

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 _____

Contact _____ E-mail _____ Phone _____

Statutory Authority for Promulgating Rules _____

Rule Title: _____

Intended Effective Date

(Check One)

Date

☐

Emergency (ACA 25-15-204)

Legal Notice Published _____

☐

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

Final Date for Public Comment _____

☐

Other _____

(Must be more than 10 days after filing date.)

Reviewed by Legislative Council _____

Adopted by State Agency _____

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

Contact Person

E-mail Address

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

Phone Number

E-mail Address

Title

Date

ARKANSAS LEGISLATIVE COUNCIL

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Senate Co-Chair

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Senate Co-Vice Chair

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Room 315, State Capitol Building
Little Rock, AR 72201

Marty Garrity
Executive Secretary

Tel: 501-682-1937
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June 16, 2022

Ms. Elizabeth Pitman, Director
Arkansas Department of Human Services
Division of Medical Services
P.O. Box 1437, Slot S401
Little Rock, AR 72203-1437

Dear Director Pitman:

This letter is to notify you that, the Executive Subcommittee exercised the power granted to it under Arkansas Code § 10-3-309(d)(2)(B) and ALC Rule 22(f)(2)(B) to review and approve emergency rules in writing on June 16, 2022. The following emergency rule was reviewed and approved, and the review and approval will be effective upon adjournment of the meeting of the Legislative Council, Friday, June 17, 2022:

- ***Department of Human Services – Division of Medical Services (DHS - DMS):
Acute Crisis Units - Hospital Provider Manual.***

A copy of the emergency rule is attached for your information.

Sincerely,

A handwritten signature in black ink, appearing to read "Marty Garrity".

Marty Garrity
Executive Secretary

MG:sla

cc: *(via electronic mail)*

Ms. Cindy Gillespie, Secretary, Department of Human Services
Mr. Mark White, Chief of Staff, Department of Human Services

218.400

Acute Crisis Units

6-16-22

Medicaid covers Acute Crisis Units for all ages of clients who have the ability to benefit from care within the setting. To ensure the safety and age appropriate treatment of all clients, if beds are not physically separated, beds should be grouped by children age four (4) to twelve (12), adolescents age thirteen (13) to eighteen (18) and adults over age eighteen (18) with consideration within those ranges given for developmental functioning. 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 four (4) 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. 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.