

# Provider Update

News for Kaiser Permanente Washington Contracted Providers • MARCH 2022

## We heard you—authorization no longer required for mental health outpatient therapy or psychiatry

**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. We wish to thank our mental health providers for rising to the challenge and being there for those who need it during their most vulnerable moments.

In 2021, we set a goal to improve the process for our members to seek mental health care. During the past year, we created a process for associate-level providers to see Kaiser Permanente members under supervision, provided webinar training on Affiliate Link, and provided training on our Magellan appointing system.

In addition to these changes, we are pleased to announce that, effective

February 15, 2022, authorizations and re-authorizations are no longer required for outpatient mental health therapy or psychiatry.

If you have further questions, please see the [letter](#) and supporting [Frequently Asked Questions](#) located on our [mental health, including addiction and recovery provider site page](#) or reach out to your provider services consultant.



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**Provider Update** is published quarterly for Kaiser Permanente contracted providers. Send story ideas and comments to [Provider Communications](#).

Coverage provided by Kaiser Foundation Health Plan of Washington or Kaiser Foundation Health Plan of Washington Options, Inc., referred to as Kaiser Permanente in this publication.

**2022  
Calendar**



**EFT deposit and check mail dates**

Provider reimbursement checks are scheduled to be deposited ACH or mailed on the following dates. Mailed checks should arrive within approximately three business days.

<b>MARCH</b>	7, 10, 17, 24, 31	<b>AUGUST</b>	4, 11, 18, 25
<b>APRIL</b>	7, 14, 21, 28	<b>SEPTEMBER</b>	1, 8, 15, 22, 29
<b>MAY</b>	5, 12, 19, 26	<b>OCTOBER</b>	6, 13, 20, 27
<b>JUNE</b>	6, 9, 16, 23, 30	<b>NOVEMBER</b>	7, 10, 17, 25
<b>JULY</b>	8, 14, 21, 28	<b>DECEMBER</b>	1, 7, 15, 22, 30

**Kaiser Permanente holidays**

**MEMORIAL DAY**  
Monday, May 30

**INDEPENDENCE DAY**  
Monday, July 4

**LABOR DAY**  
Monday, September 5

**THANKSGIVING DAY**  
Thursday, November 24

**CHRISTMAS DAY**  
Monday, December 26

**PROVIDER NEWS**

# Reimbursement for rapid antigen home tests

**WHILE HOME SELF TESTS ARE STILL IN VERY SHORT SUPPLY,** the federal government now allows households to order up to 4 free rapid tests by visiting [covidtests.gov](https://covidtests.gov). Additionally, the [Washington State Department of Health](#) will provide up to 5 free rapid tests.

Kaiser Permanente will also reimburse members who purchase FDA approved rapid antigen home tests at their local drugstore or online. Please advise your Kaiser Permanente member patients that they can download and mail in an [over the counter COVID 19 test form](#) to get reimbursed for self tests purchased on or after January 15, 2022.

**The claim must include:**

- An itemized purchase receipt with test name, date of purchase, price, and number of tests
- A photo or cut out of the QR or UPC bar code from the rapid antigen home test box



Thank you for assisting our members to obtain these tests, and for your ongoing efforts to keep our members healthy!

## Historical referral tool being removed in March

In August 2020, Kaiser Permanente Washington transitioned our referral processing from outdated legacy tools to Tapestry UM through Affiliate Link. Since that transition, we have offered a link for providers to access their historical referral information on our secure provider portal. Over the past 17 months, use of the historical referral link has been declining, as most of these older referrals are no longer active. Consequently, we are planning to retire the historical referral link at the end of March. This change will not impact current referrals in Affiliate Link but viewing will be limited to legacy system referrals that were received prior to August 17, 2020.

If your team has need for historical information after this link has been removed, please call the Provider Assistance Unit at 1-888-767-4670.

## Recent letters to providers

### As of February 15, 2022

[We heard you—authorization no longer required for mental health therapy or psychiatry \(PDF\)](#)

Authorizations and re-authorizations will no longer be required for outpatient mental health therapy or psychiatry.

### As of March 1, 2022

[Changes to medical necessity review criteria for gender affirming surgeries \(PDF\)](#)

Kaiser Foundation Health Plan of Washington and Kaiser Foundation Health Plan of Washington Options, Inc. (Kaiser Permanente) is updating criteria for facial and body hair removal for members with gender dysphoria.

