

## **A PROVIDER'S GUIDE: Telehealth Requirements and Policy Changes in Kansas During COVID-19**

Rapid developments with the COVID-19 pandemic have resulted in a set of broad expansions of telehealth policy, including key changes to both public and private payer payment policies, at least for the duration of this emergency period. This guide is meant to help healthcare providers and organizations get up to speed quickly on these changes and key components of telehealth payment in Kansas. Please keep in mind that events and policies are changing rapidly, and that this document will be updated frequently as new information and policies become available/are enacted. Please also see the related HTRC document available on the HTRC website related to federal policy and regulation changes in response to COVID-19.

### *Governor's Executive Orders*

Governor Kelly has instituted a number of executive orders related to licensure, the provision of health care services, and telehealth services specifically. All Executive Orders in response to COVID-19 are available at: <https://governor.kansas.gov/newsroom/executive-orders/>.

### *Telehealth-Executive Order 20-08*

Executive Order 20-08 modifies requirements on telehealth services and licensure to promote sustained access to healthcare services via telehealth for individuals in Kansas during this unprecedented pandemic (Executive Order 20-08, <https://governor.kansas.gov/wp-content/uploads/2020/03/E.O.-20-08.pdf>).

Executive Order 20-08 both allows and encourages physicians to provide services through telemedicine. Physicians are still required to provide an appropriate assessment and consultation including documentation and encouraged to consult the Kansas Prescription Drug Monitoring Program (K-TRACS) before providing a prescription for a controlled substance. The specific changes in Kansas during the period of the public health emergency that impact the delivery of telehealth services are summarized below:

1. An in-person examination in order to provide a prescription or order medication, including controlled substances, is not required.
2. Physicians who are not physically located in Kansas may provide care in Kansas through telemedicine or other means as long as they inform the Kansas Board of Healing Arts and have an unrestricted license to practice in any other state without a current investigation or disciplinary hearing.
3. The Board of Healing Arts may provide emergency licensure to those professions it regulates in order to respond to COVID-19.

Executive Order 20-08 only applies to those professions licensed by the Board of Healing Arts, and does not apply to the Board of Nursing, Behavioral Health Sciences Regulatory Board or other state licensure entities.

### *Professional and Occupational Licenses-Executive Order 20-19*

Executive Order 20-19 requires all state agencies to extend renewal deadlines for any occupational or professional license, certificate, permit, or registration issued by a state agency or any board, commission, division, or other licensing authority within a state agency to any individual, business, or organization that

This resource made possible by a grant from the Office for the Advancement of Telehealth, HRSA, DHHS

was in good standing as of March 12, 2020 that has expired or will expire during the public health emergency and extends these licenses until 90 days following the termination of the emergency declaration. This order does not apply to driver's licenses or vehicle registration and regulation, which is covered under Executive Order 20-12. This order also does not apply to attorneys. All stage agencies must waive late, delinquent, penalty, or expiration fees associated with these licenses or registrations.

In addition, all state agencies must extend the deadlines for mandated continuing education requirements until 90 days following the termination of the emergency. <https://governor.kansas.gov/executive-order-no-20-19/>

#### *Licensure, Registration, and Certification-Executive Order 20-23*

Executive Order 20-23 extends the provisions of Executive Order 20-19 to all state agencies that work with or collaborate with the Kansas Department for Aging and Disability Services (KDADS) for occupational or professional license, certificate, or registration issued by a state entity. It allows for temporary licensure, certificate, or registration for any persons previously licensed, certified, or registration offered by a state entity as long as the individual was in good standing prior to the lapse of that license and the license did not lapse more than five years prior to the date of the order (April 15, 2020). It allows for temporary aide authorization to individuals who receive minimum training in a nursing facility as set forth by KDADS with requirement set forth in the Executive Order. In addition, temporary authorization may be issued to individuals not previously licensed, but only for those working with individuals who require minimal supervision or assistance with activities of daily living, and as long as facilities ensure competence.

The Executive Order also provides for the extension of licensure for adult care homes for inspections for new or renewal KDADS licensed facilities until 90 days after the termination of the state disaster emergency, and the suspension of fees for licensure or increases in bed capacity, along with other modifications to requirements for adult care homes, available at: <https://governor.kansas.gov/executive-order-no-20-23/>.

Kansas Department for Aging and Disability Services: The Kansas Department of Aging and Disability Services has a document on their website with detailed guidance related to the provisions of Executive Order 20-19 and 20-23, as well as guidance for other licensing inquiries that have or may arise during the public health emergency specific to adult care homes: [https://www.kdads.ks.gov/docs/default-source/covid-19/hoc/kdads-adult-care-homes-executive-order-20-19-and-20-23-guidance.pdf?sfvrsn=99a102ee\\_2](https://www.kdads.ks.gov/docs/default-source/covid-19/hoc/kdads-adult-care-homes-executive-order-20-19-and-20-23-guidance.pdf?sfvrsn=99a102ee_2).

#### *Relief from Certain Restrictions and Requirements Governing Medical Services-Executive Order 20-26*

On April 22, 2020, Governor Kelly implemented Executive Order 20-26, which suspends any and all provisions in statute relating to supervision, delegation, and related issues by and to health care providers that are licensed, registered or certified and for ancillary workers to the extent necessary to allow licensed, registered, or certified health care professionals to provide, within a designated health care facility at which the professional is employed or contracted to work, medical services necessary to support the facility's response to the public health emergency and that are appropriate to the professional's education, training, and experience as determined by the facility in consultation with the facility's medical leadership.

A health care facility includes:

- "Entities listed in KSA 40-3401(f)" [see below and Appendix B];

This resource made possible by a grant from the Office for the Advancement of Telehealth, HRSA, DHHS

- State-owned surgical centers;
- State operated hospitals and veterans facilities;
- Entities used as surge capacity by any entity in the three previously named facilities;
- Adult Care Homes; and
- Any location designed by the Governor or the Secretary of KDHE to exclusively treat patients infected or suspected to have COVID-19.

KSA 40-3401(f) is the statutory definition of “healthcare provider.” The full text of this definition in statute is included as Appendix B to this document.

