

Kaiser Permanente Provider Notifications for CMS Conditions of Participation Compliance

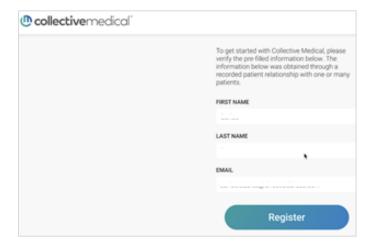
What you need to know

The Centers for Medicare and Medicaid Services (CMS) has issued revisions to its Conditions of Participation designed to improve transitions of care and sharing of clinical information between care providers across the medical community. To comply with the CMS requirement, and improve collaboration and interoperability, Kaiser Permanente is electronically notifying identified providers in the United States when their patients have an emergency room, observation, or inpatient encounter at a Kaiser Permanente hospital or ED department. These notifications provide pertinent care information such as encounter history, chief complaint, hospital prescriptions, hospital provider information, and patient demographics.



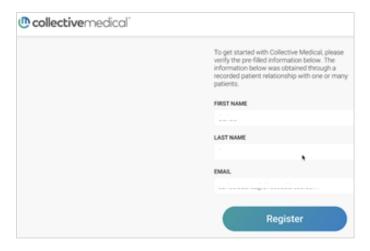
How it works

Kaiser Permanente has partnered with Collective Medical to provide the notification services for these encounters. Providers will follow the simple steps below to get started:

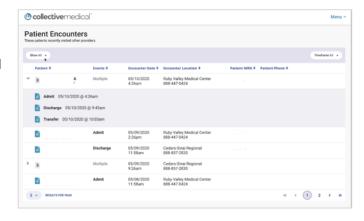




- When patients have encounters at Kaiser Permanente hospitals or emergency departments, provider(s) will receive a notification in their direct message-enabled inbox, which will include a link to register for access to the notifications (subject to the patients' expressed privacy preferences and upon matching their record).
- To register, the provider must click on the link they received in their direct message-enabled mailbox. That link will direct them to a page to enter basic contact information, create a password, and set up security questions.



- 3. After registration, a validation email will automatically be sent with a link to the Collective Medical Provider Portal. Providers can use this link to enter the portal.
- 4. Once in the Collective Medical Provider Portal, the provider can view current and previous notifications. The provider will also be able to search and filter as needed to find the exact information they are looking for.
- 5. In the Collective Medical Provider Portal, the provider can opt in or out of receiving notifications and set notification preferences (i.e., immediately, once per day, once per week) to best meet their specific needs. If the provider does not choose to make any changes, "immediate notifications" is the default.



Additional benefits beyond the CMS notification

While general encounter information will be found in these notifications to meet the CMS requirement, additional information will also be available to coordinate the patient's care. Notifications include key information, such as care recommendations, patient histories, and contact information for other members of the patient's care team.

If you have any questions, please contact support@collectivemedical.com.