Kaiser Permanente Provider Orientation

Date:

Agenda

- **Introductions**
- **Mission**
- **Provider Experience & Contracting Team**
- **Insurance Card Overview**
- **Referrals and Authorization's**
- **Claims Submission & Resolution**
- **Adds, Changes, Terms & Credentialing**
- **Community Provider Portal**
- **Affiliate Link**
- **Questions**

Our Mission

"Kaiser Permanente exists to provide affordable, high quality healthcare services to improve the health of our members and the communities we serve."

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Provider Experience Team

Provider Experience Team: is responsible for the management of the collaborative partnership with the provider community.

- – Liaison between the provider and Kaiser Permanente Medical.
- – Present, promote, and resolve concerns of the provider
- – Main contact for provider education

- – Our team collaborates with internal partners to ensure that there is an adequate network of providers and that our members have the best possible access to care for all services.

PEC:
Contract Manager:

Please tell us about you and the practice…

Exhibit 3

What is Exhibit 3?

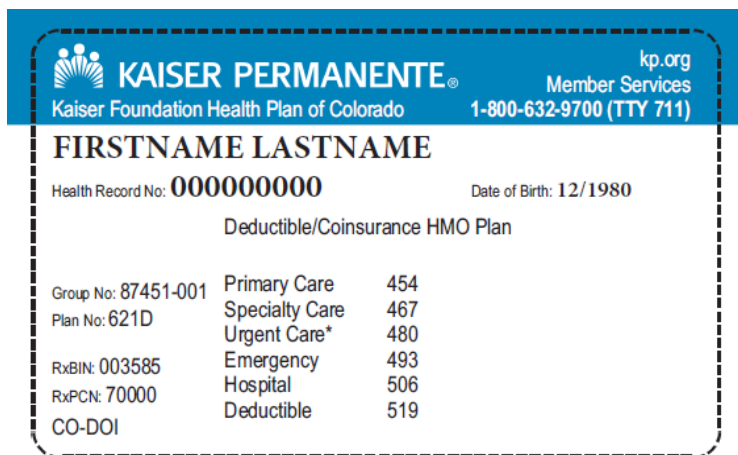Exhibit 3 of the contract is an overview of the Billing and Payment for Professional Services including:

- Instructions relating to claims

- Compensation by Member Classification

  – Commercial

  – Medicare

  – Medicaid

  – Medicare Cost Members and Medicare FFS Members

  – Other Payors

- Specific Reimbursements, including any carve-outs

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Insurance Card Overview

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Full Network Insurance Card Overview

Available on Community Provider Portal:

http://www.providers.kaiserpermanente.org/html/cpp_cod/sampleidcards.html

Card 1 (front):

KAISER PERMANENTE®
Kaiser Foundation Health Plan of Colorado

kp.org
Member Services
1-800-632-9700 (TTY 711)

FIRSTNAME LASTNAME

Health Record No: 000000000   Date of Birth: 12/1980

Deductible/Coinsurance HMO Plan

Group No: 87451-001
Plan No: 621D
RxBIN: 003585
RxPCN: 70000
CO-DOI

Primary Care	454
Specialty Care	467
Urgent Care*	480
Emergency	493
Hospital	506
Deductible	519

Card 1 (back):

Emergency 911   Card Issued: 04-20-2019
Appointments, Medical Advice
and Urgent Care*   303-338-4545 1-800-218-1059 (TTY 711)
Claims Information   303-338-3600 1-800-382-4661
Mail Order Pharmacy   1-866-523-6059
Away from Home Travel Line   1-951-268-3900

Kaiser Permanente Claims Department
PO Box 373150
Denver, CO 80237-3150
Electronic Payer ID #: 91617

Notify Member Services at
1-800-632-9700 if you receive emergency
hospital services in a non-plan facility.

This card is for identification only. Possession of this card
confers no right to services or other benefits unless the holder
is a member complying with all provisions of an applicable
agreement. * See Evidence of Coverage for benefit details.

03070-CD (1/21)

Card 2 (front):

KAISER PERMANENTE®
Kaiser Foundation
Health Plan of
Colorado

Senior Advantage Plus Choice (HMO-POS)
Denver Metro Area

Group: 00000-000
Issuer (80840)
Health Record No.: XXXXXXXXX
Name: John E Sample

OUT-OF-NETWORK
Deductible $0
Coinsurance 30%
Annual Allowance $1,000

RxBIN: 011255
RxPCN: COCMS
RxGrp: CO

Medicare Rx
Prescription Drug Coverage

CMS H0630 XXX

Card 2 (back):

Emergency:	911	
Appointments, Medical Advice and After-Hours Care:	303-338-4545	711 TTY
Member Services:	1-800-476-2167	711 TTY
Claims Information:	303-338-3600	711 TTY
	1-800-476-2167	711 TTY
Mail Order Pharmacy:	1-866-523-6059	711 TTY

Submit Claims to: Kaiser Permanente Claims Department
PO Box 373150, Denver, CO 80237-3150

This card is for identification only. Possession of this card confers no right
to services or other benefits unless the holder is a member complying with
all provisions of an applicable agreement.

kp.org   Card Issued: 06-26-2014

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Referrals & Authorizations

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Referrals & Authorizations (Required)

- **Referrals:**

  - Kaiser Permanente requires a referral/authorization before services are rendered.

