

# ARKANSAS REGISTER

## Transmittal Sheet

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



Secretary of State

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For Office

Use Only:

Effective Date \_\_\_\_\_ Code Number \_\_\_\_\_

Name of Agency Department of Human Services

Department Division of Medical Services

Contact Mac E. Golden E-mail Mac.E.Golden@dhs.arkansas.gov Phone 501.320.6383

Statutory Authority for Promulgating Rules Arkansas Code §§ 20-76-201, 20-77-107, and 25-10-129

Rule Title: Acute Crisis Unit (Rule-164)

Intended Effective Date  
(Check One)

☐ Emergency (ACA 25-15-204)

☒ 10 Days After Filing (ACA 25-15-204)

☐ Other \_\_\_\_\_  
(Must be more than 10 days after filing date.)

Legal Notice Published .....

Final Date for Public Comment .....

Reviewed by Legislative Council .....

Adopted by State Agency .....

Date

10/01/2021

10/30/2021

12/17/2021

03/20/2022

Electronic Copy of Rule e-mailed from: (Required under ACA 25-15-218)

Jack Tiner Jack.Tiner@dhs.arkansas.gov  
Contact Person E-mail Address

March 10, 2022  
Date

### CERTIFICATION OF AUTHORIZED OFFICER

I Hereby Certify That The Attached Rules Were Adopted  
In Compliance with the Arkansas Administrative Act. (ACA 25-15-201 et. seq.)

Signature

501-244-3944

Phone Number

elizabeth.pitman@dhs.arkansas.gov

E-mail Address

Division of Medical Services, Director

Title

March 10, 2022

Date

AMOUNT, DURATION AND SCOPE OF  
SERVICES PROVIDED

July 1, 2021

CATEGORICALLY NEEDY

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1. Inpatient Hospital Services (continued)

**Acute Crisis Unit**

Effective for dates of service on or after July 1, 2021, Hospital Acute Crisis Units are covered for eligible Medicaid clients who are experiencing a psychiatry or substance use disorder, or both, crisis that does not meet the need for inpatient hospitalization. These units provide hospital diversion and step-down services in a safe environment with psychiatry and substance use disorder services available on-site, as well as on-call psychiatry available 24 hours per day. They must ensure the following services are available at a minimum:

- A. ongoing assessment and observation;
- B. crisis intervention;
- C. psychiatric, substance, and co-occurring treatment; and
- D. initiation of referral mechanisms for independent assessment and care planning.

Services are available for up to 96 hours per encounter. Providers must initiate an extension of benefits request for medical necessity approval prior to providing services beyond 96 hours.

This expenditure is being paid as inpatient hospital because the definition of outpatient limits services to less than a 24-hour period. (42 CFR 440.2)

AMOUNT, DURATION AND SCOPE OF  
SERVICES PROVIDED

July 1, 2021

MEDICALLY NEEDY

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1. Inpatient Hospital Services (continued)

**Acute Crisis Unit**

Effective for dates of service on or after July 1, 2021, Hospital Acute Crisis Units are covered for eligible Medicaid clients who are experiencing a psychiatry or substance use disorder, or both, crisis that does not meet the need for inpatient hospitalization. These units provide hospital diversion and step-down services in a safe environment with psychiatry and substance use disorder services available on-site, as well as on-call psychiatry available 24 hours per day. They must ensure the following services are available at a minimum:

- A. ongoing assessment and observation;
- B. crisis intervention;
- C. psychiatric, substance, and co-occurring treatment; and
- D. initiation of referral mechanisms for independent assessment and care planning.

Services are available for up to 96 hours per encounter. Providers must initiate an extension of benefits request for medical necessity approval prior to providing services beyond 96 hours.

This expenditure is being paid as inpatient hospital because the definition of outpatient limits services to less than a 24-hour period. (42 CFR 440.2)

METHODS AND STANDARDS FOR ESTABLISHING PAYMENT RATES -  
INPATIENT HOSPITAL SERVICES

July 1, 2021

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5. Alternative Benefit Plan (ABP)

Effective for dates of service on or after January 1, 2014, the Arkansas Medicaid program will cover inpatient acute hospital days in excess of twenty-four days (during a state fiscal year) for those beneficiaries covered under the Alternative Benefit Plan (ABP). The per diem rate for ABP inpatient acute hospital days twenty-five and above will be 400 dollars per day. The intent of the policy change is to increase access to care in all hospitals in the state of Arkansas. Inpatient Acute hospital days under twenty-five will be reimbursed in accordance with the methodology set forth in Attachment 4.19A page 1. Except as otherwise noted in the Plan, this rate is the same for both governmental and private providers of inpatient acute hospital services.

Effective for dates of service on or after January 1, 2014, the Arkansas Medicaid program will cover inpatient rehabilitation hospital days in excess of twenty-four days (during a state fiscal year) for those beneficiaries covered under the Alternative Benefit Plan (ABP). The per diem rate for ABP inpatient rehabilitation hospital days twenty-five and above will be 400 dollars per day. The intent of the policy change is to increase access to care in all hospitals in the state of Arkansas. Inpatient rehabilitation hospital days under twenty-five will be reimbursed in accordance with the methodology set forth in Attachment 4.19A page 9a. Except as otherwise noted in the State Plan, this rate is the same for both government and private providers of inpatient rehabilitation hospital services.

6. Reimbursement for Acute Crisis Units

**Acute Crisis Units provide acute care hospital diversion and step-down services to Medicaid clients experiencing psychiatric or substance use disorder related distress in a safe environment with psychiatry and substance use disorder services available on-site, as well as on-call psychiatry available 24 hours per day. Effective for dates of service on or after July 1, 2021, reimbursement for Acute Crisis Units is based on 80% of the current (7/1/2021) daily rate for the Arkansas State Hospital. No room and board costs, or other unallowable facility costs, are built into the daily rate. State developed fee schedule rates are the same for both governmental and private providers. The fee schedule can be accessed at [Fee Schedules - Arkansas Department of Human Services](#).**

**TOC required****218.400****Acute Crisis Units****3-20-22**

Medicaid covers Acute Crisis Units for all ages of clients who have the ability to benefit from care within the setting. Request for Extension of Benefits based upon medical necessity must be obtained for services extending beyond 96 hours.

**[View billing Instructions for Acute Crisis Unit reimbursement.](#)**

- A. Acute Crisis Units can provide brief crisis treatment services to persons age nineteen (19) years of age or older, who are experiencing a psychiatry- and/or substance abuse-related crisis and may pose an escalated risk of harm to self or others. Acute Crisis Units provide hospital diversion and step-down services in a safe environment. These units provide hospital diversion and step-down services in a safe environment with psychiatry and substance use disorder services available on-site, as well as on-call psychiatry available 24 hours per day.
- B. A Hospital that is operating an Acute Crisis Unit must ensure that, at a minimum, the following services are available:
  - a. Ongoing assessment and observation;
  - b. Crisis intervention;
  - c. Psychiatric, substance, and co-occurring treatment; and
  - d. Referral mechanisms for independent assessment and care planning as needed.
- C. A Hospital that is operating an Acute Crisis Unit can also provide Substance Abuse Detoxification within the Acute Crisis Unit. Substance Abuse Detoxification is a set of interventions aimed at managing acute intoxication and withdrawal from alcohol or other drugs. Services help stabilize beneficiaries by clearing toxins from the beneficiary's body. Services are short-term and may be provided in a crisis unit, inpatient, or outpatient setting, and may include evaluation, observation, medical monitoring, and addiction treatment. Detoxification seeks to minimize the physical harm caused by the abuse of substances and prepares the beneficiary for ongoing treatment.