

Arkansas Department of Health and Human Services



Division of Medical Services

P.O. Box 1437, Slot S-295 Little Rock, AR 72203-1437

Fax: 501-682-2480 TDD: 501-682-6789 & 1-877-708-8191 Internet Website: www.medicaid.state.ar.us

TO: Arkansas Medicaid Health Care Providers

DATE: June 1, 2006

SUBJECT: PROPOSED - Provider Manual Update Transmittal

Provider Manual	Transmittal Number
Alternatives for Adults with Physical Disabilities Waiver	34
Ambulatory Surgical Center	65
ARKids First-B	31
Certified Nurse-Midwife	70
Child Health Management Services	68
Child Health Services/Early and Periodic Screening, Diagnosis and Treatment	74
Children's Medical Services Targeted Case Management	20
Chiropractic	63
DDS Alternative Community Services Waiver	61
Dental	86
Developmental Day Treatment Clinic Services	70
Developmental Rehabilitation Services	20
Division of Youth Services and Division of Children and Family Services	
Targeted Case Management	
Domiciliary Care	
ElderChoices Home and Community-Based 2176 Waiver	
Federally Qualified Health Center	
Hearing Services	
Home Health	
Hospice	
Hospital/End-Stage Renal Disease	
Hyperalimentation	
Inpatient Psychiatric Services for Under Age 21	
Licensed Mental Health Practitioners	
Living Choices Assisted Living	
Medicare/Medicaid Crossover Only	
Nurse Practitioner	
Occupational, Physical, Speech Therapy Services	
Personal Care	72

Provider Manual	Transmittal Number
Pharmacy	85
Physician/Independent Lab/CRNA/Radiation Therapy Center	113
Podiatrist	65
Portable X-Ray Services	54
Private Duty Nursing Services	
Prosthetics	77
Rehabilitative Hospital	62
Rehabilitative Services for Persons with Mental Illness	67
Rehabilitative Services for Persons with Physical Disabilities	40
Rehabilitative Services for Youth and Children	
Rural Health Clinic Services	57
School-Based Mental Health Services	25
Targeted Case Management	58
Transportation	77
Ventilator Equipment	
Visual Care	73

<u>REMOVE</u>		<u>INSERT</u>	
Section	Date	Section	Date
171.000	7-1-05	171.000	6-1-06
171.100	7-1-05	171.100	6-1-06
171.130	7-1-05	171.130	6-1-06
171.320	7-1-05	171.320	6-1-06

Explanation of Updates

Section 171.100 adds an exemption from the Primary Care Case Management (PCCM) Program for those physicians who practice exclusively in Area Health Education Centers and Federally Qualified Health Centers and includes a style guide change.

Section 171.130 is revised to allow physicians who customarily carry a caseload of patients who are 21 years of age or older to refer patients for ESPDT screens rather than having to furnish the screens themselves.

Section 171.320 is revised to advise PCPs that the EPSDT screening schedule recommended by the American Academy of Pediatrics can be found in the Child Health Services manual.

Paper versions of this update transmittal have updated pages attached to file in your provider manual. See Section I for instructions on updating the paper version of the manual. For electronic versions, these changes have already been incorporated.

If you need this material in an alternative format, such as large print, please contact our Americans with Disabilities Act Coordinator at (501) 682-6789 or 1-877-708-8191. Both telephone numbers are voice and TDD.

Arkansas Medicaid Health Care Providers Section I Update Transmittal Page 3

If you have questions regarding this transmittal, please contact the EDS Provider Assistance Center at 1-800-457-4454 (Toll-Free) within Arkansas or locally and Out-of-State at (501) 376-2211.

Arkansas Medicaid provider manuals (including update transmittals), official notices and remittance advice (RA) messages are available for downloading from the Arkansas Medicaid website: www.medicaid.state.ar.us.

Thank you for your participation in the Arkansas Medicaid Program.

Roy Jeffus, Director		

71.000	Primary	/ Care	Phy	vsician	Partici	pation

6-1-06

171.100 PCP-Qualified Physicians and Single-Entity Providers

6-1-06

- A. Obstetricians and gynecologists may choose whether or not to be PCPs.
- B. All other PCP-qualified physicians and clinics must enroll as PCPs, except for physicians who certify in writing that they are employed exclusively by an Area Health Education Center (AHEC), a Federally Qualified Health Center (FQHC), a Medical College Physicians Group, or a hospital (i.e., they are "hospitalists").
- C. PCP-qualified physicians are those whose sole or primary specialty is
 - 1. Family Practice
 - 2. General Practice
 - 3. Internal Medicine
 - 4. Obstetrics and gynecology
 - 5. Pediatrics and Adolescent Medicine
- D. Physicians with multiple specialties may elect to enroll as PCPs if a secondary or tertiary specialty in their Medicaid provider file is listed in part C above.
- E. PCP-qualified clinics and health centers (single-entity PCPs) are
 - 1. AHECs
 - 2. FQHCs
 - 3. The family practice and internal medicine clinics at the University of Arkansas for Medical Sciences

171.130 EPSDT Agreement Requirement

6-1-06

- A. A PCP applicant must sign an agreement to participate as a screening provider in the Child Health Services (EPSDT) Program.
- B. Internists, obstetricians, gynecologists, and physicians who customarily carry a caseload of patients who are 21 years of age or older are not required to furnish EPSDT screens.
 - 1. Their participation in the Child Health Services (EPSDT) Program is optional.
 - 2. They must, however, sign Child Health Services (EPSDT agreements if they elect to be screening providers.
- C. PCP-qualified single-entity providers must execute Child Health Services (EPSDT) agreements.

171.320 Child Health Services (EPSDT) Requirements

6-1-06

- A. A PCP must monitor and maintain the Child Health Services (EPSDT) screening periodicity of each of his or her enrollees under the age of 21, regardless of who screens those enrollees. The periodic EPSDT screening schedule recommended by the American Academy of Pediatrics can be found in section 215.100 of the Child Health Services/Early and Periodic Screening, Diagnosis and Treatment manual.
- B. A PCP may refer his or her enrollees to other providers for EPSDT screens and related lab work.
 - 1. Screening providers must report the results to the referring PCP.
 - 2. The PCP must coordinate and monitor subsequent referrals, treatment or testing.