

Jan - Mar 2024

KPCO Provider Insider

This communication is for Kaiser Permanente Colorado network providers.

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Child Health Plan Plus (CHP+) Directory Inclusion

Who does this information apply to?

KPCO HMO Commercial Providers with eligible degrees offering services in our Denver Boulder service area (counties: Adams, Arapahoe, Boulder, Broomfield, Denver, Douglas, Jefferson, Clear Creek, Elbert, Lincoln)

Did you know in addition to our CHP+ print directory, a CHP+ product and panel is newly displaying on the kp.org online directory specific to a provider's location? To qualify, a provider and corresponding location must be enrolled in Medicaid.

For details about CHP+ coverage, review section 3.5.11 of the Provider Manual found at kp.org/providers.

Please be on the lookout for the CHP+ panel status eligible providers on the next attestation and send us your updates as applicable. Provider demographic updates and inquiries can be sent to KPCO-PDM@kp.org.





December 29, 2023



Dear Kaiser Permanente Network Provider,

On behalf of Kaiser Permanente Colorado, we appreciate your continued partnership in providing high-quality care to our members. We are writing to notify you of coverage changes for nonpharmacological alternative treatment to opioids beginning January 1, 2024.

Background

HB21-1276 requires health benefit plans to align cost-sharing amounts for nonpharmacological treatment for a patient with a pain diagnosis where an opioid might be prescribed, which must include a cost-sharing amount not to exceed that of a primary care visit for non-preventive services for a minimum of six physical therapy visits, six occupational therapy visits, six chiropractic visits, and six acupuncture visits.

What is changing in 2024?

For health benefit plans issued or renewed on or after January 1, 2024, cost-sharing for six visits of each of these therapy types for covered persons with a pain diagnosis will align with the cost-sharing amount for a non-preventative primary care visit.

What do you need to know:

You can find a list of pain diagnoses where an opioid might be prescribed at <u>Pain Diagnoses</u> (<u>kaiserpermanente.org</u>).

Please share this information with your staff and note that these changes will go into effect January 1, 2024.

If you have any questions or need any additional assistance with this change, please contact your Provider Experience Consultant by calling **866-866-3951**, Monday through Friday, from 8 a.m. to 5 p.m.

Sincerely,

Network Development and Provider Contracting



Thank You Healthcare Providers!





Office Ally ERA/EFT

Effective December 5, 2023, Office Ally ERA enrollment is available for KP HI, GA and CO regions.

We ask that providers register with Citi's Payment Exchange Portal to begin the process.

The links below can be utilized to register and submit EFT/ERA enrollments to the Kaiser region needed.

For your reference, below are links to the Citi Enrollment Assistance Guides.

Enrollment URLs (Uniform Resource Locator) and activation codes

_	Activation Code
CO - https://b2bportal.citipaymentexchange.citi.com/enroll/CO-KFHP-ACH	YJRWT6
GA - https://b2bportal.citipaymentexchange.citi.com/enroll/GA-KFHP-ACH	KYP6BZ
HI - https://b2bportal.citipaymentexchange.citi.com/enroll/HI-KFHP-ACH	3PZFK2

New Kaiser Permanente Medical Office Building

Funding has been approved to build a new 15,000 sq ft Medical Office Building on the corner of Hwy 45 and 31st Street on the northwest side of Pueblo near the Bonaventure Assisted Living Center. Kaiser Permanente has already purchased the land.

This clinic will replace our current leased Pueblo North location. The new Medical Office Building is slated to open September/October 2025.



New Auth Grids have been posted on the Community Provider Portal

These can be found at: https://healthy.kaiserpermanente.org/colorado/communityproviders/authorizations



If you need assistance, please contact your Provider Experience Consultant at 1-866-866-3951

IMPORTANT Information regarding Prior Authorizations

The **ordering physician** should be the one to obtain the prior authorization.

Please do not send back to the referring Kaiser Permanente physician.

FIT first.

There are many myths to debunk when it comes to colon cancer screening.

Colon cancer is the second-leading cause of cancer death in the U.S. However, when caught early, colon cancer can often be cured. Being screened helps detect precancerous polyps early. Doctors can then remove these polyps before they become cancerous.



"Early screening for colorectal cancer saves lives. Screening with FIT is an easy and safe way for low-risk individuals to stay healthy," said Lisa Mettler, MD, MPH, medical director of Prevention and Screening for Colorectal Cancer Screening.

So, what are the best ways to get screened — there are many myths to debunk.

Myth 1: FIT testing is a sub-optimal method of screening for colon cancer.

FIT tests detect cancers at a high rate. According to the American Journal of Gastroenterology "The ideal screening test should be noninvasive, have high sensitivity and specificity, be safe, readily available, convenient, and inexpensive." People are more likely to complete a FIT kit for colon cancer screening because it is easy to do.

Myth 2: Members are charged for colonoscopies after a positive FIT test because they are then considered diagnostic instead of screening.

A colonoscopy following a positive FIT result is still considered a screening test. Preventive tests are covered according to the coverage provided by a member's plan benefits.

Myth 3: Colonoscopy is a better colon cancer screening test than FIT.

