Kansas Administrative Regulations

Kansas Department for Children and Families

Article 5.—Provider Participation, Scope of Services, and Reimbursements for the Medicaid (Medical Assistance) Program

30-5-73. Requirements for facilities to participate.

(a) Medical services provided in community mental health centers, free-standing psychiatric facilities, state-operated hospitals, and general hospitals to be reimbursed by the medicaid/medikan program shall be under the effective control of a physician as determined by the agency.

(b) Community mental health centers, freestanding psychiatric facilities, state-operated hospitals, and general hospitals providing medical services reimbursable by the medicaid/medikan program shall have utilization review programs approved by medicare or the agency. Utilization review programs and their implementation shall be subject to review by the secretary.

(c) Facilities offering medical services shall be licensed or certified by an appropriate Kansas state licensing or certification authority in order to be eligible for reimbursement by the medicaid/ medikan program. The effective date of this regulation shall be October 1, 1993.

(Authorized by and implementing K.S.A. 1992 Supp. 39-708c; effective May 1, 1981; amended May 1, 1986; amended, T-30-1-2-90, Jan. 2, 1990; amended, T-30-2-28-90, Jan. 2, 1990; amended Oct. 1, 1993.)