Healthcare providers include:

- A person licensed any branch of the healing arts by the state board of healing arts,
  - A person engaged in a postgraduate training program approved by the state board of healing arts,
  - A podiatrist licensed by the state board of healing arts,
  - An optometrist licensed by the board of examiners in optometry,
  - A pharmacist licensed by the state board of pharmacy,
  - A licensed professional nurse who is authorized to practice as a registered nurse anesthetist,
  - A dentist certified by the state board of healing arts to administer anesthetics,
  - A physician assistant licensed by the state board of healing arts,
  - A licensed advanced practice registered nurse in the classification of a nurse-midwife.
- 
- A health maintenance organization issued a certificate of authority by the commissioner
  - A medical care facility licensed by the state of Kansas,
  - A professional corporation made up of health care providers,
  - A Kansas limited liability company organized by healthcare providers,
  - A partnership of persons who are healthcare providers,
  - A Kansas not-for-profit corporation organized for the purpose of rendering professional services by persons who are healthcare providers,
  - A nonprofit corporation organized to administer the graduate medical education programs of community hospitals or medical care facilities affiliated with the university of Kansas school of medicine,
  - A psychiatric hospital licensed prior to January 1, 1988, and continuously thereafter or a mental health center or mental health clinic licensed by the state of Kansas.
  - A nursing facility licensed by the state of Kansas,
  - An assisted living facility licensed by the state of Kansas or a residential healthcare facility licensed by the state of Kansas.

Please read the order in its entirety for detailed information about these complex and substantial changes: <https://governor.kansas.gov/executive-order-no-20-26/>

Under this order, medical services may be provided without supervision from a licensed physician or nurse, without criminal, civil, or administrative penalty related to the lack of supervision or lack of a supervision agreement. Specific statutory requirements suspended include those related to supervision, delegation, and related issues to the extent necessary to permit:

- Physicians assistants to provide services without a written practice agreement with a physician;
- Advanced practice registered nurses, including nurse anesthetists, to provide services without a written collaborative agreement and without physician supervision or direction;

This resource made possible by a grant from the Office for the Advancement of Telehealth, HRSA, DHHS

- Registered Nurses and Licensed Practical Nurses for supervision, delegation, and related issues in order to collect throat or nasopharyngeal swab specimens for individuals suspected of being infected by COVID-19 for testing;
- Licensed Practical Nurses to provide medical services without registered nurse supervision;
- Licensed Pharmacists to provide care for routine health maintenance, chronic disease states, or similar conditions without physician supervision;
- Registered nurses with an exempt, inactive, or lapsed (within the last five years) license to provide medical services.

There is no change to the requirements for health care professionals for whom a license is unnecessary for their level of practice.

In addition, health care facilities, in order to support their response to COVID-19, are temporarily authorized to allow:

- Students who are enrolled in programs to become licensed, registered, or certified health care professionals to volunteer or work in the facility;
- Licensed, registered, or certified health care professionals and emergency medical personnel serving in the military in any duty status to volunteer or work in the facility;
- Medical students, physical therapists, and emergency medical personnel to work as “respiratory extenders” under the supervision of physicians, respiratory therapists, or advanced practice registered nurses, in order to assist respiratory therapists and other health care professionals in the operation of ventilators or related devices.
  - In addition, this group may provide other services necessary for the facility’s response to COVID-19.

The order also allows health care professionals licensed and in good standing (NOT revoked, suspended, or with pending disciplinary action) in another state or territory of the U.S. to practice in Kansas. Any limits that a provider has on their license in their state of licensure is subject to the same limitation while practicing in Kansas. Please note: E.O. 20-08 requires notification to the Board of Healing Arts for physicians licensed in other states providing telehealth services in Kansas using a form available from the Board. The memo with the link to this form is still on the Board of Healing Arts website, and there is no indication that the requirement for notification has ended.

In addition, health care facilities are temporarily authorized to use qualified volunteers or qualified personnel affiliated with other health care facilities as if the individual was an employee of their own facility (with potential terms or conditions to be set by the Secretary of the Kansas Department of Health and Environment).

All health care providers, including those in the definition for this term in KSA 40-3401, and also RNs, APRNs, LPNs, Pharmacists, unlicensed volunteers, military personnel, or students and other support personnel, and all entities listed in KSA 48-915, who are making clinical and triage decisions and rendering assistance, testing, care, or advice in the care of patients suspected or confirmed to be infected with COVID-19, and rendered in response to public health emergency, shall be deemed immune from suit unless it is determined that an act occurred involving willful misconduct, gross negligence, recklessness, or bad faith on the part of the facility or health care provider.

Health care professionals with a license that has lapsed within the last five years, are not required to take an exam to regain licensure not available during the emergency, be fingerprinted if unavailable

This resource made possible by a grant from the Office for the Advancement of Telehealth, HRSA, DHHS

during the emergency, receive required continuing education, or pay a fee to retain licensure for the period of the public health emergency. In addition, all professional certifications in basic life support, advanced cardiac life support, or first aid will not lapse during the emergency period. Fingerprint requirements for licensure or certification for hospitals, nursing homes, county medical care facilities, or psychiatric hospitals are also suspended.

#### *Extending Certain Executive Orders-Executive Order 20-28*

On April 30, 2020, Governor Kelly issued E.O. 20-28, which extends Executive Orders 03, 05, 07, 08, 10, 11, 12, 13, 17, 19, 20, 21, 22, 23, 26, and 27 until May 31, 2020 or until the statewide Disaster Emergency proclaimed on April 30, 2020 expires, whichever is earlier. This Executive Order includes all of the Executive Orders discussed above in this document that relate to the provision of telehealth services.

#### *Center for Medicare and Medicaid Services (CMS) Section 1135 Waiver*

On March 24, 2020, CMS approved a waiver of requirements for the state Medicaid program (including the Children's Health Insurance Program) for Kansas. <https://www.medicaid.gov/state-resource-center/disaster-response-toolkit/federal-disaster-resources/?entry=54054>. Changes that impact the delivery of telehealth services are outlined below:

1. Allows Kansas to temporarily suspend prior authorization requirements and extend pre-existing prior authorizations for enrollees.
2. Allows Kansas to temporarily provisionally enroll providers in the state Medicaid program who are enrolled in another state or with Medicare for multiple instances of care with multiple patients.
  - a. Allows Kansas to enroll providers not enrolled in another state or with Medicare without requiring an application fee, criminal background check, site visit, or Kansas license.
  - b. Also allows Kansas to temporarily cease the revalidation of providers currently enrolled in the program.
3. Extends timeline for fair hearing appeals processes.

#### *Kansas Medicaid Assistance Program (KMAP)*

General guidelines related to the provision of telehealth services are available in KMAP Bulletin 18224 available on the KMAP website at: [https://www.kmap-state-ks.us/Documents/Content/Bulletins/18224%20-%20General%20-%20Telemedicine 2.pdf](https://www.kmap-state-ks.us/Documents/Content/Bulletins/18224%20-%20General%20-%20Telemedicine%202.pdf).

Please note, though, that many of the rules and regulations related to the provision of telehealth services have changed for the period of the COVID-19 emergency declaration.

