Provider Relations Newsletter

January 2021

OAL New Features

Did you know that that Kaiser Permanente Online Affiliate website has brand **NEW** features? Online Affiliate is Kaiser Permanente's EPIC-based online tool that allows you to verify patient eligibility, benefits, check the status of claims, and view referrals/authorizations.

Kaiser has added new functionality that allows you to take specific actions on a claim.

- **File a Dispute** (appealing/disputing claim decisions) *Select this option if you are requesting reconsideration of payment.*

- **Respond to Request for Information (RFI)** by allowing the upload of Kaiser requested documents. *Select this option if you have received a letter or EOP denial for additional information.*

- **Submit Supporting Documentation.** *Select this option if you have submitted a claim that will require supportive documents to be attached to the claim.*

Additionally, starting December 14th, Kaiser has started including Acknowledgment and Resolution Letters as part of the online submission process. When you submit an online appeal or dispute, you will immediately receive an Acknowledgment Letter to your in-basket. Once your submission has been reviewed by KP and a decision rendered, you will then receive a Resolution Letter to your in-basket.

***Please see attached job aid Online Provider Messaging (PDF) at the end of the newsletter for more information.

Contents

COVID-19 Vaccine

How can I quickly find COVID-19 vaccine information?
For the latest local updates, including how people across our communities can get the vaccine when they meet state criteria, visit **kp.org/covidvaccine/nw**. Or call our 24/7 recorded message hotline at **1-855-550-0951**, available 24/7, in English and Spanish.

Is it true that people now must receive their vaccine in their state of residence?
Yes. A regional decision by health departments in Oregon and Washington now requires people be vaccinated in the state in which they reside.

For the latest information on eligibility, see these websites:

- Oregon residents: **Oregon Health Authority website**
- Washington residents: **Washington State Department of Health website**

Telehealth Visits Continued…

At this time there has been no changes to Kaiser members being encouraged to access services through telehealth care. Any update related to this topic or future transition away from this direction would be posted on the provider portal on the right side under **Quick Links.**

http://providers.kaiserpermanente.org/nw/

Please note as a reminder, all members (Commercial, Individual and Family, Medicare and Medicaid) are covered for telehealth visits. While most members receive no-charge for telehealth visits, please use Online Affiliate to confirm the cost sharing for High Deductible Health Plan/HSA-qualified members who must first meet their deductible for telehealth visits unrelated to COVID-19 diagnosis and testing.

What is the Pharmacy Formulary?

The Pharmacy and Therapeutics Committee, a group of Kaiser Permanente doctors and pharmacists, chooses which drugs to include on our list of covered drugs, known as formulary. The committee meets regularly to review and choose the safest, most effective medications for our members.

How do I know what is covered/non-covered?

Drugs on the formulary are covered by the member's plans prescription drug benefit-if the plan has one. Drugs that aren't listed on the formulary, known as nonformulary drugs, aren't covered by the plan. Please note that not all plans are the same. For example, some plans may not include certain drugs, cover generic drugs or limit the amount of a drug a member can get with each prescription or copay.

View our Kaiser Permanente Oregon/Washington Formulary*

How do I request a non-formulary as a provider?

For Prescribers Only: Please prescribe formulary medication(s) for your patients with Kaiser Permanente benefits. If a formulary medication is not appropriate, complete the ***Drug Coverage Request form (PDF) included at the end of the newsletter and fax to 1-866-618-6569**

How does the member request a non-formulary drug?

