

Network Adequacy Frequently Asked Questions (FAQ)

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What is the Network Adequacy Policy?

The Network Adequacy policy applies to all Kaiser Permanente Insurance Company (KPIC) members covered under a KPIC group health policy and covers services from a non-participating provider because of access deficiencies within the participating provider network. The policy states that when a member is unable to obtain covered services from a participating provider due to deficiencies in Network Adequacy Standards, Availability Standards, or Geographic Access Standards, the covered services will be processed at the member's participating/in-network benefit level. The member will be held harmless from any balance billing from the non-participating provider.

What if I am unable to find a Participating Provider?

If you are unable to obtain covered services from a participating provider due to exceeding the Maximum Travel Distance, Wait Time Limits, or Geographical Maximum Distance (miles) per Provider Type Standards, the covered services will be processed at your participating benefit level.

How can I book an appointment with a participating provider?

If you are seeking services in the *California or Georgia* region, you can go to the participating provider link: www.multiplan.com/Kaiser to locate a provider near you for any service, including specialty services. You will need to contact the provider directly to schedule the appointment.

If you are seeking services in the *Mid-Atlantic States*, you can go to the participating provider link: www.multiplan.com/KPMAS to locate a provider near you for any service, including specialty services. You will need to contact the provider directly to schedule the appointment.

If you are seeking services in the *Colorado Region*, you can go to the participating provider link: www.providerlocator.firsthealth.com/Kaiser to locate a provider near you for any service, including specialty services. You will need to contact the provider directly to schedule the appointment.

If you are seeking services in the *Hawaii Region*, you can go to the participating provider link: www.choiceproducts-hawaii.kaiserpermanente.org/added-choice/member-information/finding-doctors-facilities/ to locate a provider near you for any service, including specialty services. You will need to contact the provider directly to schedule the appointment.

What if I am unable to find an appointment with a participating provider?

If you are unable to find an appointment with a participating provider including specialty(s) service(s), the Network Adequacy policy may be applicable in this situation. Please email NetworkAdequacy-KPIC@kp.org or call the appropriate regional customer service office for assistance:

- Mid-Atlantic States: Call 1-888-225-7202 (TTY 711), Monday through Friday, 8 a.m. to 6 p.m. Eastern Time
- California: Call 1-800-788-0710 (TTY 711), Monday through Friday, 7 a.m. to 7 p.m., Pacific Time
- Colorado: Call 1-855-364-3184 (TTY 711), Monday through Friday, 8 a.m. to 6 p.m., Mountain Time
- **Georgia**: Call **1-855-364-3185** (TTY **711**), Monday through Friday, 8 a.m. to 6 p.m., Eastern Time

 Hawaii: Call 1-800-238-5742 (TTY 711), Monday through Friday, 8 a.m. to 5 p.m. HST Time

When making an appointment, please let your provider know that your plan allows you to see any licensed provider for care. Pre-certification may be required for certain services.

How can I learn about the precertification requirements for the plan?

The precertification requirements of your plan will still apply. When visiting a non-participating provider for services, pre-certification may be required. For the precertification requirements refer to your Certificate of Insurance Document or you can visit kp.org/permanenteadvantage.

Your provider should call the pre-certification team for precertification requests.

- Mid-Atlantic: 1-888-567-6847, Monday through Friday, 8:30am 6:00pm EST
- Georgia: 1-855-265-0311, Monday through Friday, 8:30am 6:00pm EST
- Colorado: 1-888-525-1553, Monday through Friday, 8:00am 6:00pm MST
- California: 1-888-251-7052, Monday through Friday, 8:00am 6:00pm PST
- Hawaii: 1-888-529-1553, Monday through Friday, 8:00am 4:00pm HST

What can I do if my doctor requires me to pay for services in full at the time of my visit that meets Network Adequacy?

Because non-participating providers are not contracted with KPIC, they have the option to either bill you directly or submit a claim to KPIC on your behalf. If your doctor requires you to pay the full cost of the visit, you should submit a member reimbursement claim form, itemized bill(s), and a copy of your proof of payment, to receive the reimbursement minus the applicable participating benefit level cost share (such as copayment, coinsurance, and deductible). Your doctor may also submit the claim to the appropriate KPIC office based on the region in which your plan is based.

NORTHERN CALIFORNIA MEMBERS	GEORGIA MEMBERS
Claims Address	Claims Address
P.O. Box 12923	P.O. Box 370010
Oakland, CA 94604-2923	Denver, CO 80237-9998
MEMBER CERVICE	MEMBER CERVICE
MEMBER SERVICE	MEMBER SERVICE
1-800-788-0710	1-855-364-3185
SOUTHERN CALIFORNIA MEMBERS	HAWAII MEMBERS
Claims Address	Claims Address
P.O. Box 7004	P.O. Box 378021
Downey, CA 94242-7004	Denver, CO 80237-9998
MEMBER SERVICE	MEMBER SERVICE
1-800-788-0710	1-800-238-5742
COLORADO MEMBERS	MID-ATLANTIC MEMBERS (DC, MD, VA)
Claims Address	Claims Address
P.O. Box 373150	P.O. Box 371860
Denver, CO 80237-9998	Denver, CO 80237-9998
MEMBER SERVICE	MEMBER SERVICE
1-855-364-3184	1-888-225-7202

What additional tips would be helpful for me?

For additional information, you can visit your regional Kaiser Permanente Insurance Company Microsite to learn more about your plan:

- California: kp.org/kpic-california
- Colorado: kp.org/kpic-colorado
- Georgia: kp.org/kpic-georgia
- Hawaii: kp.org/kpic-hawaii
- Mid-Atlantic States: https://choiceproducts-midatlantic.kaiserpermanente.org/