

# Provider reference guide

## Network Development and Administration-Hawaii contracted providers

### HMO

**KAISER PERMANENTE**  
Kaiser Foundation Health Plan of Hawaii

Member Services  
1-800-764-1955  
TTY 711  
kp.org

**FLOCELA E GOEMMER**  
Medical Record Number/ID: 979591  
RxBin: 003585 RxCN: 70000

Deductible: \$200/\$400  
Out-of-Pocket: \$2200/\$4400

This card is for identification only. Use of this card is subject to the applicable agreement.

### Senior Advantage

**KAISER PERMANENTE**  
HAWAII REGION

Senior Advantage (HMO)

Issuer: 80840  
RxBin: 011214 RxCN: HCMS CMS: H1230 0803  
RxCN: HF

**MEDICAL RECORD NUMBER**  
**44 44 44 1**  
MEDICARE, PART, D  
03/09/1953  
BIRTHDATE

**MedicareRx**  
Prescription Drug Coverage  
kp.org

### Added Choice POS

**Added Choice POS Plan**  
Kaiser Foundation Health Plan of Hawaii

Member Services  
1-800-238-5742 TTY 711

**HAW TEST MEM ONE**  
Medical Record Number/ID: 3085573  
RxBin: 003585 RxCN: 70000 Group No: 50044-005

|                | Kaiser Permanente<br>Provider | Contracted<br>Provider | Non-Contracted<br>Provider |
|----------------|-------------------------------|------------------------|----------------------------|
| Deductible:    | NA                            | \$100/\$200            | \$100/\$200                |
| Out-of-Pocket: | \$2000/\$4000                 | \$2000/\$4000          | \$2000/\$4000              |

Kaiser Foundation Health Plan, Inc. (KFHP) underwrites the Kaiser Permanente Provider tier. The contracted provider and non-contracted provider tiers of this plan are underwritten by Kaiser Permanente Insurance Company (KPIC), a subsidiary of KFHP. This card is for identification only. Use of this card is subject to the applicable agreement.

