

Kaiser Adoption Matrix Comments

BPR .onehealthport.com/worksmart/bproverview.php	Comment – (Can attach longer comments)
Standard Coding of Denials and Adjustments on the 835RA	
Electronic Processing of Corrections to Institutional Claims	
Electronic Processing of Corrections to Professional Claims	
Claim Coding Policy & Edits: Standardization and Transparency	We have implemented the best practice and informed our single major provider group with whom we contract. Given our unique business model, communicating via browser is an unnecessary, ineffective method that adds admin costs and complexity.
Reconsideration of a Health Plan's Policy Regarding Code Edits	We have implemented the best practice and informed our single major provider group with whom we contract. Given our unique business model, communicating via browser is an unnecessary, ineffective method that adds admin costs and complexity.
Requesting & Receiving Coverage Information for Eligibility & Benefits (Web Site)	
Requesting & Receiving Coverage Information for Eligibility & Benefits (HIPAA transaction)	Until 2014 when a new system is rolled out, our 270/271 transactions will not include information on benefit accumulators as these reside in a separate system.
Extenuating Circumstances - Pre-Auth/Admit Notification	We have implemented the best practice and informed our single major provider group with whom we contract. Given our unique business model, communicating via browser is an unnecessary, ineffective method that adds admin costs and complexity.
Browser Capabilities for Pre-Auth and Admit Notification	Given our unique business model -- a single, major provider group that is capitated - pre-auth is not a business function. It is only relevant for two hospitals in Washington, and member ID cards and member contracts provide instructions on how to obtain prior authorization. As such, implementing this BPR will only add admin costs and complexity.