











DECEMBER 2024

KMAP GENERAL BULLETIN 24216

Allowance for Pulmonary Rehabilitation Services Update

Effective with dates of service retroactive to January 1, 2023, Outpatient Pulmonary Rehabilitation services will be covered when billed by a hospital as both the billing and rendering Provider. The Provider Type/Provider Specialties (PT/PS) allowed are 01/010 and 01/012.

The criteria for appropriate billing remains the same. Outpatient Pulmonary Rehabilitation services and rates are as follows:

Code	Medicaid Rate Prior to August 1, 2024	Medicaid Rate Effective August 1, 2024
94625	\$13.71	\$43.22
94626	\$20.18	\$47.20

Note: The rates noted in this bulletin are subject to future changes. Providers should check the Kansas Medical Assistance Program (KMAP) website for the most up-to-date rates.

Note: The effective date of the policy is January 1, 2023. The implementation of State policy by the KanCare Managed Care Organizations (MCOs) may vary from the date noted in the KMAP bulletins. The **KanCare Open Claims Resolution Log** on the KMAP <u>Bulletins</u> 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

For the changes resulting from this provider bulletin, view the updated *Hospital Fee-for-Service Provider Manual*, Section 8400, pages 8-36 – 8-37; and *Professional Fee-for-Service Provider Manual*, Section 8400, page 8-60.