

MAY 2026

KMAP GENERAL BULLETIN 26097

HCBS Self-Directed Enhanced Care Services

Effective with dates of service on or after July 1, 2026, Home and Community Based Services (HCBS) Enhanced Care Services (ECS) that are self-directed shall be authorized and billed solely as:

Code	Waiver
T2025 U1	Intellectual/Developmentally Disabled (IDD)
T2025 U2	Frail and Elderly (FE)
T2025 U3	Brain Injury (BI)
T2025 U5	Physical Disability (PD)

- Providers delivering Self-Directed Enhanced Care Services must enroll under Provider Type **55** with Provider Specialty **530**.
- Existing providers will be required to align with this specialty at the time of revalidation or when submitting updates to their enrollment.

Note: The effective date of the policy is July 1, 2026. 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

For changes resulting from this bulletin, view the updated *HCBS BI Fee-for-Service Provider Manual*, page 7-4; *HCBS FE Fee-for-Service Provider Manual*, page 7-2; *HCBS IDD Fee-for-Service Provider Manual*, page 7-2; *HCBS PD Fee-for-Service Provider Manual*, page 7-2; and the Coding Modifiers Table, page 21.