KMAP has created provider information with updated information related to COVID-19 policies on its website at: <https://www.kmap-state-ks.us/>. In addition, all provider bulletins discussed below, along with any new bulletins as they are created, are available at: <https://www.kmap-state-ks.us/Public/bulletins/bulletinsearch.asp>.

#### *Additional Information Related to Telehealth Provision of Services—Bulletin 20045*

On March 23, Adam Proffitt, state Medicaid Director, stated in Bulletin 20045, "The reimbursement rates for distant sites for services delivered through telemed will be equivalent to identical services provided in person. The Medicaid fee-for-service fee schedule that is posted on the KMAP website will

This resource made possible by a grant from the Office for the Advancement of Telehealth, HRSA, DHHS

Last Update: 5-12-20



Heartland  
Telehealth Resource Center

serve as the source of truth for reimbursement by code. There will be no change in reimbursement level for existing originating sites. In the instances that “home” is the originating site, then there will be no originating site fee paid for that claim.”

#### Updated 5-12-2020

##### *Telehealth Updates in Response to COVID-19—Bulletin 20046*

On March 31, 2020, Kansas Medicaid released KMAP General Bulletin 20046. Effective with dates of service on or after March 12, 2020, the bulletin details codes will be allowed for payment when provided by telemedicine/telephone. Providers will be allowed to be reimbursed for the codes when the originating Telemedicine site is place of service “home” (POS code 12).

- Please note that all services provided by telemedicine/telephone will need to be billed with POS code 02 (not 12).
- Only those services directly provided face-to-face by a provider in the home are eligible for POS code 12.

Telemedicine services (including telephonic contact) can be made when there is verbal consent received from the patient (to be followed up by written approval) in the medical record. Please note: Tele-video communication can only be utilized if that system is HIPAA compliant.

- Mental Health Codes: 90832-34, 90836, 90838-40, 90847, 90863, H0036 (with all current modifiers allowed), H0038, H0038HQ, 90792.
- SUD Codes: H0001, H0004, H0005 U5, H0006 U5, H0015 U5, H0038, H0038 HQ.
- SBIRT Codes: H0049, H0050, 99408, 99409
- Evaluation and Management: 99201-203, 99211-213. **On May 5, 2020, the following E/M codes were added to the list: 99204 and 99214.**

On May 5, Bulletin 20046 was updated to allow the following codes for Autism services to be provided either through telehealth (audio/video) **or telephone (audio only):** 97155, 97156.

For Federally Qualified Health Center (FQHC), Rural Health Clinic (RHC), or Indian Health Clinic (IHC), these entities will receive an encounter rate when serving as the distant site.

In addition, nursing facilities may serve as an originating site using the billing code of Q3014, with requirements outlined in KMAP Bulletin 18224 continuing to be in effect.

Please note:

- The code G2012, Virtual Check In, is not allowed.
- Out of state physicians may provide services through telehealth without a Kansas license as long as they are licensed in the state where they practice, but this does not extend to any other provider type.
- While these changes went into effect on March 12, that may not be the date that the MCO begins covering/reimbursing for these services. MCO system status for implementation is available on the KMAP bulletins page.

*One Care Kansas-Bulletin 20047*

This resource made possible by a grant from the Office for the Advancement of Telehealth, HRSA, DHHS



Last Update: 5-12-20



Heartland  
Telehealth Resource Center

Effective April 1, 2020 and through the duration of the public health emergency, to help facilitate social distancing for OneCare Kansas (OCK) partners and members, the following changes will be made to OCK service requirements:

1. The initial OCK Health Action Plan (HAP) completion, consent to treat and share information, and all OCK core services, can be done telephonically. OCK billing codes provided telephonically need to bill in a POS 02. Verbal consent and agreement can take the place of the member's signature where normally required.
2. Compliance with the above guidance will not pose a barrier to payment.
3. Managed Care Organization (MCO)s and the State shall hold the OCK partners harmless during this public health emergency period.

Updated 5-12-20

#### *Home and Community Based Services-Bulletin 20051*

Home and Community Based Service providers are allowed to provide services through telemedicine, effective March 12, including services to the home through telephone or HIPAA-compliant tele-video. This bulletin includes allowed service codes and whether they can be provided through televideo or telephone for brain injury, physical disability, autism, frail elderly, technologically assisted, I/DD, and Severe and Emotionally Disturbed Waivers. Please see Bulletin 20051 available on the KMAP website for a list of allowed codes by waiver type.

On May 8, Kansas Medicaid added the following billable code in an update to this bulletin for additional allowed codes by waiver type—nursing evaluation visit (T1001) through tele-video for the frail elderly waiver population. In addition, they added the notice that: Exceptions granted with this policy shall be in place until rescinded.

#### *Teledental-Bulletin 20052*

Effective March 12, KMAP will reimburse for the provision of limited teledental services. All provided services must be provided by providers appropriate to the services and will be reimbursed the same as face to face services. Requirements for in-person face-to-face visits are being waived during the emergency declaration. FQHCs and RHCs will receive an encounter rate when serving as the distant site and all televideo communication methods must be HIPAA-compliant. The allowed codes are: D0140, Limited Oral Evaluation-Problem Focused, and D0170, Re-Evaluation-Limited, Problem Focused (Established Patient, not Post-Operative).

#### *Reversal of Sequestration Reduction to RHCs, FQHCs, and IHCs-Bulletin 20054*

Effective retroactive to service dates on and after July 1, 2019, the State of Kansas/Managed Care Organization (MCO)s are responsible for the full encounter rate per the state plan amendment for Rural Health Clinic (RHC)s, Federally Qualified Health Center (FQHC)s and Indian Health Center (IHC)s. Impacted claims will be reprocessed.

#### *Managed Care Organization Out of Network Provider Information-Bulletin 20057*

During the COVID-19 Emergency Declaration period, services provided by temporary non-network providers will be allowed and will be reimbursed at the same rate as a participating provider. All existing Medicaid coverage and licensing requirements apply unless otherwise noted in a related COVID-19 publication. All current Managed Care Organization (MCO) prior authorization (PA) out-of-network requirements will remain in effect. The MCOs will, at a minimum, collect the TIN (SSN or EIN) and applicable state licensure and any other information needed for claim processing, and ensure the

This resource made possible by a grant from the Office for the Advancement of Telehealth, HRSA, DHHS

practitioner is not OIG excluded prior to paying the claim. MCO non-network providers are not required to enroll in the Kansas Medical Assistance Program (KMAP) to provide services to MCO members.

Out-of-state physicians may provide telemedicine when treating patients in Kansas without a Kansas license, provided the physician hold an unrestricted license in the state in which the physician practices. This does not extend to any other licensed provider.

