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Business Updates

Kaiser Permanente receives a 4.5 Medicare Star quality rating for 2023

On October 6, the Centers for Medicare & Medicaid Services (CMS) released the 2023 Medicare Star Quality Ratings for Medicare health plans. Kaiser Permanente Washington Medicare health plans continue to demonstrate high quality and service by earning a rating of **4.5 out of 5 stars**. No competing Medicare Advantage health plans in Washington state rate higher. We wish to thank you for partnering with us to provide high quality, affordable care to our Medicare members.



Please pardon our dust! New membership system coming soon



We are excited to share that Kaiser Permanente is in the process of transitioning to a new membership system. This enterprise-wide, modern platform will replace Kaiser Permanente's four current membership systems in performing all enrollment, benefits coverage/eligibility, and premium billing on behalf of the employer groups and members who pay their premiums directly to Kaiser Permanente.

On October 17, we will begin the transition by migrating approximately 42,000 members representing the Kaiser Permanente Individual & Family On Exchange line of business to the new system. Additional lines of business will follow over the next few years until the migration is complete.

This change will not impact how you work with Kaiser Permanente. We will keep you posted as we migrate additional member populations to the new system.

If you have any questions or concerns, please call the Provider Assistance Unit at 1-888-767-4670. For items requiring escalation, please email your Provider Services Consultant.

Please call the Provider Assistance Unit first to inquire about claims issues

We have noticed a trend of providers emailing their Provider Services Consultant directly regarding claims inquiries. These inquires must be initiated with our Provider Assistance Unit for documentation and tracking. If you have a claims inquiry, please call the Provider Assistance Unit at 1-888-767-4670. When connected to a representative, ask for the claim to be reviewed and verify the reason for denial. You will be issued a reference



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number, which we use to track the inquiry. Please refer to the <u>Provider Reconsideration Process</u> page on our provider site for next steps to take regarding any claim issues.

Check your Affiliate Link in basket for authorization notifications

Minbox (1) Important Sent Mail

Providers who use Affiliate Link to submit referral requests will receive notifications via their In Basket messaging for both the organization and care site. If you need a copy of the patient's authorization, please log onto Affiliate Link to print a copy of the authorization. We can fax you a copy of

the authorization if you are not able to access the authorization on Affiliate Link, but we do not fax copies of authorizations unless requested to do so. Please refer to the <u>Referral Letters</u> tip sheet for detailed information on how to access these authorizations in Affiliate Link.

Providers who do not use Affiliate Link will receive referral notifications via fax. If we do not have a fax number on file, the organization and care site will be mailed the respective notifications. Providers who use a P.O. Box to receive notifications are encouraged to establish Affiliate Link access, as we require a street address to send referral authorization and denial notifications. Updates to your address can be submitted <u>online</u>.

Are you aware of our enhancement to the Eligibility & Inquiry tool on Affiliate Link?

Did you know that member contracts are available on the secure provider portal under Eligibility & Benefits Inquiry? Member contracts are viewable with the exception of self-funded plans.

器 Eligibi	lity and ben	nefits inquiry			
< Back					
Eligibility details	Benefits usage				Check benefits for this member
					Summary of Benefits and Coverage (PDF)
Name					Evidence of Coverage (PDF)
Date of service	10/11/2022 Edit				
Status	ACTIVE				NOTE: Documents above are determined by Date of Service. Edit the Date of Service field for benefit information on a specific date.
Member information					Check member benefits with contractual limits and payments toward cost shares. (Information is shown for the current year and previous year. Information is not available if
Member ID #		Day phone #			you select a year a member was not enrolled with Kaiser Permanente.)
Date of birth		Evening phone #	-		North shares for this means have
Gender		Medicare ID			Next steps for this member
Address		Hedicale ib			🖹 Referral Request & Status 7
		Medicaid ID	-		Claim Status Inquiry
					K Preauthorization Code Check

If you have any questions or concerns about this new feature, please call the Provider Assistance Unit at 1-888-767-4670.

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Avoid delays when submitting reconsideration requests

Here are a couple of tips to avoid delays when submitting a reconsideration request involving a coordination of benefits issue or an inpatient stay:

- 1. If your reconsideration request involves a coordination of benefits issue, please remember that we require documentation that supports coverage was confirmed with the other carrier. This is not just a copy of an authorization from the other carrier, but documentation that reflects coverage was confirmed, showing the member was active at the time of service and that the other carrier did not show other insurance was on file.
- 2. If your reconsideration is related to an inpatient stay, you do not need to submit patient records along with your reconsideration request if your records are in EPIC Care Everywhere. If the records are sent via mail, the duplicative work of scanning and reviewing the records will cause a delay in processing the request. Submitting your reconsideration request via Affiliate Link will save you time and expedite our review.

Thank you for helping us process these requests as timely as possible.

