

# Provider Newsletter

## PCR UPDATES: HMO AND QUEST INTEGRATION AFFILIATED PROVIDERS

### PREVENT COVID-19

#### SOCIAL DISTANCING: REMOTE HEALTHCARE & TAKE A VIRTUAL PROVIDER TRAINING

#### Med-QUEST will not terminate QUEST Integration plan memberships from 3/18/2020 through the pandemic period.

If your patient was on Medicaid as of 3/18/2020 or has become eligible since then, their Medicaid coverage will not be terminated during this pandemic period of National Emergency. If your patient received a termination letter during this period, please instruct your patient to contact Med-QUEST for reinstatement.

#### TELEHEALTH

Please continue billing your typical codes (procedure & diagnosis codes), please POS 2 and modifiers 95, GT, GQ or GO, this will drive the member's telehealth benefits (no copayment) and you will be paid at your current contracted rate.

#### CLINICAL REVIEW PAYMENT DETERMINATION POLICY

Providers may receive updated letters that provide information on rules that govern National Payment Integrity (NPI) Clinical Review processes related to determining payment for claims under review. NPI Clinical Review is responsible for reviewing facility and professional claims to ensure that providers comply with billing and coding standards, that services rendered are appropriate and medically necessary, and that payment is made in accordance with applicable contract and/or provider manual requirements, **updated** Clinical Review Policy link:

[providers.kaiserpermanente.org/info\\_assets/cpp\\_hi/](http://providers.kaiserpermanente.org/info_assets/cpp_hi/)

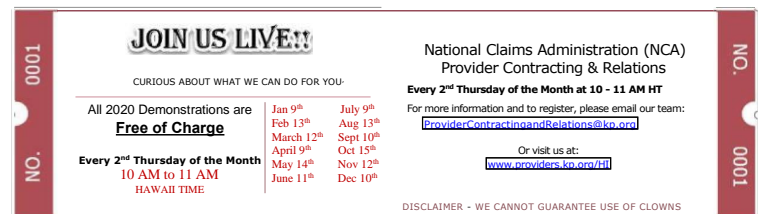
**Clinical Review includes EDC Analyzer** for continued efforts to reinforce accurate coding practices, KP will begin using the Optum Emergency Department Claim (EDC) Analyzer tool. The website can be located at [www.EDCAnalyzer.com](http://www.EDCAnalyzer.com). The tool determines appropriate evaluation and management (E/M) coding levels based on data from the patient's claim. KP will use the EDC Analyzer for outpatient facility Emergency Department claims that are submitted with Levels 4 and 5 E/M codes 99284 and 99285 and received by KP with dates of service after 7/1/2020. The goal is to ensure coding accuracy using the coding principles created by the Centers for Medicare and Medicaid Services (CMS), which require hospital Emergency Department facility E/M coding guidelines to follow the intent of CPT Code descriptions, and reasonably relate to hospital resources use

#### MD CALL CENTER

The MD Call Center is staffed 24/7 by emergency department RNs, who work directly with our emergency department physicians at KP Moanalua Medical Center. When you encounter a KP member at your emergency department who may need to be admitted and need an authorization or requires follow-up care, please call the MD Call Center (**808-643-6363**), to assist you in providing care to our members, including transfers, authorization, and follow-up care.

#### VIRTUAL MONTHLY PROVIDER TRAININGS

#### EDUCATE TO ELEVATE



**JOIN US LIVE!**

CURIOS ABOUT WHAT WE CAN DO FOR YOU:

All 2020 Demonstrations are **Free of Charge**

Jan 9 <sup>th</sup>	July 9 <sup>th</sup>
Feb 13 <sup>th</sup>	Aug 13 <sup>th</sup>
March 12 <sup>th</sup>	Sept 10 <sup>th</sup>
April 9 <sup>th</sup>	Oct 15 <sup>th</sup>
May 14 <sup>th</sup>	Nov 12 <sup>th</sup>
June 11 <sup>th</sup>	Dec 10 <sup>th</sup>