*Early Childhood Intervention (ECI) and Local Education Agency (LEA) providers—Bulletin 20062*

Effective March 12, 2020, Early Childhood Intervention (ECI) and Local Education Agency (LEA) providers will be allowed to provide the following services using telephone or telehealth that previously were only allowed in-person:

- Early Childhood Intervention—T1001, T1017, T1027, 99402, 99404;
- Local Education Agency—T1001, 99402.

Audiology and Speech Language Pathology will continue to be allowed to be provided via telemedicine and is not changed with this policy. Reimbursement will be the same as a face-to-face visit. Services provided by telemedicine/telephone will need to be billed with POS code 02.

*Additional Codes Added to Telemedicine—Bulletin 20065*

In addition to those codes outlined in Bulletin 20046, additional behavioral health codes were added with an effective date of March 12, 2020. Telehealth services (including telephone without video) can be made with verbal consent with follow-up written consent obtained. Allowed provider types and specialties remain unchanged. Reimbursement is the same as a face-to-face visit. Treatment plans should be updated to correspond with the change in service delivery mode. The following providers are allowed to be reimbursed for the following codes when the originating telehealth site is the member's home:

- Substance Abuse Disorder Providers: H007.
- Mental Health Providers: 90791, 90792, 90853, 99367, 99368, H0032 HA, H2011 HO, H2017, H2017 HQ, H2017 TJ, T1019 HE.

No payment for Q3014 will be made for place of service 12 (home) without the physical presence of an enrolled provider. All services provided through telehealth or telephone should use place of service 02.

*Tobacco Cessation-Bulletin 20067*

Effective March 12, 2020, tobacco cessation counseling will be allowed through telehealth. This policy only allows for an additional delivery method. Allowed provider types and specialties will remain unchanged. Telemedicine services (including telephonic contact) can be made when there is verbal consent received from the participant (to be followed up by written approval) in the medical record. Tele-video communication can only be utilized if that contact is HIPAA compliant. Reimbursement will be the same as a face-to-face visit. The appropriate codes are 99406, 99407 and S9453.

*Brain Injury (BI) Waiver Services-Bulletin 20068*

Effective March 12, 2020, the following Home and Community Based Services (HCBS) waiver services will be allowed to be provided via telemedicine (and additionally by telephone for Speech-Language Therapy). Providers will be allowed to be reimbursed for the following codes when the originating telemedicine site is in the member's home. No payment for the Q3014 code will be made for POS 12 (home) without the physical presence of an enrolled provider. Verbal consent is allowed to be followed up by written approval in the medical record. Reimbursement will be the same as a face-to-face visit.

This resource made possible by a grant from the Office for the Advancement of Telehealth, HRSA, DHHS



Services allowed are: Occupational Therapy-G0152 (televideo and telephone); Physical Therapy-G0151 (televideo and telephone); Speech-Language Therapy-G0153 (televideo and telephone).

*Serious Emotional Disturbance (SED) Waiver Codes-Bulletin 20070*

The following codes are now allowed for telehealth and telephone services for providers of services SED Waiver services: T1019HK, T2038, S5110, S5110 TJ, H2021.

*COVID-19 Public Health Emergency Temporary Waivers-Bulletin 20071*

During March and April, 2020, CMS has approved waivers or modifications of federal Medicaid requirements to ensure that sufficient health care services are available to beneficiaries, to ensure reimbursement to providers for healthcare services, and to preserve appeal and fair hearing rights. Detailed information on these federal waivers and accommodations is available in HTRC's Federal Policy Document available on the website. The waivers and modifications affect prior authorization requirements for health care services, MCO appeal timelines, and state fair hearing timelines as noted below.

Prior Authorizations:

- Fee-for-Service (FFS) Beneficiaries: CMS approved a temporary waiver that will allow a suspension of prior authorization requirements for FFS beneficiaries retroactive to March 1, 2020 until the end of the federally declared public health emergency. The State will waive the requirement to obtain prior authorization for FFS services that began March 1, 2020 or after until the end of the federally declared public health emergency.
- FFS Beneficiaries and Managed Care Members: CMS approved a temporary waiver that will allow an extension of pre-existing authorizations for which a FFS beneficiary or managed care member had received prior authorization for services to be provided on or after March 1, 2020. The extension will allow for continuation of those services without a requirement for a new or renewed prior authorization through the end of the federally declared public health emergency. The State will implement this temporary extension, which will supersede the current continuation of service process during an appeal or fair hearing, until the end of the federally declared public health emergency.

Member Appeals and State Fair Hearings: CMS approved a temporary waiver that will allow modification of the timeframe for MCOs to resolve member appeals before a member may request a state fair hearing; CMS approved a temporary waiver that will allow modification of the timeframe for members to exercise their state fair hearing rights.

FFS/Managed Care Provider Appeals and State Fair Hearings: CMS approved a temporary waiving or modifying of certain requirements to ensure that health care providers who furnish items and services in good faith, but are unable to comply with one or more requirements as a result of the COVID-19 public health emergency, are reimbursed for those items and services and exempted from sanctions for noncompliance. The state is allowing additional timeframes for state fair hearings, appeals and external third-party reviews for fee for service and managed care providers if the deadline falls during the public health emergency.

Details of the guidelines for appeals and fair hearings are available in this Bulletin on the KMAP website in Bulletin 20071.

*Additional E/M Codes Allowed—Bulletin 20072*

This resource made possible by a grant from the Office for the Advancement of Telehealth, HRSA, DHHS

Effective March 12, the codes of 99204 and 99214 will be allowed when the originating telehealth site is the member's home, including the use of telephone without video capacity. No payment for Q3014 will be made for place of service 12 unless the provider is physically present in the home. Place of service 02 should be used for telehealth and telephone services. Verbal consent must be sought followed by written consent in the medical record. All telehealth (audio/video) must be HIPAA compliant.

*Expansion of Telemedicine for Therapy-Bulletin 20073*

Effective March 12 and until the end of the public health emergency, the following codes are allowed for payment related to therapy (not behavioral health) with allowed provider types unchanged when provided to the patient's home only through televideo (audio and video): 97110, 97112, 97140, 97161-68, 97530, 97535, 97750. The following codes are allowed for payment for either telephone (audio-only) or televideo (audio and video): 92521-24. Verbal consent followed by written consent in the medical record is required, and all televideo (audio and video) must use a HIPAA-compliant platform.

