



PROVIDER *bulletin*

August 15, 2017

Kern Health Systems (KHS) strives to provide periodic updates to our contracted network regarding benefit, authorization, and coverage changes for Kern Family Health Care members as directed by our regulatory body, Department of Health Care Services (DHCS).

Effective August 21, 2017, ALL varicose vein procedures will require Prior Authorization and will not be permitted to be submitted for retro review UNLESS considered a medical emergency. Varicose vein procedures will be required to adhere to the MCAL standards and criteria outlined in Kern Health Systems contract with the Department of Health Care Services (see link below, page 7). Documented expertise of training within the scope of the provider's residency training or practice should be submitted to the KHS Provider Relations Department for review.

A referral from the member's Primary Care Provider must be documented as conservative management of varicose veins is considered to be within the scope of practice for Primary Care. Please submit all necessary documentation with the request for review, including but not limited to detailed physical exam, conservative therapies attempted for a minimum of 3 months detailing use of prescription strength compression stockings (minimum 20mmHg), and original ultrasound report. Any patient undergoing venous procedures without documentation of trial and failure of conservative treatment in PCP records will not be approved.

[Medi-Cal Criteria](#)

If you have questions, please contact the KHS Provider Relations Department at (661) 664-5145.

Thank you,

Jake Hall
Provider Relations Supervisor
Kern Health Systems

