

Kansas Administrative Regulations

Kansas Department of Insurance

Article 4.—Accident and Health Insurance

40-4-27. Same; basic medical-surgical expense coverage.

"Basic medical-surgical expense coverage" means a policy of accident and sickness insurance which, for each person insured under the policy, provides coverage for the expenses incurred in providing the necessary services, rendered by a legally qualified physician, for treatment of an injury or sickness. Basic medical-surgical expense coverage shall provide at least the following:

(a) Surgical services consisting of benefits providing not less than:

(1) an amount for any procedure at least equal to \$1,000, based on the relative values contained in the "relative value study" of the Kansas medical society, adopted May 5, 1966, as amended May 19, 1968; or

(2) 80 percent of the reasonable charges;

(b) Anesthesia services, consisting of administration of necessary general anesthesia and related procedures, in connection with covered surgical service, which is rendered by a physician other than the physician or the physician's assistant performing the surgical services:

(1) In an amount not less than 80 percent of the reasonable charges; or

(2) 15 percent of the surgical service benefit;

(c) In-hospital medical services, consisting of physician services rendered to a person who is a bed patient in a hospital for treatment of sickness or injury other than that for which surgical care is required, in an amount not less than:

(1) 80 percent of the reasonable charges; or

(2) \$10 per day for not less than 21 days during any one period of confinement.

(Authorized by K.S.A. 40-103, 40-2218; implementing K.S.A. 40-2218; effective Feb. 15, 1977; amended May 1, 1984; amended May 1, 1986.)