

KPCO Apr - Jun 2022 Provider Insider

This communication is for Kaiser Permanente Colorado network providers.

Inside this Issue

- Care Gap of the Quarter
- CAMS Network Notification
- UM Reminders
- Thank You Healthcare Heroes
- Tidbits
- Colorado Option Plan
- Language Assistance Information
- Affiliate Link
- New Community Provider Portal look



Thank You Healthcare Heroes!

Utilization Management Reminders:

Reminders on Home Health Authorization Requests:

 Modification and continuation of stay requests will need the # of visits being requested and # visits already used

Affiliated practitioners/providers are instructed in the **Provider Manual** on how to obtain copies of the criteria used to make a medical decision. You can also call 1-877-895-2705 or fax a request to 1-877-685-6272.

When submitting an authorization request, the UM department needs all the required information to process the request for example: Referred to place of service, the CPT or HCPC codes needing to be reviewed, how many units are being requested and the dates of service

Reminder on the definition of an Urgent Request: A request for medical care or services where application of the time frame for making routine or non-life-threatening care determinations:

- Could seriously jeopardize the life or health of the member or the member's ability to regain maximum function, based on a prudent layperson's judgment, or
- Could seriously jeopardize the life, health or safety of the member or others, due to the member's psychological state, or
- In the opinion of a practitioner with knowledge of the member's medical or behavioral condition, would subject the member to adverse health consequences without the care or treatment that is the subject of the request.



Colorado Option Plan

Starting in 2023, the Colorado Option will be available to all Coloradans who buy their health insurance on the individual market (i.e., not from an employer) and small employers with less than 100 employees. With appropriate federal approval, Colorado Option plans will lower health insurance premiums for individuals, families, and small businesses by 15% by 2025.

What's special about this plan?

As part of the Colorado Option, the Division of Insurance will create a standardized plan which will allow consumers and businesses to easily compare plans and choose the plan that is right for them. This plan will cover all essential health benefits required by the Affordable Care Act, provide many high value services without consumer cost sharing, and be designed to reduce racial health disparities and improve health equity.

Full details from the Division of Insurance can be found here. https://doi.colorado.gov/announcements/notice-of-adoption-amended-regulations-4-2-73-and-5-2-12-and-new-regulation-4-2-80

Planning Ahead! Your road map to the Colorado Option Plan

As part of the Colorado Option Plan, Kaiser Permanente will now be requesting some additional data elements from our network providers. Please see below for a timeline and description of what is to come:



- 1. New data elements added to the Quarterly Attestation:
 - Front Office Staff Languages Spoken (In addition to English)
 - Extended Hours (Yes/No)
 - Weekend Hours (Yes/No)
- 2. In support of Regulation 4-2-80 and as an industry-leading organization of diversity and inclusion, Kaiser Permanente is collecting voluntarily submitted provider and front office staff demographic data. This data will



be used to improve racial health equity and reduce health disparities for covered persons who experience higher rates of health disparities and inequities. It is important to note that this information will only be provided in aggregate to the Colorado Division of Insurance, and all personally identifiable information will be kept confidential and will not be disclosed without the written consent of the reporting physician, provider, or office staff member. Voluntary demographics template can be found here:

https://healthy.kaiserpermanente.org/colorado/community-providers/provider-info#provider-demographics

- 3. Providers and their front office staff are required to annually receive anti-bias, cultural competency, or similar training designed to educate on the health care needs of persons who experience higher rates of health disparities and inequities. Look for additional resources in next quarter's provider newsletter.
- 4. At the beginning of each year, practices must report how many providers and front office staff members received anti-bias training during the previous year by completing an attestation template which inquires about the duration of the training, any certifications earned, and a description of the training that was provided. Look for the template to be available Fall of 2022.
- 5. Colorado Option Plan is effective 1/1/2023. The collection of voluntary demographic data and the required training attestation will continue on an annual basis.

More Reasons for Affiliate Link...

