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.

**Kansas**

Governor Kelly has instituted a number of executive orders, including one that specifically 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](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.

Kansas Medicaid (KanCare) and the Managed Care Organizations are in the process of adopting policies and procedures to reflect this Executive Order and other guidance. Please see the Table at the end of this document for an overview of recommendations and changes to requirements with links to documents and guidance from relevant state entities (KDHE, KDADS, Licensure Boards).

Please Note that information and application materials for providers seeking temporary or expedited emergency licenses and for out-of-state providers who need to inform the board that they are practicing telemedicine in Kansas in accordance with E.O. 20-08 are available on the Kansas Board of Healing Arts website at: [http://www.ksbha.org/main.shtml](http://www.ksbha.org/main.shtml).

**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-](https://www.medicaid.gov/state-resource-)

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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.

KMAP 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).

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

For the following codes for Autism services, telephone coverage is not allowed: 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.

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Additional Information Related to Telehealth Provision of Services

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 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.”

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.

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).

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.

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 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.

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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.

One Care Kansas-Bulletin 20017
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.

KMAP has created a 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 are available at: https://www.kmap-state-ks.us/Public/bulletins/bulletinsearch.asp.

Behavioral Health
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/).

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. For specific information on what your health insurer is doing, please visit the health insurer’s individual website. The Kansas Insurance Department has provided a list of them, reproduced below for convenience:

Major Medical Insurance Companies:
Aetna Health, Inc.
www.aetna.com
Aetna Life Insurance Company
www.aetna.com
Blue Cross and Blue Shield of Kansas
www.bcbsks.com
Blue Cross and Blue Shield of Kansas City
www.bluekc.com
Cigna Health and Life Insurance Company
www.cigna.com
Coventry Health Care of Kansas

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Short-Term Major Medical:
Freedom Life Insurance Company of America
www.ushealthgroup.com
Golden Rule Insurance Company
www.goldenruleinsurance.com
Independence American Insurance Company
www.americanindependencecorp.com
United States Fire Insurance Company
www.cfins.com

Telehealth Policy Resources:
- Medicare Learning Network Booklet – Telehealth Services (2020)
- Medicare Telemedicine Health Care Provider Fact Sheet
- Telehealth Coverage Policies in the Time of COVID-19 – Center for Connected Health Policy
- Billing for Telehealth Encounters: An Introductory Guide to Fee-for-Service – Center for Connected Health Policy

Telehealth Training and Other Relevant Resources:
- Telehealth Coordinator eTraining – California TRC and Northeast TRC
- Tips for Professional Videoconferencing and Telepresenting
- A Physicians Guide to COVID-19 – American Medical Association
- Telehealth and COVID-19 Toolkit – National Consortium of Telehealth Resource Centers

General Resources related to the provision of Telehealth Services are available on the HTRC website at: http://heartlandtrc.org/

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COVID-19 Telehealth Resources are available on the HTRC website at:
http://heartlandtrc.org/covid-19

National Consortium of Telehealth Resource Centers Resources are available at:
https://www.telehealthresourcecenter.org/

Questions? Contact the Heartland Telehealth Resource Center:
Email: jgracy@kumc.edu or via our website: https://heartlandtrc.org

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### Kansas Governmental Guidance and Requirements (as of 4-1-2020)

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<td>Kansas Board of Healing Arts</td>
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