



# Arkansas Department of Human Services

## Division of County Operations

Donaghey Plaza South  
P.O. Box 1437  
Little Rock, Arkansas 72203-1437  
TDD (501) 682-8275

016.20.100 -- 008

The Honorable Sharon Priest  
Secretary of State  
State Capitol Room 017  
Little Rock, AR 72201-1094

Re: Emergency Promulgation – MSP 2330-2348.3 Revision of ARKids Policy

Dear Ms. Priest:

Pursuant to Arkansas Code 20-76-201 et Seq., ARK. Code Ann. 20-15-201, et Seq., Ark. Code Ann. 9-10-120 & Act 849 of 1999, we are requesting an emergency promulgation of the attached rule that revises the guidelines for ARKids First Policy.

Act 849 of March 24, 1999, renews funding for ARKids First and revises the definition of uninsured to be less restrictive. The revision allows children with non-group and non-employer sponsored health insurance to be eligible for ARKids and also changes the look back period for dropping insurance from 1 year to 6 months. This change required approval from HCFA; we received approval on February 28, 2000.

With the changes in the eligibility criteria, the potential exists for many more children becoming eligible for ARKids First coverage. It is possible that some children could be excluded from the ARKids benefits due to failure to immediately implement these new guidelines.

Sincerely,

Ruth Whitney  
Director

RW:LG:JT:cb

Attachments

cc: Files

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AR. REGISTER DIV.  
00 MAR 31 AM 10:14  
SHARON PRIEST  
SECRETARY OF STATE  
STATE OF ARKANSAS  
BY \_\_\_\_\_

# ARKANSAS REGISTER

## Transmittal Sheet



Sharon Priest  
Secretary of State  
State Capitol Rm. 026  
Little Rock, Arkansas 72201-1094

For Office  
Use Only: Effective Date \_\_\_\_\_ Code Number 016,20.00-008

Name of Agency \_\_\_\_\_ Department of Human Services

Department \_\_\_\_\_ Division of County Operations

Contact Person \_\_\_\_\_ Linda Greer (501) 682-8257

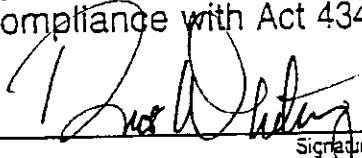
AR code Ann. 20-76-201 et seq., AR Code Ann. 20-15-201 et seq.,

Statutory Authority for Promulgating Rules \_\_\_\_\_ AR Code Ann. 9-10-120.  
~~& Act 849 of 1999.~~

	Date
Intended Effective Date	
<input checked="" type="checkbox"/> Emergency	Legal Notice Published . . . . .
<input type="checkbox"/> 10 Days After Filing	Final Date for Public Comment . . . . .
<input type="checkbox"/> Other	Reviewed by Legislative Council . . . . .
	Adopted by State Agency . . . . . 03/31/00

### CERTIFICATION OF AUTHORIZED OFFICER

I Hereby Certify That The Attached Rules Were Adopted  
In Compliance with Act 434 of 1967 As Amended.

  
\_\_\_\_\_  
Signature

Director, Division of County Operation  
(501) 682-8375  
\_\_\_\_\_  
Phone Number

\_\_\_\_\_  
Title

8/19/00  
\_\_\_\_\_  
Date

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STATE OF ARKANSAS

# MANUAL TRANSMITTAL

## Arkansas Department of Human Services

### Division of County Operations

☒ Policy ☐ Form ☐ Policy Directive

Issuance Number MS-00-7

Medical Services Policy Manual

Issuance Date 3-22-00

From: Ruth Whitney, Director

Expiration Date Until  
Superseded

Subj: New and Revised Policy

<u>Pages to be Deleted</u>	<u>Dated</u>	<u>Pages to be Added</u>	<u>Dated</u>
MS 2330 - 2342	09/01/97	MS 2330 - 2341	04/01/00
MS 2343 - 2343.2	09/01/97	MS 2342 - 2343.2	09/01/97
MS 2344 - 2348.1	09/01/97	MS 2343.2 - 2348.1	09/01/97
MS 2348.1 - 2348.3	09/01/97	MS 2348.1 - 2348.3	09/01/97

#### Summary of Changes

Effective 04/01/00, ARKids First Policy has been revised to change the look back period for dropping Health Insurance from 1 year to 6 months. This change also allows children receiving health insurance under a non-group and/or non-employer based plan, eligibility under ARKids First.