Did you know that you can easily order Labs and Medical Imaging studies through Affiliate Link! This software will save writing an order, possibly getting a clarifying call, and the order will be waiting for your patient when they arrive at any Kaiser facility. In addition, you can also see the results as soon as they are read.

All Kaiser Permanente referrals to network contracted providers are sent through Affiliate Link. We have eliminated faxing.

To register:

https://healthy.kaiserpermanente.org/colorado/community-providers/online-provider-tools



If you need assistance, please contact your provider experience representative at 1-866-866-3951.

Our Community Provider Portal has a new look! *Visit:*

https://healthy.kaiserpermanente.org/colorado/community-providers

Tidbits....

- Medicare members do not need auths for PT/OT/ST. Commercial members do.
- Penrose Hospital and St. Francis
 Hospital are now contracted to see
 Kaiser Permanente
 Sr. Medicare
 Advantage
 members.
- REMINDER: Do not refer members to non-con providers without an auth. Kaiser Permanente is not contracted with Exact Sciences (Cologuard).



CAMS Network Notification

Background

- High-cost Clinically Administered Medications (CAMS) require Prior Authorization from KPCO Utilization Management department before administration.
- As of 11/17/2021 some CAMS also require approval from KPCO Pharmacy Authorization Services (PAS) Team if the medication will be administered at a KPCO clinic
- Xolair can be administered in KPCO Primary Care Departments at Briargate MOB (Co Springs), Pueblo North MOB (Pueblo,) and Loveland MOB (Loveland.)
- The prescribing provider who is directing the patient to get this medication is responsible for seeking Prior Authorization in the way you submit authorization requests now.

Instructions

- 1. Prior Authorization Forms can be found on the KPCO <u>Community</u> Provider Portal website.
- 2. Once completed, the Form will need to be sent by fax to KPCO Utilization Management Department at 866-529-0934.
- 3. Once Authorization review has been completed, the prescribing provider and member will receive an Approval or Denial Letter from KPCO Utilization Management department.
- 4. Members will be able to locate the Authorization Letter online in their kp.org account, or they will be sent the Authorization Letter by mail if they do not have kp.org (Kaiser patient portal account.)

Important Notes:

- Review of Routine Prior Authorization requests can take up to two weeks to process as KPCO Utilization Management and Pharmacy Authorization Services Teams need time to review.
- This means that members will not be able to have the CAM administered the same day in a KPCO facility!
- If there is a need for the patient to have the medication administered urgently, please submit an Urgent request. Urgent requests are processed in 72 hours.



Care Gap of the Quarter

We value your contributions to our patient's health and collaboration to achieve our shared mission. At Kaiser Permanente, we know one of the most important things patients can do to maintain good health is stay up to date on their preventive tests, screenings, and immunizations. With patients returning for face-to-face visits after deferring during the pandemic, we have an opportunity to catch up on closing care gaps that require an in-person touch. We will begin highlighting a care gap of the quarter to assist in accomplishing this common goal.

Routine Mammograms

Why is this gap important? Breast cancer is the second most common cancer in women in the US. Early detection saves lives.

How is this gap closed? Mammogram completed.

Tips on talking with the member about this gap:

- A mammogram is an x-ray of the breast. Most mammograms take less than 10 minutes.
- It can detect tumors that cannot be felt or seen.
- Early detection of breast cancer with screening mammography means that treatment can be started earlier in the course of the disease and the need for more aggressive treatments are less likely.
- According to the American Cancer Society, when breast cancer is detected early, and is in the localized stage, the 5-year relative survival rate is 97%.
- Encourage them to schedule their screening mammogram.
 - ❖ In Southern Colorado, the Medical Imaging department at our Premier Medical Offices currently has *same day* appointments available.
 - ❖ In Northern Colorado, the Medical Imaging department at our Longmont, Loveland and Baseline Medical Offices also have available appointments.
 - ❖ Members can call (303) 338-3800 or go on to kp.org to schedule.



Non-Discrimination and language Assistance Information

Non-Discrimination and language Assistance Information can be found on our Community Provider Portal at: https://healthy.kaiserpermanente.org/colorado/community-providers/provider-info

