



# Participating Provider Network Orientation

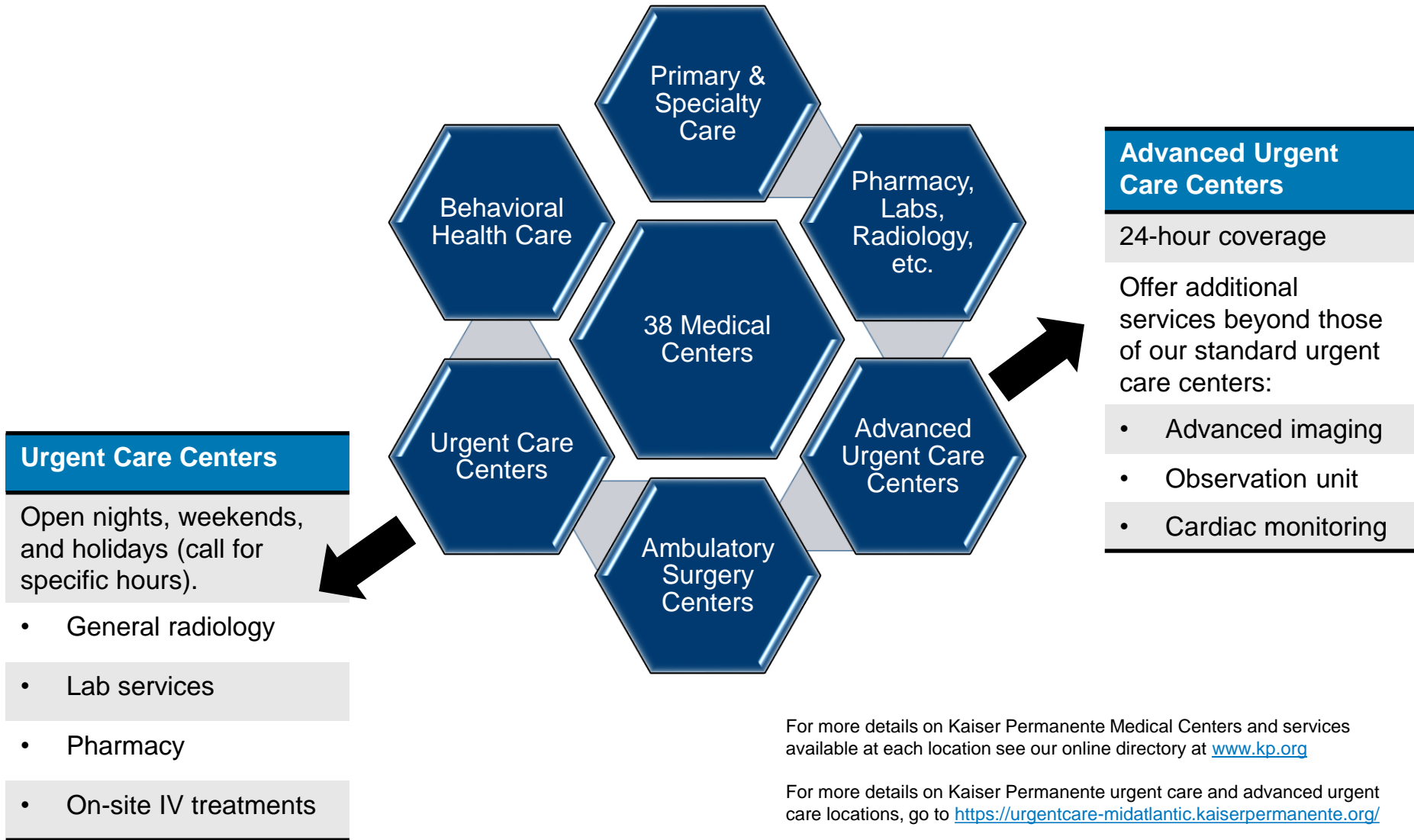
Provider Experience  
January 2024

## Introduction

Kaiser Permanente is an integrated healthcare delivery system. We are a healthcare provider, and we offer medical services at our medical centers and through affiliated Participating Providers throughout the Mid-Atlantic region.



