

Kansas Medical Assistance Program





BULLETIN

GENERAL PROVIDERS

PHYSICIAN ASSISTANTS MAY FUNCTION AS PRIMARY CARE CASE MANAGERS IN THE HEALTHCONNECT KANSAS PROGRAM

Effective with dates of service on and after August 13, 2004, physician assistants may enroll as primary care case managers in the HealthConnect Kansas Program.

Replace provider General Benefits Manual page: 2-24.

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

2200. HEALTHCONNECT Updated 8/04

Introduction to HealthConnect Kansas

HealthConnect Kansas is a program established by the Kansas Department of Social and Rehabilitation Services (SRS) to allow beneficiaries access to quality medical care in an efficient and economical manner. The HealthConnect Kansas primary care case manager agrees to provide medical care to a select group of Kansas Medical Assistance Program beneficiaries or, when necessary, refer the patient to another provider. In the HealthConnect Kansas Program, case managers are defined as providers who are:

Advanced Registered Nurse Practitioners (ARNP)
Family Practice Physicians
Federally Qualified Health Centers
General Practice Physicians
Indian Health Centers
Internal Medicine Physicians

Local Health Departments
Obstetrics and Gynecology Physicians
Physicians' Assistants
Pediatric Physicians
Rural Health Clinics
Group practices of the provider
types specified

Once a provider has become a PCCM they will be asked to identify the clinical focus for their office. The current provider choice focuses are:

Family Practitioner
Federally Qualified Health Center
General Practitioner with Obstetrics
Local Health Department/Public Health Clinic
Nurse Practitioner
Pediatrician
Physician Assistant

Family Practitioner with Obstetrics General Practitioner Internal Medicine Nurse Midwife Obstetrics/Gynecologist Pediatrician and Internal Medicine Rural Health Clinic

The case manager is paid a monthly fee for each beneficiary assigned to his/her management, plus the established fee-for-service allowance for medical services provided. Beneficiaries are restricted to their assigned case manager and may not receive medical services from other providers without the case manager's written approval. The only two exceptions are: 1) emergency services provided in the emergency room, and 2) services exempt from case management referral. The goals of HealthConnect Kansas are to:

- Better manage the beneficiary's use of medical services
- Provide access to primary and preventive medical care by the case manager on a 24 hour a day basis
- Contain costs in Kansas Medical Assistance Program (KMAP) without a reduction in medically necessary services
- Improve continuity of care

KANSAS MEDICAL ASSISTANCE GENERAL BENEFITS PROVIDER MANUAL