KAISER PERMANENTE®

Network Development and Administration
393 East Walnut Street – 7th Fl.
Pasadena, California 91188
(626) 405-3240

USPS Certified Mail, Return Receipt Requested

October 22, 2025

RE: Updated Information for Current Contract with Kaiser Foundation Hospitals, on behalf of its Hawaii Region, or with Kaiser Foundation Health Plan, Inc., on behalf of its Hawaii Region.

Dear Provider,

Thank you for your participation. This annual mailing provides updated information in connection with the Health Care Services Agreement ("HCSA") entered between Kaiser Permanente and your organization (as "Provider" therein). The link below provides access to updated information concerning the following topics:

https://healthy.kaiserpermanente.org/hawaii/community-providers/provider-info

- Your updated 2026 Provider Manual (Kaiser Permanente Hawaii Network Development and Administration Contracted HMO Provider Manual)
- Medicaid directory information request, required annually of QUEST Integration (Medicaid) providers pursuant to the Consolidated Appropriations Act (CAA, 2023)
- HR-133 Provider Directory information request, required quarterly for providers delivering services within Kaiser Permanente's commercial lines of business
- Reminder of the Quality Oversight provisions of the Health Care Services Agreement
- Notice of Kaiser Permanente Language Assistance Program Adherence Requirement
- Provider Reference Guide for provider resources within Kaiser Permanente-Hawaii
- Claims-related information, including both Kaiser Permanente's National Claim Administration's Claims Settlement Practices & Provider Dispute Resolution disclosure, including an updated copy of the current Clinical Review Payment Determination Policy, can be accessed via the following link:

  https://healthy.kaiserpermanente.org/hawaii/community-providers/claims

Separately, this also serves as notice as required under Section 10.9.2 ("Legally Required Modification") of the Health Care Services Agreement, of the following modifications, which shall go into effect sixty (60) Business Days following the date of this letter, or such other date as may be otherwise required by Law or Officials.

- Revised Federal Program Compliance Exhibit (attached)

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- Revised QUEST Integration Program Required Provisions Exhibit (attached)
- Revised Payor List (See Health Care Services Agreement, Section 1.20 (“Payor(s)”) (attached)

Except for the modifications described herein, all terms of the Health Care Services Agreement remain in force and effect.

Thank you for your cooperation and commitment to delivering high-quality healthcare to our members.

Should you have any questions, please feel free to contact KP Hawaii Provider Contracting at hawaii-ndanda-providerrelations@kp.org.

Sincerely,

KAISER FOUNDATION HOSPITALS
KAISER FOUNDATION HEALTH PLAN, INC.

By: 

Richard Snader
Vice President
Network Development and Administration
Southern California and Hawaii Regions
KP Hawaii Provider Contracting

Enclosures (4):
Notice Cover Letter, Federal Exhibit, QUEST Integration Exhibit, and Payor List