

**Charitable Health Care Provider Annual Reporting Form**

Note: Charitable Health Care Providers may choose to provide their care through a point of entry. If providing care through a point of entry, the individual provider does not need to file an annual report so long as the point of entry through which care is provided does so.

If you are not providing your services as a charitable health care provider through a point of entry, you must provide the appropriate data below and fax it to Angela German at 785-296-1231 or email to [agerman@kdheks.gov](mailto:agerman@kdheks.gov) by March 31<sup>st</sup> of each year.

**Annual reports are due by *March 31<sup>st</sup>* for the previous calendar year. Failure to submit an annual report will result in termination of your agreement with the Secretary of the Kansas Department of Health and Environment to serve as a charitable health care provider.**

Charitable Health Care Provider Name:

Data provided for year:

\_\_\_\_\_

20\_\_\_\_\_

1. Total number of uninsured patients earning below 200 percent of the federal poverty level seen at no charge by the charitable health care provider.

\_\_\_\_\_

2. Total number of patients with public insurance seen at no charge by the charitable health care provider.

\_\_\_\_\_

\_\_\_\_\_  
Authorized Signature

\_\_\_\_\_  
Date

**If a charitable provider is sued by the recipient of his or her charitable care, they must request representation from the state in writing within 15 days after service of process or subpoena (KSA 75-6108(e)). Charitable providers served with a summons or petition should immediately contact the Attorney General's office at 785-296-2215.**

**Please return to:** Charitable Health Care Provider Program  
Kansas Department of Health and Environment  
Bureau of Community Health Systems  
1000 SW Jackson, Suite 340  
Topeka, KS 66612  
FAX: 785-296-1231