Inquiries to: Jack Tiner, 501-682-8259  
Diana Teal, 501-682-1562  
Carmen Brown, 501-682-8258  
Lisa Manceiri, 501-682-8254

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Standard of Need: In determining ARKids First eligibility, parents will be included in the need standard with their natural or adoptive children. Normally, all of the full siblings in the household will be included in the budget with their natural or adoptive parents. However, a parent or other relative may choose to exclude a child and that child's income from a case budget if inclusion of that child and the child's income would cause ineligibility for the other children. Children may be excluded for other reasons, and the parent or relative who applies need not state the reason. An unborn child of a PW will not be counted in the standard of need.

9. Resources: No resource test exists for the ARKids First category.

\* 10. Health Insurance: Children who are covered, or who have been covered by primary comprehensive health insurance (as defined in item c. below), other than Medicaid, within the 6 months preceding the date of application will not be eligible for services in the ARKids First category unless one of the conditions below is met:

- a) The health insurance is a non-group or non-employer sponsored plan.
- b) The health insurance was lost through termination of employment for any reason or through no fault of the applicant. For example, health insurance is lost through no fault of the applicant if the employer ceases to provide employer sponsored health insurance.
- c) The health insurance is not primary comprehensive. Primary comprehensive health insurance is defined as insurance that covers both physician and hospital charges.
- d) The health insurance coverage is available to a child through a person other than the child's custodial adult and is determined to be inaccessible (e.g., the absent parent lives out of the state and covers the child on his or her HMO which the child cannot access due to distance). This determination will be made on a case-by-case basis by the ARKids First worker based on information provided by the applicant.

If a parent or guardian voluntarily terminates insurance for a reason other than listed above within the 6 months preceding application, his or her children will be ineligible.

The Central Office Eligibility Unit will accept the applicant's declaration regarding his or her health insurance coverage, unless they are claiming one of the above exceptions or the worker has contradictory information or the applicant's circumstances make the declaration questionable (e.g., the applicant reports earnings from an employer who customarily provides group health insurance).

2340 Application Process

2341 Right to Apply

All individuals who wish to apply will be given the opportunity to do so without delay. No application or inquiry will be ignored. The Agency has the responsibility to follow up on any request for medical assistance and to make arrangements for completion of the application.

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 OFFICE OF ARKANSAS

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STATE OF ARKANSAS  
BY \_\_\_\_\_

DEPARTMENT of Human Services

DIVISION of County Operations

PERSON COMPLETING THIS STATEMENT Linda Greer, Acting Assistant Director

Office of Program Planning & Development

TELEPHONE: 682-8257

FAX NO. 682-1597

### FINANCIAL IMPACT STATEMENT

To comply with Act 884 of 1995, please complete the following Financial Impact Statement and file with the questionnaire and proposed rules.

SHORT TITLE OF THIS RULE – ARKids First - change in health insurance rule.

1. Does this proposed, amended, or repealed rule or regulation have a financial impact?  
Yes.
2. If you believe that the development of a financial impact statement is so speculative as to be cost prohibited, please explain.  
Not Applicable
3. If the purpose of this rule or regulation is to implement a federal rule or regulation, please give the incremental cost for implementing the regulation. Not Applicable

#### 1999-2000 Fiscal Year

#### 2000-2001 Fiscal Year

General Revenue  
Federal Funds  
Cash Funds  
Special Revenue  
Other  
Total

General Revenue  
Federal Funds  
Cash Funds  
Special Revenue  
Other  
Total

4. What is the total estimated cost by fiscal year to any party subject to the proposed, amended, or repealed rule or regulation?

#### 1999-2000 Fiscal Year

None

#### 2000-2001 Fiscal Year

None

5. What is the total estimated cost by fiscal year to the agency to implement this regulation?

#### 1999-2000 Fiscal Year

\$25,200.00

#### 2000-2001 Fiscal Year

\$478,800.00