State of Kansas Kansas Department of Health and Environment Division of Health Care Finance Public Notice

The Kansas Department of Health and Environment, Division of Health Care Finance (KDHE-DHCF) is amending the Kansas Medicaid State Plan to add the following physician services and reimbursement rates:

- 1. Additional pelvic examination services for females; and
- 2. Visit complexity services.

The proposed effective date for the State Plan Amendment (SPA) is April 1, 2024.

Item 1	
Fee-For-Service	Estimated Federal
Only	Financial Participation
FFY 2025	\$ 523
FFY 2026	\$ 1.025

Item 2	
Fee-For-Service	Estimated Federal
Only	Financial Participation
FFY 2025	\$ 7,657
FFY 2026	\$ 15,017

To request a copy of the proposed SPA, to submit a comment, or to review comments, please contact William C. Stelzner by email at <u>william.stelzner@ks.gov</u>, or by mail:

William C. Stelzner Kansas Department of Health and Environment Division of Health Care Finance 900 SW Jackson, Room 900N Topeka, KS 66612.

The last day for public comment is April 14, 2025.

Draft copies of the proposed SPA may also be found at a Local Health Department (LHD).

Christine Osterlund Medicaid Director Deputy Secretary of Agency Integration and Medicaid Division of Health Care Finance Kansas Department of Health and Environment

KANSAS MEDICAID STATE PLAN

Methods and Standards for Establishing Payment Rates

#5 Physician's Services

Physician's services are reimbursed on the basis of reasonable fees as related to Medicaid customary charges, except no fee is reimbursed in excess of a range maximum. The range of charges provides the base for computation of range maximums.

Payment for physician extender services is limited to a maximum of 75% of the maximum reimbursement to the billing physician.

Reimbursement for physician-referred laboratory services performed by an independent laboratory or outpatient hospital department, shall be made directly to the independent laboratory or outpatient hospital department.

Physician therapeutic phlebotomy reimbursement rates are set at 85% of non-rural Medicare rates. These rates will change on January 1 of each year as the non-rural Medicare rates change.

Additional varicose vein treatment modalities reimbursement rates are added.

Select procedure codes will be increase by 3% for physicians.

Additional pelvic examination reimbursement rates for females are added.

Visit complexity reimbursement rates are added.

Except as otherwise noted in the plan, state developed fee schedule rates are the same for both governmental and private providers for the above services. The agency's fee schedule rate was set as of April 1, 2025 and is effective for services provided on or after that date. The agency's established fee schedule rates are published on the agency's website at https://portal.kmap-state-ks.us/PublicPage/ProviderPricing/Disclaimer?searchBy=ScheduleList

This link will take the user to a page titled "Reference Copyright Notice." Scroll to the bottom of the page and click on the word "Accept" to access the fee schedule. The next page that appears is titled "KMAP Fee Schedules."

To access a fee schedule:

- a. Select the program from the drop-down list -TXIX;
- b. Choose the type of rates Medicaid;
- c. After choosing the rate type, the user will see a list of the current and historical versions of the corresponding schedule;
- d. Click the schedule TXIX.

KS 25-0010 Approval Date _____ Effective Date 4/1/2025 Supersedes KS 24-0018