# Kaiser Permanente Medical Centers



## Contracted Resources

### Contracts

#### Affiliated hospitals

- Kaiser Permanente Care Management staff at certain locations

#### Physician Contracts

- Primary
- Specialty & Multi-Specialty

#### Behavioral Health

#### Urgent Care

#### Ambulance

### Ancillary Services

#### Laboratory

- Kaiser Permanente Medical Centers
- Quest Diagnostics

#### Radiology

- Kaiser Permanente Medical Centers
- For a complete list of Participating Radiology Providers, please refer to our online directory at [www.kaiserpermanente.org](http://www.kaiserpermanente.org)

## Membership



\*as of October 2023

## Product Overview

Product	Description
Kaiser Permanente Signature™	HMO
Marketplace/Exchanges	HMO
Kaiser Permanente Select	HMO
Added Choice™ (POS)	2-Tier Point of Service Plan
Flexible Choice™ (3TPOS)	3-Tier Point of Service Plan
Exclusive Provider Organization	Self-Funded Plan
Medicare Advantage (SRA)	Medicare Risk Plan
Sentara Health	Virginia Medicaid Plan
Maryland HealthChoice	Maryland Medicaid Plan

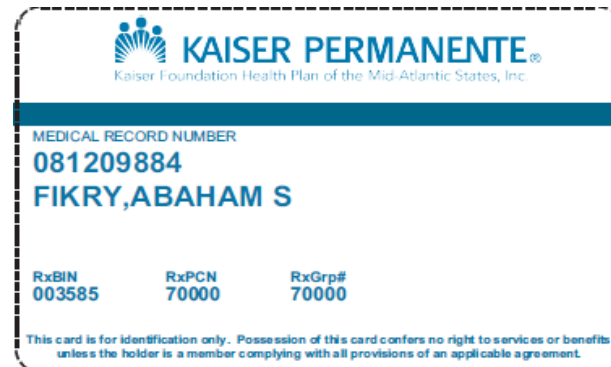
## Kaiser Permanente Signature™

- Traditional HMO
- Services are accessed at Kaiser Permanente Medical Centers
- Care is provided by Mid-Atlantic Permanente Medical Group (MAPMG) physicians
- Referral/authorizations are required for specialty care
- Approved referrals are required for hospital care and other facility services

Resources	Contact Information
Medical Advice/Appointments	703-359-7878 1-800-777-7904
Pre-certification	1-800-810-4766 1-800-660-2019 (fax)
Member Services	1-800-777-7902
Claims	Mid-Atlantic Claims Administration Kaiser Permanente P.O. Box 371860 Denver, CO 80237-9998

### Line of Business as shown in OLA examples

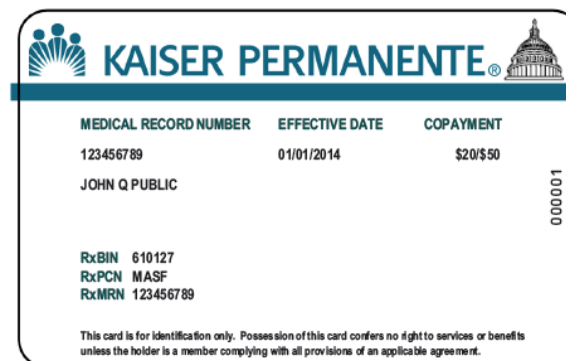
MAS KP-MID ATLANTIC / VA SG OFF HCR POS GOLD  
 MAS KP-DHMO/HDHP / VA DHMO PL 6 ML  
 MAS KP-MID ATLANTIC / VAH ML  
 MAS KP-MID ATLANTIC / MDH ML  
 MAS KP-MID ATLANTIC / DCH ML



## Marketplace/Exchanges

- Mirrors the Signature™ plan
- Identification cards are similar to the Signature™ plan cards with the exception of Capitol Hill employees
- High deductibles/coinsurance may apply to some plans
- Once annual Out-of-Pocket (OOP) maximums are met, members have no cost share for the remainder of the contract year. OOP limits are available through Online Affiliate

Resources	Contact Information
Medical Advice/ Appointments	703-359-7878 1-800-777-7904
Pre-certification	1-800-810-4766
Member Services	1-800-777-7902
Claims	Mid-Atlantic Claims Administration Kaiser Permanente P.O. Box 371860 Denver, CO 80237-9998

