

Statement of Necessity and Rule Summary
ARKids-4-18, Domiciliary Care-1-18, Section I-5-18, Section III-4-18, and
State Plan Amendment #2019-001

Why is this change necessary? Please provide the circumstances that necessitate the change.

A Domiciliary Care claims report dated 12/5/18 indicated that Medicaid does not have any active providers currently enrolled. Because this optional program is not routinely used through Medicaid, the Division of Medical Services (DMS) has determined that it should be removed from the Arkansas Medicaid State Plan and all corresponding rules, regulations and policy rescinded as of 12/1/19.

What is the change? Please provide a summary of the change.

The proposed effective date for these rules is 12/1/19. The rules revisions will be as follows:

- Remove the optional Domiciliary Care service from the Arkansas Medicaid State Plan
- Remove the optional Domiciliary Care service from Sections I and III of all Arkansas Medicaid manuals (these sections appear in every Arkansas Medicaid manual)
- Remove the optional Domiciliary Care service from the ARKids Manual
- Repeal the Domiciliary Care Manual in its entirety
- Updating program names

This draft is a working document. All information contained herein is subject to change and may differ substantially from the final document. The information contained in this document should not be considered the position or views of the agency or the Governor.

TOC not required

332.000 Patients With Joint Medicare-Medicaid Coverage

~~44-4-1712-~~
1-19

The following provider types accept Medicare-Medicaid Crossovers: Ambulatory Surgical Center, Chiropractic, Clinics, Dental, ~~Domiciliary Care~~, Family Planning, Federally Qualified Health Center, Health Department, Hearing Services, Hemodialysis, Home Health, Hospital, Hyperalimentation, Independent Laboratory, Independent Radiology, Inpatient Psychiatric Services for Under Age 21, Nurse Practitioner, Nursing Home, Occupational, Physical and Speech-~~Language~~ Therapy Services, Physician, Podiatrist, Prosthetics, Rehabilitation Center, ~~Rehabilitative Services for Persons with Mental Illness~~, Rural Health Clinic Services, Transportation, Ventilator Equipment and Visual Care.

Claim filing procedures for these provider types are in Sections 332.100 through 332.300.