as EDI filings in production status using the IAIABC's release 3 national standard shall convert to release 3.1 and shall be in production status by the implementation date. (Authorized by K.S.A. 44-573 and K.S.A. 74-717; implementing K.S.A. 2018 Supp. 44-550b, K.S.A. 2018 Supp. 44-557, K.S.A. 2018 Supp. 44-557a, and K.S.A. 74-716; effective Jan. 1, 2004; amended June 17, 2005; amended Feb. 8, 2013; amended, T-51-11-15-18, Nov. 15, 2018.)

Larry Karns
Executive Director

Doc. No. 046761

State of Kansas

Department of Health and Environment

Permanent Administrative Regulation

Article 4.—MATERNAL AND CHILD HEALTH

28-4-503. Timing of specimen collections. (a) The initial specimen from each infant born in an institution shall be obtained as follows:

(1) (A) When the infant is at least 24 hours of age but less than 48 hours of age; or

(B) if the infant is discharged from the institution of birth before 24 hours of age, before the infant is discharged;

(2) before the infant is transferred from the institution of birth to another institution; and

(3) before the infant receives any blood transfusion.

(b) The initial specimen from each infant born outside of an institution shall be obtained as follows:

(1) When the infant is at least 24 hours of age but less than 48 hours of age; and

(2) before the infant receives any blood transfusion.

(c) A repeat specimen shall be obtained from each infant born in an institution or outside of an institution under any of the following conditions:

(1) The specimen is unsatisfactory as specified in K.A.R. 28-4-505.

(2) Follow-up recommendations have been issued by the department.

(3) The infant is less than 24 hours old when the initial specimen is taken. (Authorized by K.S.A. 65-101 and K.S.A. 65-180; implementing K.S.A. 65-180 and K.S.A. 65-181; effective, T-87-48, Dec. 19, 1986; effective May 1, 1987; amended April 14, 2000; amended Dec. 3, 2010; amended Dec. 7, 2018.)

Jeff Andersen
Secretary

Doc. No. 046750

State of Kansas

Department of Health and Environment

Permanent Administrative Regulation

Article 70.—CANCER REGISTRY

28-70-2. Reporting requirements. (a)(1) Each administrator of a hospital, an ambulatory surgery center, a radiology oncology center, or a pathology laboratory shall, within six months of the date of diagnosis, report to the registry each case of cancer diagnosed or treated, unless exempted under subsection (d).

(2) Each report shall provide all required information available in the medical or administrative records that are under the direct control of the reporting administrator. No administrator shall be required to contact the patient, the patient's family, or another health care provider to obtain additional information not contained in the medical or administrative records.

(b) Each person who is either licensed to practice medicine and surgery or licensed to practice dentistry and who practices in a clinic or physician's office and each administrator of a hospice or adult care home shall provide the following to the registry:

(1) If used to confirm each cancer diagnosis, a list of in-state and out-of-state pathologists, or pathology laboratories and dermatopathologists; and

(2) for each patient for whom a cancer diagnosis has been confirmed pathologically or clinically, a list that includes the name, social security number, date of birth, and cancer site. The social security number shall be used only for confirmation of patient identity.

(c) Upon receipt of any written request for information from the registry regarding a patient, each reporting party specified in subsection (a) or (b) shall provide the requested information that is contained in medical or administrative records under the direct control of the reporting party. The requested information may consist of either of the following:

(1) Any information specified in subsection (e), even if the patient's cancer has not been diagnosed or treated by the hospice or adult care home or by the health care provider or licensee specified in subsection (a) or (b); or

(2) annual follow-up information, including tumor recurrence and follow-up treatment.

(d) The reports specified in this regulation shall not be required for the following types of cancer:

(1) Squamous cell carcinoma of the skin, unless located on a lip of the face or in the genital area or unless spread beyond local tissues at the time of diagnosis;

(2) basal cell carcinoma of the skin, unless located on a lip of the face or in the genital areas or unless spread beyond local tissues at the time of diagnosis; and

(3) carcinoma in situ of the uterine cervix.

(e) Each report from any reporting party specified in subsection (a) or (b) shall include the following information, if available:

(1) Patient identifiers and demographics;

(2) cancer screening history;

(3) cancer diagnosis, including the cancer site and histology;

(4) personal and family history;

(5) vital status, including the date of death and cause of death, if applicable;

(6) cancer-related treatment information;

(7) follow-up information, including the date of last contact with the patient; and

(8) third-party payer information; and

(9) risk factors for cancer.

(continued)