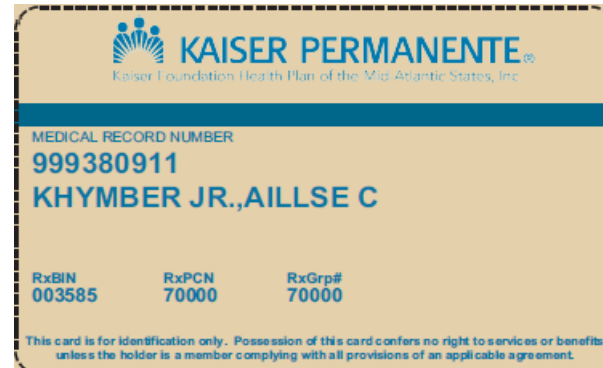




## Kaiser Permanente Select

- Traditional HMO plan
- Services are accessed at Kaiser Permanente Medical Centers and through Participating Providers within our service area
- Referral/authorizations are required for specialty care
- Approved referrals are required for hospital care and other facility services

Resources	Contact Information
Medical Advice/Appointments	703-359-7878 1-800-777-7904
Pre-certification	1-800-810-4766 1-800-660-2019 (fax)
Member Services	1-800-777-7902
Claims	Mid-Atlantic Claims Administration Kaiser Permanente P.O. Box 371860 Denver, CO 80237-9998



## Added Choice™

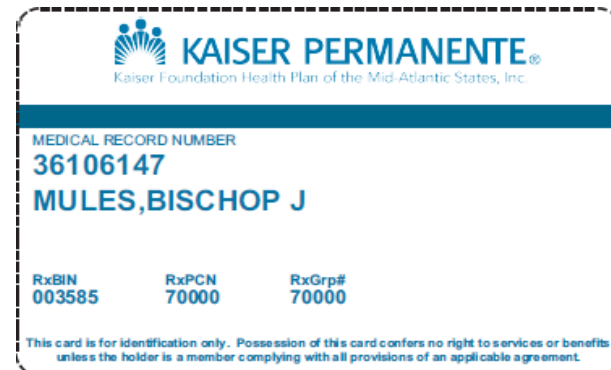
- 2-tiered plan
- HMO – MAPMG (Kaiser Permanente Signature™) or MAPMG & Participating Provider Network (Kaiser Permanente Select), copays apply
- OON\* – Any licensed provider, deductibles and coinsurance apply

\*certain OON services may require pre-certification

Resources	Contact Information
Medical Advice/Appointments	703-359-7878 1-800-777-7904
Pre-certification	1-800-810-4766 1-800-660-2019 (fax)
Member Services	1-800-777-7902
Claims	Mid-Atlantic Claims Administration Kaiser Permanente P.O. Box 371860 Denver, CO 80237-9998

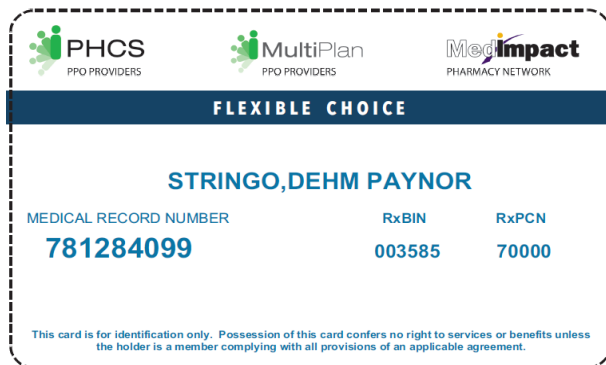
### Line of Business as shown in OLA examples

MAS KP-DHMO/HDHP / MD CORE COPAY 2TP DHMO 20% (41  
MAS KP-MID ATLANTIC / MD3 ML \$30/\$40 (41068) 0122



## Flexible Choice™

- Administered by Kaiser Permanente Insurance Company (KPIC)
- 3-tiered plan – HMO, PPO and OON
- HMO – MAPMG (Signature™), copays apply
- PPO – PHCS and MultiPlan providers, deductible and coinsurance apply
- OON – Any licensed provider, deductibles and coinsurance apply



Line of Business as shown in OLA examples  
 MAS KP-MID ATLANTIC - DC 3TP ML PL C

