

**CHANGES TO MEDICAL NECESSITY REVIEW CRITERIA FOR
AMBULATORY SURGERY CENTER (ASC) – SITE OF CARE POLICY**

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

Effective October 1, 2023, Kaiser Foundation Health Plan of Washington and Kaiser Foundation Health Plan of Washington Options, Inc. (Kaiser Permanente) is expanding site of care review criteria for certain elective surgical procedures for non-Medicare members when being requested at a hospital setting.

Explanation of the change:

Kaiser Permanente has added additional GI procedures to the existing site of care policy for all counties subject to this policy. Kaiser Permanente has also added King and Thurston counties to this policy. Site of Care will only apply to King and Thurston counties when GI procedures are being requested at a hospital setting.

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

What will I need to do differently for my patients with the following Kaiser Permanente health plans?

- KFHPWA Health Maintenance Organization (HMO) members: Prior authorization is required.
- KFHPWAO Point of Service (POS) members: Prior authorization is required for in-network coverage.
- KFHPWAO Preferred Provider Organization (PPO) members: Prior authorization is required.

Questions: Contact Provider Assistance Unit at 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, RCR-A3W-04

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