Every 2<sup>nd</sup> Thursday of the Month  
10 AM to 11 AM  
HAWAII TIME

National Claims Administration (NCA)  
Provider Contracting & Relations

Every 2<sup>nd</sup> Thursday of the Month at 10 - 11 AM HT

For more information and to register, please email our team:  
[ProviderContractingandRelations@kp.org](mailto:ProviderContractingandRelations@kp.org)

Or visit us at:  
[www.crowdfunder.kp.org/hl](http://www.crowdfunder.kp.org/hl)

DISCLAIMER - WE CANNOT GUARANTEE USE OF CLOWNS

#### PROVIDER DISPUTES FORM - YOUR RIGHTS TO CLAIMS REVIEW

For information generally about a paid claim, please call 877-875-3805. If you wish to dispute our action or decision, you must submit your PROVIDER DISPUTE FORM (*paper or electronic*) you must **submit your dispute in writing within 60 DAYS** of the date the claim was originally processed or denied to the following addresses.

Provider dispute form link:

[providers.kaiserpermanente.org/info\\_assets/cpp\\_hi/ProviderAppealsForm.pdf](http://providers.kaiserpermanente.org/info_assets/cpp_hi/ProviderAppealsForm.pdf)

Online Affiliate access, electronic feature link:

<https://extsso.kp.org/kpsso-ap/signIn.html>

#### PROVIDER DISPUTES AND OTHER ELECTRONIC ATTACHMENTS

New feature to upload claims related documents

- *File a Dispute* (appealing/disputing claim decisions)
- *Respond to a Request for Information (RFI) by allowing the upload of KP requested documents*
- *Submit Supporting Documentation*

Benefits to you as the provider:

- Allows you to submit claim appeals/disputes on-line
- Upload documents in response to a Request for Information, and medical records – avoiding having to deal with postal delays
- Proactively upload claim related documents for quicker review of claims
- Reduce paper output and cost of stamps for provider responses to Requests for Information (RFI) Reduce amount of time it takes for KP to receive appeals/disputes, Request for Information, and claim related documentation

**NEW MEDICAID PROVIDER ENROLLMENT (HOKU) and EVV SYSTEM & NDC CODES**

Training information for HOKU, the new Medicaid Provider Enrollment system can be found at:

<https://medquest.hawaii.gov/en/plans-providers/Provider-Management-System-Upgrade.html>.

**NDC Code Claim Edit** - Effective 05/01/20, Medicaid Claims missing required valid NDC quantity and/or unit of measure will deny. The denial code in your EOP is CED14, to prevent claim denials please ensure you have a valid NDC on your claim.

**NEW EVV System** – Electronic visit verification for Medicaid Home Health Agency Services & Home Community Based Service providers, is a system that verifies and documents provider visits to ensure members receive authorized services.

**Provider EVV Letter**

[http://providers.kaiserpermanente.org/info\\_assets/cpp\\_hi/Hi\\_EVV\\_Provider\\_Welcome\\_Letter\\_Final.pdf](http://providers.kaiserpermanente.org/info_assets/cpp_hi/Hi_EVV_Provider_Welcome_Letter_Final.pdf)

**EVV HCPCS Codes & Modifier List**

[http://providers.kaiserpermanente.org/info\\_assets/cpp\\_hi/QI\\_1929\\_EVV\\_HCPCS\\_Codes\\_and\\_Modifiers\\_Lists\\_FINAL\\_1.pdf](http://providers.kaiserpermanente.org/info_assets/cpp_hi/QI_1929_EVV_HCPCS_Codes_and_Modifiers_Lists_FINAL_1.pdf)

