Provider Manual

• Kaiser Permanente National Transplant Program
It is our pleasure to welcome you as a contracting Provider for Kaiser Permanente. We want this relationship to work well for you, your medical support staff, and our Members.

This section of the Provider Manual was created to provide you and your staff with basic organizational information regarding Kaiser Permanente’s National Transplant Network.

Our Provider Relations Department is committed to providing support to you and your staff. This includes responding to your operational inquiries and providing education on our products and plans. If at any time you have a question or concern about the information in this Provider Manual, you can reach our Provider Relations Department by calling 510-268-5448.
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Introduction

The Provider Manual is referenced in your agreement ("Agreement") with a Kaiser Permanente entity. The information in this Provider Manual is proprietary and may not be used, circulated, reproduced, copied or disclosed in any manner whatsoever, except as permitted by your Agreement, or with prior written permission from Health Plan.

The Provider Manual is updated on an ongoing basis by Provider Contracting & Network Management and National Transplant Network Departments. Its intent is to equip Providers with useful information as to how to best access the Kaiser Permanente system and Kaiser Permanente’s expectations of Providers. Providers will be sent a notification letter to reference any relevant changes to this manual.

If there is a conflict between this Provider Manual and your Agreement, the terms of your Agreement will control. Capitalized terms that are used in this Provider Manual, but not defined, will have the meanings given to them in your Agreement.
Section 1: Kaiser Permanente Medical Care Program

1.1 History

Kaiser Permanente’s origins date to the late 1930’s and the prepaid health program developed by industrialist Henry J Kaiser and a young physician, Dr. Sidney R. Garfield. Initially, the health care program was only available to construction, shipyard and steel mill workers employed by the Kaiser industrial companies during the late 1930’s and 1940’s. The program was opened for enrollment to the general public in 1945.

Today, Kaiser Permanente is America’s leading integrated health plan and is a not-for-profit, group practice program headquartered in Oakland, Calif. Kaiser Permanente serves more than 8.7 million Members in nine states and the District of Columbia. Today it encompasses the not-for-profit Kaiser Foundation Health Plan, Inc., Kaiser Foundation Hospitals and their subsidiaries, and the for-profit Permanente Medical Groups. Nationwide, Kaiser Permanente includes approximately 156,000 technical, administrative and clerical employees and caregivers, and more than 13,000 physicians representing all specialties.

1.2 Organizational Structure

Kaiser Permanente is comprised of separate entities that share responsibility for comprehensive medical and hospital services.

1.2.1 Kaiser Foundation Health Plan, Inc. (“KFHP” “”)

Health Plan is a tax-exempt organization that operates health care benefit plans and provides or arranges for the provision of medically necessary health care services for its Members primarily through Kaiser Foundation Hospitals (KFH) and the Region’s Permanente Medical Group (PMG).

1.2.2 Kaiser Foundation Hospitals (“KFH”)

KFH is a tax-exempt organization that owns, operates, and contracts for hospital, skilled nursing, dialysis, home health and many other facility medical services. KFH also sponsors charitable, educational, and research activities. Health Plan contracts with KFH to provide or arrange for medically necessary hospital and facility services for Members. In turn, KFH contracts with community providers to provide facility services to Members, and improve geographic coverage and access to care.

1.2.3 The Permanente Medical Groups (“PMG”)

Each PMG is a professional corporation of physicians. Health Plan contracts with PMG to provide or arrange for medically necessary professional and outpatient services for
Members. In turn, PMG contracts with community Providers to provide professional services to Members, and improve geographic coverage and access to care.

1.2.3 Permanente Federation

The Permanente Federation serves as a national decision-making body for Permanente Medical Groups throughout the United States. The Federation is mandated by a partnership comprised of regional medical groups.

