Clinical Improvement or <u>Avra Cohen</u>, <u>MN</u>, <u>RN</u>, Guideline Coordinator, Clinical Improvement & Prevention.

Updated alcohol screening and intervention guidelines

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



- Injectable naltrexone, given monthly, has been added as a second-line option for treating alcohol craving and AUD, and is recommended for patients who have trouble adhering to the once-daily dosing of oral naltrexone. Previously, only the oral version of naltrexone was recommended.
- Disulfiram is no longer routinely recommended for treatment of alcohol use disorder (AUD), as
 new evidence shows that its harms outweigh its benefits. Previously, disulfiram was
 recommended as a second-line option for AUD treatment. Unlike other medications for AUD
 recommended in the guideline, disulfiram has no effect on reducing cravings. If a patient is
 interested in starting disulfiram, virtual consultation with Addiction Medicine is recommended
 before prescribing it.
- Gabapentin has been reclassified as a controlled substance in several states due to risk of abuse, so it is recommended only for treating alcohol withdrawal symptoms. However, gabapentin may be useful for decreasing days of heavy drinking and extending time to relapse, so patients already taking it should continue.

ADOLESCENT guideline highlights

Teen patients who have or are at high risk of developing alcohol use disorder should now be referred to **Mental Health and Wellness;** the Adolescent Center no longer handles these referrals.

If you have questions, please email <u>John Dunn, MD, MPH</u>, Medical Director, Preventive Care, or Avra Cohen, MN, RN, Guideline Coordinator.



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Upcoming Commercial Formulary Changes for Antiretroviral Medicine Class



As a non-profit organization, Kaiser Permanente values making quality insurance affordable to our members. In order to do this, we implement affordability strategies that help serve the reduction in cost of insurance premiums.

Beginning January 1, 2021 Kaiser Permanente is making some changes to antiretroviral medicines for non-Medicare plans. As a result, the antiretroviral medicine class will be limited to Kaiser Permanente pharmacies for applicable plans. The Kaiser Permanente Specialty

Pharmacy, a mail order-based pharmacy at Kaiser Permanente, services the majority of prescription fills for this medicine class. Kaiser Permanente Pharmacies may serve other non-ARV prescription needs for members as requested.

Affected members will receive multiple communications from Kaiser Permanente about this change. These communications include mailed letters in the month of October and a telephone outreach from Kaiser Permanente Specialty Pharmacy staff prior to December 1, 2020. If members are unsure about the process for this transition or have urgent questions, please direct them to contact the Kaiser Permanente Specialty Pharmacy at 1-800-483-3945, extension 0, then 4, Monday through Friday, 9:00 a.m. to 5:00 p.m.

New clinical review criteria for ClariFix® Cryotherapy for chronic rhinitis

Effective for dates of service after September 1, 2020, Kaiser Foundation Health Plan of Washington and Kaiser Foundation Health Plan of Washington Options, Inc. (Kaiser Permanente) will implement clinical review criteria for ClariFix® Cryotherapy for chronic rhinitis. Kaiser Permanente has inadvertently covered this procedure for some patients, as it is usually billed under an existing, typically covered, procedure code. On September 1, 2020, the Kaiser



Permanente Medical Policy Committee formally voted on a decision to institute a new non-coverage policy for this therapy.

Explanation of the policy:

There is insufficient evidence in the published medical literature to show that this therapy provides better long-term outcomes than current standard services/therapies.

Clinical review criteria can be found on the Kaiser Permanente Provider website at https://wa-provider.kaiserpermanente.org/static/pdf/hosting/clinical/criteria/pdf/clarifix.pdf.

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Upcoming Changes

<u>Please check our provider site on a regular basis for provider manual</u> changes and updates.

We communicate changes to the provider manual 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 our changes by visiting our site regularly for updates on our policies and procedures. Thank you for your partnership in the care of our members!



Recently updated payment policies:

- <u>Diagnosis Related Group (DRG) Payment and Review</u>
- Admission and Post Stabilization Requirement (formerly titled EPRO)
- Code Editing

Letters to providers:

Changes to medical necessity review criteria for reduction mammoplasty surgery

Effective December 1, 2020, Kaiser Foundation Health Plan of Washington and Kaiser Foundation Health Plan of Washington Options, Inc. (Kaiser Permanente) are updating the clinical review criteria for reduction mammoplasty surgery.

Changes to medical necessity review criteria for cardiac ambulatory monitoring for extended duration

Effective December 1, 2020, Kaiser Foundation Health Plan of Washington and Kaiser Foundation Health Plan of Washington Options, Inc. (Kaiser Permanente) are updating the clinical review criteria for cardiac ambulatory monitoring for extended duration.

Changes to medical necessity review criteria for brachytherapy

Effective December 1, 2020, Kaiser Foundation Health Plan of Washington and Kaiser Foundation Health Plan of Washington Options, Inc. (Kaiser Permanente) are updating the clinical review criteria for Brachytherapy.

Changes to medical necessity review criteria for genetic panels using Next Generation Sequencing

Effective December 1, 2020, Kaiser Foundation Health Plan of Washington and Kaiser Foundation Health Plan of Washington Options, Inc. (Kaiser Permanente) are updating the clinical review criteria for Genetic Panels using Next Generation Sequencing (NGS) when ordered for non-Medicare members.

Multiple Procedure Payment Reduction (MPPR) on Outpatient Hospital Claims

Effective December 1, 2020, Kaiser Permanente facility outpatient claims billed with a professional revenue code will be treated like they have a 26 modifier and all other facility revenue codes will be treated as though they have a Technical Component (TC) modifier.

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Please see our <u>COVID-19 Provider Resources page</u> on our <u>provider website</u> for helpful coverage and clinical resources.

CME and Workshop Opportunities

Continuing Education Opportunities

Kaiser Permanente Washington offers online and live continuing medical education courses. Check out the opportunities below!



Upcoming CME Courses

All courses presented live via MS Teams

Contact: Christopher.J.Scott@kp.org

Diabetes Management for Primary Care

Friday, October 23, 2020

Register now

GASTROENTEROLOGY FOR PRIMARY CARE

March 11, 2021

Register now

Eating Well for Health

Thursday, November 5, 2020

Register now

OPIOID USE DISORDER

May 26, 2021

Register now

We have a freshly updated <u>CME Catalog page</u>. New features include printing past certificates and receipts, easier access to your transcript, view your current registrations and more!

Please remember to advise your Provider Services Consultant of any:



Have you made any recent changes to your practice?

Don't forget to let us know so we can update our provider directory. On our <u>provider site</u> home page, click on Provider Support, and choose <u>Provider Demographic and/or Practice Changes</u>. You will find several helpful links on that page to provide us with information.

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On this 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:
 - o Clinic/services location updates
 - o Close a clinic location
 - o Remit/billing "Pay to" address updates
 - o Tax ID update / Tax ID address update / 1099 address update

Thank you for helping us maintain a compliant and accurate provider directory.