ARKANSAS REGISTER



Transmittal Sheet

Mark Martin Secretary of State State Capitol Room 026 Little Rock, Arkansas 72201-1094 (501) 682-3527

For Office Use Only: Effective Date	Code Number 016.23.12-001
Name of Agency: Department of Human Service	es ·
Department: Division of Behavioral Health	
Contact: Charlotte Carlson E-mail: charlotte	e.carlson@arkansas.gov Phone: 501-683-6903
Statutory Authority for Promulgating Rule: AR	Code Ann.
Rule Title: Rehabilitative Services for Perso Amendment 3	ns with Mental Illness (RSPMI) Provider Certification
Intended Effective Date	Date
☐ Emergency	Legal Notice Published
□ 30 Days After Filing	Final Date for Public Comment 10/16/12
Other	Reviewed by Legislative Council
	Adopted by State-Agency <u>01/01/13</u>
☑ Electronic Copy of Rule Provided (per Act 1478 of 20	03)
CERTIFICATION	DF AUTHORIZED OFFICER The Attached Rules Were Adopted
	Act 434 of 1967 As Amended
Cur	E & E
501- Phone Number	Signature jennifer.gallaher@arkansas.gov E-mail Address
Director, Division	of Behavioral Health Services Title Date

FINANCIAL IMPACT STATEMENT

PLEASE ANSWER ALL QUESTIONS COMPLETELY

DEPARTMENT <u>Department of Human Services</u>
DIVISION <u>Division of Behavioral Health Services</u>
PERSON COMPLETING THIS STATEMENT <u>Charlotte Carlson</u>
TELEPHONE NO. <u>683-6903</u> FAX NO. <u>686-9182</u> EMAIL: charlotte.carlson@arkanas.gov

To comply with Act 1104 of 1995, please complete the following Financial Impact Statement and file two copies with the questionnaire and proposed rules.

SHORT TITLE OF THIS RULE – Rehabilitative Services for Persons with Mental Illness (RSPMI) Provider Certification Amendment 3

Yes No <u>X</u> .	
Does this proposed, amended, or repealed Yes NoX	rule affect small businesses?
If yes, please attach a copy of the economic Arkansas Economic Development Commi	ic impact statement required to be filed with the ssion under Arkansas Code § 25-15-301 et seq
If you believe that the development of a fir prohibited, please explain.	nancial impact statement is so speculative as to
If the purpose of this rule is to implement a f for implementing the rule. Please indicate if	ederal rule or regulation, please give the increment the cost provided is the cost of the program.
Current Fiscal Year	Next Fiscal Year
General Revenue	General Revenue
Federal Funds	Federal Funds
Cash Funds	Cash Funds
Special Revenue	Special Revenue
Other (Identify)	Other (Identify)
Total	Total
What is the total estimated cost by fiscal ye epealed rule? Identify the party subject to	ear to any party subject to the proposed, amend the proposed rule and explain how they are af
Current Fiscal Year	Next Fiscal Year
What is the total estimated cost by fiscal years of the superpose and 2 Places are left.	ear to the agency to implement this rule? Is thin.
cost of the program or grant? Please expla	·

DIVISION OF BEHAVIORAL HEALTH SERVICES REHABILITATION SERVICES FOR PERSONS WITH MENTAL ILLNESS PROVIDER CERTIFICATION

AMENDMENT 3

Findings.

- (1) There are over 300 outpatient service sites in the state for the delivery of Rehabilitation Services for Persons With Mental Illness (RSPMI). The Division of Behavioral Health Services has no information that any eligible Medicaid beneficiary experiences difficulty obtaining medically necessary RSPMI care and services.
- (2) Medicaid pays for RSPMI on a fee-for-service basis. Uncontrolled expansion of RSPMI sites will increase provider costs for staff and infrastructure. These inefficiencies will pressure providers to find ways to deliver more services and thereby unnecessarily increase costs to the Arkansas Medicaid Program.
- (3) The Arkansas Medicaid Program projects that there will be insufficient state general revenues available to maintain the current level of Medicaid services beginning in state fiscal year 2014.

 (4) Among other things, the Medicaid Program is seeking ways to improve efficiency, reduce costs, and maximize the use of federal funds as required under Ark. Code Ann. § 25-10-129.
- However, no federal funding incentives are available for the expansion of the RSPMI program. (5) For the above reasons it is necessary that the moratorium on new RSPMI sites remain intact as amended below.

As stated in Section VI of the DBHS RSPMI Certification Rule, DBHS will process all certification requests within ninety calendar days of receiving all information that is necessary to review and process the certification request. DBHS will notify each prospective provider/provider in writing of its determination and furnish a copy to DMS.

- 1. There is a moratorium on the certification of new RSPMI sites. "New site" means any site not certified as an RSPMI site as of October 31, 2008, except:
- (i) Sites for which a pending application was under review by the Division of Behavioral Health Services on October 31, 2008;
- (ii) Replacement sites opened by an existing provider to provide ongoing continuity of RSPMI services when the provider is terminating services at a currently certified and operating RSPMI site;
- (iii) Sites in continuous lawful operation furnishing RSPMI services since May 31, 2008.
- 2. The moratorium shall be in effect until <u>December 31, 2014</u>, unless altered by amendment of this rule.
- 3. If the Director of the Division of Behavioral Health Services determines that the moratorium is causing an undue hardship to persons with mental illness, the Director may authorize a reasonable accommodation. An undue hardship may exist if medically necessary services become unavailable due to closure of a site or an RSPMI provider ceasing operations.

4. This moratorium sh	e TTT/TTN C41	DCDLG C	~ ^ .	1	
in public schools unde	r § III(1) of the	RSPMI Certif	ication Manu	al.	
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