  - Failure to obtain prior authorization may result in denial of payment.

- **Authorizations:**

  Pre-authorization should be obtained by the provider/practitioner prior to performing the service.

  - **Urgent** authorization requests should be processed in **72 hours.**

  - **Routine** authorization requests that are not more serious in nature have a **14 (Medicare) to 15 (Commercial) day** regulatory time frame.

  - Submit using Affiliate Link Sign-On

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Online Affiliate Build for Referrals...

Is your Practice Centralized or De-Centralized?

Centralized

- 1 location/ team for whole group

- Reviews incoming referrals

- Creates referral requests and or modifications to existing referrals

De-Centralized

- Locations/ teams throughout the practice
  - 1 in each service area or
  - 1 in each office

- Reviews incoming referrals

- Creates referral requests and or modifications to existing referrals

Claims Submission & Resolution

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Claims Information

- All claims must include Members Health/Medical Record number (MRN/HRN)

- Kaiser Permanente <u>does not recognize Social Security numbers as policy numbers.</u>

- Submit on a CMS 1500 form for professional charges and CMS 1450 form (UB-40) for facility charges. **NPI numbers are required.**

- Kaiser Permanente has partnered with Citi Payment Exchange to provide a portal for enrolling in Electronic Fund Transfer (EFT) and Electronic Remittance Advice (ERA). With this partnership, Kaiser Permanente requests that all vendors pursuing EFT/ERA enrollments utilize the Payment Exchange portal for enrollment and changes to existing EFT/ERA. The portal is open 24 hours a day and 7 days a week for new enrollments or changes.

- Note: As your Provider Rep, we cannot instruct you how to bill.

- **Timely Filing -** 90 days from the date of service, unless stated otherwise in your contract.

- **Corrected/Replacement Claim -** 90 days from SOR (statement of remittance)

- **Reconsideration-** Provider will have 90 days from the date of the Statement of Remittance (SOR) to submit the additional documentation.

- **Affiliate Link - To file a dispute through Affiliate Link, provider RFI (Request For Information) or to check claim status, please go to** Sign-On

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Claims Tool for Claims Submission

- Use Office Ally to submit claims to Kaiser Permanente electronically for free

- You will need to register for Office Ally DDE Solution (see pdf deck)

http://www.providers.kaiserpermanente.org/info_assets/cpp_cod/Office-Ally-DDE-Solution-Overview.pdf

- Visit website to begin registration

https://cms.officeally.com/Pages/Products/Clearinghouse.aspx

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Adds, Changes, Terms & Credentialing

November 11, 2024 |

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For new Practitioner and Location Add

Provider Information

- Visit: //healthy.kaiserpermanente.org/colorado/community-providers/provider-info

- Complete template and send to KPCO-PDM@kp.org

Provider Demographics

Please select from our recently updated templates below and send completed information to KPCO-PDM@kp.org.

Please note: **CONTACT UPDATES** can be made in any template below.

Use Practitioner Adds-Changes-Terms Template ⧉ for:

Add new practitioner to existing location

(see Combined new Practitioner and New Office template for adding to a new location)

Change current practitioner demographics

Term practitioner from group

Use Service and Billing Office Adds-Changes-Terms Template ⧉ for:

Add and/or term locations

Includes location moves and/or TIN-NPI updates

Quarterly Attestations- VERY IMPORTANT

- These are rosters sent out by the Kaiser Provider Data Management Team quarterly to our contracted providers and hospitals

- Network providers and hospitals are to respond with any Adds, Changes, Terms or respond with validation that all is correct

- This information is needed for KP.org, Kaiser's provider directory and for proper claims payment

- Failure to verify this information could cause credentialing and claims issues

- **Please note**: Providers cannot see Kaiser members until credentialing is complete

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Community Provider Portal
&
Affiliate Link

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Provider Manual
(which is a supplement to your contract)

Online Affiliate (Secure)

NOTE: If you move from one practice to another, your log-on will follow you.
Log-ons are practice specific., so will you need to change your practice name.

Member Eligibility and Benefits

- Detailed coverage information
- Copays listed for specific benefits

Authorizations and Referrals *This is faster and more accurate than faxing!*

- Displays referrals by members
- Referrals by providers

Clinical Information -*Based on your security level assignment*

- Snapshot
- Result Review
- Chart Review
- Flow Sheet or Growth Chart

Claims Status

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

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Online Affiliate Registration

- Entity Letter Agreement

- New Registration Process

- Bulk Registration with Group admin

- Link - http://www.providers.kaiserpermanente.org/html/cpp_cod/registration_onlineaffiliate.html?

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Questions?

Thank-You!