*Revision to April 2020 NCCI PTP and MUE Files for Telemedicine—Bulletin 20075*

Effective April 24 and retroactive to January 1, 2020, CMS revised National Correct Coding Initiative Procedure to Procedure Practitioner, NCCI PTP Outpatient Hospital, NCCI Medically Unlikely Edit PRA and NCCI OPH files related to the second quarter 2020 NCCI and MUE updates, CMS removed limits on telemedicine and COVID-19 related services. There are no revisions to the Durable Medical Equipment files. All affected claims will be identified and reprocessed for payment.

*Wheelchair Seating Assessment by Telemedicine-Bulletin 20076*

Effective March 12, the certain codes are allowed for the following approved providers—Cerebral Palsy Research Foundation (Wichita), Children's Mercy Hospital Seating Clinic (Kansas City, MO), KU Medical Center Seating Clinic (Kansas City, KS): 97542, 97755, 97760.

*Allowance of Additional Mental Health Crisis Intervention Codes-Bulletin 20086*

Effective March 12, procedure codes H2011 (Crisis Intervention at the Basic Level) and H2011 HK (Crisis Intervention at the Intermediate Level) will be allowed to be reimbursed via telemedicine (both tele-video and telephone). Billing for these two codes is contingent upon Kansas Department for Aging and Disability Services (KDADS) approval of the individual crisis protocol utilized at a specified Community Mental Health Centers (CMHC). CMHCs wanting to bill for these codes using Telemedicine contact will submit their Center's protocol to a designated contact at KDADS who will review the plan. If approval is authorized, the approval start date (which, in some cases, will be retrospective) will be noted and documentation of that approval provided to the CMHC by KDADS. Additionally, approval notifications will be routed to all three Managed Care Organizations (MCOs) and the Kansas Department of Health and Environment (KDHE). No system changes will be initiated to deny upfront reimbursement for these two codes; however, the CMHC should keep a copy of this approval in their files should this be needed in a post pay review.

Providers will be allowed to be reimbursed for the following codes when the originating telemedicine site is in the member's home (i.e. where the member is receiving services). No payment for the Q3014 code will be made for Place of Service (POS) 12 (home) without the physical presence of an enrolled provider.

The distant site, where the provider is delivering services, will use the appropriate Current Procedural Terminology/Healthcare Common Procedure Coding System (CPT/HCPCS) code with

This resource made possible by a grant from the Office for the Advancement of Telehealth, HRSA, DHHS

Last Update: 5-12-20



POS code 02.

Telemedicine services (including telephonic contact) can be made when there is verbal consent received from the patient (to be followed up by written approval) in the medical record. Audio/visual communication can only be utilized if that contact is Health Insurance Portability and Accountability Act (HIPAA) compliant.

*COVID-19 Claims Reimbursement for Testing and Treatment-Bulletin 20088*

As part of the Families First Coronavirus Response Act (FFCRA) and CARES Act, the U.S. Department of Health and Human Services (HHS), will provide claims reimbursement to health care providers generally at Medicare rates for testing uninsured patients for COVID-19 and treating uninsured patients with a COVID-19 diagnosis. Effective Monday, April 27, 2020, providers may begin the enrollment process with the Health Resources and Services Administration (HRSA) to receive reimbursement for the uninsured population. This includes the spenddown population that has not reached their spenddown to become Medicaid eligible. Health care providers who have conducted COVID-19 testing or provided treatment for uninsured COVID-19 patients on or after February 4, 2020, can request claims reimbursement through the HRSA program electronically and will be reimbursed generally at Medicare rates, subject to available funding.

Updated 5-12-20

*HCBS Disaster Emergency Exceptions-Specialized Medical Care-Bulletin 20090*

*HCBS Disaster Emergency Exceptions-Day Supports and Residential Services-Bulletin 20091*

*Personal Care Services-Bulletin 20092*

On May 1, 2020, Kansas Medicaid released bulletins (20091 and 20092) outlining additional flexibilities related to home and community-based services day supports and residential services and for personal care services. In addition, on May 6, Kansas Medicaid released bulletin 20090 outlining specialized medical exceptions for home and community-based services during the public health emergency.

*Extension of Emergency Policies Through June 30, 2020-Bulletin 20096*

On May 1, Kansas Medicaid released Bulletin 20096, extending all COVID-19 services set to expire May 1, 2020 through June 30, 2020. This includes Bulletins 20043, 20045, 20046, 20047, 20051, 20052, 20056, 20057, 20059, 20062, 20065, 20067, 20068, 20069, 20070, 20071, 20072, 20073, 20076, and 20086.

Updated 5-12-20

*HCBS Background Check Exceptions-Bulletin 20099*

On May 5, Kansas Medicaid released bulletin 20099 outlining exceptions for background checks during the public-health emergency.

Updated 5-12-20

*Telemedicine Billing Guidelines During COVID-19 Emergency-Bulletin 20105*

On May 8, Kansas Medicaid released Bulletin 20105, stating that KDHE recognizes that providers who bill Medicare for telemedicine services have received different instructions from CMS on how to bill during the current COVID-19 pandemic period and providing guidance.

Per MLN (MM10152), with implementation date of January 2018, the Centers for Medicare and Medicaid Services (CMS) issued this guidance on the use of the GT modifier for telemedicine: "Change Request (CR) 10152 eliminates the requirement to use the GT modifier (via interactive audio and video

This resource made possible by a grant from the Office for the Advancement of Telehealth, HRSA, DHHS

telecommunications systems) on professional claims for telehealth services. Use of the telehealth Place of Service (POS) Code 02 certifies that the service meets the telehealth requirements.”

Kansas Medicaid followed suit and guidance change for billing telemedicine services was issued in General Bulletin 18004. At this point in time, Kansas Medicaid does not plan to change their guidance as it relates to the billing of telemedicine services using the POS 02 designation. Both the GT and 95 modifiers in the Kansas Medicaid System are informative and claims would not fail if included as a modifier on a claim. We would therefore not expect providers would need to do anything with their Medicare claims to be accepted by the Medicaid Management Information System (MMIS). The Managed Care Organization (MCO) system should be configured in a like manner so cross-over claims utilizing either a GT or 95 modifier would not be denied.

#### *Kansas Department of Aging and Disability Services (KDADS)*

The state of Kansas submitted a waiver application for home and community-based services under Section 1912(c) through an Appendix K document. A copy of the approved Appendix K waiver is available on the KDADS website at: <https://www.kdads.ks.gov/covid-19> and on the CMS website at: <https://www.medicare.gov/resources-for-states/disaster-response-toolkit/home-community-based-services-public-health-emergencies/emergency-preparedness-and-response-for-home-and-community-based-hcbs-1915c-waivers/index.html>.