### Effective April 1, 2022

[Changes to medical necessity review criteria for vagus nerve stimulation \(vns\) \(PDF\)](#)

Kaiser Foundation Health Plan of Washington and Kaiser Foundation Health Plan of Washington Options, Inc. (Kaiser Permanente) are updating the clinical review criteria for vagus nerve stimulation (VNS) for non-Medicare members.

[Initial hospital e&m upcoding \(PDF\)](#)

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.

[Changes to medical necessity review criteria for gynecomastia \(PDF\)](#)

Kaiser Foundation Health Plan of Washington and Kaiser Foundation Health Plan of Washington Options, Inc. (Kaiser Permanente) are updating the clinical review criteria for mastectomy for gynecomastia.

[Changes to medical necessity review criteria for spinal muscular atrophy carrier testing \(PDF\)](#)

Kaiser Foundation Health Plan of Washington and Kaiser Foundation Health Plan of Washington Options, Inc. (Kaiser Permanente) are updating the clinical review criteria for Spinal Muscular Atrophy (SMA) carrier testing.

[Split night sleep study \(PDF\)](#)

Kaiser Foundation Health Plan of Washington and Kaiser Foundation Health Plan of Washington Options, Inc. (Kaiser Permanente) will not separately reimburse for CPT codes 95810 and 95811 when billed within 30 days of each other.

[Changes to medical necessity review criteria for insulin pump \(PDF\)](#)

Kaiser Foundation Health Plan of Washington and Kaiser Foundation Health Plan of Washington Options, Inc. (Kaiser Permanente) are updating the clinical review criteria for insulin pumps for non-Medicare members.

[7th character ICD-10 and therapy codes \(PDF\)](#)

Kaiser Foundation Health Plan of Washington and Kaiser Foundation Health Plan of Washington Options, Inc. (Kaiser Permanente) will not reimburse subsequent PT, OT, SLP

therapy visits when billed with ICD-10 code(s) where the seventh character of "A" is billed in any position.

### Effective May 1, 2022

[Medicare Part B drugs requiring prior authorization \(PDF\)](#)

Prior authorization will be required for the Medicare Part B drugs listed in Table 1. This letter is a notification of the upcoming change in prior authorization review required before administering these medications under the medical benefit.

[Colony stimulating factor updates to coverage under medical benefit \(PDF\)](#)

New authorizations for the filgrastim products in Table 1 will NOT be covered under the medical benefit. These drugs will be added to the non-Medicare list of office-administered drugs requiring prior authorization. Pharmacy benefit coverage remains available for members who meet prior authorization criteria.

The criteria for pegfilgrastim products in Table 2 will be updated. These products are on the non-Medicare list of office-administered drugs requiring prior authorization.

[Changes to medical necessity review criteria for autologous chondrocyte implantation \(PDF\)](#)

Kaiser Foundation Health Plan of Washington and Kaiser Foundation Health Plan of Washington Options, Inc. (Kaiser Permanente) are updating the clinical review criteria for autologous chondrocyte implantation (ACI) in the knee.

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## HEDIS® medical record review season: February–May 2022



**FROM FEBRUARY THROUGH MID-MAY 2022**, Kaiser Foundation Health Plan of Washington will be conducting HEDIS medical record reviews on members enrolled in a Kaiser Permanente plan in 2021 to measure the quality of care provided to our members. Our medical record reviewers will be contacting your office to request remote access to your electronic medical record system (preferred), and/or request that medical records are faxed or mailed.

We appreciate your assistance in providing access to the medical information as requested. Your prompt response will ensure that your group’s HEDIS measures accurately represent the high quality of care that you provide to our members.

Please contact Susie Jorgensen, HEDIS Program Coordinator at [Susie.R.Jorgensen@kp.org](mailto:Susie.R.Jorgensen@kp.org) or 206-630-1274 if you have any questions.

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### Recent letters to providers

#### Effective May 1, 2022

[Changes to medical necessity review criteria for chromosomal microarray testing \(PDF\)](#)

Kaiser Foundation Health Plan of Washington and Kaiser Foundation Health Plan of Washington Options, Inc. (Kaiser Permanente) are updating the clinical review criteria for Chromosomal Microarray Testing for patients undergoing invasive prenatal testing.

[Medicare Part B drugs requiring step therapy \(PDF\)](#)

Step therapy will be required for the non-preferred Medicare Part B drugs listed in Table 1. This letter is a notification of the upcoming change in step therapy approval required before administering these medications under the medical benefit.