CONTACT INFORMATION	PHONE	FAX / WEB / EMAIL / ADDRESS
<b>Provider Contract &amp; Relations (PCR)</b>	808-432-5429	<a href="mailto:808-432-5260">808-432-5260</a> / <a href="mailto:ProviderContractingandRelations@kp.org">ProviderContractingandRelations@kp.org</a>
PCR QI Manager: Shawne Uyetake	808-284-6409	808-432-5260
PCR Address		711 Kapiolani Blvd Suite 130, Honolulu HI 96813
<b>Customer Service (CS)</b>	808-432-5955	800-966-5955 and 808-432-5300
<b>CS QUEST Integration (QI)</b>	808-432-5330	800-651-2237 and 808-432-5260
<b>Interpreter Service</b>	808-432-5330 or 800-651-2237	
<b>Customer Service Added Choice</b>	800-238-5742	<a href="https://providers.kaiserpermanente.org/html/cpp_hi/addedchoice.html?">https://providers.kaiserpermanente.org/html/cpp_hi/addedchoice.html?</a>
<b>MD Call Center</b>	808-643-6363	
<b>Authorization &amp; Referrals Management</b>	800-432-5687	808-432-7517
DME Authorizations	808-432-5692	808-432-5689
BH Authorizations	808-243-6031	
<b>Provider Credentialing</b>	808-432-7990 ext 27927	<a href="mailto:HI-Credentials-Department@kp.org">HI-Credentials-Department@kp.org</a>
<b>Claims Department</b>	877-875-3805	P.O. Box 378021, Denver, CO 80237
<b>Provider Demographic or Contact Changes</b>	808-432-5429	<a href="mailto:providerdemographicshawaii@kp.org">providerdemographicshawaii@kp.org</a>
<b>Community Provider Portal: HMO / Medicare / Medicaid &amp; QUEST Integration</b>		
Authorizations and Referral Process		<a href="http://providers.kaiserpermanente.org/hi/index.html">http://providers.kaiserpermanente.org/hi/index.html</a>
Contracts & Sample Contracts		
Provider Newsletters & EVV Codes		<b>Monthly Provider Training:</b> every 2 <sup>nd</sup> Thurs. of the month 10-11 A HT
QI Provider Education & Training Documents		<a href="http://providers.kaiserpermanente.org/html/cpp_hi/qiprovidereducationandtraining.html?">http://providers.kaiserpermanente.org/html/cpp_hi/qiprovidereducationandtraining.html?</a>
Online Affiliate Tool & Provider Manual		<b>To Register</b> email: <a href="mailto:ProviderContractingandRelations@kp.org">ProviderContractingandRelations@kp.org</a>
Cultural Competency Plan		
<b>EDI - Electronic Data Interchange</b>	866-288-0361 opt 2	<a href="mailto:edisupport@kp.org">edisupport@kp.org</a>
Change HC Payer ID = 94123	866-817-3813	<a href="http://www.changehealthcare.com">www.changehealthcare.com</a>
Relay Health Payer ID = RH011	866-735-2963	<a href="http://www.relayhealth.com">www.relayhealth.com</a>
Office Ally Payer ID = 94123	360-975-7000	<a href="https://cms.officeally.com">https://cms.officeally.com</a>
<b>Office Ally DDE - FREE*</b> . <i>This online claim entry tool allows you to create CMS1500, UB04 360-975-7000 and ADA claims on its website &amp; submit to KP</i>		<a href="https://cms.officeally.com/Pages/Products/Clearinghouse.aspx">https://cms.officeally.com/Pages/Products/Clearinghouse.aspx</a>
EDI Claims Subscriber Information	Use patient's information only (e.g. name, date of birth, KP MRN)	
<b>ERA &amp; EFT</b>	866-288-0361	<a href="http://solutions.caqh.org">solutions.caqh.org</a>
<b>OLA – Online Affiliate Tool</b>		
Check Claim Status (ANSI 276/277)		<a href="mailto:KP-HI-OnlineAffilaite@kp.org">KP-HI-OnlineAffilaite@kp.org</a> <a href="http://providers.kp.org/hi">providers.kp.org/hi</a>
Verify Member Benefits and Eligibility (ANSI 270/271)		
View and Print Remittance Advice (ANSI 835 ERA & EFT)		<a href="http://providers.kp.org/hi">providers.kp.org/hi</a>
View Member Demographics		