KDADS has also provided specific guidance related to COVID-19 regulation and rule changes on its website at: <https://www.kdads.ks.gov/covid-19>. Specific guidance related to the provision of telehealth services is described below:

#### *Home and Community Based (HCBS) Waiver Programs*

In a bulletin dated April 14, KDADS indicated that for all HCBS waivers, services that can be provided through telehealth as approved by KDADS may be completed using telecommunications (phone), televideo consultations/telemedicine or other HIPAA-complaint methods that include both audio and video. Details of assessments and other activities for specific waivers and population that may be conducted using telehealth are available in individual documents related to the waiver or population, with an overview provided in the bulletin: “HCBS Waiver Services with Approved Telemedicine Option,” updated on May 1, 2020, is available on the KDADS website at: <https://www.kdads.ks.gov/covid-19>.

*Substance Use Providers:* KDADS provided guidelines for expanded substance use services for substance use providers that took effect March 23. It expands the allowable services for telephonic and telemedicine to be delivered in the home of patients. The guidance requires Medicaid Managed Care Organizations and the Administrative System Organization to pay for these services at the same rate as if delivered face-to-face.

The following SUD services by fee code are approved for telephonic delivery in the home for Kansas Block Grant and DUI Providers: H0001 GT, H0004 GT, H0005 U5/GT, H0006 U5/GT, H0006 U5/HV/GT, H0007 GT, H0015 U5, H0015 U5/HA, H0038 GT/HF Individual, H0038 GT/HQ/HF Group.

The following SUD services by billing code are approved by KDHE for telephonic delivery in the home for KanCare SUD: H0001, H0004, H0005 U5, H0006 U5, H0015 U5, H0038, H0038 HQ

Updated 5-12-20

*Opioid Treatment Programs (OTPs)/Methadone Clinics*

On May 5, KDADS released guidance for opioid treatment programs and methadone clinics during the COVID-19 Emergency Period. Guidance relates to: Urinalysis Drug Tests; patients who are symptomatic and quarantined; medical exams; patient signatures on a treatment plan, and Medication-Assisted-Treatment pharmaceutical delivery to patient's homes. The guidance states that ASO, MCOs and State Survey staff should hold harmless the OTP's during the emergency period.

[https://www.kdads.ks.gov/docs/default-source/covid-19/bhs/covid-19-guidance-methadone-clinics.pdf?sfvrsn=a28f02ee\\_2](https://www.kdads.ks.gov/docs/default-source/covid-19/bhs/covid-19-guidance-methadone-clinics.pdf?sfvrsn=a28f02ee_2).

*Kansas Department of Health and Environment (KDHE)*

KDHE is the main coordinating agency for the COVID-19 response as well as the state entity with authority related to disease investigation, management, and public health actions. KDHE has created a health care provider website available at: <https://www.coronavirus.kdheks.gov/170/Healthcare-Providers>. The site contains clinical and other information for: Hospitals, Health Departments, Labs, Outpatient Clinics, PPE, Specimen Collection, Testing, and other information, requirements, and instructions related to the public health emergency.

*Kansas Board of Healing Arts*

The Kansas State Board of Healing Arts has identified ways the Board can immediately contribute to the capacity to safely respond to potential spikes in the numbers of patients seeking access to treatment related to COVID-19, consistent with Kansas law and relevant executive orders. They have produced a series of six memos outlining these changes:

1. A new temporary emergency license process for qualified healthcare providers, including qualified providers licensed in other states, Kansas exempt licensees, recently lapsed Kansas licensees, those who have had licensing exams cancelled due to the pandemic, or who are temporarily unable to pay license fee due to the pandemic.
2. A license waiver process implementing expanded options for qualified out of state providers to practice in Kansas to assist the state's pandemic response efforts, pursuant to Governor Laura Kelly's March 22nd Executive Order 20-08 and April 22nd Executive Order 20-26.
3. Extension of continuing education deadlines.
4. Temporary modification to regulations relating to Physician Assistant practice.
5. Temporary waiver of enforcement of most statutes and regulations that require in-person examination prior to prescribing medication.
6. Board guidance statements relating to licensees' practice during the emergency declaration period.

The Board indicated they will continuously assess the situation as it develops. Additional Board measures may be forthcoming, and the Board will comply with any future executive orders. A full overview is available in the full board memo, available at:

[http://www.ksbha.org/documents/misc/Guidance for Healthcare Professionals in Kansas.pdf](http://www.ksbha.org/documents/misc/Guidance%20for%20Healthcare%20Professionals%20in%20Kansas.pdf).

*Kansas State Board of Nursing*

The Board of Nursing has provided a synopsis of how Executive Order 20-26 impacts licensure and other components of practice for those professions it oversees available at: <https://ksbn.kansas.gov/wp-content/uploads/2020/04/Executive-Order-No.-20-26-4-22-2020.pdf>.

Please note that in this memo, the Board of Nursing clarifies that, “Nurses who hold a license that is exempt, inactive, or has lapsed within the past five (5) years must apply for a Temporary Emergency COVID-19 license that will expire when this Executive Order expires. If the nurse wants to reinstate their license after the Temporary Emergency COVID-19 license expires they will need to reinstate the license the normal way with the requirements of continuing education and a fee.”

The Board also clarifies that, “Nurses licensed in other states coming into Kansas to help with the COVID-19 pandemic do not need to do anything with the Kansas State Board of Nursing. It is the responsibility of the employer to verify their license is in good standing.”

#### *Behavioral Health Sciences Regulatory Board*

The Behavioral Sciences Regulatory Board has placed a notice on their website that teletherapy services count toward the 1500 required hours of direct client contact for clinical licensure for Addiction Counseling, Marriage and Family Therapy, Master’s Level Psychology, Professional Counseling, or Social Work—but not telephonic services (<https://ksbsrb.ks.gov/>).

In addition, the BSRB has provided an update memo related to telebehavioral health services available at: [https://ksbsrb.ks.gov/docs/default-source/default-document-library/important-information-regarding-telemental-health1665e446357f69b7acc5ff0000cef974.pdf?sfvrsn=da1a8d85\\_0](https://ksbsrb.ks.gov/docs/default-source/default-document-library/important-information-regarding-telemental-health1665e446357f69b7acc5ff0000cef974.pdf?sfvrsn=da1a8d85_0). In this memo, they note that the Board does not have the authority to allow exceptions to the current statutes and regulations concerning teletherapy services, as the agency has not been given authority by the legislative or executive branch of Kansas government to make any type of exception. This includes out of state providers providing care in Kansas, although it is possible to obtain temporary licensure, with links to the forms available in the memo (link above).