The most effective way to get an exception is for the member to send a secure email to their doctor. If they want a nonformulary drug that their doctor doesn't believe to be medically necessary, they can also file a grievance (Senior Advantage and Medicare Cost members can file a coverage determination) by calling Membership Services or submitting an online message to Membership Services on **KaiserPermanete.org.**

Key Provider Contacts

Provider Inquiry/Claims Line
Phone: 503-735-2727 or 1-866-441-1221

Regional Member Services Call Centers

Regional Member Services Call Centers (MSCC)	
Colorado	1-800-632-9700
Georgia	1-404-261-2590
Hawaii	1-800-966-5955
Mid Atlantic	1-800-810-4766
Northern CA	1-800-464-4000
Northwest	1-800-813-2000
Southern CA	1-800-464-4000
Washington	1-888-767-4670

Self-Funded Customer Service
Phone: 1-866-800-3402

Regional Referral Center
Phone: 503-813-4560

EDI Billing Support
Email: EDISupport@kp.org

NW Provider Relations
Email: NW-Provider-Relations@kp.org
Contracted Provider Representatives:
Lonnie Hosley: Lonnie.L.Hosley@kp.org
Beckie Crocker: Beckie.Crocker@kp.org
Molly Phillips: Molly.B.Phillips@kp.org

Kaiser Medicare Expansion in Lane County

Effective January 1st, 2021 we will begin offering Kaiser Permanente's Senior Advantage Plan in Lane County. As you are aware, Medicare enrollment for the 2021 plan year began on October 15, 2020, and coverage will be effective on January 1, 2021.

What are the eligibility requirements for Kaiser Permanente's Medicare health plan?
Medicare beneficiaries must be enrolled in Medicare Parts A and B and reside in the approved Lane County service area. All of Lane County is included in the approved Medicare service area.

What support is available for new members ?
The Kaiser Permanente New Member Welcome Desk helps new members easily transition to Kaiser Permanente by connecting them with services, completing a new member intake, helping transfer medical records, and helping transfer prescriptions. For members receiving care at a PeaceHealth location or other contracted locations, the Welcome Desk can help members navigate how to access care and understand their options.

 Kaiser Permanente New Member Welcome Desk: 1-888-491-1124, available Monday through Friday, 8 a.m. to 6 p.m.

Where can Medicare members make appointments at Kaiser Permanente?
Kaiser Permanente Medicare members have full access to our network of hospitals and medical office locations. In Lane County, members can make appointments at our new Chase Gardens Medical Office, located at 360 S Garden Way, Eugene, OR 97401

- For convenience, both phone and video appointments are also available, as well as 24/7 advice. Members can also access primary and specialty care through in-network providers.
- For a list of network providers, view the Senior Advantage Provider Directory at kp.org/directory

Online Provider Messaging
FOR: KP AffiliateLink Users

Kaiser Permanente is now permitting providers that use AffiliateLink to submit claim appeals/disputes, upload claim-related documents/attachments, and respond to requests for information (RFI).

1. Login to your *AffiliateLink* account using existing login credentials, then proceed to *Claims Search* using the icon at the top of the Home screen.
2. Enter the KP assigned claim number in the *Claim ID* field (see Red Box 1 in Figure 1)
3. Select the Claim ID in the search results table by clicking on the *Claim #* link. (see Red Box 2 in Figure 1)

Figure 1

Online Provider Messaging
FOR: KP AffiliateLink Users

4. **NEW**: Once the claim opens, there is a new *Take Action* icon, that, once selected, allow providers three choices (see red box in Figure 2, and zoom detail in Figure 3).
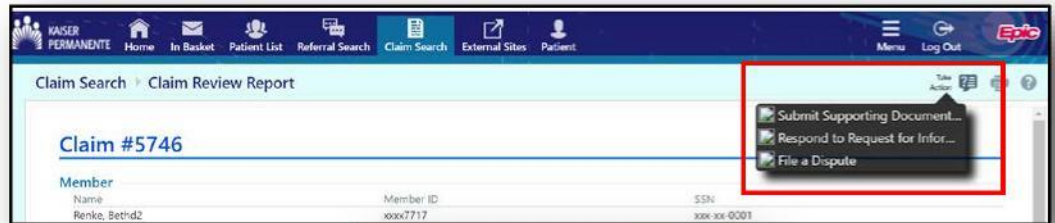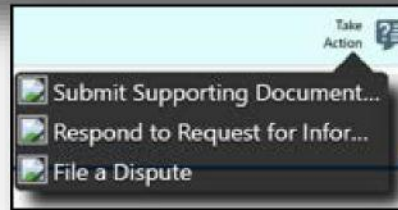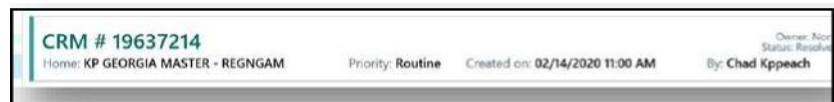

