

MODIFIERS JA AND JB

This notification applies to the following networks: Commercial HMO, POS, PPO and Medicare Advantage
A listing of all networks can be found on the provider website at
<https://wa-provider.kaiserpermanente.org/communications/letters>

Effective July 15, 2021, Kaiser Foundation Health Plan of Washington and Kaiser Foundation Health Plan of Washington Options, Inc. (Kaiser Permanente), when benefits allow, will reimburse for medications that have one J Code for multiple routes of administration. To allow for proper monitoring of dose and treatment frequency, the JA or JB modifier must be present on the claim to indicate the route of administration as either intravenous or subcutaneous. Claims for drugs that fall under this category will be reviewed, and the lack of a JA or JB modifier may result in a claim denial.

Modifier	Description
JA	Intravenous administration
JB	Subcutaneous administration

Questions: Please contact the Provider Assistance Unit at 509-241-7206 or 1-888-767-4670, Monday through Friday, 8 a.m. to 5 p.m.

Kaiser Foundation Health Plan of Washington
Kaiser Foundation Health Plan of Washington Options, Inc.

<CONTRACT MANAGER NAME>

Provider Communications, RCB-C2W-02

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