

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State: Kansas

- B. The method used to collect cost sharing charges for categorically needy individuals:
- ☒ Providers are responsible for collecting the cost sharing charges from individuals.
- ☐ The agency reimburses providers the full Medicaid rate for a service and collects the cost sharing charges from individuals.
- C. The basis for determining whether an individual is unable to pay the charge, and the means by which such an individual is identified to providers, is described below:

Recipients can assert that they are unable to pay copayment to the provider at the time of service. However, providers are notified they cannot refuse service due to the recipient's inability to pay.

The copayment is collected by the provider at the time the service is provided. If the client is unable to pay the copayment when the service is provided, the provider may bill the client for the amount of the copayment.

An individual who is unable to pay the copayment is identified by self-declaration to the provider.

Certain individuals and services are excluded from copayments in compliance with 1916(a) and (j) of the Act 42 CFR 447.53.

In accordance with 42 CFR 447.57, payment under Medicaid due to an Indian health care provider or a health care provider through referral under contract services for directly furnishing an item or service to an Indian will not be reduced by the amount of the enrollment fee, premium, or similar charge, or any deductible, copayment, cost sharing, or similar charge that otherwise would be due from the Indian.

The State will take the following action to meet the requirements of 42 CFR 447.53(b):

All exemptions are done at a beneficiary level, a procedure code level, a provider type level, a diagnosis level, or a combination of several of the aforementioned levels.

Through July 31, 2012, all individuals who have a verified American Indian or Alaska Native (AI/AN) status on their eligibility record will be exempted from cost sharing. Beginning August 1, 2012, for claims processed through the Medicaid Management Information System (MMIS) for those individuals who have a verified AI/AN status on their eligibility record and have ever received a service or item from an Indian health care provider or a health care provider through referral under contract services will be exempt from cost sharing. When a claim is for a Contract Health Service (CHS) referral the CHS will list the IHS provider as a referring provider on the claim form. We will exempt these services by the referring provider type.

There will not be a cumulative maximum that applies to all charges imposed on a specified time period.