

NOVEMBER 2018

KMAP GENERAL BULLETIN 18224

Kansas Telemedicine Act

Effective with date of service on and after January 1, 2019, the Kansas Telemedicine Act will be enacted in accordance with Senate Substitute for House Bill No. 2028.

Definitions:

- “Distant site” means a site at which a healthcare provider is located while providing healthcare services by means of telemedicine.
- “Healthcare provider” means a physician, licensed physician assistant, licensed advanced practice registered nurse or person licensed, registered, certified or otherwise authorized to practice by the behavioral sciences regulatory board.
- “Originating site” means a site at which a patient is located at the time healthcare services are provided by means of telemedicine.
- “Physician” means a person licensed to practice medicine and surgery by the state board of healing arts.
- “Telemedicine”, including “telehealth”, means the delivery of healthcare services or consultations while the patient is at an originating site and the healthcare provider is at a distant site. Telemedicine will be provided by means of real-time, two-way interactive audio, visual, or audio-visual communications, including the application of secure video conferencing or store-and-forward technology to provide or support healthcare delivery, that facilitate the assessment, diagnosis, consultation, treatment, education, and care management of a patient’s healthcare.

Telemedicine does not include communication between:

1. A healthcare provider that consists solely of a telephone voice-only conversation, email, or facsimile transmission.
2. A physician and a patient that consists solely of an email or facsimile transmission.

Requirements regarding the provision telemedicine services:

1. Telemedicine may be used to establish a valid provider-patient relationship.
2. The same standards of practice and conduct that apply to healthcare services delivered through personal contact also apply to healthcare services delivered through telemedicine.
3. A person who is authorized by law to provide and provides telemedicine services to a patient must provide the patient with guidance on appropriate follow-up care.
4. Except when otherwise prohibited by any other provision of law, when the patient consents and has a primary care or other treating physician, the person providing telemedicine services will send within three business days a report to such primary care or other treating physician of the treatment and services rendered to the patient in the telemedicine encounter.

KMAP

[Kansas Medical Assistance Program](#)

- [Bulletins](#)
- [Manuals](#)
- [Forms](#)

Customer Service

- 1-800-933-6593
- 7:30 a.m. - 5:30 p.m.
Monday - Friday

Kansas Telemedicine Act continued

5. A person licensed, registered, certified, or otherwise authorized to practice by the Behavioral Sciences Regulatory Board will not be required to comply with the provisions of requirement #4 (above).
6. The provisions of this section shall also apply to the Kansas Medical Assistance Program (KMAP).
7. KMAP will not exclude an otherwise covered healthcare service from coverage solely because such service is provided through telemedicine, rather than through personal contact, or based upon the lack of a commercial office for the practice of medicine.
8. The insured's medical record will serve to satisfy all documentation for the reimbursement of all telemedicine healthcare services, and no additional documentation outside of the medical record will be required.
9. Payment or reimbursement of covered healthcare services delivered through telemedicine is the payment or reimbursement for covered services that are delivered through personal contact.
10. Services provided through telemedicine must be medically necessary and are subject to the terms and conditions of the individual's health benefits plan.
11. KMAP cannot require a covered individual to use telemedicine in lieu of receiving an in-person healthcare service or consultation from an in-network provider.
12. Nothing in the Kansas telemedicine act shall be construed to authorize the delivery of any abortion procedure via telemedicine.

Note: As documented in related telemedicine policies, telemedicine claims at the distant site must contain place of service 02 (Telehealth distant site). Providers at the originating site **are required** to submit claims using code Q3014 (Telehealth originating site facility fee).

Providers must ensure the codes are covered by KMAP. Providers may only furnish telemedicine services that are safe, medically necessary, and within the provider's specified scope of practice.

Note: The effective date of the policy is January 1, 2019. The implementation of State policy by the KanCare managed care organizations (MCOs) may vary from the date noted in the Kansas Medical Assistance Program (KMAP) bulletins. The **KanCare Open Claims Resolution Log** on the KMAP [Bulletins](#) page documents the MCO system status for policy implementation and any associated reprocessing completion dates, once the policy is implemented.

For the changes resulting from this provider bulletin, reference the updated *General Benefits Fee-for-Service Provider Manual*, Section 2720, pages 2-28 through 2-30.

KMAP

[Kansas Medical Assistance Program](#)

- [Bulletins](#)
- [Manuals](#)
- [Forms](#)

Customer Service

- 1-800-933-6593
- 7:30 a.m. - 5:30 p.m.
Monday - Friday