

July 12, 2024

## **Reminder: Authorizations Process**

Dear Provider,

Kern Health Systems (KHS) strives to deliver the most efficient provider authorizations. To enhance our process, KHS requires appropriate information for the completion of all requests. It is critical that clinical notes must be accompanied with requests to support medical necessity.

As outlined in the KHS Provider Manual, primary care providers (PCPs) initiate referral authorization by submitting a Referral/Prior Authorization Form via the Provider Portal. The request must include the following:

- Pertinent medical records
- Diagnoses and treatment codes
- Member data which supports the referral and will assist the specialty provider in the assessment and delivery of service

As a reminder, please ensure all relevant information is included when requesting services. For more information, please refer to Page 22 of the KHS Provider Manual available at the link below:

 <u>https://res.cloudinary.com/dpmykpsih/image/upload/kern-site-</u> <u>353/media/86f087664b784769984bc955c17fdd8a/provider-manual-q2-7102024.pdf</u>

KHS posts all bulletins on the KHS website, <u>www.kernfamilyhealthcare.com</u>, choose Provider, then Bulletins.

If you have any additional questions, please contact your Provider Relations Representative at 1-800-391-2000.

Sincerely,

Kristie Onaindia Provider Relations Manager Kern Health Systems