

Division of Medical Services P.O. Box 1437, Slot S295, Little Rock, AR 72203-1437 P: 501.682.8292 F: 501.682.1197

MEMORANDUM

TO:	Interested Persons and Providers
FROM:	Elizabeth Pitman, Director, Division of Medical Services
DATE:	February 7, 2024
SUBJ:	Disaster SPA Extension-Workforce Stabilization

As a part of the requirements for Medicaid State Plan submissions, the Division of Medical Services is publishing a notice to extend the attached Disaster Relief State Plan regarding Workforce Stabilization.

Public comments must be submitted in writing at the above address or at the following email address: <u>ORP@dhs.arkansas.gov</u> Please note that public comments submitted in response to this notice are considered public documents. A public comment, including the commenter's name and any personal information contained within the public comment, will be made publicly available and may be seen by various people.

If you have any comments, please submit those comments in writing, no later than March 9, 2023.

All DHS proposed rules, public notices, and recently finalized rules may also be viewed at: <u>Proposed Rules & Public Notices</u>.

NOTICE

The Department of Human Services announces for a public comment period of thirty (30) calendar days an extension of its American Rescue Plan 9817 Spending Plan. In September of 2021, Arkansas Medicaid received approval from the Centers for Medicare and Medicaid Services (CMS) to draw down American Rescue Plan Act funds under Section 9817 of the federal register. In Arkansas's approved ARP 9817 Spending Plan, home and community-based providers could apply and receive specialized Workforce Stabilization funding to retain and recruit direct care staff. Providers who received this funding must expend their allotments by March 31, 2025. This amended disaster spa extends that spending authority until such time for several provider types. Without this extension, certain providers would be barred from spending funds after March 31, 2024, which is the date the current disaster spa is scheduled to end. There is no fiscal impact associated with this extension.

The State Plan Amendment is available for review at the Department of Human Services (DHS) Office of Policy and Rules, 2nd floor Donaghey Plaza South Building, 7th and Main Streets, P.O. Box 1437, Slot S295, Little Rock, Arkansas 72203-1437, or at <u>ar.gov/dhs-proposed-rules</u>. This notice also shall be posted at the local office of the Division of County Operations (DCO) of DHS in every county in the state. Public comments must be submitted in writing at the above address, to the local DCO office, or at the following email address: <u>ORP@dhs.arkansas.gov</u>. All public comments must be received by DHS no later than March 9, 2024. Please note that public comment, including the commenter's name and any personal information contained within the public comment, will be made publicly available and may be seen by various people.

If you need this material in a different format, such as large print, contact the Office of Policy and Rules at 501-320-6428. The Arkansas Department of Human Services is in compliance with Titles VI and VII of the Civil Rights Act and is operated, managed, and delivers services without regard to religion, disability, political affiliation, veteran status, age, race, color, or national origin. 4502172997

> Melissa Weatherton, Director of Specialty Medicaid Services

Section 7 General Provisions

7.4.B Temporary Extension to the Disaster Relief Policies for the COVID-19 National Emergency

Effective May 12, 2023 April 2, 2024, until April 1, 2024 March 31, 2025, the agency temporarily extends the following election(s) of section 7.4 (approved on April 22, 2022, in SPA Number 22-0009) of the state plan:

Section E – Payments

2. _X__ The agency increases payment rates for the following services:

The Workforce Stabilization Incentive Program is from October 1, 2021, to March 31, 20254. As defined in Section 9817 of the American Rescue Plan (ARP) Act of 2021 and in accordance with Appendix B of the State Medicaid Director Letter (SMDL) #21-003

a. _X Payment increases are targeted based on the following criteria:

Private Duty Nursing-Provider type 38	
S9123 and S9124	
Targeted Case Management for AR Choice beneficiaries-Provider type 65	
T1017	
Adult Behavioral Health Services for Community Independent 1915(i) State Plan Amendment, fee for service only, Provider type 26 and 96	
H2017, H0019, H0038, H2032, H0043	
Personal Care-Provider type 97	
T1019 and T1020	
Home Health-Provider type 14/H3	
T1021 and S9131	
Independent Choices-Provider type 87	
Per diem basis	

TN: _AR 23-0011_____ Supersedes TN: _New_____ Approval Date: _____ Effective Date:

05/12/202304/02/2024