1.3 National Transplant Network

The National Transplant Network (NTN) was established in 1995 to pursue national contracting opportunities with providers for transplant services and provide oversight for those services. This national structure enables the NTN to achieve improved levels of service and improved utilization of limited resources. The NTN is a joint effort between Kaiser Foundation Health Plan, Inc./Kaiser Foundation Hospitals (KFHP/KFH) and the Permanente Medical Groups.

The NTN’s Quality, Resource and Risk Management (QRRM) Program integrates quality, utilization, and risk management in the delivery of transplant health care services. The NTN is structured to formally assess and provide oversight of quality of transplant care and services provided by Centers of Excellence (COE) and coordinated by NTN staff to Kaiser Permanente Members.

The NTN manages relationships with transplant services providers and Centers of Excellence nationally and provides case management of transplant patients through three (3) regionally located operations centers (Hubs). The NTN is committed to assessing and improving performance on a continuous and systematic basis, to ensure Kaiser Permanente Members have access to renowned centers with predictably high outcomes.

1.3.1 Hub Operations

Kaiser Permanente has a transplant support structure of nurse transplant coordinators. The coordinators assure continuity of care by acting as liaisons between Kaiser Permanente and the transplant COE. The Transplant Coordinator manages all phases of the transplant continuum of care for Kaiser Permanente Members. There are three NTN Hubs located in the United States. The Central East Hub located in Rockville, MD, the Northern California Hub located in Oakland, CA and the Southern California Hub located in Los Angeles, CA.
Each Hub Manager is responsible for management, oversight, and continued development of the daily Hub operations. Clinical oversight of the Hub is provided by a Hub Medical Director. Additional staff includes transplant assistants, data analysts, and other support personnel.

Patient referral and case management is the responsibility of the Hub assigned to the Member’s home region (see Section 1.3.2). The Transplant Coordinators are responsible for case managing the patients from the beginning of the transplant care path with the COE, until they return home to the care of a local Kaiser Permanente Physician. The Hub staff also facilitates return appointments to the COE, if determined to be necessary.

1.3.2 Hub Assignments

The Hubs support the following Kaiser Permanente Health Plan regions:

- Central East Hub manages Colorado, Georgia, Mid-Atlantic States and Ohio regions
- Northern California Hub manages Northern California and Northwest regions
- Southern California Hub manages Southern California and Hawaii regions
1.3.3 Clinical Communications Guidelines

Kaiser Permanente’s NTN Hubs provide day to day case and quality management of Kaiser Permanente patients referred to the COE. The Kaiser Permanente medical team, together with the COE’s medical team, will make decisions based on the appropriateness of care for the patient’s medical needs. Good communication is necessary between all key stakeholders during the continuum of care.

The key stakeholders involved are the Kaiser Permanente NTN Hubs, the Kaiser Permanente home regions, the Permanente Medical Group referring physician, and the NTN Centers of Excellence. The stakeholders will determine how clinical information will be exchanged. This can include fax, e-mail, telephone, and copies of medical records. All measures must be implemented to ensure and protect patient confidentiality.

1.3.4 Referral Process

Kaiser Permanente Members that have been deemed potential candidates for transplant services are referred by their local Permanente Medical Group physician to a contracted Center of Excellence for evaluation. The referring region and physicians work with the NTN Hub Transplant Coordinator to ensure that patient selection criteria are applied consistently and appropriately. The referrals are issued for non-emergency hospital or physician services. All referrals must be authorized by the Members Kaiser Permanente home region before transplant services are rendered. The Hub Transplant Coordinators are your contact for authorized referrals.

If treatment is required, but is not specified in the authorized referral, you must obtain additional authorization for the service. Please contact the appropriate Hub Transplant Coordinator to obtain authorization (see Key Contacts Section of this Manual).

Hub personnel do not authorize or deny service, rather, they act as a liaison between the Center of Excellence, the referring Kaiser Permanente region, and referring physician. In addition, Hub personnel receive Member eligibility and benefit information from the Member's Health Plan representative. Hub personnel do not make determinations regarding eligibility or benefits.