The best cancer screening test is the one that is done! For most people, this means "FIT first." However, individuals at high risk for colon cancer, such as those with inflammatory bowel diseases or first-degree relatives who have had colon or genetic polyp conditions, should consider a colonoscopy as their initial screening.

Colorectal Cancer Screening using FIT tests:

There are several common misconceptions about the value of FIT kits for colorectal cancer screenings.

First, some fear that FIT kits are not reliable or accurate screening tests. FIT kits have been shown to be an effective screening tool and are more likely to be completed than a colonoscopy.

Second, there has been a misconception that if the FIT kit comes back positive, the follow up colonoscopy will be charged to the member as a diagnostic test. This is not true: A colonoscopy after a positive FIT test is considered a preventive test. Preventive tests are covered according to the coverage provided by a member's plan benefits.

DO NOT refer to EXACT SCIENCES for COLOGUARD Testing. Kaiser Permanente is NOT contracted with Exact Sciences, and per your contract, you may not refer to non-contracted providers without an approved authorization from Kaiser Permanente.





12 TIPS FOR WINTER IN COLORADO



1. Be prepared for the worst.

Plan your winter route to avoid getting caught in a blizzard. Bring a map and compass to eliminate the need for tree markings, cairns, or flagging. Carry and learn how to use gear such as an avalanche beacon, probe, and shovel.

2. Hike in a sustainable way.

It's tempting to take a few steps off-trail during snowmelt season when paths are slushy and muddy. However, Leave No Trace principles require hikers to walk through the mud and slush in order to protect vegetation and to avoid creating new trails.

3. Camp responsibly.

Never camp near an area that has unstable snow. Campsites should be on durable surfaces, such as packed snow, rock or soil. Avoid setting up in tundra and other fragile vegetation areas. Camps should be at least 200 feet from water sources.

4. Pack it in, pack it out.

All trash, including food, toilet paper and human waste, should be pack out of the backcountry. If the snow is too deep, the ground is frozen or regulations don't allow digging cat holes, pack out solid human waste using a WAG bag.

5. Leave what you find.

The natural cycles of an ecosystem can be altered severely when rocks, plants, animals, or cultural resources are taken from an area. Leave only footprints and let nature have its way in the wilderness.

6. Minimize campfire impacts.

An easier alternative to starting a campfire for food in the backcountry is to use a camp stove. Leaving the sticks and branches alone benefits animals that might use them for food or their habitat.











7. Respect wildlife.

Winter is a vulnerable time for wildlife. Never follow, feed, or disturb wildlife, and be sure to secure all your food and trash. If you think you've spotted a place where an animal might be hibernating, keep your distance.

8. Accommodate other backcountry adventurers.

Protect the quality of everyone's experience. Keep noise levels low, yield to uphill traffic and always be on the lookout for downhill traffic in the wintry backcountry. If traveling on foot, stay clear of tracks from skiers.

9. Know the trail.

Be sure to map our route when traveling off designated trails. Be prepared to use a map and compass to know when you might encounter frozen water sources where thin ice could be present. Recognize the signs of unstable snow and avoid it.

10. Pay attention to closures.

Respect trail, road, and area closures. Agencies such as Colorado Department of Transportation, US Forest Service, and ski patrol night close parts of the backcountry for safety reasons. Do not disregard fences or private property markers.

11. Don't be a Postholer.

Microspikes are best suited for ice and not ideal for snow. Use snowshoes when traversing in deep powder to avoid falling through. Postholes can cause foot or leg injury during sudden falls and can ruin trails set by other backcountry users.

12. Be smart about parking.

Park in clearly designated areas, not along a mountain pass highway where avalanche danger could be high, or snowplows are active. You'll need a backup plan when parking at one location falls through.

DOI Regulation 4-2-80--Diversity and Cultural Competency Training Tools

If you have not completed your Diversity and Cultural Competency Training for this year, you can find the Kaiser Permanente Diversity, Equity, and Inclusion Tool Kit here: <u>Diversity Equity</u> Inclusion Toolkit

FIRST HEALTH PROVIDER NETWORK <u>ONLY</u> please use this template: <u>First Health Provider</u> Network DOI Reg 4-2-80 Responses

Once training has been completed for your group, please answer the following questions, and send to your Provider Experience Consultant.

Culturally Sensitive and Anti – Bias Questions

- Have your providers and front office staff gone through Culturally Sensitive and Anti-Bias training?
- # Of providers
- # Of providers who have completed training
- # Of Front Office Staff
- # Of Front Office Staff that have completed training
- Type of training (example developed by your organization, YouTube etc.)?
- Training provided by?
- Course duration (minutes, hours, or days)
- Date Completed

Payers will be collecting this data on a YEARLY basis!



If you have questions about Regulation 4-2-80, please reference link below, OR reach out to your Provider Experience Consultant (PEC) at 1-866-866-3951.

https://doi.colorado.gov/announcements/notice-of-adoption-amended-regulations-4-2-73-and-5-2-12-and-new-regulation-4-2-80

If you haven't thought about it yet, start planning for submitting these question responses to your Provider Experience Consultant sooner than later for 2024! We only need it once for the entire calendar year.

This is a requirement of the DOI. Kaiser Permanente is responsible for turning in contracted provider responses to the DOI.

Thank You!!