

# ARKANSAS REGISTER

## Transmittal Sheet



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

For Office Use Only: Effective Date 7/1/00 Code Number 016.20.00 - 013

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.

Intended Effective Date

☐ Emergency

☒ 10 Days After Filing

☐ Other

Legal Notice Published . . . . . 4-15-00

Final Date for Public Comment . . . . . 5-14-00

Reviewed by Legislative Council . . . . .

Adopted by State Agency . . . . . 06-01-00

### CERTIFICATION OF AUTHORIZED OFFICER

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

[Signature]  
Signature

(501) 682-8375  
Phone Number

Director, Division of County Operations  
Title

4/4/00  
Date

FILED  
AR. REGISTER DIV.  
00 MAY 22 PM 3:59  
SHARON PRIEST  
SECRETARY OF STATE  
STATE OF ARKANSAS

46

# 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Superseded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

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.

DEPARTMENT of Human Services  
DIVISION of County Operations

**FILED**  
AR. REGISTER DIV.

PERSON COMPLETING THIS STATEMENT Linda Greer, Acting Assistant Director  
Office of Program Planning & Development

TELEPHONE: 682-8257

FAX NO. 682-1597  
SEASON PRIEST  
CLERK OF STATE  
STATE OF ARKANSAS

**FINANCIAL IMPACT STATEMENT** BY \_\_\_\_\_

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

NOTICE

OF  
RULEMAKING

Pursuant to Arkansas Code Annotated 20-76-201 et Seq., Arkansas Code Annotated 20-15-201 et Seq., and Arkansas Code Annotated 9-10-120, the Director, Division of County Operations, issues proposed changes to the Medical Services Policy Manual to revise the ARKids policy to comply with Act 849 of 1999, allowing eligibility for children with non-group or non-employer sponsored health insurance. The proposed rule also changes the look back period for dropping insurance from 12 to 6 months.

Copies of the proposed change may be obtained by writing the Division of County Operations, P.O. Box 1437, Slot 1220, Little Rock, AR 72203, Attention: Office of Program Planning & Development. All comments must be submitted in writing to the address indicated above no later than 30 days from the date of this notice.

If you need this material in a different format, such as large print, contact our Americans with Disabilities Act Coordinator at 682-8920 (voice) or 682-8933 (TDD).

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

/s/Ruth Whitney  
Director, Division of County Operations  
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