[Lanreotide \(Somatuline Depot\) updates to coverage under the medical benefit \(PDF\)](#)

Lanreotide (Somatuline Depot) will be added to the non-Medicare list of

office-administered drugs requiring prior authorization. This letter is a notification of the upcoming change in prior authorization criteria required before administering this medication under the medical benefit. This new prior authorization requirement will not affect patients already established on lanreotide.

[Esketamine \(Spravato\) updates to coverage under the medical benefit \(PDF\)](#)

The criteria for esketamine (Spravato) will be updated to include quantity limits. Esketamine (Spravato) is on the non-Medicare list of office-administered drugs requiring prior authorization. This letter is a notification of the upcoming change in prior authorization criteria required before administering this medication under the medical benefit.

[Changes to medical necessity review criteria for ConfirmMDx and SelectMDx \(PDF\)](#)

Kaiser Foundation Health Plan of Washington and Kaiser Foundation Health Plan of Washington Options,

Inc. (Kaiser Permanente) will implement clinical review criteria for ConfirmMDx and SelectMDx testing for prostate cancer. Although Kaiser Permanente has not covered these services historically, this postcard serves as formal notification of this new non-coverage policy for non-Medicare members.

[Changes to medical necessity review criteria for knee magnetic resonance imaging \(MRI\) \(PDF\)](#)

Kaiser Foundation Health Plan of Washington and Kaiser Foundation Health Plan of Washington Options, Inc. (Kaiser Permanente) will implement medical necessity criteria for MRI of the knee for non-Medicare patients.

#### Effective June 1, 2022

[Changes to medical necessity review criteria for InPen Smart Insulin Pen \(PDF\)](#)

Kaiser Foundation Health Plan of Washington and Kaiser Foundation Health Plan of Washington Options, Inc. (Kaiser Permanente) are updating the clinical review criteria for the InPen Smart Insulin Pen.

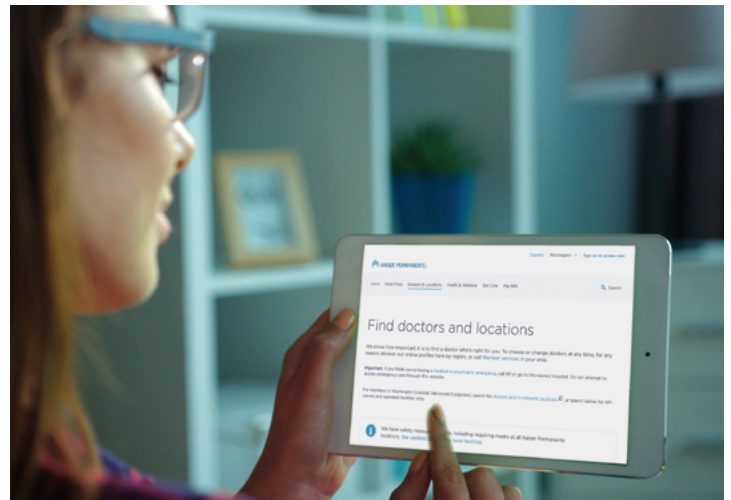
# Update on processes to support HR 133 legislation

**UPDATED CLINICIAN AND PRACTICE INFORMATION** allows us to provide patients with current directory information so they can select in-network providers, choose health plans, and ultimately access care.

Our goal in using VerifyHCP is to make this process as easy as possible for clinicians and their practices to facilitate timely and accurate responses to outreach requests. **If your practice has previously opted out of the VerifyHCP campaign, and you are a delegated provider with Kaiser Permanente of Washington, we must alert you that we can no longer allow your practice to opt out.** Delegated rosters were developed to support credentialing data and processes and do not provide the necessary detail to comply with HR 133 requirements. While we have attempted to utilize the delegated rosters to capture provider changes, they were not developed for this reason and too often provide inaccurate data to support directory changes.

To comply with federal and state regulations, including HR 133, we will be requesting provider data verification for your practice through LexisNexis® Risk Solutions (VerifyHCP). Health plans are mandated to outreach a minimum of quarterly to their network providers for data verification.

**The objective of this outreach is to confirm that the provider information displayed to members on the provider directory is current and accurate.**



The HR 133 legislation can impose significant financial penalties to the health plan if data is incorrect and/or not updated within the established timeframe of two business days. If provider data pertaining specifically to the provider directory cannot be verified, per the HR 133 legislation, the health plan has the option of suppressing providers from the directory. While this is a last resort, we must meet the requirements of HR 133 by providing an accurate provider directory for our members.