### QUEST

**KAISER PERMANENTE**  
QUEST  
Research Medical Program

MEDICAL RECORD NUMBER  
**97 08 65 1**  
**AABJERG, CANDY, B**

Effective Date  
10/01/2013

Third Party Liability  
<https://hiweb.statedmedicaid.us>

Primary Clinic  
Kaiser Permanente

Clinic Phone Number  
1-833-833-3333

### HMO, KPIC Added Choice POS, QUEST, and Senior Advantage

| Service                                                               | Contact Information                                                                                                                                                                                                                                                          |
|-----------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>Kaiser Permanente Insurance Company (KPIC) Added Choice POS</b>    |                                                                                                                                                                                                                                                                              |
| Added Choice POS Helpline                                             | 1-800-238-5742<br>Option 1- Claims; Add Option 2 - Authorizations<br>Added Choice POS: <a href="https://healthy.kaiserpermanente.org/hawaii/communityproviders/eligibility#added-choice">healthy.kaiserpermanente.org/hawaii/communityproviders/eligibility#added-choice</a> |
| <b>Appointment Center</b>                                             |                                                                                                                                                                                                                                                                              |
| KP New One-Number for care in Hawaii                                  | 1-833-833-3333 (TTY 711) - <a href="https://kpinhawaii.org/new-number-care">kpinhawaii.org/new-number-care</a>                                                                                                                                                               |
| <b>Authorizations</b>                                                 |                                                                                                                                                                                                                                                                              |
| Authorizations/Referrals Management                                   | 808-432-5687, 808-432-5691 (fax) - Authorizations <a href="https://healthy.kaiserpermanente.org/hawaii/community-providers/authorizations">healthy.kaiserpermanente.org/hawaii/community-providers/authorizations</a>                                                        |
| Durable Medical Equipment (DME)                                       | 808-432-5692<br>Fax: 808-432-5689<br>Email: <a href="mailto:HI-DME@kp.org">HI-DME@kp.org</a>                                                                                                                                                                                 |
| Behavioral Health                                                     | 1-888-945-7600 (Neighboring Islands)<br>808-432-7600 (Oahu)                                                                                                                                                                                                                  |
| <b>Case Management</b>                                                |                                                                                                                                                                                                                                                                              |
| Continuing Care Dept                                                  | 808-432-7100                                                                                                                                                                                                                                                                 |
| <b>Claims</b>                                                         |                                                                                                                                                                                                                                                                              |
| Claims Department                                                     | 1-877-875-3805 - Mailing Address: P.O. Box 378021, Denver, CO 80237                                                                                                                                                                                                          |
| EDI Enrollment & Support Questions                                    | Online Affiliate Support - <a href="https://kpnationalclaims.my.site.com/support/s/">kpnationalclaims.my.site.com/support/s/</a>                                                                                                                                             |
| EDI/ERA/EFT                                                           | <a href="https://kpnationalclaims.my.site.com/EDI/s/">kpnationalclaims.my.site.com/EDI/s/</a>                                                                                                                                                                                |
| Online Affiliate Tool                                                 | Online Affiliate Support - <a href="https://kpnationalclaims.my.site.com/support/s/">kpnationalclaims.my.site.com/support/s/</a>                                                                                                                                             |
| 1099 Forms                                                            | <a href="mailto:1099Misc@kp.org">1099Misc@kp.org</a>                                                                                                                                                                                                                         |
| <b>Credentialing</b>                                                  |                                                                                                                                                                                                                                                                              |
| Provider Credentialing                                                | 808-432-7990, ext. 27927 - <a href="mailto:HI-Credentials-Department@kp.org">HI-Credentials-Department@kp.org</a>                                                                                                                                                            |
| <b>Eligibility</b>                                                    |                                                                                                                                                                                                                                                                              |
| Commercial/Non-Medicare members                                       | 1-800-966-5955, 808-432-5300 fax                                                                                                                                                                                                                                             |
| Medicare members                                                      | 1-800-805-2739                                                                                                                                                                                                                                                               |
| QUEST members                                                         | 808-432-5330                                                                                                                                                                                                                                                                 |
| <b>Home Health and Hospice</b>                                        |                                                                                                                                                                                                                                                                              |
| Home Health Care-KP Care at Home                                      | (Oahu) 808-432-4661, (Maui) 808-243-6681                                                                                                                                                                                                                                     |
| Hospice                                                               | 808-432-7660<br>Email (to send documents to support re-authorization only): <a href="mailto:kpcah-hospice-reauthorization-hi@kp.org">kpcah-hospice-reauthorization-hi@kp.org</a>                                                                                             |
| <b>Interhospital Transfer</b>                                         |                                                                                                                                                                                                                                                                              |
| MD Call Center                                                        | 808-643-6363                                                                                                                                                                                                                                                                 |
| <b>Interpreter Services</b>                                           |                                                                                                                                                                                                                                                                              |
| Language Interpreter Services in Hawaii                               | 1-800-966-5955                                                                                                                                                                                                                                                               |
| <b>Pharmacy</b>                                                       |                                                                                                                                                                                                                                                                              |
| Pharmacy Administration                                               | 808-643-7979                                                                                                                                                                                                                                                                 |
| <b>Provider Relations</b>                                             |                                                                                                                                                                                                                                                                              |
| Provider Demographic or Contact Changes                               | Email: <a href="mailto:providerdemographicshawaii@kp.org">providerdemographicshawaii@kp.org</a>                                                                                                                                                                              |
| Provider Relations for ND&A for Hawaii                                | Email: <a href="mailto:hawaii-ndanda-providerrelations@kp.org">hawaii-ndanda-providerrelations@kp.org</a>                                                                                                                                                                    |
| <b>QUEST</b>                                                          |                                                                                                                                                                                                                                                                              |
| Medicaid/QUEST                                                        | 1-800-651-2237 (fax), 808-432-5260 (fax)                                                                                                                                                                                                                                     |
| Transportation, Meals, Lodging, Hearing Aides, Medical Supplies/QUEST | 808-432-5330, 1-800-651-2237                                                                                                                                                                                                                                                 |