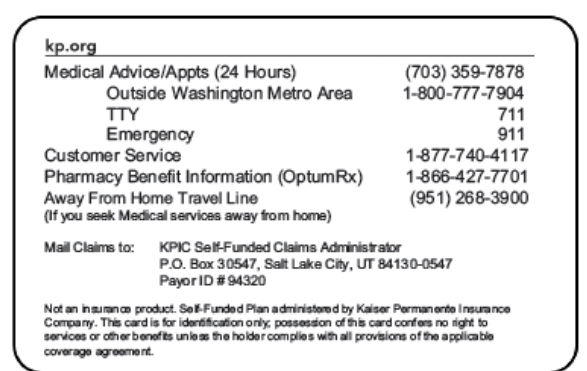
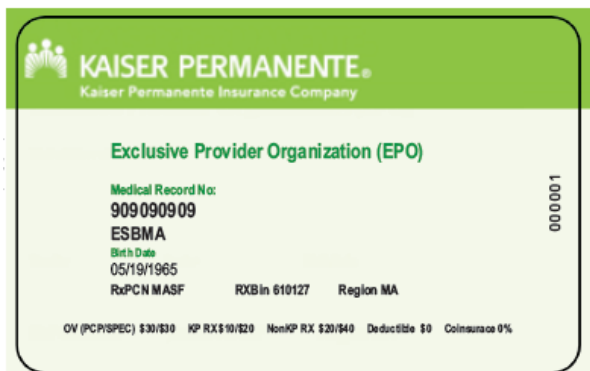
HMO Tier	
Medical Advice/Appointments	703-359-7878 1-800-777-7904
Pre-certification	1-800-810-4766 1-800-660-2019 (fax)
Member Services	1-888-225-7202
Claims	Mid-Atlantic Claims Administration Kaiser Permanente P.O. Box 371860 Denver, CO 80237-9998

PPO & OON Tier	
Pre-certification	1-888-567-6847
Member Services	1-800-392-8649
Claims	Mid-Atlantic Claims Administration Kaiser Permanente P.O. Box 371860 Denver, CO 80237-9998

## Exclusive Provider Organization (EPO)

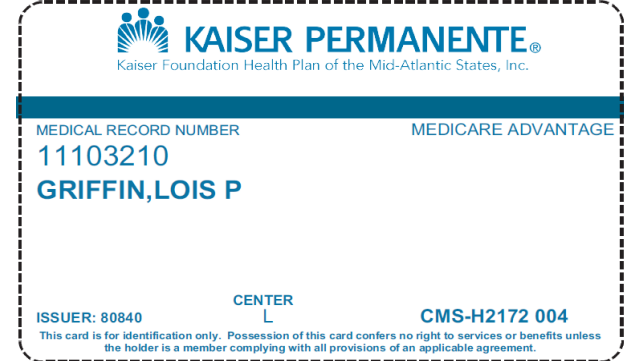
- Self-Funded plan administered by KPIC
- Mirrors the HMO Signature™ product
- Health Reimbursement Account – employer owned savings account for use by member with high deductible plans
- Members pay for patient liability using an employer provided Visa debit card

Resources	Contact Information
Medical Advice/Appointments	703-359-7878 1-800-777-7904
Pre-certification	1-800-810-4766 1-800-660-2019 (fax)
Member/Provider Services	1-877-740-4117 HHKPsfasreg@HealthPlan.com
Claims	KPIC Self-Funded Claims Administrator P.O. Box 30547 Salt Lake City, UT 84130-0547



## Medicare Advantage™

- Members must already have Parts A & B
- Services are accessed at Kaiser Permanente Medical Centers and the Kaiser Permanente Medicare Advantage Network
- Approved referral/authorizations are required for specialty care, hospital care and other facility services
- Kaiser Permanente must be billed as primary with the same data elements required by Original Medicare



Resources	Contact Information
Medical Advice/Appointments	703-359-7878 1-800-777-7904
Pre-certification	1-800-810-4766 1-800-660-2019 (fax)
Member Services	1-888-225-7202
Claims	Mid-Atlantic Claims Administration Kaiser Permanente P.O. Box 371860 Denver, CO 80237-9998


### Line of Business as shown in OLA examples

- MAS KP-MEDICARE ADVANTAGE / MA MD DP STD W/OSB
- MAS KP-MEDICARE ADVANTAGE / MA MD DP STD W/O OSB
- MAS KP-MEDICARE ADVANTAGE / MD ADV DP VALUE W/O OSB

## Sentara Health and Kaiser Permanente Virginia Medicaid Program

- Kaiser Permanente’s partnership with Sentara Health for Virginia Medicaid
- Formerly branded Optima Health/Virginia Premier. No material changes for members or providers accompanied this rebranding
- HMO – MAPMG (Signature™) and Virginia Medicaid Participating Provider Network
- Use the Kaiser Permanente Medical Record Number when billing Kaiser Permanente



