

February 15, 2020

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

Effective 2/15/2020, ancillary providers who elect to submit request prior authorization for services provided to actively enrolled KHS members will be required to be submitted with the original signed <u>ordering</u> licensed provider and pertinent medical record documentation to support medical necessity.

In addition, appeals or peer to peer requests are considered <u>only</u> when the ordering licensed provider submits a request.

If you have questions, please contact the KHS Provider Network Relations Department at (661) 664-5000.

Thank you,

Deborah Murr, RN, BS-HCM Chief Health Services Officer Kern Health Systems

