

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

FEBRUARY 15, 2022

WE HEARD YOU – Authorization No Longer Required for Therapy or Psychiatry

Dear Provider,

All of us at Kaiser Permanente would like to express our appreciation for the excellent mental health care you are providing to our members during what has been a very challenging two years. We know the pandemic has taken its toll on everyone, and the accompanying surge in mental health demand has taxed our system and those providing care. Thank you for rising to the challenge and being there for those who need it during their most vulnerable moments.

We also want to make sure you have what you need to continue to take excellent care of our members' mental health needs. We have received feedback about the processes to treat Kaiser Permanente members. We want to acknowledge that we heard you, and we are taking immediate steps to address your pain points.

Effective February 15, 2022, authorizations and re-authorizations will no longer be required for outpatient mental health therapy or psychiatry

As you may be aware, we also took the following steps in 2021 to improve your contracted provider experience:

- Created a process for associate-level providers to see Kaiser Permanente members under supervision
- Provided webinar training on Affiliate Link
- Provided webinar training on the Magellan appointing system

We thank you for your continued commitment to providing the highest quality of care to Kaiser Permanente members. If you have further questions, please see the attached Frequently Asked Questions. You may also view these FAQs on the Kaiser Permanente provider site at <https://wa-provider.kaiserpermanente.org/static/pdf/provider/resources/mental-health-auth-faq.pdf>.

Regards,

Maria Coghill

Maria Coghill
Director, Mental Health & Wellness

Vanessa Richter

Vanessa Richter
Vice President of Network Operations

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Mental Health Outpatient Therapy and Psychiatry Prior Authorization Frequently Asked Questions

Q1. Who can see a Kaiser Permanente member for mental health outpatient therapy or psychiatry services without first obtaining prior authorization?

A1. Any provider who is contracted in that member's specific contracted network can see the member for these services without prior authorization.

Q2. If a provider is contracted in the PPO network, but the member is in the HMO network, can the provider see the member for mental health outpatient therapy or psychiatry services without prior authorization?

A2. No, not without an exception. If you are outside the member's contracted network, the provider or member must request an exception from Kaiser Permanente to see the member. If granted, the provider will be authorized to provide a specific number of sessions and will need to request reauthorization for additional sessions if the need arises.

Q3. Are there a limited number of sessions for providers to see Kaiser Permanente members without prior authorization?

A3. No. However, Kaiser Permanente may conduct a review of claims, and may reach out to a provider if there are unusual billing practices.

Q4. Will a provider have to request reauthorization to renew services each year?

A4. No. This new policy will remain in effect unless and until otherwise terminated.

Q5. Can non-contracted mental health providers see a Kaiser Permanente member?

A5. Yes and no. If the member is on a PPO plan, the benefit extends to non-contracted providers and there is no restriction on services. If the member is on an HMO plan, the provider or member must request an exception from Kaiser Permanente to see the non-contracted provider. If an exception is granted, the provider will be authorized to provide a specific number of sessions and will need to request reauthorization for additional sessions if the need arises.

Q6. Do other mental health services still require prior authorization?

A6. Yes. The only services that no longer require prior authorization are mental health outpatient therapy and psychiatry.