Enrollment Application Fee Requirements

The following providers must pay an application fee when revalidating their enrollment in Arkansas Medicaid to comply with the Affordable Care Act (ACA) mandate. Some exceptions apply.

Provider Type (PT)	PT Description	Specialty	Specialty Description
06	Autism	AV	Intensive Intervention (group only)
06	Autism	AZ	Clinical Services Specialist (group only)
11	Skilled Nursing Facility	S5	Skilled Nursing Facility
15	Transportation	TC	Non-Public Transportation
15	Transportation	TD	NET Transportation Broker
24	Early Intervention / Adult Development	AM	AMC-Early Intervention Day Treatment
24	Early Intervention / Adult Development	AN	ADDT-Adult Developmental Day Treatment
24	Early Intervention / Adult Development	AO	EIDT-Early Intervention Day Treatment
25	Psychiatric Facility - Inpatient	WA	Residential Treatment within Inpatient Psychiatric Hospital
26	Rehabilitation Hospital	E3	EPSDT
26	Rehabilitation Hospital	R6	Outpatient Behavioral Health Services
29	Rural Health	E3	EPSDT
37	Ventilator Equipment	V7	Ventilator Equipment
38	Private Duty Nursing	P6	Private Duty Nursing
38	Private Duty Nursing	PF	Private Duty Nursing-School District
45	School-Based Child Health Service Clinic	E3	EPSDT
45	School-Based Child Health Service Clinic	S7	School-Based Child Health Services
46	Targeted Case Management	C6	Case Management Ages 00-20
46	Targeted Case Management	СМ	Targeted Case Management
49	Federally Qualified Health Center	E3	EPSDT
49	Federally Qualified Health Center	F2	Federally Qualified Health Center
51	AR Choices	E5	Adult Family Home
53	AR Choices	E7	Home-Deliver Meals
53	AR Choices	EC	Frozen Home Delivered Meals
54	AR Choices	E8	Personal Emergency Response Systems
55	AR Choices	E9	Adult Day Care
56	AR Choices	EA	Adult Day Health Care
57	AR Choices	EB	Respite
59	School-Based Hearing Screener	S8	School-Based Hearing Screener
60	School-Based Vision Screener	S9	School-Based Vision Screener
61	School-Based Vision and Hearing Screener	E3	EPSDT

rovider Type (PT)	PT Description	Specialty	Specialty Description
61	School-Based Vision and Hearing Screener	SA	School-Based Vision and Hearing Screener
63	Target Case Management Group	C6	Case Management Ages 00-22
63	Target Case Management Group	СМ	TCM DDS Group
65	Targeted Case Management	C5	Case Management Ages 60 and Older
65	Targeted Case Management	C7	Case Management Ages 21-59 with Disability
67	ACS Waiver	H7	Supported Living
71	ACS Waiver	H9	Consultation Services
72	ACS Waiver	HA	Environmental Modifications-Adaptive Equipment
73	ACS Waiver	HB	Specialized Medical Supplies
74	ACS Waiver	HC	Case Management Services
75	ACS Waiver	HE	Supported Employment
76	ACS Waiver	C6	Case Management Ages 00-21
78	Developmental Rehabilitation Services	DR	Developmental Rehabilitation Services
82	ACS Waiver	HF	Organized Healthcare Delivery System
84	Alternatives for Adults with Physical Disabilities	A8	Environmental Adaptations
85	ACS Waiver	HG	Crisis Intervention
87	Independent Choices	IC	Independent Choice
88	Division of Youth Services	CN	DYS-TCM Group
88	Division of Youth Services Group	RJ	DCFS Rehab Services
88	Division of Youth Services Group	RL	DYS Rehab Services
89	Division of Youth Services	CO	DYS-TCM Performing
89	Division of Youth Services (Performing)	RJ	DCFS Rehab Services
89	Division of Youth Services (Performing)	RL	DYS Rehab Services
91	School-Based Mental Health	VV	School Based Mental Health
92	AR Kids	SO	School District Outreach
94	Living Choices	AH	Assisted Living Agency
94	Living Choices	AL	Assisted Living Facility
94	Living Choices	AP	Assisted Living Pharmacist Consultant
97	AR Choices	AC	Agency Attendant Care
97	AR Choices	AT	Traditional Agency Attendant Care
97	AR Choices	VS	In Home Care
98	AR Choices	CC	Counseling Case Management