LexisNexis has a dedicated customer support team available to assist providers. Support requests can be:

- submitted [via the website](#)
- sent [via email](#)

To designate a primary contact for your office, or if you have any additional questions, please contact your provider service consultant or [kpwa.provider-services@kp.org](mailto:kpwa.provider-services@kp.org).

## PHARMACY NEWS

# Kaiser Permanente 2022 drug formularies

**THE KAISER PERMANENTE DRUG FORMULARIES** are the cornerstone of medication therapy, quality assurance, and cost containment. The formularies are developed by the Pharmacy and Therapeutics (P&T) Committee.

You can find [formulary decision highlights](#) from the most recent P&T

Committee meetings on the Kaiser Permanente provider website.

### **Kaiser Permanente has 7 formularies**

The table below outlines some of the major differences in these formularies. A closed formulary design describes a formulary in which preferred medications are covered and non-

preferred (non-formulary) medications are generally not covered. Coverage of non-preferred medications is available through an exception process. An open formulary design describes a formulary in which both preferred and non-preferred medications are covered; however, preferred medications are available at a lower cost share for patients.

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## Kaiser Permanente 2022 drug formularies

### How to view the Kaiser Permanente formularies

- On the [Kaiser Permanente provider website](#).
- On [ePocrates](#), register free of charge.

If you have questions about formulary status of a drug or prior authorization, please contact our Pharmacy Help Desk toll-free at 800-729-1174 or by fax toll-free at 866-510-1765.

### Medicare Part D Formulary updates

Notifications about drug removals from the Medicare Part D Formulary are now posted online on the [pharmacy page](#) of our provider website.

MEDICARE	INDIVIDUAL & FAMILY / SMALL GROUP	LARGE GROUP AND FEDERAL EMPLOYEE HEALTH BENEFIT				
Closed Design	Open Design	Closed Design	Closed Design	Open Design	Open Design	Open Design
<b>Six tiers:</b> <ul style="list-style-type: none"> <li>• Preferred generic</li> <li>• Non-preferred generic</li> <li>• Preferred brand</li> <li>• Non-preferred brand</li> <li>• Specialty</li> <li>• Injectable Part D vaccines</li> </ul>	<b>Four tiers:</b> <ul style="list-style-type: none"> <li>• Preferred generic</li> <li>• Preferred brand</li> <li>• Specialty</li> <li>• Non-preferred generic &amp; brand</li> </ul> <b>PLUS:</b> <ul style="list-style-type: none"> <li>• Self-administered oncology</li> <li>• Medical benefit</li> </ul>	<b>Two tiers:</b> <ul style="list-style-type: none"> <li>• Preferred generic</li> <li>• Preferred brand</li> </ul>	<b>Three tiers:</b> <ul style="list-style-type: none"> <li>• Preferred generic</li> <li>• Preferred brand</li> <li>• Preferred specialty</li> </ul>	<b>Three tiers:</b> <ul style="list-style-type: none"> <li>• Preferred generic</li> <li>• Preferred brand</li> <li>• Non-preferred</li> </ul>	<b>Four tiers:</b> <ul style="list-style-type: none"> <li>• Preferred generic</li> <li>• Preferred brand</li> <li>• Non-preferred generic &amp; brand</li> <li>• Specialty</li> </ul>	<b>Five tiers:</b> <ul style="list-style-type: none"> <li>• Preferred generic</li> <li>• Preferred brand</li> <li>• Non-preferred generic &amp; brand</li> <li>• Preferred specialty</li> <li>• Non-preferred specialty</li> </ul>

## CONTINUING MEDICAL EDUCATION

### Save these dates



Kaiser Permanente Washington offers a variety of continuing medical education courses throughout the year, detailed on our [CME catalog page](#).

#### SUBOXONE HALF-HALF BUPRENORPHINE WAIVER COURSE

July 12, 2022

#### CARDIOLOGY FOR PRIMARY CARE

September 9, 2022

#### EVIDENCE-BASED MEDICINE

September 20, 2022

#### MENTAL HEALTH FOR PRIMARY CARE

October 13, 2022

#### HEMATOLOGY AND ONCOLOGY FOR PRIMARY CARE

November 4, 2022

#### SKILLS AND PROCEDURES WORKSHOP

December 14, 2022

#### Register

Check out the [CME catalog page](#) to register and get course details.

#### COVID-19 notice

Please note courses will be presented as live virtual sessions using Microsoft Teams.

#### Contact

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