Please note, though, that there have been additional codes and other accommodations made to foster the provision of telebehavioral health services at the federal and state level. Federal changes made by CMS and others are detailed in the federal policy document available on the HTRC website, and additional codes and changes in Kansas are detailed below in sections related to KMAP (KanCare) and KDADS.

#### *Kansas Dental Board*

The Kansas Dental Board has provided guidance, in collaboration with KDHE, in a series of guidance documents. On Thursday, April 30, 2020, Governor Kelly issued [Executive Order 20-29](#), which lifts the prior stay-at-home order in phases. This order will become effective at 12:00 a.m. on Monday, May 4, 2020. On Thursday, April 30, 2020, the Kansas Department of Health and Environment, Bureau of Oral Health (KDHE), released [KDHE Memorandum #5](#). On Friday, April 24, 2020, the American Dental Association (ADA) released its ["ADA Return to Work Toolkit" \(ADA Toolkit\)](#). The Kansas Dental Board (Board) supports the ADA Toolkit and agrees with the KDHE in that the ADA guidelines are presented “not as a mandates, but as recommendations to aid dental teams in the reopening of their offices.” Read collectively, dental offices statewide may, after cooperation with any county orders that might be more restrictive in duration or protocol, reopen beginning at **12:00 a.m. on Monday, May 4, 2020**. All previous memoranda (Memos 1 through 4) are no longer valid and have been removed.

This resource made possible by a grant from the Office for the Advancement of Telehealth, HRSA, DHHS



*Kansas State Board of Pharmacy*

In a memorandum updated on April 14, 2020, the Pharmacy board indicated they have made the decision to temporarily allow remote work by pharmacy employees. This allowance only applies to pharmacies physically located in Kansas and persons licensed or registered with the Board. This allowance is only in effect until rescinded by the Board as published and noticed on the Board website. The Board expects nonresident pharmacies to allow remote work only in accordance with guidance issued by the governing body in the resident state. The Board has issued guidelines for pharmacies, pharmacists, technicians, and interns available at: <https://pharmacy.ks.gov/>.

*Kansas Insurance Department—Private Insurance*

The Kansas Insurance Department has information on their website about COVID-19. They have reached out to health insurers and learned they are implementing their contingency plans as need and are shifting employees to work from home, including claims processing and customer service. Many are also making changes to their internal policies regarding telemedicine and prescription drugs.

A memorandum on their website indicates that the Commissioner of Insurance does not have the authority to mandate expansion of telehealth services or modifications in reimbursement amounts. However, that many health insurers, but not all, are voluntarily making changes to allow telehealth services and to modify their payment practices to reimburse those services at the same level as in-person services. The Commissioner encourage everyone to check with their health insurer regarding the coverage of telehealth services. For specific information on what a health insurer is doing, please visit the health insurer's individual website. The memorandum is available at:

<https://insurance.ks.gov/documents/department/COVID19-FAQ.pdf> The Kansas Insurance Department has provided a list of them, reproduced below for convenience:

Major Medical Insurance Companies:

Aetna Health, Inc.

[www.aetna.com](http://www.aetna.com)

Aetna Life Insurance Company

[www.aetna.com](http://www.aetna.com)

Blue Cross and Blue Shield of Kansas

[www.bcbsks.com](http://www.bcbsks.com)

Blue Cross and Blue Shield of Kansas City

[www.bluekc.com](http://www.bluekc.com)

Cigna Health and Life Insurance Company

[www.cigna.com](http://www.cigna.com)

Coventry Health Care of Kansas

[www.aetna.com](http://www.aetna.com)

Coventry Health & Life Insurance Company

[www.aetna.com](http://www.aetna.com)

Humana Health Plan, Inc.

[www.humana.com](http://www.humana.com)

Humana Insurance Company

[www.humana.com](http://www.humana.com)

Medica Insurance Company

[www.medica.com](http://www.medica.com)

Oscar Insurance Company

[www.hioscar.com](http://www.hioscar.com)

**Last Update: 5-12-20**



Sunflower State Health Plan, Inc.

[www.sunflowerhealthplan.com](http://www.sunflowerhealthplan.com)

UnitedHealthcare Insurance Company

[www.uhc.com](http://www.uhc.com)

Kansas State Employee Health Plan

[https://admin.ks.gov/coronavirus/draw\\_down/sehp](https://admin.ks.gov/coronavirus/draw_down/sehp)

Short-Term Major Medical:

Freedom Life Insurance Company of America

[www.ushealthgroup.com](http://www.ushealthgroup.com)

Golden Rule Insurance Company

[www.goldenruleinsurance.com](http://www.goldenruleinsurance.com)

Independence American Insurance Company

[www.americanindependencecorp.com](http://www.americanindependencecorp.com)

United States Fire Insurance Company

[www.cfins.com](http://www.cfins.com)

Major Dental Insurance Companies:

Delta Dental of Kansas

<https://deltadentalks.com/groups/covid-19-update>

Medicaid/Managed Care

Information about policy changes related to COVID-19 is available on the KMAP website at:

<https://www.kmap-state-ks.us/public/homepage.asp>

Links to information from the three Managed Care Organization's response to COVID-19 are below:

Aetna

<https://www.aetna.com/individuals-families/member-rights-resources/need-to-know-coronavirus.html>

Sunflower Health Plan

<https://www.sunflowerhealthplan.com/>

United Health Care

<https://www.uhc.com/health-and-wellness/health-topics/covid-19>

Last Update: 5-12-20



Appendix A: Kansas Governmental Guidance and Requirements

Agency	Topics	Link
Center for Medicaid and Medicare Services	1135 Waiver approved for Kansas Medicaid Program	<a href="https://www.medicaid.gov/state-resource-center/disaster-response-toolkit/federal-disaster-resources/?entry=54054">https://www.medicaid.gov/state-resource-center/disaster-response-toolkit/federal-disaster-resources/?entry=54054</a>
Kansas Office of the Governor	Executive Orders in Response to COVID-19 (EO 20-03 and subsequent); Executive Order 20-08— Expanding Telemedicine and Licensing; 20-19 Extending Licenses and Continuing Education Requirements; 20-23 Licensure, Registration, and Certification; 20-26 Relief from Certain Restrictions and Requirements Governing Medical Services	<a href="https://governor.kansas.gov/newsroom/executive-orders/">https://governor.kansas.gov/newsroom/executive-orders/</a>
Kansas Medical Assistance Program (KMAP)	COVID-19 Provider Information  KMAP Bulletins Related to COVID-19	<a href="https://www.kmap-state-ks.us/">https://www.kmap-state-ks.us/</a>  <a href="https://www.kmap-state-ks.us/Public/bulletins/bulletinsearch.asp">https://www.kmap-state-ks.us/Public/bulletins/bulletinsearch.asp</a>
Kansas Department of Health and Environment- COVID-19 Resource Center	Hospitals, Health Departments, Labs, Outpatient Clinics, PPE, Specimen Collection, and Testing.	<a href="https://www.coronavirus.kdheks.gov/170/Healthcare-Providers">https://www.coronavirus.kdheks.gov/170/Healthcare-Providers</a>