Resources	Contact Information
Medical Advice/ Appointments	703-359-7878 1-800-777-7904
Pre-certification	1-800-810-4766
Member Services	1-855-249-5025
Claims	Mid-Atlantic Claims Administration Kaiser Permanente P.O. Box 371860 Denver, CO 80237-9998




**MEDICAID**

<b>KP MEDICAL RECORD NUMBER</b> 5931882	<b>MEDICAID ID NUMBER</b> 795135268728
<b>PAAY HULEY,ITZELLE M</b>	
<b>CENTER</b> CTMC	<b>PRIMARY CARE PHYSICIAN</b> DAWSON-RICHARDSON,SHANNON M
MedImpact BIN: 003585 MedImpact PCN & Group: 70000	Transportation: (866) 823-8349 Dental/Smiles for Children: (888) 912-3456

This card is for identification only. Possession of this card confers no right to services or benefits unless the holder is a member complying with all provisions of an applicable agreement.

**FAMIS**

<b>KP MEDICAL RECORD NUMBER</b> 46312846	<b>ID NUMBER</b> 578470999919
<b>NOORUZI,ARDUNE P</b>	
<b>CENTER</b> SFMC	<b>PRIMARY CARE PHYSICIAN</b> HWANG,DAHYE
MedImpact BIN: 003585 MedImpact PCN & Group: 70000	Transportation: (866) 823-8349 Dental/Smiles for Children: (888) 912-3456

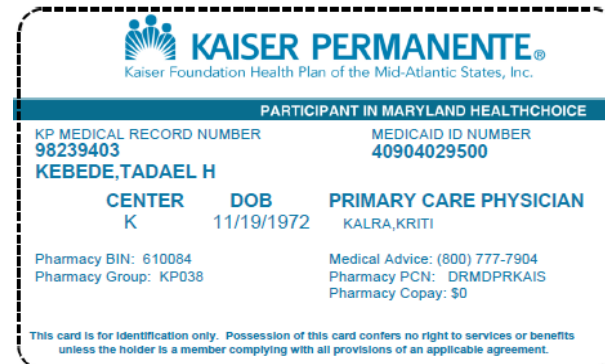
This card is for identification only. Possession of this card confers no right to services or benefits unless the holder is a member complying with all provisions of an applicable agreement.

## Maryland HealthChoice

- Maryland Medicaid MCO
- HMO – MAPMG (Signature™) and Maryland HealthChoice Participating Provider Network
- Use the Kaiser Permanente Medical Record Number when billing Kaiser Permanente

Resources	Contact Information
Medical Advice/Appointments	703-359-7878 1-800-777-7904
Pre-certification	1-800-810-4766 1-800-660-2019 (fax)
Member Services	1-855-249-5019
Claims	Mid-Atlantic Claims Administration Kaiser Permanente P.O. Box 371860 Denver, CO 80237-9998

Line of Business as shown in OLA examples  
[MAS KP-MEDICAID MCO MARYLAND / MD MEDICAID PLAN](#)



## Referrals and Authorizations

### Utilization Management Operations Center (UMOC)

Referral Management Unit: 8:00am – 4:30pm, weekdays

Concurrent Review Unit: 8:30am – 5:00pm, weekdays

Home Care/DME Unit: 8:30am – 5:00pm, weekdays

Emergency Care Management (ECM): 24/7, 365 days/yr.

### Referrals, Authorizations, Hospital Observation & Inpatient Admissions

Online Affiliate

[www.kp.org/providers/mas](http://www.kp.org/providers/mas)

General Number (listen for prompts)

800-810-4766

Inpatient Utilization Review Department Email

[MAS-UM-Teamkp.org@kp.org](mailto:MAS-UM-Teamkp.org@kp.org)

Fax Numbers:

- Specialty Care Referrals 800-660-2019
- DME & all PT/OT/ST (new referrals) 800-660-2019
- DME (reauth) 855-414-1695
- SNF PT/OT/ST & OP rehab PT/OT/ST (reauth) 855-414-1698
- Home Health PT/OT/ST (reauth) 855-414-1695
- Early Intervention 855-414-1695
- Concurrent Review 855-414-1708



