

INITIAL HOSPITAL E&M UPCODING

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 April 1, 2022, Kaiser Foundation Health Plan of Washington and Kaiser Foundation Health Plan of Washington Options, Inc. (Kaiser Permanente) will not reimburse CPT 99223 billed with place of service 21 for dates of service one day prior to or on the date of discharge unless documentation is provided that substantiates the use of 99223.

The payment policy can be found on the Kaiser Permanente provider website at: <https://wa-provider.kaiserpermanente.org/static/pdf/provider/billing-claims/initial-hospital.pdf>

Questions: Contact 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

PO Box 34262, Seattle, WA 98124-1262



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