This resource made possible by a grant from the Office for the Advancement of Telehealth, HRSA, DHHS

Last Update: 5-12-20



Agency	Topics	Link
Kansas Department for Aging and Disability Services	Section K Appendix (Home and Community-Based 1912(c) approved CMS waiver)  Behavioral Health Services; Aging, Disability Community Services and Programs, and Health Occupations	<a href="https://www.kdads.ks.gov/covid-19">https://www.kdads.ks.gov/covid-19</a>
Kansas Insurance Department	COVID-19 Insurance and Securities FAQs; COVID-19 Insurance and Securities Scams	<a href="https://insurance.kansas.gov/">https://insurance.kansas.gov/</a>
Kansas Dental Board	KDHE Dental Memorandum	<a href="https://www.dental.ks.gov/">https://www.dental.ks.gov/</a>
Kansas Board of Pharmacy	COVID-19 Pharmacy FAQ; Memorandum with Policies and Recommendations related to COVID-19	<a href="https://pharmacy.ks.gov/">https://pharmacy.ks.gov/</a>
Kansas Board of Healing Arts	Memo with Emergency Actions and Guidance Statements; Information related to Executive order 20-08 and 20-26.	<a href="http://www.ksbha.org/main.shtml">http://www.ksbha.org/main.shtml</a>  <a href="http://www.ksbha.org/documents/misc/Guidance for Healthcare Professionals in Kansas.pdf">http://www.ksbha.org/documents/misc/Guidance for Healthcare Professionals in Kansas.pdf</a>
Kansas Board of Nursing	Updates and FAQ	<a href="https://ksbn.kansas.gov/covid-19/">https://ksbn.kansas.gov/covid-19/</a>
Kansas Behavioral Health Sciences Regulatory Board	Telemental Health Provision and Emergency Licensure Application;  Verification that teletherapy services count toward required hours of direct client contact for clinical for Addiction Counseling,	<a href="https://ksbsrb.ks.gov/docs/default-source/default-document-library/important-information-regarding-telemental-health1665e446357f69b7acc5ff0000cef974.pdf?sfvrsn=da1a8d85_0">https://ksbsrb.ks.gov/docs/default-source/default-document-library/important-information-regarding-telemental-health1665e446357f69b7acc5ff0000cef974.pdf?sfvrsn=da1a8d85_0</a>  <a href="https://ksbsrb.ks.gov/">https://ksbsrb.ks.gov/</a>

This resource made possible by a grant from the Office for the Advancement of Telehealth, HRSA, DHHS

Last Update: 5-12-20



Heartland  
Telehealth Resource Center

Agency	Topics	Link
	Marriage and Family Therapy, Master's Level Psychology, Professional Counseling, or Social Work —but not telephonic services.	

This resource made possible by a grant from the Office for the Advancement of Telehealth, HRSA, DHHS

Appendix B: K.S.A 40-3401(f) Definition of Health Care Provider in Full

“KSA 40-3401(f) "Healthcare provider" means:

- a person licensed to practice any branch of the healing arts by the state board of healing arts,
- a person who holds a temporary permit to practice any branch of the healing arts issued by the state board of healing arts,
- a person engaged in a postgraduate training program approved by the state board of healing arts,
- a medical care facility licensed by the state of Kansas,
- a podiatrist licensed by the state board of healing arts,
- a health maintenance organization issued a certificate of authority by the commissioner,
- an optometrist licensed by the board of examiners in optometry,
- a pharmacist licensed by the state board of pharmacy, a licensed professional nurse who is authorized to practice as a registered nurse anesthetist,
- a licensed professional nurse who has been granted a temporary authorization to practice nurse anesthesia under K.S.A. 65-1153, and amendments thereto,
- a professional corporation organized pursuant to the professional corporation law of Kansas by persons who are authorized by such law to form such a corporation and who are healthcare providers as defined by this subsection,
- a Kansas limited liability company organized for the purpose of rendering professional services by its members who are healthcare providers as defined by this subsection and who are legally authorized to render the professional services for which the limited liability company is organized,
- a partnership of persons who are healthcare providers under this subsection,
- a Kansas not-for-profit corporation organized for the purpose of rendering professional services by persons who are healthcare providers as defined by this subsection,
- a nonprofit corporation organized to administer the graduate medical education programs of community hospitals or medical care facilities affiliated with the university of Kansas school of medicine,
- a dentist certified by the state board of healing arts to administer anesthetics under K.S.A. 65-2899, and amendments thereto,
- a psychiatric hospital licensed prior to January 1, 1988, and continuously thereafter under K.S.A. 2015 Supp. 75-3307b, prior to its repeal, and K.S.A. 2019 Supp. 39-2001 et seq., and amendments thereto, or a mental health center or mental health clinic licensed by the state of Kansas.

On and after January 1, 2015, "healthcare provider" also means a physician assistant licensed by the state board of healing arts,

- a licensed advanced practice registered nurse who is authorized by the board of nursing to practice as an advanced practice registered nurse in the classification of a nurse-midwife,
- a licensed advanced practice registered nurse who has been granted a temporary authorization by the board of nursing to practice as an advanced practice registered nurse in the classification of a nurse-midwife,
- a nursing facility licensed by the state of Kansas,
- an assisted living facility licensed by the state of Kansas or a residential healthcare facility licensed by the state of Kansas.



"Healthcare provider" does not include:

1. Any state institution for people with intellectual disability;
2. any state psychiatric hospital;
3. any person holding an exempt license issued by the state board of healing arts or the board of nursing;
4. any person holding a visiting clinical professor license from the state board of healing arts;
5. any person holding an inactive license issued by the state board of healing arts;
6. any person holding a federally active license issued by the state board of healing arts;
7. an advanced practice registered nurse who is authorized by the board of nursing to practice as an advanced practice registered nurse in the classification of nurse-midwife or nurse anesthetist and who practices solely in the course of employment or active duty in the United States government or any of its departments, bureaus or agencies or who provides professional services as a charitable healthcare provider as defined under K.S.A. 75-6102, and amendments thereto; or
8. a physician assistant licensed by the state board of healing arts who practices solely in the course of employment or active duty in the United States government or any of its departments, bureaus or agencies or who provides professional services as a charitable healthcare provider as defined under K.S.A. 75-6102, and amendments thereto."