## Referrals and Authorizations

### Utilization Management Operations Center (UMOC)

Pre-service review is required for selected procedure and services

List of self-referred services and services requiring pre-service review can be found in the Kaiser Permanente Provider Manual posted at <https://healthy.kaiserpermanente.org/maryland-virginia-washington-dc/community-providers/provider-info#provider-manuals>

Call the UMOC for notification of observation and inpatient admissions

Email [MAS-UM-Teamkp.org@kp.org](mailto:MAS-UM-Teamkp.org@kp.org) for items such as new patient referrals, hospital status, or bed days

### Specialty Care Referrals

Initial Consultation

- Referral must be authorized by PCP or specialist
- Referral valid for 90 days (3 months), or as otherwise specified on the referral

Additional visits (specialist may initiate extension of referral) by:

- Faxing request (Uniform Referral Form) to the UMOC at 1-800-660-2019, or
- Calling UMOC at 1-800-810-4766 and following voice prompts to request additional visits

Remember you do not have to call the PCP to request additional visits, call the UMOC number above

## Referrals and Authorizations

### Virtual Continuum Compass (VCC)

A group of clinical care consultants available to answer questions regarding the management and discharge of Kaiser Permanente members.

- Authorization Eligibility Questions
- Peer-to-Peer Consultations
- Management/Discharge of complex patients
- Venue Management

7 days a week from 8:30am – 6:00pm EST

301-879-6238

The VCC is for inpatient or skilled nursing facility (SNF) case managers and/or rounding providers only. Questions regarding outpatient specialty care should be directed to UMOC at 800-810-4766.

### Additional Utilization Management Resources

#### Post Acute Analytics (PAA)

- A partner that helps expedite the SNF prior authorization and SNF concurrent review processes through the Anna™ software platform.
- 469-444-7407

#### Progeny Health

- A partner company specializing in Neonatal Care Management Services. Progeny Health's staff works closely with Kaiser Permanente attending physicians and nurses, to promote healthy outcomes for premature and medically complex newborns.
- 888-832-2006

## Behavioral Health

### Members

Behavioral Health Access Unit: 1-866-530-8778

- Select prompt #6 for non-urgent inquiries
- Select prompt #9 for emergency services

### Providers

Pre-authorization is not required for the initial consultation and some routine care services. The complete list of authorization-waived CPT codes can be found under “News and announcements” at [www.kp.org/providers/mas](http://www.kp.org/providers/mas).

Behavioral Health Utilization Management: 301-552-1212

Psychiatric Hospitalizations: 1-800-810-4766

Behavioral Health UM Fax: 855-414-1703

## Claims and Billing Procedures

### Claim Filing Addresses & EDI IDs

Fully-Funded and Flexible Choice™ plans:  
Mid-Atlantic Claims Administration  
Kaiser Permanente  
P.O. Box 371860  
Denver, CO 80237-9998

Self-Funded plans:  
KPIC Self-Funded Claims Administration  
P.O. Box 30547  
Salt Lake City, UT 84130-0547  
Payor ID: 94320

Payor IDs for electronic claim clearinghouses:

- Change Healthcare: 52095
- OptumInsight/Ingenix: NG008
- Office Ally: 52095
- Availity (formerly REALMED): 54294
- Relay Health: RH010

Electronic Data Interface (EDI) & Electronic Fund Transfer (EFT) Support:  
[EDISupport@kp.org](mailto:EDISupport@kp.org)

### Billing Procedures

Timely filing:

- Commercial: 180 days (6 months) from date of service
- Government Programs: 12 months from date of service

Timely filing of appeals/disputes:

- Commercial: 180 days (6 months) from date of claim denial
- Government Programs: 12 months from date of claim denial

“Clean Claims”: standard format/completed fields, attachments, current industry standard data coding

All patient services must be billed on CMS1500 or UB04 forms

See Provider Manuals for more claim filing details

## Provider Responsibilities

- PCPs direct care for their Kaiser Permanente members and refer members for specialty care
- All providers must notify Kaiser Permanente of changes to their demographic information including when providers join or leave the practice, office locations, phone numbers, and panel status (for PCPs)
- Keeping Kaiser Permanente updated about demographic changes ensures that our directory and data systems are accurate and helps us provide an excellent healthcare experience to our members.
- Providers must also update their information in the National Plan and Provider Enumeration System (NPPES) and the Council for Affordable Quality Healthcare® (CAQH)

\*Note: Delegated providers must update their information with their delegated entity.



