ARKANSAS REGISTER



Transmittal Sheet

Use only for FINAL and EMERGENCY RULES

Secretary of State Mark Martin

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For Office		
Use Only: Effective Date	Code Number	
Name of Agency		
Department		
Contact	_E-mailPhone	
Statutory Authority for Promulgating Rule	es	
Rule Title:		
Intended Effective Date		Date
Emergency (ACA 25-15-204)	Legal Notice Published	
10 Days After Filing (ACA 25-15-204)	Final Date for Public Comment	
Other(Must be more than 10 days after filing date.)	Reviewed by Legislative Council	
	Adopted by State Agency	
Electronic Copy of Rule e-mailed from: (Require	d under ACA 25-15-218)	
Contact Person	E-mail Address	Date
CERTIFICATION	ON OF AUTHORIZED OFFICER	
	fy That The Attached Rules Were Adopted kansas Administrative Act. (ACA 25-15-201 et. seq.)	
in comphance with the Ar	kansas Auninnistrativė Act. (ACA 23-13-201 et. seų.)	
	Signature	
Phone Number	E-mail Address	
	Title	
	Date	

NOTICE OF RULE MAKING

The Director of the Division of Medical Services hereby issues the following proposed medical assistance rule(s) under one or more of the following chapters or sections of the Arkansas Code: 20-10-211(a), 20-10-203(b), 20-76-433, 25-10-129, and Title 20, Chapter 77.

Effective for dates of service on or after April 1,2018; four primary care visits per state fiscal year to a hospital based walk-in or emergent care clinic will no longer require a primary care provider referral, for a beneficiary who currently does not have a primary care physician. All existing benefit limits apply.

The proposed policy is available for review at the Division of Medical Services, Program Planning and Development, 2nd floor Donaghey Plaza South Building, 7th and Main Streets, P. O. Box 1437, Slot S295, Little Rock, Arkansas 72203-1437. You may also access it on the Medicaid website (www.medicaid.state.ar.us), and download it from the "Proposed Rules For Public Comment" section of the website's *General* menu. Policy accessed from this location will be watermarked with the word "Proposed". All comments must be submitted, to the above address, in writing no later than February 8, 2018

If you need this material in a different format, such as large print, contact Program Development and Quality Assurance at 501-320-6429.

The Arkansas Department of Human Services is in compliance with Titles VI and VII of the Civil Rights Act and is operated, managed and delivers services without regard to religion, disability, political affiliation, veteran status, age, race, color or national origin. **EL4501731051**

Rose M. Naff, Director Division of Medical Services

Date: January 8, 2018

SUMMARY FOR FOUR VISIT-NO REFERRALS

Effective for dates of service on or after April 1, 2018 four primary care visits per state fiscal year to a hospital based walk-in clinic or hospital based emergent care center will no longer require a referral from a primary care physician; if the beneficiary has not yet been assigned a primary care physician. These visits still count toward existing benefit limits.

TOC not required

170.100 Introduction 2-1-174-1-

Arkansas Medicaid's Primary Care Case Management (PCCM) Program, ConnectCare, operates statewide under the authority of the Medicaid State Plan.

- A. Most Medicaid beneficiaries and all ARKids First-B participants must enroll with a primary care physician (PCP), also known as a primary care case manager (PCCM).
 - 1. PCPs provide primary care services and health education.
 - 2. PCPs make referrals for medically necessary specialty physician's services, hospital care and other services.
 - 3. PCPs assist their enrollees with locating medical services.
 - 4. PCPs coordinate and monitor their enrollees' prescribed medical and rehabilitation services.
- B. Medicaid enrollees may receive services only from their PCP unless their PCP refers them to another provider, or unless they access a service that does not require a PCP referral.
- C. If a beneficiary does not have a primary care provider, Arkansas Medicaid will allow up to four (4) visits per state fiscal year without a Primary Care Physician (PCP) referral to a hospital affiliated Walk-in Clinic or Emergent Clinic.
- D. These visits apply to all related benefit limits.