You can order lab tests from a Kaiser Permanente lab

Did you know that you can order lab tests that can be drawn and completed at a Kaiser Permanente lab? To start the order, just fax the order to the Kaiser Permanente lab of the patient's choice (see the <u>Kaiser Permanente Laboratory Phone and Fax List</u> for a list of available labs and contact information). Alternatively, you can send a paper copy of the lab order with the patient for them to present to the Kaiser Permanente lab assistant. Note that patients are not required to make a lab appointment during regular business hours. Patients can access Kaiser Permanente lab hours by calling member services or searching lab locations on the <u>Kaiser Permanente Washington member site</u>.

The order should include the following information:

- Patient's full name
- Patient's date of birth
- Necessary tests
- Appropriate associated diagnosis code
- Name of ordering clinician
- Fax number to send results when they are available



You do not need to request these orders from a Kaiser Permanente clinician or request that the results be sent to a Kaiser Permanente clinician. All of the Kaiser Permanente lab results are visible to the clinical teams in the patient's electronic health record once posted. Your patients will be informed of

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their lab results immediately via the MyChart app or, if a patient is not active on MyChart, the patient will receive a paper copy of their results mailed to their home.

Updates to Physician Assistant CME Requirements



We are sharing this notice we received from the Washington Medical Commission as a courtesy reminder:

If you are a Physician Assistant (PA), changes are coming on October 27, 2022 to your CME requirements. PAs and Retired Active PA licensees should begin to prepare for the termination of Proclamation 20-32.

On October 27, 2022:

- Waivers to <u>WAC 246-918-180</u> will end. PAs must meet continuing education requirements.
- PAs must meet all requirements for licensure in <u>WAC 246-918-080</u>.
- PAs must have and maintain practice agreements per WAC 246-918-055.
- In order to return to active status when a license has expired and to renew PAs must meet the continuing medical education requirements under <u>WAC 246-918-180</u>.
- PAs must meet the one-time training in suicide assessment in WAC 246-918-185.

Per WAC 246-918-175 Retired Active PAs:

- Are no longer considered "covered volunteer emergency worker" and must have a practice agreement on file with their employer.
- Cannot receive compensation for health care services.
- May only practice in emergent circumstances calling for immediate action or in intermittent circumstances on a part-time or full-time nonpermanent basis.
- Must report 100 hours of CME at every renewal.

In conjunction with the Department of Health and other medical professions, the Washington Medical Commission (WMC) will exercise enforcement discretion regarding the resumption of CME requirements. WMC will be instating a grace period for MDs and PAs to complete their CME requirements. Learn more on our webpage for CME reinstatement.

Kaiser Permanente Washington Health Research Institute News

We are pleased to share some of the latest news from the <u>Kaiser Permanente Washington Health</u> <u>Research Institute</u>. We invite you to visit their informative website to learn more about their latest research and studies.

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Comparing different types of bariatric surgery: What's right for you?

Based on their studies, Kaiser Permanente Washington Health Research Institute researchers explain the risks and benefits.

TYPES OF BARIATRIC SURGERY





Talking to an addictions researcher

Collaborative Scientist Leah Hamilton, PhD, MPhil, answers questions about her recent and upcoming projects, including a new paper gauging experts' views on opioid-related policies.

Gene-edited malaria vaccine shows promise

Encouraging immune-response and safety data emerge from preliminary human test of genetically attenuated parasite vaccine.



Provider Notices



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</u> <u>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.

Provider Notices:

- Modifier 26
- Ketamine will require prior authorization approval
- Alglucosidase (Lumizyme) updated prior authorization criteria

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- <u>Capsaicin (Qutenza) will require prior authorization approval</u>
- <u>Site of care prior authorization requirement</u>
- <u>Changes to medical necessity review criteria for Cervical Fusion</u>
- <u>Changes to medical necessity review criteria for cochlear implant</u>
- New medical necessity review criteria for Advanced Care at Home
- <u>Revenue code billed without required procedure code</u>
- <u>Changes to medical necessity review criteria for home pulse oximetry</u>
- <u>Changes to medical necessity review criteria for lumbar spine fusion</u>
- <u>Changes to the code check tool for phototherapy</u>
- <u>Changes to medical necessity review criteria for minimally invasive lumbar</u> <u>decompression (mild)</u>

CME and Workshop Opportunities

Continuing Education Opportunities

Kaiser Permanente Washington offers a variety of continuing medical education courses throughout the year, detailed on our <u>CME Catalog page</u>. Check out current opportunities below.



Nov 17, 2022	Online Decision Support Resources
Dec 1, 2022	Geriatrics for Primary Care
Jan 26, 2023	Hematology – Oncology for Primary Care
Mar 17, 2023	Medication Update 2023
Apr 28, 2023	Dermatology for Primary Care

Please remember to advise your Provider Services Consultant

Have you made any recent changes to your practice?



Don't forget to let us know so we can update our <u>Provider Directory</u>. On our <u>provider site</u> home page, click on Provider Support, and choose Provider Demographic and/or Practice Changes to take you to our <u>Provider Update</u> <u>Forms</u> page. 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:
 - 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 helping us maintain a compliant and accurate provider directory.