



MAY 2020

KMAP GENERAL BULLETIN 20109

Future Drug Coverage Through Home Infusion Services

Effective July 1, 2020, the following drugs will be covered in the home by a licensed Home Infusion provider (PT/PS 05/050 and 25/250):

J0692	J0696	J0878
J1743	J2185	J3380

Note: The effective date of the policy is July 1, 2020. The implementation of State policy by the KanCare managed care organizations (MCOs) may vary from the date noted in the Kansas Medical Assistance Program (KMAP) bulletins. The KanCare Open Claims Resolution Log on the KMAP Bulletins page documents the MCO system status for policy implementation and any associated reprocessing completion dates, once the policy is implemented.

KMAP

[Kansas Medical Assistance Program](#)

- [Bulletins](#)
- [Manuals](#)
- [Forms](#)

Customer Service

- 1-800-933-6593
- 7:30 a.m. - 5:30 p.m.
Monday - Friday

DXC Technology is the fiscal agent of KMAP.