## Provider Demographics

- Access our provider directory at [kp.org](http://kp.org)
- **Provider Directory Validation Surveys**
  - Provider data must be validated every 90 days in adherence with the Center for Medicare and Medicaid Services (CMS) regulations and the new Consolidated Appropriations Act of 2021 (the “No Surprises Act”).
  - Providers are required to respond
- **Keeping Your Provider Data Updated:**
  - Be sure to submit any changes to your practice to Kaiser Permanente to keep your provider data updated
  - A sample form letter can be found on our Community Provider Portal at [www.kp.org/providers/mas](http://www.kp.org/providers/mas). Utilize this form to submit changes
    - Fax: 855-414-2623
    - Email: [Provider.Demographics@kp.org](mailto:Provider.Demographics@kp.org)
    - Mail: Kaiser Permanente  
Provider Experience  
2101 East Jefferson St., 2 East  
Rockville, MD 20852
- If you have any questions or concerns, please contact Provider Experience at 1-877-806-7470 or email us at [Provider.Demographics@kp.org](mailto:Provider.Demographics@kp.org).



## Member Rights & Responsibilities

- Kaiser Permanente is committed to providing members with quality health care services. Our members can expect to be treated professionally, be involved in the decision-making process, and receive safe and ethical care.
- Learn about our members' rights and responsibilities on our Community Provider Portal at [www.kp.org/providers/mas](http://www.kp.org/providers/mas)



## Compliance and Regulatory Policy

- Kaiser Permanente is committed to meeting compliance and regulatory policies enforced by federal, state/local government and health plans
- For questions regarding compliance policy or to obtain a copy of the Kaiser Permanente compliance guide, “Principles of Responsibility”, please call Provider Experience at 1-877-806-7470 or visit [www.kp.org/providers/mas](http://www.kp.org/providers/mas)



## Quality and Health Management

- KPMAS Quality of Care and Service Program addresses all medical, behavioral health and provider service to internal/external customers. Call Member Services at 1-800-777-7902 for more information.
- Providers are credentialed upon initial application and re-credentialed every three (3) years
- Site visits are conducted at initial and re-credentialing processes or as needed when a deficiency is identified
- Please see the Provider Manual for more quality measurement standards



## Online Resources

### Community Provider Portal (CPP)

- [www.kp.org/providers/mas](http://www.kp.org/providers/mas)
- Provider Manual
- Provider directories
- Clinical guidelines
- Network newsletters
- Download forms
- Trainings
- News and announcements

### Kaiser Permanente HealthConnect Online Affiliate (OLA)\*

- Secure web-based application, user ID required
- View member demographics
- Verify member eligibility and benefits
- View Kaiser Permanente medical records
  - Users with clinical access can enter laboratory and radiology order requests into Kaiser Permanente medical centers
- View referrals/authorizations/bed day table
- View claim information and send inquiries
- File appeals and payment disputes
- Respond to Kaiser Permanente requests for information (RFI) - \*Note: system has maximum file upload capacity of 20Mb per claim

\*Training materials for the above features available on OLA

## Contacts

### Community Provider Portal (CPP):

- Provider Manual, provider directory, forms for provider data changes, enrollment in KP HealthConnect Online Affiliate
- Sign-on to Online Affiliate

[www.kp.org/providers/mas](http://www.kp.org/providers/mas)

### Provider Experience:

- Contract questions, orientation and training

[Provider.Relations@kp.org](mailto:Provider.Relations@kp.org)

Fax: 855-414-2623

### Provider Demographic Updates

[Provider.Demographics@kp.org](mailto:Provider.Demographics@kp.org)

### Member Services Call Center (MSCC):

- Eligibility and benefits, member appeals, and member grievances

1-800-777-7902

### EDI & EFT Inquiries

[EDISupport@kp.org](mailto:EDISupport@kp.org)

### Claims

Mid-Atlantic Claims Administration  
 Kaiser Permanente  
 P.O. Box 371860  
 Denver, CO 80237-9998

### Online Affiliate Registration

[mas-kp-onlineaffiliate@kp.org](mailto:mas-kp-onlineaffiliate@kp.org)

### Utilization Management

1-800-810-4766

### Behavioral Health UM

301-552-1212

Thank you for participating with  
Kaiser Permanente

If you have any questions regarding this presentation,  
please email Provider Experience at  
[provider.relations@kp.org](mailto:provider.relations@kp.org).

