ARKANSAS REGISTER



Transmittal Sheet

Use only for **FINAL** and **EMERGENCY RULES**

Secretary of State

John Thurston

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For Office		
Use Only: Effective Date	Code Number	
Name of Agency Department of Human	Services	
Department Division of Medical Service	es	
Contact Alexandra Rouse	E-mail_Alexandra.Rouse@dhs.arkansas.gov_Phone_501-508-8875	
	Arkansas Code Annotated 20-76-201	
Rule Title: SPA #2020-0005 V	accine Administration Fee Rate Increase	9
Intended Effective Date		Date
(Check One) Emergency (ACA 25-15-204)	Legal Notice Published	04/12/2020
		05/11/2020
10 Days After Filing (ACA 25-15-204)	Final Date for Public Comment	
Other 07/01/2020 [Must be more than 10 days after filing date.]	Reviewed by Legislative Council	06/19/2020
,	Adopted by State Agency	07/01/2020
Electronic Copy of Rule e-mailed from: (Require	d under ACA 25-15-218)	
Renita Whitley Renita.W	/hitley@dhs.arkansas.gov 0	6/19/2020
Contact Person	E-mail Address	Date
CERTIFICATION	ON OF AUTHORIZED OFFICER	
	y That The Attached Rules Were Adopted	
In Compliance with the Ar.	kansas Administrative Act. (ACA 25-15-201 et. seq.)	
	and Man Signature	
501-320-6270	Janet.Mann@dhs.arkansas.gov	
Phone Number	E-mail Address	
-	Director	
	Title 06/19/2020	
-	Date	

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT MEDICAL ASSISTANCE PROGRAM STATE ARKANSAS

ATTACHMENT 4.19-B Page 2.1

METHODS AND STANDARDS FOR ESTABLISHING PAYMENT RATES - OTHER TYPES OF CARE

Revised: July 1, 2020

5. Physician Services

Effective for dates of service on or after July 1, 2020, the immunization administration fee for influenza will be based on the 2020 Medicare flu vaccine administration fee. All other immunization administration fees will be based on Medicare's 2020 physician fee schedule for the State of Arkansas. The rate is paid to all governmental and non-governmental providers, unless otherwise specified in the state plan. All rates are published at the agency's website, (http://medicaid.mmis.arkansas.gov/).