Figure 2

Figure 3

5. *Submit Supporting Documentation* window (see Figure 4) allows the provider to document additional details regarding the original claim submission, and can be done proactively.

NOTE: If you have the CRM ID from KP-provided correspondence, please enter that number in the *CRM ID* field (Red Box in Figure 4).

Figure 4

If you have questions on this request submission and call the Call Center, please refer to the **CRM ID** in your reply message

Figure _ 5

Once Kaiser has reviewed and determined resolution, the status on the reply will update to resolved. **You will receive written correspondence to this resolution via mail**.

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Online Provider Messaging
FOR: KP AffiliateLink Users

6. ***Respond to Request for Information*** (see Figure 6) window allows the provider to document requested information from KP.

NOTE: You will need to select a Subtopic to route to the appropriate claims area:

- Select **Solicited Claims RFI Letter** if you are responding a Letter you received from Kaiser Permanente, or you have received a Denial for Additional Information needed.
- Select **Clinical Review RFI Letter** if you received a letter from Clinical Review at Kaiser Permanente.
- Select **Code Edit RFI Letter** if you received a letter from Code Edit at Kaiser Permanente.
- Select **Unsolicited RFI Document** if you are uploaded documents that have not been officially requested by Kaiser Permanente yet.

Figure 6

7. ***Respond to Request for Information*** (see Figure 7) window allows the provider to document requested information from KP.

NOTE: If you have the CRM ID from KP-provided correspondence, please enter that number in the *CRM ID* field (Red Box in Figure 7).

Figure 7

NOTE: Scrolling down in either the *Submit Supporting Documentation* or *Respond to Request for Information* window will bring you to the section where you can add attachments/documents to the claim (shown in detail in Figure 9 on following page)

Online Provider Messaging
FOR: KP AffiliateLink Users

8. **File a Dispute** window (see Figure 8) allows the provider to initiate the dispute/appeal process.

Figure 8

9. If the message, including attachments/documents are uploaded, the user will receive confirmation of successful receipt with "The message has been sent successfully" as shown in Figure 9.

Note: Only .pdf and .gif files are permitted at this time.

Note: *Maximum file size for uploading* is 20mb

(approximately 1000 pages).

Figure 9

DRUG COVERAGE REQUEST FORM

Prescribing Provider: Complete & fax to 1-866-618-6569

To review formulary alternatives that may be appropriate for your patient, please refer to the Kaiser Permanente drug formulary at www.kp.org/formulary or consult with a pharmacist at 503-261-2075 or toll-free 1-888-572-7231, Monday-Friday, 8 a.m. to 6 p.m.

1. Patient name: _____ HRN: _____ DOB: _____

2. Medication (name & strength): _____

3. Indication for use: _____

4. Is this a new medication for the patient? ❏ YES ❏ NO

5. Medications previously tried by patient:

Drug and Strength	Dates Used (approx)	Reason for Discontinuation

6. Rationale for prescribing this medication: _____
_____
_____
_____
_____

7. Do you believe that the alternative medication(s) on the formulary are not as effective in treating the member's condition and/or would cause the member to have adverse medical effects?

❏ YES ❏ NO

8 *I acknowledge that the information I have provided is true and accurate.*

Prescriber Name (print): _____

Clinic Name: _____ Address: _____ City: _____

Phone: _____ FAX: _____

Provider Signature: _____ Date: _____

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