Kansas Medical Assistance Program





September 2006

Provider Bulletin Number 6102

Professional Providers

Pancreas Transplants

Effective with dates of service on and after October 1, 2006, KMAP will cover pancreas transplants. Physicians billing this service should use procedure code 48554.

Pancreas transplants are only covered when performed simultaneously with or following a kidney transplant.

Celebrex No Longer Requires Prior Authorization

Effective with dates of service on and after May 12, 2006, Celebrex® no longer requires prior authorization.

Note: There continues to be a quantity restriction of no more than 62 Celebrex capsules per month for the 100mg and 200mg strengths and no more than 31 capsules per month for the 400mg strength.

Information about the Kansas Medical Assistance Program as well as provider manuals and other publications are on the KMAP Web site at https://www.kmap-state-ks.us. For the changes resulting from this provider bulletin, please view the *Professional Provider Manual*, page 8-48.

If you have any questions, please contact the KMAP Customer Service Center at 1-800-933-6593 (in-state providers) or (785) 274-5990 between 7:30 a.m. and 5:30 p.m., Monday through Friday.

8400. Updated 9/06

Physical Therapy

Must be provided by a home health agency, physician's office, outpatient hospital department, or a Local Education Agency.

Physical therapy is covered when services are prescribed by a physician and performed by a registered physical therapist or by a certified physical therapy assistant working under the supervision of a registered physical therapist. When services are performed by a certified physical therapy assistant, supervision must be clearly documented. This may include, but is not limited to, the registered physical therapist initializing each treatment note written by the certified physical therapy assistant, or the registered physical therapist writing "Treatment was supervised" followed by their signature.

Speech Therapy

Must be provided by a home health agency, OP hospital department, or a Local Education Agency.

Speech therapy is covered when services are prescribed by a physician and performed by a certified speech pathologist.

Transplants:

Liver transplants for Medicaid consumers will only be reimbursed at the University of Kansas Medical Center or at a hospital recommended by their staff.

Heart, lung and heart/lung transplants performed in approved in-state or border city hospitals are covered for KAN Be Healthy participants only.

Heart transplants will be allowed at St. Luke's Hospital in Kansas City, Missouri, or Via Christi (St. Francis Campus) in Wichita, Kansas, or at a hospital recommended by either of these facilities.

Bone marrow, cornea, kidney, and pancreas transplants performed in approved in-state or border city hospitals are covered and do not require prior authorization.

Pancreas transplants are only covered when performed simultaneously with or following a kidney transplant.

KANSAS MEDICAL ASSISTANCE PROFESSIONAL SERVICES PROVIDER MANUAL BENEFITS & LIMITATIONS